# Lab Task Flows and Wireframes

Version: Lab Task Flows VI.6.graffle

Modified:Tue Feb 28 2012 Created: Sat Nov 12 2011

# Legend

entry/ exit point

Entry/ Exit point



Decision



Simultaneous event

Page

Screen

Event

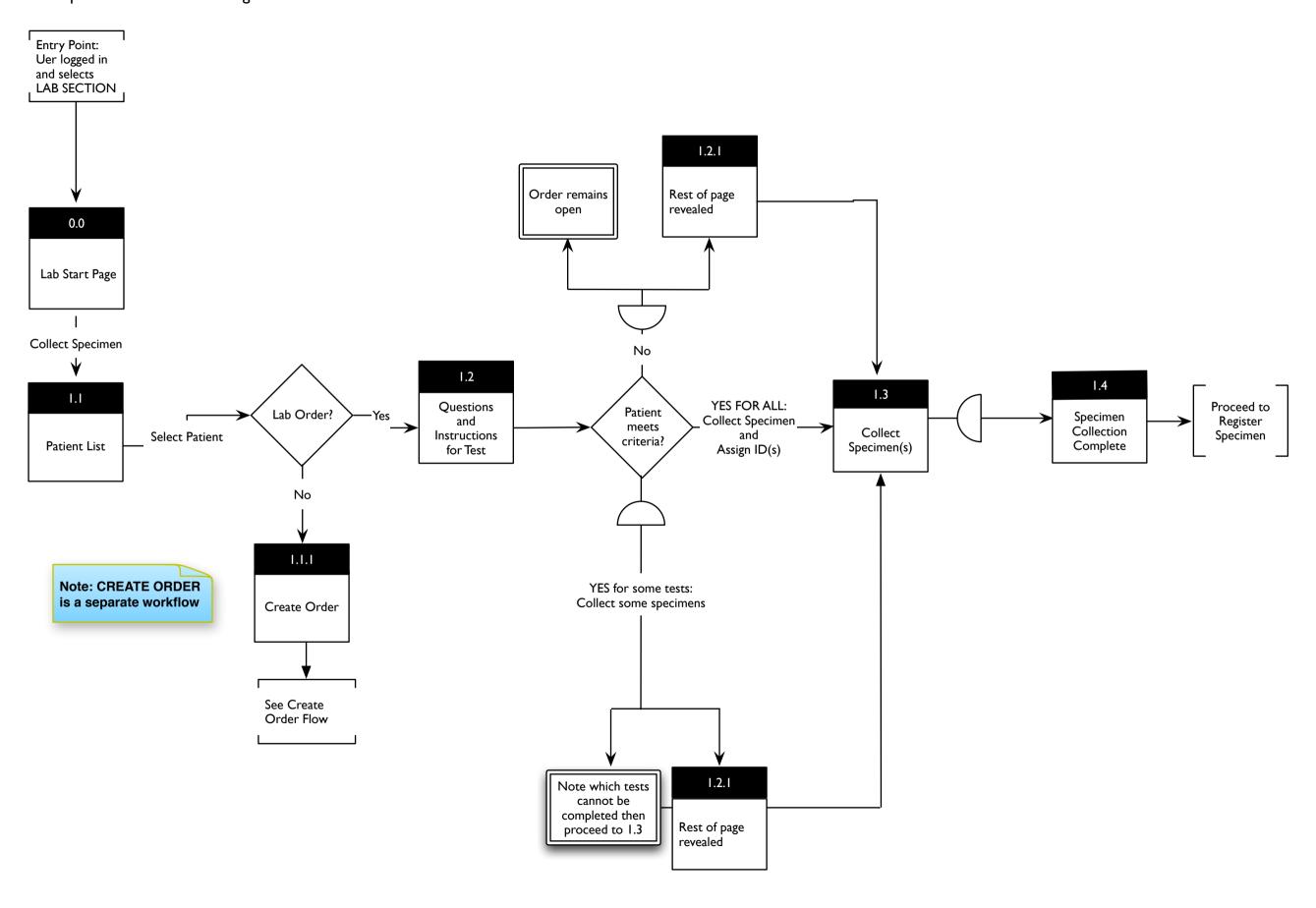
Background Event, no Screen

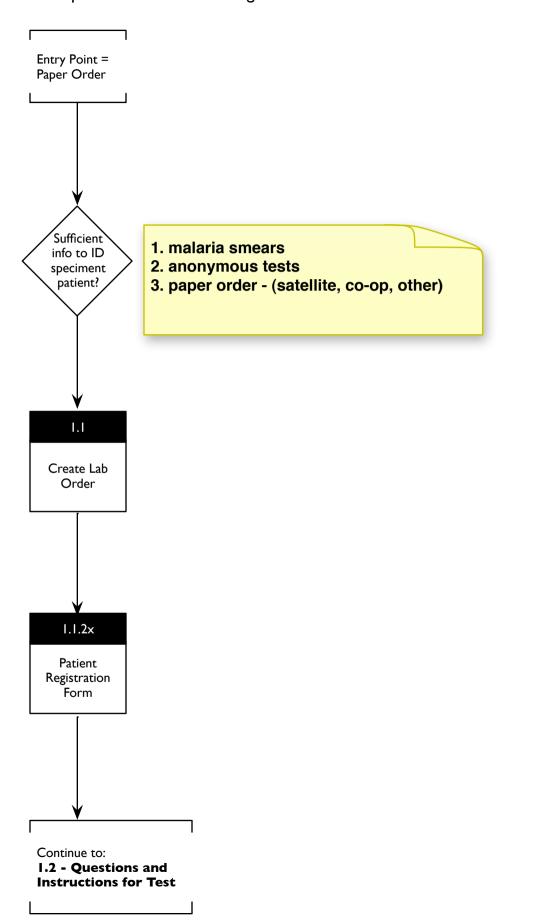
# Document History

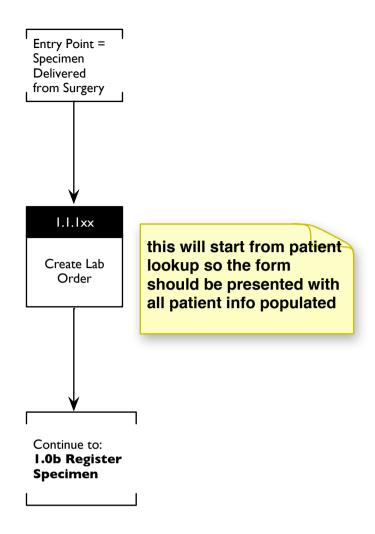
Date	Notes	
28 February 2012	Discussion points in ORANGE. Discuss: v1.6 - updated per some email feedback and PDF comments of 14/15 February. added interactivity to wireframes.	
10 February 2012	Updated. Discussion points in ORANGE. near completed: Collect and Register Specimen.	
6 February 2012	Updated per notes in 2 February email.	
30 December 2011	Incorporate amends and ideas following conversation w/Roger Friedman 20 December 2011. All outstanding queries are on	
15 December 2011	Added Number keys in preparation of handover. Inserted table of contents. Inserted outstanding questions.	
29 November 2011	Amends per conversation with Roger Friedman	
25 November 2011	Added some more questions and incorporated feedback.	
23 November 2011	Removed Paitent-Centric Flow; Amended Specimen Collection Task Flow	
22 November 2011	Wireframes for Specimen Collections	
18 November 2011	Added questions.	
16 November 2011	Inserted replies to questions; added specimen prep flow.	
12 November 2011	Document created	

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1.2 - lab order with sufficient info to ID patient - satellite order / co-op agreement order as of today - lab order is on paper and patient id on paper - lab creates order and initiates patient registration (to be completed by registration team, the idea is to get enough data points in there to ID a patient)

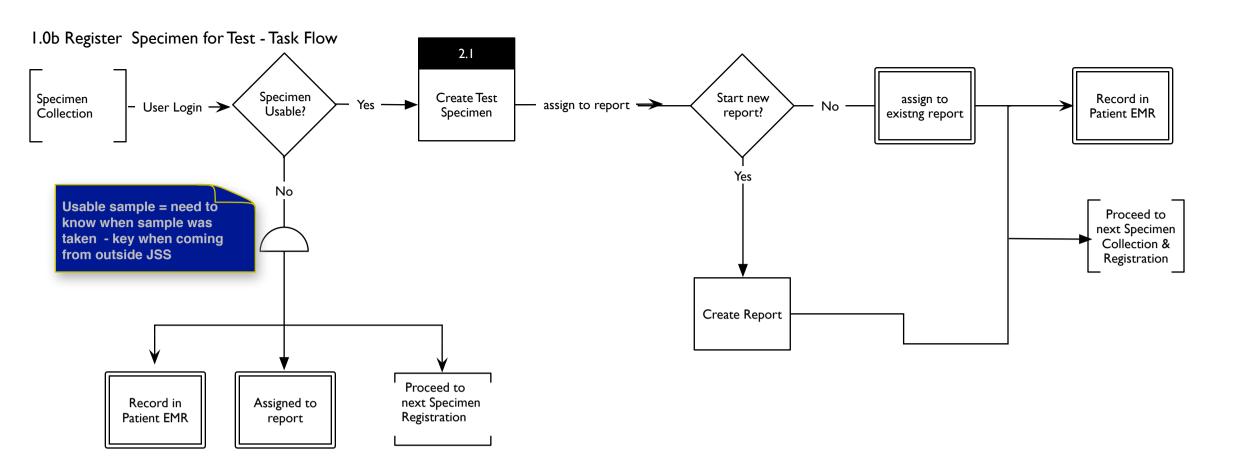
Yes, except that this is not completed by registration team but rather by someone in the lab itself. Lab can register this patient into the system if they haven't been inputted previously. No need to shuffle files between different parts of the hospital.

1.3 yellow form - malaria smear lab creates order + nodes to ID patient (does this patient get registered later?) OR is it just nodes to ID specimen (so how, exactly are anonymous tests going to go through the system?

No patient ID with malaria smear – just an ID specimen. Roger – could we get your inputs on how these anonymous tests are going through the system?

1.4 - specimen + order from hospital/surgery OR specimen + paper order from hospital/surgery

Patients in in-patient wards / surgery will already have registered; specimens will arrive with their patient registration number and test type requested.



