



Message from
Senior Management

Doing The Right Thing

Frank Fortner
Senior Vice President



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Thomson Reuters 100 Top Hospitals[®]



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Doing The Right Thing

Frank Fortner, Senior Vice President of Software Solutions

Message from
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"Many came because it was the right thing to do." - Colonel Joshua Lawrence Chamberlain of the 20th Maine Volunteer Infantry Regiment in the film *Gettysburg*.



Portraying Colonel Chamberlain, Jeff Daniels delivers one of the most critically acclaimed movie speeches of all time. In a brilliant display of motivational leadership when faced with a band of mutinying soldiers, Chamberlain paints a stirring picture of the war's real stakes, and the men (moved by his words) eventually join him in the fight at Gettysburg. Why did young men leave their families and put their lives on the line in order to preserve the Union? Simply this: it was the right thing to do.

Doing the right thing for the right reason, you might even add at the right time and in the right way, is something I have always believed in and frequently do automatically. Over the years, I have been privileged to work with several men and women of integrity and strong character who also believe this principle. While most of us will never be asked to put our lives and personal safety on

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the line at work, we can still take a page from Chamberlain's play book when faced with the various challenges of everyday life. When we take this approach, we simplify the decision making process by removing personal agendas and politics from the equation. In each situation, you simply step back and objectively ask the question, "What is the right thing to do here?"

In my experience, the companies that provide the best service levels are those that rely less on policies, procedures and scripts, and more on the empowerment of their employees to think about the situation and do the right thing for their clients. The times I have personally been most impressed by customer service have been when the person on the other end of the phone made a quick decision to solve my pain point in the right way—without placing me on hold to speak with various managers—or worse, driving me through a 30-minute script designed for idiots, only to discover that yes indeed, my computer is turned on and connected to the network. Face it, we've all been there and it's no fun.

At Iatric Systems, we believe in doing the right thing for the right reasons. Our employee culture is wired this way and our employees are empowered to live it. At times, we've made bold business decisions to produce integrated products our customers asked us to build. Other times, we've been honest and said "yes, it can be done" when other voices said "no, it can't." Our goal has never been to start "civil" wars of software competition, but rather to respond in each situation with our customers' best interest in mind, because that is the right thing to do.

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Five Ways to Optimize Time & Resources for MEDITECH Updates

Iatric Systems is pleased to host Ted Molloy, Executive Vice President of Array Software for this informative webinar on [Wednesday, May 2, 2012 at 2:00pm ET](#).

Array Software has more than 20 years of experience working with hundreds of hospitals on their MEDITECH upgrade implementations. Join Ted as he shares their clients' collective knowledge on a broad range of software upgrade aspects with a particular focus on time and resources. Ted will present a Five-Point Optimization Plan to guide users through the process.

The plan details how to achieve two goals:

- Drastically reduce the number of issues on go-live day
- Maximize the real advantages contained in the upgrades themselves
- Learn ways to optimize time and resources for those daunting MEDITECH updates. This informational webcast focuses on the update issues IT professionals consider the most challenging and offers a comprehensive solution to mastering this labor-intensive process.

Contact us to learn more at info@iatric.com or 978-805-4100.

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100 Top Hospitals

Congratulations to all of the hospitals named to the 100 Top Hospitals list by Thomson Reuters. Nearly 3,000 short-term, acute-care, non-federal U.S. hospitals were studied, but only 100 hospitals made the list.

The study evaluates hospitals on measures of overall organization performance, including patient care, operational efficiency and financial stability. It compares hospitals only against similar facilities in terms of size and teaching status.

The following hospitals have been highlighted among the top 100 U.S. Hospitals. Hospitals highlighted in blue are Iatric Systems customers as well. We would like to extend our congratulations to these hospitals and to all hospitals that were recognized for their achievements.

The 100 Top Hospitals Everest Award

The Everest Award honors hospitals that have achieved both the highest current performance and the fastest long-term improvement over five years.

Array Software



Top 100 Hospitals



[French Hospital Medical Center in San Luis Obispo, CA](#)
[Sarasota Memorial Hospital in Sarasota, FL](#)
[Doctors Hospital of Sarasota in Sarasota, FL](#)
[Ochsner Medical Center in New Orleans, LA](#)
[Augusta Health in Fishersville, VA](#)
[The Methodist Hospital in Houston, TX](#)

Teaching Hospitals

[Advocate Illinois Masonic Medical Center in Chicago, IL](#)
[Advocate Christ Medical Center in Oak Lawn, IL](#)
[Allegheny General Hospital in Pittsburgh, PA](#)
[AnMed Health Medical Center in Anderson, SC](#)
[Beth Israel Deaconess Medical Center in Boston, MA](#)
[Memorial Health Care System in Chattanooga, TN](#)
[Mercy Medical Center in Baltimore, MD](#)
[Ochsner Medical Center in New Orleans, LA](#)
[Poudre Valley Hospital in Fort Collins, CO](#)
[Providence Little Company of Mary Medical Center in Torrance, CA](#)
[Saint Vincent Hospital in Worcester, MA](#)

