



VistAWeb

Version 16.1.8.2

WEBV*1*34

User Manual

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Preface

VistAWeb Version 16.1.8.2 (WEBV*1*34) incorporates changes which include the ability to display Consolidated Clinical Document Architecture (C-CDA) structured documents

The following enhancements will enable the display of C-CDA documents and enhance the overall usability of VistAWeb in relation to eHealth Exchange:

- C-CDA Receive and Display Structured Notes feature will modify the software to receive the following C-CDA structured documents from external partners: Progress Note, Continuity of Care, Discharge Summaries, Consultation Note, History and Physicals Note, Operative Note, Procedure Note, and Unstructured Document. The VistaWeb GUI will display the same structured documents by Logical Observation Identifiers Names and Codes (LOINC).
- The View C-CDA in VistaWeb feature will provide the ability to create a fully populated test instance of a C-CDA. Necessary changes will be implemented in the current VA GUI software to allow VA viewing of partner C-CDA. Encounter data will include Inpatient Encounters and Immunization data will be processed in codes for vaccine administered. Transition of care/referral summaries will have the ability to be received and viewed according to the formatting in the American Society for Testing and Materials (ASTM) E2360 Standard Specification for Continuity of Care Record and Standard. The system will electronically receive and incorporate clinical laboratory tests and values/results in accordance with the LOINC.

Introduction to VistAWeb

Veterans Health Information Systems and Technology Architecture (VistA) VistAWeb is a read-only intranet web application. It delivers to the client a uniform, well-defined suite of objects from the medical domain, objects such as patient, provider, progress note, lab results, prescriptions, allergies, and imaging. Designated as the preferred method for VA clinicians to view both Department of Defense (DoD) and remote data from other Department of Veteran's Affairs Medical Centers (VAMCs) due to its ease of use, flexibility, and reliability. VistAWeb is a key component of the VA's participation in the HealthWay eHealth Exchange, as it is the only application which supports the display of clinical data received from VA eHealth Exchange partners.

It is used to review remote patient information found in VistA, Bidirectional Health Information Exchange (BHIE) system, the Health Data Repository II (HDR II) databases, the eHealth Exchange, and all local VAMCs.

To a large extent, VistAWeb mirrors the reports behavior of the Computerized Patient Record System (CPRS) and Remote Data View (RDV). However, by permitting a more robust and timely retrieval of remote-site patient data, VistAWeb is also an enhancement to CPRS/RDV.

There are three ways to access VistAWeb. VistAWeb can be made available by adding it to the CPRS Tools Menu, and it can be selected by choosing the VistAWeb button on the CPRS toolbar. These two methods are referred to as CPRS-spawned versions of VistAWeb. They are compliant with the Health Level 7 (HL7) Clinical Context Object Workgroup (CCOW) standards and therefore maintain context with the patient selected in CPRS. As a third option, VistAWeb can be accessed in a standalone mode by entering the uniform resource locator (URL) link (**REDACTED**) in the Internet Explorer (IE) address bar. These methods of accessing VistAWeb are discussed in more detail in later sections of this manual.

Note: *Some links found in this user manual go to sites or pages found on the VA intranet. These sites or pages are not accessible from outside the VA network.*

The standalone version of VistAWeb is connected to neither CPRS nor the clinical context management application. Standalone VistAWeb serves an important function for users who have been granted special access to multiple sites, such as for National Programs, Veterans Administration (VA) researchers, and others. VistAWeb was also made available more broadly, though temporarily, to assist clinical staff with the retrieval of patient information from the sites affected by damage caused by hurricane Katrina.

To fully appreciate the data that VistAWeb presents to the user, it is important to know something about the HDR as one of the sources of that data. Please read the following section to familiarize the user with the purpose of the HDR and some of the terms and acronyms that describe it, as these will be used in subsequent sections of this manual.

Brief Overview of eHealth Exchange

The eHealth Exchange provides a secure, nationwide, interoperable health information infrastructure that will connect providers, consumers, and others involved in supporting health and healthcare. This critical part of the national health IT agenda will enable health information to follow the consumer, be available for clinical decision making, and support appropriate use of healthcare information beyond direct patient care so as to improve health. The eHealth Exchange, which is a network of networks, securely connects consumers, providers and others who use health-related data.

Note: A double dagger (‡) is displayed next to all document domains/reports that could contain eHealth Exchange data. This data is received from Non-VA partners participating in the eHealth Exchange with VA.

Brief Overview of the HDR

The purpose of the HDR project is to establish a clinical data repository. A clinical data repository is a collection of clinical information that resides on one or more independent platforms and is used by clinicians and other personnel to facilitate longitudinal patient-centric care. The data in the HDR will be retrieved from existing VistA files and organized in a format that supports the delivery of care, regardless of the patient's current location or where the patient has been treated in the past. Additionally, the HDR serves several purposes.

- Serves as a primary source for the legal health record (LHR)
- Enables the generation of clinical reports based on the entire clinical holdings of Veterans Health Administration (VHA)
- Supports standardization between and among Department of Defense (DoD), Indian Health Services (IHS), and other government and private industry clinical databases through the creation of a standards-based database.

For more information, see HDR documentation on the VistA Documentation Library (VDL).

Brief Overview of AWIV

The Advanced Windows Imaging Viewer (AWIV) is an ActiveX component created by VistA Imaging for the purpose of displaying medical images from a variety of sources. The AWIV uses the same components inside the VistA Imaging Clinical Display application, which is an FDA regulated medical device. Please reference patch MAG*3*124 in FORUM for workstation installation instructions for the AWIV Viewer.

VistAWeb provides information to the AWIV component to indicate what is to be displayed. The AWIV communicates with the Centralized VistA Imaging Exchange (CVIX) service for VA and DoD data.

The AWIV supports displaying artifacts provided by the VA and, in the future, will display artifacts provided by the DoD. In this context, an artifact is an image or image-like object stored by VistA Imaging or by DoD HAIMS. Artifacts include images of various types as well as scanned documents. Note that VistA Imaging EKG images are not accessible because they are stored on third-party servers.

When viewing reports and notes from VA sites, VistAWeb can determine if there are images associated using the same remote procedure calls (RPC) CPRS has already defined. When VistAWeb determines a note or report has images associated, VistAWeb should indicate to the user that images are available through an icon.

Known Constraints

There are known constraints in the installation and use of VistAWeb.

1. VistAWeb is a CCOW-compliant application. If VistAWeb is launched from CPRS on a computer without the CCOW-compliant Vergence Desktop Components installed, a message will be displayed saying “VistAWeb is CCOW compliant and has been unsuccessful in locating a CCOW vault. Please contact your local IRM for assistance.” VistAWeb will then exit.

Note: *Information Resources Management (IRM) staff should refer to the VistAWeb Informational Patch OR*3*230 for guidance on where to find information and who to talk to about installation and configuration of the CCOW Desktop Components. Additional CCOW information can be found at [REDACTED](#)*

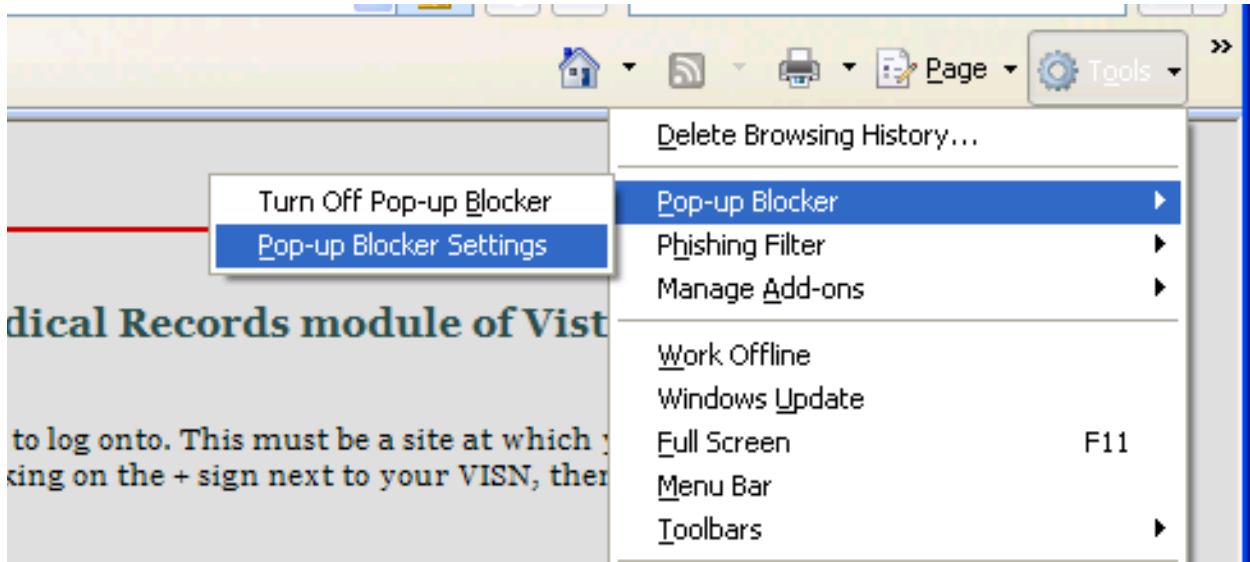
Note: *As of March 2015, The current Sentillion CCOW Desktop Components can be found here: [REDACTED](#).*

2. Access to VistAWeb in a test account should **not** be made available to general users. Access **should** be made available in a production account. Accessing VistAWeb in test accounts will require the user to enter the IP address and port number of the test system each time a patient selection is performed. Access to VistAWeb in a test account should be restricted to IRM staff for limited testing purposes only.

Note: *Using VistAWeb to look up “test patients” may produce confusing results. Normally, no two sites ever have the same test patients. Using a test patient in a production account may seem to work satisfactorily, but can cause VistAWeb to error out as it attempts to reconcile a test patient at multiple sites.*

3. VistAWeb uses pop-ups. Field facilities that have chosen to turn off pop-ups on desktops will need to allow them for VistAWeb. In IE in the *Tools* menu pull-down, select *Pop-up Blocker>Pop-up Blocker Settings*, type the VistAWeb URL in the *Address of the Web site to allow:* box, and click the *Add* button.
4. VistAWeb is only supported with use of IE version 7 or higher.

Figure 1: Setting IE to Allow Pop-ups



Note: Some links found in this user manual go to sites or pages found on the VA intranet. These sites or pages are not accessible from outside the VA network.

What's New with VistAWeb Release 16.1?

If you are already familiar with VistAWeb, read this section of the manual to find out what is new in this release. If you are not familiar with VistAWeb, you may want to start with [Accessing VistAWeb](#) and then come back to this section to find out what's new.

VistAWeb Version 16.1 (WEBV*1*26) incorporates changes to comply with section 508 standards and regulations. VistAWeb is removing the detailed display column on the grid domain reports. Columns have been rearranged so that now the first column in the grid will be the column that specifies the type of data from a clinician's perspective, e.g. Medication Name, Title of Note, Lab Test name, etc. The items in this column will have a hyperlink added to them that will provide detailed display information to the user. A few reports where this change can be seen are the Consults and Procedures, Chem & Hematology, Microbiology, Current Orders, All Outpatient Pharmacy, Progress Notes, and Radiology Reports.

VistAWeb Version 16.1.5 (WEBV*1*31) incorporates multiple changes needed for the proper display of VLER data on VistAWeb pages for: 'Immunization Name' data, Source data for Allergy and Problem List as well as Provider Name data in the Problem List section.

VistAWeb Version 16.1.6 (WEBV*1*32) incorporates changes which corrects a copy to clipboard problem with allergies, updates acronyms as suggested by the VLER team for display of NON-VA data, corrects several displays issues with C32 and stylesheet corrections. In addition, this patch also makes several updates to this VistAWeb User Manual.

VistAWeb Version 16.1.8.2 (WEBV*1*34) incorporates changes which include the display of C-CDA structured documents and displays C-CDA unstructured documents. Provides support for additional mime types for C-CDA unstructured document and Aggregated data from C-CDA document.

Accessing VistAWeb

There are three ways to access patient data using VistAWeb.

1. VistAWeb can be made available by adding it to the CPRS Tools Menu.
2. CPRS users also have direct "one-click" access to VistaWeb from a VistaWeb button located on the CPRS Toolbar.

These two methods are referred to as CPRS-spawned versions of VistAWeb. They are compliant with the Clinical Context Object Workgroup (CCOW) standards and, therefore, maintain context with the patient selected in CPRS.

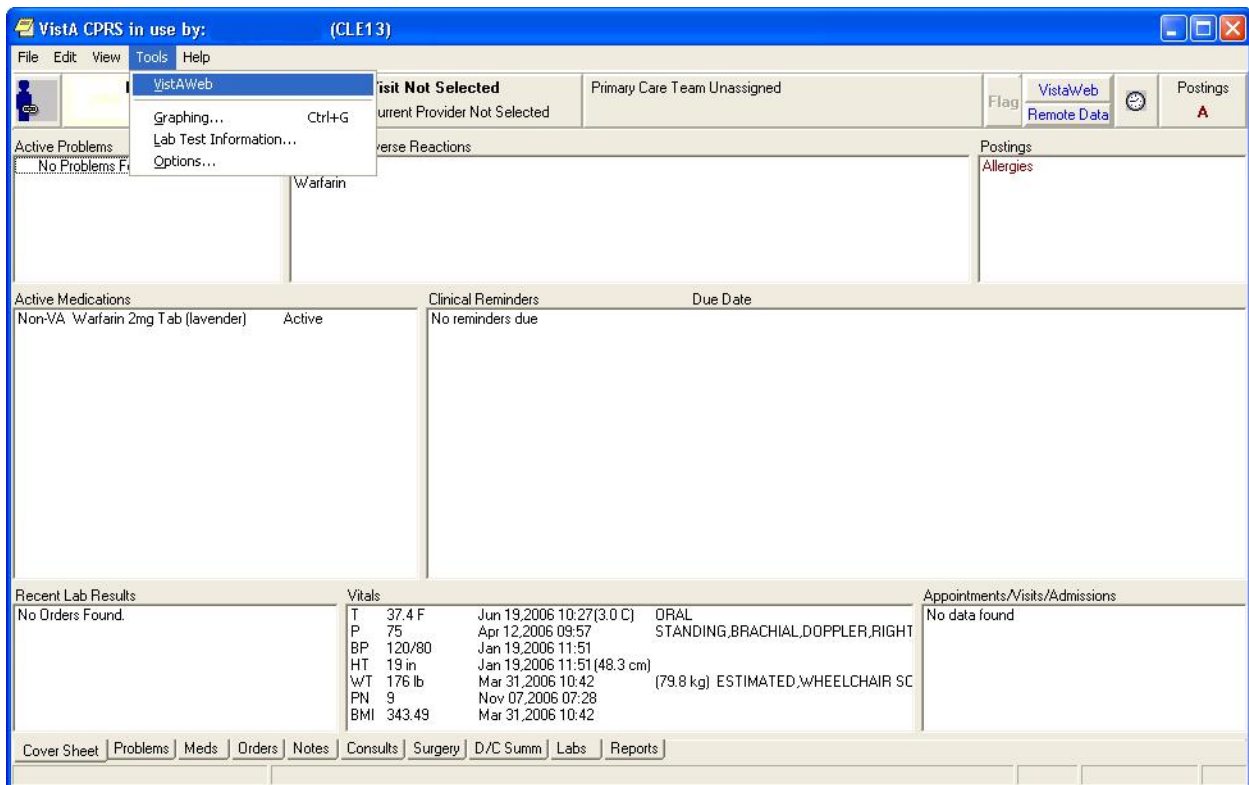
3. As a third option, VistAWeb can be accessed in a standalone mode by entering the URL link (**REDACTED**) in the IE address bar.

These methods of accessing VistAWeb are discussed in more detail in later sections of this manual.

VistAWeb under the CPRS Tools Menu

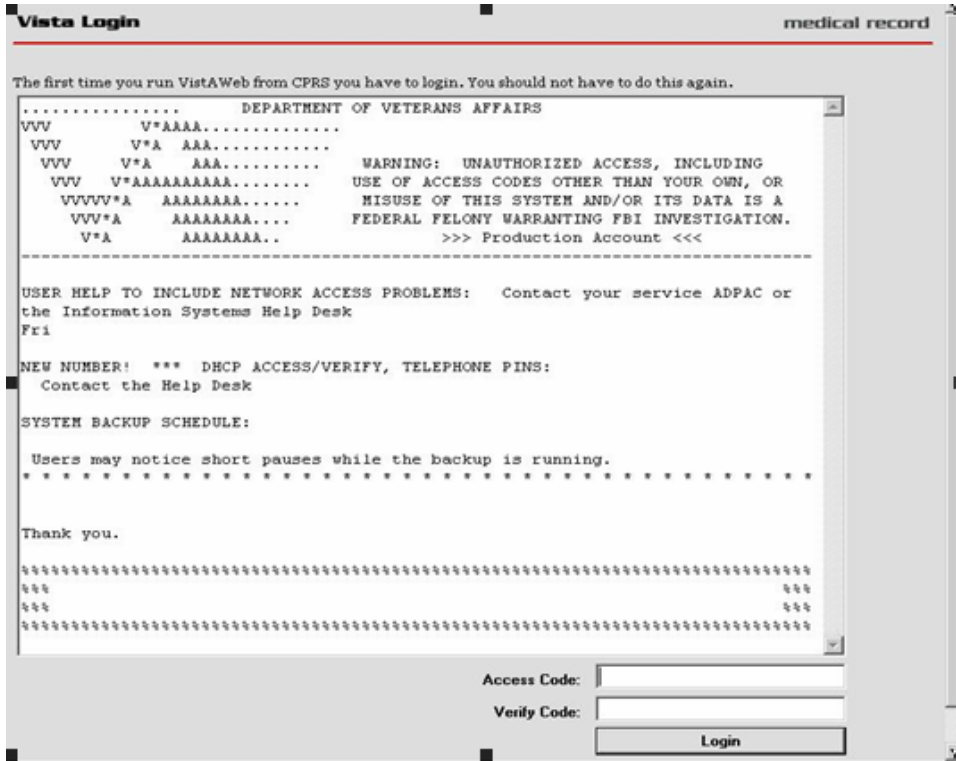
To access VistAWeb, you must first log into CPRS using your access/verify codes, select a patient, and select VistAWeb from the Tools menu. VistAWeb will maintain context with the selected patient and retrieve data for that patient from all sites where the patient has records. When you select a different patient from the CPRS File menu, VistAWeb will maintain context with the new selection. This is described in [Patient Context in CPRS-Spawed VistAWeb](#).

Figure 2: VistAWeb Access from the CPRS Tools Menu



The first time you launch VistAWeb from CPRS, a login (using the same access and verify codes as for CPRS) is required. Subsequent uses of VistAWeb do not require a second login.

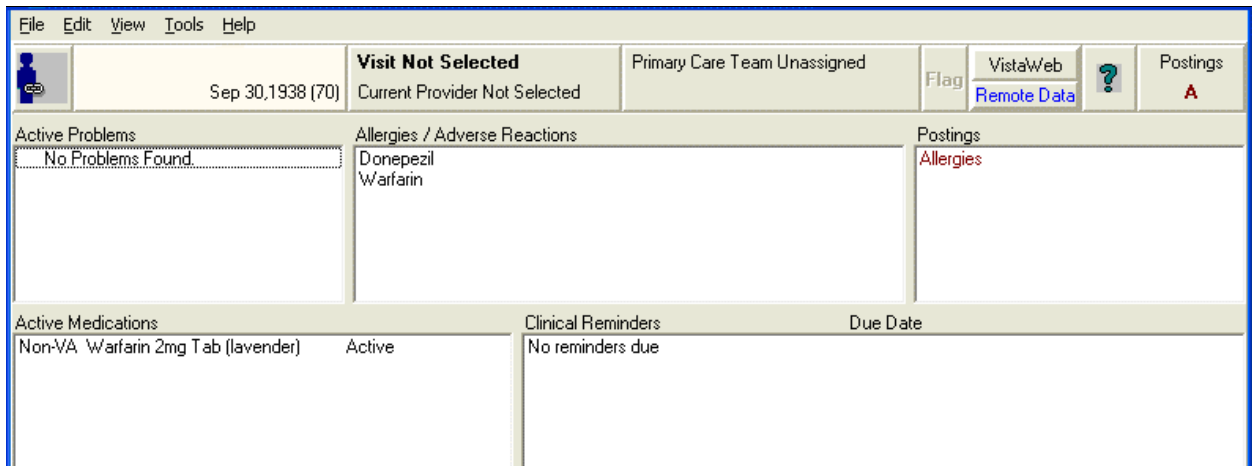
Figure 3: Initial Launch Using CPRS Access and Verify Codes



Access to VistAWeb from CPRS VistaWeb Button

A VistAWeb button is available next to the Remote Data Available button; when you click this button, CPRS will launch VistAWeb for you. Additionally, when VistAWeb is launched by CPRS, patient context is maintained. This means that VistAWeb will change patients whenever you do a patient selection in CPRS.

