



Updates!

e-Newsletter from Iatric Systems, Inc.

April, 2006

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1. Message from Senior Management

Meditech and Iatric Systems

Joel Berman, President



In a posting that appeared on www.HISTalk.com on 2/7/06, a reader wonders why Meditech doesn't work more closely with Iatric Systems. We also wonder the same thing sometimes, but I thought I would try to clear the air on the subject, from our perspective. Iatric Systems' business is to provide software, interfaces and NPR services to Meditech clients in order to leverage their HCIS investment. We want Meditech to succeed; it's a win-win situation for everyone when this occurs. I've stated in the past that we will not participate in any strategy, such as one proposed by another HIS vendor, designed to create software with the goal of replacing a hospital's core Meditech HCIS. While we may sell some of our solutions to non-Meditech hospitals, our core competency and focus is on Meditech clients. It's where we excel.

On the other hand, we are not a partner of Meditech's. It is important for us to be able to create solutions that fill the gap where we feel we can do better than what Meditech offers, or provide a solution where Meditech doesn't. For example, Client/Server sites have constantly reported to us that there is no easy way to get crucial non-Meditech patient data integrated with the EMR module, so recently we created C/S Link. C/S Link complements EMR. Similarly, Meditech provides a nursing flowsheet with their NUR and PCS systems. We believe our Visual Flowsheet Suite (VFS) provides significant advantages, but it doesn't replace NUR or PCS – it simply enhances those applications. Meditech may not be happy that we created C/S Link or VFS, but we've found that applications like these help Meditech customers and customers are the ones who count. Another reason we aren't a Meditech partner is because we want to maintain our independence to be able to disagree with Meditech when we think they've made a mistake. Some have interpreted this as Iatric Systems biting the hand that feeds us. This isn't our intent at all. We believe in the Meditech HCIS and want to see Meditech succeed.

Would we like to have a better working relationship with Meditech? Sure we would. For example, anyone who tells you scripting is a great way to put data back into the Meditech system is a fool. It's a necessary evil that exists because Meditech doesn't provide a good way for other vendors to interface their applications with Meditech apps. We would love to work together with Meditech to find a better solution, and we would be happy to talk with them about this and other subjects whenever and wherever they'd like. In fact, why not invite Meditech to come to MUSE. We would like to see them there because we believe it would be good for Meditech and good for their customers.

We think Meditech has done some great work (like creating MAGIC), and at other times we think they've made mistakes (like no effective method for easily tracking user access to PHI). The bottom line is that our goal is to make Meditech customers happier with their Meditech investment. I hope you think we're headed in the right direction. In either case, please feel free to [e-mail me](#) or stop by our booth at MUSE (710) to let me know what you think.

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2. New for Client Server – C/S Link



Is your EMR missing important patient data from non-Meditech systems? Do you avoid using non-Meditech systems because clinical information will not show up in EMR? If either answer is “yes”, Iatric Systems can help!

We are pleased to announce our newest Client/Server development, **C/S Link**. [C/S Link](#) is a direct result of input from Client/Server hospitals within the Meditech community. It is designed to provide your clinicians with a more complete EMR by seamlessly linking EMR with non-Meditech systems, including:

- ✓ Iatric applications (Visual FlowSheet, Physician Discharge Prescriptions, etc.)
- ✓ Any external executable program (for example, PACS viewing)
- ✓ Specific website urls
- ✓ Other Meditech marketplace third party vendor systems (for example, Array or Picis)

C/S Link launches applications from icons located at the top of your EMR screen, and can bring clinicians directly into the same patient within those applications to avoid extra keystrokes.

If you'd like to learn more, we will be demonstrating C/S Link at [International MUSE](#) in Orlando (May 31st – June 2nd, 2006). Be sure to stop by our booth #710 to see C/S Link in action. If you won't be attending International MUSE, please [contact us](#) for more information or to arrange a demonstration.

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3. New for MAGIC - MobilCharge



Say goodbye to lost charges and sticking item labels on your clothes! Iatric Systems is pleased to announce our newest MAGIC development, **MobilCharge**. [MobilCharge](#) improves patient charge capture by enabling staff to positively identify a patient via barcoded wristband and then scan chargeable items as they are used.

Because MobilCharge is seamlessly integrated with Meditech, with a touch of a button, users can automatically update MM and B/AR to reflect each patient item issued. MobilCharge also saves staff time by eliminating manually keying of charges into the computer.

