Provider Utilities 1.0 (Patch OR\*3.0\*453)

User Guide: GUI Version



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Enterprise Program Management Office

Revision History

NOTE: The revision history cycle begins once changes or enhancements are requested after the document has been baselined.

Instructions for Revision History:

Place latest revisions at top of table.

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IMPORTANT NOTE: The term Personally Identifiable Information (PII) as defined in OMB Memorandum M-07-1616 refers to information that can be used to distinguish or trace an individual's identity, either alone or when combined with other personal or identifying information that is linked or linkable to a specific individual. The definition of PII is not anchored to any single category of information or technology. Rather, it requires a case-by-case assessment of the specific risk that an individual can be identified. In performing this assessment, it is important for an agency to recognize that non-PII can become PII whenever additional information is made publicly available — in any medium and from any source — that, when combined with other available information, could be used to identify an individual.

**Artifact Rationale**

Per the Veteran-focused Integrated Process (VIP) Guide, the User’s Guide is required to be completed prior to Critical Decision Point #2 (CD2), with the expectation that it will be updated as needed. A User Guide is a technical communication document intended to give assistance to people using a particular system, such as VistA end users. It is usually written by a technical writer, although it can also be written by programmers, product or project managers, or other technical staff. Most user guides contain both a written guide and the associated images. In the case of computer applications, it is usual to include screenshots of the human-machine interfaces, and hardware manuals often include clear, simplified diagrams. The language used is matched to the intended audience, with jargon kept to a minimum or explained thoroughly. The User Guide is a mandatory, build-level document, and should be updated to reflect the contents of the most recently deployed build. The sections documented herein are required if applicable to your product.

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Instructions for Table of Contents, Figures, and Tables:

List of Figures and List of Tables

In documents with five or more figures and/or tables, provide a separate list of figures and a separate list of tables.

NOTE: Table of Contents, List of Figures, and List of Tables should be generated using MS-Word commands, not manually created, so that page numbers can be updated programmatically.

Artifact Content Guidance

A User Guide is a required document if pertinent to your product. The project manager, as the authoritative source and in consultation with the technical writer, determines if a User Guide is a required artifact for the product.

It is difficult to provide a users’ guide template that fits all situations since applications vary so much in what they allow users to do. This template is put forth for the project manager or other writer to use in tailoring to the specific characteristics of the software and the project.

User Guides for distinct audiences can either include separate sections in a user guide or separate documents specific to audience (e.g., nurses, pharmacists, technicians, developers, etc.). Some examples of separate, optional documents might be:

* Developers Guide listing and detailing entry points and parameters related to the software’s Application Programming Interfaces (APIs), Remote Procedure Calls (RPCs), and other public interfaces. It can also include information on how to configure developer workstations/servers, troubleshoot and interpret exception messages, and use tools/utilities included in the application package, etc.
* Automated Data Processing Application Coordinators (ADPACs) guide, outlining the processes, functionality, and points of coordination specific to the role of an ADPAC
* Clinical Application Coordinators (CAC) guide, outlining the processes, functionality, and points of coordination specific to the role of a CAC

**ALERT: Delete all Instructional Text before publishing or distributing this document!**

# Introduction

## Purpose

The purpose of this guide is to familiarize the user with the Provider Utilities (sometimes called Provider Role Change) application that enables providers to reassign responsibilities for *qualifying patient orders* from a current provider to one or more new providers, in the case where a provider changes roles while remaining at the same site (for example, a provider who moves from VA to DOD but does not relocate). The goal is for the current provider *not* to receive notifications for orders written in the previous role, while being able to receive notifications for orders written in the new role. So that previously created orders are not “lost”, they are redirected to the newly assigned providers.

One way to think of Provider Utilities is to consider it a more advanced version of the CPRS Surrogates feature. The Surrogates feature lets you redirect all notifications from one provider to another – useful when one provider is on vacation. Provider Utilities redirects only selected notifications – those related to qualifying orders issued while the current provider was acting in a now-discontinued role or capacity at a given site.

Provider Utilities implements VA New Service Request (NSR) 20130504. The program is independent from CPRS, but works with CPRS GUI servers. It will eventually become available in various CPRS server releases (30 and later).

The Provider Utilities application swaps “qualifying” patient orders from an original provider (who has moved on and should no longer receive associated order notifications) to a substitute provider. The reassignment ensures that the original provider won’t receive any notifications associated with the orders in question, and the substitute provider will receive those notifications. A “qualifying” patient order is an open order issued by the original provider during a specified timer period (by default, the last calendar year).

The original case that led to this NSR was a provider who moved from VA to DOD while remaining at the same site. After the role change, the provider was no longer responsible for VA patients, and was instead responsible for DOD patients. The facility was in a difficult situation. If they assigned a surrogate for the original provider, that surrogate received order notifications for the original provider’s VA *and* DOD patients. If they did not assign a surrogate, the original provider continued to receive notifications for VA patients. They needed a solution that would let the original provider move on to new duties without the burden of receiving notifications for orders issued in the abandoned VA role.

## Document Orientation

### Organization of the Manual

Provide a list of the major sections of the User’s Manual (1.0, 2.0, 3.0, etc.) and a brief description of what is contained in each section.

Identify the roles this guide was written for and the job functions it addresses.