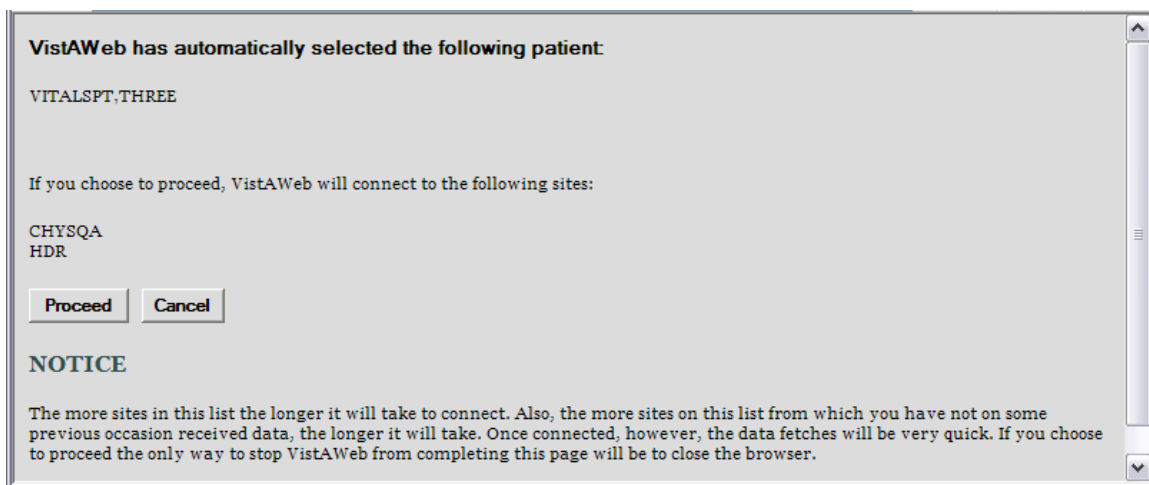
Figure 4: VistAWeb from the VistaWeb Button



Patient Context in CPRS-Spawned VistAWeb

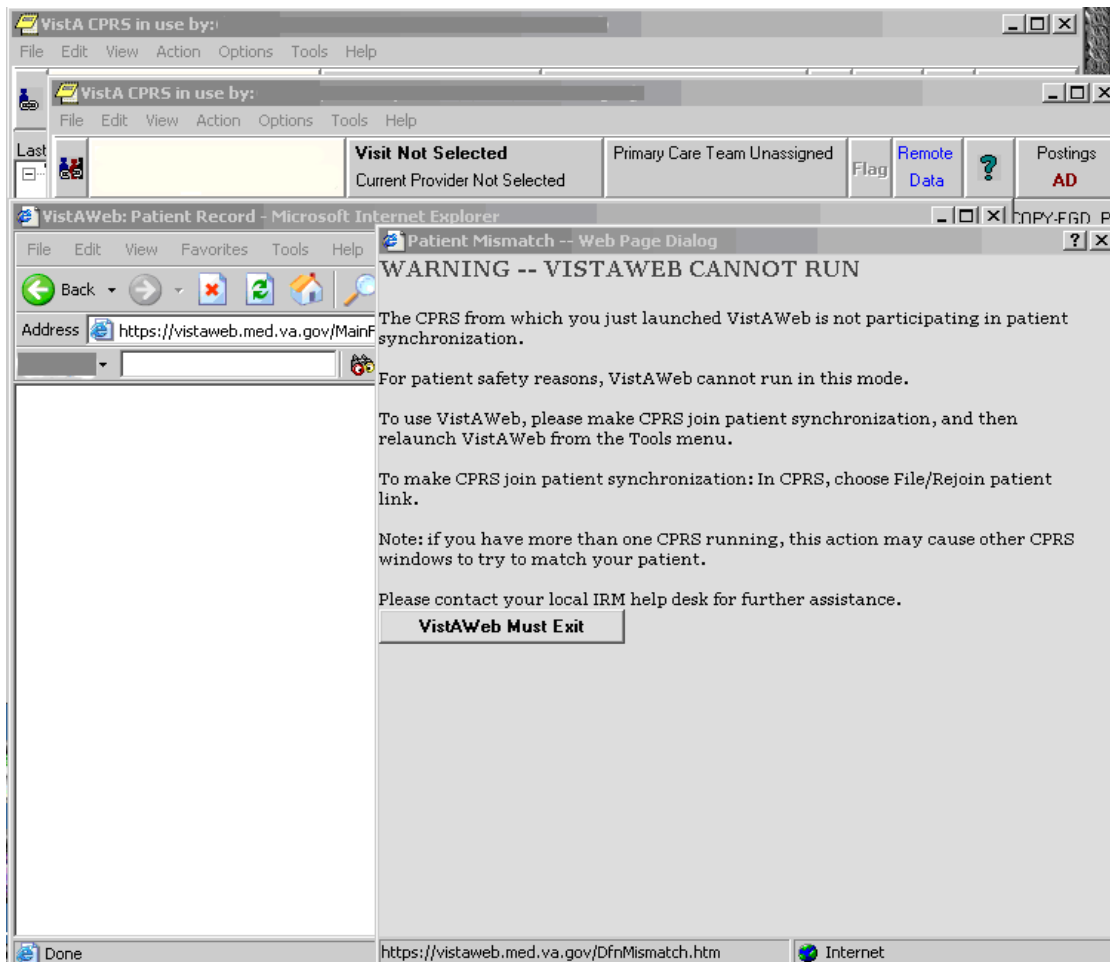
VistAWeb is a CCOW-compliant application and, therefore, maintains context with the patient who was selected in CPRS. When you spawn VistAWeb from CPRS, VistAWeb presents you with a screen that confirms the patient identity, the sites where there is patient data, and gives you the option to proceed or cancel. If you select Proceed, VistAWeb displays the Sites & Notices screen for the new patient along with a menu of reports that are available in VistAWeb. If you select Cancel, VistAWeb forces you to close the session. When using VistAWeb through the CPRS Tools menu, you will not be able to select a new patient from within the VistAWeb application; however, you can return to CPRS to select a new patient and the VistAWeb connection process will begin again.

Figure 5: VistAWeb Maintains Context with the CPRS Patient



To avoid potential patient safety problems, VistAWeb will not open from a CPRS session that is not in context. This can occur when multiple CPRS sessions are open on the desktop. In the following example, two CPRS sessions are open. One session is in context, as indicated by the icon with a blue person and a connected chain link. The other CPRS session is not participating in patient context, as indicated by the icon with red and blue people and a broken chain. The VistAWeb warning message is the result of attempting to launch VistAWeb from the CPRS session that is not in context. VistAWeb forces the user to exit the attempted connection.

Figure 6: Two CPRS Sessions: One in Context, One Not in Context



VistAWeb Directly from Internet Explorer (IE) (“Standalone” VistAWeb)

VistAWeb can also be accessed directly from IE by entering **REDACTED** in the IE address bar. Users must select their local site for login, then log in using their CPRS/VistA access and verify code pair.

Note: Some links found in this user manual go to sites or pages found on the VA intranet. These sites or pages are not accessible from outside the VA network.

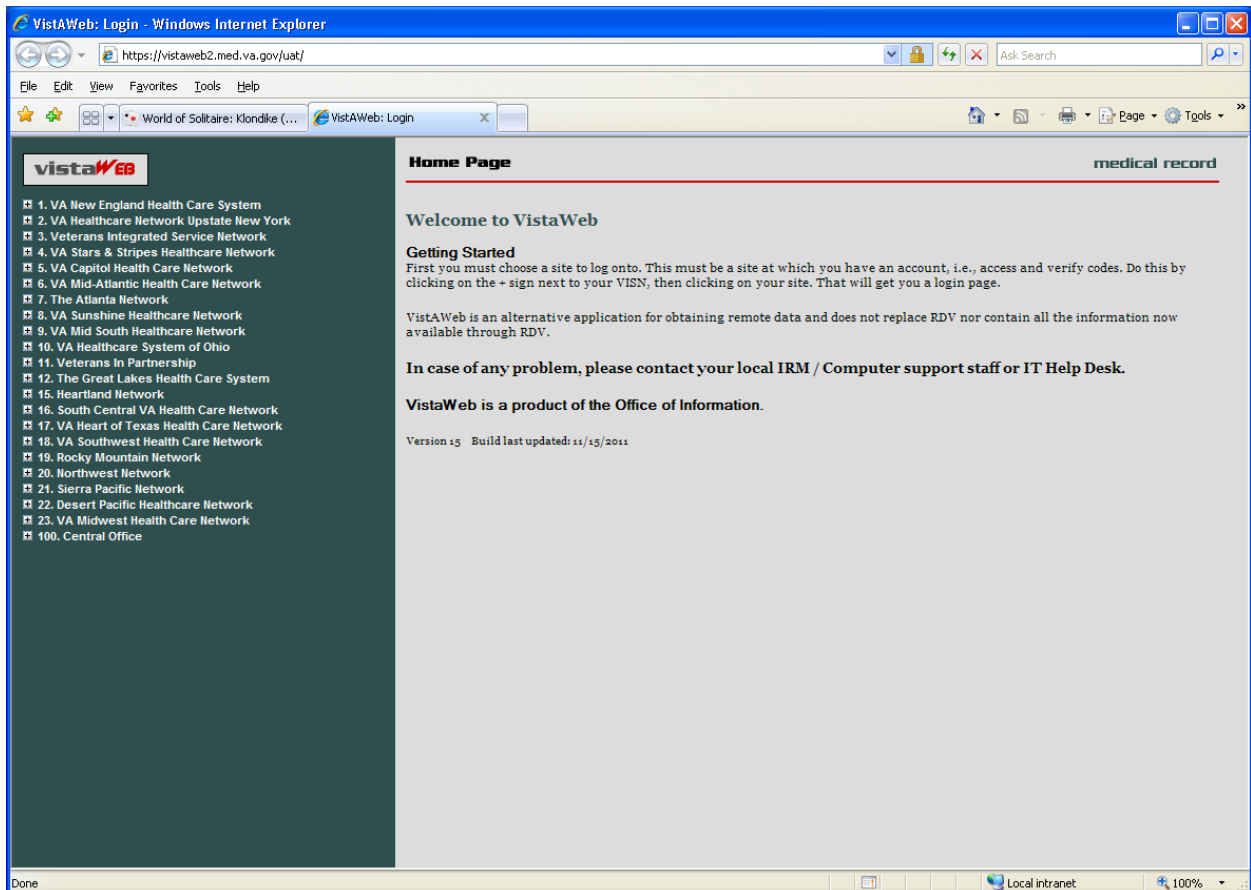
Once you have made your login site selection, you may want to save the URL in the IE “Favorites” menu for future ease of access.

Note: Users who regularly only use the standalone version of VistAWeb will be required to update their verify codes periodically, just as they would if logging into CPRS. When this happens, the login screen will display the message, “User must enter a new Verify code at this time”.

By default, users will be able to look up only those patients who are in their local VistA site. Data for those patients will be retrieved from all other sites the patients have visited. Some users (researchers or referral coordinators, for example) may need to look up patients who are not in the local VistA. VistAWeb requires that these users be granted Special User access. [Special Users](#) and [Requesting Special User Access](#) are discussed in more detail later in this manual

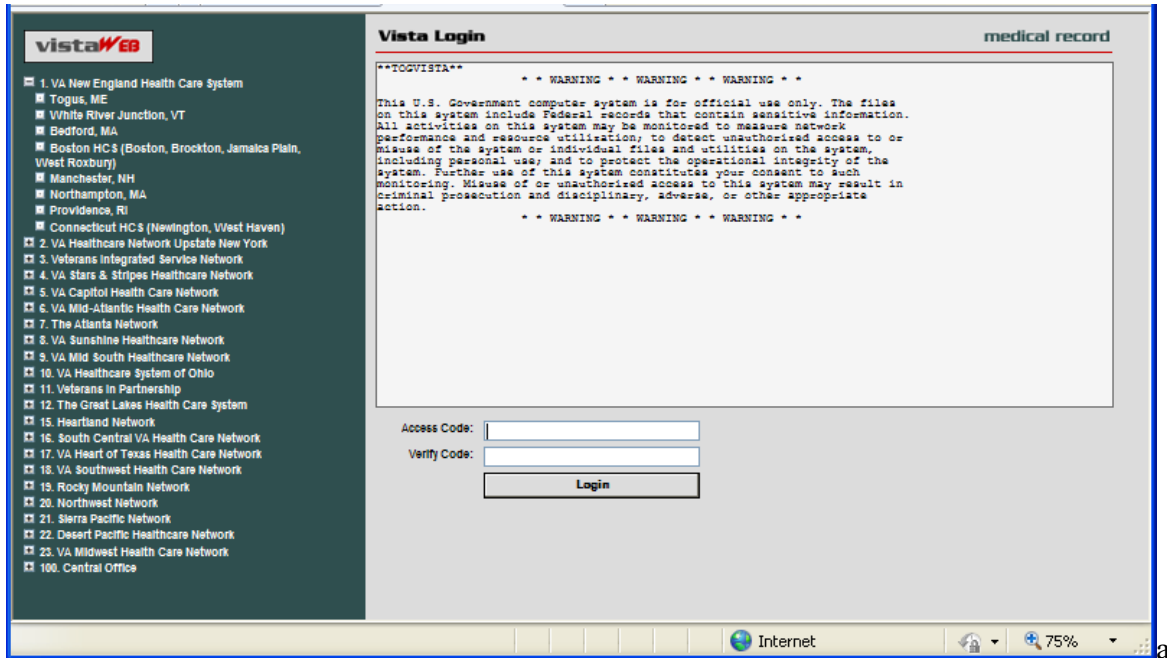
Note: An exception to the VistA/CPRS account requirement is made for properly credentialed Special Users, who do not have clinical VistA accounts. For those users, access can be obtained by logging in through the “100. Central Office Claims System,” as shown at the bottom of the sites menu in the figure below.

Figure 7: VistAWeb Home Page



To log into VistAWeb, select the site where you have an account from the list of sites on the left side of the page. The VistA login page for that site will appear. You should enter your access/verify codes the same way you would enter them in CPRS.

Figure 8: VistAWeb – VistA Site-Login Screen

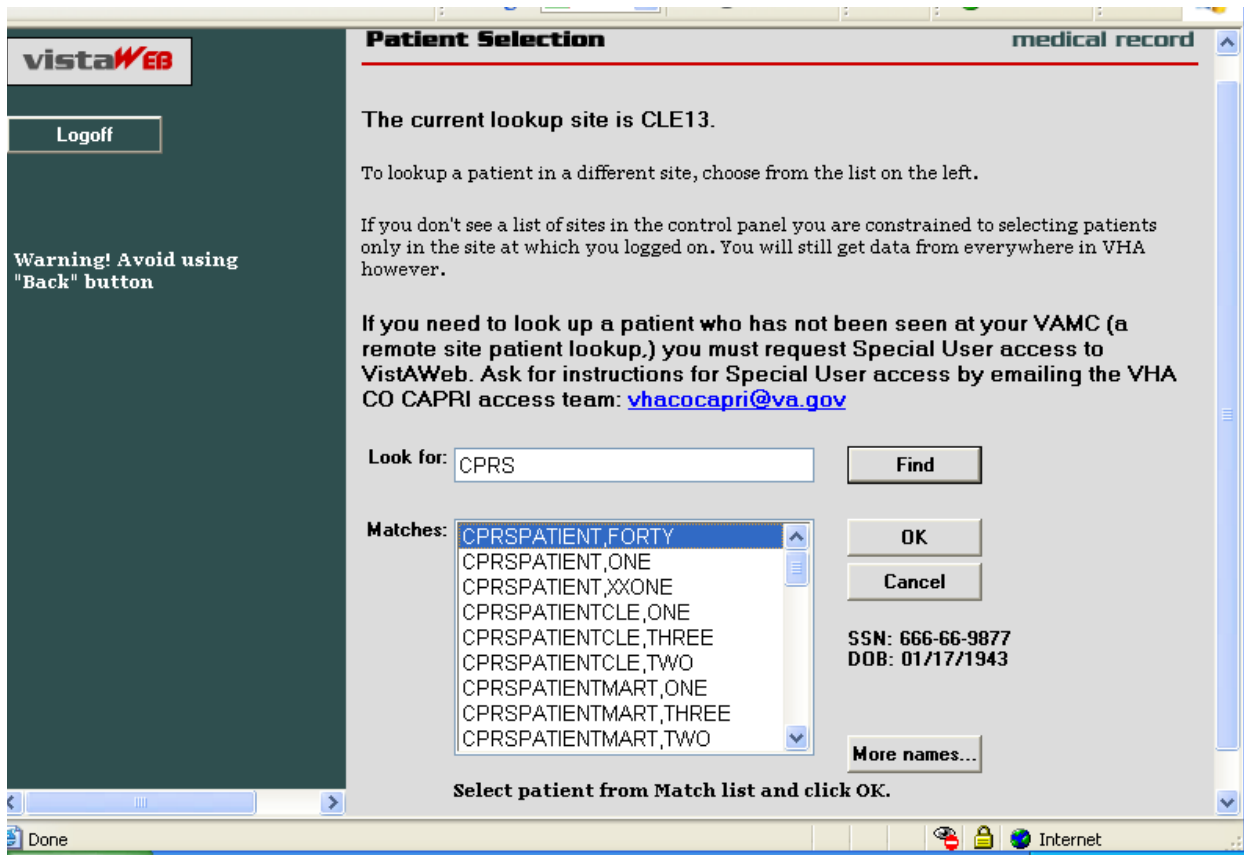


After you log into VistAWeb, the Patient Selection screen appears. If you have Special User access, a list of sites for patient selection will be present on the left side of the screen. Special Users may select a site other than their login site for patient selection. All other users will be limited to patient selection from their login site only. **In either case, data for the selected patient will be automatically retrieved from all sites where that patient has data.**

Patient Selection

In standalone VistAWeb, patient selection can be performed much the same way as in CPRS. You can enter the patient's name, part of the patient's last name, social security number, or the five-digit identifier (first letter of patient's last name plus the last four digits of the patient's social security number). After entering one of these identifiers, click your mouse button on the FIND button or press the Enter key on the keyboard. A list of potential matching patients appears in the box below. If there are more names available than shown in the scroll box, click the "More names..." button to see them. Once you have identified the desired patient, click your mouse button on the patient name, and click the mouse again on the OK button or press the Enter key on the keyboard.

