

#### Exciting News - Praxis in C# Is Here!

Important: Before we proceed, please note that it is crucial for the Medical Officer to access the initial password window and enter into the User application. Once the Medical Officer has done this, everyone in the clinic can follow suit. This initial step is essential to prevent any unnecessary surprises or confusion among your staff when they access our new Praxis for the first time. By having the Medical Officer explore the system first, you can proactively alert and reassure your staff, minimizing the likelihood of them all contacting our support team simultaneously.

Be assured that all of your existing data, including patient records and your personal knowledge base, will be seamlessly upgraded to the new version, ensuring a smooth transition devoid of any unforeseen issues. While this version boasts several enhancements and an updated "look and feel," you can have confidence that Praxis will continue to operate in a manner similar to your current experience.

Dear Valued Clients,

We are thrilled to announce the highly-anticipated release of Praxis in C#!

After four years of dedicated software development, and following six months of extensive beta testing with our wonderful group of providers, Praxis in C# will be available to all clients starting next week. This release will be rolled out on a first-come-first-serve basis. To get started, please contact our support team via online chat at your earliest convenience and simply write "Upgrade me!". Your Praxis in C# will magically appear in the order received.

Praxis in C# represents a significant upgrade of which we are exceptionally proud, and we are confident that you will be delighted to have it as part of your practice.

In this newsletter, we first highlight the major improvements and changes in the user interface so that you can seamlessly transition to the new Praxis without the need for extensive retraining. Your existing knowledge of Praxis will serve you well in navigating the enhanced version. Later in this newsletter, for those who are interested, we will delve into the reasons why Praxis in C# is poised to revolutionize the field of medicine. As you will discover, Praxis C# is a game-changer for our wonderful profession.

NOTE: In case you misplace it, a copy of this document will be placed in the Support Window as usual:

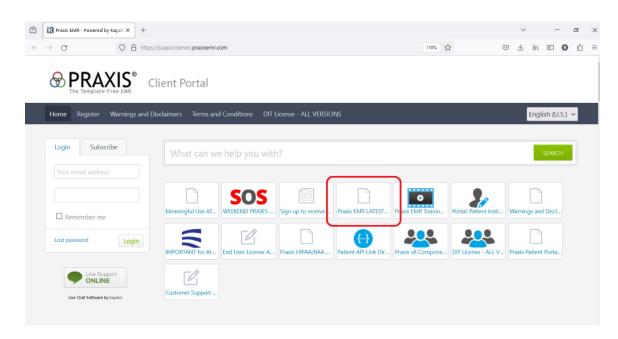


Figure 1. Remember that this important Newsletter is always one click away in your Client Portal.

#### A Minor Delay When Opening the SOAP Note for the First Time Each Day

The initial opening of the SOAP Note by the clinic's first provider in the morning may experience a brief delay of approximately 45 seconds. Subsequently, accessing the SOAP Note for all other patients throughout the day will be nearly instantaneous. This delay appears to be related to the way the operating system allocates memory resources in the server when the program is first launched in the morning. Rest assured that our team is actively addressing this minor inconvenience for a swift resolution.

Now, let's delve into the remarkable improvements and changes you will experience with Praxis in C#:

# First, the Improvements

The most immediate and noticeable improvement is the dramatic increase in speed and stability with our new Praxis in C#. This holds true regardless of the size of your clinic or the number of records you possess. The boost in performance is attributed to the underlying C# technology, which

will not only enhance your Praxis experience but also have a profound impact on the practice of medicine, as you will see. We will explore this further in the second part of this newsletter.

Praxis has always been designed to be more than just a rapid charting tool. It serves as a powerful medical tool that, when used as intended, simplifies and enhances your practice of medicine. Praxis becomes an extension of your mind, not only in its lightning-fast charting capabilities but also in its ability to assist you in managing various aspects of your practice efficiently. In essence, Praxis allows you to delegate routine tasks to the software, freeing you to focus on the creative and intellectual aspects of our profession—the parts of medicine we love the most. Computers excel at handling repetitive tasks, while you can devote more time to patient care and creative thinking.

With this version, Praxis automatically receives upgrades approximately once a month, building on the improvements made during a short beta testing phase. These upgrades are rolled out first to our beta tester providers, followed by all our clients a month later. If you are interested in becoming a beta tester, please let us know. We closely monitor and address any issues raised by our beta testers promptly before for each upgrade.

# Changes in the Look and Feel

For this initial version of Praxis in C#, we have worked tirelessly to keep display changes minimal to avoid confusion. In addition to the near-instantaneous response time, you will notice a few immediate changes:

#### **Medical Officer Entry**

As mentioned earlier, it is essential for the Medical Officer to initiate the login process. This step ensures that your staff is not caught off guard by the new Praxis interface.

## **New Main Windows**

Clayton Reynolds, MD								- a ×
တ် Praxis							R	Clayton Reynolds, MD
🟫 Home		Database	🖅 Agents	💽 Studies	📆 Query	Medical Officer		=
							Nov	19 2023 09:40 AM
Patients Here and Waiting - Prov	vider					Pod: Default		
Imaginary, Mary Female (1515)			38 y.o.			12:10 PM (12:12 PM)	Mes	sages
Imaginary, Ruthie Female (206)			4 y.o.			12:20 PM (12:21 PM)		Regular Messages 17
Wilder, Reyna Female (91)			63 y.o.			12:25 PM (12:25 PM)	-	
Imaginary, Mary Female (M123)			39 y.o.			06:20 AM (06:24 AM)	31	Scheduler
Andrews, Jane Female (220)			33 y.o. Room 5	referral for infertility		12:00 PM (12:02 PM)	R	Fast Rx
Jones, Ricky Male (27)			14 y.o. Room 3			11:05 AM (11:06 AM)		Fast lox
Lerner, Maria Female (83)			35 y.o. Room 2	Referrered for infertility		12:20 PM (12:24 PM)	VS	Virtual Soap
cerner, mana remare (00)			33 yo. 100112	Reference to interarily		TELEVI III (TELEVI III)	0	Missing Data
							•	Missing Data
(175)					<b>O</b> Hard 10			Clipboard
Onread Messages (175)			Online users (1)		🛃 New Labs (4)		R	Chat
Order By: Status 💽	Туре	Urgent Mes	sages					Ghat
<ul> <li>Tasks To Do And Review</li> </ul>	^	DATE	SUBJECT			USER		Print
Urgent Messages							0	Settings
Charts Pending	4						1 ×	Sectings
Transcriptions Returned								
Unfinished Records Prescriptions	2							
Prescriptions Nursing Tasks To Do								
Nursing Tasks To Do Nursing Task Agents to do				Empty List				
Nursing Task Agents to do								
Returned from Nursing Tasks	13							
	13							