Even unacceptable specimens are recorded in the system. Every order and specimen received must be accounted for. There is a list of reasons for unacceptability from which the user will select.

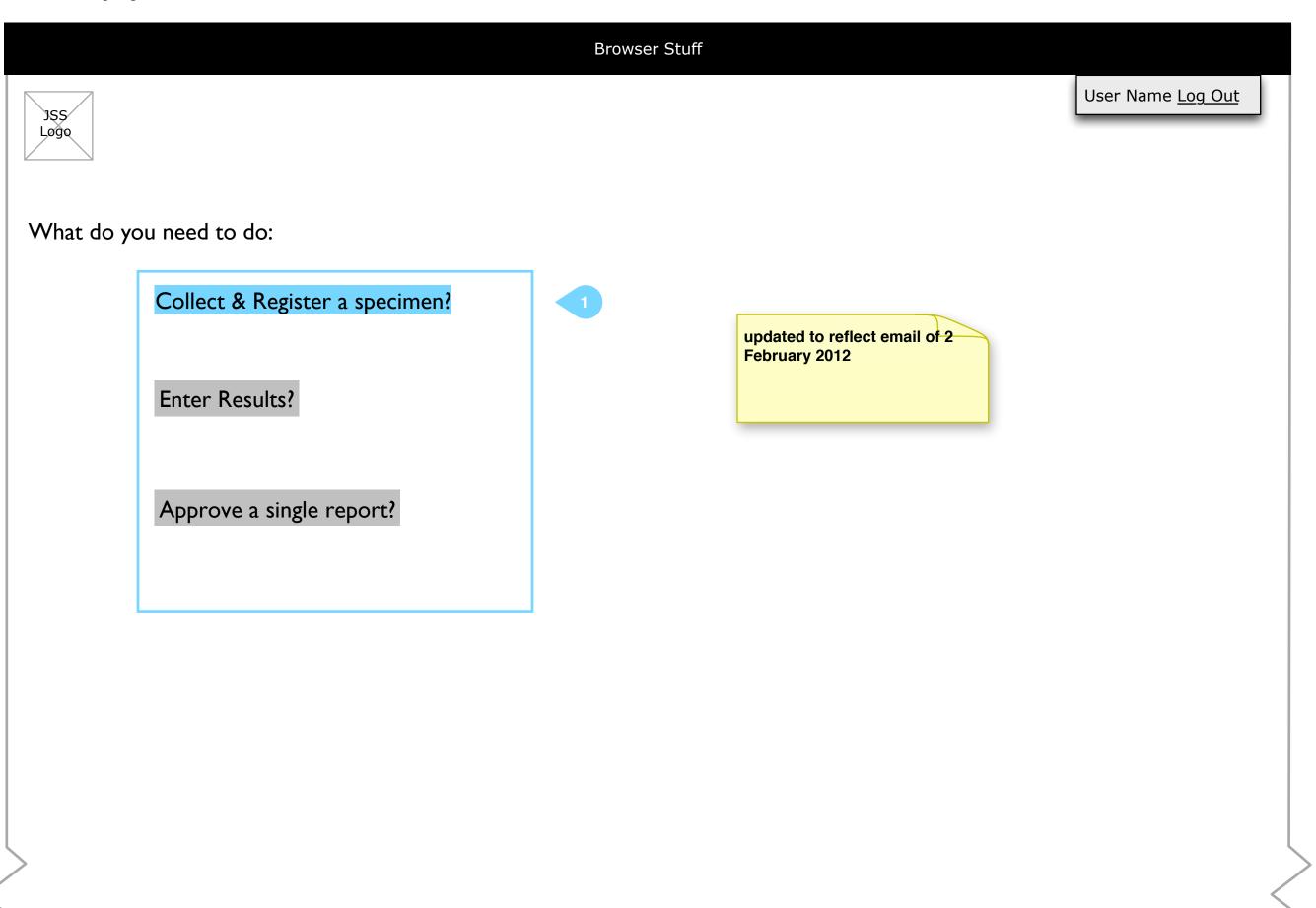
difference btwn report and batch

report - tests ordered by the same doctor for the same patient

report = single doctor + single patient

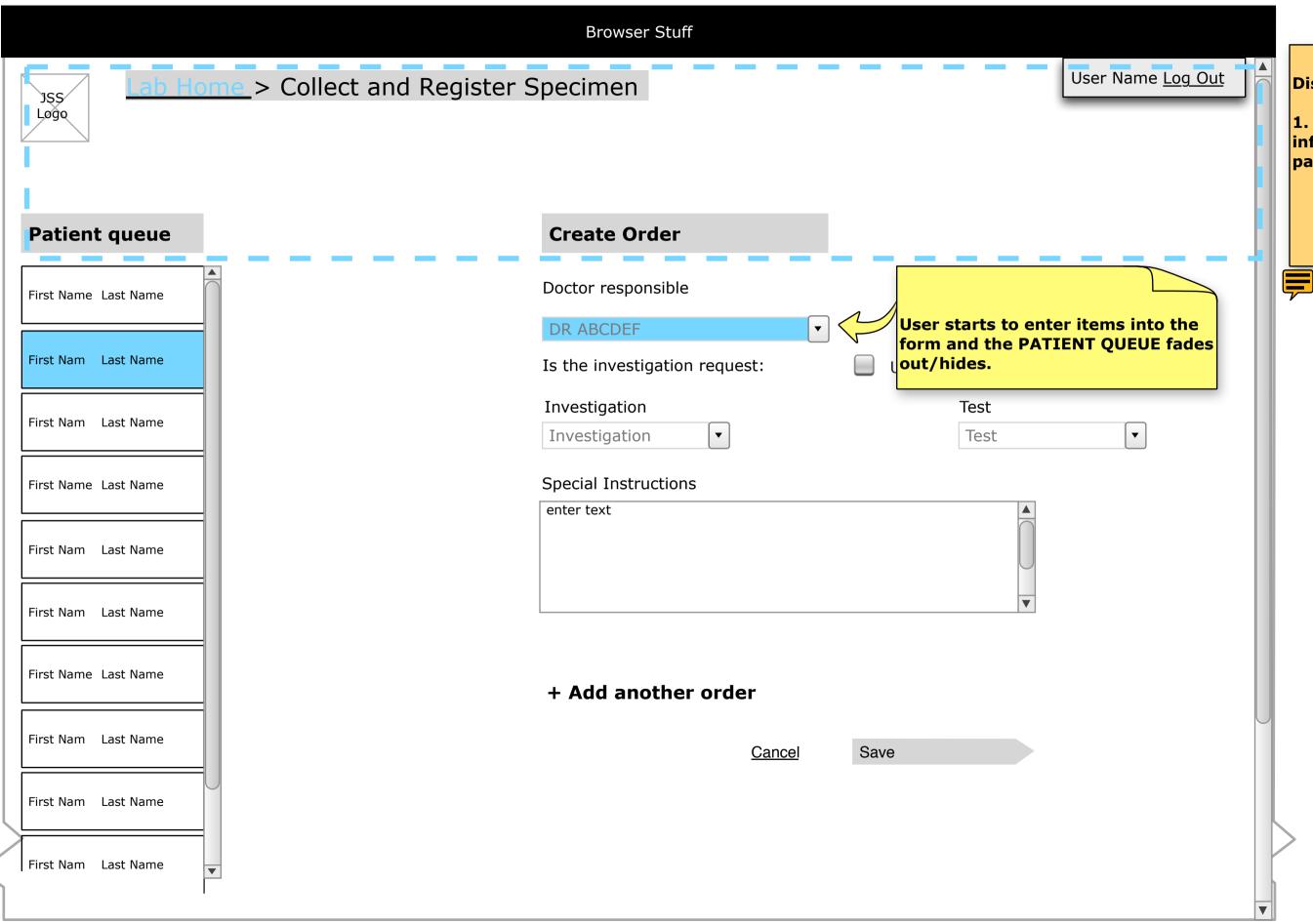
report = single doctor + multiple patients (e.g. anonymous tests)

