



To: All WRS Users
From: WRS Development Team
Date: 04/22/2011
Re: System Update to Waiting Room Solutions

The WRS Development Team will be performing a software update to the Waiting Room Solutions System on or about April 22, 2011. This release will include the following items:

View Note

Functionality has been added that allows practices to customize their EMR Note Formats. Users can now select one of three note templates and include the practice logo (Administration>Practice Setup>Edit Practice Information>Practice Logo) on all notes. Options for Font Size, CPT/ ICD9 Codes and Abnormals have also been added:

A screenshot of a web-based administration interface. At the top, there are four tabs: 'Upload Category Management', 'Medical Condition Management', 'Surgery History Management', and 'Note Display Templates'. The 'Note Display Templates' tab is active. Below the tabs is a blue header bar with the text 'Note Display Template'. The main content area contains a form with the following elements: a label 'Practice default template:' followed by a dropdown menu showing three options: 'Note Display Template 1' (highlighted), 'Note Display Template 2 - more spacing', and 'Note Display Template 3 - two columns'; a 'Font size:' label with a dropdown menu set to '9 pt(default size)'; an 'Include practice logo:' label with an unchecked checkbox; an 'Include CPT and ICD9 codes:' label with a checked checkbox; and a 'Show abnormal in red and italic font:' label with a checked checkbox. At the bottom left of the form is a blue 'Submit' button.

Figure 1: Administration>EMR Setup>Note Display Templates



Grand Street Medical
15 Wall Street, New York, NY 10019
Tel: (212)222-2222 Fax: (-)
Werner, Mary
DOB: 06/01/1929, 81 year old Female
Note No.11262856, Date: Apr 11, 2011

Printed 3:09 PM Apr 22 2011, User Location: Grand Street Medical

HPI & ROS

ENT: Complains of sore throat; Complains of nasal congestion;

HISTORIES & HABITS

Past Medical History: Condition: Depression

Condition: High blood pressure [hypertension]

Condition: Hypothyroid

Condition: Kidney failure

Condition: Major depressive affective disorder single episode severe degree without psychotic behavior | Began: 01/01/2004

Condition: Stroke

No denied Medical History on Record

Family History: Relation: Other | Comments: Cousin (maternal) | Condition(s): -Anxiety-Asthma

Relation: No Relation Specified | Comments: | Denied Condition(s):

Surgery History: Surgery/Procedure: Hysterectomy | Doctor: ALFONSO, JESUS | Date: 11/1992

Immunization History: Immunizations Up-to Date

Tobacco: The Patient is a former smoker. He/She quit smoking in December 1901. He/She used to smoke 1.50 pack (s) a day.

Alcohol: The Patient drinks Wine, about 2.00 per Week.

Drug: The Patient does not use drugs.

PSYCHIATRIC EXAM

General:

General: well nourished & well hydrated, no acute distress

Psychiatric:

Judgement & Insight: intact

Mental Status Exam:

Orientation: oriented to time, place, and person

Figure 2: Note Display Template 1 with Practice Logo



15 Wall Street, New York, NY 10019
Tel: (222)222-2222 Fax: (-)

Werner, Mary
DOB: 06/01/1929, 81 year old Female
Note No.11262856, Date: Apr 11, 2011

Printed 3:09 PM Apr 22 2011, User Location: Grand Street Medical

HPI & ROS

ENT: Complains of sore throat; Complains of nasal congestion;

HISTORIES & HABITS

Past Medical History: Condition: Depression

Condition: High blood pressure [hypertension]

Condition: Hypothyroid

Condition: Kidney failure

Condition: Major depressive affective disorder single episode severe degree without psychotic behavior | Began: 01/01/2004

Condition: Stroke

No denied Medical History on Record

Family History: Relation: Other | Comments: Cousin (maternal) | Condition(s): -Anxiety-Asthma

Relation: No Relation Specified | Comments: | Denied Condition(s):

Surgery History: Surgery/Procedure: Hysterectomy | Doctor: ALFONSO, JESUS | Date: 11/1992

Immunization History: Immunizations Up-to Date

Tobacco: The Patient is a former smoker. He/She quit smoking in December 1901. He/She used to smoke 1.50 pack (s) a day.

Alcohol: The Patient drinks Wine, about 2.00 per Week.

Drug: The Patient does not use drugs.

PSYCHIATRIC EXAM

General:

General: well nourished & well hydrated, no acute distress

Psychiatric:

Judgement & Insight: intact

Mental Status Exam:

Orientation: oriented to time, place, and person

Figure 3: Note Display Template 2 with Practice Logo and 11pt Font



Printed 3:05 PM Apr 22 2011, User Location: Grand Street Medical

HISTORIES & HABITS

Past Medical History:
Condition: Depression
Condition: High blood pressure [hypertension]
Condition: Hypothyroid
Condition: Kidney failure
Condition: Major depressive affective disorder single episode severe degree without psychotic behavior | Began: 01/01/2004
Condition: Stroke

No denied Medical History on Record
Family History: Relation: Other | Comments: Cousin (maternal) | Condition(s): -Anxiety-Asthma