Large Community Hospitals

[Centinela Hospital Medical Center in Inglewood, CA](#)
[Martin Health System in Stuart, FL](#)
[Ocala Regional Medical Center in Ocala, FL](#)
[Providence Little Company of Mary Medical Center in Torrance, CA](#)
[St. David's Medical Center in Austin, TX](#)
[St. David's North Austin Medical Center in Austin, TX](#)

Medium Community Hospitals

[Augusta Health in Fishersville, VA](#)
[Bon Secours St. Francis Hospital in Charleston, SC](#)
[Chino Valley Medical Center in Chino, CA](#)
[Doctors Hospital of Sarasota in Sarasota, FL](#)
[Doylestown Hospital in Doylestown, PA](#)
[French Hospital Medical Center in San Luis Obispo, CA](#)
[Garden Grove Hospital Medical Center in Garden Grove, CA](#)
[Gulf Coast Medical Center in Panama City, FL](#)
[Northwest Medical Center in Margate, FL](#)
[Ogden Regional Medical Center in Ogden, UT](#)
[St. David's Round Rock Medical Center in Round Rock, TX](#)
[West Anaheim Medical Center in Anaheim, CA](#)

Small Community Hospitals

[Desert Valley Hospital in Victorville, CA](#)
[Hill Country Memorial Hospital in Fredericksburg, TX](#)
[Major Hospital in Shelbyville, IN](#)
[Ponca City Medical Center in Ponca City, OK](#)
[St. Elizabeth Community Hospital in Red Bluff, CA](#)
[Sutter Davis Hospital in Davis, CA](#)
[The HealthCenter in Kalispell, MT](#)

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Prepare for Meaningful Use *and* Meet Your Patients' Expectations

Attend this important presentation on how a patient portal is key to preparing for Stage 2 Meaningful Use, meeting your patients' expectations and moving your hospital into the future of healthcare.

Patient Portal: Prepare for Meaningful Use *and* meet your patients' expectations

To register, click on a date below.



Date	Day	Time
May 17, 2012	Thursday	2:00 pm ET
May 23, 2012	Wednesday	2:00 pm ET

Learn how Iatric Systems PtAccess patient portal is a "must have" solution and how it helps your hospital...

- Empower patients with easy, secure online access to their discharge instructions and patient records
- Increase cash flow and revenue while reducing overhead costs
- Make it easy for patients to manage appointments, pay bills, check medications and much more

See how your hospital can benefit now from being part of the future of healthcare.

Contact us to learn more at info@iatric.com or 978-805-4100.

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Revenue Cycle Improvement Tips

Kay Jackson, Manager, Software Certification, Compliance and Financial

Part 4: How should we prepare for Accountable Care Organizations (ACOs)?

Knowing how to prepare for ACOs is like having a crystal ball in your boardroom. While you may not yet know the future for your hospital and ACOs, the ideas on our website may start you planning your course of action or thinking about how these changes could impact your patients. Preparing as if your facility is planning on becoming part of an ACO can bring better insights to your patients and help achieve success at your facility.

Craig Samitt, CEO for Dean Health Systems in the article titled "ACO's need 'optimal' IT use to succeed"⁽¹⁾ stated: "Meaningful Use of EHRs will be essential, but not sufficient, to be 'accountable' in the future" and he adds that in looking at technology's impact on other industries, most healthcare systems eventually will need to implement technologies such as kiosks, Web portals, virtual units and predictive patient diagnostic systems. "It would be hard to imagine a future healthcare world without [health information exchange] as part of the mainstream," he says.

As you read and learn more about ACOs, be sure to check out the [Iatric Systems ACO webpage](#), which recaps the solutions that Iatric System offers to assist your facility for the future. We also offer an [ACO advanced solutions catalog](#) that provides summary information for each of these solutions. The Centers for Medicare and Medicaid recently [unveiled 27 Medicare ACOs as well](#).

I hope to see each of you at MUSE International May 29-June 1. Come by our booth and share your thoughts and challenges on both Meaningful Use and ACOs. We're here to listen and help.

