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MHS GENESIS is Live at Naval Hospital Oak Harbor

On July 15, MHS GENESIS successfully deployed at Naval Hospital Oak Harbor (NHOH), making it the single electronic health record to document and manage care. Providers at NHOH are busy treating patients and everything is going as expected.

“The Department of Defense and the Military Health System are excited to deploy MHS GENESIS at our second site in the Pacific Northwest,” said Ms.

Stacy Cummings, program executive officer, Program Executive Office, Defense Healthcare Management Systems. “Naval Hospital Oak Harbor is the first inpatient facility to start using MHS GENESIS. Deployment at Oak Harbor brings an additional host of capabilities to our providers and beneficiaries such as maternity care, surgery, and blood transfusion management. We continue to transform the delivery of healthcare and advance data sharing through a modernized electronic health record for service members, veterans, and their families,” said Cummings.

Onsite deployment activities took place in preparation for implementing MHS GENESIS. These activities included gathering site-specific information, end user training, and change management for user adoption. The DoD Healthcare Management System Modernization Program Management Office, along with the Leidos Partnership for Defense Health, developed interfaces and user-approved workflows. The MHS GENESIS Patient Portal,

a secure website for 24/7 access to personal health information, also gives patients the ability to manage appointments and exchange messages with providers.

MHS GENESIS will continue to deploy across the Pacific Northwest at Naval Hospital Bremerton and Madigan Army Medical Center, the remaining initial fielding sites, later this year. The Department of Defense plans to fully deploy MHS GENESIS to 9.4 million beneficiaries and 205,000 medical personnel and staff by 2022. For more information about MHS GENESIS, visit www.health.mil/mhsgenesis.



“The Department of Defense and the Military Health System are excited to deploy MHS GENESIS at our second site in the Pacific Northwest.”

– Ms. Stacy Cummings,
Program Executive Officer, PEO DHMS

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First MHS GENESIS Delivery – On July 21, the first baby delivered into the Department of Defense family using MHS GENESIS was born at NHOH Special Delivery Unit. (See [page 3](#) for more)

PEO DHMS SOCIAL MEDIA



PEO DHMS social media accounts serve as engaging electronic sharing resources. Click the icons to follow and like the PEO DHMS social media platforms.

Message from the Program Executive Officer



Welcome to the Program Executive Office, Defense Healthcare Management Systems' newsletter, *The Scope!* This issue comes at an exciting time, as we successfully deployed MHS GENESIS at our second initial fielding site in the Pacific Northwest. I firmly believe MHS GENESIS will transform the delivery of healthcare and advance data sharing for service members, veterans, and their families.

On July 15, MHS GENESIS deployed to Naval Hospital Oak Harbor. In our cover story above, we highlight the efforts of the DoD Healthcare Management System Modernization Program Management Office (PMO), along with the Leidos Partnership for Defense Health, to reach this exciting milestone.

Our feature story showcases our participation at the 2017 Defense Health Information Technology Symposium. The three-day annual conference provided the opportunity for stakeholders across the Military Health System to learn and share ideas to improve the delivery of healthcare. For the first time, PEO DHMS exhibited at DHITS. We provided demonstrations of MHS GENESIS and the Joint Legacy Viewer to more than 400 conference attendees.

Our interoperability and operational medicine initiatives continue on [page 3](#), where we showcase the Joint Legacy Viewer's rapid increase in usage. Also on this page, we share a Deployed Tele-Radiology System success story from the Joint Operational Medicine Information Systems (JOMIS) PMO.

Lastly, on [page 4](#), we spotlight the Department of Defense/Department of Veterans Affairs Interagency Program Office's recent Association of Medical Directors of Information Systems Award. In addition, we highlight the JOMIS PMO's enhancements to the Mobile Computing Capability's accessibility.

As we gather together with family and friends to celebrate Labor Day, I would like to thank you for your continued support. Our team continues to make significant progress in health IT. I look forward to sharing our continuous accomplishments in the months to come.

– Ms. Stacy Cummings, Program Executive Officer, PEO DHMS



2017 Defense Health Information Technology Symposium



Last month, the Program Executive Office, Defense Healthcare Management Systems (PEO DHMS) and its Program Management Offices (PMOs) attended and exhibited at the 2017 Defense Health Information Technology Symposium (DHITS) in Orlando, Florida. The symposium brought together stakeholders from across the Military Health System (MHS) and focused on "One Team - One Mission: Creating Our Future Together." The three-day annual conference provided the opportunity for attendees to collaborate on the future of health IT, as well as work with MHS professionals to ensure we meet the needs of our service members, veterans, and their families.



