Clinical Integration Tools Release Notes



InTouch Health and the Clinical Integration Tools product team are pleased to announce the Clinical Integration Tools 3.4 release. The 3.4 release is a result of our commitment to partner with our customers to continuously improve user experience, improved clinical outcomes and achieve program growth.

Release Information

Release Date: Monday, April 20, 2015 System Downtime: Minimal down time (1-2 minutes) to be completed late in the evening Release Version: 3.4 Products included: All Clinical Integration Tools, including StrokeRESPOND & InTouch PACS Viewer Web Portal

This release *will* affect/change current workflow on the StrokeRESPOND standard template, i.e. format, layout, fields, tabs or dynamic note format.

All features, feature enhancement and bug fixes referenced in this document have been released to the InTouch Clinical Integration Tools training server. Login to the Clinical Integration Tools training server using your username and password with this URL: <u>https://clinapps-train.intouchcustomer.com</u>. If you are unable to access the training server, contact the Technical Assistance Center at 877-484-9119.

Contact your Regional Account Manager for new features requiring a Change Request

Feature Development & Enhancements

New Features Inspired by our Customers' Needs, Ideas and Input on Clinical Best Practices

Software Application Upgrades

Feature Enablement: NA Training Recommendations: None

The InTouch Clinical Apps team continues to work diligently developing many valuable software upgrades. One of the most requested upgrades from the field and customers was to develop the ability for users to launch Clinical Apps through Internet Explorer 11. We are happy to announce Clinical Apps officially supports IE11. An additional upgrade developed significantly improves application performance when Admin and Spoke Admin user roles access the user activity page. This resolves long wait times and timeouts when users research a user's activity.

Daylight Savings Time (DST) occurs once a year. Effectively, times change twice (March and November) and there is a six hour period (3 hours prior and 3 hours after DST) that can create potential time stamp confusion for users. Clinical Apps will now warn users when entering patient data during DST. When a user enters data for a patient that was created during DST, and the current time is in standard time, (or vice versa), users will receive a warning.

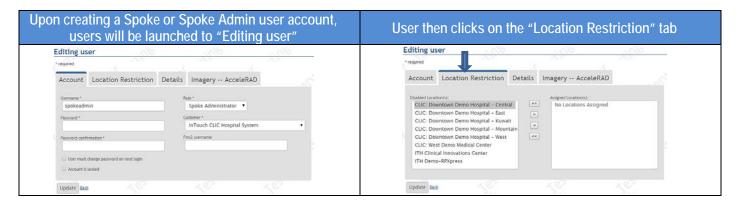
Additional upgrades include, but are not limited to, enabling customers (via Change Request) the ability to rename the NIHSS tab (i.e. Neuro scores) to more accurately describe the focus of the tab, which is Neurology scores.

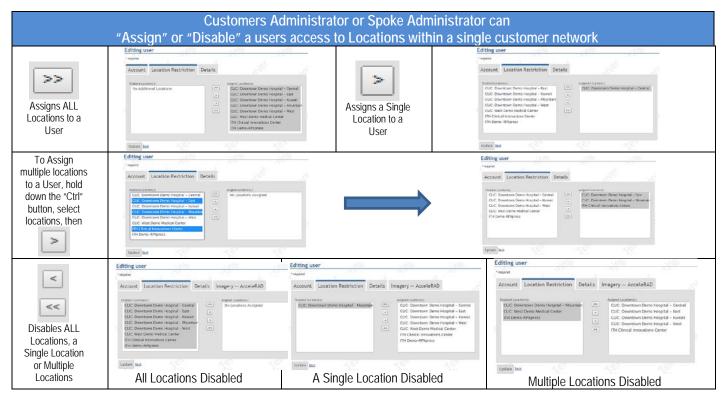


Improved Access Controls for Spoke and Spoke Admin Users

Feature Enablement: All customers will receive this change Training Recommendations: Yes

The Clinical Apps team has eliminated the requirement to create multiple usernames/passwords for Spoke and Spoke Admin user roles who want to access multiple locations within a single customer network. Spoke and Spoke Admin user roles now only require one username to: Access ALL, a single or multiple locations within a single customer network; View/edit patients for all linked locations; Create/edit users for all associated locations; Export patient data for patients at all associated locations; Retain all associated security profiles enforced on the users Clinical Apps account. Spoke Admin and Administrator users can now also audit the actions affecting spoke (or Spoke Admin) users to see when access to a location was granted, changed or removed. The audit process is detailed to know who and when unwanted access was granted or when users failed to get desired access. The following shows the Location Restriction user interface to "Assign" or "Disable" Spoke or Spoke Admin user access to a single networks locations. *Note: Only a Network Admin can enable a spoke admin user account.*







Additional Neuro Exams with Auto-Calculation (ABCD2 & ICH)

Feature Enablement: Yes (Requires Change Request) Training Recommendations: Yes

Adhering to the "Time is Brain" principle, the Clinical Apps team has developed auto-calculating ABCD2 & ICH neuro exam tools to reduce the time it takes a neurologist to score these exams during a patient encounter. As a result, a neurologist can power through these additional neuro exams quickly, and reduce the amount of risk associated with interpreting a patient's final score.