Relation: No Relation Specified | Comments: | Denied Condition (s):

Surgery History:
Surgery/Procedure: Hysterectomy | Doctor: ALFONSO, JESUS | Date: 11/1992

Immunization History:
Immunizations Up-to Date

HPI & ROS

ENT: Complains of sore throat; Complains of nasal congestion;

PSYCHIATRIC EXAM

General:
General: well nourished & well hydrated, no acute distress
Psychiatric:
Judgement & Insight: intact
Mental Status Exam:
Orientation: oriented to time, place, and person
Memory: intact for recent and remote events
Attention: attends to tasks normally
Speech/Language: expressive and receptive communications skills are normal +able to name common objects; +able to repeat 'no ifs ands or buts.'; +able to follow written commands;
Fund of knowledge: demonstrates good fund of knowledge
Mood & Affect: +depressed mood;
Comments: affect and thought processes are appropriate

AXIS & PLAN

BIPOLAR I DISORDER, MOST RECENT EPISODE (OR CURRENT) MIXED, MODERATE [296.62] (AxisI)

Axis IV: Problems related to the social environment; Occupational problems; Educational problems ;
Axis V: 61-70: Some mild symptoms (e.g. depressed mood and mild insomnia) OR some difficulty in social occupational or school functioning (e.g. occasional truancy or theft within the household) but generally functioning pretty well has some meaningful interpersonal relationships.; 41-50: Severe symptoms (e.g. suicidal ideation severe obsessional rituals frequent shoplifting) OR any serious impairment in social occupational or school functioning (eg. no friends unable to keep a job);

SIGNATURE

Figure 4: Note Display Template 3 with Practice Logo



Printed 3:03 PM Apr 22 2011, User Location: Grand Street Medical

HISTORIES & HABITS

Past Medical History:

Condition: Depression
Condition: High blood pressure [hypertension]
Condition: Hypothyroid
Condition: Kidney failure
Condition: Major depressive affective disorder single episode severe degree without psychotic behavior | Began: 01/01/2004
Condition: Stroke

No denied Medical History on Record

Family History: Relation: Other | Comments: Cousin (maternal) | Condition(s): -Anxiety-Asthma

Relation: No Relation Specified | Comments: | Denied Condition (s):

Surgery History:

Surgery/Procedure: Hysterectomy | Doctor: ALFONSO, JESUS | Date: 11/1992

Immunization History:

Immunizations Up-to Date

HPI & ROS

ENT: *Complains of sore throat; Complains of nasal congestion;*

PSYCHIATRIC EXAM

General:

General: well nourished & well hydrated, no acute distress

Psychiatric:

Judgement & Insight: intact

Mental Status Exam:

Orientation: *oriented to time, place, and person*

Memory: intact for recent and remote events

Attention: attends to tasks normally

Speech/Language: *expressive and receptive communications skills are normal +able to name common objects; +able to repeat 'no ifs ands or buts.'; +able to follow written commands;*

Fund of knowledge: demonstrates good fund of knowledge

Mood & Affect: *+depressed mood;*

Comments: *affect and thought processes are appropriate*

AXIS & PLAN

BIPOLAR I DISORDER, MOST RECENT EPISODE (OR CURRENT) MIXED, MODERATE [296.62] (Axis I)

Axis IV: *Problems related to the social environment; Occupational problems; Educational problems ;*

Axis V: *61-70: Some mild symptoms (e.g. depressed mood and mild insomnia) OR some difficulty in social occupational or school functioning (e.g. occasional truancy or theft within the household) but generally functioning pretty well has some meaningful interpersonal relationships.;41-50: Severe symptoms (e.g. suicidal ideation severe obsessional rituals frequent shoplifting) OR any serious impairment in social occupational or school functioning (eg. no friends unable to keep a job).;*