Figure 9: Using the Patient Selection Screen to “Find” a Patient



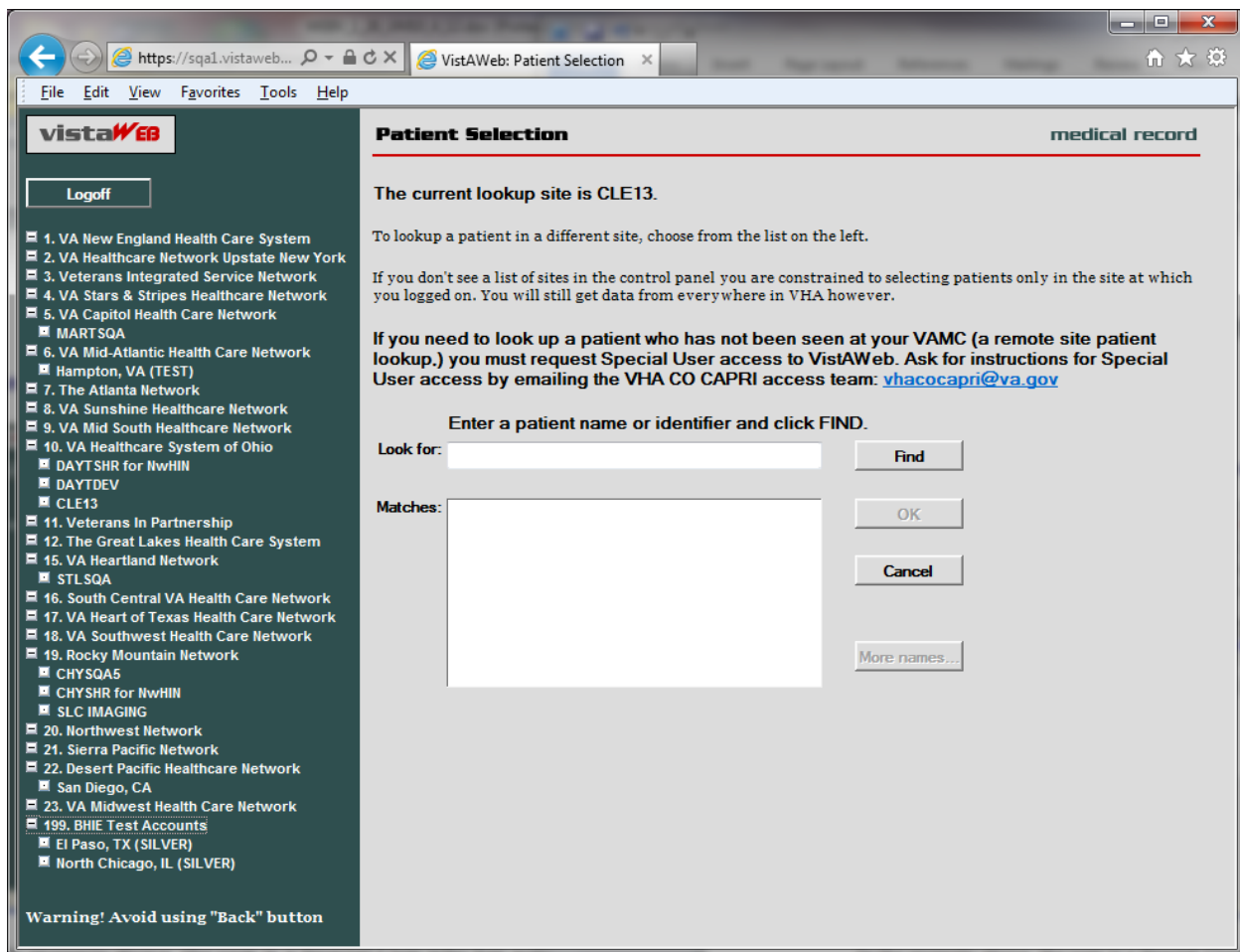
In the example above, the user does not have Special User access, so patient selection is limited to the local site where the user first logged in. There is no list of alternate patient selection sites on the left side of the VistAWeb Patient Selection screen.

Special Users

By default, users of VistAWeb are permitted to select patients that are in the local VistA system where the user logs in. VistAWeb will retrieve data for these patients from all sites where the patients have records. Some users (researchers or referral coordinators, for example) may need to select patients that are not in the local VistA. These users will require Special User access, which can be granted for one site in addition to the login site, several sites, an entire Veteran’s Integrated Service Network (VISN), or all sites nationally.

After logging in to VistAWeb, Special Users will see the Patient Selection screen, with a list of sites accessible for patient selection.

Figure 10: Special User Multiple Site and Patient Selection



In the example above, the user is a Special User who has access to perform patient selection at several sites, which are listed on the left side of the screen. To select a patient from a site other than the login site, you must first click on the desired site on the left side of the screen and then perform patient selection.

Requesting Special User Access

Requests for Special User access fall into one of three categories.

- National Programs requiring “Special User” access, such as Blind Rehab, Transplant, War Related Illnesses, and so forth
- VA Researchers requiring “Special User” access for the purpose of approved research projects
- All Others, for example, local users, requiring “Special User” access to multiple VA sites for the purpose of clinical opinions, referral coordination, and so forth.

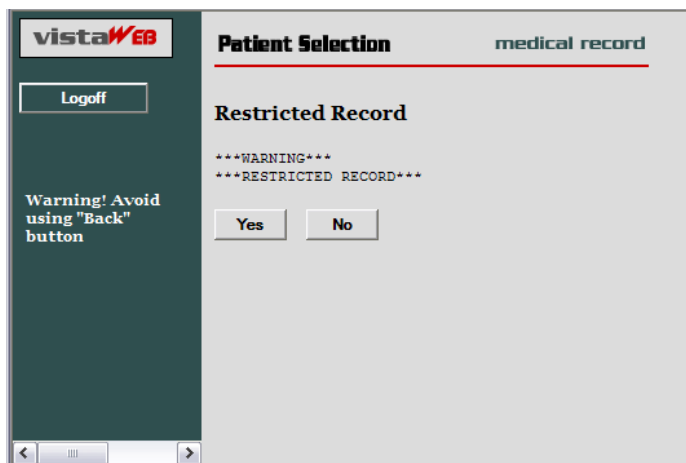
All users requesting Special User access will be required to verify completion of the annual VHA Privacy Policy Training and VA Information Security Awareness Course and to sign the Rules of Behavior (ROB) prior to approval of the request.

Individuals requesting Special User access to VistAWeb should request instructions by visiting this [website](#): **REDACTED**.

Sensitive Patient Warning

Similar to CPRS, standalone VistAWeb displays a warning to you if you select a patient who has been flagged or designated as a Sensitive Patient. VistAWeb differs from CPRS in that it will display the warning message to you if the patient is sensitive in ANY of the sites from where the sensitive data will be retrieved. If you elect to proceed, notification will be sent to the Information Security Officer (ISO) at any and all sites where the patient data is marked sensitive. Both standalone and CPRS-spawned versions of VistAWeb also display the sensitivity status on the Sites & Notices screen.

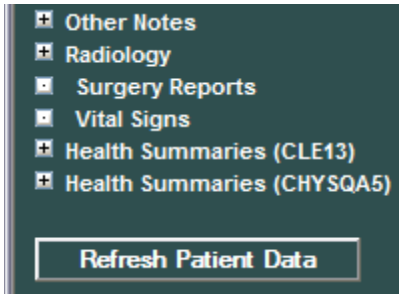
Figure 11: Restricted Record Warning



Refresh Patient Data

A *Refresh Patient Data* button has been added to VistAWeb that allows you to update reports without having to log off and back into a VistAWeb session when new data is added to the patient's record in CPRS. Clicking on the Refresh Patient Data button returns you to the Sites & Notices screen from which you can navigate back to the appropriate report to see the new data.

Figure 12: Refresh Patient Data Button



Category I Patient Record Flags

Category I Patient Record Flags are now displayed in standalone sessions of VistAWeb before the user is permitted to “Continue to Patient Record”. The Category I flags are also displayed in both standalone and spawned versions of VistAWeb on the Sites & Notices screen below.

Figure 13: Example Category I Patient Record Flag in Standalone VistAWeb

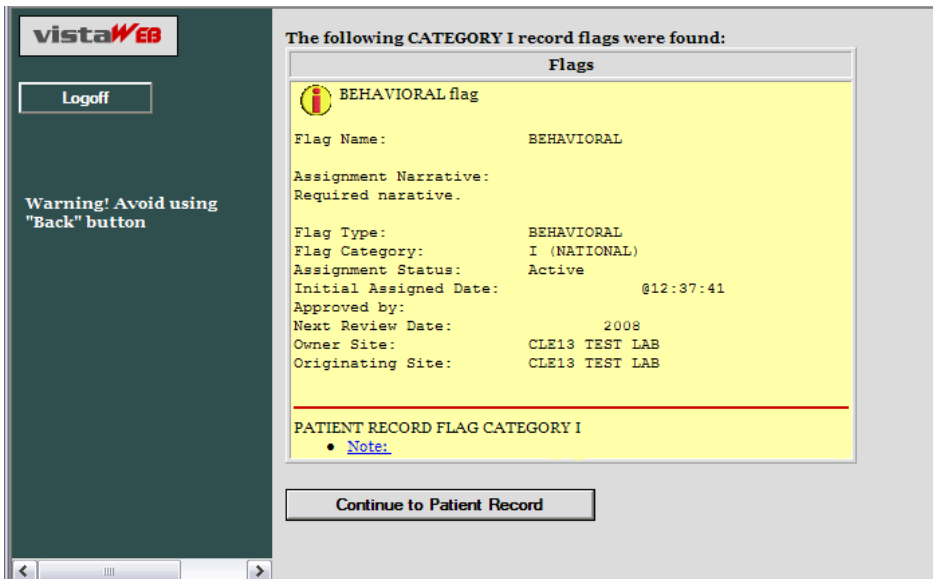



Figure 14: Example Category I Patient Record Flag on the Sites & Notices Screen

The following CATEGORY I record flags were found:

Name	Notes
 BEHAVIORAL flag	PATIENT RECORD FLAG CATEGORY I <ul style="list-style-type: none"> Note:

Data for this patient will be acquired from the following sites:

Site Name	Patient Name	SSN	DOB
CLE13 (CLE13)			
HDR (HDR)			
CHYSQA5 (CHYSQA5)			

Data for this patient cannot be fetched from the following sites:

Site Name	Message
MARTSQA (MARTSQA)	remote login failed
STLSQA (STLSQA)	remote login failed

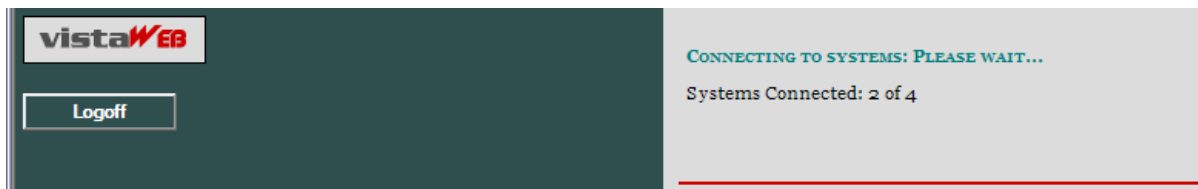
Using VistAWeb

After the Patient Selection page, all VistAWeb functionality for a Special User is the same as for other users, except that there is no clinical context management as described earlier in [Patient Context in CPRS-Spawned VistAWeb](#).

Automatic Retrieval of Data from Multiple Sites

When the patient is first selected, VistAWeb determines how many sites the patient has visited and displays a message similar to the following to let you know that VistAWeb is establishing connections to those systems.

Figure 15: Please Wait...Message



The Sites and Notices page is then displayed, which includes a list of sites where data for that patient will be retrieved. In the following example, VistAWeb will attempt to retrieve data from all available sites listed in the patient's treating facility list. In this example, MARTSQA, STLSQA, and DAYTSHR are three examples of sites in the patient's treating facility list to which VistAWeb has been able to make a connection. If VistAWeb cannot connect to some of the systems (sites) where the patient has been seen, that information is supplied in table format below the sites that are connected. The Last Seen field in the tables is only populated when the Master Patient Index (MPI) has that information to report.

On the left side of the screen, there is a list of reports for which VistAWeb is able to retrieve patient data. It is important to note that just because a site is listed doesn't mean there will be data available from that site in all domains. For more detail regarding the type of reports, refer to the [Expanded List of All Reports](#) section of this manual.

Figure 16: Patient Data Available at Multiple Sites

VistaWeb Sites & Notices CHDRZZTESTPATIENT.CHDRTWO (666-00-0002) medical record

Logoff Patient Selection

Site Connection Summary (03/13/2014 14:01)

Data for this patient can be retrieved from the following sites:

Site Name	Patient Name	SSN	DOB	Deceased Date	Sensitivity	Last Seen
DoD (DOD)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961			
MedVirginia - HIE (Non-VA)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961			
Department of Defense (Non-VA)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961			
Inland Northwest Health Services (INHS) - HIE (Non-VA)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961			
Multicare Health System (Non-VA)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961			
Idaho Health Data Exchange (HDE) (Non-VA)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961			
Pensacola Health Information Exchange (HIE) (Non-VA)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961			
San Diego Beacon UCSD - MIRTH (Non-VA)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961			
Walgreens (Non-VA)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961			
UC Davis Health System (Non-VA)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961			
Hawaii Pacific Health Information Exchange (Non-VA)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961			
Honolulu, HI (HON)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961		Y	
Anchorage, AK (ANC)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961		Y	
North Chicago, IL (NCHI)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961		Y	11/15/2010
New Jersey HCS (NJCS)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961		Y	08/27/2010
Hampton, VA (HAM)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961		Y	06/14/2010
Little Rock, AR (LIT)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961		Y	05/10/2013
Minneapolis, MN (MIN)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961		Y	05/15/2013
Richmond, VA (RIC)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961		Y	05/09/2013
Heartland East (STL)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961		Y	05/09/2013
San Diego, CA (SDC)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961		Y	08/06/2013
Spokane, WA (SPO)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961		Y	
South Texas HCS (STX)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961		Y	05/15/2013
Orlando, FL (ORL)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961		Y	
El Paso, TX (ELP)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961		Y	05/03/2010
HDR (HDR)	CHDRZZTESTPATIENT.CHDRTWO	666000002	03/03/1961			

Data for this patient cannot be retrieved from the sites shown below due to network or remote system problems. To attempt to reach those systems again, please see the message field below and/or re-select the patient.

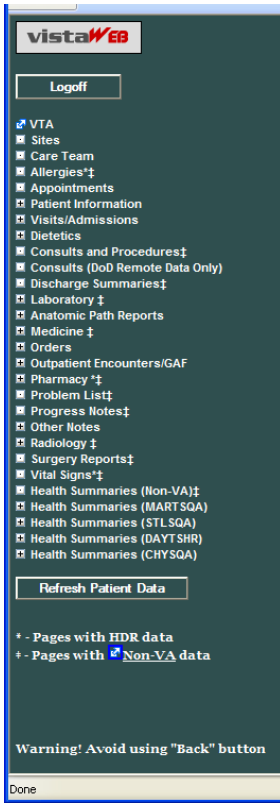
Site Name	Message	Last Seen

Refresh Patient Data

* - Pages with HDR data
 † - Pages with BHIE data (Dept. of Defense)
 ‡ - Pages with Non-VA data
 Warning! Avoid using "Back" button

Reports/"domains" that have data from non-VAMCs are indicated with the appropriate icon from the legend; these reports/domains show the data in an "aggregated view", which means that all sources provide that data for the specific report/domain.

Figure 17: Aggregated View



Expanded List of All Reports

Entries preceded by a plus sign (+) can be expanded to show sub-reports by clicking the mouse on the plus sign (+). Expanded lists can be collapsed by clicking the mouse on the minus sign (-). Figure 18 is a fully expanded list of reports retrieved by VistAWeb. In addition to National and local VistA health summaries, VISN level health summaries are available. Consequently, the list of available summaries can be quite long and will vary depending on the user's login site. The list of health summaries is similar to the Health Summary list available from the Reports tab in CPRS.

Figure 18: Expanded List of VistAWeb Reports



Report Examples

There are over 80 different reports available in VistAWeb. A representative sampling is presented here to demonstrate the different types of reports and formatting options.

Text Reports

Text reports are the most basic of all reports available to users. Text is displayed in a non-interactive mode and is very similar to the corresponding reports found in CPRS from the Reports tab. One example of a Text report is the Patient Inquiry report. All site data is retrieved for the selected report, and the patient's data for the associated site is placed within the tab from where the data was retrieved. In the example below, there are four tabs: **MARTSQA**, **CLE13**, **STLSQA**, and **CHYSQA5**. To view data retrieved from **MARTSQA** for the selected patient, click the mouse on the **MARTSQA** tab. If any particular report is not available from a site where the patient has been seen, or if there is no data for a specified date range, then that site's report tab will return the statement "No Data Found".

Figure 19: Patient Inquiry Text Report

Text Report with Date Range Option

In report screens where date ranges can be typed, two digits can be entered for years, and dashes can be entered instead of slashes. VistAWeb will reformat to the dd/mm/yyyy format for the user, e.g., 12-11-05 will be reformatted to 12/11/2005 automatically. Typing in a date range clears any set radio button. Likewise, setting a radio button for one of the available time periods will clear dates previously typed into the From/To fields. The following composed sequence demonstrates that VistAWeb corrects the date format and then shows that clicking the All Results button clears the To/From date fields.

Figure 20: Date Range Entry and Radio Button Selection

When these reports are generated they are presented in table format, which typically can be sorted and can contain data from multiple sites, as with Allergies, Outpatient Pharmacy, and Vital Signs reports. In the following example report of Progress Notes or Chem & Hematology, the initial default query is performed automatically for a one-year time period, and the maximum number of items per site to return is defaulted to 50. You can type in a different number or click in the All Data box to retrieve all the items for the specified period. You can select a different time period or enter a From/To date range, and you can specify a different maximum number of items to return. Click the mouse on the Query button to run the report for the new time period or

date range and number of items. Note that, if the default number is deleted, either a minimum of 1 item must be requested or All Data must be checked for the specified time period. Otherwise, an error message is displayed.

Figure 21: Progress Notes Report showing AWIV column, Date Range, Author, Location, and Site

Progress Notes CPRSPATIENT.DUDE (333-55-7777) medical record

Patient Selection

Date Range: Today One Week Two Weeks One Month Two Months Six Months One Year Two Years All Dates

From: (mm/dd/yyyy) To: (mm/dd/yyyy) Query

Maximum Number/Site: 50 All Reports
 A maximum of 50 notes per site (plus associated addenda) will be displayed regardless of the number of notes available within the specified date range.
[Print Report](#)

Title	Icon	AWIV	Date	Author	Location	Site
MEDICAL SERVICE PROGRESS NOTE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	08/17/2004 10:26	WHATEVER,DENNIS L	LOWER PC	Columbus, OH
MEDICAL SERVICE PROGRESS NOTE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	08/17/2004 10:26	WHATEVER,DENNIS L	LOWER PC	Salt Lake City, UT
MEDICAL SERVICE PROGRESS NOTE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	08/17/2004 10:26	WHATEVER,DENNIS L	LOWER PC	Boston HCS
PHYSICAL THERAPY CONSULT REPORT	<input type="checkbox"/>	<input type="checkbox"/>	08/20/2004 09:10	WHATEVER,BYRON L	TELEPHONE PT/OT	Salt Lake City, UT
PHYSICAL THERAPY CONSULT REPORT	<input type="checkbox"/>	<input type="checkbox"/>	08/20/2004 09:10	WHATEVER,BYRON L	TELEPHONE PT/OT	Columbus, OH
PHYSICAL THERAPY CONSULT REPORT	<input type="checkbox"/>	<input type="checkbox"/>	08/20/2004 09:10	WHATEVER,BYRON L	TELEPHONE PT/OT	Boston HCS
Report E1	<input type="checkbox"/>	<input type="checkbox"/>	09/12/2012 17:26			NwHDN (alt1234)†
Report E2	<input type="checkbox"/>	<input type="checkbox"/>	09/12/2012 17:26			NwHDN (alt1234)†
Report E3	<input type="checkbox"/>	<input type="checkbox"/>	09/12/2012 17:26			NwHDN (alt1234)†

[Back to top](#)

Warning! Avoid using "Back" button

Figure 22: Progress Notes Report with Chem & Hematology

Chem & Hematology CLZWKHAA.ALUUN A (101-36-4841) medical record

Patient Selection

Date Range: Today One Week Two Weeks One Month Two Months Six Months One Year Two Years All Dates

From: (mm/dd/yyyy) To: (mm/dd/yyyy) Query

Maximum Number/Site: 50 All Reports
 A maximum of 50 reports per site will be displayed regardless of the number of reports available within the specified date range.
[Print Report](#)

Test Name	Icon	Date	Specimen	Result	Flag	Units	Ref Range	Comment	Site
CREATININE	<input type="checkbox"/>	10/24/2005 12:31	SERUM	1.3		mg/dL	0.6-1.3		CHEYENNE HDR SQA
UREA NITROGEN	<input type="checkbox"/>	10/24/2005 12:31	SERUM	41.2	H	mg/dL	7-18		CHEYENNE HDR SQA
SODIUM	<input type="checkbox"/>	10/24/2005 12:31	SERUM	131	L	meq/L	136-145		CHEYENNE HDR SQA
URIC ACID	<input type="checkbox"/>	10/24/2005 12:31	SERUM	8.4	H	mg/dL	2.6-7.2		CHEYENNE HDR SQA
GLUCOSE	<input type="checkbox"/>	10/24/2005	SERUM	359	H	mg/dL	70-		CHEYENNE HDR SQA

Warning! Avoid using "Back" button

Predefined Filtering and Date Range

The Pharmacy – All Outpatient report often contains a large number of entries, depending on the patient’s history of outpatient prescriptions. Providing shorter date ranges allows for the quicker retrieval of data. For this report, the Date Range selection criteria default to *15 Months*. You can select *2 Years* or *All Results* by clicking on their radio buttons and then clicking the Query button.

