

# NIH Clinical Center CIO Newsletter

June 2009

43<sup>rd</sup> Edition

This is the forty-third edition of a monthly broadcast email to the CRIS user community about CRIS capabilities and issues. In addition to the text version in this email, I've attached a PDF version that can be printed. I look forward to receiving your comments or suggestions at [CIOnewsletter@cc.nih.gov](mailto:CIOnewsletter@cc.nih.gov). In addition, valuable information can be accessed at the CRIS and DCRI websites: <http://cris.cc.nih.gov>, <http://www.cc.nih.gov/dcric>.

## Topics of the Month

- CIO Remarks
- BTRIS Debut
- New Protocol Consent Functionality
- POIS
- Check Out The Suggestion Box
- Privacy & Security

## CIO Remarks

On June 22 & 23<sup>rd</sup> the Department of Clinical Research Informatics underwent a formal Departmental Operational Review. The process of an operational review is to conduct an in depth analysis and evaluation of the efficiency, quality and resource utilization across the operations of an entire department. The goal of the review is to identify ways and means to maximize productivity in support of the NIH clinical research mission while controlling costs. A department's mission, goals, structure, service, performance and budget is assessed and evaluated as related to the Clinical Center's unique function to provide patient care in the context of clinical research and serve as a national resource for the development of innovation to advance clinical research and clinical research training.

Upon completion, members of the review team develop recommendations and provide observations in a balanced scorecard format, including efficiencies and opportunities for improvement in finance, clinical research and patient care, learning and growth and customer service and staff development.

During the review, committee members spoke with many DCRI staff members, CRIS users, and other CC stakeholders about the department. Subsequently, they documented their findings and analyzed the information provide to them. Currently, the review team members are preparing a comprehensive detailed report identifying strengths and opportunities for improvement within DCRI. When I receive the final report, I will provide additional information in this column of a future newsletter.

At this time, I would like to thank everyone involved in the review, including all the users that completed a survey; those that were part of the stakeholder interviews; the internal review team (Dan Sands, Stacy Charland, Charlie Jones, Yang Fann); the external committee members (Peter Markell, Ronald G. Evans, Barry Blumenfeld, Lynn Vogel, Stephanie Reel); the DCRI staff; and Maria Joyce and Rachael Schacherer who guided DCRI through the review process. In addition, I want to thank Drs. Gallin and Henderson for their active support and guidance.

## **Biomedical Translational Research Information System (BTRIS) Launch Set for July 30**

BTRIS, a new intramural NIH information system for managing research data, will be launched on July 30, 2009. BTRIS will contain data from the Clinical Center clinical information systems (CRIS), as well as data from the initial group of IC-specific clinical research information systems – NIAID and NIAAA. Highlights of available data include current and historical demographic data, clinical laboratory data, medication administration records and clinical documentation. All Clinical Center data from 1976 to the present will be available in BTRIS by January 2010.

What makes BTRIS robust is its Research Entity Dictionary (RED). The RED will allow researchers to ask for the data they need without having to worry about the different ways data are labeled in different systems and even within a system. For example, there are 18 kinds of body temperature measurements in CRIS; when using BTRIS, a researcher can specifically request (for example) “Temperature, Post-Dialysis” or can just say “Body Temperature” to get all the measurements for a patient.

BTRIS users will, with the help of the RED, also be able to identify patients that meet multiple criteria – for example to find all patients whose body temperature was over a certain value and received a specific antibiotic, some antibiotic in a particular class of antibiotics, or simply any antibiotic at all. These are just some of the examples of how BTRIS will facilitate processes that up to now have been complex and labor intensive.

BTRIS 1.0 will go live in 2 phases. Phase 1 begins on July 30, 2009 with Principal Investigators (PIs) accessing identified data on their active protocols. Phase 2 begins in September 2009 and will allow all PIs access to de-identified data on active and terminated protocols.

A support center will be located at the Clinical Research Center, 4<sup>th</sup> floor, Rm 10-4-2480. It will be staffed Monday – Friday, 8:30 AM to 5:00 PM through October 31, 2009. In addition to the support center, there will be a dedicated phone line 1-301-827-8270 and the ability to send electronic messages from the BTRIS Web Site or from within the applications.