REPORT is DOCTOR-CENTRIC



I. User selects a task

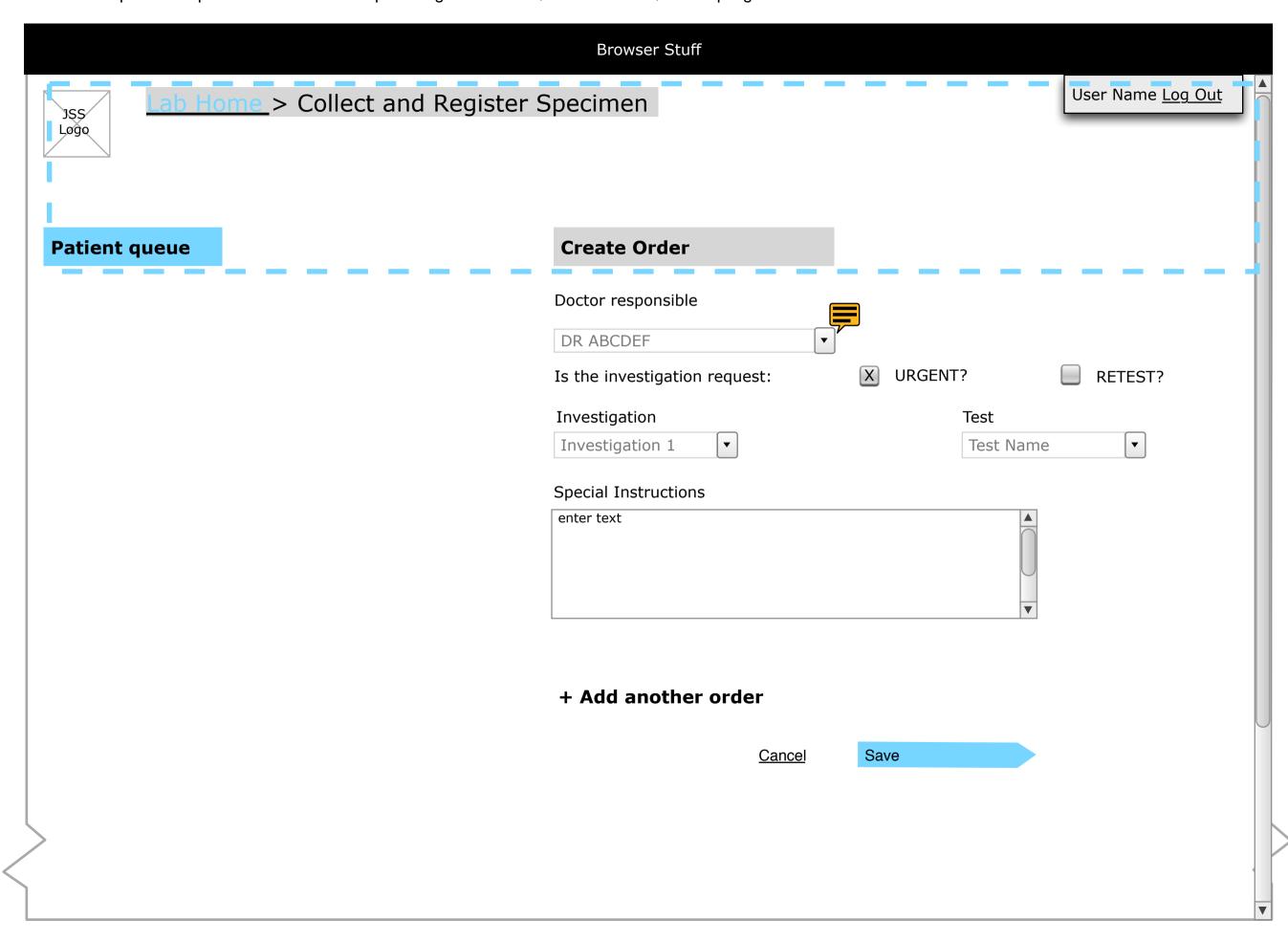
## 1.1 Collect Specimen - Patient List

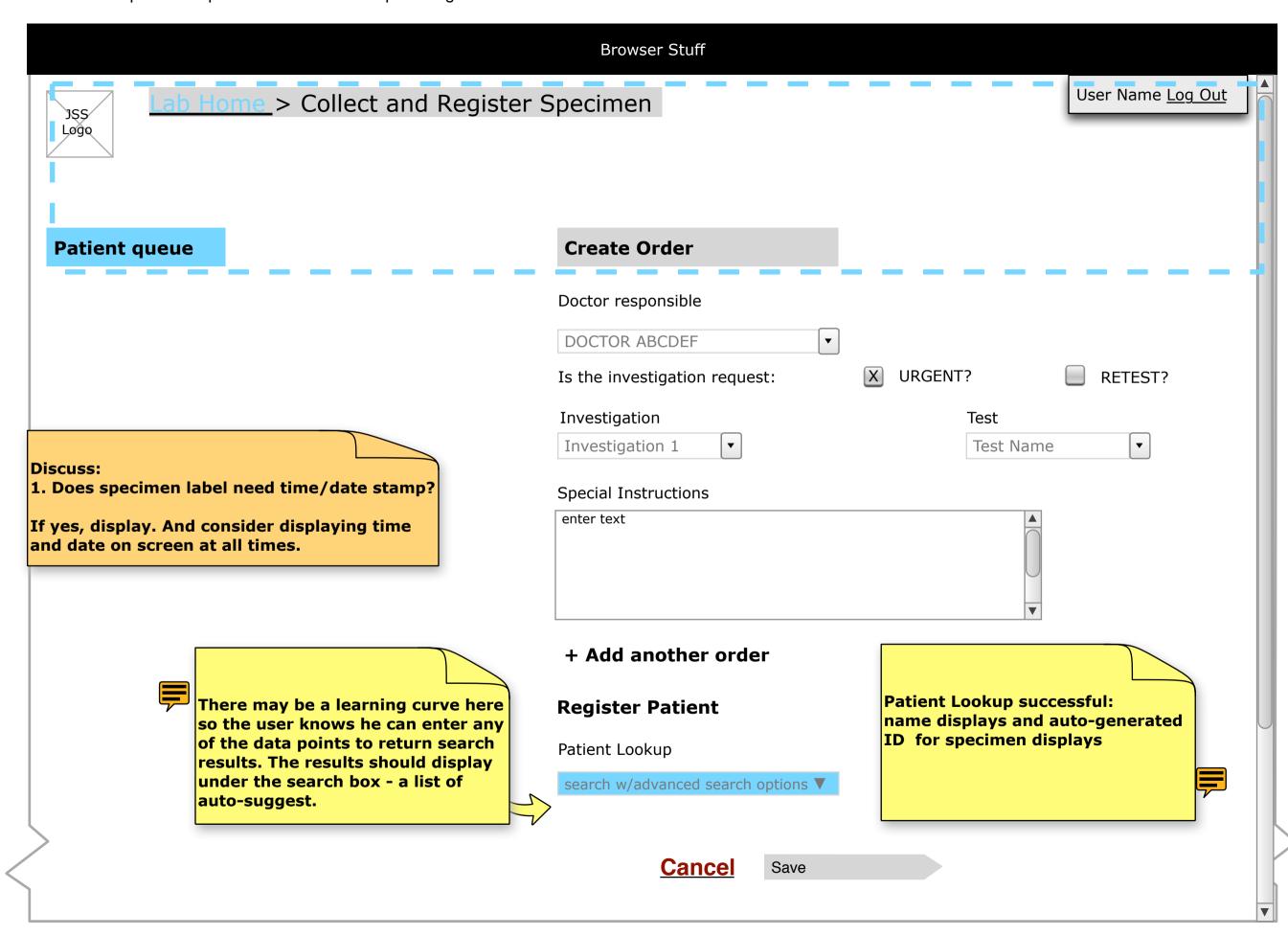


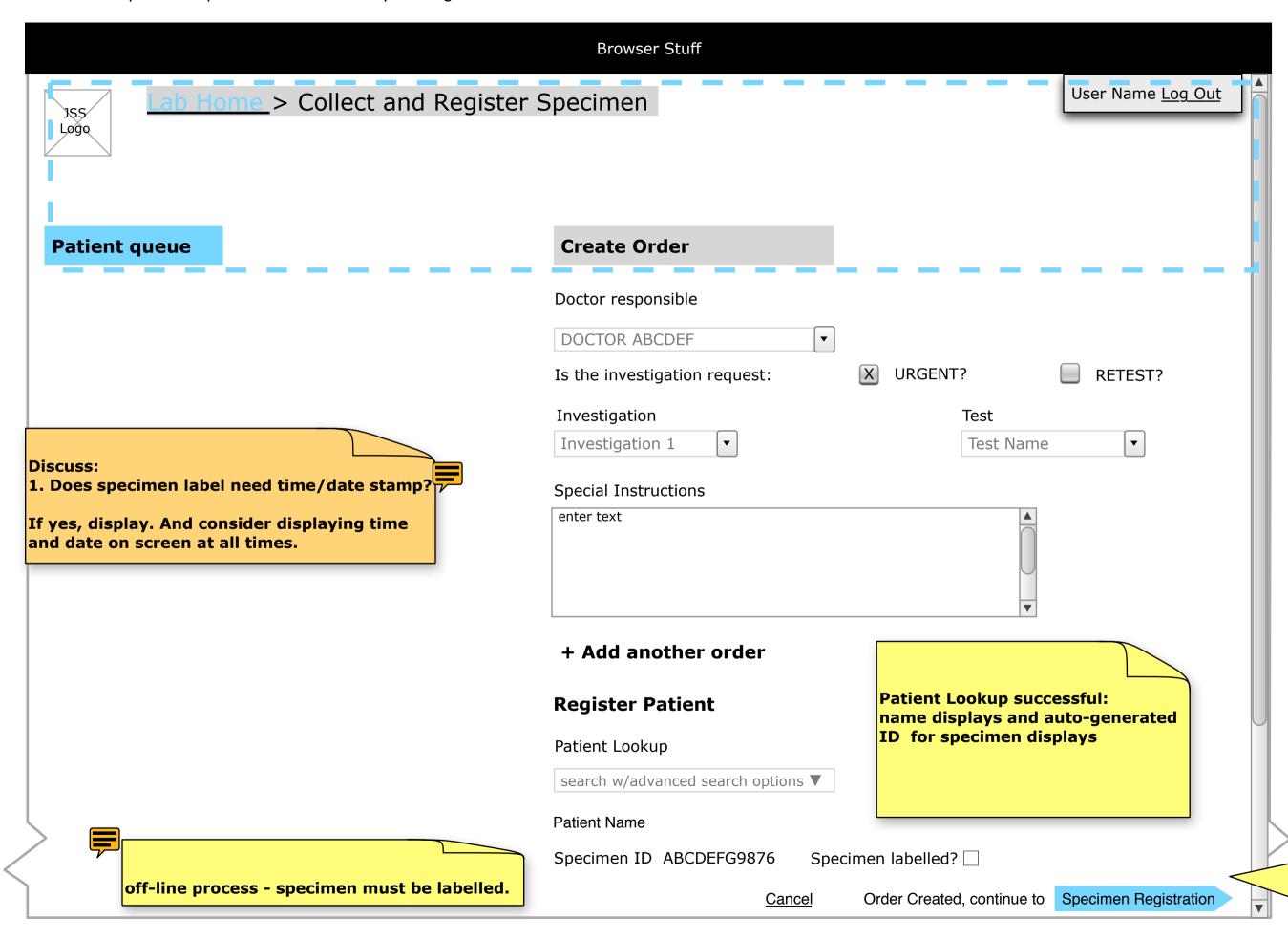
#### Notes

#### Discuss:

1. "Freeze" the area outlined so that the information is always visible, even when the page scrolls.

