

RippleDown: Report Validator

This document focuses on RippleDown Report Validator.



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Intended Use

The RippleDown Software is a decision support system intended to assist staff of healthcare organisations in the auditing and/or interpretation of patient data and in the generation of patient reports and/or workflow actions. The criteria it applies is determined by subject matter experts employed by individual clients and is specific to each client site. The software does not contain any pre-programmed clinical information or any inherent diagnostic functionality.

All numeric fields present in the RippleDown applications use "." as the decimal place separator irrespective of the language/locale set on the host computer or CDS clients.

If the locale of the data source has a different decimal representation (for example ","), the data source or an intermediate integration engine will need to transform the number to a decimal point format.

Numerical fields returned as variables in reports will also use "." as the decimal separator irrespective of the language /locale set on the host computer or CDS clients. The Knowledge Builder may use derived attributes to return alternatively formatted values. It is the responsibility of the licensee to use the product in accordance with its intended use. In support of this, it is recommended domain experts include a statement consistent with the following on all reports.

"This report has been generated using clinical decision support software. This report is intended to provide adjunctive information only and should not replace clinical judgement.

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Report Validator

The Validator is a RippleDown component used for reviewing cases and their interpretive reports before they are released back to the Online Information System. Before approving a report, a Validator user is able to edit and correct a report if required. For a given RippleDown installation, some projects can be set up to use the Validator, whereas other projects may use the validation facilities provided by the Online Information System if required.

Login Screen

To login to RippleDown:

- 1. Open the application using the icon:
- 2. The logon screen will appear. with the Report Validator already selected- enter your Username and Password.

Main Screen

The main screen of the Validator shows the list of queues. There is at least one queue for each project. In addition, there may be special-purpose queues that have been setup for the project, for example, to group particular types of cases. There may also be queues corresponding to users who have had cases referred to them by other Validator users. These special-purpose queues will only appear if there are cases waiting on them to be reviewed. As well as these queues, which are for reviewing cases prior to their release to the Online Information System, there may be Copy queues for the independent offline review of some or all cases.

Each queue shows the following information:

- The project name.
- The name of the queue within the project, e.g. the user name for a referred queue.
- The number of cases waiting on the queue.
- Any users that are currently reviewing the cases on the queue. Note, several users may review the same queue simultaneously. The RippleDown server will ensure that a particular case will only be reviewed by one user.

| Project | Queue | Waiting | Reviewers | _ | _ | |
|------------------------|------------|---------|-----------|---|---|--|
| Chem_DI | | 7 | | | | |
| Chem_DI | Paediatric | 5 | | | | |
| EMR | | 0 | | | | |
| Penny_Seeded_Lipid_621 | | 0 | | | | |
| Penny_Seeded_Lipid_621 | TestQueueA | 9 | | | | |
| Penny_Seeded_Lipid_621 | TestQueueB | 2 | | | | |





Reviewing a Case

To begin reviewing the cases in a queue, click on the required queue name. This will activate the Validator Case Viewer, in which individual cases on that queue are presented for your review.

The screen will contain the following information:

- A view of the data in the case.
- The report given by the Knowledge Base.
- Any internal comments given by the Knowledge Base.
- Any notes added by another user (if this case has been referred)
- Buttons for working with the case.

| 🛜 RippleDown Validator | - Chem_DI | | _ | | × |
|--|-----------|---|---|-------|--------------|
| File Action | | | | | |
| 7238049 MRN: 75441 | Given: Fl | FJGG Sex: F Yrs: 48 DOB: 21 Nov | 760 🔎 | | |
| | Range | | 15 Oct 09 | | |
| | Runge | | 10:10 | | |
| LabNumber | | 7238049 | | | |
| – ays_between | | false | | | |
| Cholesterol | < 5.5 | 6.5* | | | |
| Triglyceride | < 2.0 | 0.6 | | | |
| HDL | > 1.0 | 2.3 | | | |
| LDL | < 3.5 | 3.9* | | | |
| -HbA1c | | | | | |
| TSH | 0.40 | 1.27 | | | |
| - CollectedDate | | 15 Oct 09 | | | |
| Notes | | FAMILY H/O IHD | | | |
| Ordered | | FBC, ESR, LFT, LIPP, TFT, MALB, CA12 | 5 | | |
| Secondary Tests | | | | | |
| Doctor Details | | | | | |
| User Defined Fields | | | | | |
| G Other LIS Data | | | | | |
| Interpretation: | | | Autovalidation level: 0%. The report as a whole has a level of 0%. | 6 | × 4 |
| incerpretation. | | | Autoralidation refer one. The report as a whole has a refer of one. | P. 1. | - - |
| patient: calculate a RECOMMENDATIONS Suggest check <u>Hbalc</u> MEDICARE GUIDELINES | level to | risk at www.cvdcheck.org.au. assess diabetes status (fresh : | ample required). | | |
| | 1 | | Back Skip Brefer Accept C | ose | <u>H</u> elp |
| Waiting: 7 Reviewed: 0 | Last case | e: none 🔛 | | | |