Figure 23: Date Range Selection Criteria for All Outpatient Pharmacy Report

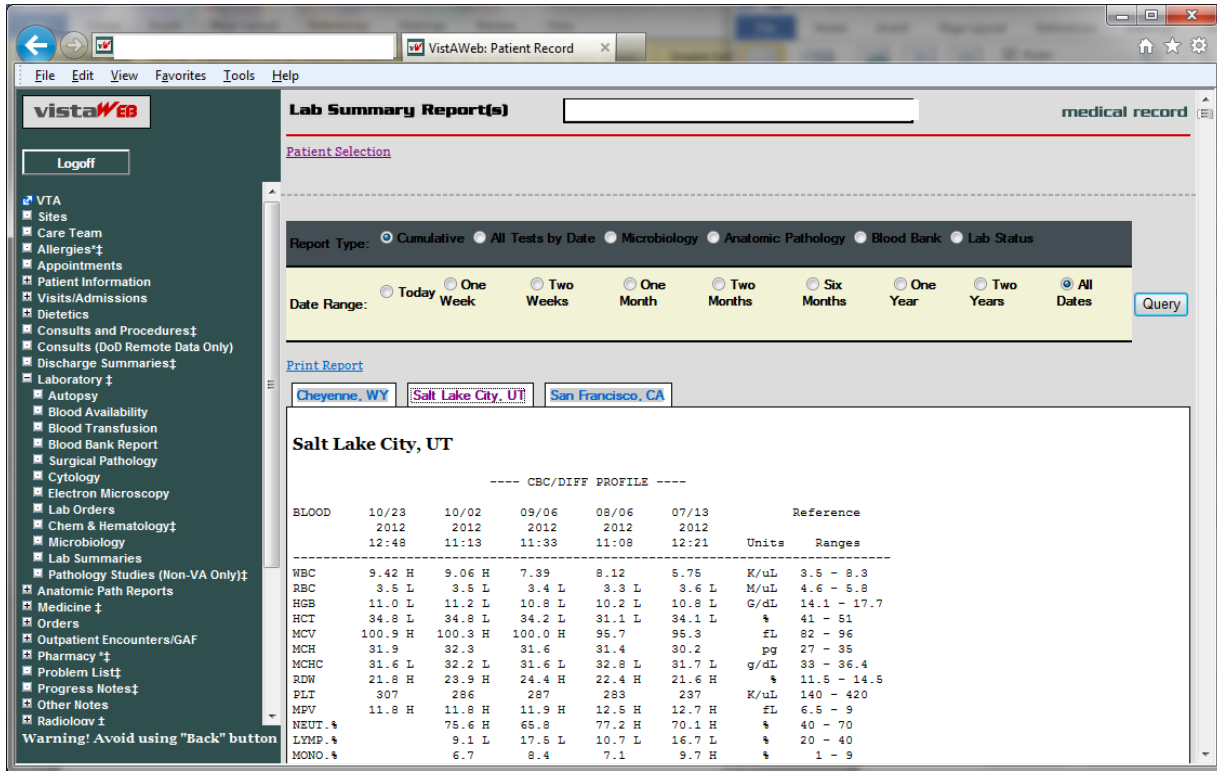
The screenshot shows the VistAWeb interface for the 'All Outpatient' report. The patient selection is 'CPRSPATIENT.DUDE (333-55-7777)'. The 'Date Range' section is highlighted, showing three radio buttons: '15 Months' (selected), 'Two Years', and 'All Results'. Below this is a table of medication records. The table has the following columns: Medication, Rx#, Status, Qty, Exp./Canc. Date, Issue Date, Last Fill Date, Rem, Provider, Cost/Fill, SIG, and Site. The table contains several rows of medication data, including AMLODIPINE BESYLATE 5MG TAB, GLYCERIN (ADULT) RTL SUPP, and IBUPROFEN 100MG/5ML SUPP.

Medication	Rx#	Status	Qty	Exp./Canc. Date	Issue Date	Last Fill Date	Rem	Provider	Cost/Fill	SIG	Site
ERROR					99/99/9999						NwHIN (alt:234)†
AMLODIPINE BESYLATE 5MG TAB	762887	ACTIVE	30	06/04/2010	06/03/2009			INLOES,SONJA		TAKE ONE-HALF TABLET BY MOUTH EVERY DAY	NwHIN (alt:234)†
AMLODIPINE BESYLATE 5MG TAB	762887	ACTIVE	30	06/04/2010	06/03/2009			INLOES,SONJA		TAKE ONE-HALF TABLET BY MOUTH EVERY DAY	NwHIN (alt:234)†
GLYCERIN (ADULT) RTL SUPP	762886	ACTIVE	24	05/30/2010	05/29/2009			INLOES,SONJA		INSERT ONE SUPPOSITORY IN RECTUM DAILY	NwHIN (alt:234)†
GLYCERIN (ADULT) RTL SUPP	762886	ACTIVE	24	05/30/2010	05/29/2009			INLOES,SONJA		INSERT ONE SUPPOSITORY IN RECTUM DAILY	NwHIN (alt:234)†
IBUPROFEN 100MG/5ML SUPP	1401068	ACTIVE	120	05/27/2010	05/26/2009			INLOES,SONJA		TAKE 400 MILLIGRAMS BY MOUTH THREE TIMES A DAY WITH FOOD FOR 7 DAYS	NwHIN (alt:234)†
IBUPROFEN 100MG/5ML SUPP										TAKE 400 MILLIGRAMS BY MOUTH THREE TIMES	NwHIN

Some reports require you to enter the date range before the report will appear. This is the case for queries that have the potential to return very large amounts of data or where filtering the data lends usability to the report. Summaries, such as Discharge, Lab, some Order summaries, and both of the Med Admin Hx and Med Admin Log reports, tend to generate large volumes of data. Narrowing the date range for a report for a patient’s summary data may improve the speed of the data retrieval.

Some reports that do not require a date range include the following: Sites, Care Team, Allergies, Appointments, Patient Inquiry, Patient Demographics, Patient Insurance, Dietetics Profile, Blood Bank, Daily Order Summary, Medications, Outpatient Rx Profile, All IV, and Imaging.

Figure 24: Date Range for Lab and Other Large Volume Reports



Data Grid Style of Report

The data grid style of report presents data in the form of a grid or table, with the data being retrieved and displayed according to a specified date range. The data for most of the tables can then be sorted in multiple ways. The underlined column headers indicate which columns may be used for sorting. Report data is generally retrieved and presented with the most recent date at the top, descending to the earliest date at the bottom. For some reports, Vitals for example, data from multiple sites is presented strictly by date, without consideration for the site. For some other reports, Problem List for example, the problems from multiple sites are displayed by status (active first) and then in descending date order for one site and then descending order for the next site, and so on. Then inactive problems are listed if there are any. In most of the reports that have a date column, clicking the date won't change the sorting of that column unless some other sort, alphabetical, for example, had been done which upset the descending date order.

Data Grid with Additional Details

The data grid permits you to view additional details about a selected item in a row. In this example, Progress Notes titles are listed in VistAWeb. To view the actual text of the note, click on the Title link for the note of interest.

Figure 25: Progress Notes

Progress Notes CHDRZZTESTPATIENT.CHDRONE (666-00-0001) medical record

Patient Selection

Date Range: Today One Week Two Weeks One Month Two Months Six Months One Year Two Years All Dates

From: (mm/dd/yyyy) To: (mm/dd/yyyy) Query

Maximum Number/Site: 50 All Reports

A maximum of 50 notes per site (plus associated addenda) will be displayed regardless of the number of notes available within the specified date range.

Print Report

Title	Icon	AWIV	Date	Author	Location	Site
Discharge summarization note						Pensacola Health Information Exchange (HIE)
Discharge summarization note						Pensacola Health Information Exchange (HIE)
Discharge summarization note						Pensacola Health Information Exchange (HIE)
PH&R ADMISSION (H&P) NOTE/ATTENDING (SR)			05/13/2013 11:40		ZZ//OT/BRINSER	Richmond, VA
ORTHO SURG INPT CONSULT			05/13/2013 11:43		ZZ//OT/BRINSER	Richmond, VA
SPEECH PATHOLOGY CONSULT			05/13/2013 11:45		ZZ//OT/BRINSER	Richmond, VA
ORTHO SURG ATTENDING NOTE (S)			05/13/2013 11:46		ZZ//OT/BRINSER	Richmond, VA
SPEECH PATHOLOGY PROGRESS NOTE			05/13/2013 11:47		ZZ//OT/BRINSER	Richmond, VA
ORTHO CONSULT			05/22/2013 10:51		ALM POLYT PNS EAPEN	South Texas HCS
Former Pwr Social Work Case Management Note			05/22/2013 10:53		ALM POLYT PNS EAPEN	South Texas HCS
HBP/CR SOCIAL WORK NOTE			05/22/2013 11:08		ALM POLYT PNS EAPEN	South Texas HCS
SOCIAL WORK CADHC CONSULT			05/22/2013 12:07		ALM POLYT PNS EAPEN	South Texas HCS
ORTHO FOLLOW-UP NOTE			05/22/2013 13:39		ALM POLYT PNS EAPEN	South Texas HCS
LETTER TO PT (GENERAL)			06/19/2013 14:10		CCHT TECH EDUCATION	San Diego, CA
Medicine Resident Note-Int			06/27/2013 10:03		TESTING NONCOUNT-X	San Diego, CA
NUTRITION CALORIE COUNT			08/06/2013 11:35		TESTING NONCOUNT-X	San Diego, CA
C&P EXAMINATION			08/20/2013 10:07			San Diego, CA
Addendum to C&P EXAMINATION			08/20/2013 12:45			San Diego, CA
NUTRITION CALORIE COUNT			08/29/2013 10:20		TESTING NONCOUNT-X	San Diego, CA
NUTRITION CALORIE COUNT			09/16/2013 09:15		TESTING NONCOUNT-X	San Diego, CA
ADMINISTRATIVE NOTE			10/09/2013 08:02		ONLYFORTESTING/TRNG-X	Orlando, FL

Warning! Avoid using "Back" button

When you click on the Title link, the detail of the selected note appears in a pop-up box, represented in the example below. Click on the Print or Close buttons to effect the desired action.

Figure 26: Progress Note Title link (AWIV – Imaging details)

Progress Notes CPRSPATIENT, DUDE (333-55-7777)

MEDICAL SERVICE PROGRESS NOTE

Site: Columbus, OH

Date: 08/17/2004 10:26 Author: DENNIS L WHATEVER Location: LOWER PC

This is a report

User Class: No user class for this timestamp

Print Copy to Clipboard Close

back to top

Figure 27: Imaging Report

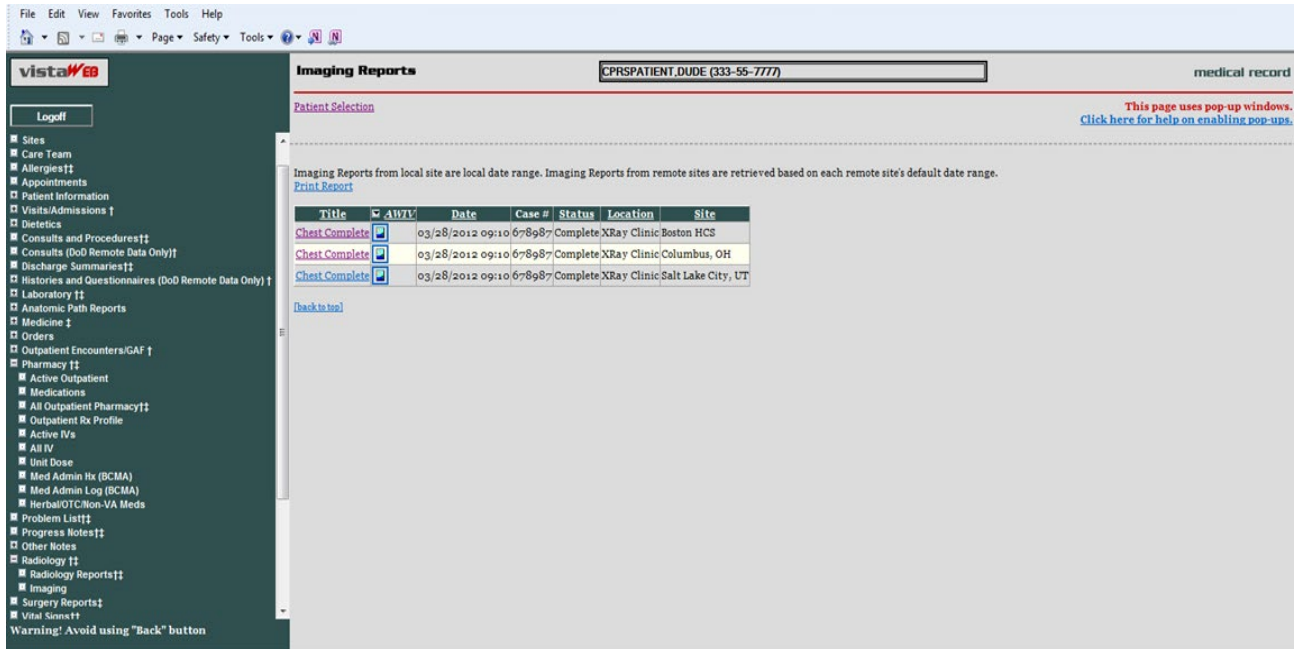
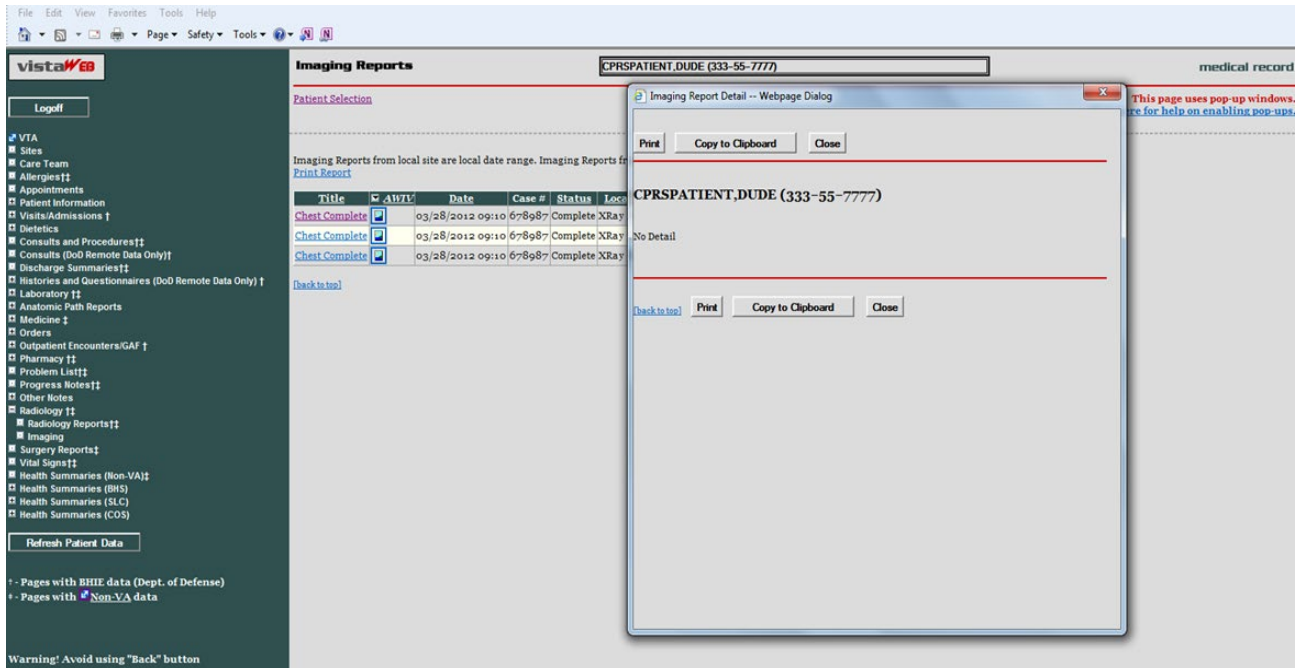


Figure 28: Imaging Report Details



Vital Signs Report

In the following Vital Signs example report, note that three of the Site column listings display Home Telehealth (HT) as the site where the vitals were taken. The HT indicates the data was supplied through the HT interface.

Figure 29: Vital Sign Report Presented as Table

The screenshot displays the VistAWeb Vital Signs report for patient CPRSPATIENT.DUDE (333-55-777). The interface includes a navigation menu on the left, a patient selection box, and a date range filter set to 'One Month'. The main data is presented in a table with the following columns: Date, TEMP, PULSE, RESP, BP, HT, WT, Pain, POx, C/G, CVP, Blood Glucose, and Site. The Site column lists various locations, including 'NwHIN (alt1234)' and 'HT' (Home Telehealth).

Date	TEMP	PULSE	RESP	BP	HT	WT	Pain	POx	C/G	CVP	Blood Glucose	Site
09/09/0909 09:09	ERROR											NwHIN (alt1234)†
01/24/2011 14:22		55		150/100								NwHIN (alt1234)†
01/24/2011 14:22		60		140/80								NwHIN (alt1234)†
01/24/2011 14:22		60		140/80								NwHIN (alt1234)†
01/24/2011 14:22		55		120/90								NwHIN (alt1234)†
01/24/2011 14:22		55		150/100								NwHIN (alt1234)†
01/24/2011 14:22		55		120/90								NwHIN (alt1234)†
01/24/2011 14:21	100.0											NwHIN (alt1234)†
01/24/2011 14:21	100.0											NwHIN (alt1234)†
01/24/2011 14:19	99.6	55	25	121/81	75.0	150.0		99.0				NwHIN (alt1234)†
01/24/2011 14:19	99.6	55	25	121/81	75.0	150.0		99.0				NwHIN (alt1234)†
01/24/2011 14:08		60		130/91				99.0				NwHIN (alt1234)†
01/24/2011 14:08		55		130/91								NwHIN (alt1234)†
01/24/2011 14:08		50		141/101								NwHIN (alt1234)†
01/24/2011 14:08		60		141/101								NwHIN (alt1234)†
01/24/2011 14:08		55		122/82								NwHIN (alt1234)†
01/24/2011 14:08		50		122/82				99.0				NwHIN (alt1234)†

When you select the Date link of an HT site from the Vital Signs screen, additional information is provided about the method of data entry, qualifiers, vitals measuring devices, and that data standardization has been accomplished for this vital sign record.

Figure 30: Details of HT Standardized Vitals

Category	Result	Units	Methods	Qualifiers	Device
BLOOD PRESSURE	150/80	mmHg		L LEG, CUFF-MANUAL, TREDELENBURG, ADULT CUFF	
PULSE OXIMETRY	5.0	%SpO ₂	supp O ₂ , 18l/min, 25 %	AFTER EXERCISE	
CIRCUMFERENCE/GIRTH	15.0	in		LOWER ARM, LEFT	
CENTRAL VENOUS PRESSURE	35.0	cmH ₂ O			
HEIGHT	75.0	in		ESTIMATED BY ARM SPAN	
PAIN	5				
PULSE	25	/min		BILATERAL PERIPHERALS, AUSCULTATE, SEMIFOWLERS, LEFT	
RESPIRATION	25	/min		CPAP, STANDING	
TEMPERATURE	100.0	F		RECTAL	
WEIGHT	175.0	lb		WITHOUT PROSTHESIS, STATED	

If the vitals data is coming from the Health Data Repository – Interim Messaging Solution (HDR-IMS) repository, but was not entered through the HT interface, the Details – Web Page Dialog will show the letter S in the Standardized column and any other data that was entered through the Vitals package that maps to other column headings. In the following example, the Methods and Qualifiers for supplemental oxygen that was delivered to the patient are shown.

