

Minutes from National iMedConsent™ VANTS Call

Wednesday, September 7, 2005

Ray Frazier, VA ESPD Project Manager

1. Implementation Status

2 remaining sites to be implemented this month. Congrats to Dialog Medical on this accomplishment!

2. Latest iMedConsent Release Summary (version 347d)

Mark Neeley from Dialog Medical gave an overview of the new functionalities and changes incorporated in the August release of iMedConsent—usage reporting, favorites, HIV Testing enhancement, national template changes. Please see the release notes for this build on the Dialog Medical Customer Portal (<http://www.dialogmedical.com/support/>). The notes will also be posted to the ESPD website (<http://vaww.va.gov/vhaethics/espd/materials.cfm>). If you have questions, please direct them to Mark at mneely@dialogmedical.com.

Several issues were raised on the call. Afterwards, Mark Neeley provided the following synopsis and response:

Issue 1:

On the Favorites Editor screen, there is a checkbox labeled “Automatically Add Completed Documents to Favorites”. This checkbox is checked by default. If you uncheck this checkbox and apply the change, the change is not being saved.

Dialog Medical Response: This is a defect that we can reproduce in QA. Helpdesk Ticket #2399 created today for resolution in September release.

Issue 2:

The “Progress Note IEN” column on the Utilization Report is not being populated.

Dialog Medical Response: The current design of the audit database does not include the data that provides this value. The report includes the column for future use.

Issue 3:

The Customer Portal release page requests the update be deployed by September 10. This is unusually quick.

Dialog Medical Response: In future, the page will request upgrading within a 30-day window for consistency with CPRS upgrade processes.

3. Electronic Signature Pads

Issue 1: It was recently discovered that new Interlink ePads are not backwards compatible to the original drivers. Below is an excerpt from a recent email sent by Bill Taylor at Dialog Medical:

-----Original Message-----

From: Taylor, William (Dialog Medical)
Sent: Tuesday, September 13, 2005 6:07 AM
To: Reiffenberger, John L
Subject: Recent ePad Shipment to Your Site

To Any/All CACs and IRMs Associated with the iMedConsent Program:

You are receiving this e-mail because our records indicate you may have recently received a shipment of supplemental ePad signature devices from Interlink Electronics.

Please be advised that the shipment you received may be of a newer version (Revision B) than those ePads originally shipped with your installation, and if so, will not work with the older drivers (v 5.10) originally installed at installation. The change was made because of a change in a chip within the ePad that necessitated both firmware and software changes.

The newer ePads should have shipped with a CD that contains the newer drivers (v. 6.22). You will need to use these drivers to install the ePads on the workstations. The older ePads will work on the newer drivers.

You can check the version of the shipment of ePads you received by examining the back of one of the ePads. The newer ePads will have a small metallic plate in the center with the letter 'B' stamped on it.

Interlink Electronics is working with us to minimize the impact on the VA. Please let us know of any issues that you have installing the newer ePads, and Interlink Support will work directly with you to resolve these issues.

While we feel certain the newer drivers will work on PC workstations, it is yet unclear as to the impact in thin client environments. Please take a moment to reply to this e-mail with answers to the following:

- Are you using ePads with iMedConsent in a thin client environment?
- If so, what manufacturers, models, operating systems, and connection methods are you using (e.g., WYSE 3450, Win CE 4.21, ICA)?
- How many ePads are currently in use in thin client environments?
- Have you yet attempted to deploy the newer ePads?
- If so, what kinds of success/issues have you had?

Thanks in advance for your prompt assistance. Your responses will help Interlink to shape the best action plan in this situation. Please feel free to call or e-mail with any questions.

Issue 2: We are not currently considering another national purchase of electronic signature pads. Most facilities are currently implementing plans for purchasing additional pads and many VISNs have formulated a strategy for purchase. Paul Miller at Dialog Medical recently asked that facilities and VISNs provide the following information. If you have not responded to Paul, please do so (pmiller@dialogmedical.com).

- a. What is the # of (Interlink) ePads your facility plans to order of the next 6 months?
 - i. Standard ePads
 - ii. Backlit ePads

- b. Will these be ordered all at once or incrementally?
- c. Do you know when (date) you plan to make these orders?
- d. Is your VISN ordering ePads for your facility? If so, do you know if they are ordering for the rest of your VISN? How many and when?
- e. Do you plan to order any TOPAZ signature pads in the next 6 months? If so, how many?

4. **Wireless Update**

In April, the VCIOC executive board raised a number of concerns about the lack of standardization of hardware being purchased for use with iMedConsent. In order to standardize the deployment of iMedConsent in these settings, the VCIOC executive board has asked OI and the Ethics Center to help with evaluating and standardizing equipment for using iMedConsent in wireless/mobile environments. OI conducted a survey of the use of iMedConsent that has occurred to date in these environments. 49 responses were received and were evaluated by the BCMA Office. The reviewers felt that more information was needed before recommendations can be made. OI is currently conducting an infrastructure survey involving stakeholder interviews. Until interviews are concluded, results are evaluated, and guidance is released, facilities are instructed not to purchase new hardware such as tablet PCs for use with the program, unless that hardware is already in use in the facility. A memo to this effect was released by 10N on June 1.

5. **Content Library Development**

Two new clinical specialties will be released at the end of September:

- Physical Medicine/Rehab, and
- Rheumatology.

That leaves three specialties left in the pipeline:

- Hematology/Oncology,
- Neurosurgery, and
- Care Coordination (did not meet Sept. estimate for release).

Dialog Medical is continuing to process requests for changes and additions to the library. As you know, these need to be reviewed by VA subject matter experts, so this takes some time.

6. **Narcotics Agreement Form**

There are no plans currently to incorporate this form into the national iMedConsent library.

7. **Enhancements in Process**

In the September release of iMedConsent, the provider selection mechanism will be significantly modified.

We are working on the Release of Information form. This can be expected in the October release.

A new administrator's guide is in production. Dialog Medical hopes to release this

in the near future. When available, I'll put it on the website and send it to the listserv.

Someone asked whether saving consents with "partial" signatures will be allowed in the future. Unless/until Federal Regulations and VHA policy change, all three signatures will need to be captured at the same time.

8. Deleting Unneeded From the iMedConsent Server

The issue: Trace logs, images, and completed document files are retained on the file server until manually purged by an IT Administrator. These files are not needed once the image has been sent successfully to VistA. Over time (depending on the level of activity at your facility), these files can build up on the hard drive. These files are fairly small, and almost all facilities have not yet had an opportunity to have these files accumulate to a critical level.

The solution: Removing these unneeded purge files by age can be automated using a simply batch file and Windows Scheduled Tasks. Dialog Medical will officially release the process for deleting old files from the iMedConsent server in the October release. If you need more information immediately, see David Sommers' August 22nd post to the listserv.

9. Removing Consents from "Documents to Sign"

Users without admin rights cannot remove documents from this folder. Most VAMCs let these documents expire on their own. Dialog Medical is exploring the possibility of modifying the program such that end-users would be able to immediately delete unwanted documents so that they did not need to wait for them to expire.

10. Consent to Talk to Patient's Family

A participant on the call asked whether they could add a statement to the consent form that would give a surgeon permission to talk to speak to the patient's family after the surgery. "This would be a good way to cover the release for the surgeon to speak to the family after a procedure since they are getting the signature for the consent anyway."

I am in discussions with the Privacy Office and Ethics Center consultants to evaluate whether this is an advisable addition. More to come.