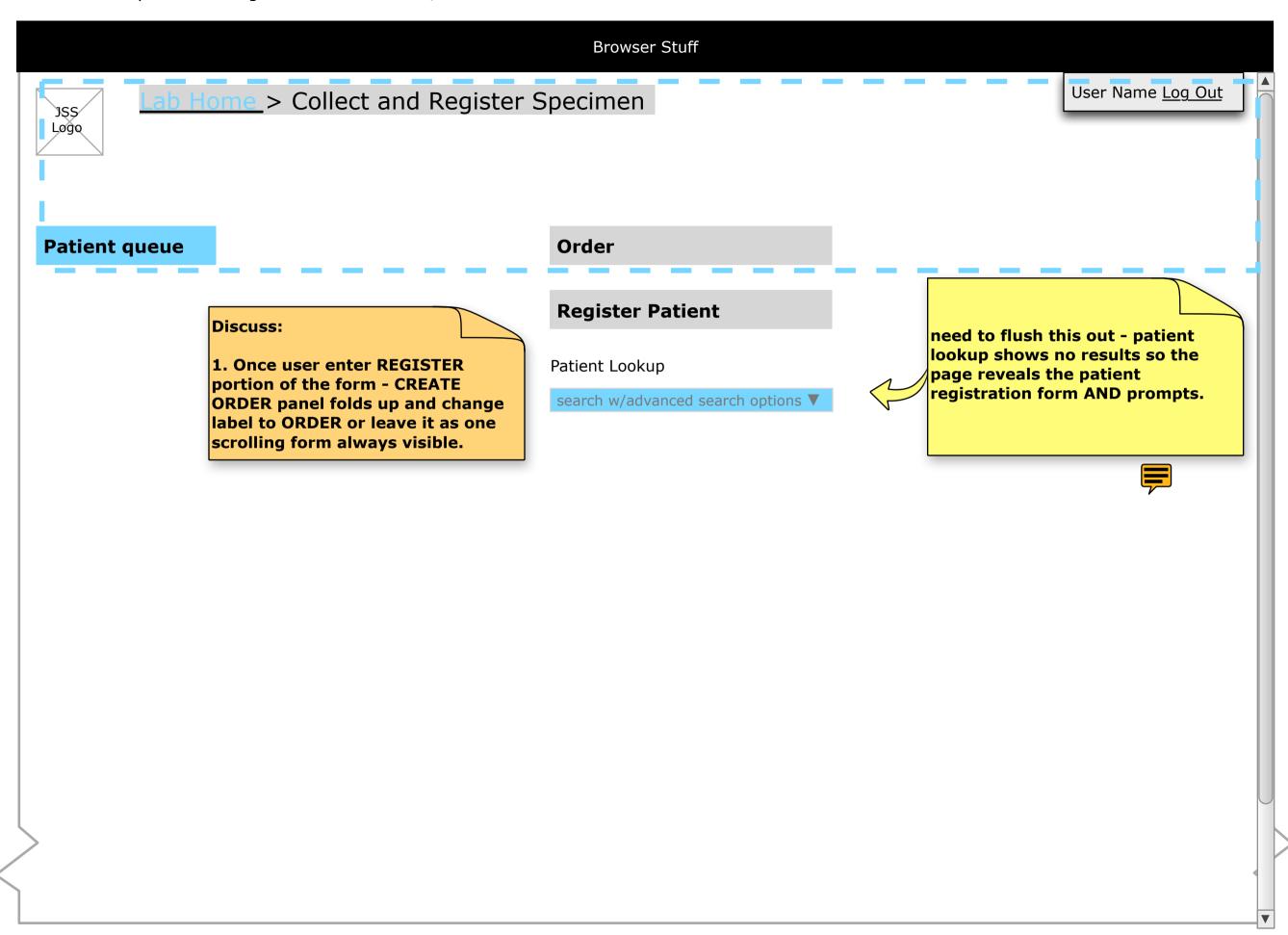


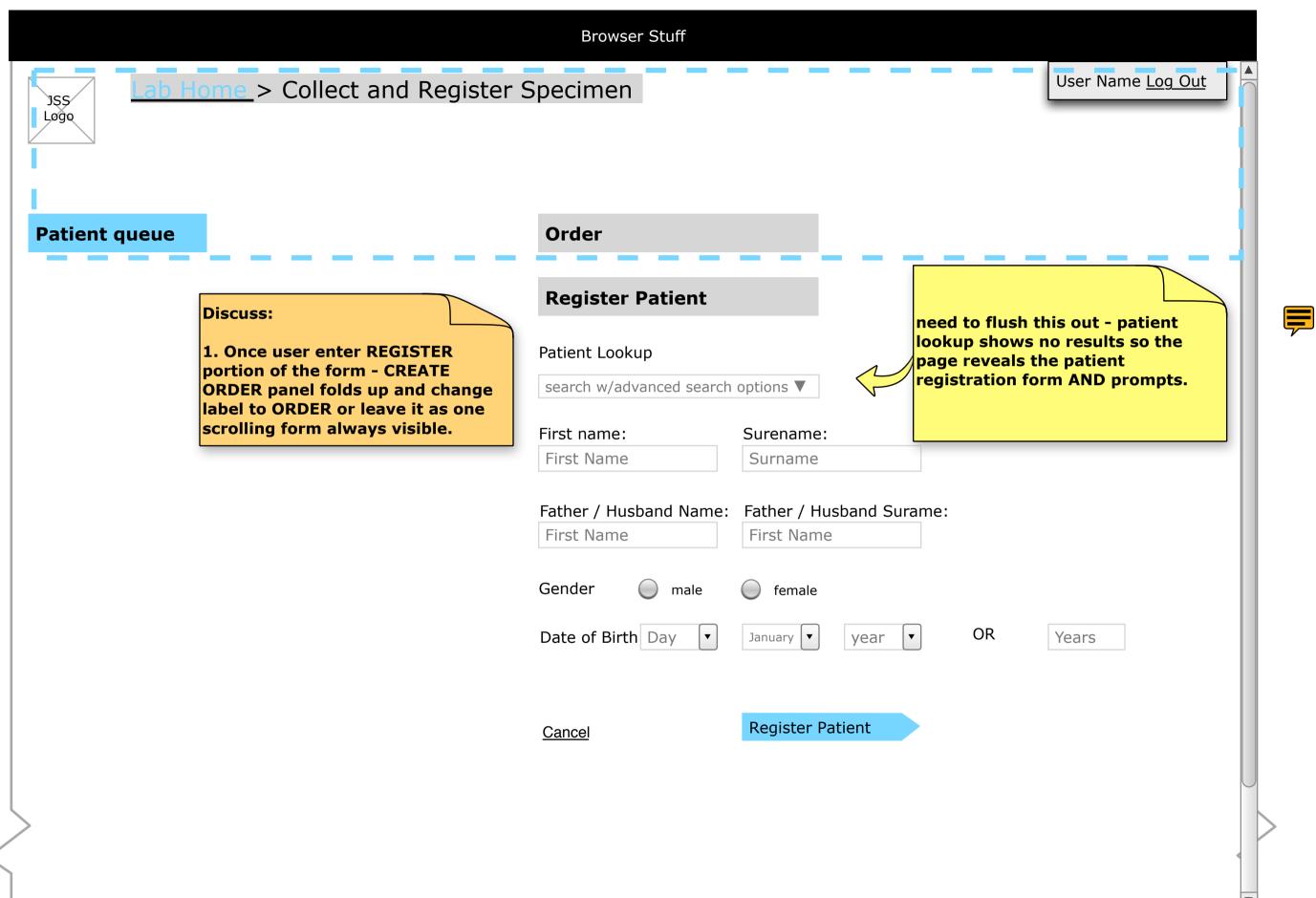




Button disabled until all fields complete. Error/Help messages displayed as per universal service convention ( to be determined).

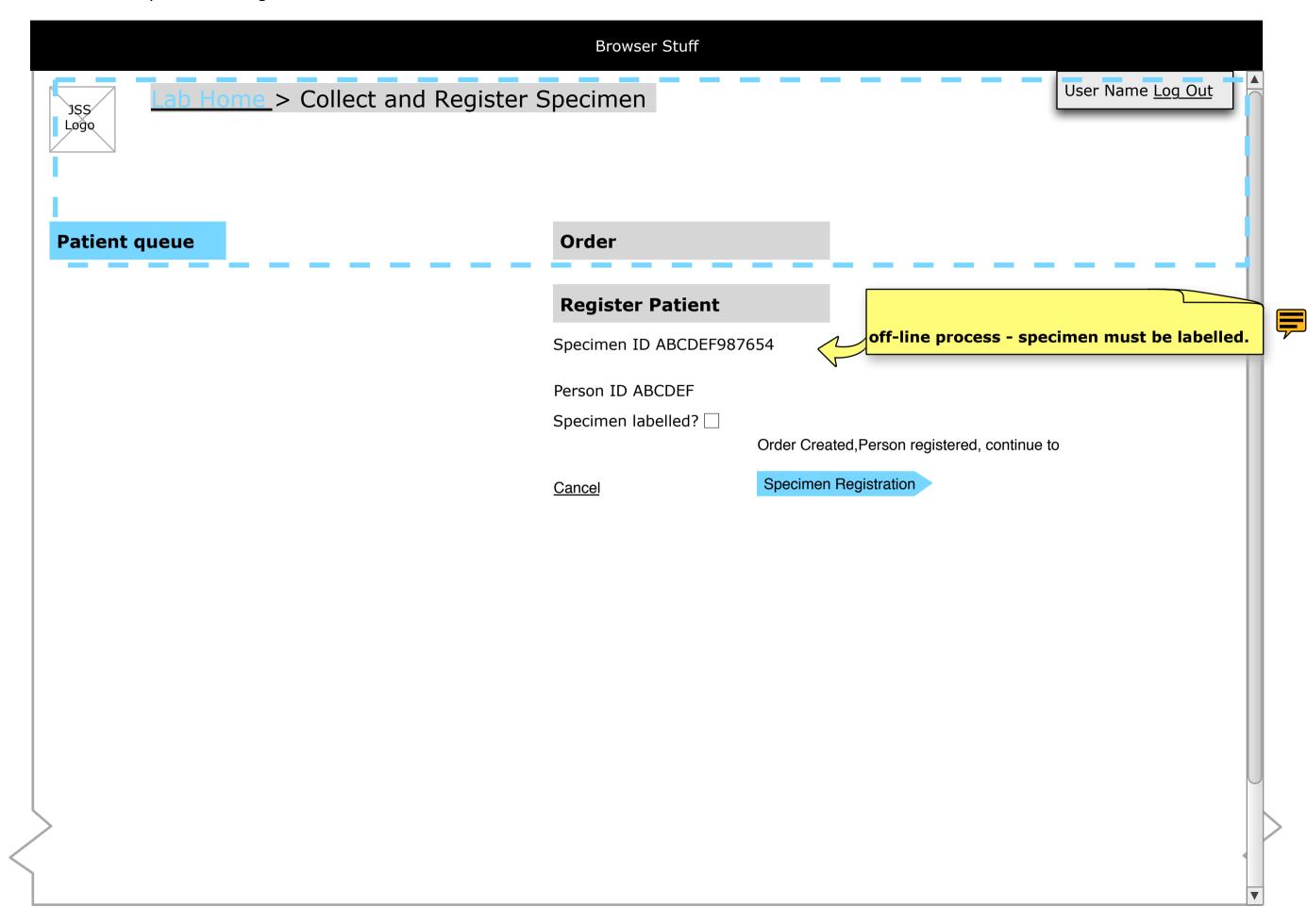
# 1.1.2 Collect Specimen - Registration New Person/Patient 2



