



Welcome to the H²D Software System!

This orientation manual is an evolving document, so please check the member section of www.h2dsoftware.com for updates. To access the member section, go to our website and click the link for “Member Login” or [CLICK HERE](#). If you have never accessed the member section before and if you have not already received our invitation, you will need our approval to activate your account.

We will also e-mail updated versions of the manual when we announce new features that will require a few minutes to orient you to.

Using This Manual

The different sections are bookmarked to help you navigate the topics. See the Table of Contents on the next page (ii) for an outline of this manual. A quick overview of the H²D Software starts on page 1.



The H²D Software, LLC logo at the top of every page is a link to our website.

Technical Support

If you ever need support, please do not hesitate to contact us.

- Contact us by e-mail at information@h2dsoftware.com
- Send a support request through the member section of our website
- Call or e-mail Jason Dixon, D.C. directly at 817-647-5088 – Jason.Dixon@h2dsoftware.com
- E-mail Kelly Howard directly at Kelly.Howard@h2dsoftware.com
- Connect with H²D Software support through TeamViewer by [CLICKING HERE](#)
 - We are not directly notified of TeamViewer connections if we are away from a computer, so please call or e-mail us before connecting with TeamViewer for faster service.

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H²D Software System Overview

The H²D Software System gives you many tools to manage your practice, and create highly specific care records. As soon as we publish Release 1.1.22, you will also gain the ability to monitor your practice's performance from with the Office Metrics module in addition to many other enhancements to **Front Desk**.

There are three different applications in the H²D Software System for you and your staff to utilize.



Front Desk



Office Calendar – schedule and manage appointments



Block Scheduling – schedule entire care plans



Demographics – Enter and manage patient demographics, add new patients



Patient Accounts Receivable (A/R) – Enter charges, payments, and account adjustments. Print statements, superbills, and review patient ledgers.



Appointment Lists – View today's appointments, active appointments, unsigned records, patient specific appointment list



Patient List – View list of all, active, and inactive patients with links to Pt. Summary screen (CR only) Pt. A/R, and Demographics. Narrow the list with patient searching capabilities. Additional features including enhanced searching and exporting coming with Release 1.1.22



Office Information – View Accounts Receivable reports for all patients, patients with balances, with credits, and with past due balances. View Appointment Statistics for the last 30 days. *Office Metrics* will offer many other statistics tools in Release 1.1.22.



Reports – The only feature currently offered in this screen is to print account statements for all patients, active patients only, and/or patients with balances only.



Alerts and Reminders – Available in release 1.1.18, create alerts and reminders for patients and staff members.



Office Management



Office Demographics – update your office demographics, see your customer # and license status with H²D Software



Practice Staff Management – manage practice staff demographics, user login and access



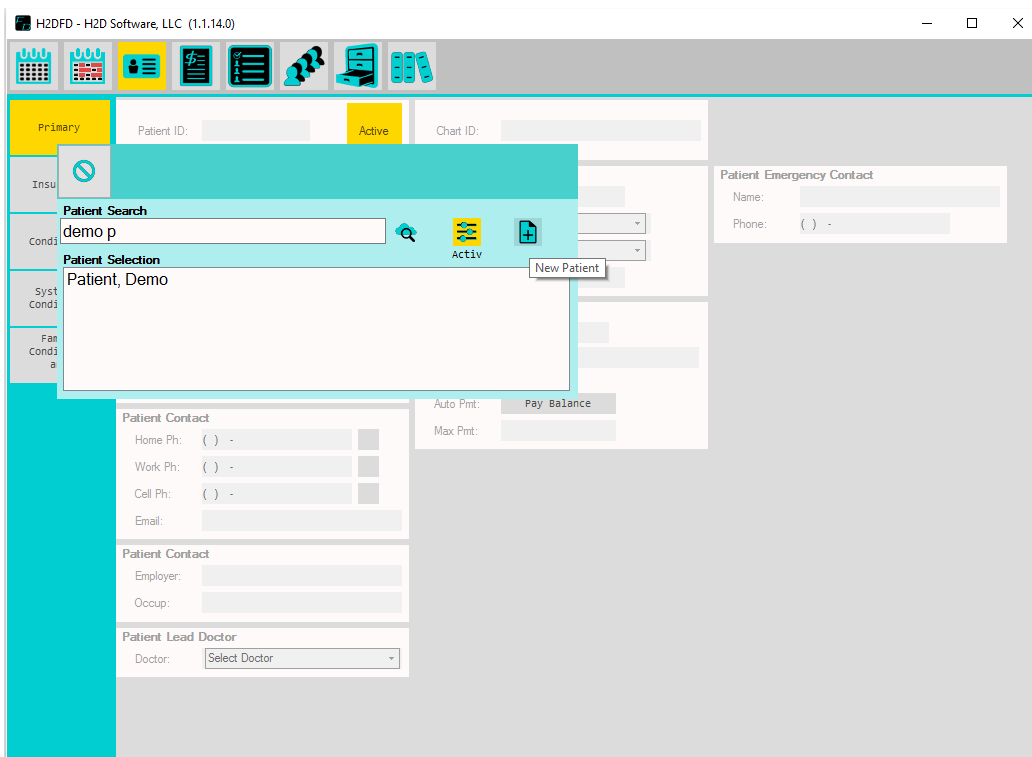
Controls and Settings – configure system settings; rearrange the patient summary screen; manage codes, careplans, and calendar settings



Care Record - This is the program to create and maintain all of your patient records: care episodes, appointments, exams, complaint/concerns, SOAP notes, diagnoses, and care plans.

The Care Record application also includes all features from **Front Desk**.

Patient/Practice Member Demographics



H2D Software, LLC (1.1.14.0)

Primary Patient ID: Active Chart ID:

Insurance: Inactive

Conditions: demo p

Systemic Conditions: Patient, Demo

Family Conditions and: Patient, Demo

Patient Search: demo p

Patient Selection: Patient, Demo

Patient Emergency Contact

Name:

Phone: () -

Patient Contact

Home Ph: () -

Work Ph: () -

Cell Ph: () -

Email:

Patient Contact

Employer:

Occup:

Patient Lead Doctor

Doctor: Select Doctor

Auto Pmt: Pay Balance

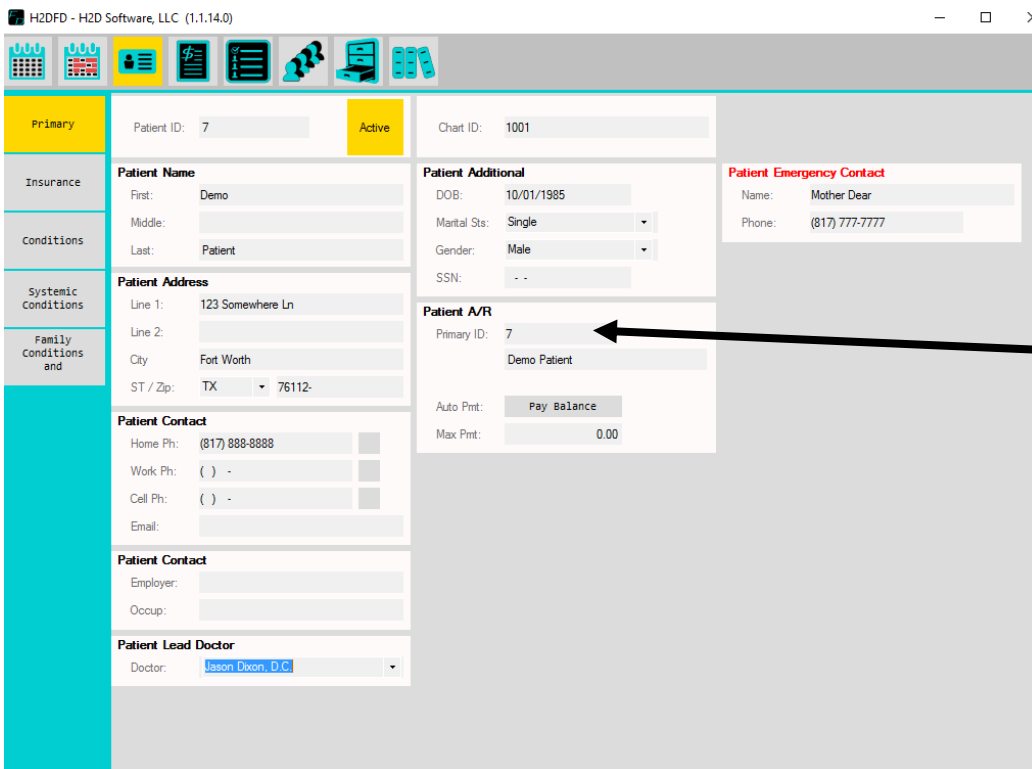
Max Pmt:

When you open the demographics screen, you can search for existing practice members or click on the new patient button.

After you click the new patient button, anything you enter on the screen is saved.

This search list has not yet been updated to act like our calendar appointment search list yet. You can search for people by the last name, first letter of their last name, or by the first name and first letter of the last name.

The default search setting is to look for active patients. Press the Active button to toggle this option if you need to include inactive patients in your search.



H2D Software, LLC (1.1.14.0)

Primary Patient ID: 7 Active Chart ID: 1001

Insurance: Insurance

Conditions: Conditions

Systemic Conditions: Systemic Conditions

Family Conditions and: Family Conditions and

Patient Name

First: Demo

Middle:

Last: Patient

Patient Address

Line 1: 123 Somewhere Ln

Line 2:

City: Fort Worth

ST / Zip: TX 76112

Patient Contact

Home Ph: (817) 888-8888

Work Ph: () -

Cell Ph: () -

Email:

Patient Contact

Employer:

Occup:

Patient Lead Doctor

Doctor: Jason Dixon, D.C.

Patient Additional

DOB: 10/01/1985

Marital Sta: Single

Gender: Male

SSN: - - -

Patient A/R

Primary ID: 7

Demo Patient

Auto Pmt: Pay Balance

Max Pmt: 0.00

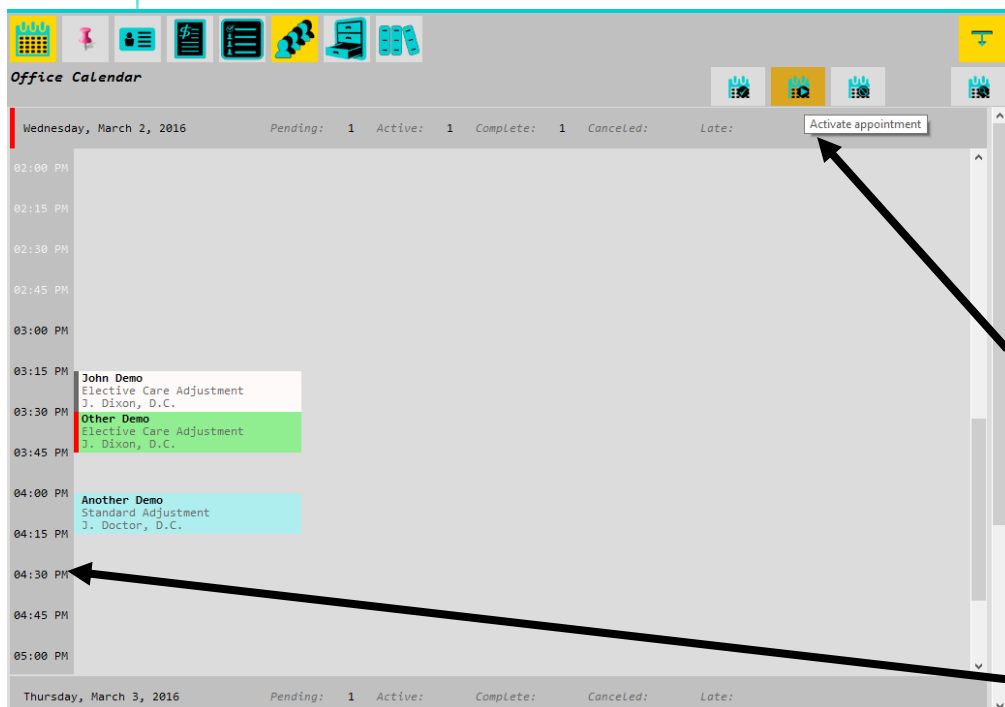
Patient Emergency Contact

Name: Mother Dear

Phone: (817) 777-7777

You can link accounting ledgers together by entering the Patient ID from a different patient in the "Patient A/R" section. When the accounting screen is opened for the Primary account, any linked accounts will be added to account statements and may quickly be reviewed on the Primary account.

The "Conditions" buttons on the left will be moved into the patient/practice member summary screen in a future version. For now, you can record medical history and review of systems in this screen.

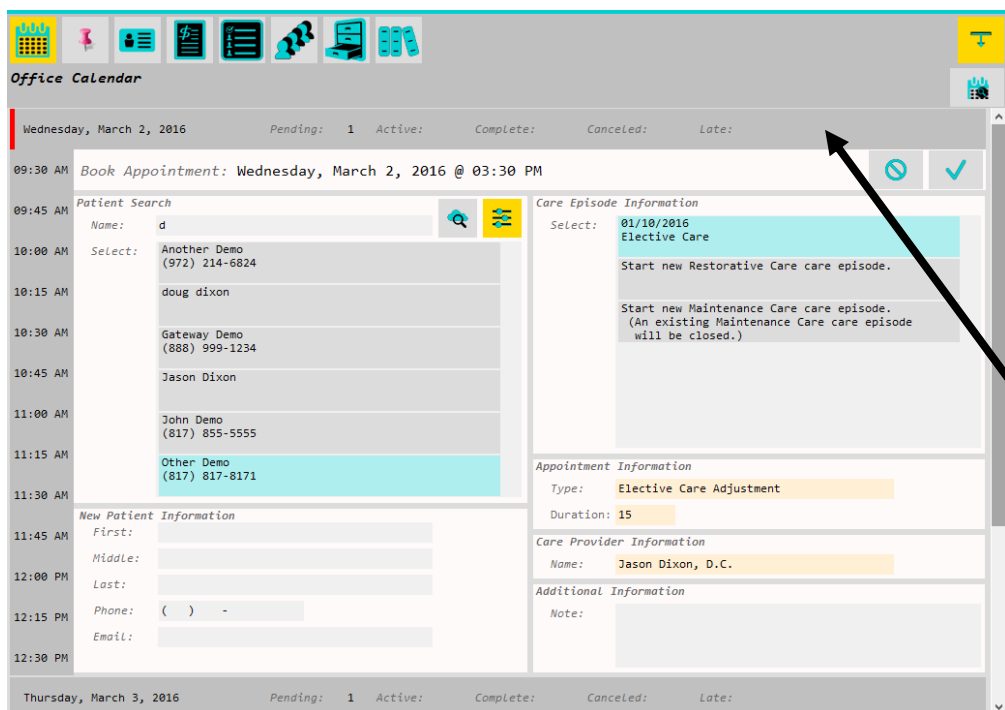


The Calendar is where you will create appointments. You must have an appointment scheduled in order to use the NSA Care screen.

When appointments are scheduled, press on a practice member's name to select it and then press either check in or activate.