ABCD2			
Age \geq to 60:	Yes 🔻	ABCD2 Results	Collapse All Expand All
BP ≥ to 140/90 mmHg:	Yes 🔻	No record	s exist. ction of the ABCD2 (or
Clinical Features of the TIA:	Unilateral Weakness 🔹		a required timestamp
Duration of Symptoms:	<10 Minutes		
History of Diabetes:	Yes 🔻		
Moderate Stroke Risk: 2 Day Ri	sk= 4%, 7 Day Risk= 6%, 90 Day Risk= 10%	User adds a req	uired timestamp
Total Score:	5		
Time Recorded: * March	31 2015 11:34 CDT 📕 🔤 Now	Then clic	ks "Add calculator
Submitted By: Christ	opher Casas		
Add calculator reco	5		
Add Calculator reco	a		
ABCD2			
Age \geq to 60:	Select one	ABCD2 Results	Collapse All Expand All
BP ≥ to 140/90 mmHg:	Select one	Mar 31 2015 11:34 CDT - Total:	5 Points
Clinical Features of the TIA:	Select one	Υγ	
Duration of Symptoms:	Select one	The ABCD2 scor	e results are
History of Diabetes:	Select one	displayed in Col	
<< Tota	score description >>		
Total Score:			
Time Recorded: •	Mow		
Submitted By: • Christe	pher Casas		
Add calculator recor	d		
ABCD2			
	co. (- 1 - 1	ABCD2 Results	Collapse All Expand All
Age ≥ to		Mar 31 2015 11:34 C	
BP ≥ to 140/90 mm	Hg: Select one	Mar 31 2015 15:51 C	
Clinical Features of the T	IA: Select one	 Submitted By: Christoph Age ≥ to 60: Yes 	er Casas (1 pt)
Duration of Sympto	ms: Select one	 BP ≥ to 140/90 m 	mHg: Yes (1 pt) f the TIA: Speech Disturbance without
History of Diabet	es: Select one	Weakness (1 pt) Duration of Sympt History of Diabetes	coms: >=60 Minutes (2 pts) s: Yes (1 pt)
<<	Total score description >>		Risk= 8%, 7 Day Risk= 12%, 90 Day
Total Sco			<u> </u>
Time Recorded: *		Now	User can Expands (or Collapses) the ABCD2
	hristopher Casas		results to see scoring for each section and resulting interpretation of the exam
Add calculator	record		



Auto-Faxing capabilities after a Consult Note is signed

Feature Enablement: All customers will receive this change (upon request)

Training Recommendations: None. All Auto-Faxing settings are configured internally by the Clinical Apps Team

Clinical Apps network customers can request the automatic faxing of consult notes to a single or multiple faxes after a consult note is signed. Customers who request this feature will no longer have to manually select a fax contact after a consult note is signed. Auto-Faxing will be configured internally only by the Clinical Apps team. Once an Auto-Fax is sent, users can view the consult note fax status under "Signed Documents" and on the customer's dashboard (see below).

Signed Documents							
Document Name TeleStroke Consultation Note	Signed By Christopher Casa		gned Date/Time ar 31 2015 12:37 PDT	Status Signed and	I Faxed		
1. User can click on the							
Signed Documents	Note Faxed		×		"Faxed" hyperlink		
Document Name TeleStroke Consultation Note	Fax conta	acts: orate Efax , (805)456-0136. 	'Time 2:37 PDT		nd Faxed		
Update Signed Note List Signed TeleStroke Consultation Note	• ITH Main	Fax, (805)562-8663.	Ok	cont	The corresponding Fax act(s) the signed consult ote was faxed pops-up		
Signed by Christ	pher		fax	@ " email			
					"Faxed" status can also be		
Rec Creation Time 💠 Patient Name 💠 DOB		ocation	\$		viewed at the		
Mar 31 2015 10:27 PDT <u>Test, Test</u>		akersfield Memorial Hospital		StrokeRESPOND StrokeRESPOND	dashboard		
Mar 31 2015 09:35 PDT Smith, Jone Mar 30 2015 16:29 PDT test, test		akersfield Memorial Hospital LIC Hospital of Santa Barbara		StrokeRESPOND			
Mar 30 2015 17:27 CDT asd_ Asd 06/14/1		LIC: Downtown Demo Hospital - Central		StrokeRESPOND			

2015 The Joint Commission Core Measures Update

Feature Enablement: All customers will receive this change

Training Recommendations: Yes. Users must be shown changes to Last Known Well (LKW) Time on the Patient Info tab

In keeping with our Clinical best practices focus, the Clinical Apps team developed the Last Well Known Time stamp to address 2015 Joint Commission Stroke Core Measures. The Last Known Well Time stamp replaces ALL network customers' default "Onset Time" stamps. Under the Patient Info tab two radial buttons (Unknown and Known) are now present next to the "Last Known Well Time" label.

1. At the Patient Info tab, users select one of the below radial buttons				
Last Known Well Time: 🔍 Unknown 🔍 Known				
2. If user selects "Unknown"				
Last Known Well Time: 💿 Unknown 🔍 Known				
3. If user selects "Known", a timestamp field appears unpopulated. User can click on "Now" or manually enter date and time via "Calendar" button				
Last Known Well Time: 🔍 Unknown 💿 Known				
Now				
4. There are two follow up questions users should answer as part of this new workflow				
Last Known Well				
Last Known Well Time:				



iPad App Performance Improvements

Feature Enablement: All customers will receive this change Training Recommendations: None

The InTouch Clinical Apps and StrokeRESPOND iPad app speed and performance has been significantly improved. The application is now much faster and more responsive when in a session with a Patient Access Device. Some of the iOS developments mirror what has been developed and described above (i.e. ABCD2/ICH exam tools, Last Known Well Time). In addition, users who are part of networks subscribing to multiple clinical applications will be prompted to select an application when creating a new patient. InTouch Clinical Apps development team is continuing to make additional improvements in the iPad speed and performance.

Additional Clinical Applications Added

TelePeds with special year(s), month(s) and day(s) auto-calculating display:

Date Of Birth:	2014 🔻	January 🔻	18 🔻			
1 year(s), 2 month(s), 13 day(s)						

Bug Fixes

The 3.4 release includes a list of 18 bug fixes to improve the performance and usability of the application.