Reason for reviewing current Case

The reason why the current case was queued to the Validator is shown in between the case view and the interpretation panel.

The reasons include:

- The report has not yet been allowed for autovalidation.
- One of the report sections has not yet been allowed for autovalidation, if the autovalidation policy is based on report sections.
- The report has an autovalidation level of less than 100%.
- There is an autovalidation setting given for the case, with a level of less than 100%.
- The report has an internal comment.
- The report has an unevaluated expression or an untranslated comment.

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Show Conditions for the Interpretation

The conditions used in the knowledge base to add the individual comments to the report can be viewed by selecting the Comments tab and then right clicking on the appropriate comment and selecting show conditions. The conditions will be displayed just as they are in the Knowledge Builder

| FROM 1ST | NOVEMBER 2014, HbA | c is elic |
|----------|--------------------|--------------|
| Report | E Comments | <u>Notes</u> |

Approving the Interpretation

If you are satisfied that the current report is suitable for release, simply press the Accept button which will send that report back to the Online Information System with a flag indicating that the report is ready for release.



If the current report needs some modification before it can be released, edit the interpretation as required. If a complete comment needs to be added, you can pick from the list of existing comments using the Insert comment button. While making changes to the report, you have access to the Undo and redo buttons to help with the required changes.



| 穿 Insert an ex | xisting comment into the report. | × |
|----------------|--|---|
| Search for: | | |
| Comment | Clinical Notes ambiguous. Diabetes may be suspect. Please check Clinical Notes ambiguous. IHD history may be suspect [{most recent (Notes where (HX_IHD is true))}] Clinical Notes ambiguous. OtherCVD history may be suspect. Please check Clinical notes of overweight ambiguous. Please check. | • |
| | Consider clinical review of diabetes management strategy. Consider monitoring HbA1c 3-monthly until glycaemic control improves (note that more frequent testing is of limited clinical Consider possible Familial Hypercholesterolaemia (an autosomal co-dominant condition characterised by increased LDL- Consider possible Familial Hypercholesterolaemia when LDL > 4.9 mmol/L. Consider review of lipid management strategy, aiming to lower triglyceride levels. | ~ |
| | <u></u> <u>OK</u> <u>C</u> ance | 1 |

Once the edited report is ready for release, press the Accept with change button. You will then be asked to add a note as to why the report was changed. Once you press OK, the edited report will be sent back to the Online Information System with a flag indicating that it is ready for release. A copy of the case, with your reason for change, will be sent to the Rejected queue in the Knowledge

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Builder. The Knowledge Builder user will then be able to update the Knowledge Base (i.e. the project) so that subsequent reports for this type of case will be correct.

| 💝 Add Note | | × |
|---|------------|-----------|
| This Dr doesn't want th report section | ne Recomm | endations |
| ☑ <u>A</u> lso send to the Kn | owledge Bu | ilder |
| | <u>o</u> ĸ | Cancel |

Once you have approved a report, it will immediately be sent back to the Online Information System. If you believe that you might have mistakenly approved an inappropriate report, contact your System Administrator immediately.