Activating an appointment will take you directly to their Practice Member Summary Screen.

To schedule an appointment, press the time of day you want to schedule. The office is considered closed where the times are in white. These times are locked from appointments to prevent from accidentally scheduling while closed.



You can change your calendar settings in H2DOM.

Press or click on the header for the day of the week to expand or collapse that day's schedule.

You may schedule as many people in a single time slot as you like.

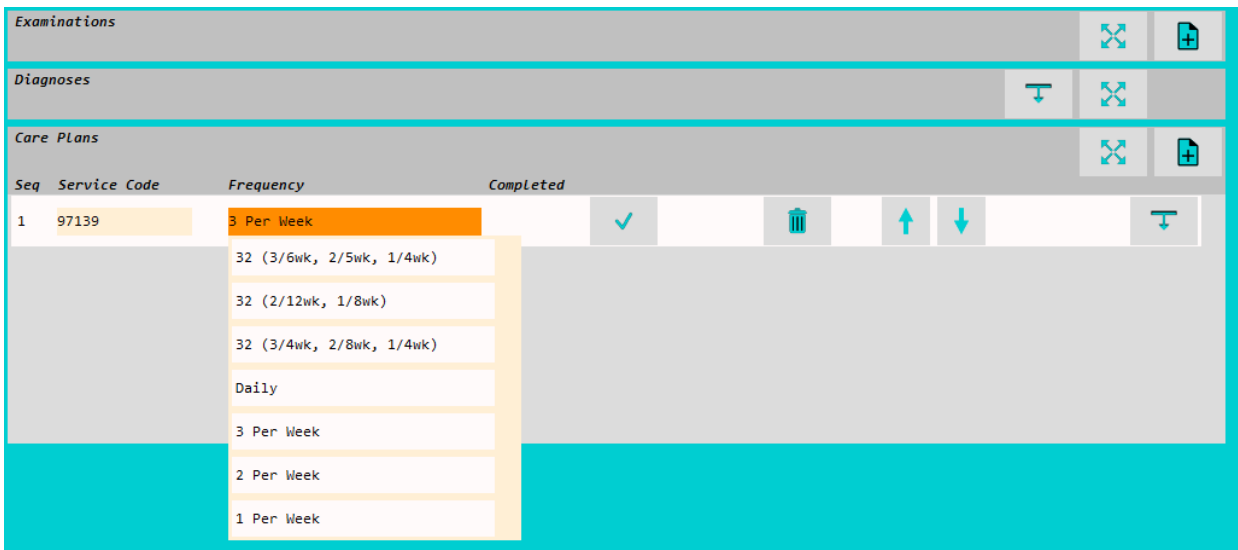
After pressing a time slot, the Book Appointment screen opens. Enter a practice member's first name, last name, or the first letter or part of a name to pull up the intended person. After you have scheduled an appointment before, the next appointment will be prepopulated for quick scheduling.

Select an existing care episode or create a new one, select the appointment type, change the duration if you'd like, and select the care provider for that visit. Press the check mark to confirm the appointment.

If you are scheduling for a new patient/practice member, you can enter their information on the bottom left.

Block Scheduling

In order to use block scheduling, you must have a care plan assigned in the patient/practice member summary screen.

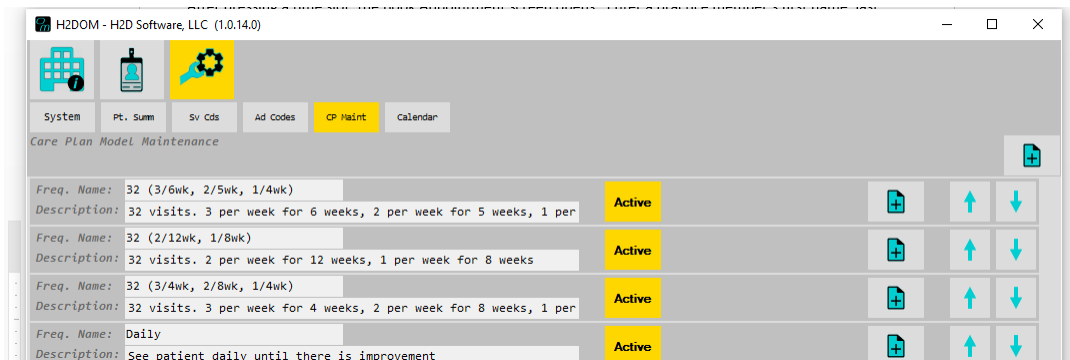


Seq	Service Code	Frequency	Completed
1	97139	3 Per Week	<input checked="" type="checkbox"/>
		32 (3/6wk, 2/5wk, 1/4wk)	
		32 (2/12wk, 1/8wk)	
		32 (3/4wk, 2/8wk, 1/4wk)	
		Daily	
		3 Per Week	
		2 Per Week	
		1 Per Week	

Use any of the care plans that we have created or create your own in the H2DOM application.









To create your own care plans, open H2DOM and click on the codes and settings button.

Click on “CP Maint” and click the  add a new care plan button.



Freq. Name	Description	Status
32 (3/6wk, 2/5wk, 1/4wk)	32 visits. 3 per week for 6 weeks, 2 per week for 5 weeks, 1 per	Active
32 (2/12wk, 1/8wk)	32 visits. 2 per week for 12 weeks, 1 per week for 8 weeks	Active
32 (3/4wk, 2/8wk, 1/4wk)	32 visits. 3 per week for 4 weeks, 2 per week for 8 weeks, 1 per	Active
Daily	See patient daily until there is improvement	Active

Block Scheduling

Block Scheduling

Care Plan: 3 Per Week Status: Not Scheduled Care Plan Start Date: 03/14/2016

Care Episode: Care Episode 02/03/2016

Sequence: 1

Frequency: 3/WK Tuesday @ 10:00 AM Wednesday @ 10:00 AM Day 3

Periods: 8

Select Date

February 2016							March 2016							April 2016						
Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6			1	2	3	4	5						1	2
7	8	9	10	11	12	13	6	7	8	9	10	11	12	3	4	5	6	7	8	9
14	15	16	17	18	19	20	13	14	15	16	17	18	19	10	11	12	13	14	15	16
21	22	23	24	25	26	27	20	21	22	23	24	25	26	17	18	19	20	21	22	23
28	29						27	28	29	30	31			24	25	26	27	28	29	30

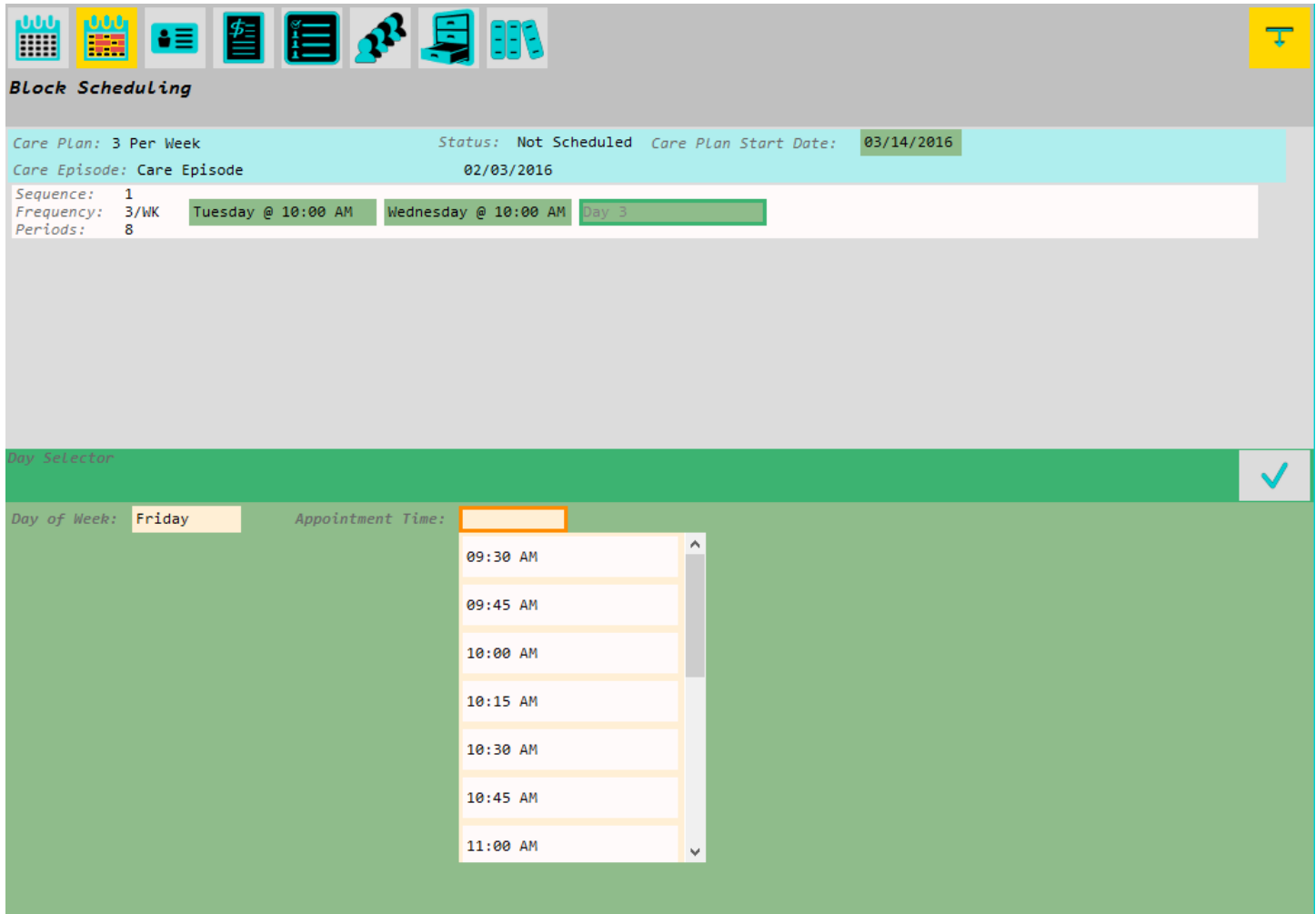
The green boxes can be pressed to set up the type of weekly appointment schedule that you would like to repeat. Care plans with different frequencies over multiple weeks will offer a more complex schedule that can be created and booked all at once.

Pressing the “Care Plan Start Date” opens the 3 month calendar as shown above. Select the date you would like this block scheduling to begin.

You will then need to select the day of the week and time for the indicated frequency of your care plan.

Block Scheduling continues on the next page.

Block Scheduling



The screenshot shows the 'Block Scheduling' window. At the top, there's a toolbar with icons for calendar, appointments, patients, settings, and other functions. Below the toolbar, the 'Block Scheduling' section displays the following information:

- Care Plan:** 3 Per Week
- Status:** Not Scheduled
- Care Plan Start Date:** 03/14/2016
- Care Episode:** Care Episode
- Sequence:** 1
- Frequency:** 3/WK
- Periods:** 8

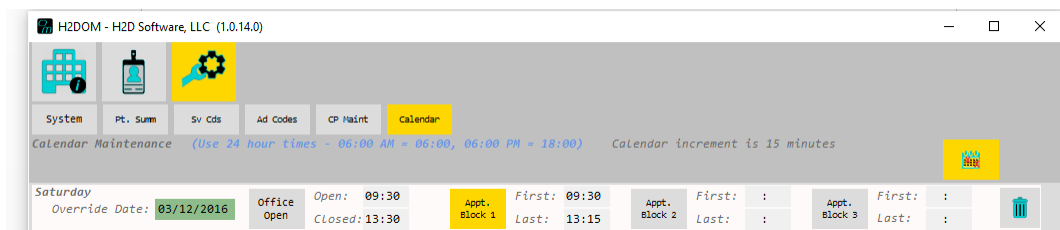
Below this information, there are three buttons for selecting a day and time: 'Tuesday @ 10:00 AM', 'Wednesday @ 10:00 AM', and 'Day 3'. The 'Day 3' button is highlighted. Below these buttons is a 'Day Selector' section with a green background. It includes a 'Day of Week' dropdown set to 'Friday' and an 'Appointment Time' dropdown menu. The 'Appointment Time' menu is open, showing a list of times from 09:30 AM to 11:00 AM in 15-minute increments. A checkmark icon is visible in the top right corner of the 'Day Selector' section.

Pressing the “Day 1,” Day 2,” or “Day 3” boxes opens the day and time selection as seen above.

Select the day of the week and the time you would like to schedule and then press the check mark.

The days and times that are available on these lists reflect your calendar setup in H2DOM. If your office is normally closed, you cannot select that time for block scheduling.

In H2DOM Calendar setup, you can create overrides to your schedule. For example, if you are normally open on Saturdays and you need to close the office on a particular day, create an override and you will not be able to schedule appointments on that day. If block scheduling is set to include Saturdays, the override will cause the scheduling to automatically skip that day and continue the pattern on the next week.



The screenshot shows the 'H2DOM - H2D Software, LLC (1.0.14.0)' window. The 'Calendar' tab is selected. The 'Calendar Maintenance' section shows the following information:

- Calendar Maintenance:** (Use 24 hour times - 06:00 AM - 06:00, 06:00 PM - 18:00) Calendar increment is 15 minutes
- Saturday:** Override Date: 03/12/2016
- Office Open:** Open: 09:30, Closed: 13:30
- Appt. Block 1:** First: 09:30, Last: 13:15
- Appt. Block 2:** First: : , Last: :
- Appt. Block 3:** First: : , Last: :

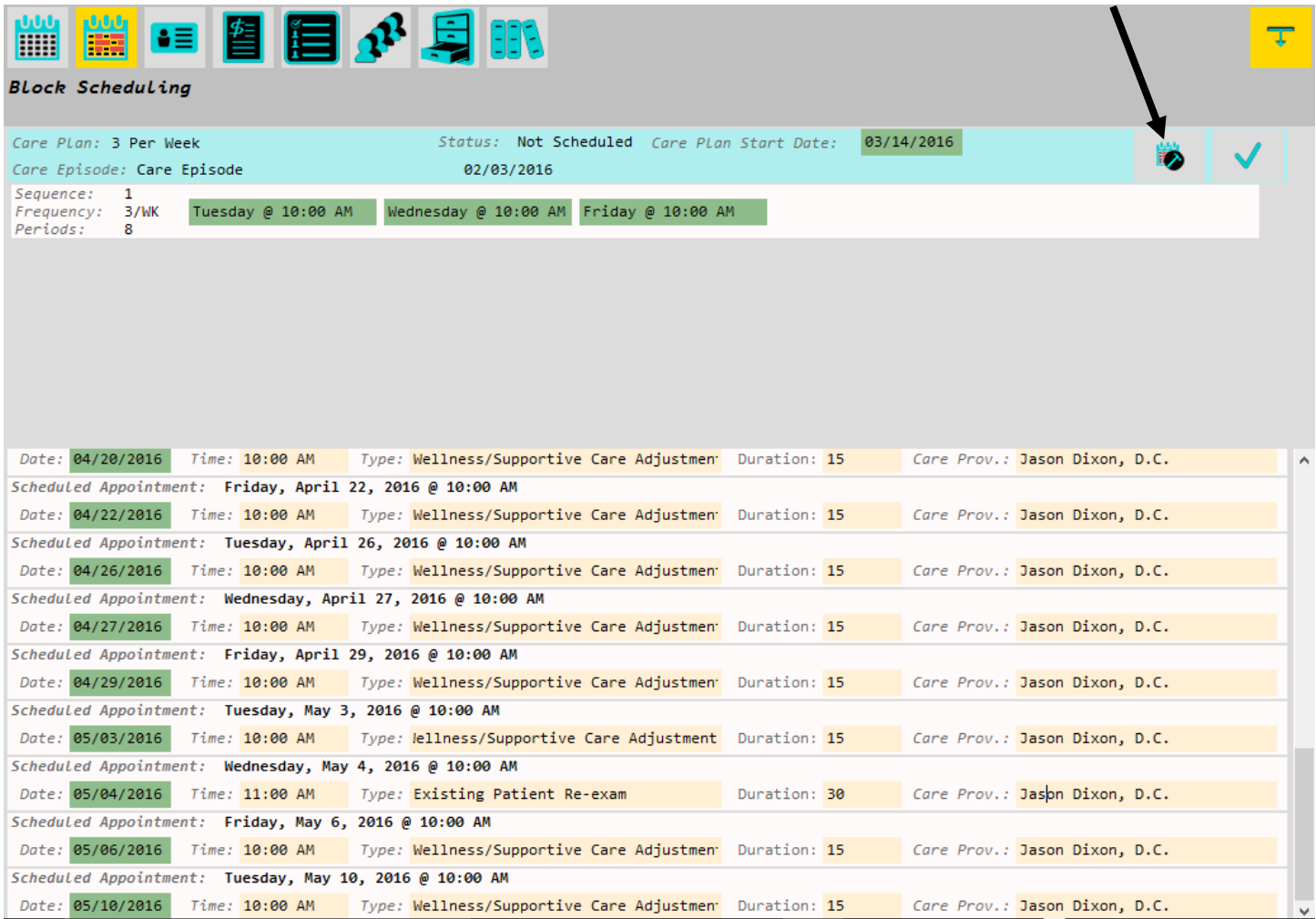
The 'Office Open' button is greyed out, indicating that the office is closed on the specified date.