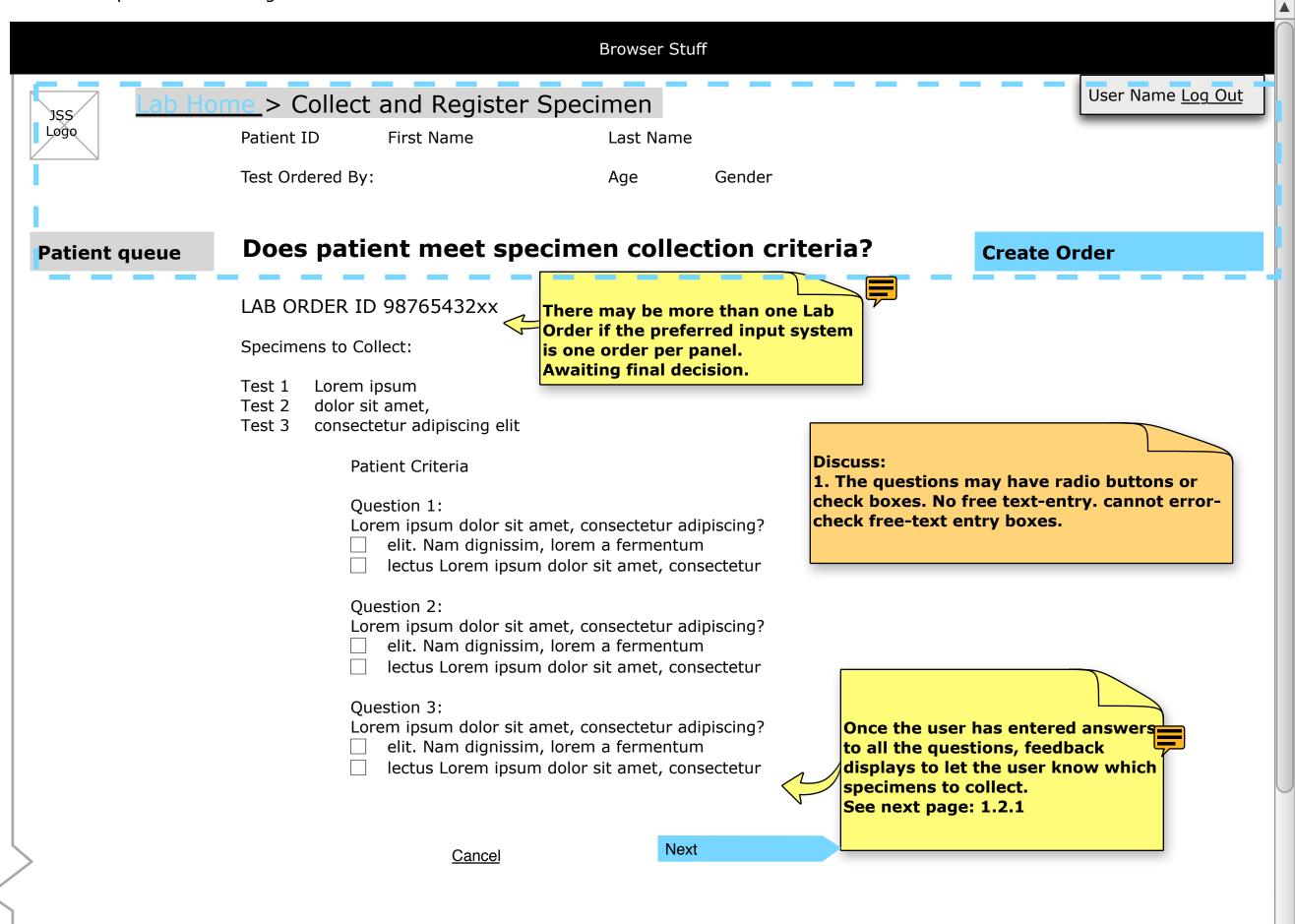


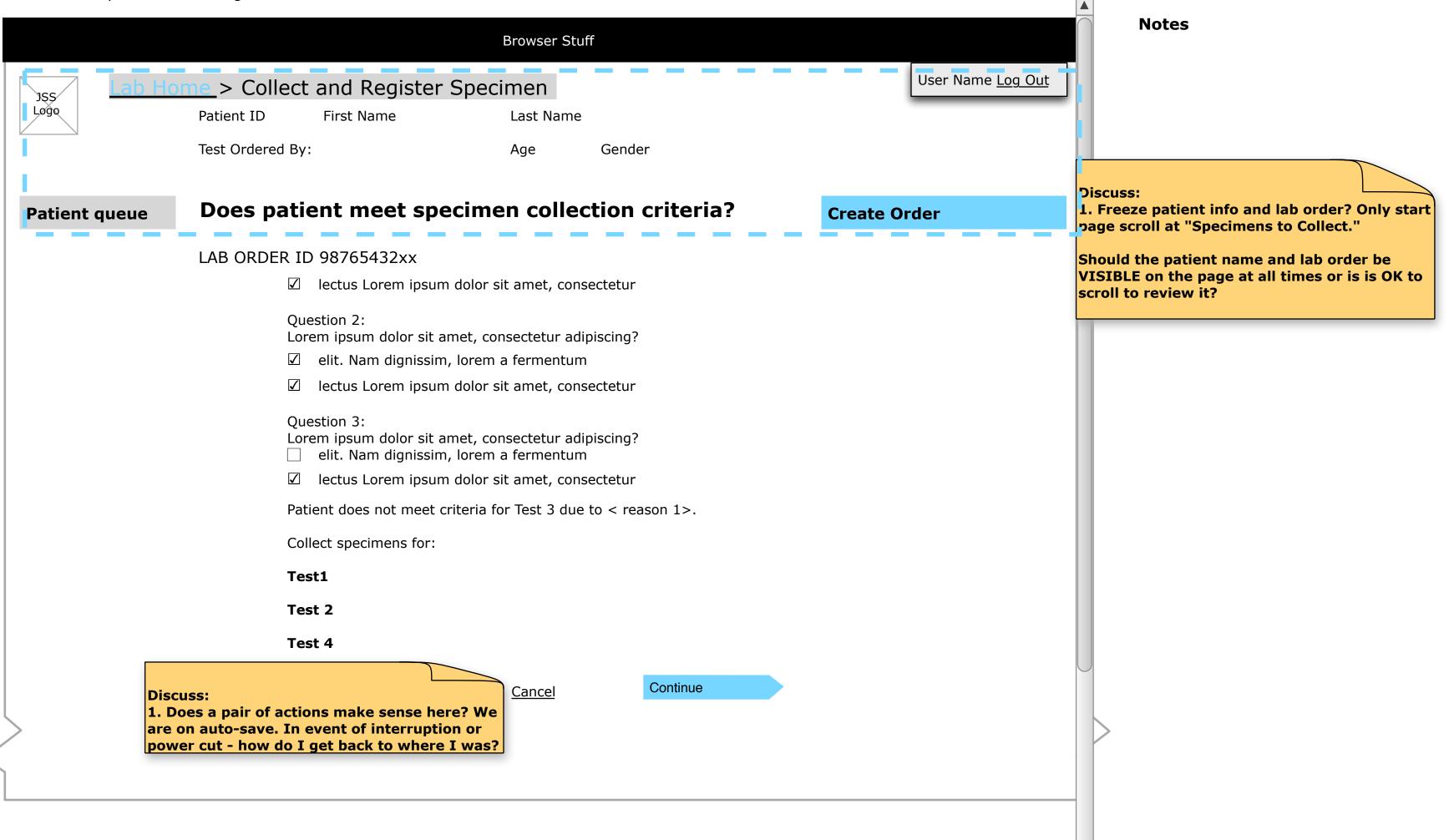


# 1.1.2 Collect Specimen - Registeration Form 2

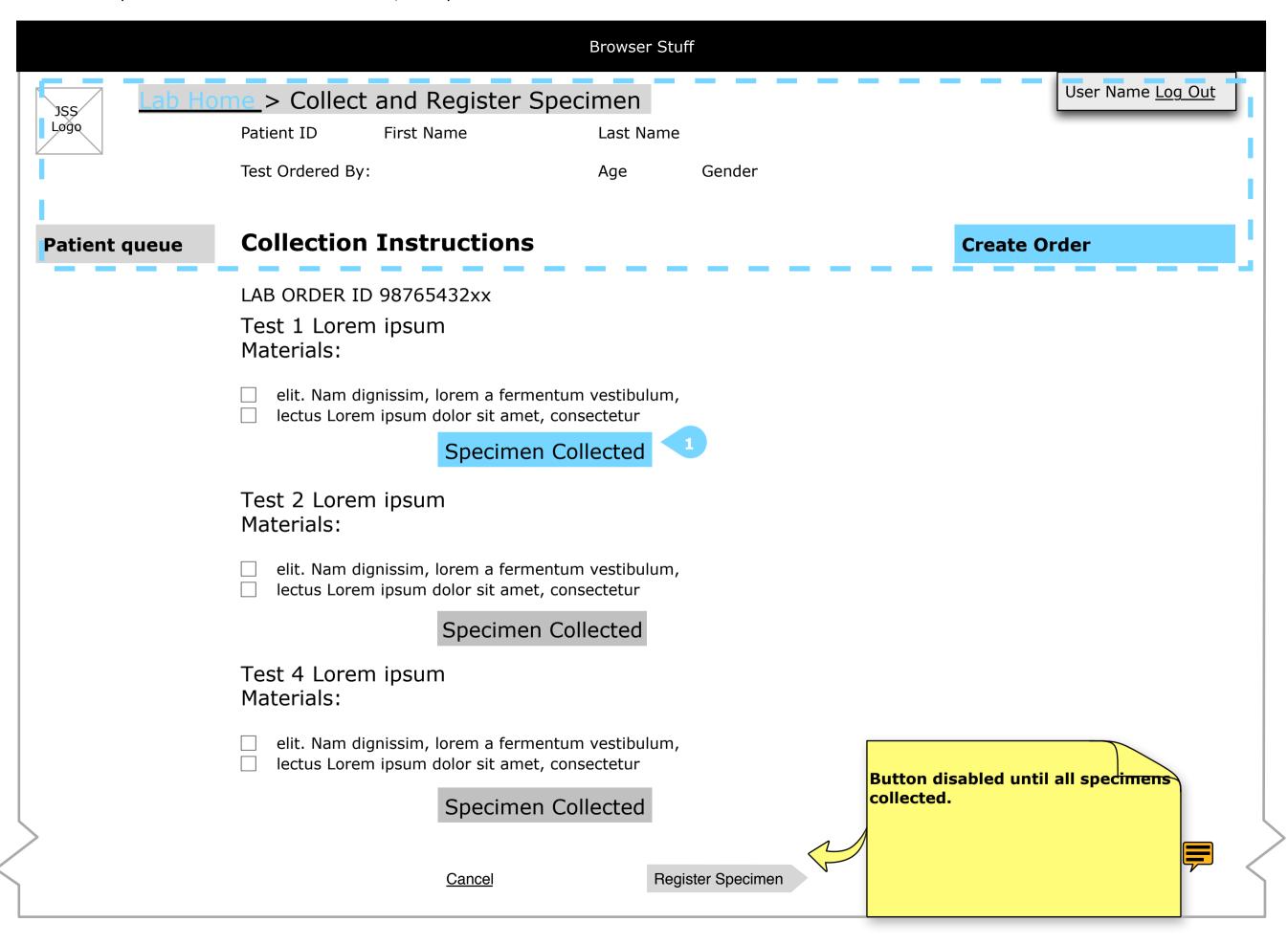


1.2 Collect Specimen - Existing Lab Order



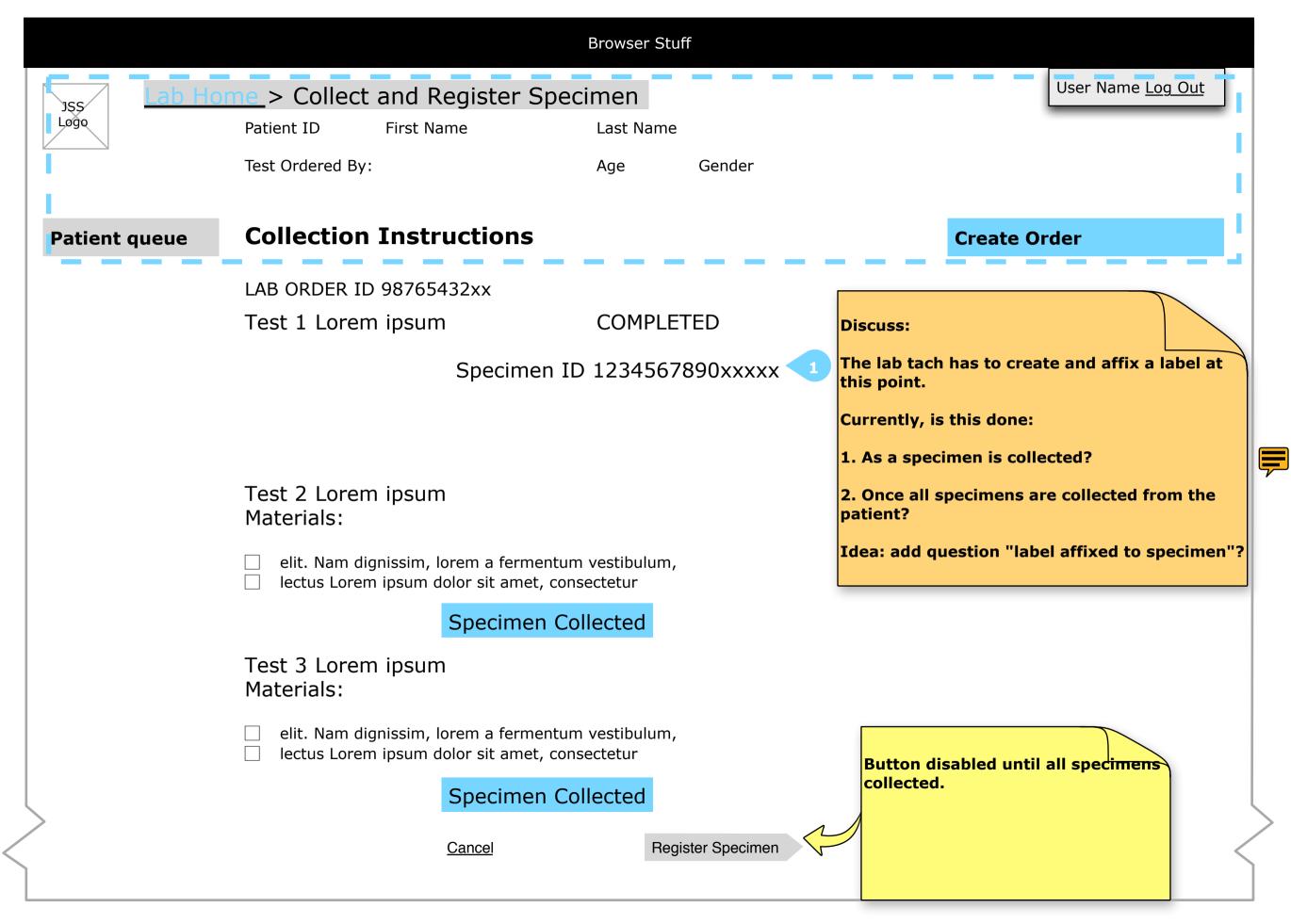


1.3 Collect Specimen - YES to Paitent Criteria, Multiple tests on one Lab Order