Col Richard Terry, acting director of the Health Information Technology Directorate at the Defense Health Agency and acting chief information officer for the MHS, kicked off the symposium. CAPT James Elzy, deputy program executive officer, PEO DHMS, along with Dr. Paul Cordts, director and functional champion for the MHS, and Terry, addressed attendees in a session titled "MHS GENESIS and the Evolution of Healthcare." Highlights from the educational sessions included data analytics, integration and innovation, and cybersecurity.

The DoD Healthcare Management System Modernization (DHMSM) Program Management Office (PMO), which includes the Defense Medical Information Exchange (DMIX) Program, was among the PMOs that presented at DHITS.

Mr. Craig Schaefer, DHMSM program manager, spoke about preparing for an MHS GENESIS deployment. He highlighted resources important for a smooth and successful deployment and discussed the activities that take place at each military treatment facility. In addition, Mr. Lance Scott, program manager of DMIX, highlighted the Joint Legacy Viewer's role in the Military Health System's interoperability.

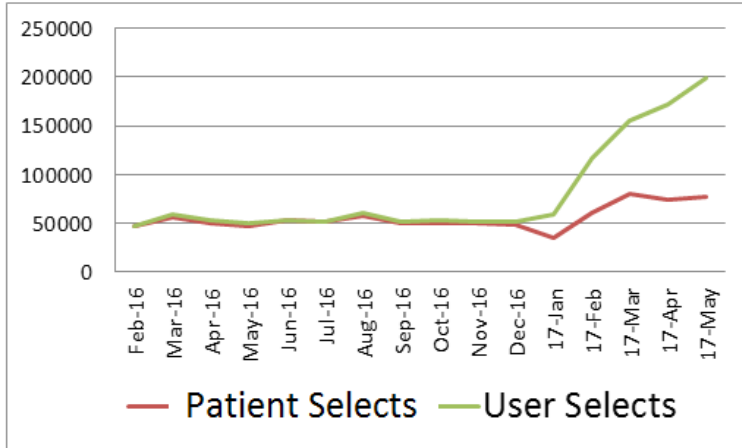
In addition to presenting, PEO DHMS also exhibited at DHITS. Over 400 attendees visited PEO DHMS' exhibit booth, which showcased live demonstrations of MHS GENESIS, the MHS GENESIS Patient Portal, the Mobile Computing Capability, and the Joint Legacy Viewer.

Joint Legacy Viewer & You

Growth in JLV Use

The use of the Joint Legacy Viewer (JLV) is on the rise! Are you part of this trend?

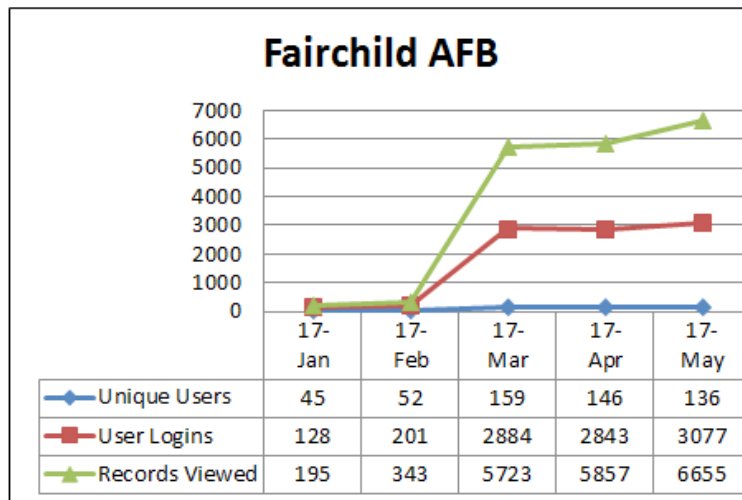
Since January 2017, JLV use is on an upward trend. Patient selects (AKA records viewed), a metric used for measuring JLV individual patient retrievals, grew from just below 50,000 to nearly 200,000 in May 2017. That represents a more than three-fold increase in less than six months.