SIGNATURE

Figure 5: Note Display Template with Abnormal in Red & Italic Font



| | | | |
|---|--|--|--|
| Fax Note | | Print & Close Window | |
|  | | Grand Street Medical 15 Wall Street, New York, NY 10019 Tel: (212)222-2222 Fax: (-) Werner, Mary DOB: 06/01/1929, 81 year old Female Note No.11262856, Date: Apr 11, 2011 | |
| | | Printed 3:13 PM Apr 22 2011, User Location: Grand Street Medical | |
| HISTORIES & HABITS Past Medical History: Condition: Depression Condition: High blood pressure [hypertension] Condition: Hypothyroid Condition: Kidney failure Condition: Major depressive affective disorder single episode severe degree without psychotic behavior Began: 01/01/2004 Condition: Stroke No denied Medical History on Record Family History: Relation: Other Comments: Cousin (maternal) Condition(s): -Anxiety-Asthma Relation: No Relation Specified Comments: Denied Condition(s): Surgery History: Surgery/Procedure: Hysterectomy Doctor: ALFONSO, JESUS Date: 11/1992 Immunization History: Immunizations Up-to Date | | HPI & ROS ENT: Complains of sore throat; Complains of nasal congestion; PSYCHIATRIC EXAM <u>General:</u> General: well nourished & well hydrated, no acute distress <u>Psychiatric:</u> Judgement & Insight: intact <u>Mental Status Exam:</u> Orientation: oriented to time, place, and person Memory: intact for recent and remote events Attention: attends to tasks normally Speech/Language: expressive and receptive communications skills are normal +able to name common objects; +able to repeat 'no ifs ands or buts.'; +able to follow written commands; Fund of knowledge: demonstrates good fund of knowledge Mood & Affect: +depressed mood; Comments: affect and thought processes are appropriate | |
| | | AXIS & PLAN  <u>BIPOLAR I DISORDER, MOST RECENT EPISODE (OR CURRENT) MIXED, MODERATE (AxisI)</u> Axis IV: Problems related to the social environment; Occupational problems; Educational problems ; Axis V: 61-70: Some mild symptoms (e.g. depressed mood and mild insomnia) OR some difficulty in social occupational or school functioning (e.g. occasional truancy or theft within the household) but generally functioning pretty well has some meaningful interpersonal relationships.;41-50: Severe symptoms (e.g. suicidal ideation severe obsessional rituals frequent shoplifting) OR any serious impairment in social occupational or school functioning (eg. no friends unable to keep a job); | |
| | | SIGNATURE | |

Figure 6: Note Display without CPT and ICD Codes

Trend Report

A Trend Report has been added to the Billing Module. This report features a summary of all information contained in the Saved Billing Reports. The information is graphed based on the fields that were selected when creating the original Saved Reports. A link to this report can be found under Billing>Saved Reports>View Results>Trend Report.

Please note that the Trend Report is based on data that is collected when Saved Reports are run (i.e. weekly, monthly, quarterly, annually). The Trend Report will include this data as these reports are completed (i.e. weekly data will be shown in the Trend Report once the next weekly report has run).

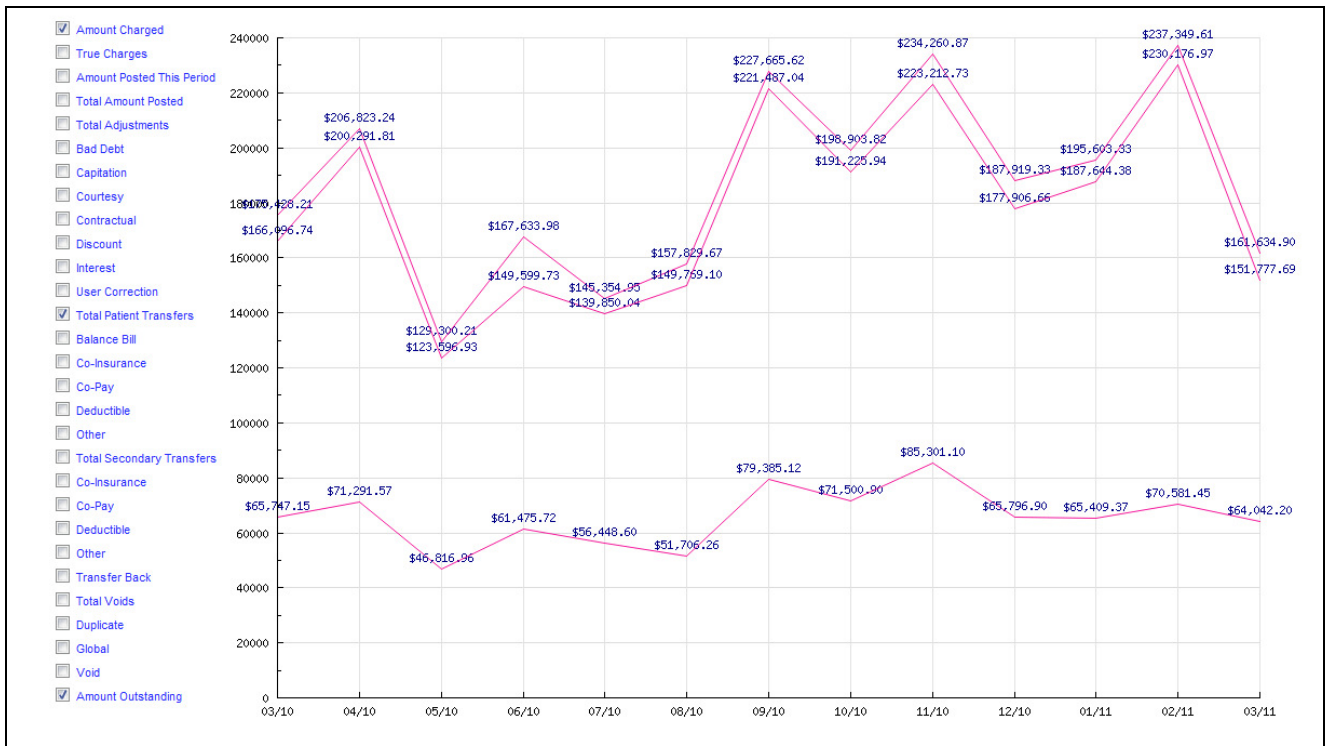


Figure 7: Trend Report