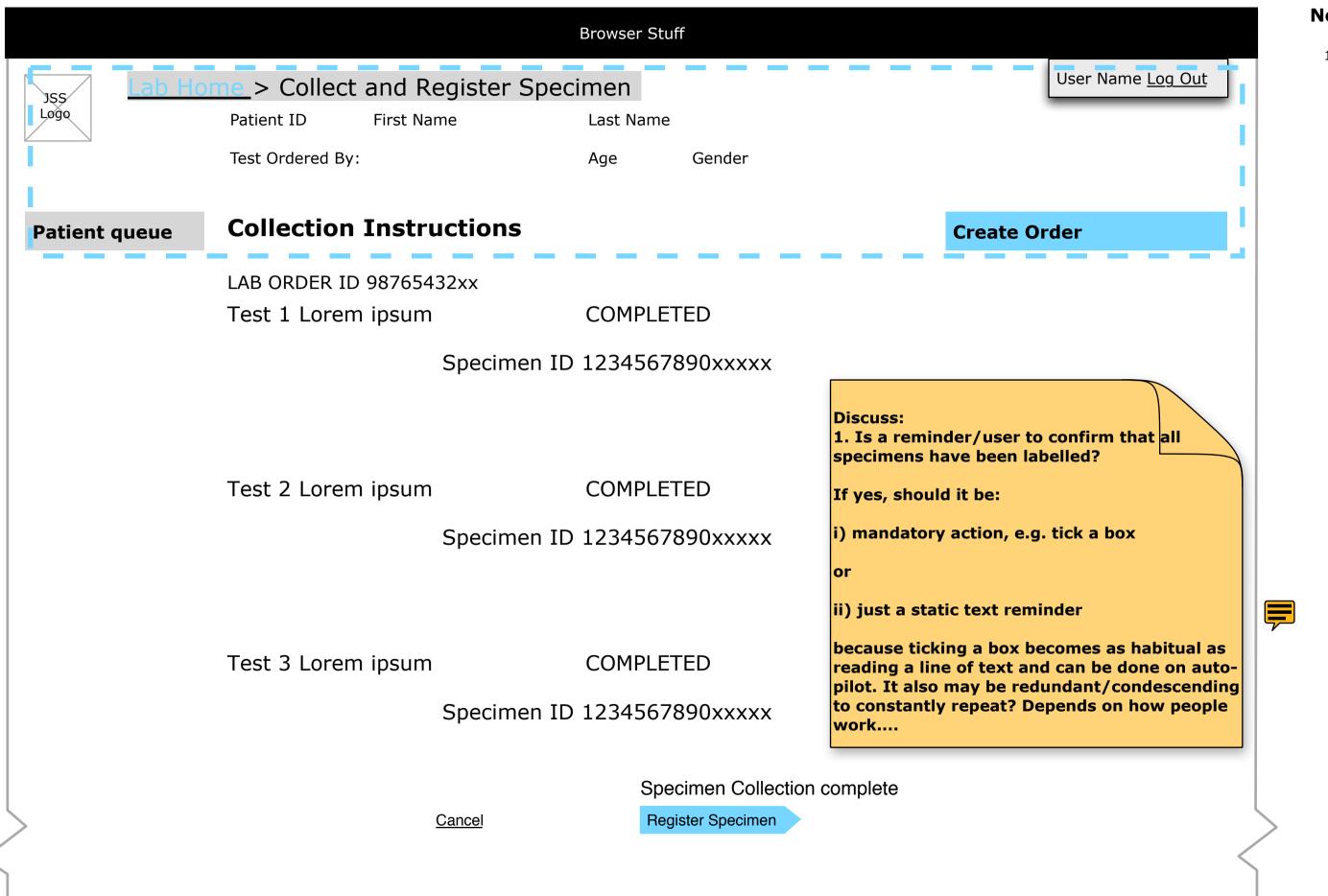


#### Notes

1. HItting "SPECIMEN COLLECTED" makes the backend record a time-date stamp. The page would then display a Specimen ID - see next wireframe - 1.4 Collect Specimen - Lab Order Complete . The page re-fresh serves as confirmation that the system has recorded the specimen to the test and the patient ID.