Meme Database Imaginary, Mary Fenale (200) O Medical Officer   Imaginary, Mary Fenale (200) 4 yo. 1210 PM (1221 PM)   Imaginary, Mary Fenale (200) 4 yo. 1220 PM (1221 PM)   Wider, Reyna Fenale (201) 63 yo. 1220 PM (1221 PM)   Mary Fenale (11) 63 yo. 1220 PM (1221 PM)   Mary Fenale (120) 43 yo. 1220 PM (1221 PM)   Mary Fenale (120) 93 yo. 0620 AM (6624 AM)   Address, Jane Fenale (200) 33 yo. 800m 5   Maria Fenale (201) 33 yo. 800m 5   Jones, Ricky Male (27) 14 yo.   Maria Fenale (23) 55 yo.   Style Room 2   Referreed for infentility 1220 PM (1222 PM)   Unread Messages (175) Imaginary, Mary Fenale (175)   Style Status   Unread Messages (175) Status   Unread Messages (175) Status   Status Status   Unread Messages (175) Status   Unread Messages (175) Status   Unread Messages (175) Status   Status Status   Unread Messages (175) Status   Status Status   Status Status   Unread Messages (175) Status   Status Status   Status Status   Unread Messages (175) Status   Status Status   Unread Messages (175)   Status Status   Status Status   Status	n Reynolds, MD							-
Water Stefes and Waiting - Provider       Tect Default         Imaginary, Mary Female (1915)       38 yo.       1210 PM (1212 PM)         Imaginary, Rutie Female (200)       4 yo.       1220 PM (1221 PM)         Wiler, Reyna Female (101)       63 yo.       1225 PM (1222 PM)         Imaginary, Mary Female (M22)       39 yo.       06 20 AM (6524 AM)         Andrews, Jane Female (201)       33 yo.       Boom 5       referal for infertility       1200 PM (1202 PM)         Jones, Richy Male (27)       14 yo.       Room 3       11055 AM (1106 AM)         Lemer, Maria Female (30)       55 yo.       Room 2       Referreed for infertility       1220 PM (1222 PM)         Unread Messages (175)       Contine users (1)       Context users (1)       Xet       New Labs (4)         Taracrytions Returned Infinished Records       2       DATE       SUBJECT       User         Luring Tasks Agents to do Juring Tasks Agents to do       2       Fmpty List       Empty List         Kender for Naming Tasks Agents to Administer       13       13       Empty List	D Praxis							R Clayton Reyno
Imaginary, Mary Female (151s) 38 yo. 1210 PM (1212 PM)   Imaginary, Ruthie Female (200) 4 yo. 1220 PM (1221 PM)   Wider, Rayna Female (17) 63 yo. 1225 FM (1225 FM)   Imaginary, Mary Female (172) 39 yo. 0620 AM (0624 AM)   Andrews, Jane Female (200) 13 yo. Room 5   andrews, Jane Female (201) 6000 N 33 yo.   Jones, Ricky Male (27) 14 yo. Room 3   Jones, Ricky Male (27) 13 yo. Room 2   Beferred for infertility 1220 PM (1222 PM)   Jones, Ricky Male (27) 13 yo. Room 2   Beferred for infertility 1220 PM (1222 PM)   Unread Messages (175) Emere, Maria Female (28) 1200 PM (1222 PM)   Unread Messages Dara Subuct users (1)	🛖 Home		🖬 Database		🖅 Agents	💽 Studies	a Query	Medical Officer
Imaginary, Mary Female (101) 38 yo. 1210 PM (1212 PM)   Imaginary, Ruthle Female (200) 4 yo. 1220 PM (1221 PM)   Wider, Rayna Female (11) 63 yo. 1225 FM (1225 FM)   Imaginary, Mary Female (112) 39 yo. 0000 N (0024 AM)   Andrews, Jane Female (202) 33 yo. Room 5 referate for infettilay   Jones, Ricky Male (27) 14 yo. Room 3 1200 PM (1222 PM)   Jones, Ricky Male (27) 14 yo. Room 3 1200 PM (1222 PM)   Jones, Ricky Male (27) 5 yo. Room 2 Referred for infettilay   Jones, Ricky Male (27) 5 yo. Room 2 Referred for infettilay   Jurnead Messages (175) Infertile users (1) Infertile users (1)   Outries Punding 4 Transcriptions Returned Jurnead Hessages   Darke Status C 120 PM (1222 PM) Infertile users (1)   Infinished Records 2 Preacriptions   Nursing Task Agents to do Nursing Task Agents to do   Nursing Task Agents to do Nursing Task Agents to do   Nursing Task Agents to do Nursing Task Agents to do   Nursing Task Agents to do Task Stripting Task Agents to do   Nursing Task Agents to do Task Agents to do   Nursing Task Agents to do Task Stripting Task Agents to do   Nursing Task Agents to do Task Stripting Task Agents to do   Nursing Task Agents to do Task Agents to do								
Imaginary Mary Female (020)     4 yo.     1200 PM (1221 PM)       Wider, Rayna Female (012)     63 yo.     1225 PM (1225 PM)       Imaginary, Mary Female (012)     99 yo.     0630 AM (6624 AM)       Andrew, Jane Female (20)     33 yo.     Room 5     referration for infertility     1200 PM (1222 PM)       Jones, Ricky Male (27)     14 yo.     Room 3     1105 AM (1060 AM)       Lerner, Maria Female (83)     5 yo.     Room 2     Referreed for infertility     1200 PM (1224 PM)       Curred Messages (175)     If on the users (1)     Imaginary Mary Emale (M120)     Imaginary Mary Emale (M120)     Imaginary Mary Emale (M120)       Curred Messages (175)     If on the users (1)     Imaginary Mary Emale (M120)     Imaginary Mary Emale (M120)     Imaginary Mary Emale (M120)       Curred Messages (175)     Imaginary Mary Emale (M120)     Imaginary Mary Emale (M120)     Imaginary Mary Emale (M120)     Imaginary Mary Emale (M120)       Curred Messages (175)     Imaginary Mary Emale (M10)     Imaginary Mary Emale (M10)     Imaginary Mary Emale (M10)       Mary Emale (M10)     Imaginary Mary Emale (M10)     Imaginary Mary Emale (M10)     Imaginary Mary Emale (M10)       Imaginary Mary Emale (M10)     Imaginary Mary Emale (M10)     Imaginary Mary Emale (M10)     Imaginary Mary Emale (M10)       Imaginary Mary Emale (M10)     Imaginary Emale (M10)     Imaginary Emale (M10)     Imaginary Emal	Patients Here and Waiting - Provide	er						
Wder, Reyna Female (#12)       63 yo.       1225 PM (1225 PM)         Imaginary, Mary Female (M22)       33 yo.       Room 5       referal for infetility       1200 PM (1202 PM)         Jones, Ricky Male (27)       14 yo.       Room 3       1105 AM (1106 AM)         Lemer, Maria Female (83)       63 yo.       Referred for infetility       1220 PM (1222 PM)         Unread Messages (175)       Imaginary Mary Female (83)       0 mmaginary Mary Female (83)       1005 AM (1106 AM)         Unread Messages (175)       Imaginary Mary Female (83)       New Labs (4)       1200 PM (1224 PM)         Imaginary Mary Female (83)       Unread Messages       Imaginary Mary Female (83)       New Labs (4)         Imaginary Mary Female (83)       Unread Messages       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)         Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginary Mary Female (83)       Imaginar	Imaginary, Mary Female (1515)			38 y.o.				12:10 PM (12:12 PM)
Imaginary Kary Female (N122) 39 yo. 06:00 AM (06:24 AM)   Andrews, Jane Female (220) 33 yo. Room 5 referral for infertility 12:00 PM (12:02 PM)   Jones, Ricky Male (27) 14 yo. Room 2 Referred for infertility 12:00 PM (12:02 PM)   Lerner, Maria Female (83) 55 yo. Room 2 Referred for infertility 12:00 PM (12:02 PM)	Imaginary, Ruthie Female (206)			4 y.o.				12:20 PM (12:21 PM)
Adrews, Jane Female (220)     33 yo.     Boom 5     referral for infertility     1200 PM (1202 PM)       Jones, Ricky Male (27)     14 yo.     Room 3     1105 AM (1106 AM)       Lenser, Maria Female (83)     55 yo.     Room 2     Referreed for infertility     1220 PM (1222 PM)       Unread Messages (175)     Combine users (1)     Combine users (1)     Combine users (1)	Wilder, Reyna Female (91)			63 y.o.				12:25 PM (12:25 PM)
Jones, Ricky Male (27) 14 yo. Room 3 1105 AM (1106 AM) Lemer, Maria Female (83) 35 yo. Room 2 Reference for infertility 1220 PM (1224 PM) Unread Messages (175) Unread Messages (175) Urgent Messages Urgent Messages Charta Fonding 4 Transcriptions Returned Unfinished Records 2 Prescriptions Narsing Task Agents to do Narsing Task Agent	Imaginary, Mary Female (M123)			39 y.o.				06:20 AM (06:24 AM)
Lerner, Maria Female (83)     35 yo.     Room 2     Referred for infertility     12:00 PM (12:24 PM)       Currend Messages (175)     Contine users (1)     Contine users (1)     Contine users (1)	Andrews, Jane Female (220)			33 y.o.	Room 5	referral for infertility		12:00 PM (12:02 PM)
Unread Messages (175)  Urgent Messages  Tasks 70 Do And Review  Urgent Messages  Charts Pending  4  Transcriptions Returned Unrinabed Records  2 Prescriptions  Nursing Task Agents to do Nursing Task Agents to do Nursing Task Agents to do Nursing Task Agents Not Done Returned from Nursing Tasks  Uncentations to Administer  13	Jones, Ricky Male (27)			14 y.o.	Room 3			11:05 AM (11:06 AM)
Unread Messages (175)  Urgent Messages  Tasks 70 Do And Review  Urgent Messages  Charts Pending  4  Transcriptions Returned Unrinabed Records  2 Prescriptions  Nursing Task Agents to do Nursing Task Agents to do Nursing Task Agents to do Nursing Task Agents Not Done Returned from Nursing Tasks  Uncentations to Administer  13	Lerner, Maria Female (83)			35 y.o.	Room 2	Referrered for infertility		12:20 PM (12:24 PM)
Tasks To Do And Review     Date     SUBLECT     USER       Urgent Messages     Charls Pending     4     4       Transcriptions Returned     4     4       Urfinite Medods     2     2       Prescriptions     4     4       Nursing Task Agents to do     5       Nursing Task Agents Not Oron     5       Vacentations to Administer     13	Unread Messages (175)			Onlir	ne users (1)		🛃 New Labs (4)	
Date     Sobacti     Obset       Under Message     Image: Doration Februard     Image: Doration Februard     Image: Doration Februard       Unfinished Records     2     2       Prescriptions     2     2       Variang Task Agents to Dor     2     2       Returned from Nursing Task Agents Not Dors     4     4       Variand Task Agents Not Dors     4     4	,							
Arts Pending     4       Transcriptions Returned     4       Unfinished Records     2       Prescriptions     2       Nursing Tasks To Do     5       Nursing Task Agents to do     5       Returned from Nursing Tasks     4       Vaccinations to Administer     13		î	DATE	SUBJECT			U	SER
Transcriptions Returned     I       Unfinite Records     2       Prescriptions     2       Nativing Task Agents to do     Empty List       Returned from Nuclion Taska     4       Vacinations to Administer     13								
Unfinished Records     2     2       Prescription     2       Narring Task To To     5       Narring Task Agents Not Dorus     6       Returned from Nurge Tasks     7       Vacatations to Administre     13		4						
Prescriptions     a       Nursing Tasks To Do     Empty List       Nursing Task Agents to Do     Empty List       Returned from Nursing Tasks     Agents to Administer       Vaccinations to Administer     13		2						
Nursing Task Agents to do     Entiply List       Rurand from Nursing Task Agents to Administer     13								
Nursing Task Agents to do San	Nursing Tasks To Do					EmptyList		
Returned from Nursing Tasks Vaccinations to Administer 13	Nursing Task Agents to do					Empty List		
Vacchatlons to Administer 13 1	Nursing Task Agents Not Done							
	•							
Phone Calls	Vaccinations to Administer 1	3						
Reschedule Now Y								