In the example to the left, I have created a schedule override, closing the office on 03/12/16.

“Office Open” is grey, indicating that option is off.

Block Scheduling

After selecting the days and times for the schedule, press the build button.



Block Scheduling

Care Plan: 3 Per Week Status: Not Scheduled Care Plan Start Date: 03/14/2016

Care Episode: Care Episode 02/03/2016

Sequence: 1
Frequency: 3/WK Tuesday @ 10:00 AM Wednesday @ 10:00 AM Friday @ 10:00 AM
Periods: 8

Date	Time	Type	Duration	Care Prov.
04/20/2016	10:00 AM	Wellness/Supportive Care Adjustmen	15	Jason Dixon, D.C.
Scheduled Appointment: Friday, April 22, 2016 @ 10:00 AM				
04/22/2016	10:00 AM	Wellness/Supportive Care Adjustmen	15	Jason Dixon, D.C.
Scheduled Appointment: Tuesday, April 26, 2016 @ 10:00 AM				
04/26/2016	10:00 AM	Wellness/Supportive Care Adjustmen	15	Jason Dixon, D.C.
Scheduled Appointment: Wednesday, April 27, 2016 @ 10:00 AM				
04/27/2016	10:00 AM	Wellness/Supportive Care Adjustmen	15	Jason Dixon, D.C.
Scheduled Appointment: Friday, April 29, 2016 @ 10:00 AM				
04/29/2016	10:00 AM	Wellness/Supportive Care Adjustmen	15	Jason Dixon, D.C.
Scheduled Appointment: Tuesday, May 3, 2016 @ 10:00 AM				
05/03/2016	10:00 AM	Wellness/Supportive Care Adjustmen	15	Jason Dixon, D.C.
Scheduled Appointment: Wednesday, May 4, 2016 @ 10:00 AM				
05/04/2016	11:00 AM	Existing Patient Re-exam	30	Jason Dixon, D.C.
Scheduled Appointment: Friday, May 6, 2016 @ 10:00 AM				
05/06/2016	10:00 AM	Wellness/Supportive Care Adjustmen	15	Jason Dixon, D.C.
Scheduled Appointment: Tuesday, May 10, 2016 @ 10:00 AM				
05/10/2016	10:00 AM	Wellness/Supportive Care Adjustmen	15	Jason Dixon, D.C.


After pressing the “Build Schedule” button, an appointment list will be generated using the settings you selected. Any schedule overrides will be used accordingly.

You can make any changes you need to the block schedule list BEFORE you click the check mark.

After pressing the check mark, these appointments are added to your appointment calendar and will need to be removed by cancelling the appointment if there are any mistakes that need to be corrected or changes made.

You can cancel appointments easily by selecting the appointment on the calendar screen and pressing the cancel button.



You can also cancel appointments on the appointment list  on the Front Desk Screen or on the patient summary screen by pressing the cancel button.

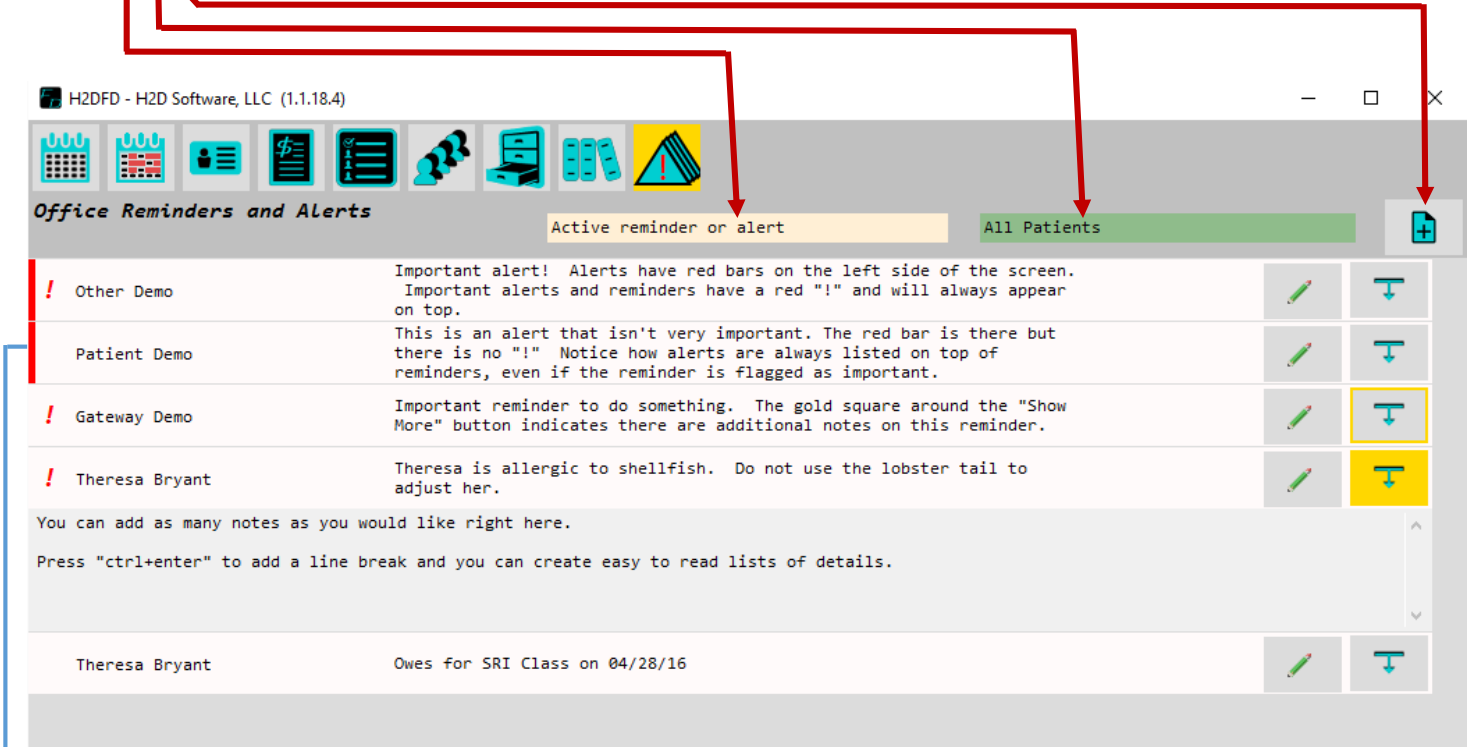


Reminders and Alerts

In the alerts and reminders screen, you can create and manage reminders and alerts for your patients and staff members.


- The default view will show you all active reminders and alerts for all patients.


- You may switch to completed reminders/alerts here.
- You can select which patient's reminders/alerts to view here.
- Create new reminders/alerts here.




Alerts have a red bar on the left and will always be sorted to the top of the list.

Reminders and alerts that are flagged as “important” will have the **!**

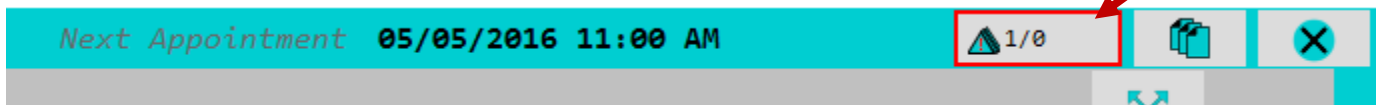
Edit existing reminders/alerts by pressing the pencil – “edit button.” 

Additional notes can be typed either when creating/editing a reminder/alert or by pressing 

The “show more” button will be outlined in gold if there are notes attached to the reminder/alert. 

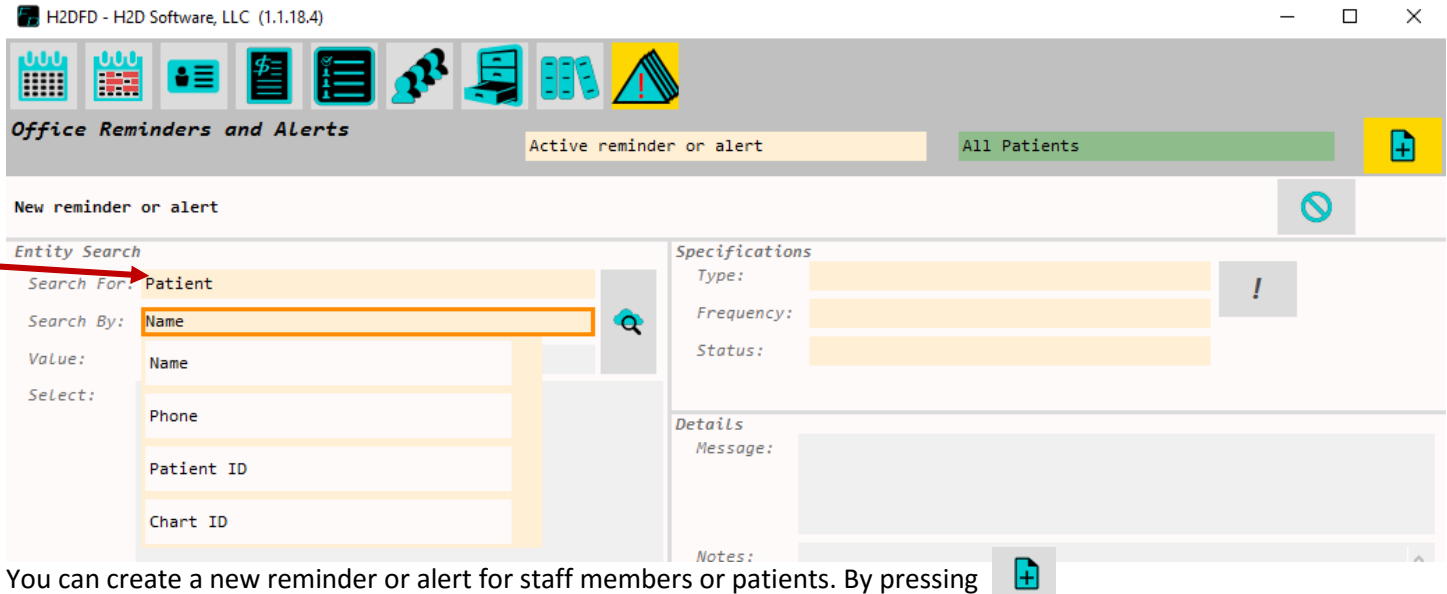
The reminders/alerts screen is also accessible at the top of the patient summary screen. Press here to open.

In this example: 1/0 means there is 1 alert and 0 reminders for this patient.



Reminders and Alerts (2 of 3)

Creating a new reminder/alert



H2D Software, LLC (1.1.18.4)

Office Reminders and Alerts

Active reminder or alert

All Patients

New reminder or alert

Entity Search

Search For: Patient

Search By: Name

Value:

Select:

Phone

Patient ID

Chart ID

Specifications

Type:

Frequency:

Status:

Details

Message:

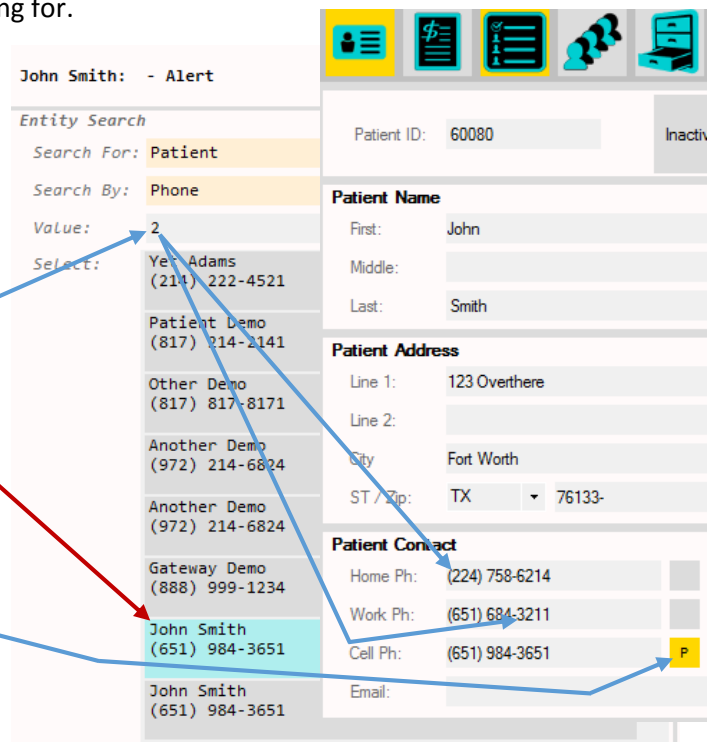
Notes:

You can create a new reminder or alert for staff members or patients. By pressing

Change your search to staff members by pressing “patient” and then selecting “staff member”

You can search for patients by name, phone number, patient ID, and chart ID

- When searching for a name, type as little as the first letter of either the first or last name.
 - Patients found will be sorted alphabetically by first name
- When searching for a patient by phone, patient ID, or chart ID you may type any number or sequence of numbers that is included in the number you are searching for.
 - Example: If searching for the phone number “817-447-6777,” you may type any number or sequence of numbers that is in the phone number and all patients with this phone number in their demographics will be found.
 - If the patient has multiple phone numbers (home, work, cell) containing the single number or sequence of numbers you search for, they will be listed for each number found.
 - You may select any instance of the same name for this patient to select the patient.
 - The phone number displayed here is the “primary” phone number which is selectable in the demographics screen.



