

# Outline of 2014 PTOS Manual Additions, Deletions, and Revisions

# PTOS PT. INCLUSION CRITERIA

- Within **Excludes** notes
- Previously:
  - ~~'ICD-9 code 996.44 (Fracture around prosthetic hip joint) falls outside of inclusion range. **Exclude regardless of mechanism.'**~~
- For 2014 changed to:
  - '**Peri-prosthetic fractures with a traumatic mechanism should be coded to the traumatic fracture area.'**
    - AHA Coding guidelines state that fxs with a traumatic mechanism should be assigned the appropriate traumatic fracture code.

# PTOS PT. INCLUSION CRITERIA

- Added to **Excludes** notes:
  - **'Diagnosis codes 930-939.9 (Effects of Foreign Body Entering Through Orifice) should be excluded.'**
- Matches NTDB population excludes criteria

# DEMOGRAPHIC DATA

- **Height of Fall** - 'Fall from bed of pickup truck' has been added as an example of a **Fall of 2 to 5 feet** in the Additional Information section. It now reads as follows:
  - 'The following distance should be used when determining the height of a fall when the patient has fallen from a bicycle, toilet, chair, bed or other furniture, or **from the bed of pickup truck** - 2 to 5 feet.'

# PREHOSPITAL DATA

- **Patient Care Record (PCR) in Medical Record?** has been revised as follows:
  - **'Was PCR available?'**
  - Change made in the Scene/Transport and Referring Facility sections
  - PTSF standards no longer require PCR's to be included in the medical record, only that it be available. Some centers are not adding it to their EMR.

# PREHOSPITAL DATA

- **Referring Facility – Is This a Transfer Patient?** Clarification has been added to the additional information section. '**Urgent Care Center**' added to list of facilities pts. could be sent from, but **NOT** to be considered a transfer/referring facility.
  - 'A patient sent to your trauma center from a private doctor's office, **Urgent Care Center** or stand-alone ambulatory surgery center is not a referral'

# PREHOSPITAL DATA

- For element **Interhospital – Dates and Times**, the definitions in the PTOS manual for Dispatch, Arrive at Scene, and Leave Scene were incorrectly listed as the same as the Prehospital – Date and Time section. This has been corrected.

# PREHOSPITAL DATA

- New Element titled '**Referring Facility – Is there data/information available from outside facility?**'
  - **1 = Yes**
  - **2 = No**
  - **/ = Pt. came directly from scene, no outside facility**
- Skip for Referring Facility Information (Diagnostic/Therapeutic Interventions, etc.) fields will be based on this new question. Will enable facilities to enter information when a patient is brought by private vehicle from an outside hospital.



# PREHOSPITAL DATA

Demographic | Prehospital | Referring Facility | Acute Care | Clinical | Outcome | Dx | Procedures | Misc | Rec Fac Dx | Level IV PI

Referring Facility | Referring Facility Occurrences and Vitals | Interhospital Transport

Is this a transfer patient?  No  Yes

Is there data/information available from outside facility?  Yes

Admission  :  Discharge

Diagnostic Interventions at Referring Facility:

<input type="text" value=""/>	<input type="text" value=""/>
<input type="text" value=""/>	<input type="text" value=""/>
<input type="text" value=""/>	<input type="text" value=""/>
<input type="text" value=""/>	<input type="text" value=""/>
<input type="text" value=""/>	<input type="text" value=""/>
<input type="text" value=""/>	<input type="text" value=""/>

Therapeutic Interventions at Referring Facility:

<input type="text" value=""/>	<input type="text" value=""/>
<input type="text" value=""/>	<input type="text" value=""/>
<input type="text" value=""/>	<input type="text" value=""/>
<input type="text" value=""/>	<input type="text" value=""/>
<input type="text" value=""/>	<input type="text" value=""/>
<input type="text" value=""/>	<input type="text" value=""/>

Referral from Facility #

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1. Yes  
2. No  
/. Inappropriate - Patient Came Directly from Scene, No Outside Facility

# PREHOSPITAL DATA

- **'Is there data/information available from outside facility?'** is enabled when **'Is this a transfer patient?'** = No.
- Answering Yes to **'Is there data/information available from outside facility?'** will enable Admission and Discharge Date/Time, Diagnostic and Therapeutic Interventions, Referral from Facility #, Unresolved Occurrences, **'Is referring facility clinical data available'**, and the Interhospital Transport screen. (Answering yes to **'Is referring facility clinical data available'** will enable the vitals and drug screen fields.)