Figure 2. The right toolbar collapses with a click on the top icon and stays that way unless changed.

Imaginary, Mary 39 y.o. 2/17/1984 Female (M123)	- a ×
တ် Praxis	(R) Clayton Reynolds, MD
Imaginary, Mary 39 y.o. 2/17/1984 Female (M123)         Careful: Another patient exists with the same first and last name           Assistant: (None)         Insurance: Medicare (Plan: Advantage Plan)         Amount Copay: \$ 30.00           Referring Provide: Harris William         Last Provider was: Clayton Reynolds, MD         Amount Copay: \$ 30.00	Eligibility Yes         Room:         Days         Waiting Time         Viait Time           olds, MD         Started: 11/15/2023 at 06-24 AM         0         0:00:01         0:00:012           Next Appointment:         0         0:00:01         0:00:012         0:00:012
Hain     New Visit     Chart     Medications     Vaccines     Studies       New Problems     Assistant Note	I Flow Chart S Growth Chart E Patient Data Nov 19, 2023 10 42 AM
Active Problems Chronic Problems 12 Years Pure Hypercholesterolemia E78.0	Reputar Messapes 102
12 Years         Diabetes Meilitus Without Mention Of Complication Type II Or Unspecified Type Not         E11.9         Vital Signs           12 Years         Essential HyperNexion         Dubetes Meilitus Without Mention Of Complication	R Fast Rx
Type II Or Unspecified Type Net Stated As Uncontrolled	Virtual Soap
Inactive Problems Patient Context May presents with multiple complain	its.
BMI:	y of the metabolic syndrome. She feels better. J29/2014)
Family History Zung Depression Scale	Review of Systems Past Medical History Medications Last Encounter
Send Agent	Remnders

Figure 3. *Main Patient Window: Once again, the right toolbar may be kept minimized to enhance the rest of the windows.* 

ည် Prax	kis"							R Clayton Reyn	olds, MD
-	Imaginary, Mary 39 y.o. 2/17/1984 Female (N	(123) Careful: Another patient exists with 1	the same first	and last name					CLOSE
and the second s	Assistant: (None) Referring Provider: Harris William Adverse Drug Reactions: Not Known Drug Reactions	Insurance: Medicare (Plan: Advantage Pl Last Provider was: Clayton Reynolds, MD	an)	Amount Copay: \$ 30. Primary Provider: Cla		Eligibility: Yes Room: Started: 11/15/2023 at 06:24 J Next Appointment:	АМ	Days Waiting Time Visi	it Time :01:55
😝 Main	🖪 New Visit 🔛	Chart 🛃 Medications		Vaccines	Studies	Flow Chart	Growth Chart	E Patient Data	a
New Proble	ms			Assistan	Note				
Active Prob	lems								
Chronic Pro									
12 Years	Pure Hypercholesterolemia		E78.0						
12 Years	Diabetes Mellitus Without Mention Of Complication Uncontrolled	Type Ii Or Unspecified Type Not Stated As	E11.9	Vital Sigr	s				
12 Years	Essential Hypertension								
Resolved Pr	roblems								
Inactive Pro	blems			Patient C	ontext				
					with multiple complaints.				
				39 y.o. y.o. fer	nale with a 2 year history of t	he metabolic syndrome. She feels	better.		-
				BMI:					
				Glucose:	120 (09/29/2	2014)			
					Family History	Review of Systems	P	ast Medical History	
				Zu	ng Depression Scale	Medications		Last Encounter	
				~ L	Send Agent	Reminders			

Figure 4. Minimized Rightmost Toolbar

#### **Settings and Praxforms**

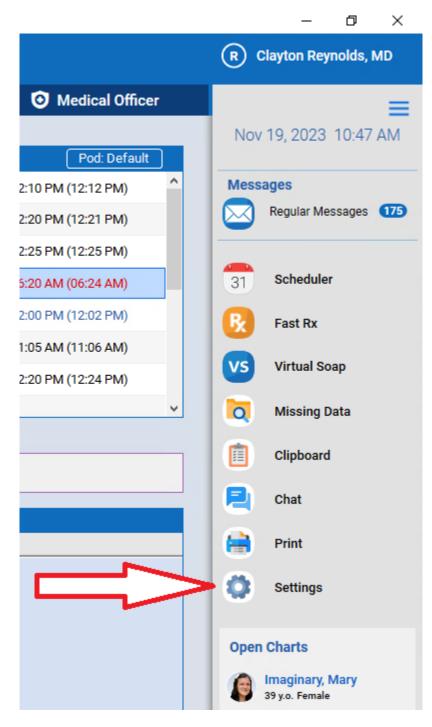


Figure 5. *Praxis settings are now conveniently located in the rightmost toolbar of the User Home Window. You can access and edit Praxforms as before.* 