### Assumptions

* **Users:** Provider Utilities will be used by personnel that sites assign to reassign responsibility from one provider to another. It is assumed that using Provider Utilities will be an administrative function, perhaps performed by a Clinical Application Coordinator (CAC). The CAC can perform this function under the direction clinical personnel who can direct how qualifying orders will be reassigned to one or more different providers. However, this process is up to sites to decide on the process to reassign orders.
* **Accessibility:** Provider Utilities is fully compliant with Section 508 accessibility directives.
* **Provider Utilities GUI Interface:** Provider Utilities was built to run in the Microsoft Windows operating environment (usually referred to simply as Windows).

### Coordination

To use Provider Utilities, sites will need to coordinate the installation and make sure that the correct users have authorization to use the software.

* For installation, sites need to coordinate their local resources with the ITOPS support, if they are supported by them to install Provider Utilities. The site Computerized Patient Record System (CPRS) Coordinator may be involved in selecting which users will need to use Provider Utilities. It is anticipated that Clinical Application Coordinators (CACs) will be tasked with using Provider Utilities to reassign orders to new providers.
* The audience for this Provider Utilities User Guide consists of those resources that will be tasked with reassigning orders from providers who have changed roles but remain at a site to other providers at the site. As described later in this manual, clinical staff at the site should decide which orders need to be reassigned and to whom they should be reassigned.

### Disclaimers

#### Software Disclaimer

This software was developed at the Department of Veterans Affairs (VA) by employees of the Federal Government in the course of their official duties. Pursuant to title 17 Section 105 of the United States Code this software is not subject to copyright protection and is in the public domain. VA assumes no responsibility whatsoever for its use by other parties, and makes no guarantees, expressed or implied, about its quality, reliability, or any other characteristic. We would appreciate acknowledgement if the software is used. This software can be redistributed and/or modified freely if any derivative works bear some notice that they are derived from it, and any modified versions bear some notice that they have been modified.

#### Documentation Disclaimer

*The appearance of external hyperlink references in this manual does not constitute endorsement by the Department of Veterans Affairs (VA) of this Web site or the information, products, or services contained therein. The VA does not exercise any editorial control over the information you may find at these locations. Such links are provided and are consistent with the stated purpose of the VA.*

### Documentation Conventions

This manual uses several methods to highlight different aspects of the material.

* Descriptive text is presented in a proportional font (as represented by this font).
* **Note:** Notes are used to call a user’s attention to an important matter or idea. It will be in bold.
* **Warning:** This paragraph is a caution for users that if they do something, the result could be serious including loss of data.
* “Snapshots” of computer online displays (i.e., character-based screen captures/dialogs) and computer source code are shown in a non-proportional font and enclosed within a box.

Select OPTION NAME: XPAR EDIT PARAMETER Edit Parameter Values

Edit Parameter Values

* Also included are Graphical User Interface (GUI) Microsoft Windows images (i.e., dialogs or forms).

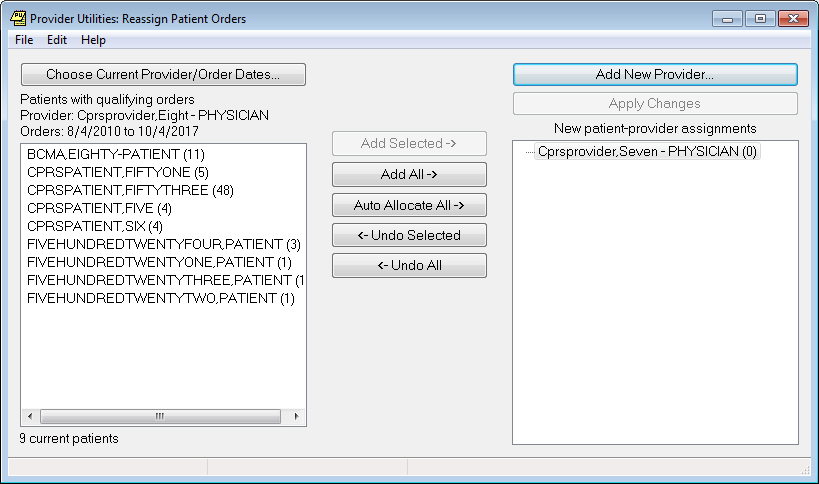


Figure : Provider Utilities server connection dialog

* User's responses to online prompts (e.g., manual entry, taps, clicks, etc.) will be **boldface** type.
* All uppercase is reserved for the representation of M code, variable names, or the formal name of options, field and file names, and security key (e.g., the XUPROGMODE key).
* Conventions for displaying TEST data in this manual are as follows:
* The first three digits (prefix) of any Social Security Numbers (SSN) will begin with either “000” or “666”.
* Patient and user names are formatted as follows:

<Application Name>”PATIENT”,<fictitious given name><NUMBER> and <Application Name>”USER”,<fictitious given name><NUMBER>, respectively:

The “Fictitious given name” represents a fabricated given name for the patient or user based on the application being released or the product name. For example, Master Veteran Index (MVI) software test patient and user names would be documented as follows:

CPRSpatient, One

CPRSprovider, Twenty

### References and Resources

#### World Wide Web

Provider Utilities documentation is also available on the VA Document Library (VDL). The online versions will be updated as needed. Please look for the latest version on the VDL: <http://DNS.URL>

#### Online Help

Instructions, procedures, and other information are available from the Provider Utilities online help file. You may access the help file by clicking **Help | Contents** from the menu bar or by pressing the F1 key while you have any Provider Utilities dialog open. Much of the information in this User Manual is also in the Provider Utilities online help.