# PREHOSPITAL DATA

- A data entry check will be triggered when **'Is there data/information available from outside facility?'** is blank.
- Data entry checks for existing Referring Facility elements have not been changed. Checks requiring these elements to be filled are still only triggered when **'Is this a transfer patient?'** = Yes.
- The new field has been added to the Data Completeness Report. Applicability rules for existing Referring Facility data elements have been modified to be applicable when **'Is this a transfer patient'** = Yes or when **'Is this a transfer patient'** = No and **'Is there data/information available from outside facility'** = Yes.

# PREHOSPITAL DATA

- The **Demographics Report – Type of Admission** section has been modified to include these groups:
  - Transfer In - Defined as: 'Is this a transfer patient?' = Yes
  - Direct from Scene - Defined as: 'Is this a transfer patient?' = No and 'Is there data/information available from outside facility?' = N/A. (Note: For legacy records, 'Is this a transfer patient?' = No and 'Is there data/information available from outside facility?' = blank will also be counted in this group.)
  - Non-medical Transport from Outside Facility – Defined as: 'Is this a transfer patient?' = No and 'Is there data/information available from outside facility?' = Yes or No.
- A pre-defined query, `NONMED_TRANS_OUT_FAC`, for Non-medical Transport from Outside Facility has been added to the data elements pick list.

# PREHOSPITAL DATA

- **Ambulance Unit #** is no longer a required element
  - It will be changed to an optional/**blue** element in the Scene/Transport and Interhospital sections
  - Ambulance Unit # is difficult to collect and not standardized in the EMS community
  - Not necessary for mapping to NEMESIS data

# PROCESS OF ACUTE CARE

- New element title **Admitting Attending Trauma Surgeon**
  - Will allow hospitals to capture the attending at the activation as well as the admitting attending, which can be different. This will be an element that is not submitted to PTOS ('white' element).

# CLINICAL DATA

- **On Admission – Drug Screen – Clarifying language has been added stating that the ETOH and drug screen must be drawn within 24 hours of ED admission in order for the value to be captured in the registry.**
- **'ETOH and drug screen must be drawn within 24 hours of ED admission in order for the value to be captured in the registry.'**

# OUTCOME DATA

- A choice of '**o – None**' has been added to the **Consult** section
- There was concern that having no consults entered on a record did not trigger a check, and that there was no choice of 'none' for consults
- Element order will be switched, placing the consult specialty first and the date second, with a check based on consult specialty
- For records added in the 2014 Collector, a data entry check will be triggered if the first consult specialty is left blank
- The Volume Utilization Report has been modified to include 'o, None' in the Consults section. (Note: For legacy data, records with no consult information will be counted in this group.)



# OUTCOME DATA

- On the **Occurrence Location** menu, choice **12 (Pre-Hospital)** has been deleted and two new menu choices, **15 (EMS Provider)** and **16 (Referring Facility)** have been added
- All previously entered data in Occurrence Location fields will remain as-is. Existing records with an entry of 12 in Occurrence Location can continue to be reported on and the 'As-Text' description for the value of 12 will be maintained.