1. [Hospital CEO: ACOs need 'optimal' IT use to succeed](#)

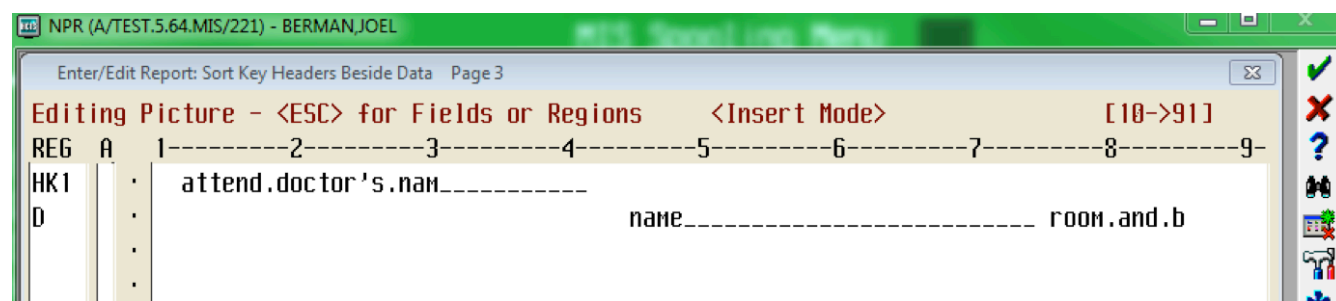
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NPR Report Writing Tips

Joe Cocuzzo, Vice President – NPR Services

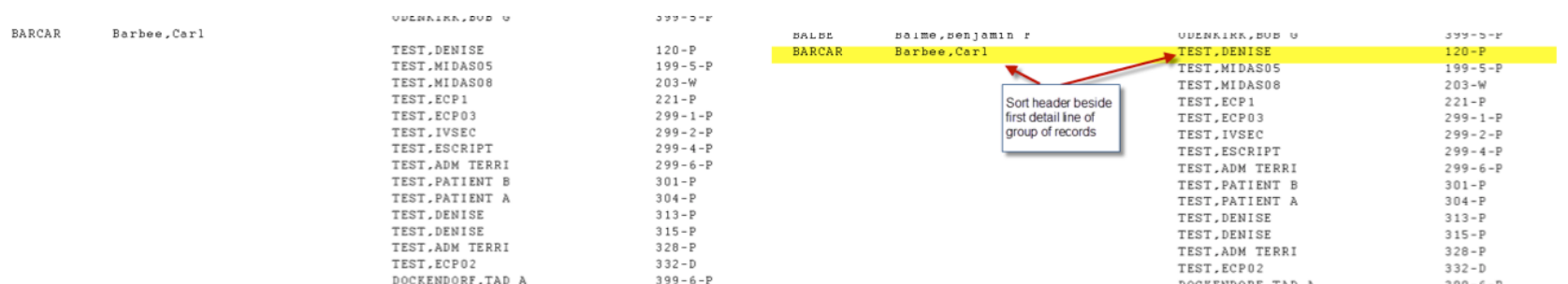
NPR Tip: Save Valuable White Space on Your Reports (MAGIC, Client/Server or Report Designer)

When you use sort headers on an NPR or Report Designer report, you can print the sort values on a line above the detail items like so:



Sometimes users object to the "stair step" look of this layout, and they want the key header information to print on the same line as the first detail record.

Rather than this (stair step output).....They want this (key prints beside first record).



You could use some flags that are set in the HK region and cleared after the first detail record is printed to create fields that print one time only as the sort changes. There is an easier method

which just sets up a set of computed fields that watch for a sort change as the report prints.

When your report translates, the translator tells you the sort fields of each sort key. You can make a set of computed fields that watch for a change in the sort value so that they will print once at the beginning of each set of records (in our example, each set of patients for a given attending doctor).