Figure 31: Details of Non-HT Standardized Vitals

Category	Result	Units	Methods	Qualifiers	Device	Standardized
BLOOD PRESSURE	127/99	mmHg				S
PAIN	3					S
PULSE	89	/min				S
PULSE OXIMETRY	89	%SpO ₂	3 l/min, 67 %, supp O ₂	AMBU BAG		S
RESPIRATION	22	/min				S
TEMPERATURE	99	F				S
WEIGHT	155	lb				S

If the vitals data is coming from the HDR-Historical database or a VistA site, the Standardized column does not display the letter S and no data is supplied for Units, Methods, Qualifiers, or Device. If for some reason the HDR databases are inaccessible, VistAWeb still polls the VistA sites where the patient has been seen and will return any available requested data for display.

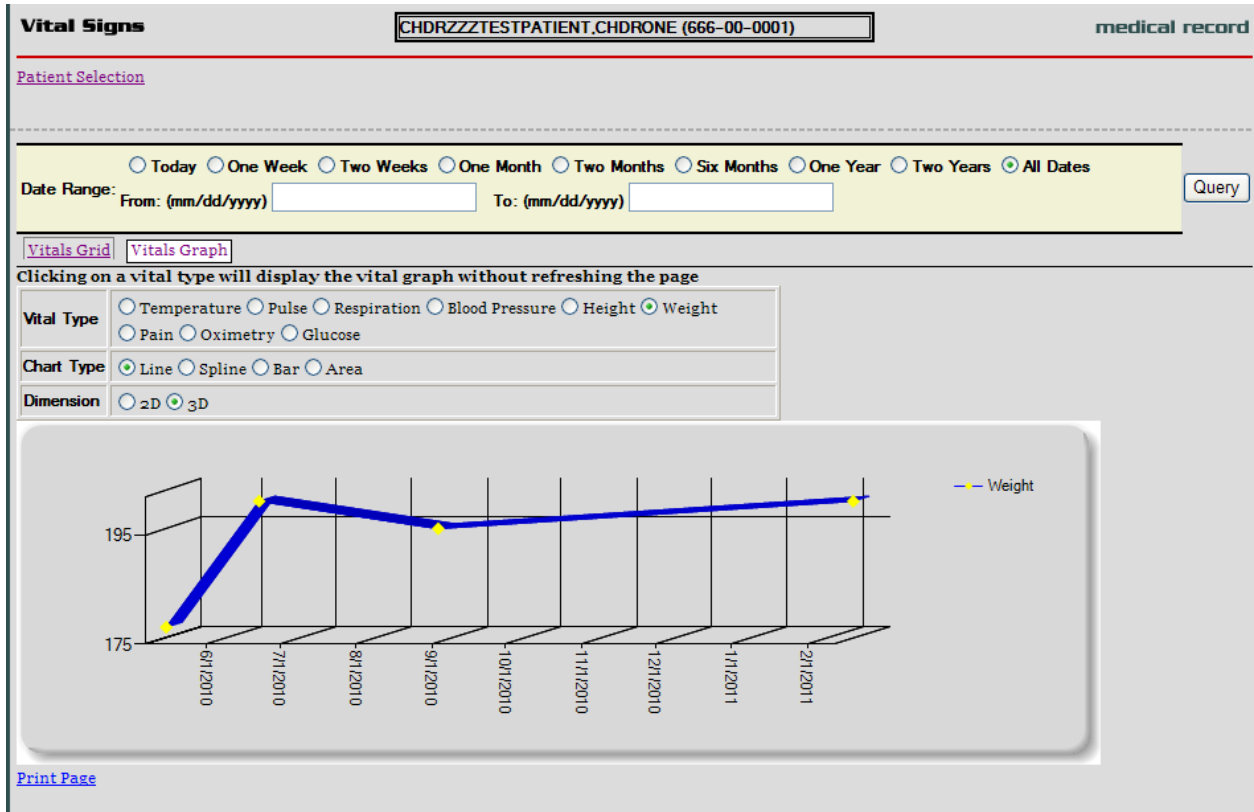
Figure 32: Details of Non-Standardized Vitals

VITALSPT, THREE

Vital Signs for 03/13/2006 11:58

Category	Result	Units	Methods	Qualifiers	Device	Standardized
BLOOD PRESSURE	160/80					
CENTRAL VENOUS PRESSURE	85					
CIRCUMFERENCE/GIRTH	15					
HEIGHT	67					
PAIN	5					
PULSE						
PULSE OXIMETRY	99					
RESPIRATION	25					
TEMPERATURE	102					
WEIGHT	150					

Figure 33: Vitals Graphing



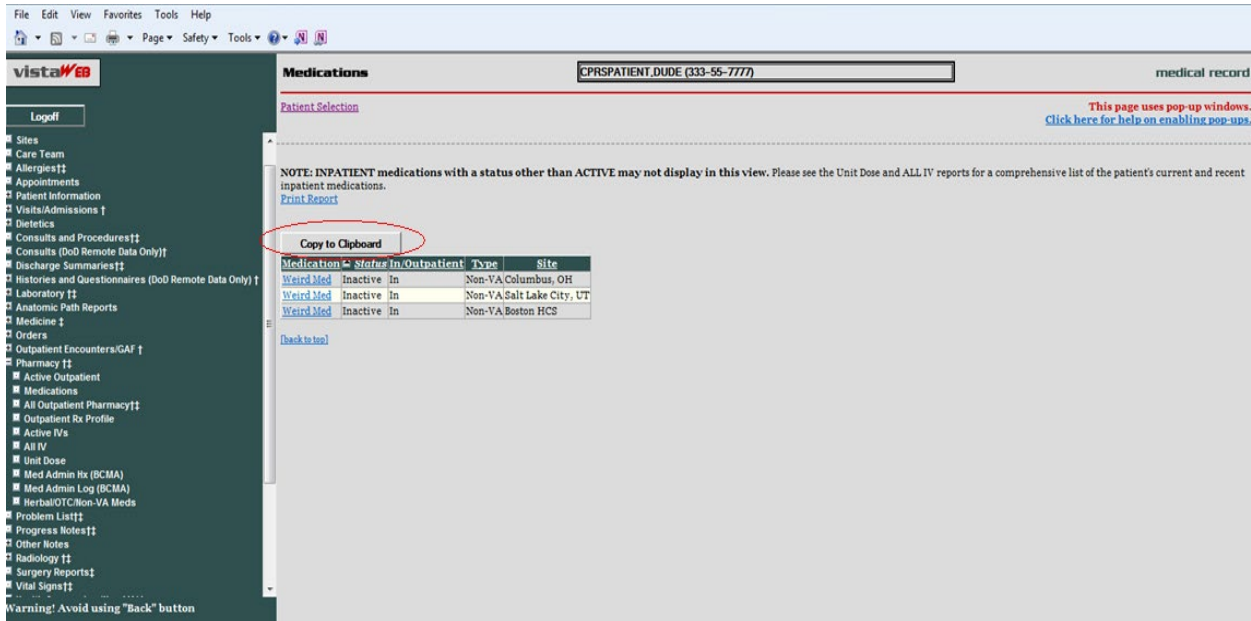
Data Grid with Copy to Clipboard Option

The following example of a Medications report lists a variety of medications and their statuses, along with Copy to Clipboard button. Providers often find it useful to copy lists of active and suspended medications to a patient note. When you click the mouse on the Copy to Clipboard button, the list of Active and Suspended medications is automatically copied to the clipboard and grouped by Status. Discontinued and expired medications are not copied.

Note: When you do a copy to clipboard, this data is available to other web pages, which poses a patient safety issue, since patient information can be seen by other web pages

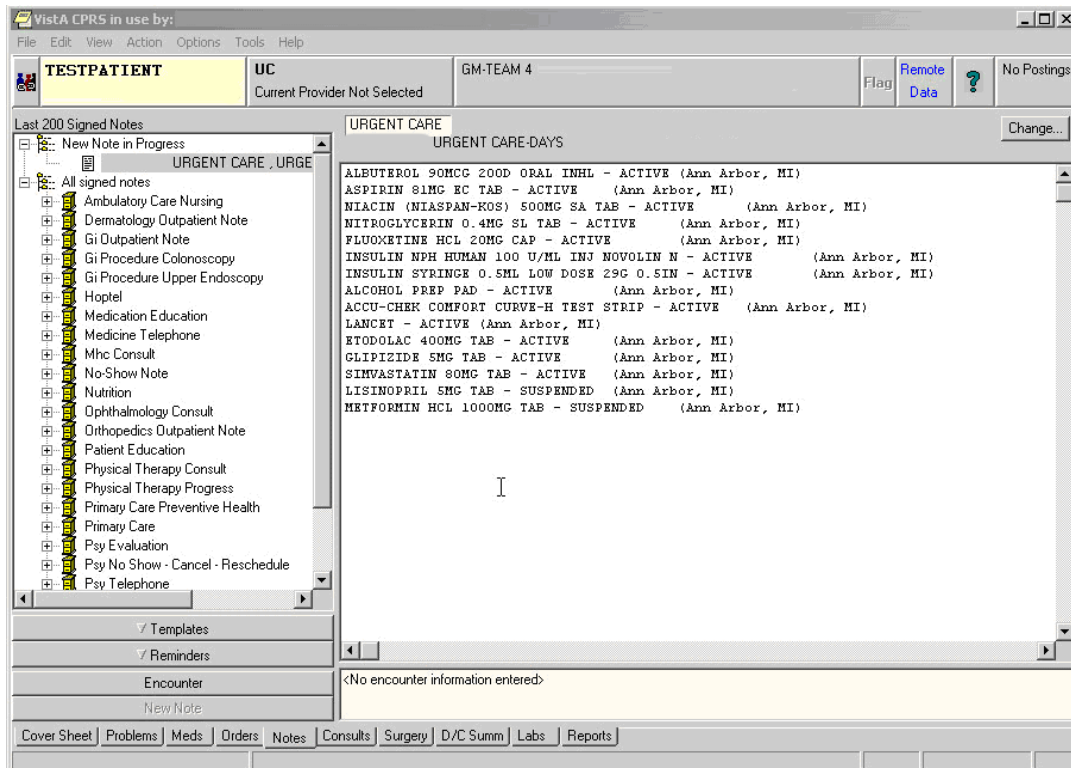
In V8, users can set up an option that does not allow the clipboard data to be available to other web pages.

Figure 34: Copy to Clipboard



The list can be pasted into another document or a Progress Note within CPRS.

Figure 35: Medications from VistA Web Pasted into CPRS Progress Note



Note: VistA Web displays Non-VA and Herbal/OTC medications if applicable. In the following screen capture of a Medication report, the Type field has one medication listed as Non-VA.

Figure 36: Non-VA Medications

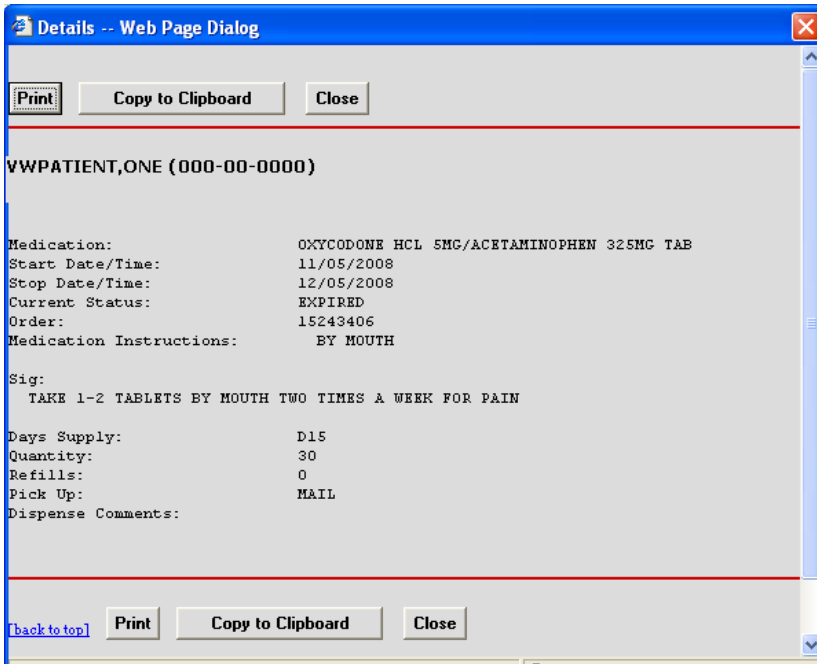
Copy to Clipboard				
Medication	Status	In/Outpatient	Type	Site
Weird Med	Inactive	In	Non-VA	Columbus, OH
Weird Med	Inactive	In	Non-VA	Salt Lake City, UT
Weird Med	Inactive	In	Non-VA	Boston HCS

Department of Defense Reports

VistAWeb version10 added the following.

1. Detailed display for DoD data for the Outpatient Pharmacy report. The following fields are displayed in the detailed display.
 - Medication
 - Start Date/ Time
 - Stop Date/ Time
 - Current Status
 - Order #
 - Medication Instructions
 - Sig
 - Days Supply
 - Quantity
 - Refills
 - Pick Up
 - Dispense Comments.

Figure 37: Outpatient Pharmacy detailed display



Three new reports under Pharmacy:

- Active Outpatient
- Active IV report
- Herbal/OTC/Non-VA Meds.