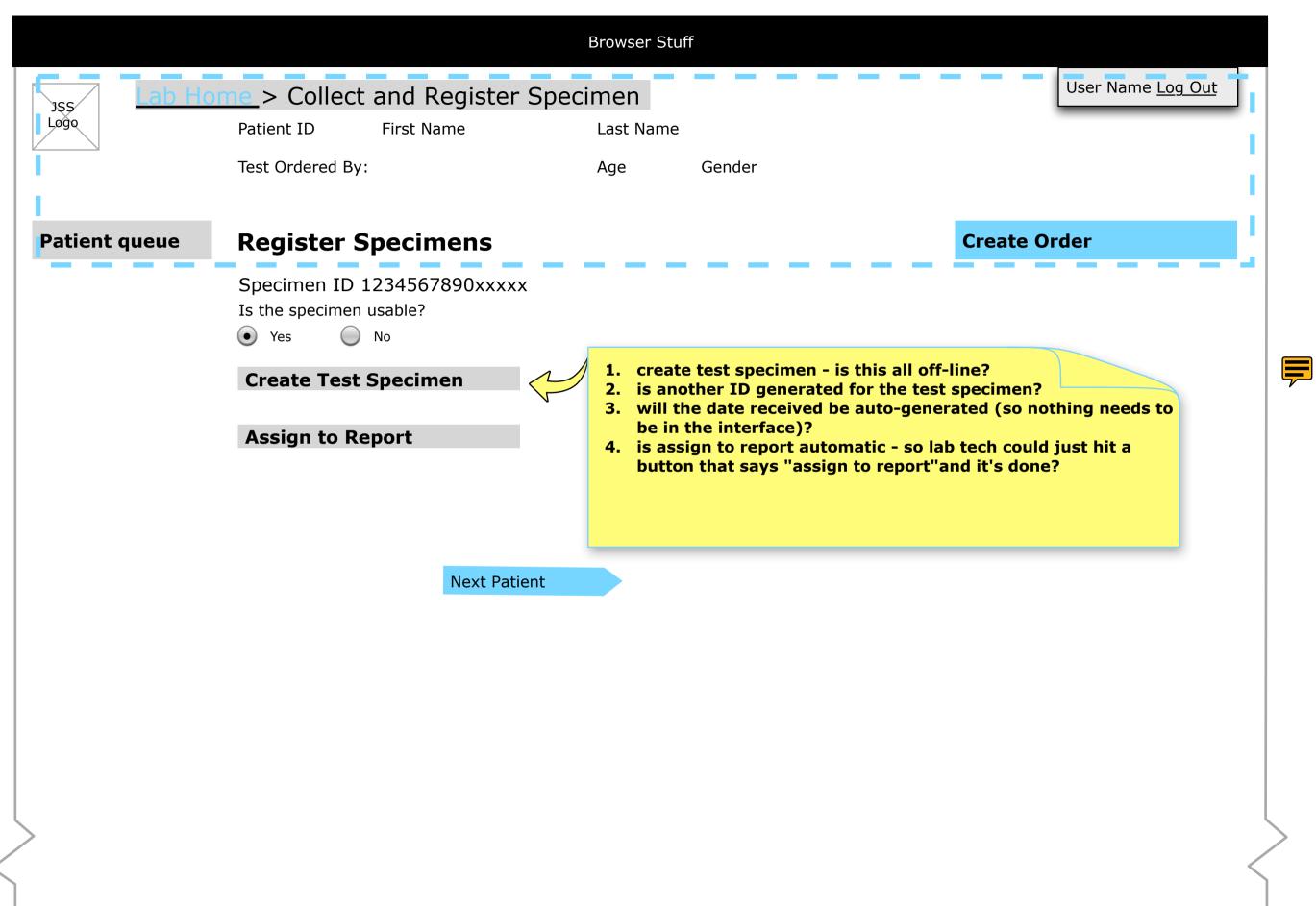


1. Machine generated ID number.



L.

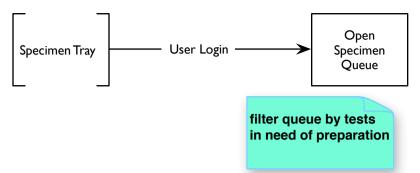
20 / 85 2.1 Register Specimen







# 3.0 Test Specimen Preparation - Task Flow



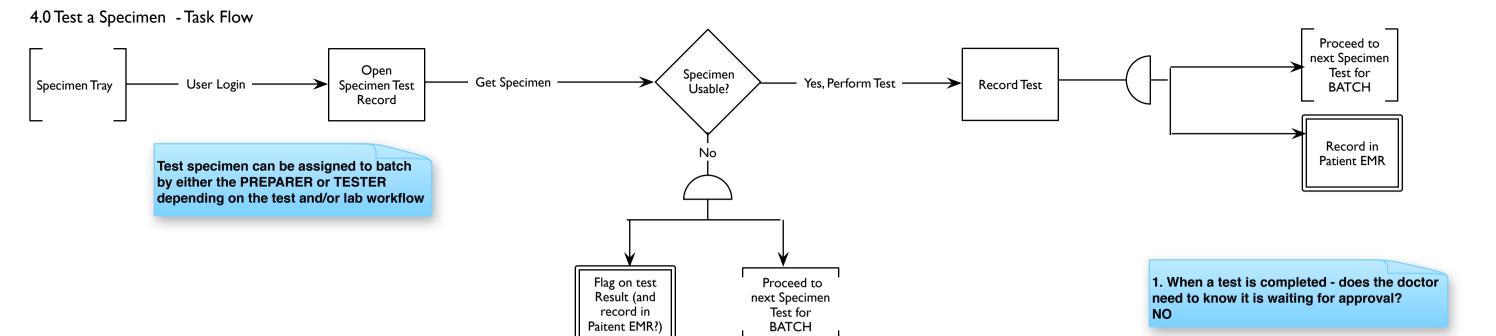
Test specimen can be assigned to batch by either the PREPARER or TESTER depending on the test and/or lab workflow