# OCCURRENCES

- The 2014 NTDB Complication definitions have been formally added to the manual for PTOS Occurrences that have adopted the NTDB definitions

# OCCURRENCES

- NTDS Occurrence numbers in the PTOS manual did not match the Collector NTDS Occurrence numbers. Formerly listed as 200-204, they are now numbered 201-205.
  - 201 = Drug or alcohol withdrawal syndrome
  - 202 = Unplanned intubation
  - 203 = Unplanned return to the OR
  - 204 = Unplanned return to the ICU
  - 205 = Stroke/CVA

# OCCURRENCES

- The definition for **Occurrence 20, Acute Respiratory Distress Syndrome (ARDS)** has been revised to match the 2014 NTDB definition, as well as exclude '**inhalation injury**'
  - '...It is a form of sudden and often severe lung failure that is usually characterized by  $\text{PaO}_2/\text{FiO}_2 < 300$  mmHg, bilateral fluffy infiltrates seen on a frontal chest radiograph, and an absence of clearly demonstrable volume overload (as signified by pulmonary wedge pressure  $< 18$  mmHg, if measured, or other similar surrogates such as echocardiography which do not demonstrate analogous findings), **or without associated clinical evidence of inhalation injury.**

# OCCURRENCES

- The definition for **Occurrence 21, Acute Respiratory Failure** has been revised to exclude **'treatment of inhalation injury'**
- 'The need for prolonged ventilatory support after a period of normal non-assisted breathing (minimum of 48 hours) or reintubation
  - A. planned – do not report (i.e., taken to OR, **or treatment of inhalation injury**)

# OCCURRENCES

- The definition for **Occurrence 26, Pneumonia** has been revised to exclude **'clinical evidence of inhalation injury'**
  - 'Patient with evidence of pneumonia that develops during the hospitalization **without clinical evidence of inhalation injury...**'

# PRE-EXISTING CONDITIONS

- The 2014 NTDB Co-morbid Condition definitions have been formally added to the PTOS manual for PTOS Pre-existing Conditions that have adopted the NTDB definitions

# PRE-EXISTING CONDITIONS

- **Pre-existing Condition D.02 – Warfarin Therapy (i.e., Coumadin) has been renamed **Reversible Anticoagulant Therapy**.**
- A drug list for the group will be provided in the 2014 manual



# PRE-EXISTING CONDITIONS

- **Pre-existing Condition D.07 – Pradaxa Therapy** has been renamed **Non-Reversible Anticoagulant Therapy**
- A drug list for the group will be provided in the 2014 manual

# PRE-EXISTING CONDITIONS

- **Pre-Existing Condition N.01 – Chronic Ongoing Drug Abuse** has been renamed **Drug Abuse or Dependency** to match the NTDS Co-Morbid Condition name

# NTDS Physical Abuse Fields

- Two fields have been added to the Outcome - Discharge – Additional NTDS Elements button screen: **'Report of Physical Abuse'** and **'Investigation of Physical Abuse'**.
- These new fields will be enabled for patients with age  $\geq$  18 years. These fields are not included in the transfer to PTSF.

# NTDS Physical Abuse Fields

The screenshot shows a software window titled "Outcome NTDS" with a menu bar containing "Record", "Edit", and "Navigate". Below the menu bar is a tab labeled "NTDS Elements". The main area contains the following fields:

- "Hospital Discharge Home" with a checkbox and an adjacent empty text input field.
- "Report of Physical Abuse" with a checkbox and an adjacent empty text input field.
- "Investigation of Physical Abuse" with a checkbox and an adjacent empty text input field.

Below these fields is a note: "(For ages < 18, the abuse elements are entered on the Abuse tab of the Outcome section.)"

At the bottom center of the window, the text "CONFIDENTIAL - FOR PEER REVIEW PURPOSES ONLY" is displayed.

In the bottom left corner, there is a button with a green checkmark and the text "OK".

# NTDS Physical Abuse Fields

- For records with age < 18 years, these standard PTOS elements on the Outcome – Abuse tab will populate the new 2014 fields in the NTDB module:
  - ‘Was a report of suspected abuse made to civil authorities?’ will populate the NTDB element, ‘Report of Physical Abuse’.
  - ‘Was there a police investigation initiated because of this episode’ will populate the NTDB element, ‘Investigation of Physical Abuse’.
  - ‘Was child discharged to a different caregiver than when they were admitted?’ will populate the NTDB element, Caregiver at Discharge.