John Smith: - Alert

Entity Search

Search For: Patient

Search By: Phone

Value: 2

Select:

Ver Adams (214) 222-4521

Patient Demo (817) 214-2141

Other Demo (817) 817-8171

Another Demo (972) 214-6824

Another Demo (972) 214-6824

Gateway Demo (888) 999-1234

John Smith (651) 984-3651

John Smith (651) 984-3651

Patient ID: 60080

Inactiv

Patient Name

First: John

Middle:

Last: Smith

Patient Address

Line 1: 123 Overthere

Line 2:

City: Fort Worth

ST / Zip: TX 76133-

Patient Contact

Home Ph: (224) 758-6214

Work Ph: (651) 684-3211

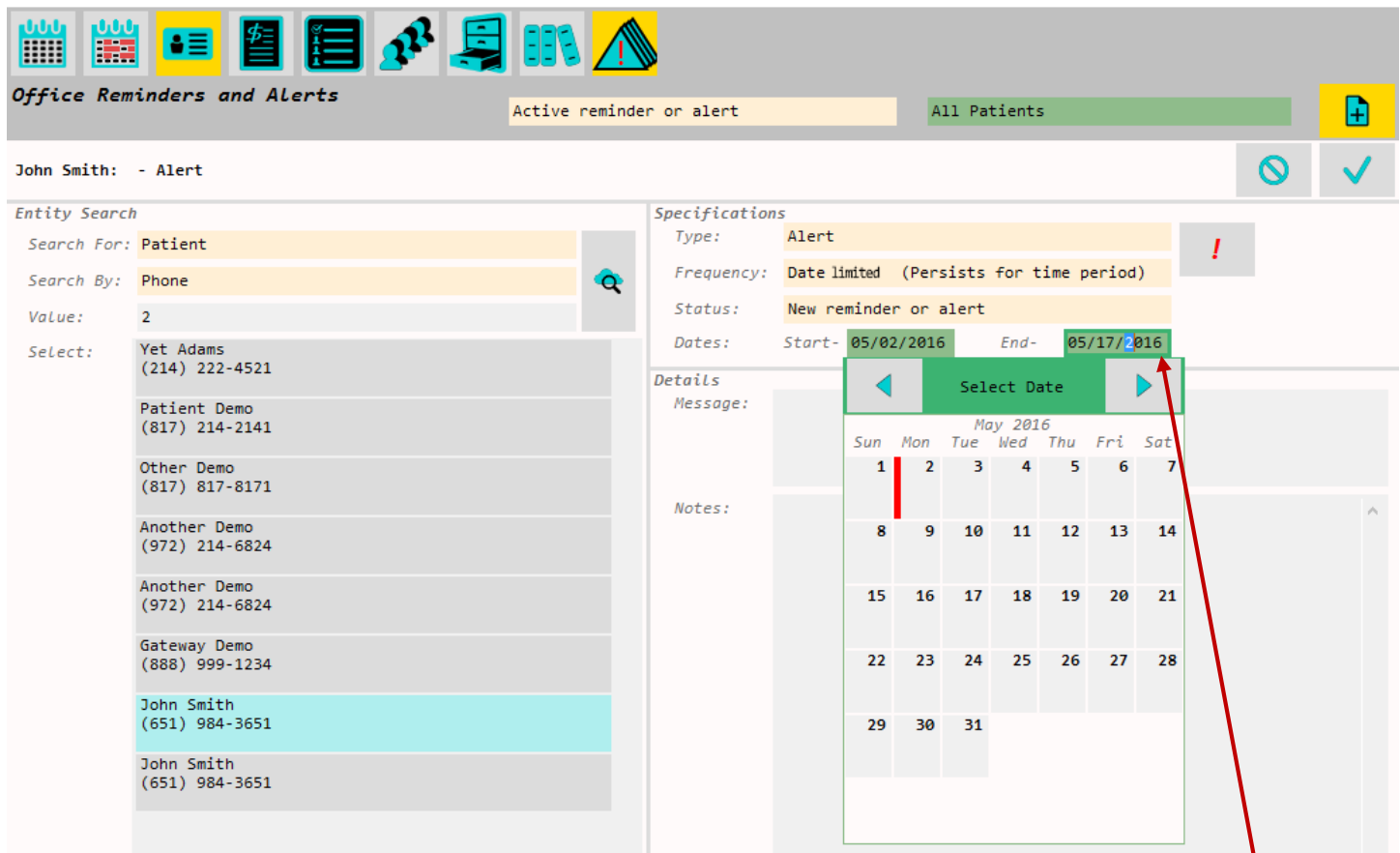
Cell Ph: (651) 984-3651

Email:

P

Alerts and Reminders (3 of 3)

Creating a new reminder/alert (continued)



Office Reminders and Alerts

Active reminder or alert All Patients

John Smith: - Alert

Entity Search

Search For: Patient

Search By: Phone

Value: 2

Select:

- Yet Adams (214) 222-4521
- Patient Demo (817) 214-2141
- Other Demo (817) 817-8171
- Another Demo (972) 214-6824
- Another Demo (972) 214-6824
- Gateway Demo (888) 999-1234
- John Smith (651) 984-3651
- John Smith (651) 984-3651

Specifications

Type: Alert

Frequency: Date limited (Persists for time period)

Status: New reminder or alert

Dates: Start- 05/02/2016 End- 05/17/2016

Details

Message:

Notes:

Select Date

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

After selecting the desired patient or staff member, select "Type" as "Alert" or "Reminder"


The "Frequency" may be set as "Static" or "Date Limited"

- Static reminders/alerts will remain active until their "status" is changed to "completed"
- Date limited reminders/alerts will change their status to "completed" at the selected "End Date"

Type the main reminder or alert message in the top "Message" text box

Type any additional notes for that reminder or alert in the "Notes" text box

In order to indicate that the reminder or alert is important, press the 

To clear the screen and start over on your new reminder/alert, press the 

To confirm and save your new reminder/alert, press the 

The Patient/Practice Member Summary Screen

H2DTR - H2D Software, LLC (1.1.14.4) FVDB

Patient: **Other Demo** Next Appointment: **03/03/2016 10:15 AM**

Care Episodes

CE Type	CE ID	Description	Cond Date	Start	End	
Elective	80171	Elective Care	01/10/2016	01/10/2016		✓

Appointments

Date	Time	Status	Type
03/17/2016	10:15 AM	Canceled	Elective Care Adjustment
03/10/2016	10:15 AM	Pending	Elective Care Adjustment
03/03/2016	10:15 AM	Pending	Elective Care Adjustment
03/02/2016	3:30 PM	Active	Elective Care Adjustment

NSA

Complaints

Condition Description: Type Chief Complaint Here

Created: 01/10/2016 Status: Active Sts Date: 01/10/2016

How Did Happen: Unknown

First Noticed: On 01/05/16 Last Episode: 1/ 8/2016 Onset: Immediate Gradual

Describe Onset: Woke up and could not turn his head

Examinations

Date	Description	
01/10/2016	Basic Patient Exam	12/29/2099

Diagnoses

Seq	ICD Code	ICD Description	Dx Date	Created	Resolved	
1	M99.01	Segmental and somatic dysfunction, cervical spine	01/10/2016	03/02/2016	✓	
2	M62.830	Muscle spasms of the back	01/10/2016	03/02/2016	✓	
3	G44.229	Tension headache, chronic, not intractable	01/10/2016	03/02/2016	✓	

Care Plans

Seq	Service Code	Frequency	Completed	
1	97139	32 (3/6wk, 2/5wk, 1/4wk)	✓	

Care episodes are created when creating appointments on the calendar. (See calendar for details)

Our default descriptions are “Elective Care” and “Restorative Care” plans. Feel free to create your own description which will appear on the appointment calendar.

Clicking on a dark grey header will expand or collapse a section.

Click or press the NSA button to open the NSA Care screen.

The **Complaints** section is for recording details of complaints or presenting issues. Add new complaint record details by pressing the + button.

Click the screen expansion button to have any section fill the whole screen.

Click the object expansion button to open an object for more options and details.

The **Diagnoses** screen is prepopulated with many commonly used ICD 10 diagnosis codes. We have not included any mechanism of injury codes, but they are easy for you to add them if you need them.

The **Care Plans** section is where you select care plans, assign service codes to diagnoses, and create care plan goals. You will need to assign a care plan to your practice member before you can utilize **block scheduling**. Create custom care plans in the H2DOM application.

Getting to know the NSA Screen:

H2DTR - H2D Software, LLC (1.1.14.0) FVDB

Patient: **Demo Patient** Next Appointment: **Not Scheduled**

NSA

Provider: **Jason Dixon, D.C.** Sign Care Date: **03/02/2016**

OCC	
C1	
C2	
C3	1B
C4	
C5	
C6	
C7	
T1	
T2	
T3	
T4	
T5	
T6	
T7	
T8	
T9	
T10	
T11	
T12	
L1	
L2	
L3	
L4	
L5	
S1	
S2	
S3	1B
S4	
S5	
COCC	

entr SOAP

A level 1B network spinal entrainment contact was made at left medial S3 to affect the left medial C3/C2.

Level of Care: 1A 1B 1C 2A 2Bs 2Bp 2C 3A 3B 3C

Integrate: BE EH 1 LM 1 UM SO US

Triad of Change: Beh 1 Str Per 2

Link Affecting

1A 1B 1C 2A 2Bs 2Bp 2C 3A 3B 3C BE EH LM UM SO US Beh Str Per

Main CR End CR Hst Addend Leg Ck

Dom Triad of Change: Beh 1 Per 2 Str

Expression: 3 2 1 0 1 2 3



Internal External

Stage: 1 2 3 4 5 6 7 8 9 10 11 12

Z Trans: C1 C2 C3 C4 C5 C6 C7


Notes: Type as many care notes as you would like right here.

The panel on the top right is where you record your entrainment contacts.

After selecting a gateway button  on the left panel, press the new contact button. 

Record contact details and indicate gateway relationships with a few quick button presses.

The integrate and triad of change buttons record the order in which they are selected. Press any of the buttons a second time to turn them off.

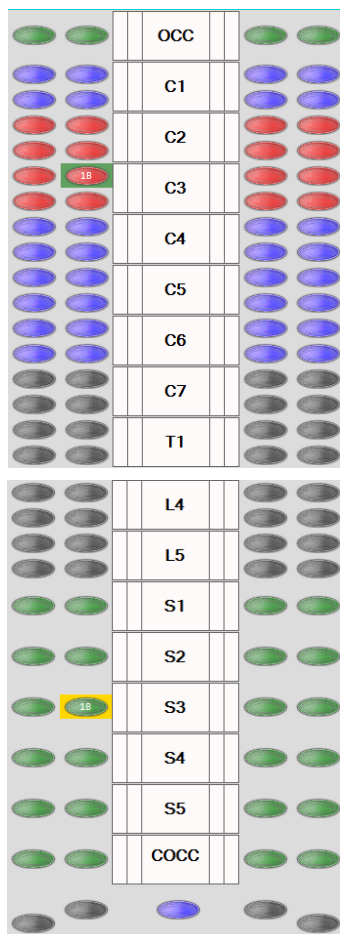
If you selected the wrong gateway button, simply press the delete button to clear out any mistakes. 





In this example, there is no gateway history shown. The details from any contact made at a particular gateway will appear in the right center panel when a gateway is selected.

The bottom right section is the Main Care tab where you can select the Dominant Triad of Change (T.O.C.), Internal – External orientation, current stage of healing, current Z-Translation, and add any additional care notes.

Dominant T.O.C. and Internal – External selections are carried forward to each new appointment.

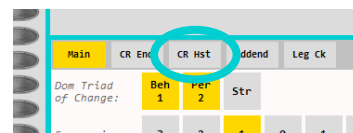
The Gateway Buttons



- Gateway buttons are grouped by colors into the different phases.
- When a gateway is selected it will have a gold background. 
- Different colored backgrounds indicate different relationships between gateway buttons when recording a contact.
 - When gateways are linked with the “Link” button, both gateway buttons will have a gold background.
 - After selecting a Phase One gateway button, press “Affect” to indicate which gateway is being affected by the Phase One contact. Affected gateways will have a green background. 
 - Bilateral or double ended Phase One contacts can be recorded by pressing the “Double” button. Gateway buttons linked with a “Double” contact will have a magenta background. 
- When a contact has been recorded, the highest level contact for that particular visit is displayed on the gateway button(s).
- If you have recorded an entrainment contact on a previous visit, the gateway button will appear darker to indicate there is a history for that gateway button in the database. 
 - When you press a gateway button that has entrainment contact history, every previous contact recorded will appear on the right center panel.
 - If you press a darker colored gateway button and there is no history displayed, this would indicate that the gateway was affected by a previous contact but there is no direct contact history at that gateway.
 - To see detailed history for previous visits, press the CR Hx button on the bottom right panel.

Gateway button history:

- The panel above displays contacts from previous visits.
 - The first section displays level of care
 - The second section shows the integration strategies.
 - BE – Bioenergetic, EM – Emotional, LM – Lower Mental, UM- Upper Mental, SO – Soul, and US – Universal Spirit
 - The third section shows the triad of change strategies.
 - Beh – Behavior, Str – Structure, Per – Perception
 - The last set of abbreviations is for the gateway that was affected by or linked to the contact
 - Ex: R M C2/C3 = Right Medial C2/C3 gateway, L L C4/C5 = Left Lateral C4/C5 gateway



Recording Entrainment Contacts

- Select a gateway button
- Press the new entrainment contact button
- Select the level of care for your entrainment contact
- Select the integration strategies used
 - You may record multiple integration strategies
 - Multiple button selections are recorded in sequence
- Select the triad of change strategy
 - Multiple button selections are recorded in sequence
- Record relationships of this gateway contact to other gateways by pressing Link, Double, or Affect
 - Link – This will record the contact as a simultaneous contact such as in bilateral direct entrainment contacts.
 - Press Link, then press the next gateway button
 - You will now see both gateway buttons highlighted in gold
 - All entrainment contact details are now recorded on both gateway buttons at the same time.
 - Double – This will record the contact as a bilateral phase one contact or a double ended phase one contact.
 - Only the green, Phase One, gateway buttons give this option
 - Press Double, then press the other gateway buttons in this sequence:
 - Gateway affected by the 1st Phase One gateway
 - 2nd Phase One gateway button
 - Gateway affected by the 2nd Phase One gateway
 - Affect – This will record a single Phase One gateway contact and show the relationship of the gateway this contact is affecting.
 - Only the green, Phase One, gateway buttons give this option
 - Press Affect, then press the gateway button representing the gateway you are affecting with the Phase One contact.
- When recording a contact, you may select any option in any order. The Double contact gateway button selection is the only sequence that needs to be specific to properly record what you are doing.