Figure 38: Active Outpatient Medications - Grid

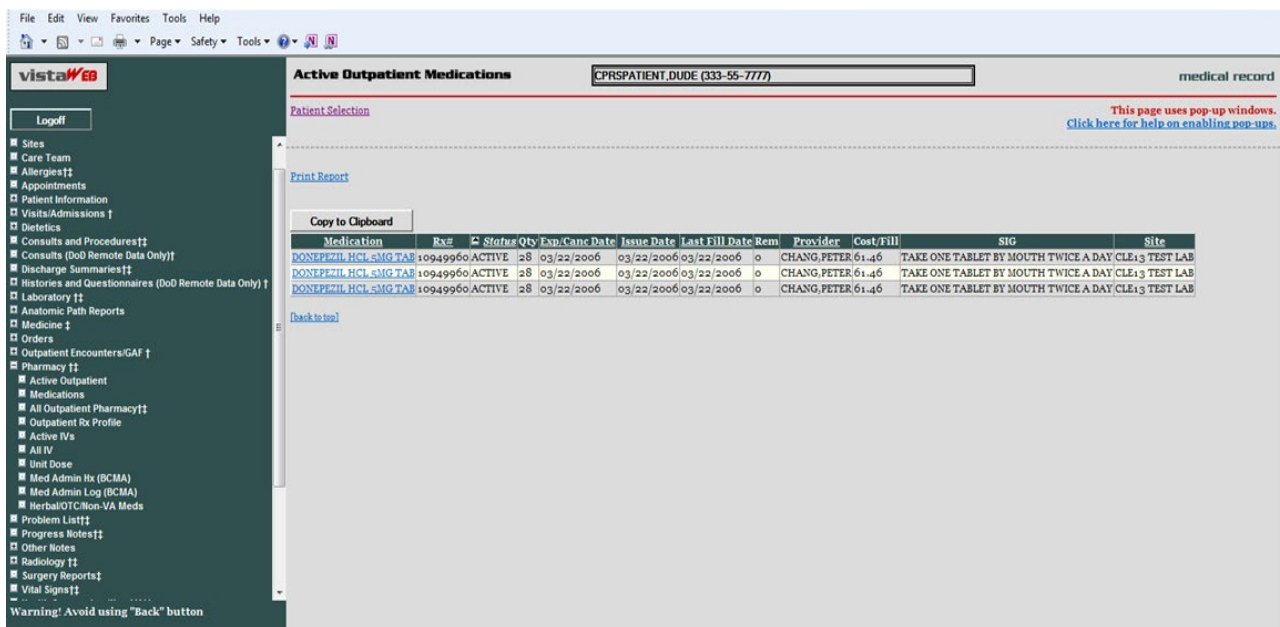


Figure 39: Active Outpatient Medications - Details

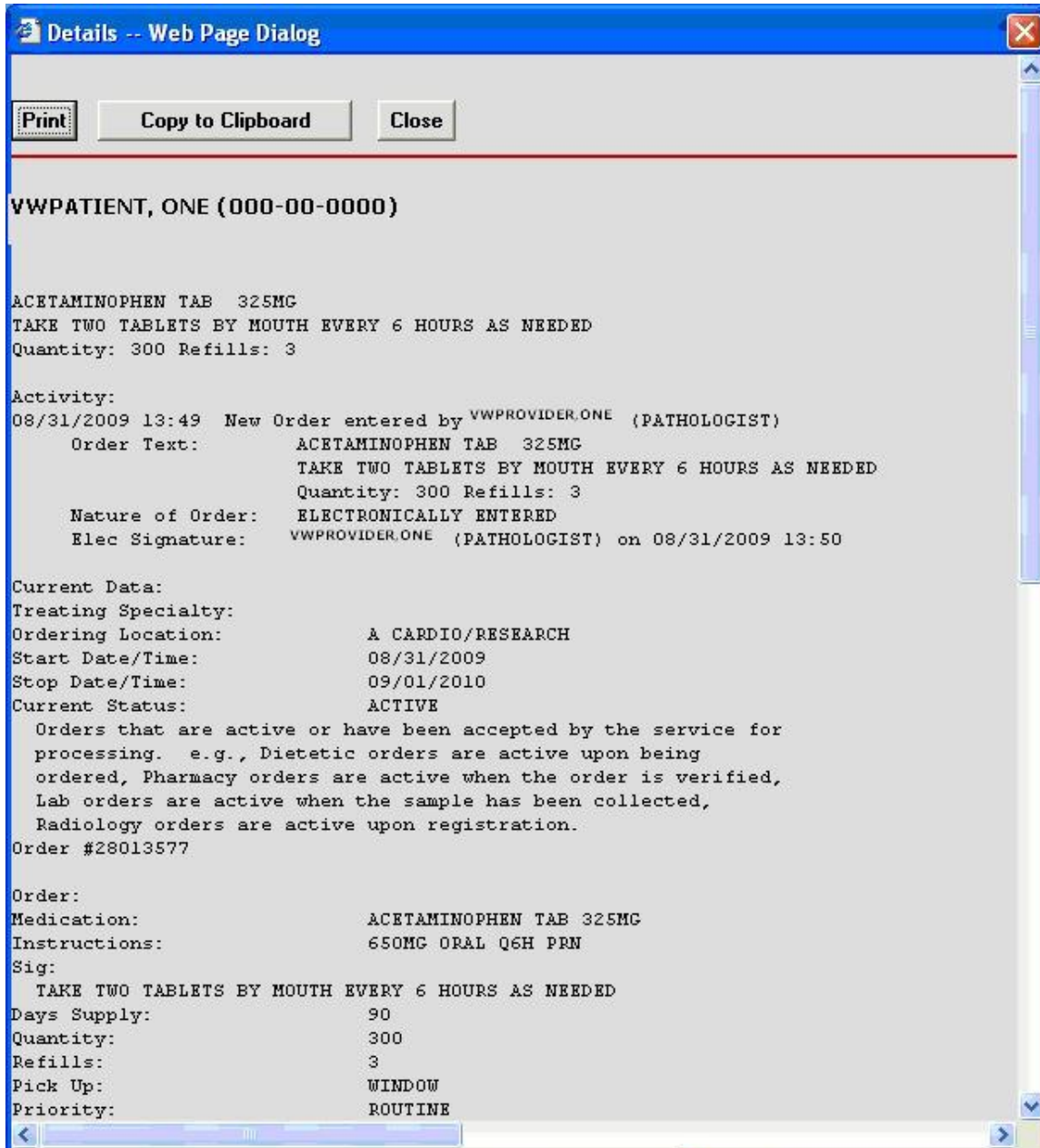


Figure 40: Active IV

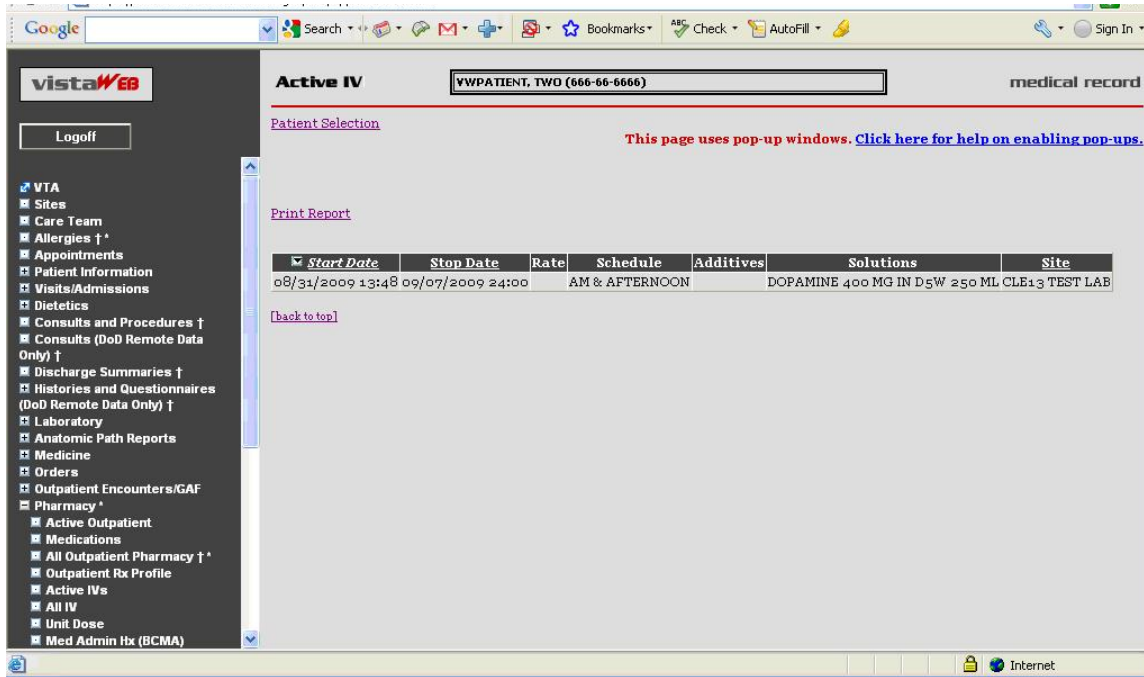
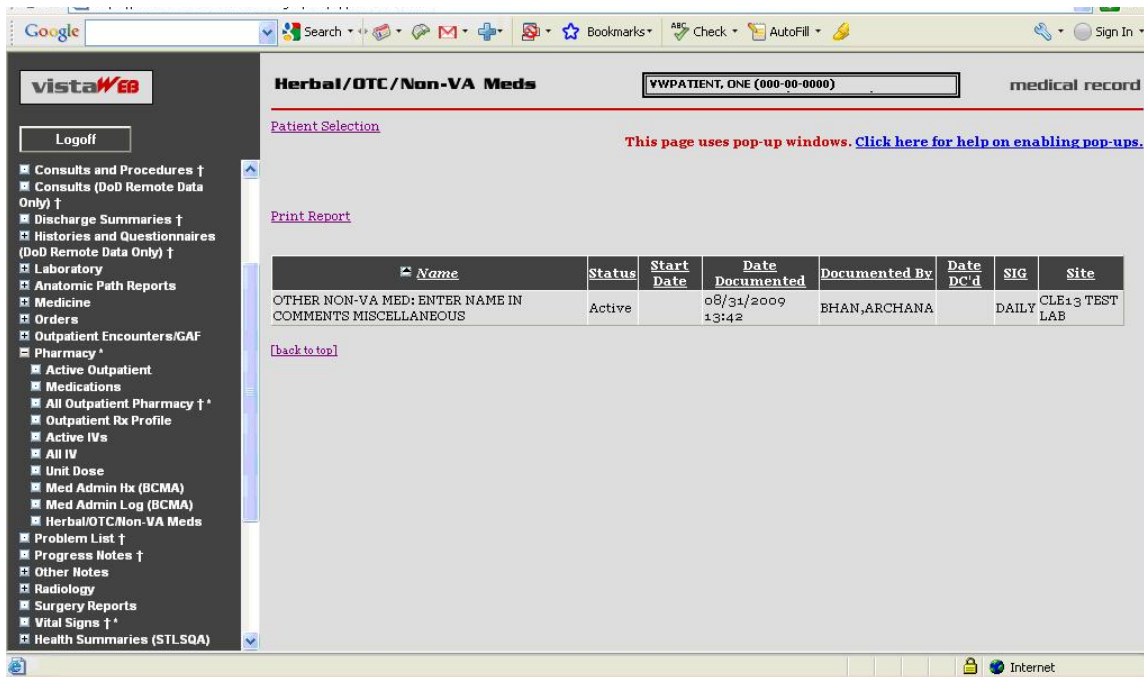


Figure 41: Herbal / OTC / Non-VA Meds



1. In response to PSPO 832:

- Added a new centered heading "Site Connection Summary" followed by the date and time in parenthesis.

Example: "Site Connection Summary (12/19/2008 10:06AM)"

- Added the following two notes above the tables that display a list of the sites that VistAWeb could / could not connect to:
 - Data for this patient can be retrieved from the following sites.
 - Data for this patient cannot be retrieved from the sites shown below due to network or remote system problems. To attempt to reach those systems again, please see the message field below and/or re-select the patient".

VistAWeb version 9 added reports to retrieve and display data received through the BHIE Framework from DoD for the following.

- Family Histories
- Social Histories
- Other Histories
- Questionnaires.

Users can select a date range and specify the number of observations, and the BHIE real-time DoD data and DoD pre-separation data within these parameters are displayed in VistAWeb for the above mentioned reports.

Figure 42: Dept of Defense Reports – Social Histories

The screenshot shows the VistaWeb interface for Social Histories. The patient ID is CPRSPATIENT.DUDE (333-55-7777). The page includes a search bar, a date range filter (set to One Year), and a table of findings. The table has columns for Finding, Date Reported, Reported By, Comment, Status, Onset Date, Source, Unverified, and Site. A finding is listed with the date 04/01/2012 00:00 and the comment 'Doctor, SomekindofThis is SUCH a weird guy. Hmmm.Active'. The 'Finding' link in the first column is highlighted.

Finding	Date Reported	Reported By	Comment	Status	Onset Date	Source	Unverified	Site
Weird	04/01/2012 00:00	Doctor, Somekindof	This is SUCH a weird guy. Hmmm.Active	Active	10/12/1967 00:00	Unknown	true	VA Hospital

When the “Finding” window is clicked, a new window with details pops up.

Figure 43: Dept of Defense Reports – Details

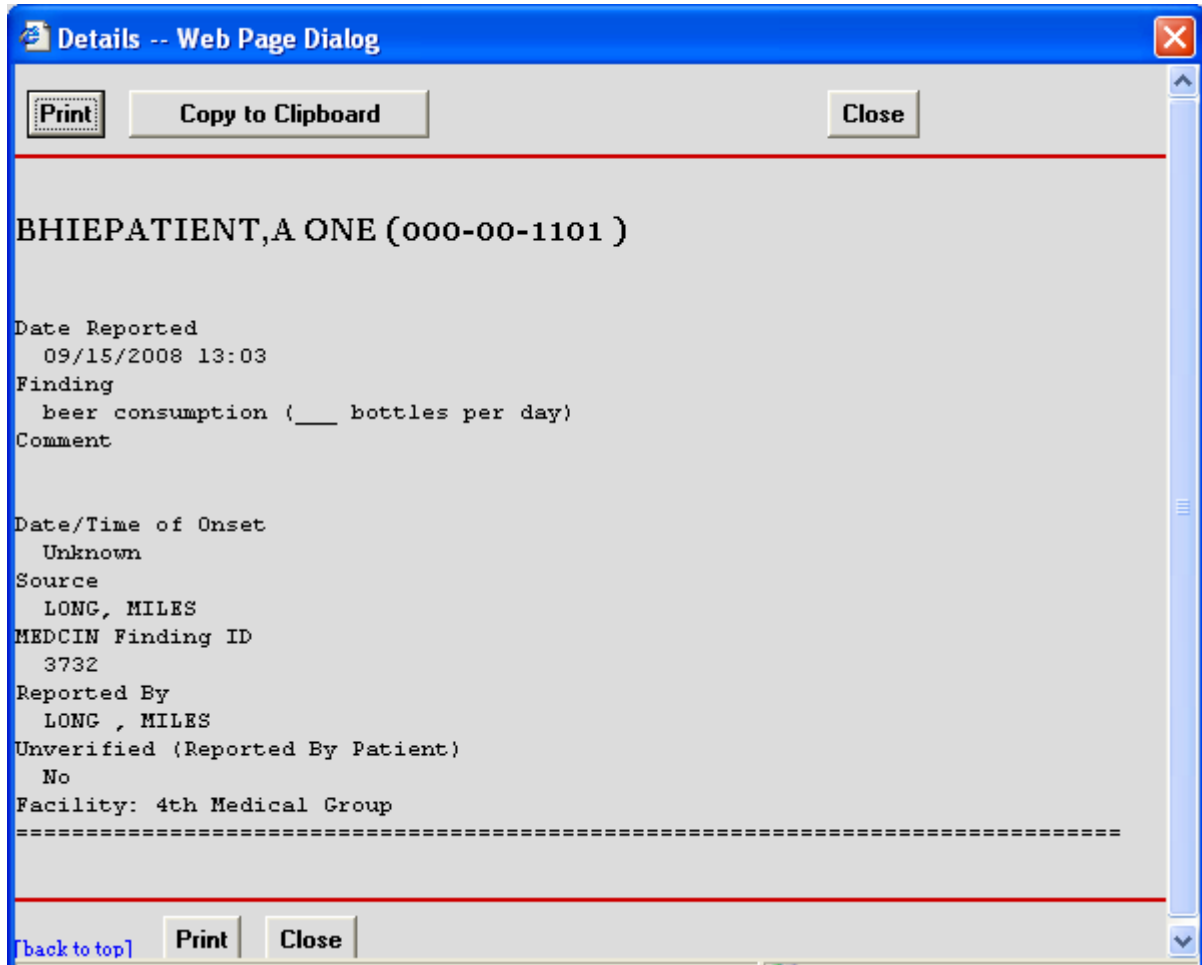


Figure 44: Dept of Defense Reports – Other Histories

vistaWEB **Other Histories** CPRSPATIENT.DUDE (333-55-7777) medical record

[Patient Selection](#) This page uses pop-up windows. [Click here for help on enabling pop-ups.](#)

Today
 One Week
 Two Weeks
 One Month
 Two Months
 Six Months
 One Year
 Two Years
 All Dates

Date Range: From: (mm/dd/yyyy) To: (mm/dd/yyyy) [Query](#)

[Print Report](#)

Finding	Date Reported	Reported By	Comment	Status	Onset Date	Source	Unverified	Site
current diet is low in fiber	09/17/2008 16:02	Patient		Active	ow/n/Unkn:	Patient	Yes	4th Medical Group†
HART-A Coupler Findings	09/10/2008 18:10	Patient	Chang, Jon S. (ID 9928584) F...	Active	ow/n/Unkn:	Patient	Yes	4th Medical Group†
taking medication to help sleep	09/10/2008 18:10	Patient		Active	ow/n/Unkn:	Patient	Yes	4th Medical Group†

[Back to top](#)

Warning! Avoid using "Back" button

Figure 45: Dept of Defense Reports – Other Histories Details

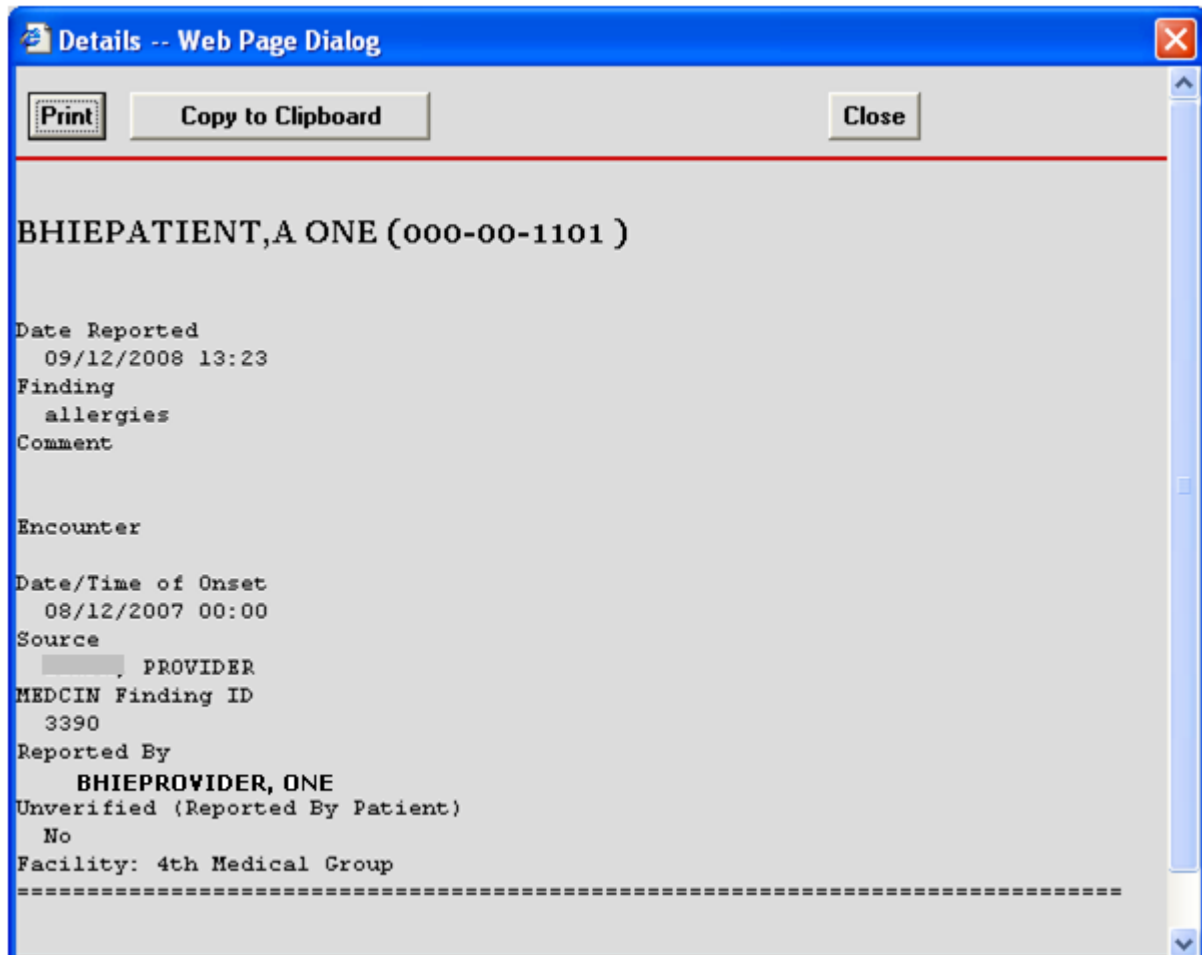


Figure 46: Dept of Defense Reports – Questionnaires

The screenshot displays the VistAWeb interface for generating a report. The top navigation bar includes 'File', 'Edit', 'View', 'Favorites', 'Tools', and 'Help'. The main header shows the patient name 'CPRSPATIENT.DUDE (333-55-7777)' and the text 'medical record'. A 'Logoff' button is located in the top left. A left-hand navigation menu lists various medical categories, with 'Questionnaires' selected. The main content area features a 'Patient Selection' section with a 'Query' button. Below this is a 'Date Range' filter with radio buttons for 'Today', 'One Week', 'Two Weeks', 'One Month', 'Two Months', 'Six Months', 'One Year' (selected), and 'Two Years', along with 'All Dates'. A 'Print Report' link is also present. The report table has the following data:

Title	Date Reported	Reported By	Site
Oh what is this	07/07/2012 00:00	Flintstone, Fred	one site

A 'Back to top' link is located below the table. At the bottom of the interface, a warning message reads: 'Warning! Avoid using "back" button'.

Figure 47: Dept of Defense Reports – Questionnaires Details



Other Past Medical Histories report from DoD

HART Report from Department of Defense

The report referenced by the HART Health Assessment Review Tool (HART) Report is comprised of answers, “findings”, to a health assessment questionnaire (health indicator data including physical activity, overweight and obesity, substance abuse, etc.). Although this is originally entered in a question and answer format, the report is stored and displayed simply as “findings” (no longer associated with questions). The report is displayed in VistAWeb as **“Other Past Medical Histories”**.

Data displayed on the HART report was not truncated in the Comment column, so the entire report appeared making the row unreasonably tall.

The report will now have similar truncating for HART data as is done in CPRS. This will reduce the size of the report and make it easier for the user to read. The entire text of the comment field will be available in the detailed display window.

The display of the “Comment” field will be restricted to 30 characters in the grid view of the “Other Past Medical Histories” report in VistAWeb.

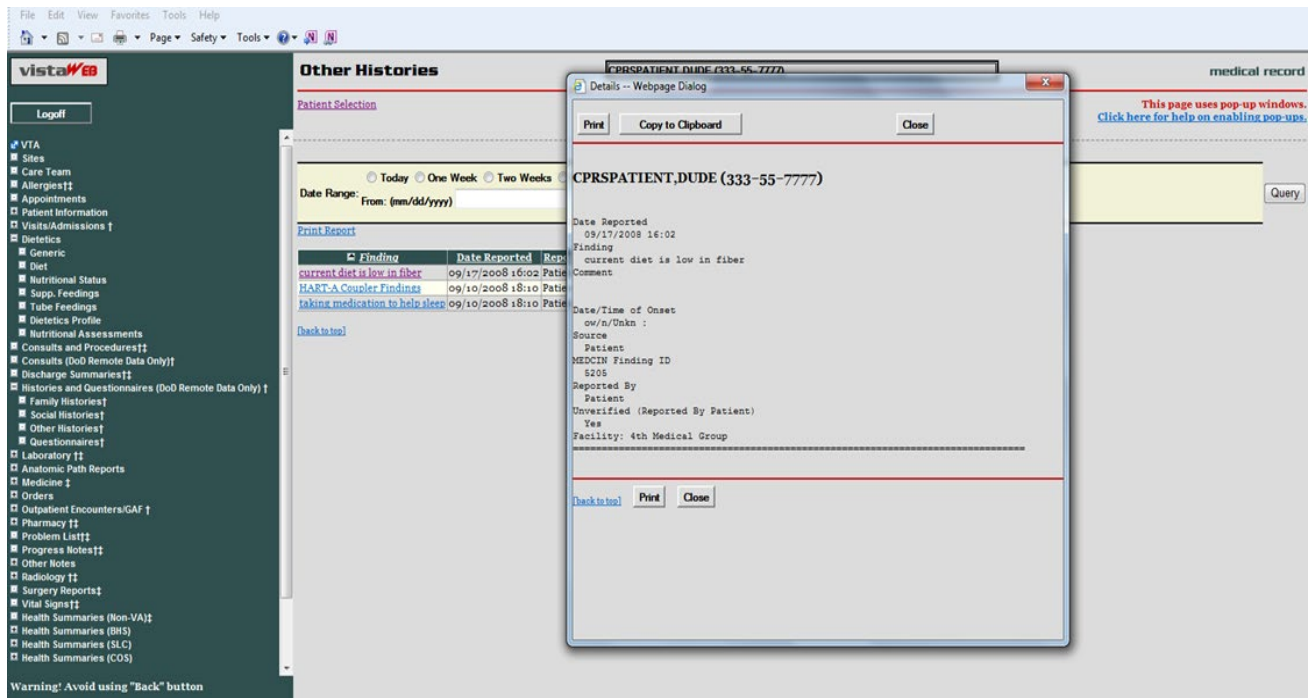
Figure 48: Comment Field

The screenshot displays the VistAWeb interface for the "Other Histories" report. The patient ID is CPRSPATIENT.DUDE (333-55-7777). The report shows a table of findings with the following data:

Finding	Date Reported	Reported By	Comment	Status	Onset Date	Source	Unverified	Site
current diet is low in fiber	09/17/2008 16:02	Patient		Active	ow/n/Unkn	Patient	Yes	.4th Medical Group*
HART-A Coupler Findings	09/10/2008 18:10	Patient	Chang, Jon S. (ID 9928584) F...	Active	ow/n/Unkn	Patient	Yes	.4th Medical Group*
taking medication to help sleep	09/10/2008 18:10	Patient		Active	ow/n/Unkn	Patient	Yes	.4th Medical Group*

The "Comment" field for the "HART-A Coupler Findings" entry is circled in red, showing the truncated text "Chang, Jon S. (ID 9928584) F...".