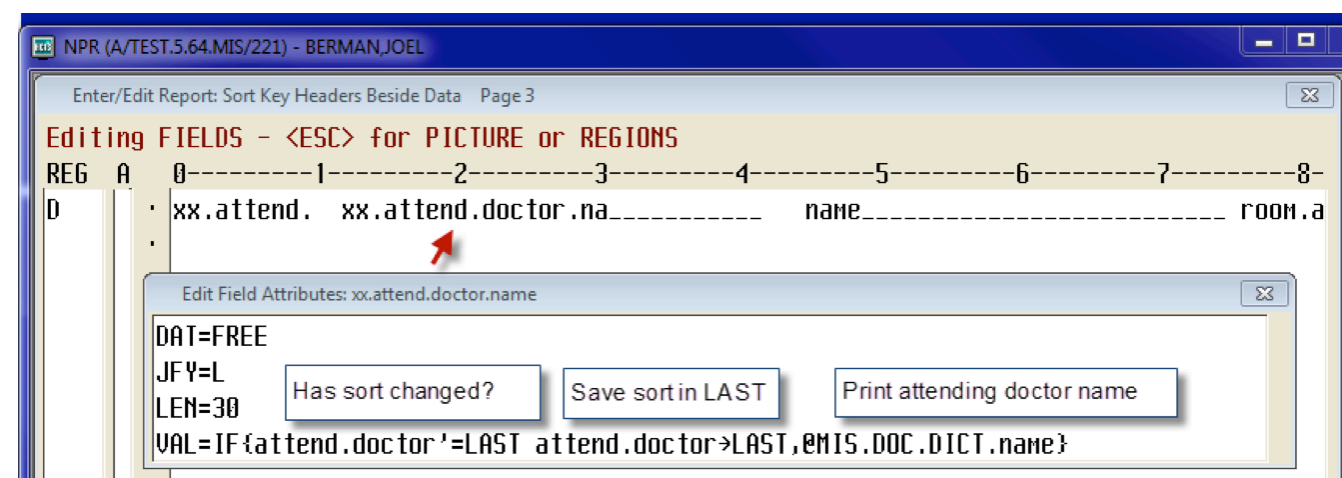
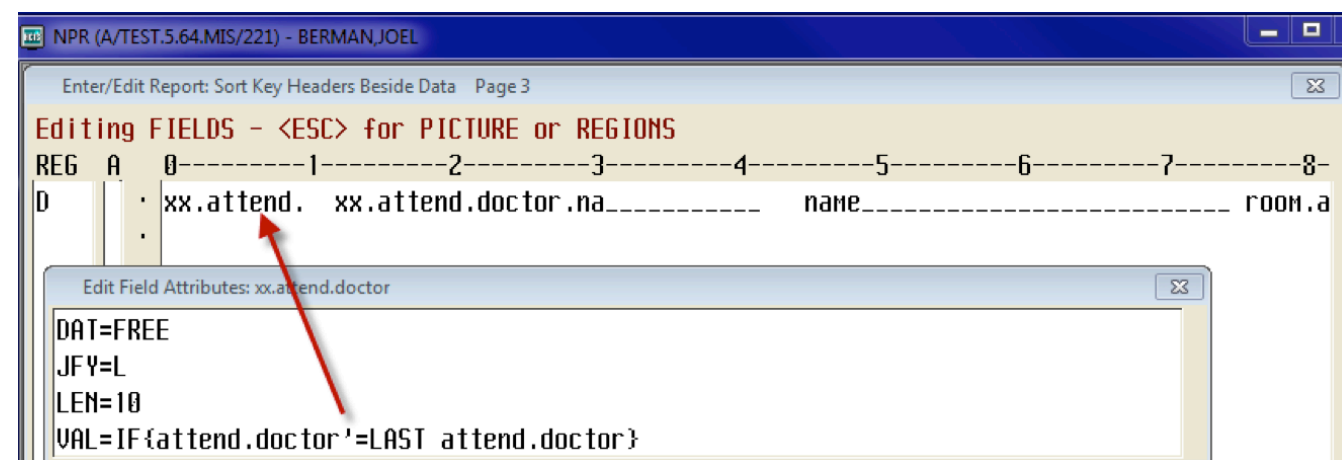
```
CUSTOMER R/W: Translating report: ADM.PAT zcus.is.sort.key.headers
Sort Key Headers Beside Data
Sort Key 1 is ADM.PAT attend.doctor ggg
Sort Key 2 is ADM.PAT facility gqb
Sort Key 3 is ADM.PAT room ggr
Sort Key 4 is ADM.PAT bed ggrB
Sort Key 5 is ADM.PAT urn aa
```

Watch for this to change via computed field IF statements

As the report prints records, the value of the local variable attend.doctor (translates to ggg) will change from the first doctor, to the second, etc. If we create a set of header fields that watch for the value of the local variable attend.doctor to change, and print only as the value changes, we can have smart headers that print beside our first detail record in the section, but do not repeat down the page.

In the example, we have a computed field for the attending doctor mnemonic, and another computed field to the right which prints the attending doctor name.

In the left hand (mnemonic) field we check to see if the attending doctor sort value has changed by comparing to our own stored value in the variable "LAST". In the right hand (name) field we do the same check, and also store the value of the current attend.doctor sort field in our variable LAST.



You might wonder why the field @MIS.DOC.DICT.name manages to print the name of the attending doctor. This is because the sort field attend.doctor translates to the same local variable which is the subscript of the records in MIS.DOC.DICT. In fact, just about every time you sort on a field that is a dictionary mnemonic, the sort subscript is identical to the subscript of the dictionary DPM and you can just use fields from the dictionary and they will work.

PS: You might not be used to using fields in a report without the "@" sign. The difference between using a field with the @ sign or without the @sign can either make no difference, or make a huge difference in the behavior of your report. This is how things work:

Some fields in the data definition are not stored data, but are subscripts. An example from ADM is the field @urn. Regardless of whether you use @urn or urn, the field translates to exactly the same thing: aa.