# NTDS Physical Abuse Fields

Demographic	Prehospital	Referring Facility	Acute Care	Clinical	Outcome	Dx	Procedures	Misc	Rec Fac Dx	Level IV PI
Discharge	Occurrences	If Death	Burn	Consults	Abuse					

Was the patient being evaluated for child abuse?

Was a report of suspected abuse made to civil authorities?

If yes

Was there a police investigation initiated because of this episode?

Was child discharged to a different caregiver than when they were admitted?

If yes   If Other:

# NTDS Element Changes

- **Triage Criteria** fields have been added to the Prehospital Additional NTDS Elements screen. Up to 10 Triage Criteria can be entered on this screen. These fields are not included in the transfer to PTSF.
- These fields will populate the new 2014 NTDB fields, Trauma Center Criteria, and Vehicular, Pedestrian, Other Risk Injury in the NTDB module

# NTDS Element Changes

**Prehospital NTDS**

Record Edit Navigate

NTDS Elements

Initial Field Oxygen Saturation

Triage Criteria

<input checked="" type="checkbox"/>	Glasgow Coma Score < 14
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

/, Not Applicable (None or Not EMS Transport)

- Trauma Center Criteria
  - 101, Glasgow Coma Score < 14
  - 102, Systolic Blood Pressure < 90 mmHg
  - 103, Respiratory Rate <10 or > 29 (<20 in infants aged <1 year) or Need for Vent Support
  - 104, Penetrating Injuries to Head, Neck, Torso, Extremities Proximal to Elbow or Knee
  - 105, Chest Wall Instability or Deformity
    - . (e.g., flail chest)
  - 106, Two or More Proximal Long-bone Fractures
  - 107, Crushed, Degloved, Mangled, or Pulseless Extremity
  - 108, Amputation Proximal to Wrist or Ankle
  - 109, Pelvic Fracture
  - 110, Open or Depressed Skull Fracture
  - 111, Paralysis
- Vehicular, Pedestrian, Other Risk Injury
  - 201, Fall Adults: > 20 ft.
    - . (one story is equal to 10 ft.)
  - 202, Fall Children: > 10 ft. or 2-3 Times the Height of the Child
  - 203, Crash Intrusion, Including Roof: > 12 in. Occupant site or > 18 in. Any Site
  - 204, Crash Ejection (partial or complete) from Vehicle
  - 205, Crash Death in Same Passenger Compartment
  - 206, Crash Vehicle Telemetry Data (AACN) Consistent with High Risk Injury
  - 207, Auto v. Pedestrian/Bicyclist Thrown, Run Over, or > 20 mph Impact
  - 208, Motorcycle Crash > 20 mph
- ?, Unknown

OK Cancel Search Show All

OK



# Standard Reports

- **Volume Utilization**
  - The Financial Classification section of the report has been expanded to report on Primary and Secondary Payor Class separately as well as combined
  - The report has been enhanced to eliminate the need to cycle through every record in the database. This will speed up overall run time for this report.

# Level IV PI (Registry Anywhere)

- The number of characters allowed in the text and memo fields in the Level IV PI section have been increased.

# POPIMS Update

- Definitive Update Schedule
- More than 61 total modifications
- Driven by changes in COLLECTOR and requests made by the *PTSF POPIMS Standardization Committee*
- The 2014 update contains enhancements and fixes to both the POPIMS Registry and the DI Report Writer

# Patient Information Section (26 changes)

- Screens were redesigned condensing this section from 15 screens to three screens
- “as text” added for all menu driven fields
- “Flag Record” field added. Contains a user defined dropped down menu with three predefined choices.
  - 1 Follow-up
  - 2 Re-evaluation
  - 3 For Next Review

