# Medical Records Request – Report Request Tool

Report Request Overview

The Report Request tool can be used as an easy way to print, fax, or send full or partial medical records for Release of Information (ROI) requests. This tool can also be used to print documents from across multiple encounters for the patient, such as pathology, lab, and radiology reports.

Create a Report Request

To create a Report Request, follow the steps below:

1) Click on **Report Request** from the Toolbar within Powerchart.

   a. If Report Request is not visible on the Toolbar, click the down arrow on the right side of the Toolbar to access it.
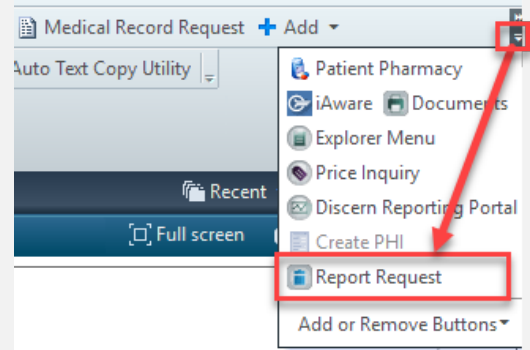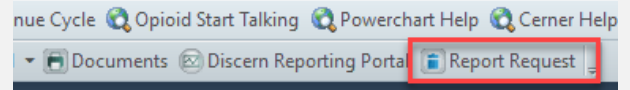
2) From the **Subject Selection** tab, select the **Report scope dropdown arrow**. Choose one of the following report scopes:

   a. **Person:** Produces reports that contain result information for **all encounters** associated with a selected patient. This scope facilitates monitoring the condition of patients who are admitted to your institution more than once.
   b. **Cross-Encounter:** Produces a report that includes selected encounter information from the user. This scope is used by audiences who require specific patient encounters using the medical record number (MRN) or financial number (FIN).
   c. **Encounter:** Produces reports that include all the result information that has been verified throughout a patient's encounter. This scope is used by audiences who require comprehensive records of a patient's stay.
   d. **Accession:** Produces a report that contains the results for a single accession number.
   e. **Document:** Produces a report that contains the selected document or documents.
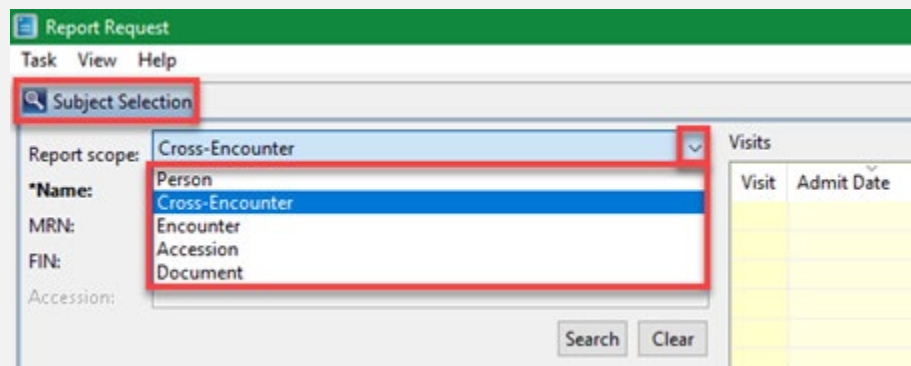
3) Enter the patient's name, MRN, and/or FIN and click **Search**.	

4) From the Patient Search window, choose the appropriate patient and click **Select**.	

5) If Encounter or Cross-encounter was chosen in the **Report Scope** dropdown, select one or more of the encounters from the **Visits** pane to include in the report.

- *Note: More than one encounter can be selected by holding down the CTRL key on the keyboard.*