Other field are stored data, so if you use the "@" sign, you get a prefix/global/subscript combination like so:

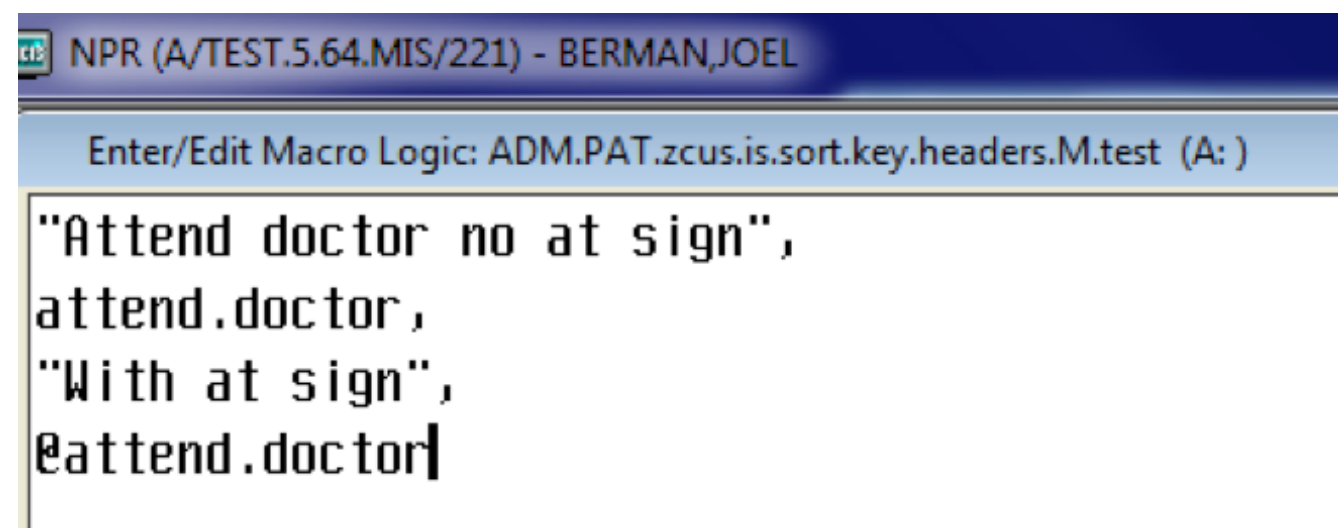
@attend.doctor: *AA[aa]DR|1 (magic) or \$(A)AA[aa]DR|1 (client server)

If you use the field without the @ sign: attend.doctor, you get ggg for either platform.

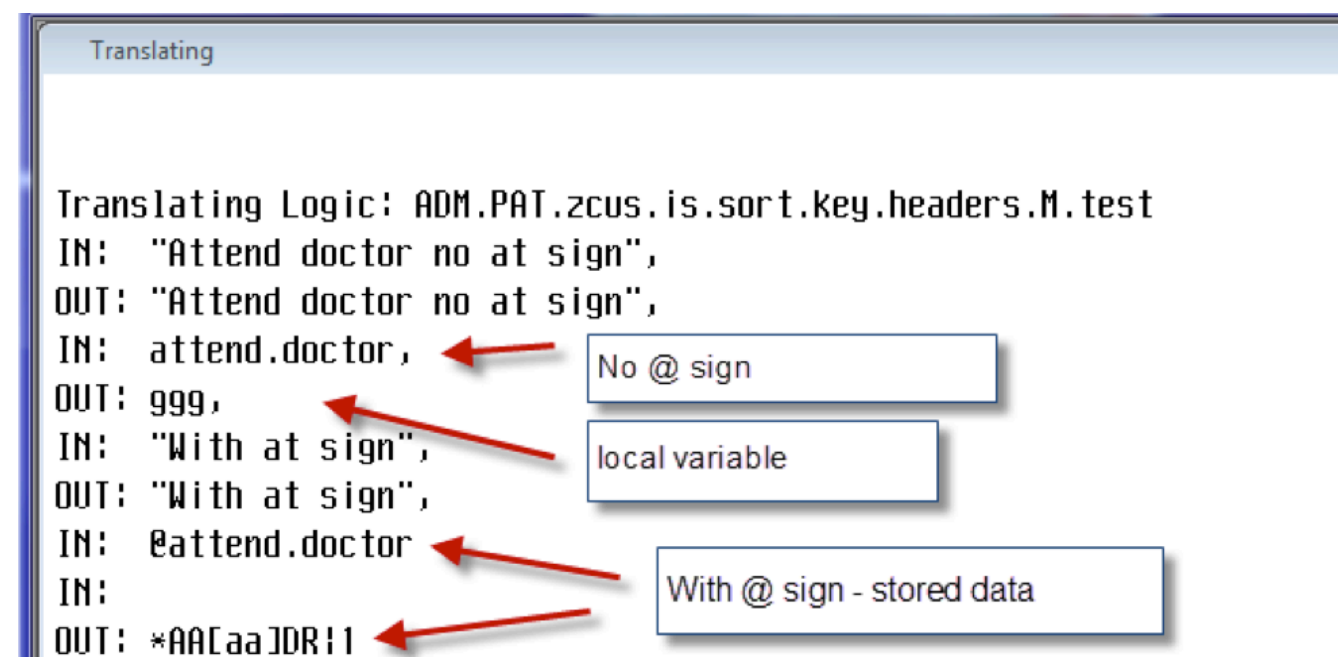
Final Tip:

If you are ever trying to figure out how a field translates and don't want to slog thru the Data Definition or peer at your object code listed to Preview, you can stick the field in a macro and translate. For example to see the difference between @attend.doctor and attend.doctor, I can write a macro like this:

(I include strings in quotes so I will see them in the object code to make things clearer):



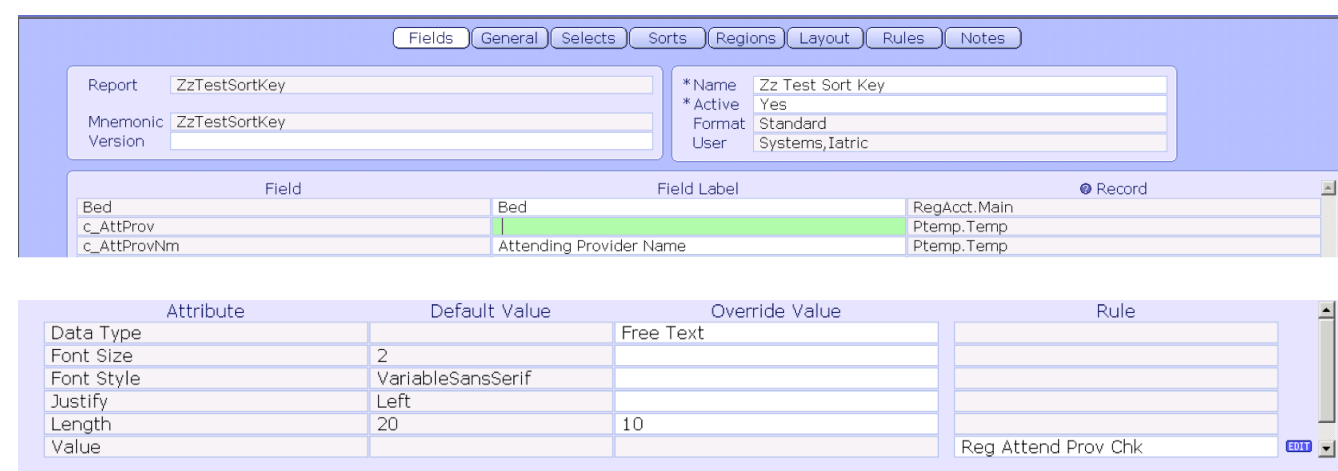
The translator shows me what I will get with each field:



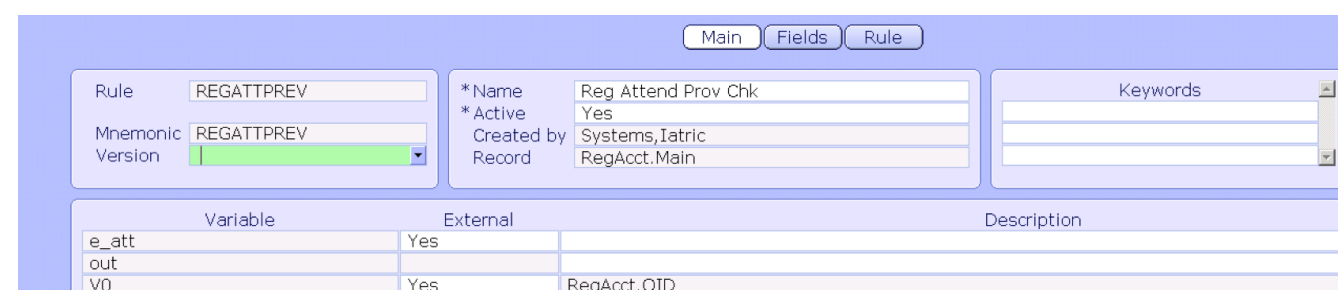
Report Designer

The report designer approach is to create two computed fields and use a rule to set the value of the fields to the attending doctor mnemonic or name as the value of the sort changes.