## National Service Desk and Organizational Contacts

Table . Tier Support Contact Information”

| Name | Role | Org | Contact Info |
| --- | --- | --- | --- |
| CPRS Clinical Application Coordinator | Tier 0 Support | VHA | Local Clinical App Coordinator information should be available from your site. |
| OI&T National Service Desk | Tier 1 Support | OI&T | [PII](mailto:PII)  PII |
| Health Product Support | Tier 2 Support | VHA | [PII](mailto:PII)  PII |
| OI&T System Admin/Field Operation Support | Tier 2 & 3 support | OI&T | [PII](mailto:PII)  PII |
| VistA Patch Maintenance | Tier 3 Application Support | OI&T | [PII](mailto:PII)  PII |

# System Summary

This section should provide a general description of the system written in non-technical terminology and the purpose for which it is intended. The description should include a high-level system diagram with brief explanatory text. The summary should outline the uses of the system in supporting the activities of the user and staff.

* List and describe the major functions performed by the system
* Describe the architecture of the system in non-technical terms, (e.g., client/server, web-based, etc.)
* User access mode, (e.g., graphical user interface)
* Responsible organization
* System name or title
* System environment factors (e.g., memory requirements, browser release, plugins, display resolution, etc.)

Provider Utilities is a client-server GUI application that enables users to reassign existing orders from a provider who is changing roles but remaining at the same location to other providers as decided by clinical staff. An example would be if a provider was working for VA, but then took a position with a Department of Defense collocated site, then the user would still be there, but would no longer be responsible for the VA patients.

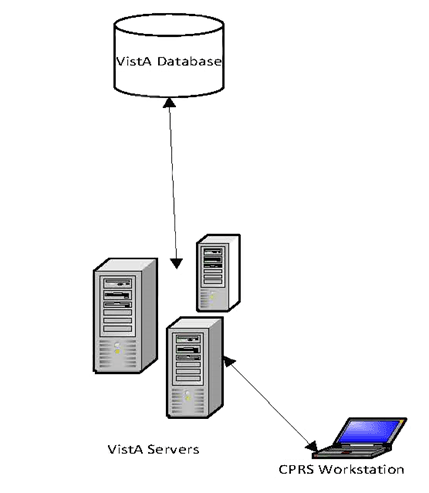
The Provider Utilities GUI is a front end application that interacts with the VistA database using CPRS communication protocols and affects which users receive notifications.

To launch Provider Utilities, users will either select an item from the CPRS Tools menu or Provider Utilities can be launched from an icon. The user will have to log in whether the application is launched from the CPRS Tools menu or from an icon.

Once logged in, the use can select the provider whose orders need to be changed and the date range for those orders. After selecting the provider, patients with orders from the selected provider display on the left of the window.

## System Configuration

Provider Utilities runs on workstations that also have CPRS on them. It communicates back and forth with servers that then interact with the VistA database as shown below.



## Data Flows

See above.

## User Access Levels

Because users will launch the Provider Utilities application from the CPRS Tools menu, they must have access to the CPRS application. In addition, only users who have been assigned the OR PU ACCESS key may use the Provider Utilities application.

## Continuity of Operation

As long as the VistA database is functioning and can be accessed, Provider Utilities should be available. The protection of data and other items are related to the VistA database, not Provider Utilities.

# Getting Started

## Logging On

Users can launch Provider Utilities directly from an icon or from the CPRS Tools menu. If the site chooses to use Provider Utilities from the Tools menu, CACs or other support personnel will have to add a menu item on the Tools menu for users who will reassign orders using the Provider Utilities GUI application.

When the Provider Utilities GUI application is launched, the user will be presented with a login screen.

## System Menu

### Logging in to Provider Utilities

When the user launches the Provider Utilities application, the application first briefly displays a server connection dialog and then the login screen where the user enters his or her access and verify code.

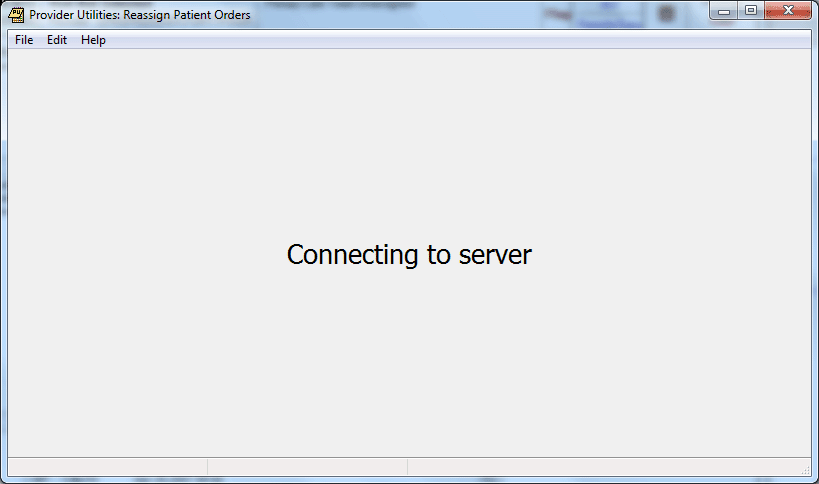


Figure : Provider Utilities server connection dialog

Once it has connected to the server, the dialog will continue to display in the background while the login screen displays as shown below.