test prep is done by test type

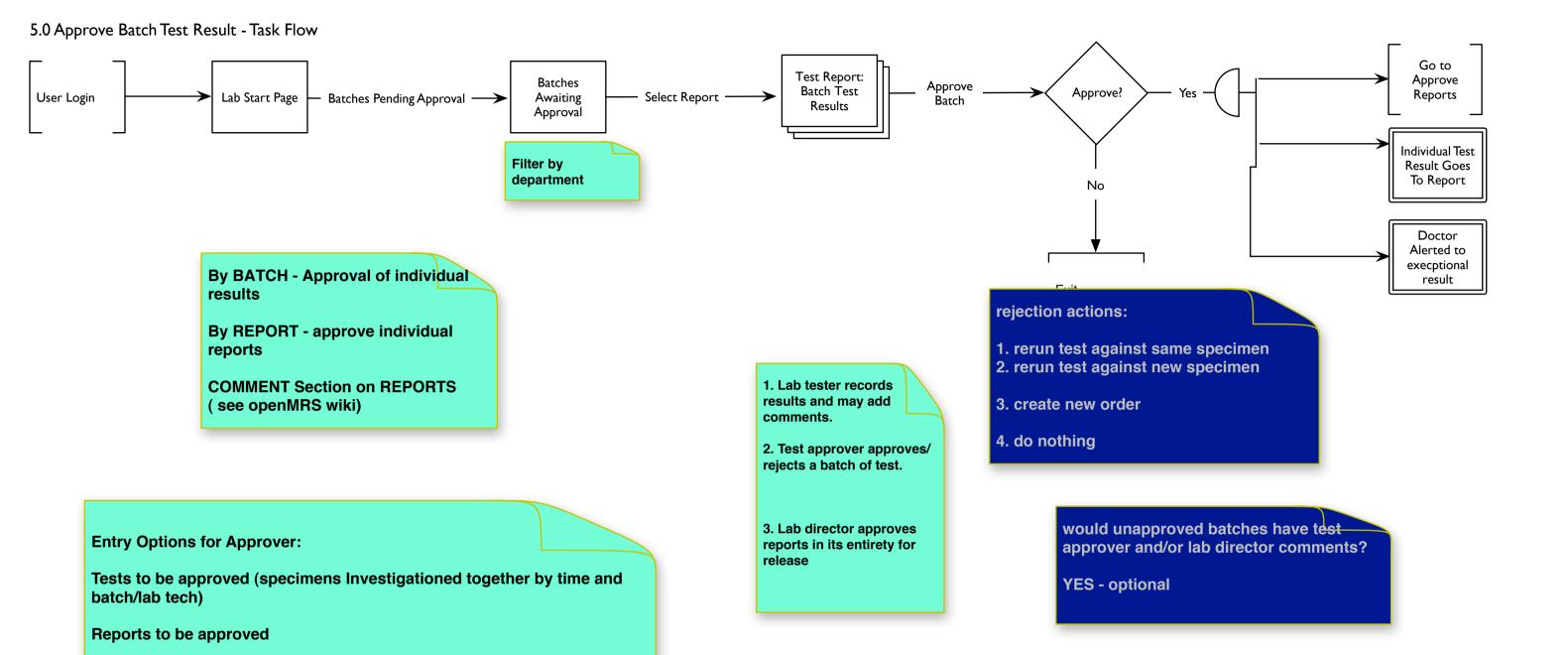
need to log who has done the test prep

display specimens by preparations needed

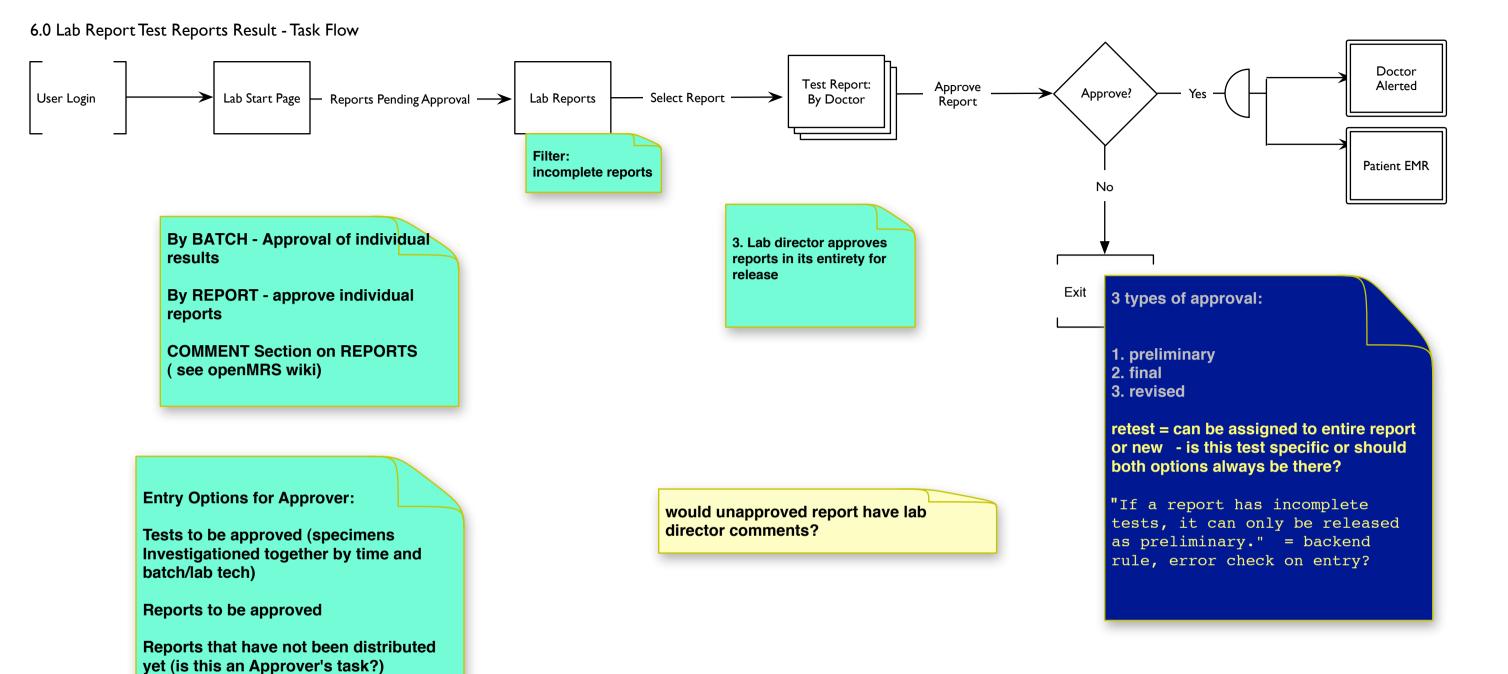
we need to include who did the test specimen preparation and a time/date stamp.



RECORD WHO DID THE TEST AND WHEN



Reports that have not been distributed yet (is this an Approver's task?)



I have not seen these screens described anywhere.

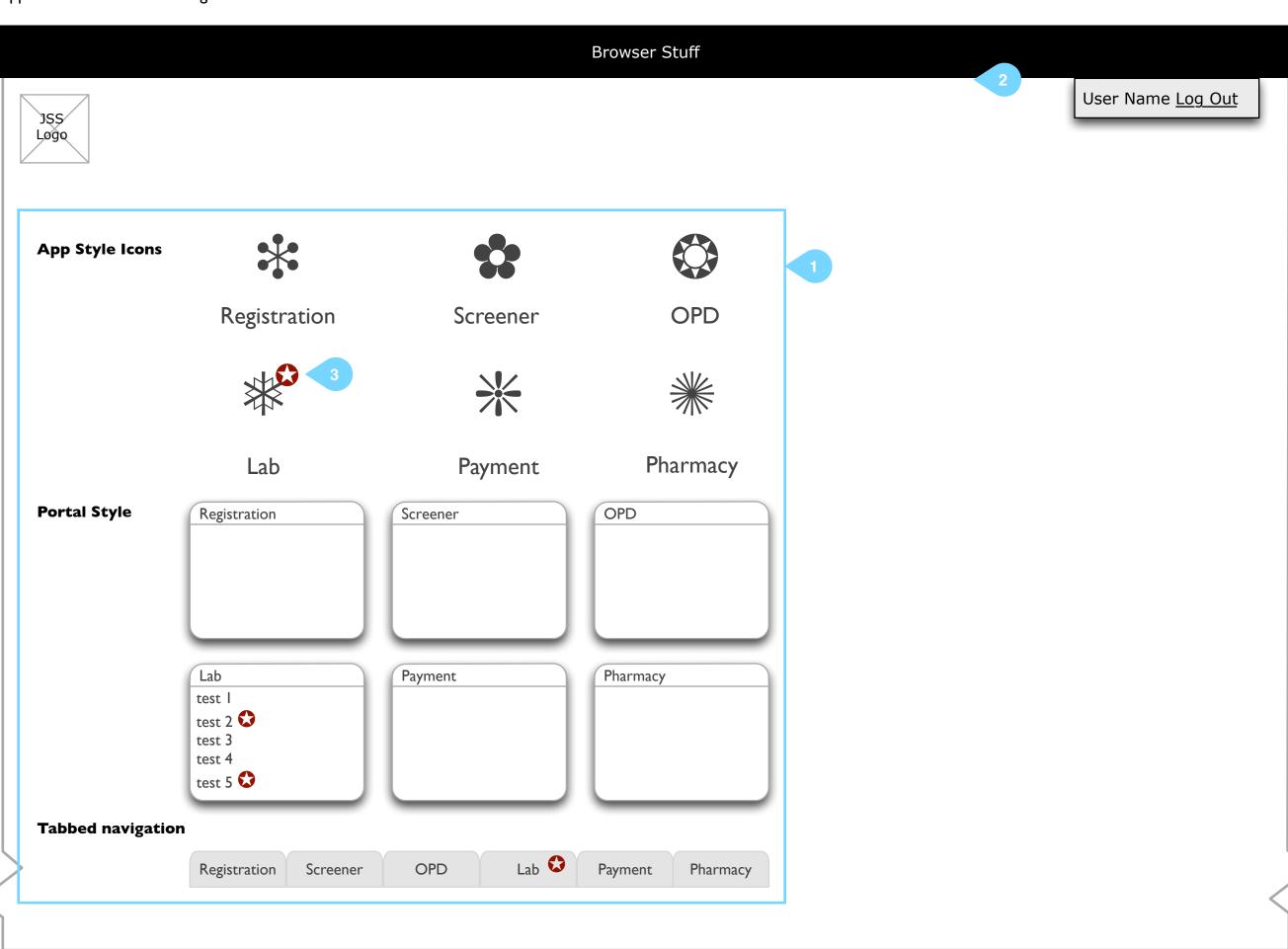
What is the entry point to the service?

Home Screen

	Status Bar browser St	uii	
JSS Løgo			User Name <u>Log Out</u>
User Name			
Password			
	Log in		
	Forgot password?		
>			

- I. What screen displays when the user accesses the JSS Service/Application?
- 2. Will Users be assigned or will users be permitted to register themselves?

Application/Service Home Page 2



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## Notes

I. What screen displays when the user logs-in?

Will it be portal like ? lcons? Tabbed navigation?

Note: Section headers taken from the IA document.

2. Will there be any preferences the user can set? If yes, then an alternate way to present this would be:

## User Name ▼

where the triangle hints to the user that there is a drop-down of choices. Choices could include Log Out, Preferences, etc. (see Linkedin / Facebook )

- 3. The RED BADGE is just a placeholder to show how something can be marked as needing attention/ urgent on the home page.
- 4. Is the implementation going to follow OpenMRS and be open about the fact that it is browser based?

< http://demo.openmrs.org/openmrs/ index.htm;jsessionid=DAED47BBF515674DAB5875C5 30BFE8A6 >

5. Is the browser chrome going to be masked on all delivery platforms? (tablet, conventional computer w/ physical keyboard)

Lab Flow Questions

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- 1.0 Specimen Collection Questions:
- I.I Where are collected samples placed?
- 1.2 What happens if a patient in not in the right condition to give a Specimen? (e.g. He did not fast, he drank tea). How is this recorded? Is is recorded in the Patient's EMR?

Record reason for Specimen not taken in EMR.

I.3 If a patient is fit to give some but not all of the samples, how is this recorded? Is is recorded in the Patient's EMR?

Record reason for Specimen not taken in EMR.

- 2.0 Specimen Preparation Questions:
- 2.1 How does the Specimen Preparation Person distinguish between URGENT and NORMAL?

Urgency is part of the lab order. As far as I know, there is nothing on the specimen holder to indicate urgency, it only exists within the system.

2.2 Does the Specimen Preparation person always focus on URGENT samples first then when all URGENT Specimen clear, work on NORMAL SAMPLES?

No. Most processing/testing occurs in batches. An urgent order usually triggers the preparation/testing of all specimens waiting for the same test.

2.3 Does the same person prepare the Specimen and test it in one connected set of actions?

From an information point of view, anything that changes the specimen type of a specimen or produces a new test specimen (for example removing a measured quantity of the specimen from the test tube and putting it in a "bullet" container) is preparation, anything that produces a test result is a test (for example, buffering pH to a known value before adding reagent). The underlying purposes of keeping this information are to maintain chain of custody and to improve quality by knowing who did what.

- 3.0 Specimen Approval Questions:
- 3.1 What happens to an UNAPPROVED RESULT?

Unapproved results remain in the system but are not generally shown on lab reports.

3.2 How are reports generated - by test type? by date and time?

See the powerpoint. A report consists of (a) a header identifying the lab; (b) identity of the orderer; (c) lab orders to which the report is responsive; (d) for each specimen, all the results, including date/time of test, flags, notes and test ranges as applicable, and identifying the responsible lab tech; (e) the electronic or manual signature of the approver

3.3 How are the medical staff alerted when a test is complete and in the Lab Report?