6) From the **Event Status** dropdown, choose one of the following statuses: a. **Verified Only:** Includes all published results that are in an Authenticated, Verified, or Modified status. b. **Verified and Pending:** Includes all published results that are in a Verified, Modified, In-Progress, Unauthenticated, Transcribed, or Transcribed-Corrected status. c. **All Results:** Includes all published results that are in any defined status, including the In-Error status. • *Note: You must have the Allow in Error Results privilege for the system to process this status. If you do not have this privilege and select the **All Results** status, the system is automatically set to the **Verified and Pending** status.*	
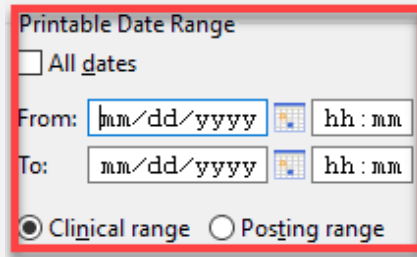
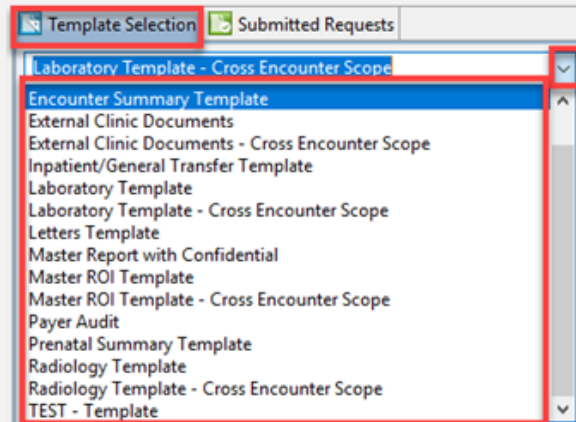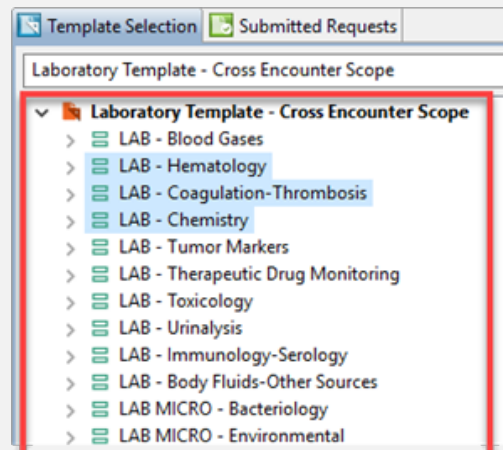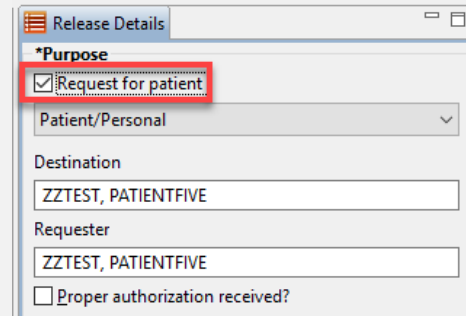|	
7) The **All Dates** checkbox will be defaulted to include all dates for the selected encounters. f. To choose a specific Date Range from the selected encounters, uncheck the **All Dates** checkbox and enter From and To dates.	Printable Date Range ☐ All dates From: mm/dd/yyyy 🗓 hh:mm To: mm/dd/yyyy 🗓 hh:mm ◉ Clinical range ○ Posting range

8) Select the appropriate range radio button:
 	
    g. **Clinical range**: Results will qualify that are clinically significant for the selected date range.
 	
    h. **Posting range**: Results will qualify that were posted to the database for the selected date range.	

9) From the **Template Selection** tab, choose the appropriate report template to use to for the desired report. Commonly used templates include:
 	
  • **Master ROI Template - Cross Encounter Scope:** Used when the Report Scope is set to Encounter, and the entire record is requested for that encounter.
  • **Document Template - Cross Encounter Scope**: This is a standard template used for any documentation within the chart.
  • **Laboratory Template – Cross Encounter Scope**: Use this template when Lab reports are requested.
  • **Radiology Template – Cross Encounter Scope**: Use this template when Radiology reports are requested.
	📄 Template Selection 📄 Submitted Requests
	
	Laboratory Template - Cross Encounter Scope ⌄
	
	Encounter Summary Template
	External Clinic Documents
	External Clinic Documents - Cross Encounter Scope
	Inpatient/General Transfer Template
	Laboratory Template
	Laboratory Template - Cross Encounter Scope
	Letters Template
	Master Report with Confidential
	Master ROI Template
	Master ROI Template - Cross Encounter Scope
	Payer Audit
	Prenatal Summary Template
	Radiology Template
	Radiology Template - Cross Encounter Scope
	TEST - Template

10) After choosing a template, a list of corresponding templates display below. Choose a template from the list or users can select multiple templates by pressing the **CTRL** key on their keyboard.	📄 Template Selection 📄 Submitted Requests
	