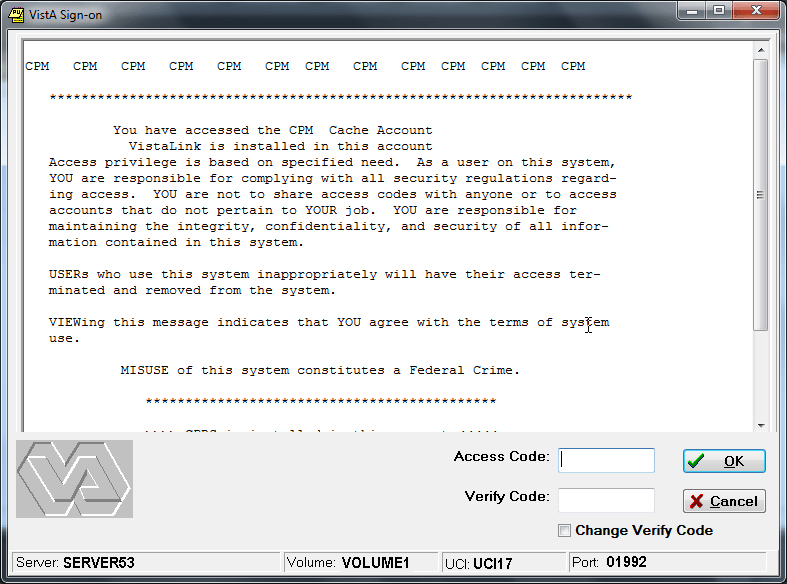


Figure : Provider Utilities login dialog

**Note:** The users will use the two-factor authentication (2FA), using their Personal Identification Verification (PIV) card and their Personal Identification Number (PIN) when it is ready. Until it is ready, users will use the same access and verify codes they use for CPRS or VistA to log in to Provider Utilities.

## Changing User ID and Password

Users will use the same credentials that they use to access VistA or CPRS. So, whenever those credentials need to be renewed, the same credentials will be used for Provider Utilities.

## Exit System

To exit the system, the user either selects the X in the upper right corner of the dialog or select File | Exit.

## Caveats and Exceptions

N/A

# Using the Software

## Preparing for a Provider Role Change

It’s important to properly research and prepare before attempting a provider role change. Remember that Provider Utilities, though it displays patient names, is actually reassigning *orders*, not patients. The program’s purpose is to make sure new notifications for recently issued orders go to a newly designated provider(s).

To successfully implement a provider role change using Provider Utilities, you should answer these questions before attempting a transfer…

1. **Who is changing roles?** The management team identifies the provider changing roles.
2. **What patients have qualifying orders?** The management team identifies patients who will be affected by the role change. Provider Utilities defines these patients as those who have qualifying orders issued by the provider changing roles during a specified time period.
3. **Who will receive order notifications for these qualifying orders?** The management team identifies the new provider(s) who will now manage the patients and orders formerly assigned to the departing provider.
4. **How far back are we going?** The management team also determines a default time period covered by the transfer, such as “all orders from one year ago until today at midnight”.
5. **How will we allocate transfers between multiple new providers?** The management team specifies how patients/orders will be allocated between new providers. This could be simple, as in “evenly divide patients between these three new providers”. Or it could be complex, as in “find all the cardiac patients and assign them to provider X, and find all the orthopedic patients and assign them to provider Y”, and so on.
6. **Are the designated new providers aware of this pending transfer?** It’s incumbent on the management team to get “buy-in” from the new providers that will suddenly be receiving order notifications for patients formerly managed by the previous provider.
7. **Are the designated new providers able to receive the appropriate order notifications?** It doesn’t do much good to transfer orders to a new provider who can’t receive order notifications!
8. **Are you sure simple surrogacy is not sufficient?** Provider Utilities is designed to serve the business case where a provider is changing roles *at the same site*. If the provider is retiring or leaving the site, other business processes are probably more appropriate.

Provider Utilities can optionally assist in discovering patients and orders for a departing provider. For example, a user can enter a departing provider and a date range, and “assign” them to a new provider. In the review window, Provider Utilities will present a detailed listing of qualified orders and patients. This can then be used by the management team when designating which patients/orders go to each newly designated provider.

## Main Window

### Window Layout

After logging in, the user will be presented with the main Provider Utilities: Reassign Patient Orders dialog.

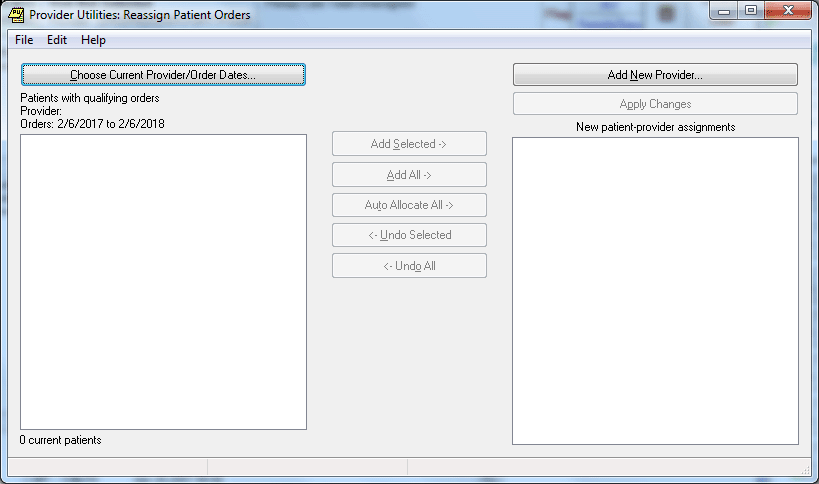


Figure : Provider Utilities Main Screen

The main Provider Utilities window has three parts…

* **Left side**: Select and display a current provider and associated patients/orders associated with that provider and the chosen date range.