**BTRIS Town Hall Meeting: Tuesday, September 15 at 2 PM in the Lipsett Amphitheater.**

Jim Cimino, M.D., Chief, Laboratory for Informatics Development and Director of the BTRIS Project will showcase NIH's BTRIS software. All staff are welcome to see how BTRIS will provide powerful new tools for enhancing the research process.

## **New Protocol Consent Functionality in CRIS!**

Effective June 17, 2009, users can view signed protocol consents in CRIS. The protocol consents must have been signed by the patient on or after May 1, 2009. To access the consents, select the **Protocol Info** tab and then select a specific signed protocol consent for viewing. The consent will be labeled, "Patient **Signed Consent**" in the **Item Detail Column**.

Hard copies of all signed protocol consents are to be sent to the Medical Record Department (MRD) for scanning and filing. Images of scanned consents signed on or after 5/1/09 will be viewable within 24 to 72 hours following receipt in the MRD.

If you are not able to view a signed protocol consent in CRIS for patients who have met the criteria of a signature date of 5/1/09 or later, please contact the CRIS Help Desk at 301-496-8400

## **Perioperative Information Systems (POIS) Activation**

Perioperative Information Systems (POIS) chose SIS as the vendor of choice because SIS provides functionality in all areas of the Perioperative arena and because it is well integrated with CRIS. In June 2006 POIS went live with scheduling, perpetual inventory, and OR statistics. Scheduling utilizes SISWeb a web based application which provides a means of requesting OR/Anesthesia services. The SISWeb request is electronically posted to the SIS scheduling grid and the OR schedule is distributed via secure printers throughout the Clinical Center.

In late-July 2009 POIS is activating nursing clinical documentation and StatCom, an electronic patient tracking system. StatCom is a web based application integrated with POIS to display the current day's OR schedule and track patient movement within the OR on electronic display panels or desktop workstations throughout the OR. Interfaces with CRIS will be providing additional patient attributes that will also be displayed in StatCom.

In mid-August 2009 POIS is activating anesthesia clinical documentation. Anesthesia needs are complex. Recent historic lab results, real-time intraoperative lab results and clinical data captured via the anesthesia and patient monitoring devices will be interfaced to the Anesthesia clinical document. Anesthesiologists providing services to ancillary areas outside of the OR proper will utilize specially configured WOWs enabling them to communicate with offsite biomedical devices.

At that point, POIS perioperative processes will be nearly paperless. All clinical documents will flow electronically to CRIS and be stored in CRIS for viewing. A printed transfer report from Anesthesia, OR Nursing, and PACU will be used for patient handoff communications. The complete clinical record will be printed via over-night batch print job directly to MRD.

The POIS Project has been all hands on deck from the OR and from DCRI throughout the length of the project to assure that the application and interfaces work as designed. The project has not been without issues but perseverance and dedication has kept the project moving forward.

DASS and DCRI are all looking forward to a positive outcome -- an all-inclusive electronic patient clinical record.

## Suggestion Box Icon

A new feature has been added to the CRIS-Sunrise Acute Care to provide users with the opportunity to offer suggestions and feedback about the CRIS to the Department of Clinical Research Informatics (DCRI). The DCRI team intends to review your suggestions /feedback and will take into consideration your comments for potential enhancements to the system.

The suggestion box icon is located at the end of the tool bar and is represented as a file box:



You may receive a message when you log into CRIS to please wait while your system is being updated. Please click "ok" to continue.

## Privacy & Security

### New Wallet ID Cards for Reporting IT Equipment Loss

NIH procedures require users to immediately report all lost or stolen HHS/NIH equipment to the NIH Help Desk, their supervisor, and their [IC Information Systems Security Officer \(ISSO\)](#). In addition, notify law enforcement personnel, the building security office and your IC property manager as soon as possible.

**Events that must be reported to the [NIH Help Desk](#) within one hour include:**

- 1) A suspected or confirmed loss of personally identifiable information (PII)**
- 2) Loss of an NIH-issued laptop**

NIH has provided new Wallet ID Cards with phone numbers to call when government laptops, blackberries and personal storage devices are lost, stolen or missing. The DCRI User Support Team (UST) will distribute the wallet ID cards when new laptops and blackberries are issued to CC staff. Current government laptop and blackberry users can obtain a wallet ID card from their local desktop support staff. Please add the NIH property number of the government equipment that has been issued to you on the card and keep it in your wallet for reference in the event your equipment is lost, stolen or missing.