Figure 49: Detailed Display



Non-VA Health Summaries

Non-VA Health Summaries are clinical summary documents retrieved from non-VA Healthcare Providers via the eHealth Exchange. These documents provide a summary of the care a patient has received through a non-VA health care system.

To access a patient's Non-VA Health Summaries click on the **HEALTH SUMMARIES (NON-VA) FOR TREATMENT ONLY** menu item on the VistaWeb menu (Figure 51). This menu item is only displayed when there is Non-VA data available for the patient. Click this menu item to open the Non-VA Health Summaries screen (Figure 52).

Figure 50: Accessing Non-VA Health Summaries

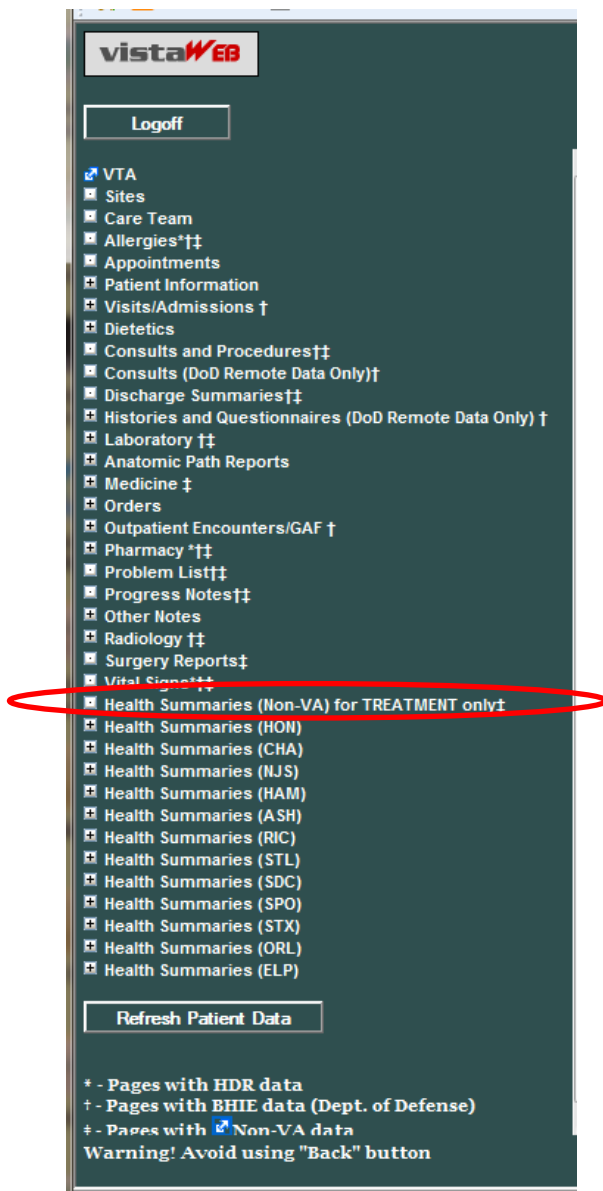
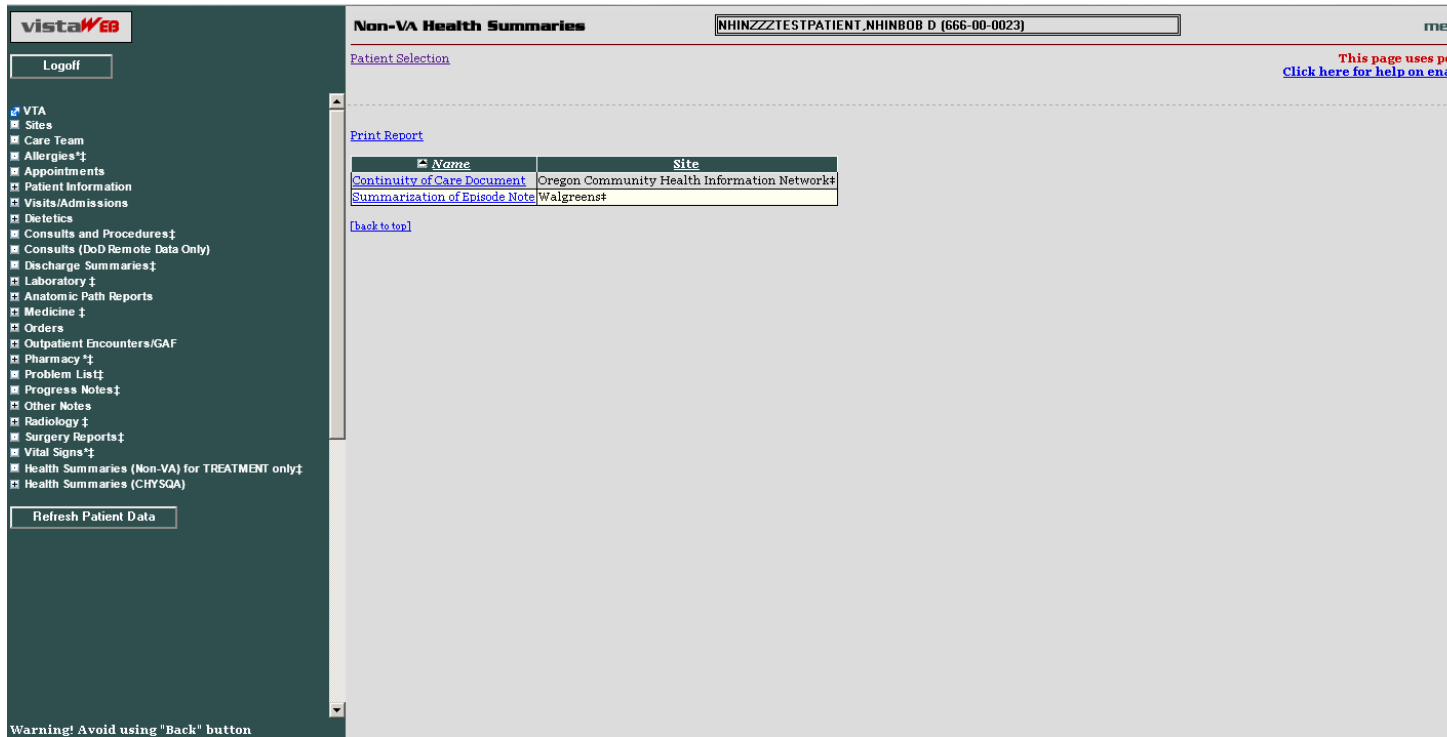


Figure 51: Available Non-VA Health Summaries



Viewing a Non-VA Health Summary

To open a Non-VA Health Care Summary document click on the hyperlink in the *Name* column of the table on the Non-VA Health Summaries screen.

Non-VA Health Summary documents have a variety of names (as defined by the sending organization). Most commonly they are called “Continuity of Care Document” or “Summarization of Episode Note”. Figure 52 above shows a patient who has non-VA Health Summary documents available from two eHealth Exchange Partners. While it is technically possible for a patient to have care summary documents available from multiple partners, most patients will have one or two.

Figure 52: Display of a Non-VA Health Summary – C32 format

If the document received from external clinical partner is in C32 format, the following display format is used.

Print Copy to Clipboard Close

CHDRZZTESTPATIENT,CHDRONE (666-00-0001)

Mary Immaculate Hospital

Summarization of Episode Note

Created On: August 25, 2011

Patient:	CHDRONE CHDRZZTESTPATIENT 1234 HOWARD ST. LA JOLLA, CA, 92038 tel: PATIENT PHONE MISSING	Patient ID: 666000001
Birthdate:	March 3, 1960	Sex: M
Language(s):	• English	
Source:	Mary Immaculate Hospital Author: F [REDACTED]	


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Allergies Adverse Reactions Alerts

Allergens - Count (4)	Verification Date	Event Type	Reaction	Severity	Source
Actonel	--	Drug Allergy	--	--	--
OXYCODONE-ACETAMINOPH	--	Drug Allergy	--	--	--
00015387	--	Drug Allergy	00015387	--	--
OXYCODONE-ACETAMINOPH	--	Drug Allergy	--	--	--

Encounters

 **NOTE:** Click on the Encounter Comments field to display/hide additional data where applicable

Date/Time - Count (4)	Encounter Type	Encounter Comments	Provider
Oct 27, 10	Inpatient encounter	--	FAIRMAN, R. P.
May 10, 10	Inpatient encounter	--	FIORE, STEVEN

Figure 53: Hover Over Capability

Most columns have a "hover over" capability that will display the complete contents of a cell when the content exceeds the column width.

Active Allergies and Advers

propensity to adverse reactions to drug

Allergens - Count (2)	Verification Date	Event Type	Reaction	Severity	Source
FE FUMARATE-B12-VIT C-FA	Apr 23, 2014	propensity to adverse reacti	--	--	Kaiser Permanente Haw
POLLEN	Apr 23, 2014	propensity to adverse reacti	--	--	Kaiser Permanente Haw

Active Problems

Kaiser Permanente Hawaii - REGNHIM

Problems - Count (1)	Status	Problem Code	Date of Onset	Provider	Source
FEVER	Active	386661006	Apr 23, 2014	Murugaiah, Manikandan	Kaiser Permanente Haw

BCG BACILLUS CALMETTE GUERIN VACCINE (TUBERCULOSIS)

Immunizations - Count (1)	Series	Date Issued	Reaction	Comments
BCG BACILLUS CALMETTE GUEI	--	Apr 23, 2014	--	--

Medications							
Medications - Count (1)	Status	Quantity	Order Expiration	Provider	Prescription #	Date	Instructions
Bacitracin-Polymyxin B 500	Active	--	--	Aaberg, Randal	75349701	Apr 23, 2014	USE ACCORDING TO WRIT Kaiser Permanen

Figure 54: Display of a Non-VA Health Summary – C-CDA format

If the document received from external clinical partner is in C-CDA format, the following display format is used.

CPRSPATIENT,DUDE (333-55-7777)

Department of Veterans Affairs

Department of Veterans Affairs Health Summary
created on **May 27, 2015, 08:17:29, EST**

Prepared for SEVEN NHINPATIENT
DOB: May 14, 1947
Birth Sex: Male

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[Functional Status](#)
[Family History](#)
[Social History](#)
[Insurance Providers](#)
[Advance Directive](#)
[Healthcare Providers](#)
[Contact Information](#)

Patient Information	
Address	Primary Home: 17 RIVER DR APT 2 COVINGTON, KY 41014 Tel: +1-895-121-3333
Marital status	NEVER MARRIED
Race	
Ethnicity	Not Hispanic or Latino

Aggregated Data

Some of the data that is visible in a Non-VA Health Summary (for both C32 and C-CDA document formats) is also available in an aggregated view with data from other sources, such as VA Medical Centers and other Non-VA partners. This data can be found by selecting Allergies, Laboratory->Chem and Hem, Pharmacy->All Outpatient Pharmacy, Problem List, and Vital Signs, as shown in Figure below.

Figure 55: Viewing Aggregate Data

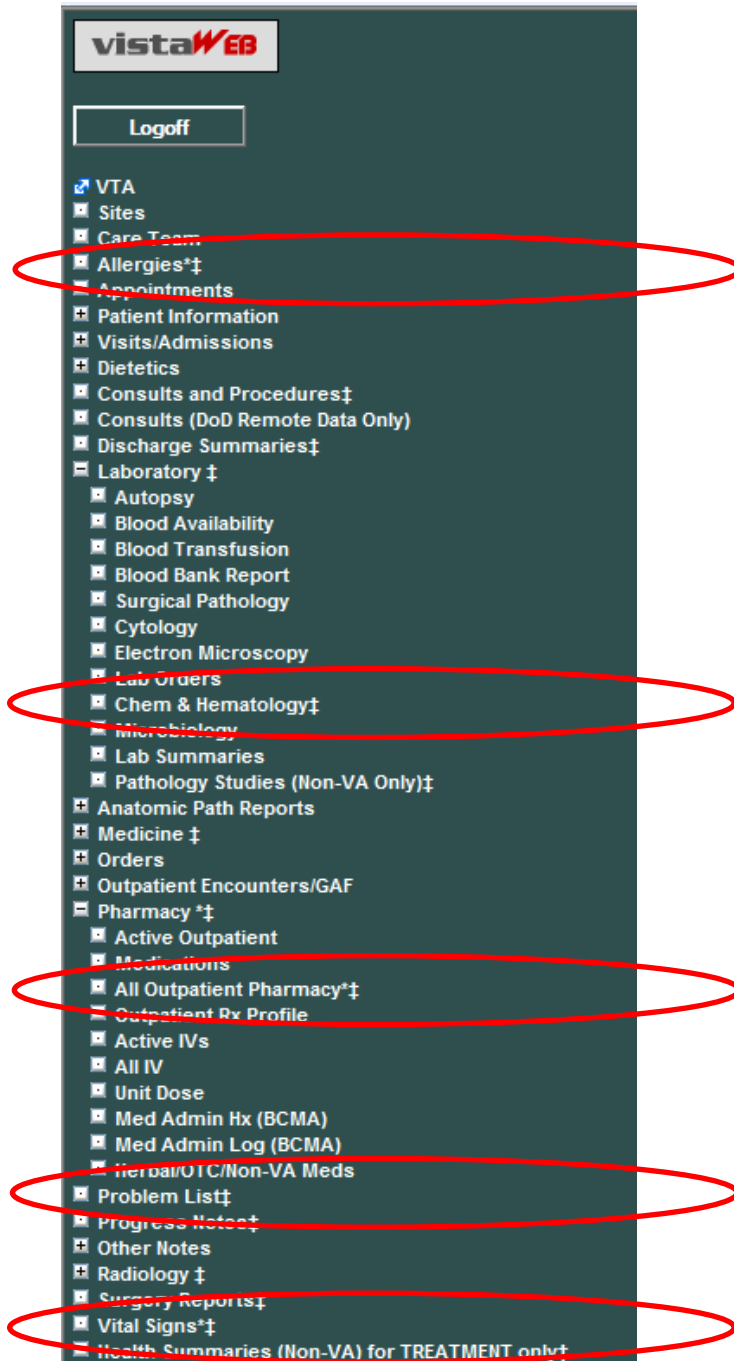


Figure 56: Allergies Aggregated View

Reactant	Allergy Type	Verification Date	Observation/Historical	Site
Acetic Acid	DRUG		HISTORICAL	Madigan AMC-Fort Lewis*
Actonel	Drug Allergy			MedVirginia - HIE*
Actonel	Drug Allergy			MedVirginia - HIE*
Actonel	Drug Allergy			MedVirginia - HIE*
ALBUTEROL	DRUG	05/18/2006 11:23	HISTORICAL	EL PASO VA HCS*
AllerClear	DRUG		HISTORICAL	Madigan AMC-Fort Lewis*
ALOE VERA	DRUG	06/21/2006 11:26	OBSERVED	EL PASO VA HCS*
ASPIRIN	DRUG	09/25/2009 16:15	OBSERVED	SAN DIEGO HCS*
BARIUM SULFATE	DRUG	06/21/2006 13:49	HISTORICAL	EL PASO VA HCS*
BENZOCAINEPINE ALLERGY	DRUG		HISTORICAL	Madigan AMC-Fort Lewis*
BUPROPION	DRUG	06/21/2006 13:31	HISTORICAL	EL PASO VA HCS*
Caffeine	DRUG		HISTORICAL	Madigan AMC-Fort Lewis*
CALCIUM	DRUG	06/21/2006 13:54	HISTORICAL	EL PASO VA HCS*
CHOCOLATE	DRUG, FOOD	08/26/2010 10:17	HISTORICAL	EAST ORANGE-VA NEW JERSEY HCS*
codeine	Drug Allergy	10/27/2010 00:00		MedVirginia - HIE*
Codeine Phos (From ROBITUSSIN A-C)	allergy to substance			Inland Northwest Health Services (INHS) - HIE*
ELEPHANT DANDER	allergy to substance			Inland Northwest Health Services (INHS) - HIE*
GUAFENESIN (From ROBITUSSIN A-C)	allergy to substance			Inland Northwest Health Services (INHS) - HIE*
HOLY BASIL	propensity to adverse reactions to drug	12/05/2013 00:00		Hawaii Pacific Health Information Exchange*
hydrocortisone	Drug Allergy	01/20/2014 00:00		MedVirginia - HIE*
HYDROPHYLIC PETROLATUM	DRUG	06/21/2006 11:50	HISTORICAL	EL PASO VA HCS*
IODINE (INCLUDES RADIOACTIVE AGENTS W/IODINE)	DRUG		HISTORICAL	Madigan AMC-Fort Lewis*
IODINE CONTRAST EVEN WITH PREP	DRUG	06/22/2006 10:34	HISTORICAL	EL PASO VA HCS*
NO KNOWN DRUG ALLERGIES (NKDA)	allergy to substance			Inland Northwest Health Services (INHS) - HIE*
Not Assessed				SOUTH TEXAS HCS
Not Assessed				VA PACIFIC ISLANDS HCS
Not Assessed				ORLANDO VAMC
Not Assessed				ASHEVILLE VAMC
Not Assessed				ST. LOUIS MO VAMC-JC DIVISION
Not Assessed				RICHMOND VAMC
Not Assessed				CHARLESTON VAMC
Not Assessed				SPOKANE VAMC
Not on File	propensity to adverse reactions			Multicare Health System*
OXYCODONE	DRUG	06/14/2010 09:32	HISTORICAL	HAMPTON (VAMC)*
OXYCODONE-ACETAMINOPHEN	Drug Allergy			MedVirginia - HIE*
OXYCODONE-ACETAMINOPHEN	Drug Allergy			MedVirginia - HIE*

Figure 57: Chemistry and Hematology Grid-style report

Test Name	Date/Time	Result	Units	Reference Range	Abn	Site	
WBC	05/16/2013 11:45	15.2	H	10.03/uL	4-10	SOUTH TEXAS HCS	
AST	05/16/2013 11:45	45	IU/L	13-47		SOUTH TEXAS HCS	
SGOT	05/13/2013 10:12	87	H	U/L	5-34	ST. LOUIS MO VAMC-JC DIVISION	
HIV COMBO (STI-NA)	05/13/2013 10:11	POSITIVE	HH	NEGATIVE	TEST PATIENT	ST. LOUIS MO VAMC-JC DIVISION	
HGB	05/13/2013 10:11	12.8	L	g/dl	13.1-16.8	ST. LOUIS MO VAMC-JC DIVISION	
WBC	05/13/2013 10:11	11.2		K/mm ³	3.6-11.2	ST. LOUIS MO VAMC-JC DIVISION	
Hemoglobin	12/14/2011 00:00	13.3	g/dL	-Not Available -	11.6-15.5	Inland Northwest Health Services (INHS) - HIE*	
Hematocrit	12/14/2011 00:00	40.9	%	-Not Available -	35.0-46.0	Inland Northwest Health Services (INHS) - HIE*	
Erythrocytes	12/14/2011 00:00	4.55	M/uL	-Not Available -	3.80-5.20	Inland Northwest Health Services (INHS) - HIE*	
Erythrocyte mean corpuscular hemoglobin	12/14/2011 00:00	34.9	pg	H	27.0-34.0	Inland Northwest Health Services (INHS) - HIE*	
Erythrocyte mean corpuscular volume	12/14/2011 00:00	86.2	fL	-Not Available -	80.0-100.0	Inland Northwest Health Services (INHS) - HIE*	
Glomerular filtration rate/(Click to view the detail for row #3)	12/14/2011 00:00	>60		-Not Available -	>60	Inland Northwest Health Services (INHS) - HIE*	
Albumin	12/14/2011 00:00	3.9	g/dL	-Not Available -	3.5-5.0	Inland Northwest Health Services (INHS) - HIE*	
Bilirubin	12/14/2011 00:00	1.0	mg/dL	-Not Available -	0.1-1.5	Inland Northwest Health Services (INHS) - HIE*	
Alanine aminotransferase	12/14/2011 00:00	55	U/L	H	-Not Available -	5-50	Inland Northwest Health Services (INHS) - HIE*
Aspartate aminotransferase	12/14/2011 00:00	34	U/L	-Not Available -	5-40	Inland Northwest Health Services (INHS) - HIE*	
Alkaline phosphatase	12/14/2011 00:00	25	U/L	L	-Not Available -	38-110	Inland Northwest Health Services (INHS) - HIE*
Creatinine	12/14/2011 00:00	0.55	mg/dL	-Not Available -	0.40-1.00	Inland Northwest Health Services (INHS) - HIE*	
Anion gap_4	12/14/2011 00:00	4	mmol/L	L	-Not Available -	5-16	Inland Northwest Health Services (INHS) - HIE*
Carbon dioxide	12/14/2011 00:00	22	mmol/L	-Not Available -	21-28	Inland Northwest Health Services (INHS) - HIE*	
Urea nitrogen	12/14/2011 00:00	8	mg/dL	-Not Available -	7-23	Inland Northwest Health Services (INHS) - HIE*	
Protein	12/14/2011 00:00	9.0	g/dL	H	-Not Available -	6.3-8.0	Inland Northwest Health Services (INHS) - HIE*
Calcium	12/14/2011 00:00	9.7	mg/dL	-Not Available -	8.5-10.5	Inland Northwest Health Services (INHS) - HIE*	
Glucose	12/14/2011 00:00	66	mg/dL	-Not Available -	65-99	Inland Northwest Health Services (INHS) - HIE*	

Figure 58: ALL OUTPATIENT PHARMACY PROFILE

All Outpatient CHDRZZTESTPATIENT.CHRDRNE (666-00-0001) medical record

Logoff

VTA
 Sites
 Care Team
 Allergies*†
 Appointments
 Patient Information
 Visits/Admissions
 Diagnostics
 Consults and Procedures†
 Consults (DoD Remote Data Only)
 Discharge Summaries†
 Laboratory †
 Anatomic Path Reports
 Medicine †
 Abnormal
 Brief Report
 Full Captioned
 Full Reports
 Medicine Procedures†
 Orders
 Outpatient Encounters/GAF
 Pharmacy †
 Active Outpatient
 Medications
 All Outpatient Pharmacy†
 Outpatient Rx Profile
 Active IVs
 All IV
 Unit Dose
 Med Admin ltx (BCMA)
 Med Admin Log (BCMA)
 HerbaOTC/Non-VA Meds
 Problem List†
 Progress Notes†
 Other Notes
 Radiology †
 Surgery Reports†
 Vital Signs*†
 Health Summaries (Non-VA) for TREATMENT only†
 Health Summaries (HON)

Warning! Avoid using "Back" button

patient selection

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Date Range: 15 Months Two Years All Results

The data is limited with Expiration Date of the drug to the dates specified. To get more data, select a different date range (broader date ranges will take longer to retrieve.)