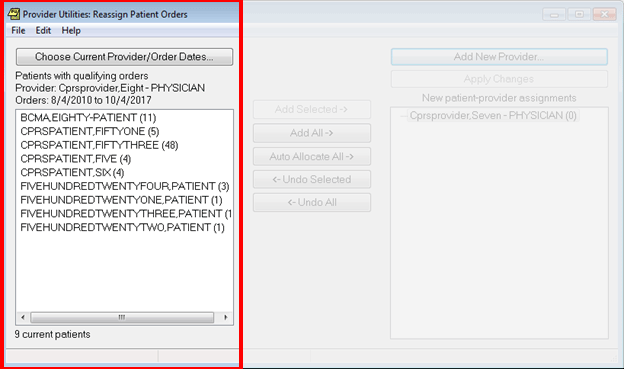


Figure : This shows the right side of the Provider Utilities Window

* **Right side**: Select and display new providers and the patients/orders assigned to each.

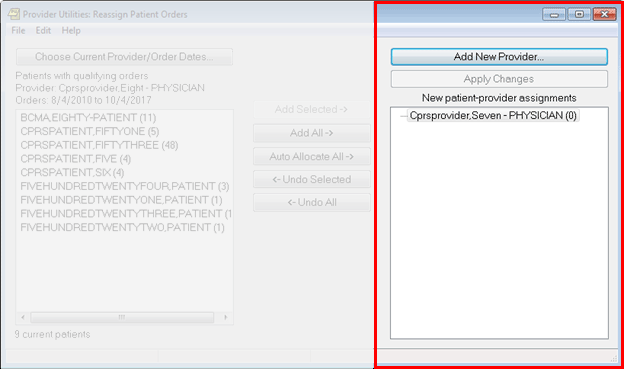


Figure : The right part of the Provider Utilities main window

* **Center**: Buttons to move patients between old and new providers.

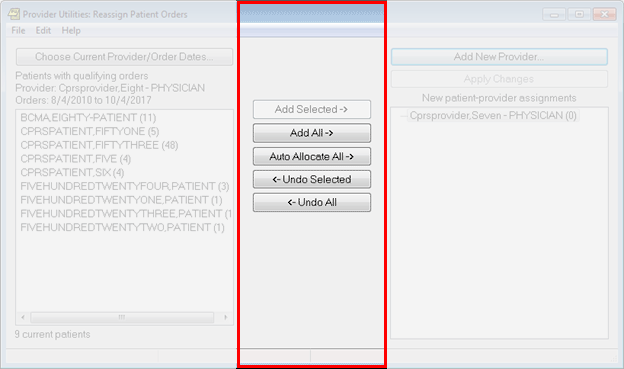


Figure : The center portion of the main Provider Utilities window has the command buttons.

The screen capture below shows a typical Provider Utilities session in mid-progress. The user has already selected a current provider, two new providers, and has assigned each new provider two patients. There are still several current patients at left awaiting reassignments.

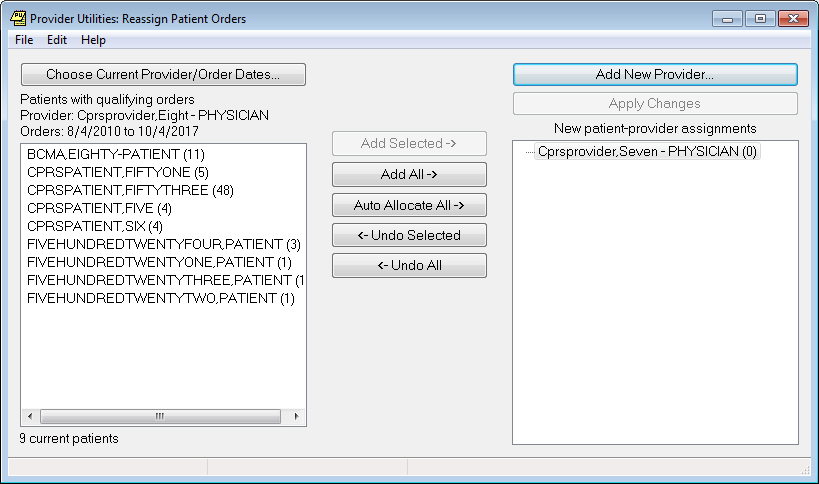


Figure : Provider Utilities Main Screen

Additional features in the Provider Utilities GUI:

* Most tables and lists have popup or context menus with additional actions. When in doubt, right click to see if a menu pops up.
* The main screen supports drag and drop. You can drag patients from left to right, or between providers at right.
* Some tables support double click. You can double click a patient to see associated orders.
* Most tables and lists support multiple selections using standard Windows techniques.

## Viewing Patient Orders

Double click or use the popup context menu item to view all qualifying orders for the selected current provider patient (at screen left). Orders will be displayed in a popup dialog. See the separate help topic for the order details dialog.

What is a qualifying order?