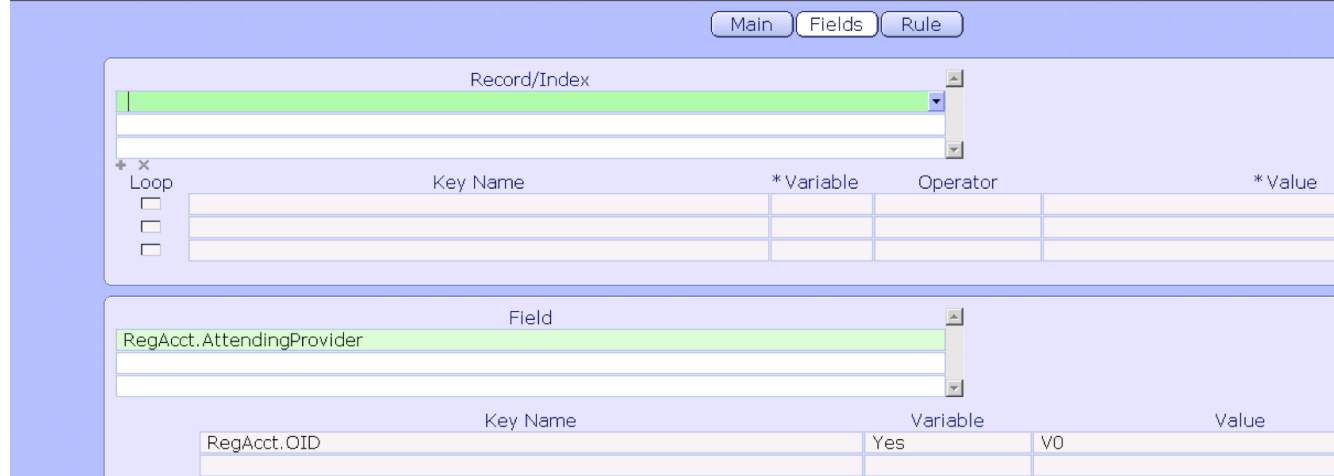
Start on the Field page of Process Reports and create two computed fields, one for the attending provider mnemonic and one for the name. Both computed fields will need a rule associated to the Value Attribute.



On each of the two rules, created for the computed fields, add an External variable (same variable needs to be used in both rules) and a local variable on the main page of the Rule Dictionary. The default VO external variable for RegAcct.OID is passed to the rule from the report.

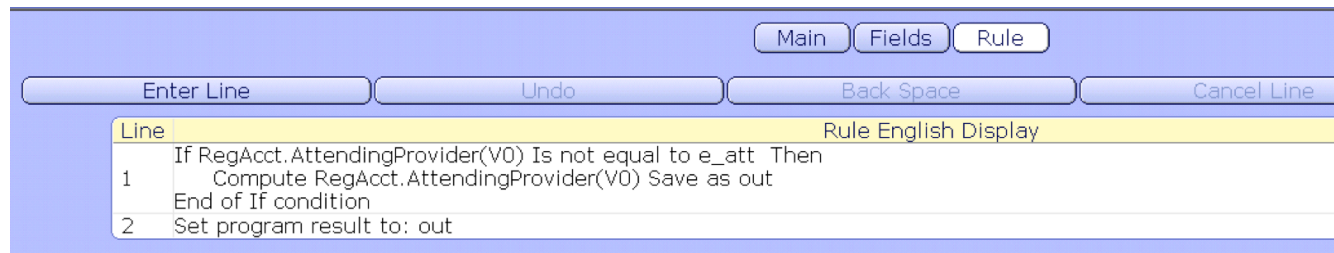


On the Fields page of the Rule Dictionary, for the mnemonic rule, add the RegAcct.AttendingProvider field. The VO value will default in for the RegAcct.OID key.

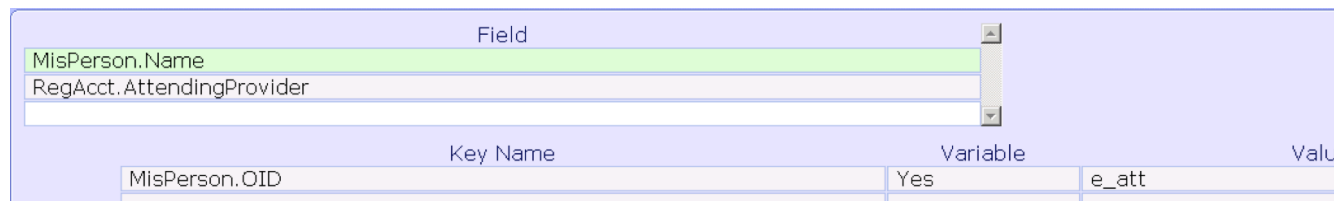


On the Rule page use the following steps to create the rule below.