Date range information for [NwHIN data](#)
[Print Report](#)

Medication	Rx#	Status	Qty	Exp./Canc Date	Issue Date	Last Fill Date	Rem	Provider	Cost/Fill	SIG	Site
Amoxicillin 500.3K Or Caps	150603700	Active	20		03/05/2013			Selected, No		Take 1 Cap by mouth three times a day.	Multicare Health Systems
Lisinopril		Active						Chinault, Sheila		Lisinopril tablet 5 mg 1 oral	MedVirginia - HIE†
Flixonin TABLET	0001_M_Z00002750	ACTIVE							0.25 MG		Inland Northwest Health Services (NHS) - HIE†
Fluoxetine TABLET	0002_M_Z00002750	ACTIVE							20 MG		Inland Northwest Health Services (NHS) - HIE†
Omeprazole Capsule	0003_M_Z00002750	ACTIVE							10 MG		Inland Northwest Health Services (NHS) - HIE†
Zolpidem TABLET	0004_M_Z00002750	ACTIVE							5 MG		Inland Northwest Health Services (NHS) - HIE†
Not on file		completed									Hawaii Pacific Health Information Exchange†
Acetaminophen 325MG TAB	9332696	EXPIRED	1	09/05/2013	08/06/2013	08/06/2013	0	LEE,MELINDA Y	0.004	TAKE TWO TABLETS BY MOUTH EVERY 4 HOURS AS NEEDED FOR PAIN	SAN DIEGO HCS

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Non-VA Clinical Notes

Some Non-VA partners also send clinical notes to VA. These notes can be found in the VistaWeb menu under Consults and Procedures, Discharge Summaries, Medicine->Medicine Procedures, Progress Notes, Radiology, and Surgery Reports.

Figure 59: Non-VA Clinical Notes

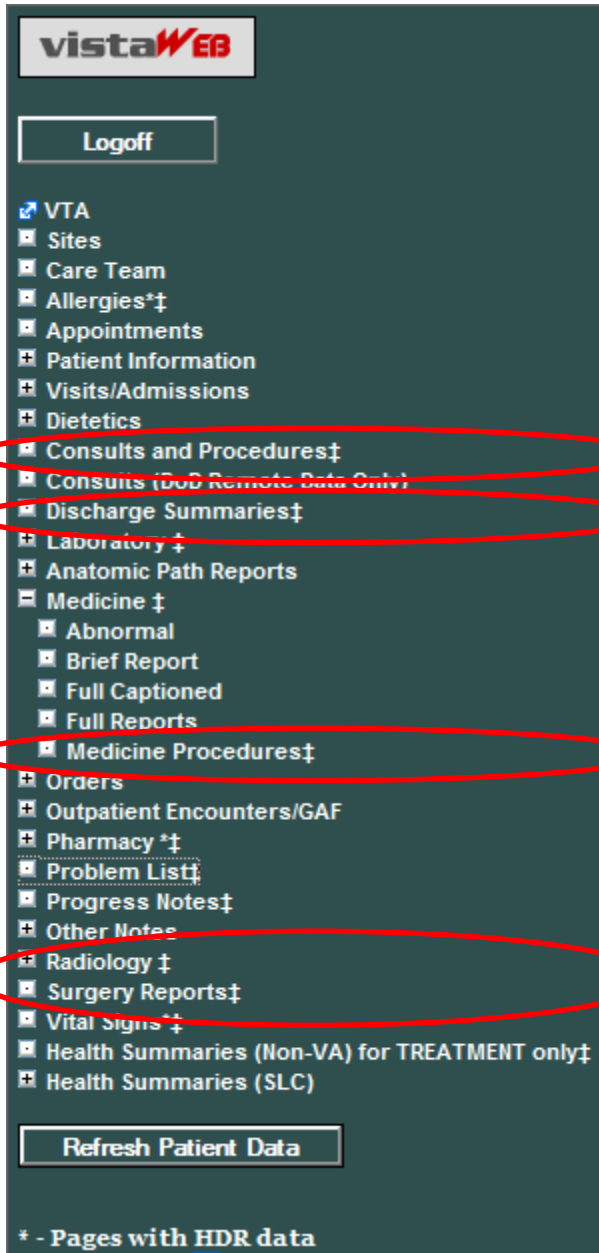


Figure 60: Procedures Notes

vistaWEB medical record

Medicine Procedures CHDRZZTESTPATIENT,CHDRONE (666-00-0001)

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Date Range: Today One Week Two Weeks One Month Two Months Six Months One Year Two Years All Dates Query

Date range information for [NwHIN data](#)
[Print Report](#)

Procedure Name	Date	Summary	Site
CHEST PA LATERAL	02/10/2010 00:00	See View Detail link...	MedVirginia - HIE*
SURGICAL PATHOLOGY	02/12/2010 00:00	See View Detail link...	MedVirginia - HIE*

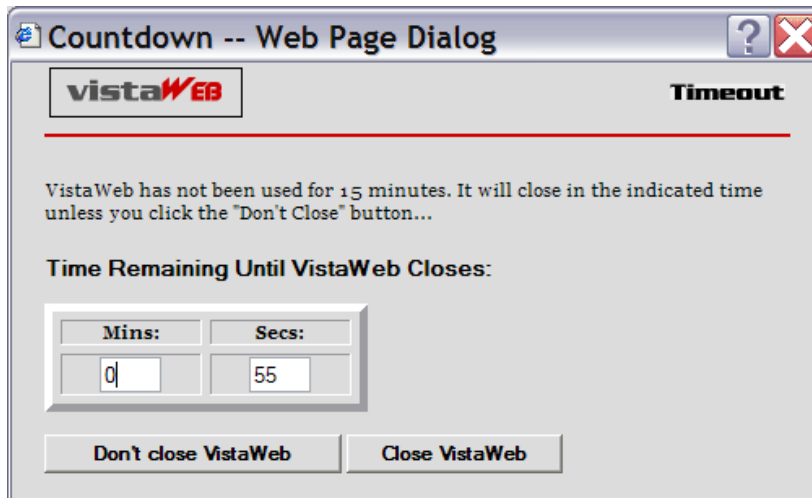
[\[back to top\]](#)

- Logoff
- VTA
- Sites
- Care Team
- Allergies*††
- Appointments
- Patient Information
- Visits/Admissions †
- Dietetics
- Consults and Procedures††
- Consults (DoD Remote Data Only)†
- Discharge Summaries††
- Histories and Questionnaires (DoD Remote Data Only)††
- Laboratory ††
 - Autopsy
 - Blood Availability
 - Blood Transfusion
 - Blood Bank Report
 - Surgical Pathology†
 - Cytology†
 - Electron Microscopy†
 - Lab Orders†
 - Chem & Hematology††
 - Microbiology†
 - Lab Summaries
 - Pathology Studies (Non-VA Only)†
- Anatomic Path Reports
- Medicine †
 - Abnormal
 - Brief Report
 - Full Captioned
 - Full Reports
 - Medicine Procedures†
- Orders
- Outpatient Encounters/GAF †
- Pharmacy *††
- Problem List††
- Progress Notes††
- Other Notes
- Radiology ††
- Surgery Reports†
- Vital Signs*††
- Health Summaries (Non-VA) for TREATMENT only†
- Health Summaries (ROI)
- Health Summaries (CHA)
- Health Summaries (IUS)

VistaWeb Timeout

VistaWeb has a 15-minute inactivity timeout, which disconnects you from the current session if you don't respond to the 2-minute Web Page Dialog Countdown. Click the *Don't close VistaWeb* button to reset the timer to 15 minutes. Click the *Close VistaWeb* button to exit VistaWeb immediately.

Figure 61: VistaWeb Timeout Dialog Box



If you allow VistaWeb to timeout, the following IE dialog box is displayed telling you that VistaWeb is trying to close the window. If you click the No button, an empty IE window will remain. If you want to continue to use VistaWeb, you will have to reestablish your connection, and since VistaWeb will bring up the new session in a new window anyway, you should click the Yes button to eliminate this empty window.

Figure 62: IE Close Dialog



Under some circumstances, VistaWeb will cease operations. This is usually related to running a standalone session and a spawned session of VistaWeb at the same time. When this occurs, you will be presented one of the following messages indicating an appropriate course of action for you to pursue.

Figure 63: Empty Session Message – Rerun VistAWeb

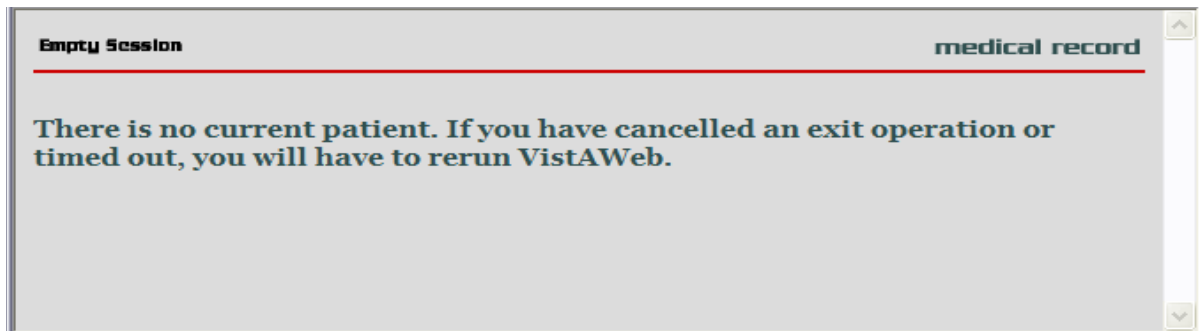
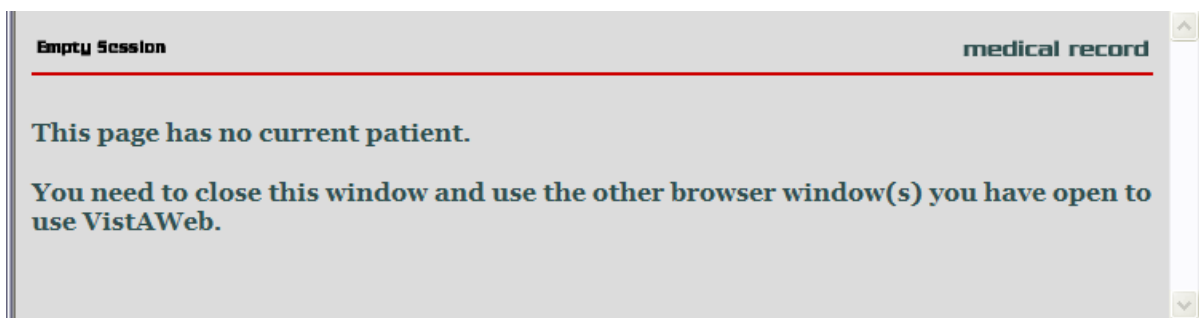


Figure 64: Empty Session Message – Use a Different Browser Window



Glossary: Acronyms, Abbreviations, and Definitions

Term	Definition
AWIV	Advanced Windows Imaging Viewer
BHIE	Bidirectional Health Information Exchange
CCOW	Clinical Context Object Workgroup
CPRS	Computerized Patient Record System
DoD	Department of Defense
FHIE	Federal Health Information Exchange
HDR	Health Data Repository
HDR II	Health Data Repository II – final stage of project to develop and deploy an HDR
HDR-IMS	Health Data Repository-Interim Messaging Solution
HITSP	Healthcare Information Technology Standards Panel
HL7	Health Level 7
HT	Home Telehealth
IE	Internet Explorer (Microsoft)
IHS	Indian Health Service
IRM	Information Resource Management
ISO	Information Security Officer
LHR	Legal Health Record
MPI	Master Patient Index
RDV	Remote Data View
RPC	Remote Procedure Call
URL	Uniform Resource Locator (internet address)
VA	Department of Veterans Affairs
VAMC	Department of Veterans Affairs Medical Center
VHA	Veterans Health Administration
VISN	Veterans Integrated Service Network
VistA	Veterans (Health) Information Systems and Technology Architecture

Definitions

http://vaww.oed.wss.va.gov/process/Library/master_glossary/masterglossary.htm

Term	Definition
Application Coordinator	Designated individuals responsible for user-level management and maintenance of an application package, such as CPRS or Laboratory. Also abbreviated as ADPAC (Automated Data Processing Application Coordinator) or CAC (Clinical Application Coordinator)
Austin Information Technology Center (AITC)	The AITC (a.k.a. Austin Automation Center (AAC)) provides comprehensive e-government solutions to match the critical needs of VA and other federal agency customers, from managing data to automating business processes. The AITC supports over 100 customer applications that provide mission critical data for financial management, payroll, human resources, logistics, medical records, eligibility benefits and supply functions.
Business Owner	A key stakeholder (individual or entity) that is accountable for the business outcomes for a particular existing or new Information Technology (IT) system and has the final authority on project scope, deliverables, quality, risks, and change management processes.
Computerized Patient Record System	The Computerized Patient Record System (CPRS) is a VistA application that enables users to enter, review, and continuously update all the information connected with any patient. In addition, CPRS supports clinical decision-making, with order-checking, alerts, clinical reminders, and patient record flags.
Data Standardization Program	The development, adoption, implementation, and verification of standard terminology within VA software applications to promote interoperability of patient record data between VA and non-VA healthcare providers and to ensure that clinical decisions are based on each patient's entire medical record. Program scope includes standard clinical and administrative terminologies for both current and future VA software applications. (Also see data standardization.)
Domain	Medical areas such as Allergies, Consults, Notes, Laboratory, Medical Procedures, etc. An area of knowledge or activity characterized by a family of related systems. An area of knowledge or activity characterized by a set of concepts and terminology understood by practitioners in that area.
Double dagger (‡)	The double dagger is a symbol that is displayed next to VistAWeb domains to indicate that eHealth Exchange (non-VA) data is available.
Enterprise System Engineering (ESE)	ESE replaces Testing Service, IVV, and Enterprise Infrastructure Engineering (EIE)
Federal Health Information Exchange (FHIE)	The Federal Health Information Exchange (FHIE) Program is a Federal IT health care initiative that facilitates the secure electronic one-way exchange of patient medical information between Government health organizations. The project participants are the Department of Defense (DoD) and the Department of Veterans Affairs (VA).

Term	Definition
Healthcare Information Technology Standards Panel (HITSP)	The Healthcare Information Technology Standards Panel is a cooperative partnership between the public and private sectors. The Panel was formed for the purpose of harmonizing and integrating standards that will meet clinical and business needs for sharing information among organizations and systems.
Health Data Repository	A repository of clinical information normally residing on one or more independent platforms for use by clinicians and other personnel in support of patient-centric care. The data is retrieved from heritage, transaction-oriented systems and is organized in a format to support clinical decision-making in support of patient care. Formerly known as Clinical Data Repository.
HL7	Health Level Seven is one of several American National Standards Institute (ANSI) -accredited Standards Developing Organizations (SDOs) operating in the healthcare arena.
Initial Operating Capability (IOC) Testing	Initial Operating Capability (IOC) Testing (formerly known as field testing) is when a product/system that has been modified/enhanced is placed into a limited production (live) environment, which includes a minimum of three test sites of varying size/complexity, in order to test the new features and functionality of the product/system and to ascertain if the features and functionality perform as expected and do not adversely affect the existing functionality of the product/system.
Requirements	User needs that trigger the development of a program, system, or project. Requirements may be business, functional, and/or system needs. They are documented in detail in the Requirements Specifications Document (RSD) document.
Subject Matter Experts (SME)	Persons representing application development/functional requirements.
User Acceptance Testing (UAT)	UAT is a type of acceptance test that involves end-users as testers. User Acceptance Test (1) exercises the functionality of the application using test data in a controlled test environment and (2) evaluates the usability of a component or system. The Program Manager may invite Product Support to participate in this evaluation.
Veterans Health Administration (VHA)	VHA facilities are divided into geographical regions called VISNs. In the 1990s VHA organized into 22 administrative VISN regions. VISN 20 services veterans in Alaska, Idaho, Oregon, and Washington. However each individual facility continued to maintain its own clinical database (VISTA); the databases were not integrated as a VISN. In 1997-98 VISN 20 began an initiative called CHIPS, to develop a VISN wide information system for decision support, performance measuring and population studies.
VHA Health Information Model (VHIM)	VHIM is an enterprise-wide initiative developed to guide the re-engineering of VHA systems. It is a UML-based model that classifies and represents data elements, including their relationships and constraints. The VHIM mitigates risk of project failure by creating standardized service payloads that all systems will understand. It is a computationally independent model, meaning it can be transformed to different implementations – such as XML, Java, Delphi, etc. It is the authoritative source for semantics and information structure for VHA.

Term	Definition
Veterans Health Information Systems And Technology Architecture (VISTA)	<p>A term used to describe the VA's health care information system. It encompasses in-house developed applications developed by VA staff (see Decentralized Hospital Computer Program), office automation applications, locally developed applications, and commercial-off-the-shelf applications. VISTA is the largest healthcare system in the world and is extremely complex. The majority of the historical VISTA documentation is out of date and does not provide the detailed information needed by development teams. The development of the current VISTA environment occurred by evolution and was triggered by needs; it was not designed as a whole system. Therefore, the software code, relationships, data structure, and infrastructure were developed incrementally, in individual applications and functions, and are very interdependent.</p>