* It was issued by the selected provider
* It was issued during the selected date range
* It is in a state identified as potentially generating a future notification (states were selected by the stakeholders for NSR 20130504.

## Buttons & Menu Items

All buttons on the main screen have corresponding menu commands in the “Edit” main menu. All buttons and menu items have shortcuts (command keys) that are displayed when the “ALT” key is pressed.

* **Choose Current Provider and Order Dates**: Displays a popup dialog (see additional help) in which the user can select the current provider from a list. The user can also modify the default selection period, which defaults to the past calendar year. Upon selection, the patients list at screen left will be populated with patients. The order count for each will be displayed to the right of the patient’s name.
* **Add Selected**: Move the *selected* current provider patients (at screen left) to the selected new provider (at screen right).
* **Add All**: Moves all current provider patients (at screen left) to the selected new provider (at screen right).
* **Auto Allocate All**: Evenly distributes all current provider patients (at screen left) between all new providers (at screen right).
* **Undo Selected**: Removes all *selected* patients at screen right (new provider) and restores them at screen left (current provider).
* **Undo All**: Removes all patients at screen right (new provider) and restores them at screen left (current provider).

## How to Reassign Patient Orders

*There are four overall steps in moving patient orders from an old provider to one or more new providers*. More specific steps are described below. Popup dialogs are described in greater detail in focused help topics.

1. **Choose a Provider and a Date Range**: The first step is to specify which provider needs to have orders reassigned and then pick the date range. The default date range is from today back one year, but the user can change the range. Select Choose Current Provider and Order Dates…. Then select a provider and a date range from the popup dialog.
2. **Choose One or More Providers Who Will Be Responsible for the Orders:** Select Add New Provider…. Then select a new provider from the popup dialog. Repeat as needed to select more than one new provider (orders can be distributed among multiple new providers).
3. **Move Orders to the New Providers:** Use drag & drop, the center buttons, or the edit menu items to move patients from left to right until all are assigned new providers.
4. **Review and Reassign Orders:** When all orders are correctly assigned to the appropriate new providers, select Apply Changes to display the review window. In that window, review your changes and then when ready select Reassign Orders to make your changes permanent.

## Select Provider

### Select a *Current* Provider and Order Date Range

1. On the main Provider Utilities: Reassign Patient Orders window, select **Choose Current Provider and Order Dates…**.

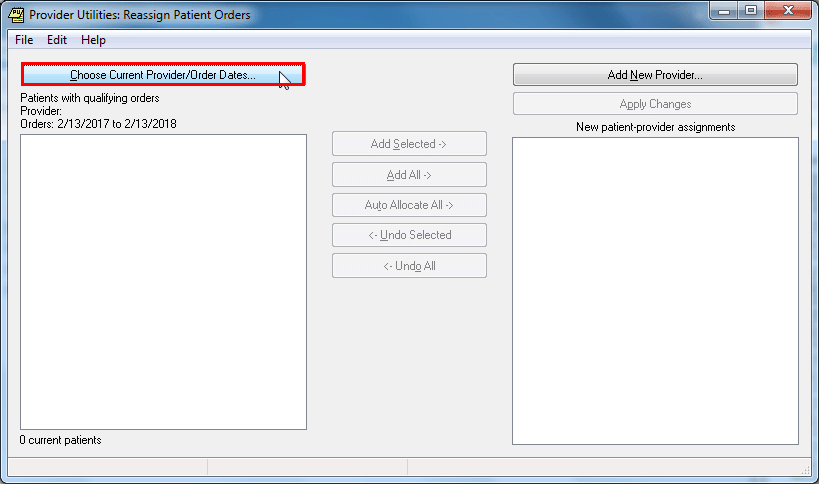


Figure : Provider Utilities Main Screen with the Choose Current Provider/Order Dates…button red highlighting added for clarity.

The Select Current Provider and Order Dates dialog displays.

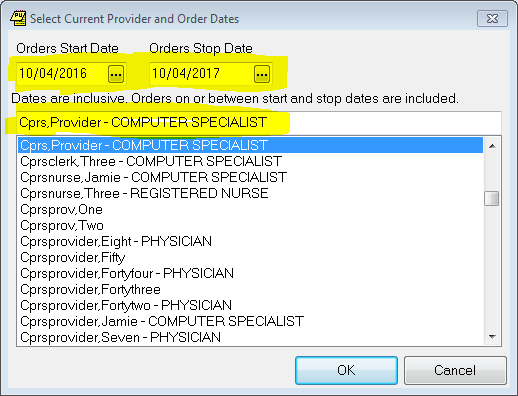


Figure : The Select Current Provider and Order Dates dialog

1. Choose a date range. You can either accept the default of one year from today or set another date range. To accept the default of one year, skip to step 3. To set a new date, select the Start Date calendar control and type a date or use the controls to set the date. Then, do the same with the Stop Date calendar control.

The default stop date is “today”. The default Start Date is one year ago. Note that you can enter any range in the past up to the current time, but entering a future date is not allowed. Change the stop date if desired. Note that dates are inclusive. Orders issued at any time of day between the start date and the stop date will be included.

1. Select the current provider, which is the provider who issued the patient orders by typing part of the provider’s name in the field, selecting the correct name, and selecting **OK**.
2. When you have the provider and the correct date range, select **OK**.

**Warning:** Be aware that selecting a new provider and date range will erase any unapplied assignments you’ve made in the main screen.

### Select a *New* Provider

You can select one or more new providers to have responsibility for reassigned orders.