# Praxforms

🗟 Settings				- 0	×
Settings	SOAP Settings				
	Health Maintenance		Auto Save		
SOAP Settings	Days before activation 0		Activate (Minutes) 0		
Visit and previous Encounter User Window User Data Security Home View Medications and Drug Reactions	SOAP/PreSOAP/FastRx Visualization Separation distance [Line Spacing] 1.5 Lines - SOAP behavior SOAP behavior New Element Linking Exclude Return Visit from New Element Linking Enumerate the codes	Use the Praxcoder feature Show Allergy Snomed Code Display codes in Previous Er	Show Severity In Allergy		
Vaccines	Display all codes	Default to SNOMED with you	ur Diagnoses		
f ← General Settings Shortcuts Settings Billing Codes Font and Print	Bolds Show Abnormal Body Regions in Bold Print with Abnormal Body Regions in Bold		Clobal Patient Settings Show Growth Chart Show Vaccine Chart Add name of last provider in Main		
More Settings	Alerts				
Patient		ent Relationship Alert	Vissing Code Alert		
Edit PraxForms Edit PraxForms	Laboratory Settings Lab Requests Display Survey Button SOAP captions	SOAP Spacing	LabCorp Id		
	sour capitols	SUAF spacing Save	eripor ( opport		

Figure 6. Edit Praxforms

While Praxforms have undergone some changes, they remain user-friendly. You can continue to create forms tailored to your specific needs.

on Reynolds, MD - (PraxForms)		- 0
Poste Cut Copy Delete Save to Save forms Edit L	Proges Spop Image Signature Sea Shift I - Align Adapt	
Import 📑 Export all 📑 Export selected 👘		
layton Reynolds, MD		
Agent		
Blank		
Blue Form - Vaccination Form	8	
Excuse		
Inserted note		
Instructions		
IWORK 1 progress note Fax		
LabOrderRequest		
LabResults		
Labs		
Old_Progress_Note_Ammended		
Patient Labs		
Procedure		
Progress Note	8	
Progress Note Fax		
PSI		
Questionnaires		
Radiology_And_Imaging		
Referral		
Return		
Routing Slip		
Rx		
School Physical Form yellow		
School Yellow Form page 2	8	
Summary		
Treatments		
	8	
n;		

Figure 7. The New Praxforms

Import Import	te Cut Copy Delete Save to Save forms Edit List	Progress Soap Image Signature note Link	Sig. Switch Neture Page United Align Horizontal Vertical United States	
Agent Barks   Bark   Burk   Bur	Import 🕞 Export all 📑 Export selected 💡 Blank 🕱			
Bank	ton Reynolds, MD			
Bue Form	Agent			
Bause Harder of ofe Harder of off Harder off Ha				
Inerted notes Inductions NOSK1 progress note fix LabSineting LabSineting LabSineting LabSineting LabSineting Defension Processive				
Inductions Next Largers note fax Porters Larger		8		
NoRet regress note fax Las/Reuto Las/Reuto Las/Reuto Las/Reuto Las/Reuto Las/Reuto Las/Reuto Processive Procesive Processive Processive Processive Processive Process				
LacOdersepadi LacOdersepadi LacSenution Del Apoges Note Ammended Pacter Lais Progres Note Fax Progres Note Fax Progres Note Fax Pacter				
Labeled Labele			~	
Labelerits Labelerits Cold Program Note Ammended Referst Labs Processive Program Note Fix Program Note Fix Progra		- N	M	
With Ammended         Pier A.Z		8		
Patient Lobs         Patient Lobs<	Labs		ал — — — — — — — — — — — — — — — — — — —	^
Value         Form           Morges Note         Morges           Progress Note         Morges           Pogess Note         Name           Bio         Name           Questionaires         Name           Return         Poge           Return         Poge           School Physical Forn yellow         State           School Yellow         Poge           PrinteersToRAdd Add printer			k= A-7	0
Progress Note Progress Note	Patient Labs			
Progress Note Fax         Marging 100, 50, 50, 50           PSI         Amaging 100, 50, 50, 50           Occentratives         Amaging 100, 50, 50, 50           Refersion         Page           Second Physics For pellow         Constitution Portrait           Scool Physics For pellow         Second Physics For pellow           Scool Physics For pellow         Second           Second Physics For pellow	Procedure			
P9		8	BackgroundImage	· · ·
Questionnaires     Name Blank       Rationg J. Adj Imaging     Image Blank       Return     Image Blank       Stoold Physics Form yellow     Image Blank       Stoold			Margins 100, 50, 50, 50	
Quetomined     Page       Refersal     Page       Refun     Page       Routing Sip     Page       So     Page       Stool Proving whom     Size       Stool Proving whom     Size       Stool Proving whom     Page       Sto			Name Blank	
Reternal         Bit         Crientation         Portrait         •           Return         Page         All         Page         All         •           Return         South State         South State         •         •         Page         All         •           South State         South State         •         South State         • </td <td></td> <td></td> <td></td> <td></td>				
Return Return Sector Sign Sector Sign Sector	Radiology_And_Imaging			
Rouring Silp Carlos Silp Carlos Silp Carlos	Referral	8	Orientation Portrait	· ·
Rx     Status     Status     Status     Status     Status     Status       School Physical Form yellow     Status     Status     Status     Status     Status       School Physical Form yellow     Status     Printers     Printers     Printers       Treatments     Printers     Printers     Printers	Return		Page All	
School Physical Form yellow School Physical Form yellow School Network Form page 2 Simmary Treatments Printers School Add printer		E	Letter - 8.5 x 11 in	
Suroma rycka form palow Suromary Treatments			Size 850 1100	
Summary Treatments Printers Printers PrintersToAdd Add printe	School Physical Form yellow	- 10		
Treatments PintesToAda Add printer		8		
	Ireaments		PrintersToAdd Add printer	( <b>\</b>
		8		

Note: These links are directed to the server where your Praxis is hosted. To access your local printers and documents, kindly reach out to our support team for assistance in setting up a VPN connection or establishing a connection to the server.

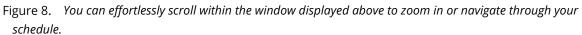
#### Scheduler

The new Praxis Scheduler has been improved from the beta version presented last year.

G	ဉ်၊	Pra	axi	S			19 Nov	ember 2023 🕨	Grouping -	Clayton Reynolds, MD	Print	Day	Week	Month	Agen
							~	19 Sunday							
			Too	-				Alex DelGenio, MD							
1		Nov	embe	r - 20	23	•	8:00 A								
		Nov	embe	r - 20	23		:0								
	Sun	Mon	Tue	Wed	Thu F	ri Sat	:1								
4	29	30	31	1	2 3	4	1								
5	5	6	7	8	9 1	0 11	:2								
6	12	13	14	15	16 1	7 18	:2	5							
7	19	20	21	22	23 2	4 25	3	0							
8	26	27	28	29	30		3								
		Dec	embe	r - 20	23		.4	0							
	Sun	Mon	Tue	Wed 1	Thu F	ri Sat	:4	5							
						2	:6	0							
	3	4	5	6	7 1	9	:5	5							
	10	11	12	13	14 1	5 16	9:00 A	N							
	17	18	19	20	21 2	2 23	.C	5							
	24	25	26	27	28 2	9 30	1	0							
		Ja	nuary	- 202	4		đ	5							
	Sun	Mon	Tue	Wed	Thu F	ri Sat	2	0							
		1	2	3	4 !	5 6	2	5							
	7	8	9	10	11 1	2 13	3	0							
	14	15	16	17	18 1	9 20	3	5							
	21	22	23	24	25 2	6 27	ž	0							
	28	29	30	31		2 3	Ā	5							
			-	-			:5	0							
me	Form	15					:5	5							
							10:00 A	и							
								5							
2		Sear	ch				ā	0							
								5							

You can easily scroll and customize your scheduler view. The grouping feature allows you to add providers, other users, or special rooms, and you can parse your scheduler by PODS for larger clinics. Stay tuned for a Mini-Manual on this new Scheduler in the coming days.





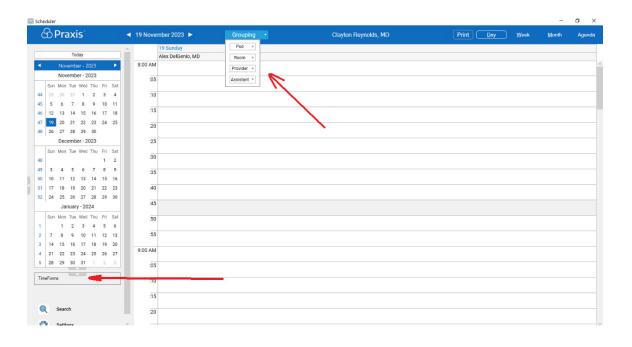


Figure 9. Clicking on the Grouping button enables you to include providers, other users, or Special Rooms. Additionally, you can organize your scheduler using PODS, which proves valuable for larger clinics. Take note of the "Timeforms" on the left, which facilitate the automatic scheduling of specific visits on the appropriate days, times, and durations.

