EHR Lab Configuration

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Goal of this Course

• Explore configuring discrete lab orders and discuss the benefits of using discrete lab tests. Configuring your lab tests helps you ensure that your lab data is tracked accurately and easily.

Lab Configuration Tool

• The Lab Configuration tool is located under the Tools menu in PCC EHR.
• The Lab Configuration tool is split into three sections:
  - Lab Orders: Lists all of the lab orders configured for your practice
  - Common Tests: Lists all of the discrete lab test codes, called LOINC codes, that can be used to configure the labs
  - Lab Facilities: Lists all of the lab facilities configured for your practice
LOINC Codes

- LOINC stands for **Logical Observation Identifiers Names and Codes**.
- They were created to be a universal code system for identifying laboratory and clinical observations.
- There are over 30,000 LOINC codes, but PCC EHR contains a Commonly Used list with the top 2,000 codes used.
- Each test in a lab will have its own LOINC code. For example, if a Urinalysis tests 10 items, the lab order should be configured with 10 tests.
- LOINC codes are different from CPT codes for billing.
Common Tests in Lab Configuration

The Lab Configuration Tool also allows your practice to configure particular labs that you do not want to show on the Patient Visit Summary and the Health Information Summary.

Setting this selection by default improves the efficiency of ordering the lab order because the option doesn't need to be changed each time the lab is ordered.

The default setting also minimizes the risk of a sensitive lab printing on a patient report.

Hiding Lab Order from Patient Reports
Hiding Lab Order from Patient Reports

Configuring Discrete Lab Tests

• Before configuring your lab tests, choose which lab orders you want to configure. Once you have chosen the labs, choose the lab tests that will be associated with the lab order.
• Lab tests can be easily selected:
  – If you have a print out of lab results for that lab, use those results to help choose the codes. This allows you to ensure that you have the correct unit of measure, if the test is pos/neg and specimen source.
  – If you are able to use a test that is pos/neg for most tests within a lab, it will increase the efficiency of entering the results.

Entering a default reference range helps in two ways:
  – If the reference range is entered by default, the values won’t need to be entered each time the lab results are entered.
  – Default reference ranges can help clinical staff determine the interpretation of the test.
• For larger labs, you can pick the top 5 tests that your practice really wants to track. This will reduce the amount of time it takes to enter the lab test results into the chart.
Configuring Discrete Lab Tests

Entering Default Reference Ranges

Discrete Lab Test in Visit Ribbon
Why should your office use discrete lab tests?

• For those practices applying for ARRA funding, there are Clinical Quality Measures (CQM) and Meaningful Use measures that are based on discrete lab tests:
    • In order for a patient to count in the numerator of this report, they need to have been screened for strep using one of the following LOINC codes:
      11268-0, 17656-0, 18481-2, 31971-5, 49610-9, 5036-9, 626-2, 6556-5, 6558-1, 6559-9.
    • Code 6556-5 is the most commonly used Rapid Strep LOINC code.

Why should your office use discrete lab tests?

• For those practices applying for ARRA funding, there are Clinical Quality Measures (CQM) and Meaningful Use measures that are based on discrete lab tests:
  – The Meaningful Use measure: Incorporate Lab Test Results as Structured Data only looks at lab orders configured with discrete tests. If a lab is a generic lab and doesn’t have any tests, the meaningful use report will not count that lab at all on the report.
  – This measure is currently an additional measure, but under the 2014 ARRA guidelines, incorporating lab test results as structured data will be required for 55% of lab results.
  – The meaningful use report looks at all of the lab tests that are ordered. For example, if you order a Urinalysis lab with 10 tests, the meaningful use report will show 10 in the denominator.

Why should your office use discrete lab tests?

• The Flowsheet screen in the patient’s History information tracks any labs ordered for the patient, both generic labs and discrete labs. However, if you have a lab that is configured with discrete tests, your practice can track specific elements of the lab over time.
  • If you have a generic lab that has been scanned into the EHR and the note on the lab says “See attached scan” clinical staff looking at that lab will have to open the scanned document to see the results.
**Lab Results on Flowsheet Screen**

**Why should your office use discrete lab tests?**

- The Lab Details report will show a complete record of the lab result. The report will also show information about the patient and the lab facility that performed the lab.
- If the patient or a specialist needs a copy of the lab results, the Lab Details report can be printed.
- Discrete lab test results will also appear on the Health Information Summary and the Patient Visit Summary, unless that lab has been hidden from patient reports.

**Accessing the Lab Details report**
Lab Details report

Why should your office use discrete lab tests?

- Lab results that are entered directly into the EHR using discrete tests are labs that do not need to be scanned into PCC EHR. This will decrease the amount of scanning for the clinical staff.
- For labs that have only been configured to display a few tests (for example, 5 results of a CBC), these labs may still need to be scanned into the computer, depending on your workflow.

On-line Resources

- PCC EHR on-line documentation and videos at: http://learn.pcc.com