**151306: AHOBPR > Clinical Portal > Report > Participation > HTML Report**



State:Draft

Originator:Yager, Leslie P. (ASMR) Owner:Unassigned Type:Manual

Test Data:Unassigned

Copied To:AHOBPR > Clinical Portal > Report > Participation > SSRS Report Description:

# Summary

**Categories**

AHOBPR: Clinical Portal Test: Unassigned

# Formal Review

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description

Log in to AHOBPR Clinical Portal as: Registry Manager

Expected Results

Registrant > Registrant Search page is displayed Comments

Validates

Attachments

**Step 2**

**Execution Step**

Description

Click on ‘Reporting’ from the menu items on top of the page.

Expected Results

Reporting > Status by Location Report is displayed

Comments

Validates Attachments

**Step 3**

**Execution Step**

Description

Select ‘Participation Report’ from the menu on the left side.

Expected Results

Participation Report page is displayed Screen displays the following options:

Selection Criteria (Please select at least one):

* Questionnaire Completion Date
* From Date (mm/dd/yyyy)
* To Date (mm/dd/yyyy)
* Assigned Location
  + All
  + Select a Location
  + No Location Assigned
* AHOBPR Evaluation Location (Most Recent)
  + All
  + Select a Location
  + No Location Assigned
* Closest Facility
  + VISN
  + Main Facility
  + Sub-Facility
* <Run Report> button
* <Print/Export Report> button
* <Clear> button

Comments Validates Attachments

**Step 4**

**Execution Step**

Description

Click <Run Report> button.

Expected Results

Validation messages are displayed under Questionnaire Completed Date:

* From Date is Required
* To Date is Required

Comments Validates Attachments

**Step 5**

**Execution Step**

Description

Enter valid dates for the ‘From Date’ field Enter valid dates for the ‘To Date’ field.

Expected Results Comments Validates Attachments

**Step 6**

**Execution Step**

Description

Click <Run Report> button.

Expected Results

The Reporting > PARTICIPATION REPORT page refreshes with the Report Results:

Note all results areAggregate Numbers and are links to drilldown to a list of the individual records.

* Number of respondents with Registrant status=Participant
* Number of respondents with reported health concerns
* Number of respondents with no reported health concerns
* Number of respondents with beneficiary status=Current Veteran
* Number of respondents with beneficiary status=Active Duty
* Number of respondents with beneficiary status=Retiree
* Number of respondents Deployed to Iraq on or after Sept 11, 2001
* Number of respondents Deployed to Afghanistan on or after Sept 11, 2001
* Number of respondents Deployed to Djibouti on or after Sept 11, 2001
* Number of respondents Deployed to Southwest Asia (w/o Iraq) on or after Sept 11, 2001
* Number of respondents Deployed to Southwest Asia theater of operations after August 2nd, 1990 and prior to September 11, 2001
* Number of respondents that wish to discuss health concerns (Answer to Q7.B=Yes)
* Number of respondents that do not wish to discuss health concerns (Answer to Q7.B=No)
* Number of respondents that don’t know if they wish to discuss health concerns / (Answer to Q7.B=Don’t know)
* Median number of days from change of Registrant Record status=Eligible to Registrant Record status=Participant

Comments Validates Attachments

**Step 7**

**Execution Step**

Description

Click on the number for any of the report results option.

Expected Results

Participation Detail Report is displayed with the following columns:

* Registrant Name - link to Registrant record
* Days Status:
* Questionnaire Completed Date:
* Health Concerns?
* Request to be Seen?
* Days Taken to Change Status from Eligible to participant.

Comments Validates Attachments

**Step 8**

**Execution Step**

Description

Click on a Registrant Name.

Expected Results

The Registrants > Registrant > Clinically Relevant Summary page is displayed with the following information:

* Registrant Information Header
* Questionnaire Review Menu (left section)
* Registrant Summary page
  + Health Factors message:
  + Clinically Relevant Summary
  + Questionnaire Version: (number)

Comments Validates Attachments

**Associated E-Signatures**

**Signed Action Signer Comment Additional Information**