Care2x Changes

The objective of this document is to narrate in detail the various changes made so far on the care2x core.

First submission August 2007

- 1. Care2x integrated with SimpleInvoices (another open source system) to take care of billing / invoice management.
- 2. Additional patient monitoring forms (Diabetic Drug Chart, Turning chart, Neuro Chart) added to Charts folder.

Second Submission July 2008

The following additions / corrections have been made to the care2x core.

S.No	Module	Features added
1.	Patient Registration	1. On entering the date of birth, the system will compute the age. In case, you do not know the date of birth you could enter the age in years but the system will not generate the DOB (dd/mm/yyyy) because majority of the physicians feel that computing DOB, from age in years, is not a good practice and may have legal implications.
		2. The ZIP / PIN is being validated for 6 digits. To my knowledge there is no country which has PIN more than 6 digits. If i am wrong in my assumption, please correct me.
		3. RH factor of the blood group is being captured.
		4. Provision to enter other hospital number has been provided. The system admin has the facility to add other hospital name and other hospital starting number.
		5. Referred by doctor has been added. The system admin has facility to add referred by doctor's name, department and clinic.
		6. Based on billing type the details will appear. For example, selecting self pay will not display any insurance details to enter. If you choose insurance details, you will get additional fields to enter.
2.	Patient Admission	1. Accident Register has been included to aid physicians / clinics to capture relevant data of the patient during admission

	if he / she was involved in an accident.
	2. Reason for admission is included (Operative , Non-operative and Others).
	3. Patient Habits is being captured during the admission
	4. Attach physician to the patient during admission.
	5. The mandatory fields such as diagnosis, referrer notes and therapy has been hidden. The Physicians preference it to include these into Medocs.
	6. Under Notes and Reports, through pdf document of reports, users have the option to select the reports.
	7. Based on billing type the details will appear. For example, selecting self pay will not display any insurance details to enter. If you choose insurance details, you will get additional fields to enter.
Patient Appointment	1. The department and doctor drop down has been activated. Users could now select the physician / department from the drop down box to view the appointments.
Operational Journal (OT List)	1. OT List has been included for a quick view on the OP room appointments and scheduling.
Medocs	1. Additional fields Complaints / Examination, Diagnosis and Therapy and some more fields has been added.
Prescriptions	1. You could now enter multiple drugs in the same prescription.
Discharge Summary	1. File attachment facility is provided under the discharge summary option.
	2. Discharge summary will now pick up details from various places like Medocs ,OT, Prescription,etc.
	3. Condition at Discharge, Discharge advice has been included.
	4. Option to Preview discharge summary has been provided.
Laboratory	1. The lab group and parameter has been totally revamped. The group and parameter pre-defined pink form is no more being used and instead the user created group and parameter will only appear on the pink form.
	Appointment Operational Journal (OT List) Medocs Prescriptions Discharge Summary

		2. The pending request will also show only tests ordered.
		3. All lab requests will automatically be added to the billing.
		4. Only if the owing under the billing is zero, the test request will appear under the pending request. This workflow is applicable for outpatients only.
		5. There is now a delete option under pending requests for now show. This will also automatically delete the billing info.
		6. Lab tests from ICU only are colour coded in order to differentiate.
		7. Simple Lab reports have been included.
		8. Lab result print out modified to suit local needs. I presume it will be applicable to others as well when compared to the already existing one.
9.	Billing	 There is a facility to archive old bills. The criteria for archive are as follows: 1.a - Patient should be discharged 1.b - Patient should not have any pending bills
		2. There is a facility to view the archived data.
		3. Under billing->payment process, if credit card, user can enter name as in card, Bank Name, transaction Id. If Cheque, user could enter Bank Name, Cheque Number.
		4. Billing->Reports has facility now to generate consultant or department or staff wise report.