Stay tuned for a Mini-Manual on this Scheduler in the coming days.

## **Agent Content Display**

ာ် Praxis						R Cla	ayton Reynolds, I
🔒 Home	🖬 Database	🖅 Agents	🕶 Studies	📆 Query	Medical Officer		
Agent folders	Create	Reply Forward	New Form		Filtering rules SFilters By User	Nov 2	20, 2023 05:47
ncoming Agents	^		,			Mess	ages
Inread	Unread						Regular Message
iltered							· · ·
tead	DATE	FROM:	PATIENT	SUBJECT	^		
eleted	11/10/2023	Clayton Reynolds, MD	Imaginary, Mary Female, (1515) 38 y.o.	Warning: Health Maintenance : W	arning - Health Maintenance	31	Scheduler
nactive Patients ncoming Clinic Wide	11/10/2023	Clayton Reynolds, MD	Imaginary, Mary Female, (1515) 38 y.o.	Warning: Health Maintenance : W	arning - Health Maintenance		Fast Rx
ecure Agents	11/10/2023	Clayton Reynolds, MD	Imaginary, Mary Female, (1515) 38 y.o.	Warning: Health Maintenance : W	aming - Health Maintenance		
ecure Agents I House Agents				, in the second s		VS	Virtual Soap
ntriggered In House Agents	11/10/2023	Clayton Reynolds, MD	Imaginary, Mary Female, (1515) 38 y.o.	Warning: Health Maintenance : W			Missing Data
ly Outgoing Agents	11/10/2023	Clayton Reynolds, MD	Imaginary, Mary Female, (1515) 38 y.o.	Warning: Health Maintenance : W	arning - Health Maintenance	•	wissing Data
roviders Outgoing Agents	11/10/2023	Clayton Reynolds, MD	Imaginary, Mary Female, (1515) 38 y.o.	Warning: Health Maintenance : W	arning - Health Maintenance		Clipboard
ecure Undelivere	11/10/2023	Clayton Reynolds, MD	Imaginary, Mary Female, (1515) 38 y.o.	Warning: Health Maintenance : W	arning - Health Maintenance		
ncoming Nursing Task	11/10/2023	Clayton Reynolds, MD	Imaginary, Mary Female, (1515) 38 y.o.	Warning: Health Maintenance : W	arning - Health Maintenance		Chat
Iconning Rule ing Tusk	09/07/2023	SYS		_Warning: Agent Unread: Warning	: Agent Unread		Print
orms	09/07/2023	SYS		_Warning: Agent Unread: Warning	: Agent Unread		
O Starch	09/07/2023	sys				0	Settings
2	09/07/2023	515		_Warning: Agent Unread: Warning	, Agent Unireau		
erral don							
one Call		12:00:01 AM, Clayton Reynolds, MD Wro			^		
ic ESRD clinic visit	Lab. : exercis	e treadmill test [Q 1 Years; A-: 2 Days A+	: 3 Months; 09/15/2011]				
alth Maintenance - Days Before_BR	ADLE						
alth Maintenance - Days Before							

Figure 10. When selecting an agent, its contents are now instantly displayed below.

#### **Patient Related Agent: Private Note Elimination**

nt Spell Check Patient Edit groups	So To Chart Patient Data Medication Attachments Select form		
abel			
Го	Urgent!		
e Now ~	Urgent		
	2-7663 DOB: 7/27/1925 Age: 98 y.o. Ref. Provider N/A Last visit: 1/25/	0000 No.4 Visita NVA	
Nursing task / Consult Request	2-7663 DOB. 7/27/1925 Age: 98 y.o. Ref. Provider N/A Last visit: 1/25/     Save in Chart	Electronic Signature	Last visit
Confidential			
Somoentia			
Sonndentier			
on ndential			
ent related information			

Figure 11. We have made the decision to eliminate private notes in the agent's messages. This change is intended to prevent any potential liability issues. Patient-related messages that do not find their way into the patient record should be handled with caution. If you prefer to keep a note off the patient record, you can achieve this by sending it without attaching a patient name. However, it is advisable to consult with your malpractice insurance provider or attorney to ensure that you are following the best practices for your specific state law.

## Scheduler and HIPAA Logs

Se License:	s		جي In	terfaces				4		
Create Users	Security Settings		View Log	Log Events Settings		Control List for Patient Access		Merge Studies	• •	
User PraxisSupport PraxisSupport	~	Log Results	ACTION(S) TAKEN		USER ID		PATIENT ID			
Date From										
09/01/2023 07:24 AM										
Date To										
09/02/2023 07:24 AM										
Patient										
	×									
Action(s) taken										
𝒫 appoi									_	
Appointment Canceled Event									^	
Appointment Created Event										
Appointment Deleted Event										
Appointment Modified Event										
Print Appointment Event										
									~	
									*	
Select All Actions							_			
Execute	Save Logs	Full audit of log all	teration					Start		

Figure 12. Scheduler changes are recorded in the HIPAA Logs, providing transparency and accountability.

🟫 Home	🖬 D	atabase 🛛 🖅 Ag	jents	Studies	📆 Query	Medical	Officer		
Laboratory Folder Personal Read Deleted Clinic-Wide Urread Read Deleted Sent	7 57 2 2	Personal ATENT Overs, Monica Female, (203) Hilbert, Linda Female, (202) Wilder, Reyna Female, (91) Samuels, Mary Male, (90) Timpono, Rossalyn Female, (92)	соммон соре 2158-1 2158-1 14 12 11	LAB STUDES () In House Lipid Panel () In House Lipid Panel House Lab House Lab House Lab		DATE 07/13/2011 10:36 AM 07/13/2011 10:35 AM 03/18/2011 11:40 AM 03/18/2011 11:49 AM 03/18/2011 11:39 AM	ID 65 64 14 12 11	Messa	8, 2023 09:15 A Inges Regular Messages Scheduler Fast Rx Virtual Soap
Personal Clinic-Wide Missing Labs Laboratories import (6/30/2011)	30	Saber, Sam Male, (83) Lucaro, Phillip L. Male, (93)	no 9 At least of	A House Lab	lue inside	02/18/2011 11:39 AM	10 9		Missing Data Clipboard Chat Print Settings

## **Incoming Laboratories Abnormal Warning**

Figure 13. The visual cues simplify the process of assessing study parameters' overall health. This system helps you identify deviations from the norm efficiently, enabling you to prioritize and address abnormal findings promptly.

## **Enhanced Patient Record Toolbar**

ginary, Mary 39 y	y.o. 2/17/1984 Female (M123)				– u ×
ි Pra	xis				R Clayton Reynolds, MD
	Imaginary, Mary 39 y.o. 2/17/1984 Fen	nale (M123) Careful: Another patient exists with the same f	irst and last name		CLOSE
	Assistant: Mary Hill, M.A. Referring Provider: Harris William Adverse Drug Reactions: Not Known Drug Rea	Insurance: Medicare (Plan: Advantage Plan) Last Provider was: Clayton Reynolds, MD Inctions	Amount Copay: \$ 30.00 Primary Provider: Clayton Reynolds, MD	Eligibility: Yes Room: Room 4 Started: 07/08/2022 at 06:11 PM Next Appointment: 3/3/2024	Days Waiting Time Visit Time 0 17:47:47 00:17:07

Figure 14. The patient record toolbar has been significantly enhanced to provide quick access to essential patient information, visit history, provider details, insurance information, and more. This streamlined toolbar ensures that vital patient data is readily available at your fingertips.