Enter Line > Do/If /Then > If > Field > RegAcct.AttendingProvider(V0) > Operator > Is not equal to > Variable > e_att > End Line
 Then > Expressions > Compute > Expression > Field > RegAcct.AttendingProvider(V0) > Save As > out > End Line > End If
 Enter Line > Expression > Set Program Result > out

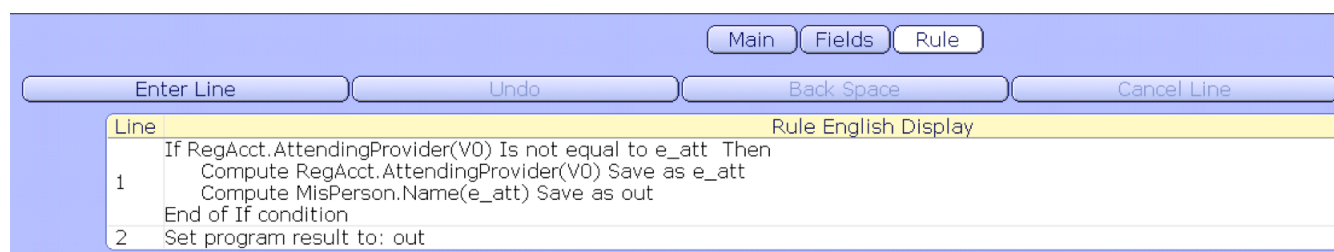


On the next rule, for Attending Provider Name, add MisPerson.Name field and use the e_att attribute as the value for the MisPerson.OID key. RegAcct.AttendingProvider will default in a value of V0 for the RegAcct.OID.

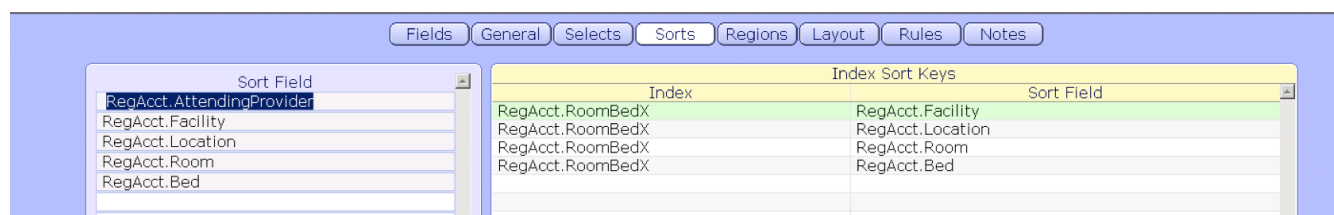


On the Rule page use the following steps to create the rule below.

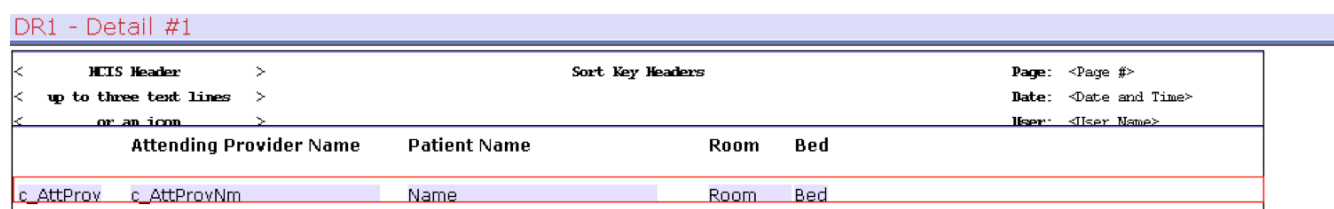
Enter Line > Do/If /Then > If > Field > RegAcct.AttendingProvider(V0) > Operator > Is not equal to > Variable > e_att > End Line
 Then > Expressions > Compute > Expression > Field > RegAcct.AttendingProvider(V0) > Save As > out > End Line
 Statement > Expressions > Compute > Expression > Field > MisPerson.Name(e_att) > Save As > out > End Line > End If
 Enter Line > Expression > Set Program Result > out



After created the computed fields and rules go to Sorts page, of the Process Reports routine, add the sort field RegAcct.AttendingProvider and move it up to the first sort key position.



In the Detail Region on the Layout Page add the 2 computed fields, the mnemonic field first and then the name field.



Attending Provider Name	Patient Name	Room	Bed
AJATE	Ajax, Theodore	CMC01	D
BEABE	Beasley, Benjamin E	1	D
	TEST, MIDOC	1	W
	Test, MikeOR	1	W
	Test, Pluto	1	W
	TEST, MINNIE	2	D
	Test, Goofy	2	W
	TEST, MICKEY	3	D

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<http://www.iatric.com/Information/NPRTips.aspx>, as well as information about our [on-site NPR Report Writer Training](#) and [NPR Report Writing Services](#).

Read Joe's blog posts at [MEDI-Talk](#).

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Location	Level	Instructor	Date	Status
Valley Presbyterian Hospital Van Nuys, CA	Intermediate / Advanced	Philip Sherry	September 10-12, 2012	Fee for Seat

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(Chapel Hill, NC)

[HCCA 2012 Compliance Institute](#)

April 29 - May 2, 2012

Caesar's Palace

3570 Las Vegas Blvd

(Las Vegas, NV)

[CLMA ThinkLab 2012](#)

April 29 - May 2, 2012

Georgia World Congress Center

(Atlanta, GA)

[2012 International MUSE Conference](#)