	Laboratory Template - Cross Encounter Scope
	
	⌄ 📁 **Laboratory Template - Cross Encounter Scope**
	  > 🗄 LAB - Blood Gases
	  > 🗄 LAB - Hematology
	  > 🗄 LAB - Coagulation-Thrombosis
	  > 🗄 LAB - Chemistry
	  > 🗄 LAB - Tumor Markers
	  > 🗄 LAB - Therapeutic Drug Monitoring
	  > 🗄 LAB - Toxicology
	  > 🗄 LAB - Urinalysis
	  > 🗄 LAB - Immunology-Serology
	  > 🗄 LAB - Body Fluids-Other Sources
	  > 🗄 LAB MICRO - Bacteriology
	  > 🗄 LAB MICRO - Environmental

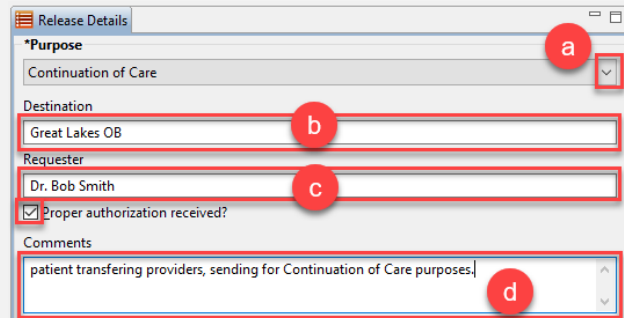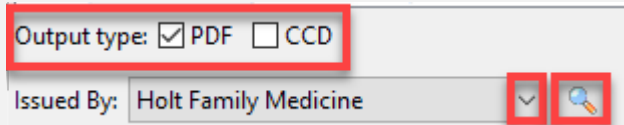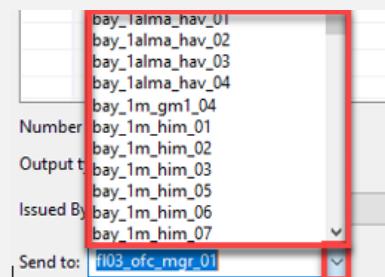|	
11) In the **Release Details** tab: a. Select the **Request for Patient** checkbox if the report was requested by the patient.	**Release Details** ***Purpose** ☑ Request for patient Patient/Personal ⌄ Destination ZZTEST, PATIENTFIVE Requester ZZTEST, PATIENTFIVE ☐ Proper authorization received?

12) If the report was not requested by the patient, choose the reason from the **Purpose** dropdown.
 	
  i. Enter the **Destination** (person or organization) requesting the report.
 	
  j. Enter the **Requester** (person or organization) requesting the report.
 	
  k. Indicate **Proper Authorization** was received to release the report.
 	
  l. In the **Comments** box, enter any comments related to the release.
 	
    • *Note: The maximum number of characters in the Comments box is 1000.*
	Release Details
	*Purpose
	Continuation of Care ⌄ **(a)**
	Destination
	Great Lakes OB **(b)**
	Requester
	Dr. Bob Smith **(c)**
	☑ Proper authorization received?
	Comments
	patient transfering providers, sending for Continuation of Care purposes. **(d)**

13) Select an **Output Type**:
 	
  a. PDF – to create a PDF file.
  b. CCD – to create a Continuity of Care Document for purposes of Meaningful Use.
 	
  m. *Note: PDF will default and can only be changed if Person was chosen as the Report Scope.*
	Output type: ☑ PDF ☐ CCD
	
	Issued By: Holt Family Medicine ⌄ 🔍

14) **Issue By**: Choose the issuing facility that is creating the report. n. Use the **Magnifying Glass** icon to search for the facility if needed.	
15) **Send to** dropdown choose: a. **To Print:** choose the appropriate printer from the dropdown.	bay_1alma_hav_01 bay_1alma_hav_02 bay_1alma_hav_03 bay_1alma_hav_04 Number bay_1m_gm1_04 bay_1m_him_01 Output t bay_1m_him_02 bay_1m_him_03 bay_1m_him_05 Issued B bay_1m_him_06 bay_1m_him_07 Send to: fl03_ofc_mgr_01 ⌄

b. **To Fax:** choose **Default Station** from the dropdown and select the **Properties** icon. In the **Default Station** window enter the:
 	
    • **Fax Number**
    • **Contact information**
    • Select a **Transmit Date/Time** option
    • Click **OK**.	

16) When complete choose:
 	
    o. **Send Report:** to send the report.
    p. **Preview Report:** to preview the report before sending.	

17) To view the status of a request that has been submitted, click the **Submitted Requests** tab.
 	
    q. To remove a completed request, select the entry and click the red **X** icon. Users can also right-click on the entry and choose **Remove Request**.
 	
      • *Note: No Qualification means no information qualifies for this section.*	

18) Right click on a patient and choose **Display Report** view or print the requested report.	