1. To select a New Provider, select Add New Provider from the main window.

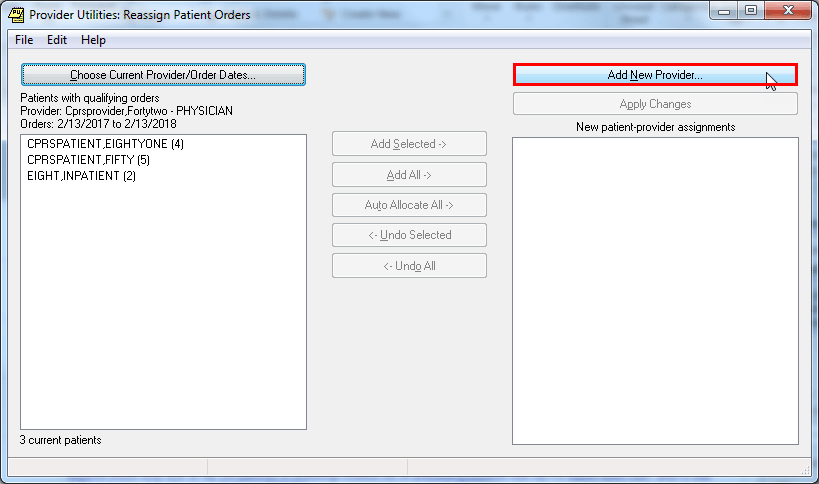
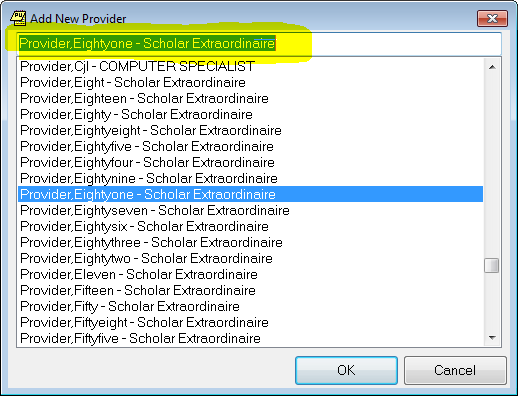


Figure : The Provider Utilities: Reassign Patient Orders main dialog showing the user selecting the Add New Provider… item, added highlighting for clarity.

1. Then select a new provider from the popup dialog by typing part of the provider’s name in the field, selecting the correct name, and selecting **OK.**



**Note:** The user can only select one new provider each time the user selects Add New Provider and this dialog opens. However, Provider Utilities enables the user to add multiple new providers to the list on the main dialog and distribute current patient orders between the selected providers.

1. To add multiple new providers, simply repeat the steps above as many times as needed.

## Viewing Order Details

Once patients are listed in either pane of the main window, the user can view the order details for that patient’s orders. To bring up the Order Detail dialog, the user double-clicks on the patient name or right-clicks on the name to bring up the context menu and then selects the Show Orders for Patient Under Mouse menu item.

The qualifying orders for the selected patient are shown on the left of the dialog. An order list is displayed at screen left. Select any order to view details at right. Some order may be in an expired or discontinued state, but these orders are considered qualifying orders for this feature.

To view orders, use these steps:

1. After selecting a Provider and Date range on the main window, a list of patients with qualifying orders should display in the left pane.
2. Double-click on a patient or right click on a patient and select Show Orders for patient under the mouse.
3. To view the details of an order, highlight the order using by clicking on it or tab to the order and press Shift + F10.

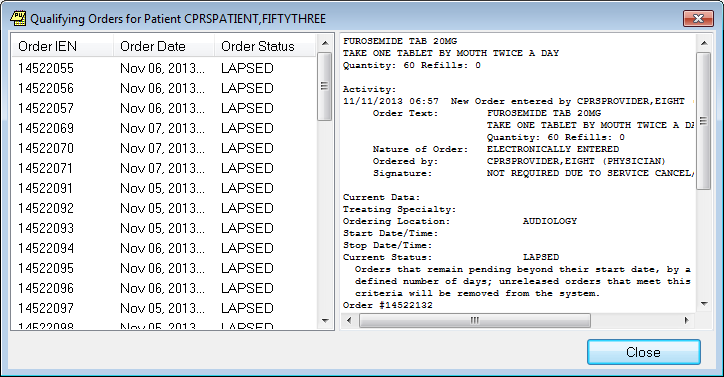


Figure : Order Details: The orders are listed on the left. As the user highlights an order on the left, the details are displayed on the right.

1. When the user is done reviewing order, select **Close**.

## Reassign Orders

After the user selects the Apply Changes on the main window, the user must finalize the changes using the Reassign Order (Review and Execute) dialog. Because this is an irreversible change, Provider Utilities requires this deliberate review step. The Reassign Order (Review and Execute) dialog displays the orders that need to be reassigned, and the user must select Reassign Orders to complete the reassignment process.

To complete the order reassignment, use these steps:

1. Accept the default reassignment date of today or change to a future date (cannot be earlier than now, but can be a future time/date).