If you'd like to learn more, we will be demonstrating MobilCharge at [International MUSE](#) in Orlando (May 31st – June 2nd, 2006). Be sure to stop by our booth #710 to see MobilCharge in action. If you won't be attending International MUSE, please [contact us](#) for more information or to arrange a demonstration.

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4. New "Tuesday Trainings" at MUSE!



"Tuesday Trainings" have become a cornerstone of the education that occurs each year at [International MUSE](#). This year, we'd like to highlight four brand new NPR courses Iatric Systems will be hosting:

701 – Hands-On Beginner NPR Report Writer Training for MAGIC – This course (and course number 801 for C/S) are the first of their kind at International MUSE! Laptops with pre-configured access to a real MAGIC NPR TEST system will be made available to students during the session so attendees can immediately practice and put into use what they learn in class! Joe Cocuzzo, VP of NPR Services at Iatric Systems, will lead this course. **Only 8 open seats remain** for this workshop, so if you're interested in attending, [sign up](#) soon!

801 – Hands-On Beginner NPR Report Writer Training for C/S – This course is the Client/Server equivalent to 701 above. Laptops with pre-configured access into a real C/S NPR TEST system will be made available to students during the session. Phil Sherry, who worked at MEDITECH providing C/S NPR Report Writer training and support before joining Iatric Systems, will teach this course.

702 – Ask the Experts (for C/S) – This is another NPR Report Writer course with a brand new twist. If you write C/S NPR Reports, chances are at one time or another you've come to a point where you've thought, "If I could just get this one NPR question answered, I could finish writing this report!" If you have a C/S NPR Report Writer challenge and would like to participate in this workshop, register with MUSE and e-mail your challenge to museclientserverworkshop@iatric.com (by May 17th), and we'll compile the challenges and address them during the course!

802 – Ask the Experts (for MAGIC) – This course is the MAGIC equivalent to 702 above. If you find yourself thinking, "If I could just get this one MAGIC NPR question answered, I could finish writing this report," and you would like to participate in this workshop, please register with MUSE and e-mail your challenge to musemagicworkshop@iatric.com (by May 17th). We'll compile the challenges and address them during the course!

Below is a complete listing of all of the workshops Iatric Systems will host this year at International MUSE (new ones, as well as "oldies but goodies"). Please note that individuals who participate in course 808 (NUR Dictionaries – Building a Solid Foundation) will receive 3.8 Nursing CEU credits. You can sign up for Tuesday Trainings by visiting the [Workshop Registration](#) page of the MUSE website. All proceeds from workshops benefit the MUSE organization. See you in Orlando!

Morning Workshops:

- 701 – Hands-On NPR Report Writer Training for MAGIC (with Joe Cocuzzo)
- 702 – Ask the Experts NPR Client/Server (with Phil Sherry)
- 704 – Understanding Ethernet and TCP/IP (with Mike Devoe)
- 707 – Intro to Clinical Rule Writing (with Jason Medeiros)
- 708 – CDS Basics - Building Customer Defined Screens (with Michelle Schneider, RN)

Afternoon Workshops:

- 801 – Hands-On NPR Report Writer Training for C/S (with Phil Sherry)
- 802 – Ask the Experts NPR MAGIC (with Joe Cocuzzo)
- 804 – NPR Fragments (with Joel Berman)
- 807 – CDS Attributes (with Jason Medeiros)
- 808 – **3.8 CEU's!** NUR Dictionaries - Building a Solid Foundation (with Michelle Schneider, RN)
- 809 – NPR Application Development 101 (with Frank Fortner)

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5. MUSE – Catch a Sneak Peek



If you'd like to learn more about what Iatric Systems will be introducing and featuring at International MUSE this year, sign up to receive (via US Mail) our [Pre-Show Conference Guide!](#)

The Guide will include, among other things:

- Special message from Joel Berman
- New developments being unveiled at MUSE
- Educational sessions being hosted by Iatric Systems
- Schedule of product demonstrations at our booth

Bring the Guide with you to our booth at International MUSE to be entered into a special drawing to win \$100 Disney Dollars! When you [request to receive a copy of the Guide](#), please be sure to include your name, hospital name and the mailing address where you would like it to be sent (it will be sent to your attention at the hospital you list unless otherwise indicated). We'll look forward to seeing you at MUSE!

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6. NPR Report Writing Tips

SELECTIVE LOOKUPS (In a CDS or in an ID= call in a Report)

It is sometimes very convenient to create a lookup on a CDS or at an NPR Report selection prompt where only a subset of the fields from the dictionary are available.