	C1		A bilateral level 2A network spinal entrainment contact was made at left medial S4 to affect the left medial C2/C1 and at the right medial S2 to affect the right medial C2/C3.	
	C2		Level of Care:	1A 1B 1C 2A 2Bs 2Bp 2C 3A 3B 3C
	C3		Integrate:	BE EM LM 1 UM 2 SO US
	C4		Triad of Change:	Beh 1 Str Per 2
	C5		Doubled	130666
			A level 1C network spinal entrainment contact was made at left medial S4 to affect the left medial C2/C1.	



Entrn
SOAP
Tension

3A
3A
1B

C2
C3
C4
C5
C6
C7

T1
T2
T3
T4
T5
T6
T7
T8
T9
T10
T11
T12
L1
L2
L3
L4
L5
S1
S2
S3
S4
S5
COC

OCC
C1
1B

0
0
0
0
0
0

T1
T2
T3
T4
T5
T6
T7
T8
T9
T10
T11
T12
L1
L2
L3
L4
L5
S1
S2
S3
S4
S5
COC

Left
Right

Lateral
Medial
Passive
Medial
Lateral

Tension:
1
1
1
1
1

2
2
2
2
2

3
3
3
3
3

4
4
4
4
4

5
5
5
5
5

Energy State:
-
-
-
-
-

0
0
0
0
0

+
+
+
+
+

Muscle Nature/
Osseous
Misalignment:
Straight, ropey
Rubbery/Musc.
slides over fascia

Swelling:
Swelling

Reset
Clear findings

Vertebral Misalignment

Main
CR End
CR Hst
Addend
Leg Ck

Dom Triad
of Change:
Beh
Per
Str

Expression:
3
2
1
0
1
2
3

Stage:
1
2
3
4
5
6
7
8
9
10
11
12

Z Trans:
C1
C2
C3
C4
C5
C6
C7

Notes:

Clear Selections

- The Care Record History panel will be redesigned in a future release to include E-State, muscle quality, and swelling. These findings are not currently shown in the CR History panel.

Active and Passive Tension Panel (2 of 2)

Selecting Vertebrae

In the NSA Care Record Screen you will see the column of vertebrae in between the 225 Spinal Gateway Buttons.

When a vertebra is selected, you will see the segmental level highlighted and the entire level will have a box outlining the selected area.

To select a vertebra, press or click the vertebra button.

To select a range of vertebrae, press the vertebra buttons for the beginning and the end of the range you would like to select. You may only select a range if there are no other selections currently made.

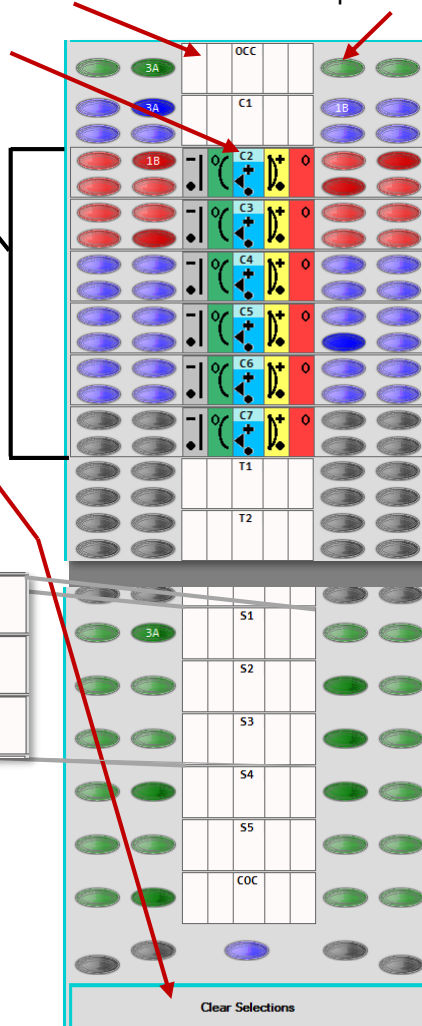
To clear your selection, press the "Clear Selection" button.

For spinal segments S1-S3 you have the ability to select Left, Right, or Both. This selection ability is provided to differentiate between tension findings of the left and right SI joints.

The first press or click on S1, S2, or S3 will show the selection for both (S1B, S2B, S3B).

The 2nd press or click will select left (S1L, S2L, S3L) and the 3rd press or click will select the right (S1R, S2R, S3R).

A 4th press or pressing the clear selection button will clear the selection.



Here is an example of the SOAP notes for the Active and Passive tension shown in this example.

OBJECTIVE

Network Care Evaluation Palpation reveals:

Left Lateral Musculature

1/5 active tension: C2-C7

Vertical bands in the musculature of a ropey nature with tension in the fibers of a multisegmental nature: C2-C7

Swelling present: C2-C7

Left Paraspinal Musculature

2/5 active tension: C2-C7

Vertical bands in the musculature of a rubbery nature or musculature appears to be sliding over the fascia: C2-C7

Right Lateral Musculature

5/5 active tension: C2-C7

Right Paraspinal Musculature

4/5 active tension: C2-C7

Vertical bands in the musculature of a ropey nature with overlying bands of a rubbery nature: C2-C7

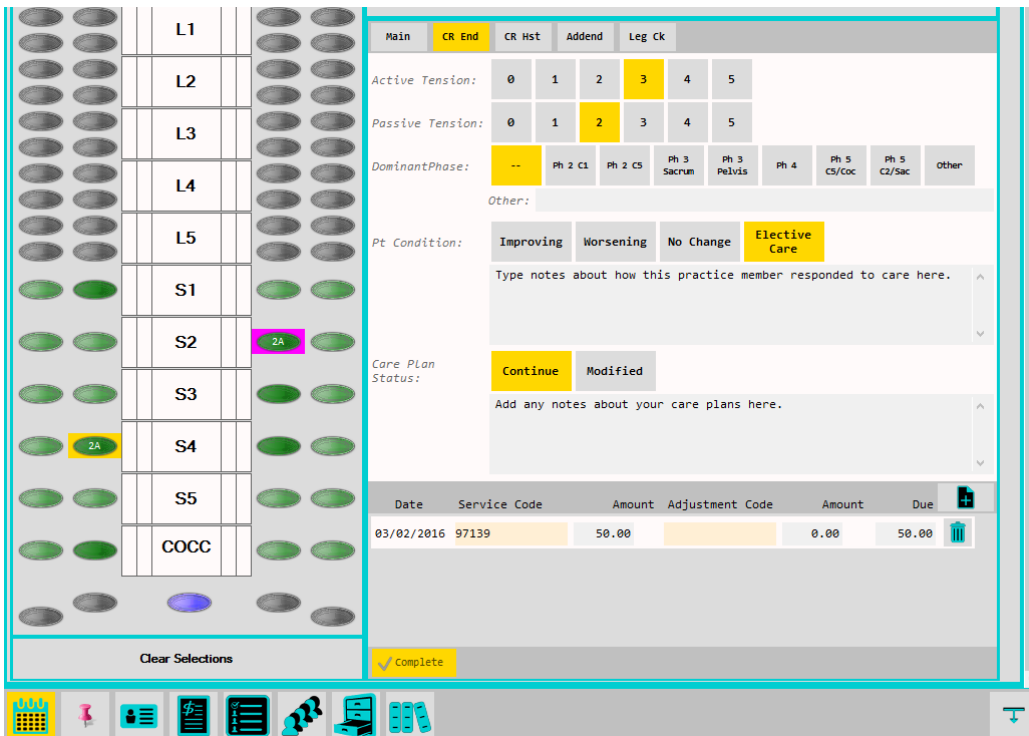
Swelling present: C2-C7

Spine

3/5 passive tension: C2-C7

Intersegmental misalignment to the left: C2-C7

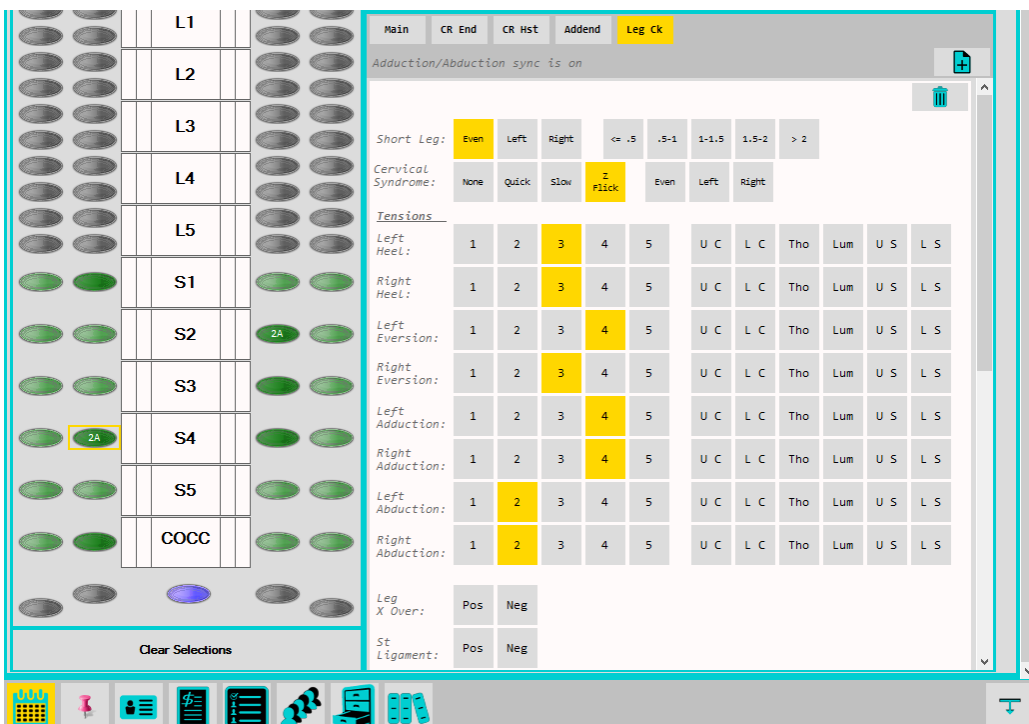
Swelling present: C2 - C7




The Care End Tab is where you record the practice member's response to care, the dominant phase of spinal cord tension that was presenting on that day, comments about conditions and care plans.

The service codes that appear on this screen will automatically be added to your practice member's accounting ledger once this tab is opened.

You can make changes to service charges here or in the accounting screen.

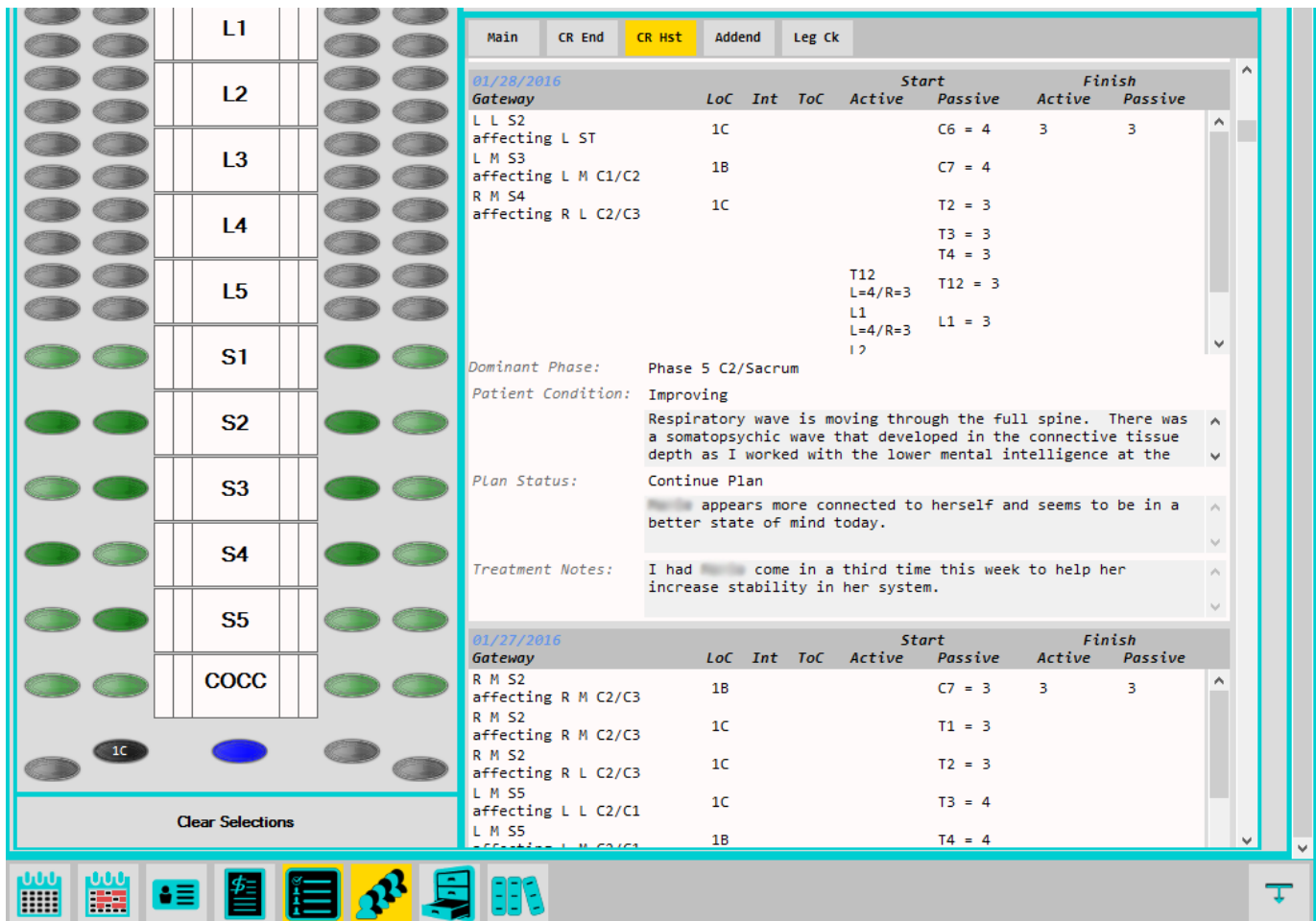


The Leg Check panel is where you record the neural control parameters from your leg checks.

The  button will add a new leg check. You can add as many leg checks as you want and make any changes you need to each leg check.

The 1st and last leg checks are included in the SOAP notes.

The Care History Screen



01/28/2016

Gateway	LoC	Int	ToC	Active	Start Passive	Finish Active	Finish Passive
L L S2 affecting L ST	1C				C6 = 4	3	3
L M S3 affecting L M C1/C2	1B				C7 = 4		
R M S4 affecting R L C2/C3	1C				T2 = 3		
					T3 = 3		
					T4 = 3		
					T12 = 3		
					L1 = 3		
					L2 = 3		

01/27/2016

Gateway	LoC	Int	ToC	Active	Start Passive	Finish Active	Finish Passive
R M S2 affecting R M C2/C3	1B				C7 = 3	3	3
R M S2 affecting R M C2/C3	1C				T1 = 3		
R M S2 affecting R L C2/C3	1C				T2 = 3		
L M S5 affecting L L C2/C1	1C				T3 = 4		
L M S5 affecting L M C2/C3	1B				T4 = 4		

01/28/2016

Dominant Phase: Phase 5 C2/Sacrum

Patient Condition: Improving

Plan Status: Continue Plan

Treatment Notes: I had [redacted] come in a third time this week to help her increase stability in her system.