#### **Medications: E-Prescribing and Printing**

Imaginary, Ruthe Female, (206)   Omeral information   Walk   Information   Walk biale   Place of Exemination   Date of Service   11/10/2023 02:14 PM   Date of Service   Usit Stubiet   Date of Service   11/10/2023 02:14 PM   Date of Service   Walk This   Place of Service   Information   Beferring Provide   Printing Destination   Desti	ਹੇ Prax	(is				(R) Clayto	on Reynolds
Ceneral Information      Ceneral Information      Visit Sublexel      Actor Phagmanglis- allergic      Visit Sublexel      Actor Phagmanglis- allergic      Visit Sublexel      Actor Phagmanglis- allergic      Pace of Examination      Pace of Examinatin      Pace of Examinatin      Pace of Examinatin      Pace of E		🚳 Report Generator				– 🗆 X	CL
Several Information Recert Information   Wait Subjective   Main   Main   Place of Examinator.   Diffice   Date of Service.   11/10/0223 02:14 PM   Viait Take.   Diffice   Date of Service.   11/10/0223 02:14 PM   Viait Take.   Diffice   Date of Service.   11/10/0223 02:14 PM   Viait Take.   Diffice   Date of Service.   11/10/0223 02:14 PM   Viait Take.   Diffice   Date of Service.   11/10/0223 02:14 PM   Viait Take.   Diffice   User size   Referring Provide.   Printing Destination   Printing Destination   Pilet Service   Diffice   Diffice   Diffice   Diffice   Viait Take.   Diffice   Diffice<		Imaginary, Ruthie F	emale, (206)				e Visit Tim
Mini     Place of Examination: Office     023 02:       Adverse Dr     Date of Service:     11/10/2023 02:14 PM     0       Surrent Me     Date's role:     file:     0       Assistant N.     Printing Destination:     priest       Pate of Examination:     Office     0       Subjective     Vuit Title:     Office:     0       Pate of Service:     11/10/2023 02:14 PM     0     0       Subjective     Vuit Title:     Office:     0       Pate of Service:     11/10/2023 02:14 PM     0     0       Subjective     Printing Destination:     office:     0       Pate Service:     11/10/2023 02:14 PM     0     0       Subjective     Printing Destination:     office:     0       Pater Service:     0     Service:     Export Transfer of Care Note:     Export Patient Summary:       Pater Service:     Export Immunization:     Export Hu/2 Billing     0       Cuessions:     Export Immunization:     Export Hu/2 Billing     0       Visi Title:     Export Market Patient Summary:     Public Health Summary:     Nose       Nose     Print     Nose     Referral     Cueston:       Visi Title:     Export Patient Summary:     Public Health Sumelilance     Nose       Nose		General Information	Acute Pharynnitis - allernic				01:53:0
Adverse Dr         Adverse Dr         Visit Tale:         Office Viait         Sasistan N         Refering Provide:         Printing Destination         Diate of Service:         Timp Destination         Diate of Service:         Printing Destination         Diate of Service:         Diate of Servi							
Adverse Dr       Vol The       If Co Vial       Image: Contract Contrac	Main	Place of Examination:					
Adverse 00       Value main       Image: State							2023 02:1
Current Ma     User Sont     Print     et Message       Subjective     Printing Destination     patient       Past Mades     Save Visit     Export Clinic Summary     Edd Clinic Summary       Past Mades     Save Visit     Export Clinic Summary     Edd Clinic Summary       Past Mades     Save Visit     Export Hu7 Billing     edd et Ministree       Past Mades     Save Visit     Export Hu7 Billing     edd et Ministree       Visit Sont     Export Immunizations     Export Hu7 Billing     edd et Ministree       Visit Sont     Export Immunizations     Export Hu7 Billing     edd et Ministree       Visit Sont     Export Immunizations     Export Hu7 Billing     edd et Ministree       Visit Sont     Export Immunizations     Export Hu7 Billing     edd et Ministree       Visit Sont     Export Immunizations     Export Hu7 Billing     edd et Ministree       Visit Sont     Export Immunizations     Export Hu7 Billing     edd et Ministree       Visit Sont     Export Immunizations     Export Expand to review them.     edd et Ministree       Fired Attract     Print     Export Expand to review them.     edd et Ministree       Fired Attract     Export Expand to review them.     Export Expand to review them.     edd et Ministree       Fired Attract     Export Expand to review them.     Ex	dverse Dr	visit ride.				•	
Skissiant N       Refering Provide (Prince day)	urrent Me	Users role.				•	
Vertified   Printing Destination   Subjective   Past tablect   Past tablect   Rooting Slip   Boport Land   Celestonation   Celestonation   Celestonation   Print               Print <td>cointant N</td> <td>Referring Provider</td> <td>Reynolds Clayton</td> <td></td> <td></td> <td>•</td> <td>lar Message</td>	cointant N	Referring Provider	Reynolds Clayton			•	lar Message
Number of Part <ul> <li>Baser Visit</li> <li>Export limit unitations</li> <li>Export limit unit unitations</li> <l< td=""><td></td><td>Printing Destination</td><td>patient</td><td></td><td></td><td></td><td></td></l<></ul>		Printing Destination	patient				
Past ladeau Past							eduler
Pater Sport Cuestor					al Note 📃 Export Transfer of Care Note 📃 Export Patient Summary 🗌 Publi	c Health Surveillance	t Py
Questional     Protein line     Initial Scape     Initial Scape       Vibility Stape     Wring: Errors appeared on your note! Expand to review them.     Initial Scape       HEAD     Initial Scape     Initial Scape       HEAD     Initial S		Routing Slip E	cort Immunizations 🛛 🔽 Export HL7 Billing	l.			
Unitable Para     Instructions     Print       CHEST     Diagnostic Studies     mary Mary       Pow Chat     Diagnostic Studies     mary Mary       Labs     Procedures     Printer Selection     Printer Selection							ual Soap
Visi Signs     Warning: Errors appeared on your note! Expand to review them.     Image: Constraint of the second of the s	bjective	Problem List					ints
General Genera	Vital Signs	Warning: Errora appears	on your note! Expand to review them			_	
EARS NOSE Pint Vial Reform RowChest Row	GENERAL	warning, Errors appeared	on your note: Expand to review them.			~	board
NOGE THROAT THROAT CHEST Fow Chat Labs Clinical Para Clinical Para Clinic	HEAD						
THRAT     Visit     Image Rays     Diagnostic Studies     Frank and	EARS						ts
CHEAST     Visin     M     Obsgringestic churdes     narry funktion       CHEAST     Finishuctions     Treatments     Routing Sip     narry funktion       Row Chest     Excuse     Refernal     Custom Praxforms     Reprator       Labs     Procedures     Refernal     All     Printer Selection							nary, Mary
CHEST DEXCuse Referral Custom Praxforms rende Procedures Return All Printer Selection Clinical Para Clinical Para				-			inary, Ruthie
Clinical Para Concel Finished Record Cancel Finished Record	CHEST			-			
Clinical Para Unfinished Record Cancel Finished Record		Procedures		Return	All	Printer Selection	
Unfinished Record Cancel Finished Record							
Temporary Edit							
	Labs			Unfinished Record	Cancel Finished Record		

Figure 15. We are pleased to introduce the ability to e-prescribe medications and print prescriptions based on popular demand. You can send prescriptions electronically and select the Print option in the Report Generator.

#### **MIPS (ONC) Certification for 2024**

We are pleased to announce that we have successfully completed the necessary attestation process for the 2024 MIPS (ONC) Certification, meeting rigorous standards and requirements. This certification underscores our commitment to delivering a secure and reliable healthcare solution that aligns with the latest regulatory standards.

You can find more information about this certification and its significance here. <u>2024 MIPS (ONC) Certification Details</u>

...and here: <u>MIPS Certifications</u>

If you have any questions or require further information regarding this certification's implications for your use of Praxis, please don't hesitate to reach out to our dedicated support team.

# Upcoming Release - Just Around the Corner

W	/ha
← → C t; portaltest.praxisemr.com//login	중 월 ☆ · 안 티 미 9 :
Compassionate, competent care.	Español Welcome Email santiago.maraz@praxisemr.com Password Enter If you do not have an account, please call your clinic.

#### A New and Enhanced Patient Portal

Figure 16. What patients see upon entry to the new portal. Note the logo of one of our great clients. Your logo is displayed everywhere automatically.