PATIENT INFORMATION

Flag Record 2 Re-evaluation

Institution # 9999  
Trauma # 20120219  
PTOS Patient Y  
Linkage #

Demographics:

Medical Record Number: 6789  
Name (L/F/M): SMITH / James / Suffix: Occupation  
Age 52 in 1 DOB / / Sex 1 Male  
Cause of Injury E 882.0: Fall From or Out of Building/Other Structure Type of Injury 1 Blunt  
Specify: FELL THROUGH 15 FT ROOF WHILE WORKING ON GARAGE ROOF

Prehospital:

Scene: EMS : PCR  
Transport: EMS : PCR  
Referral: EMS : PCR  
Facility # :

Admission:

Entered ED 02/01/2012 @ 00:00 Admitting Service 1 Trauma Service (General) Vitals: SBP 116 Unassisted RR 16  
ED Discharge 02/01/2012 @ 04:54 Post ED Destination 1: ICU/Critical Care Unit GCS E 4 V 5 M 6 Total 15  
Intubated 2 No Controlled Resp Rate 2 No Paralyzing Drugs 2 No Pulse RTS 7.84  
Admitting Physician 999999: Remove this entry after customizing you Trauma Alert Change 1 Upgraded  
Trauma Attending :

Discharge:

Discharge Status 6 Alive Date/Time of Death/Discharge/Transfer 02/28/2012 @ 14:30  
Total Days in ICU 20 Step Down 7 [Hospital 27] Ventilator Days 16  
Discharge Destination 1: Home Comment HOME CARE  
Discharge to Facility # 143246: 1432-46, Abington Health-Lansdale PTOS Trauma Registry Status Active Record

Diagnosis: ISS 13 TRISS 0.992 ASCOT 0.999 Burn: 2nd 3rd Tot P(s) Alt P(s)  
COMMUNATED DISPLACED NASAL FX  
5 LT RIBS FXS (4,5,6,7,8)  
BILAT HPTX

Trauma Registry Abstractor  
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# Miscellaneous

# Patient Information Section

- “Was patient made DNR?” has been removed.
- Called Date and Time as well as Arrived Date and Time now coming over from COLLECTOR
- All Procedures are now displayed on a memo field. You do not need to scroll through pages of procedures.

**RESPONSE TIMES:**

	Called	Arrived	Time Mins PGY
Attending Emergency Physician	/ / @ : :	02 / 01 / 2012 @ 00 : 00	
Emergency Medicine Resident	/ / @ : :	01 / 31 / 2012 @ 23 : 50	3
Attending Trauma Surgeon	/ / @ : :	01 / 31 / 2012 @ 23 : 50	
Senior Trauma Resident	/ / @ : :	01 / 31 / 2012 @ 23 : 50	4
Junior Trauma Resident	/ / @ : :	02 / 01 / 2012 @ 00 : 30	1
Attending Neurosurgeon	/ / @ : :	/ / / /   @   :	
Neurosurgical Resident	/ / @ : :	/ / / /   @   :	
Attending Orthopaedic Surgeon	/ / @ : :	/ / / /   @   :	
Orthopaedic Resident	/ / @ : :	/ / / /   @   :	
Attending Anesthesiologist	/ / @ : :	/ / / /   @   :	
Anesthesiology Resident	/ / @ : :	/ / / /   @   :	
CRNA	/ / @ : :	/ / / /   @   :	