This tab helps you to quickly review previous visits without needing to load each previous appointment.

Gateway contacts are displayed in an abbreviated form. In this example, there were three level one contacts made on 01/28/2016.


- Left lateral S2 gateway was contacted, affecting the left sacrotuberous ligament gateway
- Left medial S3 gateway was contacted, affecting the left medial C1/C2 gateway
- Right medial S4 gateway was contacted, affecting the right lateral C2/C3 gateway.

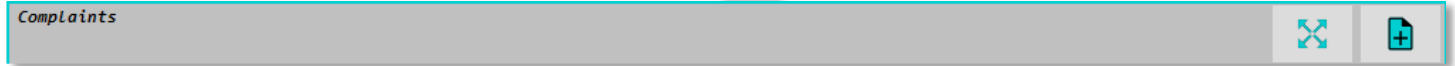
There were no integration or triad of change strategies recorded on this visit. The active and passive tension that was recorded during the visit is displayed in order from occiput to coccyx.



The CR History Screen has been redesigned in release 1.1.18 to use the same formatting as the SOAP notes. The new panel will load 5 visits at a time with arrows at the top right to navigate to the next 5 visits. The most recent visits are displayed first.

Complaints (page 1 of 3)

Like appointments, diagnoses, care plans, and exams, the complaints are specific to the patient/practice member's **Care Episode** you are currently working in. Different **care episodes** can contain different complaints and complaint record details.

To create a new complaint, press the add complaint button  on the main complaint header.




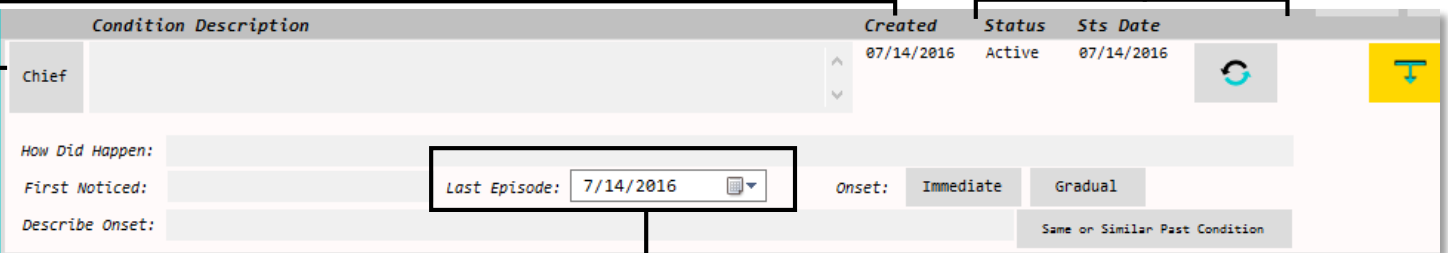
Complaints  

A new complaint record will be created.

The **complaint record header** will appear on every SOAP note that contains this complaint

The *created date* shows when this complaint was created in the H²D Software System.

You may **change the complaint status** from *Active* to *Resolved*, *MMI (maximum medical improvement)*, or *Deleted* by pressing the change status button.  The status date will reflect when you have changed the complaint status. *Deleted complaint records will not appear on any SOAP notes.*





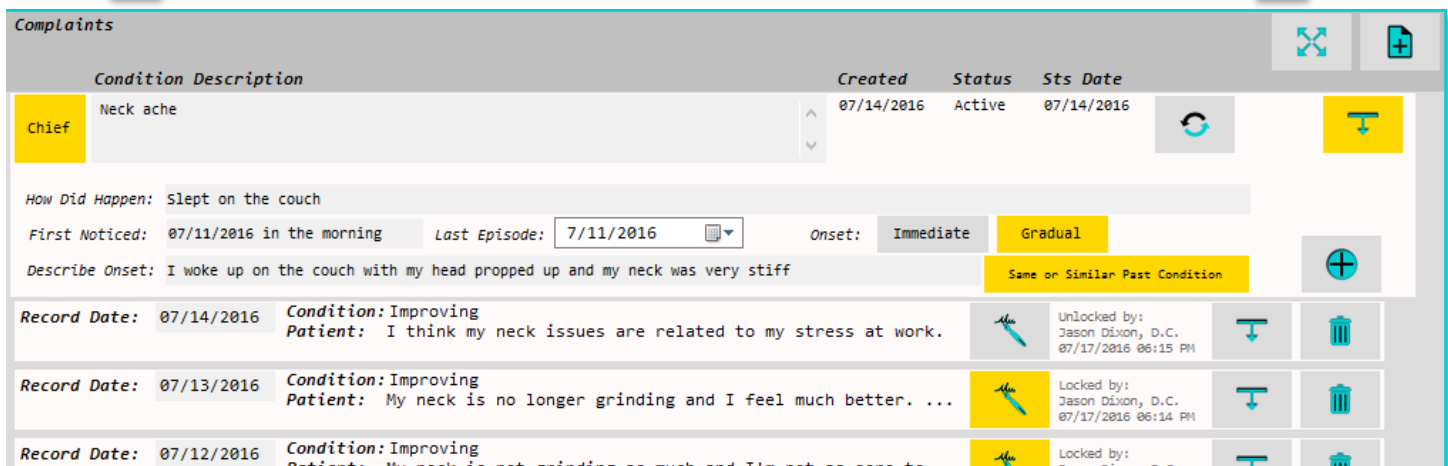
Condition Description	Created	Status	Sts Date
Chief	07/14/2016	Active	07/14/2016

How Did Happen:
 First Noticed:
 Describe Onset:
 Last Episode: 7/14/2016
 Onset: Immediate Gradual
 Same or Similar Past Condition

The last episode defaults to the current day but needs to be changed to reflect the actual date of the last flare up or onset of this complaint.

Press the *Chief* button to indicate this is the chief complaint. The chief complaint will then be highlighted in gold.


When reviewing and updating complaint records on subsequent visits, the default view shows only the complaint header as seen above. Expand the complaint to see all associated complaint record details by pressing the expand button.  To expand the complaint panel so it fills the entire screen, press the expand panel button. 



Condition Description	Created	Status	Sts Date
Chief Neck ache	07/14/2016	Active	07/14/2016


How Did Happen: Slept on the couch
 First Noticed: 07/11/2016 in the morning Last Episode: 7/11/2016 Onset: Immediate Gradual
 Describe Onset: I woke up on the couch with my head propped up and my neck was very stiff
 Same or Similar Past Condition

Record Date	Condition	Patient	Status	Locked by
07/14/2016	Improving	I think my neck issues are related to my stress at work.	Unlocked	Jason Dixon, D.C. 07/17/2016 06:15 PM
07/13/2016	Improving	My neck is no longer grinding and I feel much better. ...	Locked	Jason Dixon, D.C. 07/17/2016 06:14 PM
07/12/2016	Improving	My neck is not grinding as much and I'm not as sore to	Locked	Jason Dixon, D.C.


Once expanded, you will see an abbreviated form of all associated *complaint record details* for this complaint. If the record is not signed and locked, you may change the *record date*, updated details, or delete the record. When the *record date* matches an appointment date, the complaint details will appear on the SOAP notes for that date. Open the details by pressing the expand button. 

Complaints (page 2 of 3)



Complaint record details will only appear on SOAP notes when the record date and the appointment dates match. Currently, the SOAP notes may only be opened and printed from the NSA Care record. In a future release of the software, there will be multiple appointment types possible and the SOAP note will be available outside of the care record screen.

To add a new complaint record detail, press the new record detail button.  The new record will begin as an exact copy of the previous complaint record details for quick updates on subsequent visits.

Record Date: 07/14/2016



Unlocked by:
Jason Dixon, D.C.
07/17/2016 06:15 PM

Patient's Visit Statement

I think my neck issues are related to my stress at work.

Doctor's Notes

Condition Progress

Worsening
Improving
Unchanged

Symptoms Location

Left side of neck

Symptoms Spread
Where: into left side of head and shoulder

Symptoms Frequency

Constant
Frequent
Often
Seldom

Symptoms Intensity

Severe
Moderate
Mild
No Pain
Pain Is:

Deep
Superficial

Rate Symptoms

(None)
0
1
2
3
4
5
6
7
8
9
10
(Severe)

Pain Character

Dull
Sharp
Burning
Aching
Knife-like
Throbbing
Other
Pulling

Other Symptoms

Pins/Needles
Tingling
Numbness
Twitching
Cramping

Describe: Left SOT mm. spasm

Provokes or Aggravates Condition

Red = provokes, Yellow = aggravates

Sitting
Mins:
Standing
Walking
Lying
Pushing
Pulling
Lifting
Lbs:
Twisting
Climbing

Gripping
Hot
Cold
Coughing
Sneezing
Bowel Mvmt
Mental Actvy
Bright Light
Reaching Above

Other

Alleviates Pain

Lying
Sitting
Walking
Standing
Rest
Heat
Cold

Medication

Other
Holding neck with my hand

Condition Throughout Day

Red = worse, Green = better

Morning
Night
Wakes From Sleep

Condition Inteferes With

Work
Sleep
Daily

Condition Prevented Activities

Turning head to the left

Other Doctors

None

Other Information About Complaint

For the “wakes from sleep” option, red will indicate the complaint wakes them from sleep while green will indicate the complaint does not wake them from sleep.

Any options left blank or unselected will not be included on the SOAP notes. See an example of the complaint section of the SOAP note generated from this example on the next page.



Complaints (page 3 of 3)

Example of SOAP note generated from the example seen on page 2.

SOAP Note

Care Date: 07/14/2016

Seen By: Jason A Dixon, D.C. NPI:

Patient Name: Jolly Rogers A/N: 70086

Chart ID: 1046

DOB: 08/17/1973 Gender: Male

SUBJECTIVE

Presents with a chief complaint of 'Neck ache

How it happened: 'Slept on the couch'

First noticed: '07/11/2016 in the morning'

Last Episode: 07/11/2016

Onset: Gradual - 'I woke up on the couch with my head propped up and my neck was very stiff'

Same Condition In Past: Patient confirms experiencing this condition in the past.

Complaint Details:

Patient Visit Comments: 'I think my neck issues are related to my stress at work.'

Condition Progress: Improving

Symptoms Location: 'Left side of neck' and spreads to 'into left side of head and shoulder'

Symptoms Frequency: Constant

Symptoms Intensity: Moderate

Symptoms Quality: Deep, Dull, Aching, 'Pulling'

Symptoms Rating: 6 out of 10; 10 being the worst imaginable.

Related symptoms: Twitching, 'Left SOT mm. spasm'

Provoked by: Lying, Reaching above shoulder

Aggravated by: Twisting, Coughing, Sneezing

Alleviated by: Rest, Heat, Other-'Holding neck with my hand'

Condition throughout day: Worse in the morning, Wakes from sleep

Condition Interferences: Work, Daily routine

Condition Prevents: 'Turning head to the left'

Other Doctors: 'None'

Diagnosis Panel (page 1 of 6)

IMPORTANT NOTE

The H2D Software System comes preloaded with many commonly used ICD10 diagnosis codes. All ICD10 data came from www.icd10data.com and was compared to the code lists available from CMS.gov for accuracy. The code lists available in the H2D Software System should not be considered complete and every doctor is ultimately responsible for their use of diagnosis codes and the associated descriptions. H2D Software, LLC is not responsible for the use and maintenance of diagnosis codes and this tutorial is in no way attempting to train you in proper diagnosing procedures. Please refer to your state board and state department of insurance regulations for any specific diagnosing regulations you may be subject to.










Even with the expanded lists of codes available in ICD10, there are still codes with multiple descriptions that change your intended use of the code. Example: R51 is the ICD10 code for "Headache" but can also be used when diagnosing "Facial pain NOS." The descriptions we have included are for the most common use of the codes. Additional descriptions may be added by creating new codes with the desired description. You may also change the existing descriptions that we have preloaded to suite your diagnosing preferences.

We have not included mechanism of injury or external causes of morbidity codes. You may create and change the preloaded lists to match your coding needs.

We will be updating diagnosis code list management in a future release of the software. This manual will be updated when such changes are introduced.

You will see the diagnosis panel on the main Patient Summary Screen (main screen that loads when you activate an appointment). In order to apply a diagnosis code to a patient file, you must have an active Care Episode selected to attach it to.

If you have already applied a diagnosis to a patient's Care Episode, you will see the diagnosis codes in the panel as seen below. To add a diagnosis to a Care Episode, press the  button next to any code.

Diagnoses								
Seq	ICD Code	ICD Description	Dx Date	Created	Resolved			
1	M99.01	Segmental and somatic dysfunction, cervical spine	01/10/2016	03/02/2016	✓			
2	M62.830	Muscle spasms of the back	01/10/2016	03/02/2016	✓			
3	G44.229	Tension headache, chronic, not intractable	01/10/2016	03/02/2016	✓			

From this panel you can change the diagnosis date, resolve the diagnosis, delete the diagnosis, or change the diagnosis order. Keep in mind, the order in which you list your codes is important. *It is generally recommended to list diagnosis codes by their level of importance or severity. If you are coding for a Medicare patient, the order will need to follow Medicare guidelines. Such training is outside the scope of our support.*

Diagnosis Panel (page 2 of 6)

To add Dx. codes to the currently selected Care Episode, press the “Show Dx Selection Panel” button