We are thrilled to announce the impending launch of our new and improved Praxis Patient Portal in the coming days. This revamped portal signifies a significant advancement from our current offering and firmly establishes Praxis as an industry leader. What sets the Praxis Patient Portal apart is its seamless integration with your AI Concept Processor, offering a host of unique advantages.

Let's take a moment to contemplate the true purpose of a patient portal. While it unquestionably benefits patients, its primary objective is to streamline your operations and boost efficiency for both you and your staff. The Praxis Patient Portal excels in achieving this goal. Unlike other patient portals on the market, which often employ a one-size-fits-all approach, our portal is designed to adapt to each patient's unique requirements, managed by your Praxis Agents and therefore your Praxis Assessments. Here's how it excels:

• Streamlined User Experience: We have simplified navigation for your patients by concealing complexity. Patients will only encounter the information you choose to share, reducing unnecessary clutter and ensuring a user-friendly experience.

- Custom Branding: Your clinic logo takes center stage. You will have the opportunity to prominently display your practice's logo within the portal, reinforcing your practice's identity.
- Mandatory Engagement: Patients cannot access the portal's Main Window until they have interacted with your messages, completed your questionnaires, reviewed or signed your patient consents, and filled out your intake forms (see next). This guarantees that patients engage with the information important to you.
- Flexible Questionnaires: While the portal offers personalized questionnaires as just explained, you may still opt for standardized questionnaires for all patients using the Free Agents. Additionally, patients could receive questionnaires and consents as soon as their patient record is created, even before their initial visit (also see Intake Forms below).
- Patient Scheduling: The portal features a synchronized patient scheduler, enabling patients to conveniently self-schedule appointments.
- Parental Access: Parents or responsible parties can effortlessly access information for multiple dependents and switch between patients with a simple click.

In the near future, we will also introduce the capability for patients to view specially tailored "patient flowcharts." These flowcharts automatically consolidate specific laboratory values, clinical parameters, vital signs, and medications, which can be customized and linked to your assessments. Patients will see relevant flowcharts based on their condition, simplifying their comprehension of their health data.

While regulatory requirements necessitate sharing all lab data with patients, the Praxis Patient Portal ensures that patients primarily see what matters to you. They can access additional data, of course, but it will require some exploration on their part. This approach minimizes unnecessary inquiries from patients who notice innocent abnormal lab results that may not warrant immediate concern or discussion but create unnecessary anxiety.

In summary, the Praxis Patient Portal puts you in the driver's seat. It empowers patients with pertinent information while allowing you to streamline your workflow. We are dedicated to making healthcare management more efficient and practice-centric for you and your staff. Stay tuned for the upcoming launch in just a few days!

#### **Controlled Substances**

We are just a few days away from the release of Controlled Drugs within Praxis. These will be managed in the same unique manner as any other prescribed medications, seamlessly integrated with your existing prescriptions and patient assessment data.

It's important to note that all medications, including controlled drugs, are processed through

Surescripts, the organization responsible for connecting all Electronic Health Records (EHRs) with all pharmacies nationwide. The workflow remains identical and should not present any significant challenges, except for the straightforward requirement of two-factor authentication, which is akin to the security measures banks employ for online transactions today.

We will provide you with detailed instructions on how to enroll in two-factor authentication notarization, a process designed to verify your identity securely. This authentication procedure will be conducted by Exostar Corporation, and we will promptly inform you once they grant authorization for us to proceed in the next few days.

#### Prescription Drug Monitoring Program Interface (PDMP)

The introduction of this feature will follow shortly after the successful implementation of the Controlled Drugs system in real clinical environments. It is essential to guarantee the seamless functioning of the Controlled Drugs system within clinical settings before we can proceed with making the PDMP interface accessible through the relevant overseeing agencies.

# Upcoming Features in the Next Few Weeks

#### **Patient Intake Forms**

One of the most eagerly anticipated developments in Praxis, set to be seamlessly integrated into Praxis C# in just a matter of days, is the introduction of Patient Intake Forms.

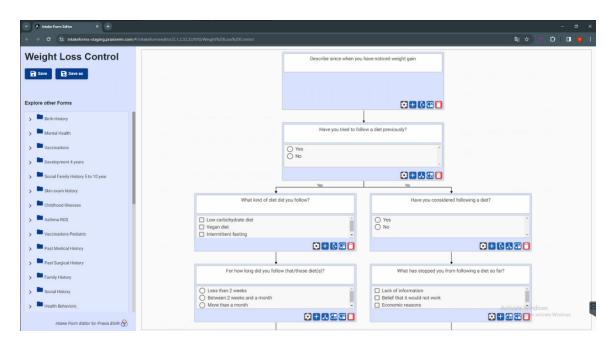


Figure 17. Figure 5: The Logic Tree of a weight control Intake Form created using the new Praxis. You will have the flexibility to design Intake Forms tailored to your specific needs.

What sets these Patient Intake Forms apart from others in the market is their intelligent distribution by Praxis agents, which are themselves generated based on your "assessments." This means that each patient may receive a personalized intake form uniquely tailored to their specific medical conditions, all generated automatically.

So, what distinguishes a Patient Intake Form from the free-text questionnaires that Praxis currently employs? The primary difference lies in how computers process data compared to human comprehension. While we humans can understand free-text responses, computers excel at processing discrete data, which forms the core of Intake Forms.

Here's an illustrative example: If a question on the form reads, "Are you experiencing depression? Yes / No," and the patient selects "Yes," the system can automatically generate a series of follow-up questions related to depression, including sensitive topics like suicidal thoughts. This branching logic enables the dynamic generation of questionnaires based on patient responses. Importantly, the titles of these questionnaires are extracted from the labels in your Patient-Specific Information or Questionnaires.

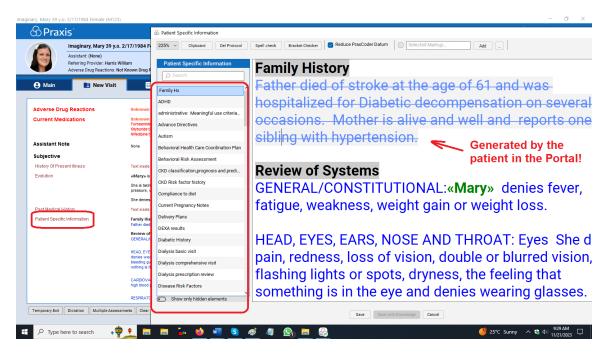


Figure 18. You can observe the labels derived from Patient-Specific Information that are employed in conjunction with Intake Forms. This dynamic process involves transforming the responses from patient questionnaires into assertions. These assertions are then seamlessly integrated into the Patient-Specific Information Section, precisely where you intend them to be displayed, all accomplished automatically.

This approach is designed so that when the completed intake form is received from the patient portal and reviewed by the provider in the incoming agent, the questionnaire seamlessly integrates with the relevant patient record, appearing exactly where you want it within the SOAP note, suitably de-emphasized, of course. This high level of integration allows your patients to complete their family histories, review of systems, or any other customized labels you create within the Patient-Specific Information section or Questionnaires, as illustrated in the figure above.

In addition to creating Yes/No, multiple-choice, and short-answer questionnaires that trigger additional questions, you can also convert each elicited response into a concise patient statement. For instance, a response of "Yes" to the question "Have you thought about ending your life recently?" would generate the statement: "She has had recent thoughts of self-harm." (Praxis automatically adjusts gender pronouns as needed.)

Furthermore, since this incoming data is discrete, you can create specific Practice Advisories that detect specific responses based on patient selection and trigger advice ("Patient reports depression and suicidal thoughts and will be referred to psychiatry"). Imagine a scenario where a patient visits you for an unrelated issue, and you might not notice this crucial information in their Patient-Specific Information, but your Praxis system does and will alert you. The additional advantage of receiving responses as discrete data is that it enables you to generate clinical reports based on the precise information patients provide in the forms ("Percentage of patients presenting with Diabetes who have expressed suicidal thoughts").

The Praxis Intake Forms have the potential to revolutionize the fields of Behavioral Health, Psychiatry, Primary Care, and open up new avenues in the field of Social Determinants of Health (<u>https://www.cdc.gov/about/sdoh/index.html</u>). The once burdensome task of filling out lengthy questionnaires, which you and your team find onerous, is often viewed very positively by your patients. Patients tend to regard physicians who ask comprehensive, pertinent questions in a positive light, as it conveys thoroughness and care. The amount of time that this will save you and your staff on a daily basis is truly impressive.