This growth is important to note for a variety of reasons. The growth confirms the word is definitely out about JLV and its benefits to users, both before and after MHS GENESIS deploys at their site. It also tells us that clinicians are preparing for the impacts of the MHS GENESIS deployment.

Users at Fairchild Air Force Base, the first military treatment facility to deploy MHS GENESIS, have demonstrated growth in the use of JLV. JLV patient selects grew from just below 200 in January to more than 6,000 in May — nearly 3,000 percent.

To learn more about JLV, please click [here](#). For JLV training, click [here](#).



Physician Uses DTRS to Save Wounded Soldier's Life

U.S. Army Maj. Nicholas Cahanding, a radiologist, recently notified the Joint Operational Medicine Information System Program Management Office of an instance where the Deployed Tele-Radiology System (DTRS) helped save a patient's life. DTRS is a Theater Medical Information Program-Joint system that transfers medical images from warfighters to the electronic health record.

While Cahanding was stationed in Kuwait, a physician in Afghanistan called him concerning a patient who was hemorrhaging from a gunshot wound that the staff in Afghanistan could not surgically control. While Cahanding was preparing to travel from Kuwait to Afghanistan to assist the patient, doctors used DTRS to transfer the patient's medical images to Cahanding across the Landstuhl collaboration server, allowing him to review the images and plan the treatment procedure before landing in Afghanistan. Once Cahanding landed in Afghanistan, he and the doctors on site stopped the bleeding, only 12 hours after receiving the initial call. Without DTRS, treatment time would have been longer and the patient's life could have been in danger.

Naval Hospital Oak Harbor Delivers First MHS GENESIS Baby

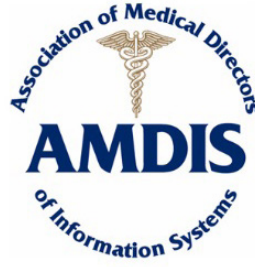
Naval Hospital Oak Harbor (NHOH) was not only the first inpatient facility to deploy MHS GENESIS in the Pacific Northwest, it was also the first military treatment facility to deliver a baby using the new electronic health record system. On July 21 at 3:39 p.m., NHOH Shipmate, Corpsman SN Joseph White and his wife Lauren welcomed their first child, Avalee. All the departments, including doctors and nurses, worked together as both mother and daughter were successfully assessed and cared for as inpatients all the way through discharge using MHS GENESIS.



Courtesy of Naval Hospital Oak Harbor PAO

Physicians Win Award

In June, the Department of Defense (DoD)/Department of Veterans Affairs (VA) Interagency Program Office (IPO) chief medical information officers (CMIOs), Dr. Steven Kator, M.D., and Lt Col Dr. Norman Stone, M.D., received the Association of Medical Directors of Information Systems (AMDIS) Award at the 2017 AMDIS Physician-Computer Connection Symposium in Ojai, California. The CMIOs support the DoD/VA IPO's mission to improve healthcare for our service members, veterans, and their families by providing clinical expertise and cross-supporting specialized resources for the DoD and VA's adoption of and contribution to national health data standards.



Kator and Stone were recognized for their outstanding achievements in the field of applied medical informatics. With more than 30 years of service in the medical field, Kator is a general internist with a background in electrical engineering. He completed his residency at Fitzsimons Army Medical Center and served at the U.S. Army's Fort Carson, followed by joining the VA as a primary care provider and compensation and pension examiner. Along with his role at the DoD/VA IPO, Stone serves as a staff orthopedic surgeon with the U.S. Air Force. Click [here](#) to learn more.



Increased Interoperability with MCC



Last year, the Joint Operational Medicine Information Systems (JOMIS) Program Management Office deployed the Mobile Computing Capability (MCC) with Theater Medical Information Program-Joint (TMIP-J) Increment 2 Release 3, allowing MCC encounters to transfer to the electronic health record through AHLTA-Theater.

Going forward, MCC will interface with MHS GENESIS. This increased interoperability will not require any additional complexity for the end user. Additionally, MCC will remain compatible with TMIP-J Increment 2 Release 3, and is being assessed for backward compatibility to TMIP-J Increment 2 Release 2, which is anticipated to remain on some U.S. Navy ships for a number of years.

MCC is a medical application that allows first responders to document patient status and treatments rendered at the point of injury. MCC operates on Android phones and tablets and allows users to rapidly document care with a high level of data integrity.