**PROCEDURES:**

- ED Procedures:**
- 02/01/12 00:05 - 88.79, \*Ultrasound, Diagnostic, Other - Trauma Service (Gene - -
  - 02/01/12 02:15 - 87.03, \*Computerized Tomography, Head - Trauma Service (Gene - -
  - 02/01/12 02:15 - 87.41, \*Computerized Tomography, Thorax - Trauma Service (Gene - -
  - 02/01/12 02:15 - 88.01, \*Computerized Tomography, Abdominal - Trauma Service (Gene - -
  - 02/01/12 02:15 - 88.38, \*Computerized Tomography, Other Axial (Bone and Sk - Trauma Service (Gene - -
  - 02/01/12 02:15 - 88.38, \*Computerized Tomography, Other Axial (Bone and Sk - Trauma Service (Gene - -
- OR Procedures:**
- 02/03/12 12:11 - 36.11, Aortocoronary bypass of one coronary artery - Thoracic Surgery Ser - -
  - 02/03/12 12:11 - 36.15, Single internal mammary-coronary artery bypass - Thoracic Surgery Ser - -
  - 02/03/12 13:24 - 88.72, \*Ultrasound, Diagnostic, Heart (Echocardiogram) - Other, Non-Surgical - -
  - 02/03/12 13:24 - 42.23, \*Esophagoscopy, Other - Other, Non-Surgical - -
  - 02/08/12 07:22 - 31.1, \*Tracheostomy, Temporary (Cricothyroidotomy) - Other, Surgical - -
- ICU Procedures:**
- 02/02/12 01:55 - 38.93, \*Venous Catheterization, not Elsewhere Classified - Trauma Service (Gene - -
  - 02/02/12 16:40 - 38.91, \*Arterial Catheterization - Trauma Service (Gene - -
  - 02/02/12 18:10 - 37.23, Combined right and left heart cardiac catheterizat - Other, Surgical - -
  - 02/02/12 18:10 - 88.55, Coronary arteriography using a single catheter - Other, Surgical - -
  - 02/02/12 18:10 - 37.61, Implant of pulsation balloon - Other, Surgical - -
  - 02/05/12 19:30 - 96.04, \*Insertion of Endotracheal Tube - Other, Non-Surgical - -
  - 02/05/12 19:30 - 96.72, \*Ventilation, Continuous Mechanical, > 96 Consecut - Other, Non-Surgical - -
  - 02/08/12 11:11 - 38.93, \*Venous Catheterization, not Elsewhere Classified - Trauma Service (Gene - -
- Med/Surg Floor Procedures:**

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# Patient Information Section

- The value for AIS Severity now displayed in a separate field labeled "Sev". In addition the ISS body region is now displayed in a separate field labeled "ISS BR"

**ANATOMICAL DIAGNOSIS**

**AIS Version** 5 **ISS** 13 **TRISS** 0.992 **ASCOT** 0.999

COMMINUTED DISPLACED NASAL FX  
5 LT RIBS FXS (4,5,6,7,8)  
BILAT HPTX

Total BSA [ ] [Burn P(s)] [Alternate Burn P(s)]

2nd 3rd 2nd+3rd

ICD9	Sev	ISS	PREDOT	ICD9	Sev	ISS	PREDOT	ICD9	Sev	ISS	PREDOT	ICD9	Sev	ISS	PREDOT	ICD9	Sev	ISS	PREDOT
802.0			251002																
807.05			450203																
860.4			442205																

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1 PatInfo 2 CaseMgmt 3 Meet 4 PECs 5 Issues 6 Audit 7 Outcome 8 Ref-ReEval 9 Log-TRUDE PgUp PgDn

Check Cancel Exit Help Narrative

Screen: 1.3 Record: J SMITH .20120219 Active

# Case Management Section

- Size of the display fields was increased to reduce scrolling
- New Consults section and will be displayed in date order.

CASE MANAGEMENT - OBJECTIVE REVIEW (continued)

Emergency Department/Resuscitation Details:

Trauma Designation: Highest Level
Team Call Date/Time: 02/01/12 at 00:00
Arrival at Hospital: 02/01/12 at 00:00
Physician Arrivals --
Attending Emergency Physician: 02/01/12 at 00:00
Emergency Medicine Resident: 01/31/12 at 23:50
Attending Trauma Surgeon: 01/31/12 at 23:50
Senior Trauma Resident: 01/31/12 at 23:50
Junior Trauma Resident: 02/01/12 at 00:30
Post ED Destination: ICU/Critical Care Unit
Transport to Post ED Destination: 02/01/12 at 04:54