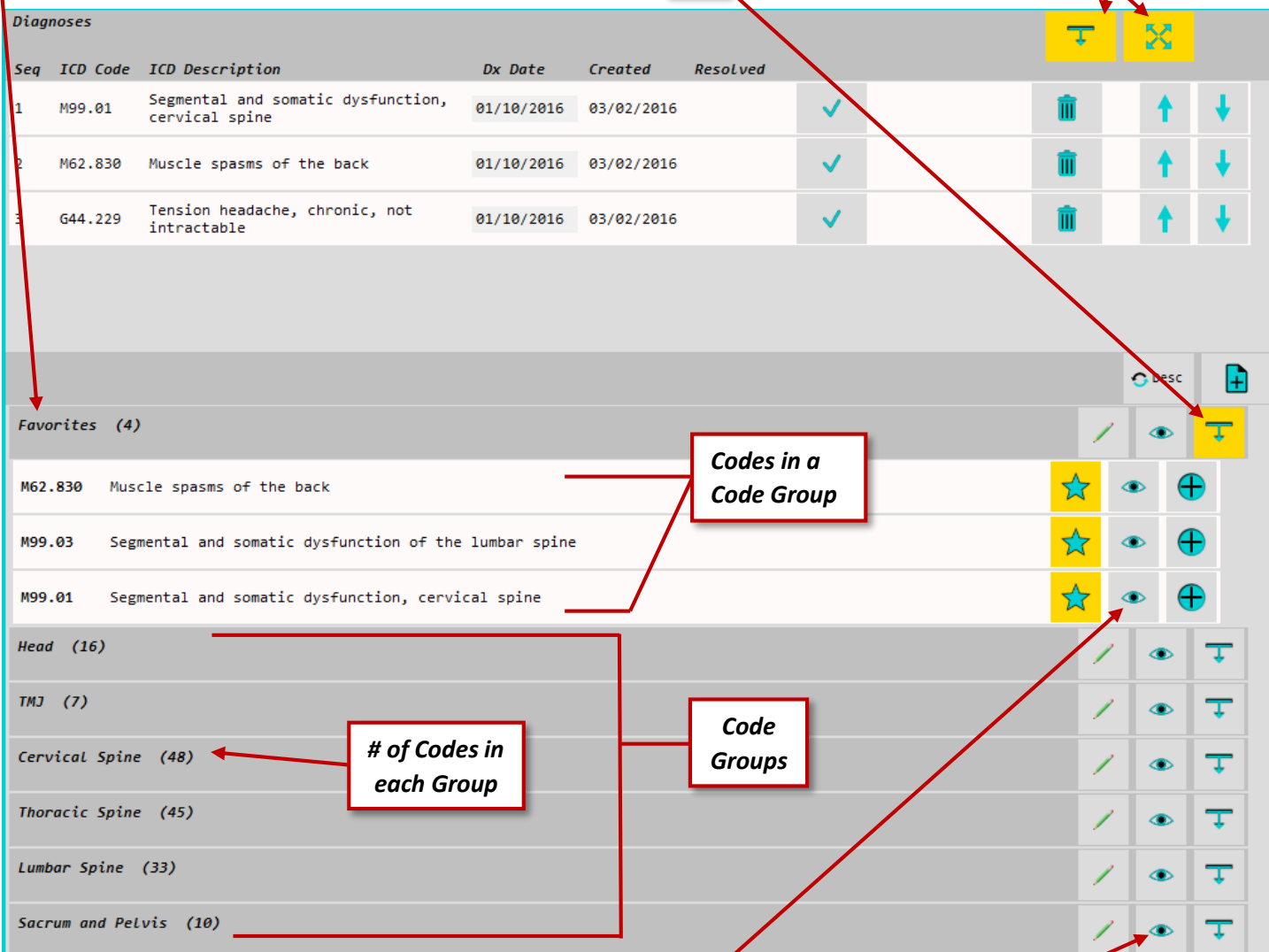


To fill the screen with the diagnosis panel, press the “Enlarge Diagnosis Panel” button



When the Dx. Panel is opened, your “Favorites” Code Group will be expanded by default.

To expand other sections, press the “Expand Group” button

The screenshot shows the Diagnosis Panel interface. At the top, there is a table of diagnoses with columns: Seq, ICD Code, ICD Description, Dx Date, Created, Resolved, and a status column. Below this table, there are sections for Favorites, Head, TMJ, Cervical Spine, Thoracic Spine, Lumbar Spine, and Sacrum and Pelvis. Each section has a header with the number of codes in the group. Annotations point to various UI elements: a yellow button with a downward arrow (Show Dx Selection Panel), a yellow button with a square and X (Enlarge Diagnosis Panel), a yellow button with a downward arrow (Expand Group), a yellow star icon (Codes in a Code Group), and a yellow eye icon (Code Groups).

Seq	ICD Code	ICD Description	Dx Date	Created	Resolved
1	M99.01	Segmental and somatic dysfunction, cervical spine	01/10/2016	03/02/2016	✓
2	M62.830	Muscle spasms of the back	01/10/2016	03/02/2016	✓
3	G44.229	Tension headache, chronic, not intractable	01/10/2016	03/02/2016	✓

Favorites (4)

M62.830	Muscle spasms of the back
M99.03	Segmental and somatic dysfunction of the lumbar spine
M99.01	Segmental and somatic dysfunction, cervical spine

Head (16)

TMJ (7)

Cervical Spine (48)


Thoracic Spine (45)

Lumbar Spine (33)

Sacrum and Pelvis (10)

Codes may be hidden from view by pressing  for any code.

In order to reveal hidden codes, press  on the diagnosis Code Group header.

Code groups will open and reveal a maximum of 10 codes with a scrolling bar on the right side to view additional codes in the group. If several codes are hidden from view leaving fewer than 10 codes to view when a group is opened, pressing the  does not resize the list for you at this time. We will address this in a future release. If you run into a list sizing issue due to this, reveal some of the hidden codes and the next screen refresh will accommodate the larger list of codes.

Diagnosis Panel (page 3 of 6)

Add a diagnosis to your patient's current Care Episode by pressing the



Favorites (5)				
R51	Headache			
M62.830	Muscle spasms of the back			
M99.00	Segmental and somatic dysfunction of head or occiput			
M99.03	Segmental and somatic dysfunction of the lumbar spine			
M99.01	Segmental and somatic dysfunction, cervical spine			
Head (16)				
R42	Dizziness and giddiness			
R51	Headache			
G43.001	Migraine headache, w/o aura, not intractable, status migrainosus			
G43.009	Migraine headache, w/o aura, not intractable, w/o status migrainosus			

To add a code to your "Favorites" group, simply press the



Codes that are already in Favorites will be gold.

****IMPORTANT NOTE****


There are currently a couple of minor issues when removing codes from the Favorites Group. If you have added a code to Favorites by accident and you would like to remove it, you may click the gold star in either the Favorites Group or the original group. If the code has previously been used in a diagnosis from the original group, you will be unable to remove the code from Favorites by pressing the star in the original group so you will need to press the star in the Favorites group. If a code has been used in a diagnosis from the Favorites group, it may not be removed. If you no longer wish to see that code in the Favorites group, press the "Hide" button instead.


If a gold star is pressed in the Favorites Group and the group does not refresh to remove the code immediately, do not do anything with the code that still appears to be in the group. It is an artifact and interaction with the code may result in an error. The next time the code groups are refreshed, the artifact of the code will no longer be present.












We will not be addressing this minor issue until we redesign the diagnosis panel so we may remain focused on adding new functionality to the H2D Software System. If you ever encounter any issues or have difficulty with a software feature, please contact us. Thank you for your understanding.



In the next section we will cover editing codes and code groups. At this time, please do not "delete" codes from the Favorites group in the edit menu, instead use the panel as seen above and either hide or remove the code.










Diagnosis Panel (page 4 of 6)

Create a new Code Group by pressing the  button.

You can sort your code lists by "Description" or by "Code" by pressing the  button.

Diagnoses						 	
Seq	ICD Code	ICD Description	Dx Date	Created	Resolved		
1	M99.01	Segmental and somatic dysfunction, cervical spine	01/10/2016	03/02/2016	✓		 
2	M62.830	Muscle spasms of the back	01/10/2016	03/02/2016	✓		 
3	G44.229	Tension headache, chronic, not intractable	01/10/2016	03/02/2016	✓		 



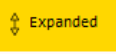


Favorites (4)						  	
M62.830	Muscle spasms of the back						
M99.03	Segmental and somatic dysfunction of the lumbar spine						

To edit an existing code group, press the edit button. 


Creating a New Code Group

Naming your New Code Group.

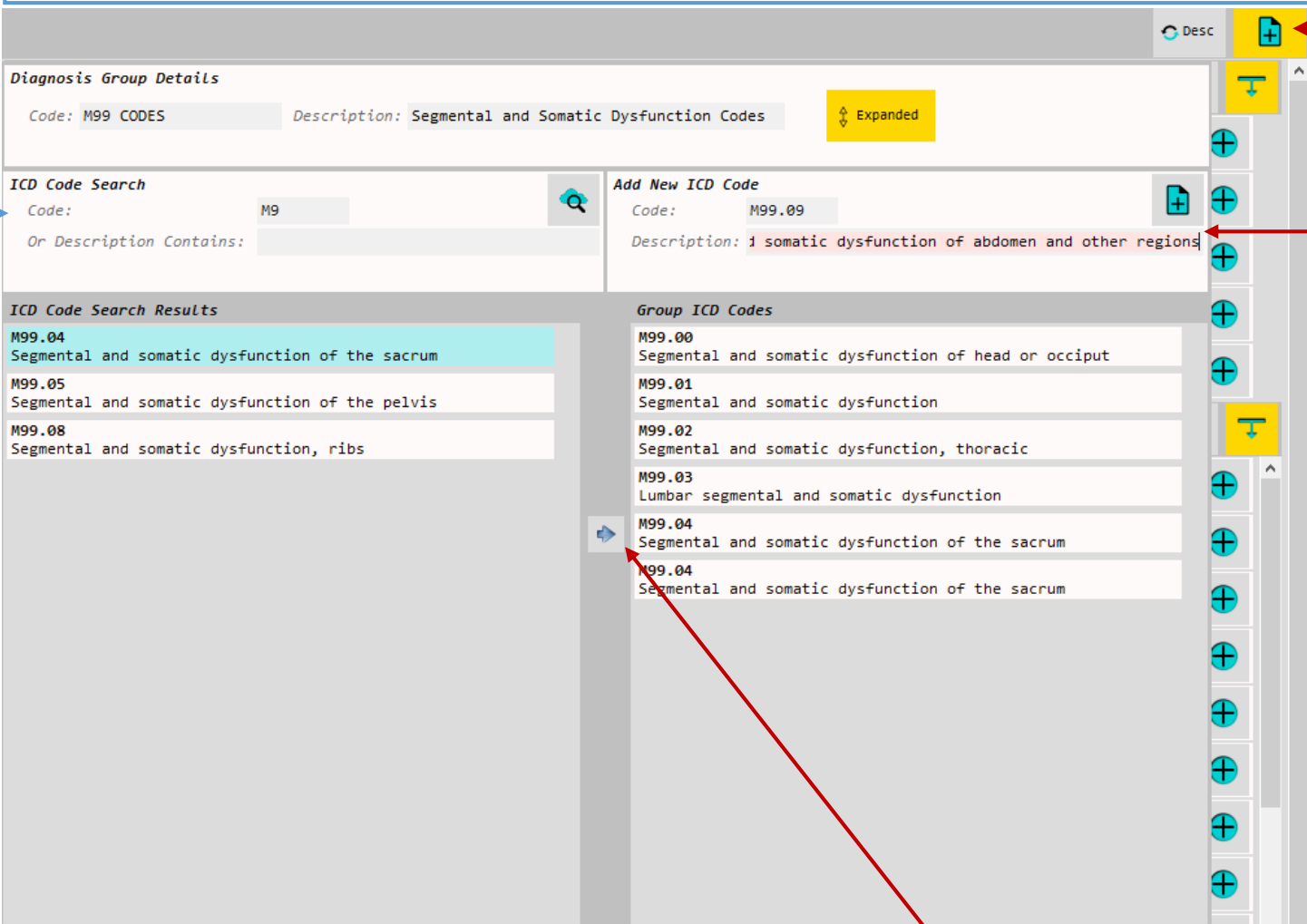
- The "Code:" serves as a row identifier in the database and will not be visible to you except when editing the group.
- The "Description:" will appear as the Code Group Heading.
- The "Expand" button is selected by default with new groups. When you open the Dx. Panel, this list will already be expanded. Press the button to turn this off.

			
Diagnosis Group Details			
Code: M99 CODES	Description: Segmental and Somatic Dysfunction Codes		
ICD Code Search Code: <input type="text" value="M9"/>  Or Description Contains: <input type="text"/>		Add New ICD Code Code: <input type="text" value="M99.09"/>  Description: <input type="text" value="1 somatic dysfunction of abdomen and other regions"/>	
ICD Code Search Results M99.04 Segmental and somatic dysfunction of the sacrum M99.05 Segmental and somatic dysfunction of the pelvis		Group ICD Codes M99.00 Segmental and somatic dysfunction of head or occiput M99.01 Segmental and somatic dysfunction	


Diagnosis Panel (page 5 of 6) - Create a New Code Group (continued)

There are two ways to add codes to your new code group. You can search for existing codes from other code groups in the ICD Code Search or you can Add a New ICD Code. When you are finished, press the .

*****IMPORTANT NOTE***** The Search results only return a maximum of 100 items. The software currently has an error if your search brings back more than 100 codes. Until we redesign the diagnosis panel, refine your searches as much as you can to limit the number of items found. (Example, searching for “M” is causing an error but searching for “M9” is returning fewer than 100 results so there is no error.)




The screenshot shows the 'Diagnosis Group Details' section with 'Code: M99 CODES' and 'Description: Segmental and Somatic Dysfunction Codes'. Below this is the 'ICD Code Search' section with 'Code: M9' and 'Or Description Contains:'. To the right is the 'Add New ICD Code' section with 'Code: M99.09' and 'Description: 1 somatic dysfunction of abdomen and other regions'. Below these are two lists: 'ICD Code Search Results' on the left and 'Group ICD Codes' on the right. The 'ICD Code Search Results' list includes M99.04, M99.05, and M99.08. The 'Group ICD Codes' list includes M99.00, M99.01, M99.02, M99.03, and two instances of M99.04. A red arrow points from the 'Add icon' in the top right to the 'Add icon' in the 'Add New ICD Code' section. Another red arrow points from the 'Add icon' in the 'Add New ICD Code' section to the 'Add icon' in the 'Group ICD Codes' list. A blue arrow points from the 'Add icon' in the 'Add New ICD Code' section to the 'Add icon' in the 'ICD Code Search Results' list.

To add an existing code to your new group, select it in the list on the left and press the .

In this example, the six codes on the right were already added from the list on the left.