On a Magic report (or C/S report in 5.5), you could write your own ID program and include logic to assemble the correct dictionary "on-the-fly" into the temp file containing just the elements you want. This works nicely if the total number of entries is reasonably small. For a large dictionary it is too slow. Also, in a CDS, invoking your own lookup program is difficult.

Fortunately, there is an easier way.

Most Meditech ID programs, including the one used in a group response lookup from the MIS.SCREEN.kernel program, include a check of code in a slash variable /ID.SEL. As entries are assembled for the lookup list, the ID program does a "V" or "VALUE" of the string in /ID.SEL if /ID.SEL is defined. If the V command returns a value, the item is included in the lookup list, if false, it is skipped. If you try to enter the value directly, V(/ID.SEL) is also executed and if that returns a nil, you get a message "This entry is not available".

You can use this feature by loading your own code into /ID.SEL to get a standard ID program to acquire a custom restriction.

The V command executes a string as a line of magic code. In the lookup program, the subscript for each entry is stored in the variable CD.

For example, take a group dictionary setup as follows:

Mnemonic Last Edited by on

Active? Edit Users Edit Groups

Name

Maximum Element Length

Element Code	Element Name	Abnormal	Rank	Value
1	SNIPS	N		
2	SNAILS	N		
3	PUPPY DOG TAILS	N		
4	SUGAR	N		
5	SPICE	N		
6	EVERYTHING NICE	N		

Will be CD (arrow to Element Code 1)

Boys (arrow to Element Name SNIPS)

Girls (arrow to Element Name SPICE)

If we test the sex of the patient, and restrict the lookup to the elements 1-3 for boys, and 4-6 for girls, we need to put a line of code into /ID.SEL that, when executed, is true only when the choice is 1-3 for boys and 4-6 for girls.

We can do this by using both an IFE and an REQI. We setup the IFE to always be true (so the cursor will stop), and the REQI to always be false (so that the field will not really be required). This is because the IFE will not always be re-evaluated, for example, if you hit <ESC> from the lookup, /ID.SEL will be nilled and the IFE will not be re-executed by the MIS.SCREEN.kernel program. Fortunately in magic the REQI seems to be evaluated when you exit the lookup with <ESC> so the restriction continues to be applied.

```

Enter/Edit Attributes: IAT.INGR
IFE=IF{@p.ADM.PAT.sex="M" "CD<4";"CD>3"}>/ID.SEL
REQI=IF{@p.ADM.PAT.sex="M" "CD<4";"CD>3"}>/ID.SEL&""
    
```

In this NUR example, we get the appropriate subset of values in the lookup (and only these can be selected):

Patient	U00014142	ZZADM, JENNIFER	Status	ADM IN	Room	M.LAB3	
Attend Dr	NADE	NADELSON, NEAL W. MD	Admit	12/01/05	Bed	A	
Start Date	04/12/06 at 2228	End Date	04/12/06 at 2359	Age/Sex	40 F	Loc	M.DEL
Include	A,C,D,PS,CP,DE,PS,1,99,21,GPP,INT		Med Edit		Unit#	H0000085	

Restricted Lookup

04/12 2229 UI

Intervention

- *PT Eval
- IATRIC S** Female Doctor Only
- ZZIATRIC
- ====PHY Little Boys
- Pain Man
- ==== Little Girls
- Spiritua
- ==== Ingredient F9
- Teaching: Individual/Family
- ====HEALTH SYSTEM MANAGEMENT====

Group Response Lookup

Select

Mnemonic	Responses
1 4	SUGAR
2 5	SPICE
3 6	EVERYTHING NICE

Unfortunately, in C/S, the CDS program does not appear to call the IFE or the REQI after you use <ESC> to exit a lookup program and /ID.SEL is nilled. Therefore, this technique cannot be used within Customer Defined Screens in C/S. It can be used, however, via an ID attribute on a RW select field, since you could make sure that ID.SEL is set each time the ID program is called. You would need to have the C/S 5.5 Report Writer to attach an ID attribute via the EDIT ELEMENTS feature, added with that release.

You can find additional NPR Tips on our website at <http://www.iatric.com/information/npr-tips.asp>, as well as information about our [on-site NPR Report Writer Training](#) and [NPR Report Writing Services](#).

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7. Newsletter Sign-Up/Contacting Us

[Sign up for our Updates! newsletter](#), or do so by visiting the lower right section of our website's [homepage](#).

You may also request to discontinue receiving our newsletter by sending an e-mail at info@iatric.com.

If you've received this newsletter via e-mail, you may give us feedback by simply replying to the e-mail. However, if you would like to reach someone directly, please feel free to contact one of the individuals listed below.

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