Operative Procedures:

OR Procedures:
02/03/12 12:11 - 36.11, Aortocoronary bypass of one coronary artery
02/03/12 12:11 - 36.15, Single internal mammary-coronary artery bypass
02/03/12 13:24 - 88.72, \*Ultrasound, Diagnostic, Heart (Echocardiogram)
02/03/12 13:24 - 42.23, \*Esophagoscopy, Other
02/08/12 07:22 - 31.1, \*Tracheostomy, Temporary (Cricothyroidotomy)

Consults:

Consults:
02/01/12 - Social Services
02/01/12 - Case Management
02/20/12 - Speech Therapy
02/10/12 - Occupational Therapy
02/10/12 - Physical Therapy
02/02/12 - Nutrition
02/01/12 - Drug/Alcohol Counselor
02/01/12 - Psychiatry
02/04/12 - Other
02/02/12 - Cardiothoracic Surgery
02/01/12 - Plastic Surgery

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# Meeting Information Section

- Field label for “Merge Template Used” is changed to “Export Note to Template” to better describe its function
- The format of the field for “Related Issues” was adjusted. Related issues will be auto-populated in this field based on entries in the “Issues” and “Meetings Discussed” fields in the Issue section.

**MEETING INFORMATION**

Primary Meeting **M&M** Date **10/08/2013**

Attendees:

Related: **Acute Respiratory Failure**  
Issues **Iatrogenic Pneumothorax**  
**Myocardial Infarction**

**Discussion Notes:**

Test

Documents:  
Export Notes to Template:   
External Document Saved:

Open External Letter (press Y)

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# Issue Evaluation Section

- Four additional fields for “Meeting Discussed” were added. Allow for entry of five related meetings.
- New memo field named “Details” added after the “Actions” field. Can collect notes and comments about the Actions.
- “ACS Grade” was removed.
- Additional “Provider/Team ID” fields added

**ISSUE EVALUATION**    **Issue 1**    **OCC21**    **Acute Respiratory Failure**    **Copy from Issue #**

**Presented By**     **Date Identified** **2 / 5 / 2012**    **Issue Location** **3: ICU**

**Reporting Source**     **Ack/Reviewed:** **1** Reviewed in Committee

**Meetings Discussed**    **M&M**    **10 / 8 / 2013**     /  /

/  /

/  /

**Factors**           

           **Other**

**DETERMINATION STATUS**

**System Related:**    **In House**     **Out of House**     **Provider/Team Related:**    **In House**     **Out of House**

**Prov/Team IDs:**                   

**Comments:**

**Actions**           

      

**Details:**

**Loop Closure: Status**     **Date**  /  /

**Audit Issue**

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# Case Audit Section

- Menu for “Overall Appropriateness of Care” field has changed as follows:
  - 1, Acceptable
  - 2, Acceptable with Reservations
  - 3, Unacceptable

This matches the appropriateness of care language used during site survey.

# Referrals Section

- This section's name changed from Refer to Ref-ReEval.
- Two additional "Related Issue" fields were added allowing up to three to now be captured.
- The "Referred To" Menu space was increased to allow more entries.
- The Other Reviews/Re-Evaluation screen (was 9.1) now appears as part of the Ref-ReEval tab.

# Log Section

- This is a new section
- The  
Log Information" screen (10.1) displays the following audit log type information
  - "Record Created Using Interface on" – shows the date and time the record was created
  - "Record Modified by" – shows user name
- The last modified date/time will be displayed for the last five different User Names



# Miscellaneous

- When searching for records using the Record Search Parameters screen, the search results will now appear in the following order:
  - Records that match the criteria **exactly**
  - By most recent ED Arrival Date

# POPIMS Report Writer

- Any new fields will be available in Report Writer
- A new report is now available that allows you to open the Objective Review Summary report in in MS Word.
- A new report is now available that allows you to open the Meeting Summary report in MS Word.
- There will be a new Standard Report based on the Cribari Matrix for over/under triage.