Notice there are more than one of the “M99.04” code found from the search results, two of which were already added to the new group. If the same code exists in multiple groups, it will return in your search result as many times as it exists in the database. You cannot remove codes from the new group until you finish creating it. (See editing code groups)

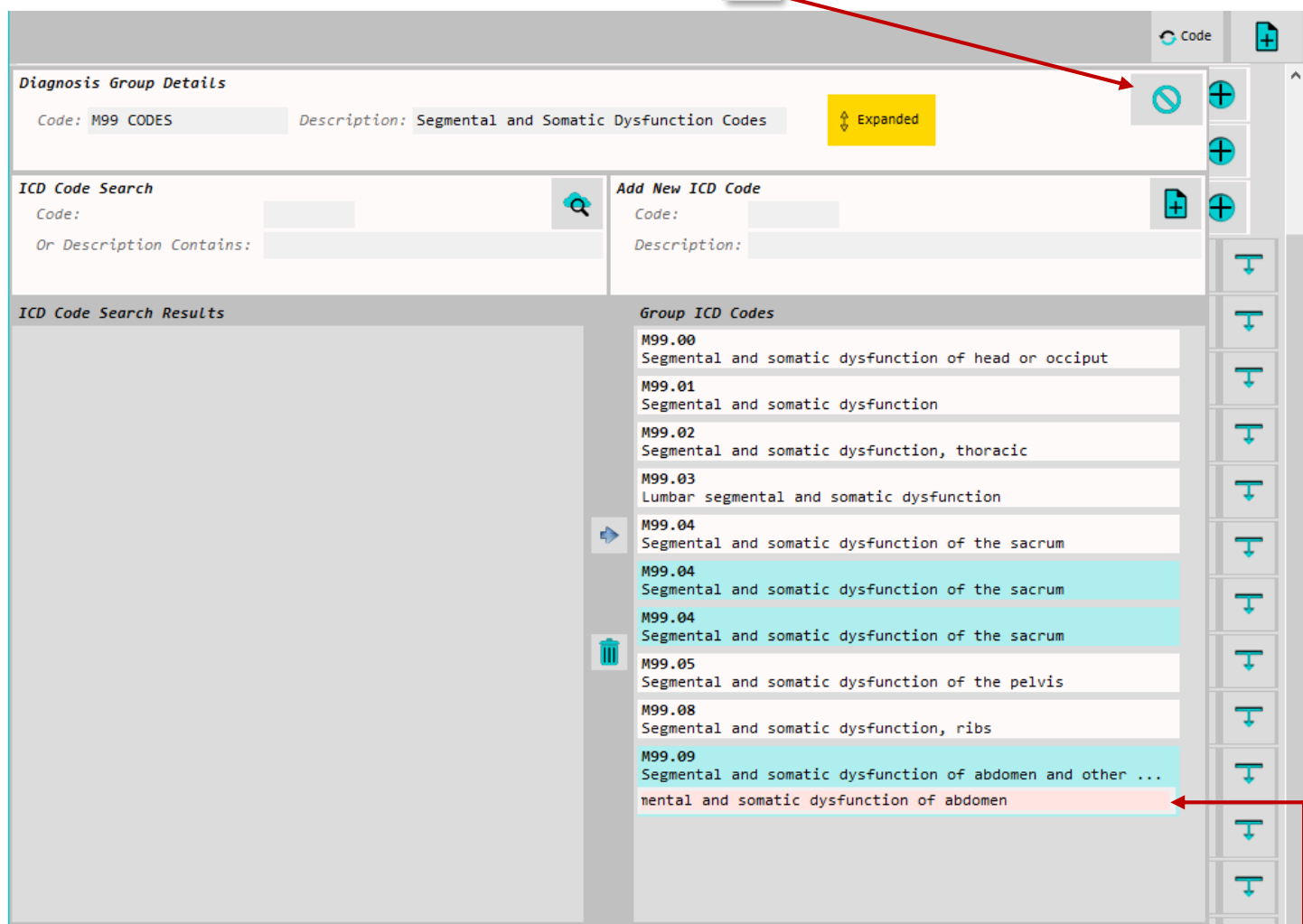
To add a new code, type the new code and description in the “Add New ICD Code” area and press the .

Diagnosis Panel (page 6 of 6)

Editing Code Groups and Code Descriptions

To edit a Code Group, press the  button on the Code Group header.

When you are finished making changes, press the “Close” button. 



Diagnosis Group Details

Code: M99 CODES Description: Segmental and Somatic Dysfunction Codes Expanded

ICD Code Search

Code: Or Description Contains:

Add New ICD Code


Code: Description:

ICD Code Search Results

Group ICD Codes

- M99.00 Segmental and somatic dysfunction of head or occiput
- M99.01 Segmental and somatic dysfunction
- M99.02 Segmental and somatic dysfunction, thoracic
- M99.03 Lumbar segmental and somatic dysfunction
- M99.04 Segmental and somatic dysfunction of the sacrum
- M99.04 Segmental and somatic dysfunction of the sacrum
- M99.04 Segmental and somatic dysfunction of the sacrum
- M99.05 Segmental and somatic dysfunction of the pelvis
- M99.08 Segmental and somatic dysfunction, ribs
- M99.09 Segmental and somatic dysfunction of abdomen and other ...
- mental and somatic dysfunction of abdomen

You can search for codes and add new codes in the same way you do when creating a new Code Group.

In the edit menu, you may also delete codes from the code list. Delete codes by selecting the code you wish to delete and pressing the .

You can change the description of a code by “right clicking” on the code. The line of text that appears below the code you “right clicked” on is where you will make any changes. Press “Tab” or “Enter” or close the Code Group Edit screen to save your changes. The edit text line will remain open until you right click the code again or until you close the Code Group Edit screen.

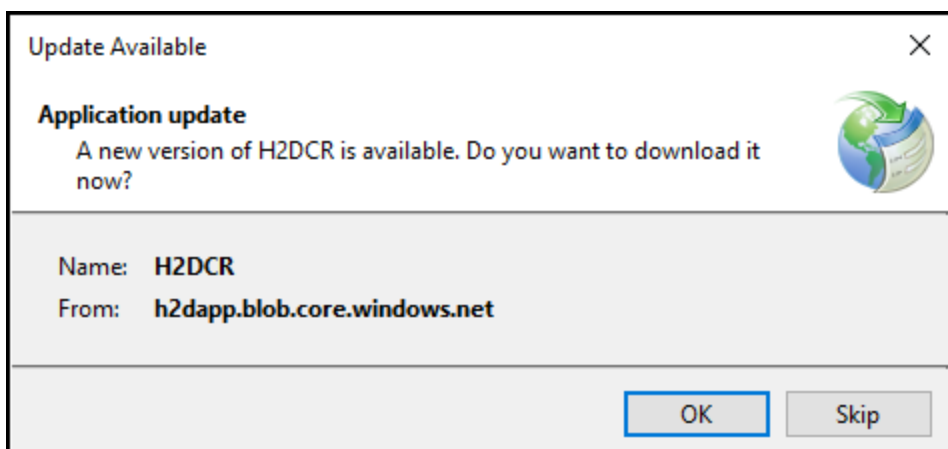
Note: When you right click on a code, the code is highlighted in the same color as the selected codes. It is not actually selected so it cannot be deleted unless you have also “left” clicked on the code. We will address this in our redesign.

Accepting Updates for the H2D Software System

You will periodically see a prompt to update your software when you open H2DCR or H2DFD while connected to the internet. We publish new releases for the software system with new features and enhancements to the software, fine tuning of software performance, and corrections of any bugs discovered.

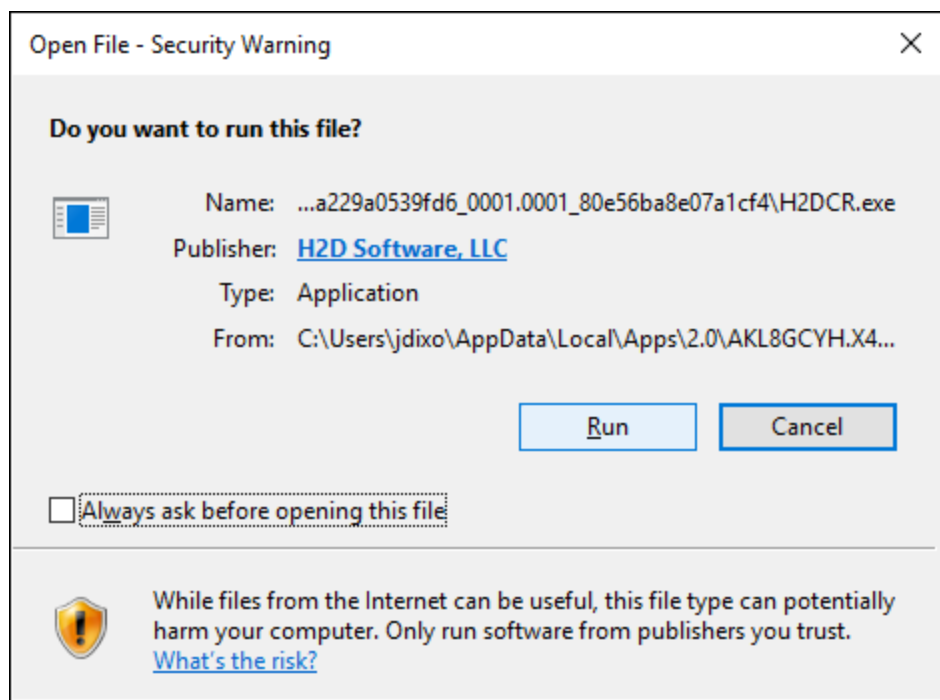
When we add new features that will change the way you interact with the software, you will receive an e-mail notifying you of any changes you should be aware of.

When you load the software and a new release is available, you will see this screen appear:



Press or click "OK" to receive the updates.

Due to security protocols in Windows, you may see a screen pop up asking if you are sure you want to make changes to your system, or "Do you want to run this file?" Accept the changes and run the file to receive the updates for the H2D Software System. Example:



In this example, you would click "Run" to open the software.

As always, if you have any questions about H2D Software, please contact us.

H²D Software, LLC
Kelly.Howard@h2dsoftware.com
Jason.Dixon@h2dsoftware.com
www.h2dsoftware.com

Backing Up Your Database

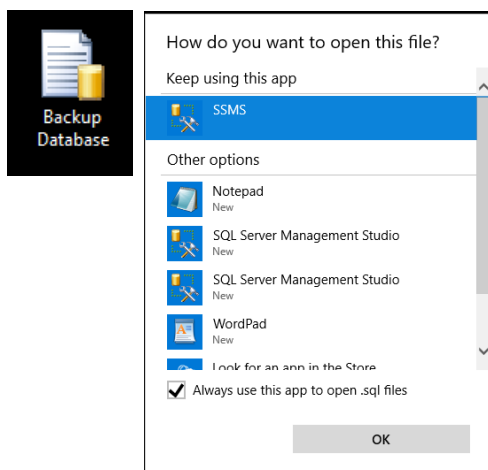
If you are new to using electronic health records, this may be a new concept to you. It is important to back up all electronic records with some sort of offsite backup device or service. There are many HIPAA compliant services available to have your data automatically backed up onto a cloud server.

Another method of backing up data is to use an external hard drive or flash drive. If you use an external hard drive, we recommend using a solid state drive since they are more resistant to damage with travel.

Your H2D Software Database does not automatically back up at this time. We have set you up with a shortcut to back up your data. Here is an overview of the simple backup process.

Using the shortcut we provided:

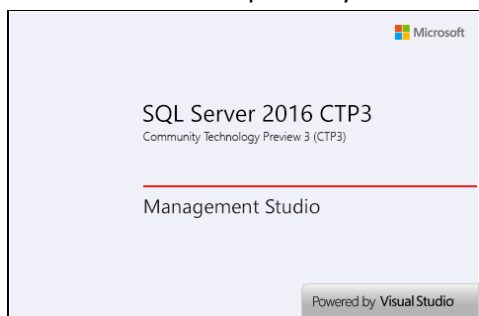
Open the “Backup Database” sql script on your server’s desktop (the main windows screen).



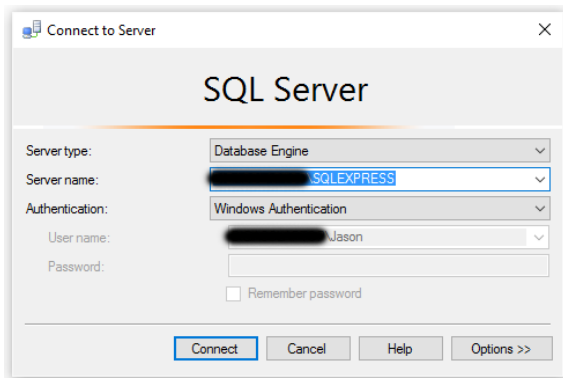
If asked how you would like to open this file, use SSMS (SQL Server Management Studio)

Select “Always use this app to open .sql files” and you should not be asked this in the future.

SSMS 2016 should open for you.



You will need to click “Connect” two times to log in to SSMS.

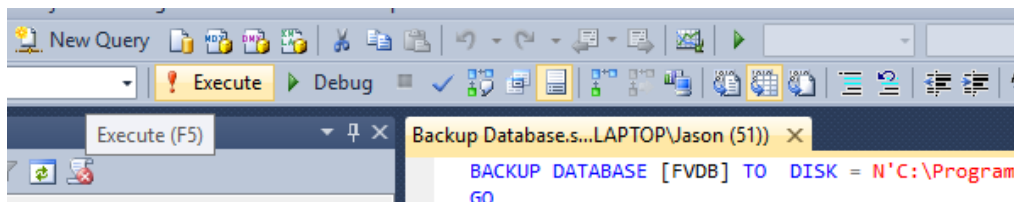


(Continued on the next page)

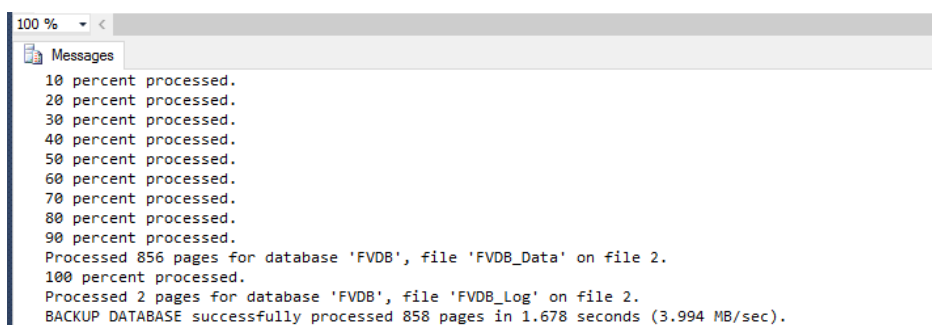
Backing Up Your Database (Continued)

Click on the screen in the large, middle section of SSMS and it will highlight the border in yellow meaning it is selected.

Then click “Execute” or press “F5” on your keyboard to run the database backup script.



Once you see this on the bottom of the middle screen, you have successfully backed up your database on the server.



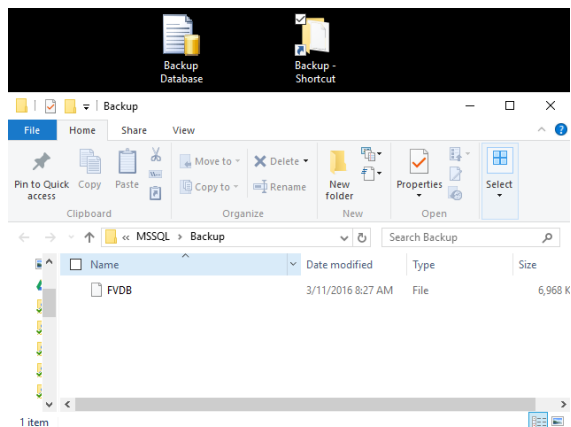
Close SSMS and repeat the steps above as often as you would like to back up your data. We recommend backing up your database at the end of each business day.

IMPORTANT NOTE

SSMS allows you to access your database at any time. Do not make any changes to your data tables, views, etc. as changes will likely cause your software to function incorrectly and may result in the loss of data. If you need help with your data for any reason, contact H2D Software. If you make changes directly to your database that require tech support to correct your mistakes, you will be charged for the time it takes us to make repairs, if repairs are possible.

You will need to back up your database backup file with your external hard drive or backup service.

We have provided a shortcut to the backup file on your desktop.



FVDB.bak is the file you will want to back up with your offsite backup service/device.

In case you lose your shortcut icon, the default location of the file is:

C:\Program Files\Microsoft SQL
Server\MSSQL11.SQLEXPRESS\MSSQL\Backup