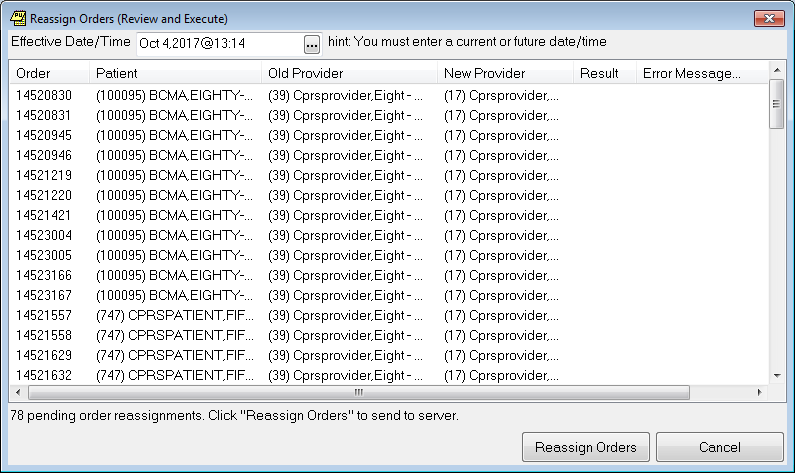


Figure : Reassign Orders (Review and Execute) dialog

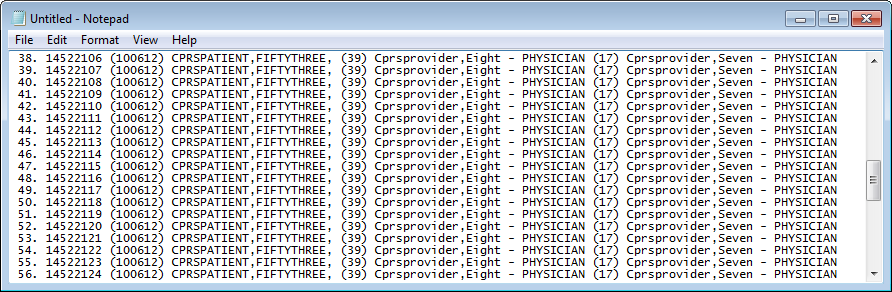
1. Review the list of reassigned orders if desired.

**Note:** It should be noted that this review screen will likely have hundreds or possibly thousands of individual orders. It’s unlikely that a user will actually scroll through this list. We present the list and require another button click mainly as a “stop and pause” feature.

1. Select **Reassign Orders** to complete reassignment.
2. Review the results to see if any reassignments failed.
3. Optionally copy the reassignment results to the Windows clipboard using the popup menu by right-clicking on the order and selecting Copy Results to Clipboard.
4. Return to the main window by selecting **Close**.

The list is very valuable after reassignment, as any failures will be indicated.

Below is a screen capture showing the text report pasted into Notepad. It contains patient-sensitive information that must be properly handled.



# Troubleshooting

If the user receives and error that they are not authorized to use Provider Utilities, check to see if the user is assigned the OR PU ACCESS key.

## Special Instructions for Error Correction

Describe all recovery and error correction procedures, including error conditions that may be generated and corrective actions that may need to be taken.

# Acronyms and Abbreviations

|  |  |
| --- | --- |
| 2FA | Two-Factor Authentication |
| CAC | Clinical Application Coordinator |
| CD2 | Critical Decision Point #2 |
| CPRS | Computerized Patient Record System. |
| DOD | Department of Defense |
| GUI | Graphical User Interface |
| ITOPS | Information Technology Operations and Services (formerly known as Service Delivery and Engineering [SDE]) |
| MVI | Master Veteran Index |
| NSR | New Service Request |
| PIN | Personal Identification Number |
| PIV | Personal Identification Verification |
| SDE | Service Delivery and Engineering |
| VA | Veterans Affairs |
| VDL | VA Document Library |
| VIP | Veteran-focused Integration Process |
| VistA | Veterans Health Information Systems and Technology Architecture |

# Appendix

Appendices are optional. They are used to amplify information that is not included as part of the main content. Example content for appendices might be:

* User functional matrix
* Table of user roles and responsibilities

# Index

An Index is optional; since all documents are available online, users can do a search. However, Indexes are helpful for manuals that may be printed.

NOTE: Use MS-Word to generate the Index so that page numbers can be updated programmatically; do not create the index manually.

Template Revision History

| Date | Version | Description | Author |
| --- | --- | --- | --- |
| March 2016 | 1.7 | Updated to align with new VIP policies and processes | VIP Business Office |
| December 2015 | 1.6 | Updated to align with current OI&T Documentation Standards, edited to conform with latest Section 508 guidelines, and remediated with Common Look Office tool | Process Management |
| June 2015 | 1.5 | Edited to conform with Section 508 guidelines and remediated with Common Look Office tool | Process Management |
| May 2015 | 1.4 | Reviewed and approved by PMAS Process Improvement Lockdown. Updated instructional test | Process Management |
| November 2014 | 1.3 | Updated to conform with latest Section 508 guidelines and remediated with Common Look Office tool | Process Management |
| April 2014 | 1.2 | Changed title page to clarify that version number refers to software version | Process Management |
| April 2011 | 1.1 | Formatted to current ProPath documentation standards and edited to conform with latest Alternative Text (Section 508) guidelines | Process Management |
| June 2009 | 1.0 | Initial Version | PMAS Business Office |

Place latest revisions at top of table.

The Template Revision History can be removed or moved to the “Revision History” section at the discretion of the author of the document. If removed, it is recommended that the author indicate the template version used as the baseline for the User Guide in the first entry in the “Document Revision History” table.

The Template Revision History can be removed at the discretion of the author of the document.

Remove blank rows.

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