Referring a Case

If there is another Validator user who should check the report, the case can be referred to that person's queue. Click the Refer button and then select a specific user's queue. Your IT administrator can associate email addresses with each user so that the user is informed by email of the arrival of a case in their queue.

| Back | 🕑 <u>S</u> kip | 🗟 <u>R</u> efer | Second Accept | <u>Close</u> | <u> </u> |
|------|-------------------|---------------------------------------|-----------------|----------------|----------|
| | | | | | |
| | ኞ Refer ca | se | | × | |
| | <u>R</u> efer to: | admin rob | | | |
| | <u>N</u> ote: | Can you please i relation to Diabe | | tient in | |
| | 🖾 Notify l | by <u>e</u> mail (if email | address supplie | ed) | |
| | | <u>о</u> к | <u>C</u> ancel | @ <u>H</u> elp | |



Skipping a Case

If you wish to deal with the case at another time (e.g. when some pending tests have been completed), you can press the Skip button. The case will be available next time you review the queue. The latest version of the test results will be shown at that time.



Previous Cases

Press the Previous button to look at cases you have previously approved, referred or skipped on this queue, in this current session. Please note, you will not be able to change a report that you had previously approved or referred.



Finding a particular Case

By default, cases are presented for review in the order they are received into RippleDown. If however you want to review a particular case that you believe is on this queue, use the Find Case menu item in the File menu and search by case number

| 🔗 RippleDown Validator - 0 | Chem_DI | | | | | | | - | | × |
|-------------------------------|-----------|--------------------------|---------------------|------------------|----------------|-----------------|-----------------|----------|---------|--------|
| File Action | | | | | | | | | | |
| Find Case Ctrl+F 441 | Given: F | FJGG Sex: F Yrs: 48 | DOB: 21 Nov 60 | | | | P | | | |
| Close Search for a case by | 1 | | | 15 O 10:10 | | | | | | |
| LabNumber | | 7238049 | | | | | | | | |
| - avs between | | false | | | | | | | | |
| Cholesterol | < 5.5 | 6.5* | | | | | | | | |
| Triglyceride | < 2.0 | 0.6 | | | | | | | | |
| HDL | > 1.0 | 2.3 | | | | | | | | |
| LDL | < 3.5 | 3.9* | | | | | | | | |
| -HbA1c | | | | | | | | | | |
| TSH | 0.40 | . 1.27 | | | | | | | | |
| CollectedDate | | 15 Oct 09 | | | | | | | | |
| Notes | | FAMILY H/O IHD | | | | | | | | |
| Ordered | | FBC, ESR, LFT, LIPP, TFT | , MALB, CA125 | | | | | | | |
| Secondary Tests | | | | | | | | | | |
| Doctor Details | | | | | | | | | | |
| User Defined Fields | | | | | | | | | | |
| Cther LIS Data | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Interpretation: | | | Auto | validation level | : 0%. The re | eport as a who | ole has a level | of 0%. | 5 | - |
| DDD 10 RDOVE ONC 2012 | HEULO | LOUNDROIDH CHINCE TOT | HIGH LIGE INGLVIG | uuto 1< 2.0 1 | | mi guiuciin | c icconnenua | 01011 LU | - 01110 | - |
| | | risk at www.cvdcheck. | | | ~ ~ | | | | | |
| RECOMMENDATIONS | | | | | | | | | | |
| | evel to | assess diabetes stat | us (fresh sample re | equired). | | | | | | |
| | | ç is eligible for Med | icare rebates when | used in the | DIAGNOSIS | S OF DIABETE | S. A maximum | of 1 t | est in | a |
| 12 month period is re | batable | - | | | | | | | | \vee |
| Report Comme | ents | <u>Notes</u> | | | | | | | | |
| | | | | Dent. | Chie | 😑 Defen | | C | | Links |
| | | | | Back | 🕑 <u>S</u> kip | 🗟 <u>R</u> efer | Accept | Clo | se | Help |
| Waiting: 7 Reviewed: 0 | Last case | e: none 🝳 | | | | | | | | |
| | | | | | | | | | | |

Logging out of the queue

When a Validator user starts reviewing a queue, a batch of up to 10 cases is immediately sent from the RippleDown Server to the Validator session as a "buffer" behind the scenes. This is done so that Report Validator Version 7.7 Page 9 of 10



when the Validator user approves a case, the next case can be shown immediately, without having to ask the RippleDown Server for another case. As the Validator user approves cases, the RippleDown Server automatically tries to keep the Validator workstation buffer full of cases. Once you have finished reviewing cases on a queue, it is important to close the queue by clicking the Close. Any cases that have been queued to you but not yet reviewed will be returned to the RippleDown server and so will be accessible by other users. A Validator session will automatically Logout once a specified amount of time has elapsed without any interaction by the user.