## **Telemedicine Module**

Our telemedicine module is really a virtual "Waiting Room." Your patients will easily schedule telemedicine visits through the portal and will then receive timely reminder emails and chat notifications regarding their upcoming telemedicine appointments. These appointments will be seamlessly integrated into your schedule as telemedicine visits, with additional patient reminders sent at your specified intervals.

When it's time for the telemedicine visit, patients will receive a final reminder containing a direct link to the virtual Waiting Room, which they can access at their convenience.

🛖 Home	🖬 Database		<i>=</i> ⊠ Agents	💽 Studies	📆 Query	Medical Office
Patients Here and Waiting - Provider						Pod: Def
Imaginary, Ruthie Female (206)		4 y.o.	Room 6	well child visit		08:55 AM (08:59 AM)
Imaginary, Mary Female (1515)		38 y.o.	Room 1	Sore throat for three days.		03:40 PM (03:42 PM)
Andrews, Jane Female (220)		33 y.o.	Room 5	referral for infertility		12:00 PM (12:02 PM)
Jones, Ricky Male (27)		14 y.o.	Room 3			11:05 AM (11:06 AM)
Brennan, Susan Female (175)	Т	* 14 y.o.	Telemedicine			07:50 AM (07:51 AM)
Imaginary, Mary Female (M123)	4	39 y.o.	Room 4	Patient presents with multiple problems.		06:10 PM (06:11 PM)
Lerner, Maria Female (83)		35 y.o.	Room 2	Referrered for infertility		12:20 PM (12:24 PM)

Figure 19. As soon as a patient enters the Waiting Room, their status will be displayed in the "Patient Here and Waiting" list, indicating their presence

Once your patient is in the Waiting Room, initiating the telemedicine session is a breeze. You simply need to open the patient's chart and click on the designated telemedicine button when you're ready. With a single click, both you and the patient will seamlessly transition to Zoom<sup>i</sup>, where a tele-conference meeting will be automatically set up. This eliminates the need for passwords or any additional steps. It's important to note that Zoom used for telemedicine sessions lasting less than 40 minutes are free of charge. For longer sessions, a reasonable monthly subscription fee for unlimited time is available.

## Why Choose a Third-Party Application Like Zoom?

Many of our competitors tout their own telemedicine modules, but in reality, they've essentially rebranded well-established teleconferencing systems like Zoom, marked up the price significantly, and presented it as their proprietary solution. If you've ever observed major television networks

conducting international interviews using Zoom or Skype, you might have pondered why these multi-billion-dollar networks opt for free software for their video conferencing needs. The answer lies not in cost but in quality. Established networks recognize that there's no need to reinvent the wheel when superior systems already exist, and the cost-effectiveness is an added bonus. The same principle applies here.

# **Chat Functionality**

In the near future, both the Telemedicine Waiting Room and the Patient Portal will introduce a patient chat system for seamless communication. For patients, engaging in chat is straightforward: they click on it, and they're ready to chat. However, for clinics and Praxis, it involves a more intricate process.

First, your Medical Officer will need to determine the responsible party for managing chat inquiries and establish a contingency plan for rerouting messages in case the designated person is unavailable. Second, there's the question of when to activate the chat system and when to display a message such as "Apologies, we are currently unavailable. Please leave a message, and if the issue is urgent, call 911." The clinic will have access to information about the person who contacted them and their contact number.

Furthermore, the chat system will be synchronized with the clinic scheduler, ensuring that it's active only during periods when patients are being seen. We highly value any suggestions you may have for enhancing this feature. Your input is invaluable in making this a seamless and effective communication tool.

# Communication: Faxing and Secure Emails to Consultants and Referring Providers

🔒 Home	🗖 Da	itabase	🖅 Agents	•	💽 Studies	a Query	Medical Officer	
Patient List	Referring Providers	Contact List	Pharmacies	Search Visits				Nov 09, 2023 06:
<ul> <li>→ Contacta</li> <li>→ Insurances</li> <li>→ Employers</li> <li>→ Laboratories</li> <li>→ Praxis Contacts</li> <li>→ Care Teams</li> </ul>								Messages Regular Message 31 Scheduler 2 Fast Rx VS Virtual Scop 3 Missing Data 1 Clipboard 3 Chat 3 Chat
								<ul> <li>Settings</li> <li>Open Charts</li> <li>Imaginary, Mary 39 y.a. Femde</li> </ul>

Figure 20. As you may be aware, Praxis offers a Contact Data feature that, admittedly, has seen limited use thus far. However, an exciting transformation is on the horizon. Your Praxis system will soon be equipped with the capability to effortlessly transmit documents to third parties automatically. This functionality will be facilitated through the use of Agents and Datum, which, as you know, learn from your assessments.

For more in-depth information on how Contact Data will revolutionize the process of automatic faxing and secure email transmissions, please watch this short informative video:

Contact Data Datum and Agents for Interoperability

# **Future Enhancements**

As you've noticed, these upcoming improvements are right on the horizon. Some of the features mentioned will be rolled out in the next few days, while others are scheduled for release in the coming weeks. However, these represent only a fraction of the enhancements we plan to develop, and your participation in this journey is highly valued. When we say "with your help," it's because you serve as an invaluable source of insights into new features and help shape our priorities. We can confidently state that we learn a great deal from you, and your feedback is absolutely essential to us.

In the coming year, we are dedicated to making significant improvements in medication management, with a focus on enhancing user-friendliness. We have plans for two-way interfaces with LabCorp and Quest (with some aspects addressed through Praxforms and contact data, as explained in the previous section), as well as Electronic Prior Authorizations. Additionally, we are actively working on the development of a straightforward Direct Payment System, which will be particularly beneficial for those of you who primarily work with cash-paying patients (kudos to you!). Furthermore, we are introducing a dispensing system by modifying our existing Vaccine Inventory system in Praxis. We will keep you updated on these exciting developments!

# Why C# Technology is a Game Changer

C# technology, developed by Microsoft Corporation, represents a significant breakthrough in the realm of software development. Here's why it stands out as a game changer:

Human-Centric Approach: In the world of computers, where ones and zeros are the native language, C# was conceived as a response to the challenges faced by software developers. It acknowledges that humans think in words, not binary code. Bill Gates, a visionary in this regard, recognized the need for a programming "language" that could be wielded by intelligent individuals seeking to craft instructions and computer programs. This visionary pursuit led to the rise of Visual Basic, which became Gates' claim to fame.

Object-Oriented Computing: C# is founded on the principles of Object-Oriented Computing, which closely mirrors the way humans think. We use nouns (objects), verbs (methods or events), and adjectives (properties) to structure our thought processes. C# harnesses this cognitive approach, making it easier for developers to create and manipulate objects along with their properties and methods.

Encapsulation and Heredity: C# excels in encapsulation, a pivotal aspect of Object-Oriented Programming. This feature allows objects to conceal their complexity from programmers, enabling other objects to interact with them seamlessly. Additionally, C# supports "heredity," allowing an object to be utilized by other objects with minimal code modifications, simplifying the handling of complexity.

Efficiency and Speed: Unlike its predecessor, Visual Basic, which operated on 32-bit technology, C# utilizes 64-bit technology. This transition significantly boosts performance, making software run not just twice but many times faster. This speed is crucial, especially when dealing with the intricate world of medical data.

Collaborative Development: C# technology facilitates collaborative programming efforts. Much like a team of surgeons working together on a patient, multiple programmers can join forces without hindering one another's contributions. This scalability has accelerated software development efforts.

Thanks to the remarkable capabilities of C# technology, enhancing Praxis has become more accessible and faster than ever before. We've expanded our programming team without conflicts, enabling us to develop new features at an unprecedented pace.

In the forthcoming months, Praxis is set to undergo a transformative process that promises to revolutionize the field of medicine. It will progressively shoulder an increasing portion of your

routine tasks, thereby diminishing clinical errors and alleviating professional stress. This, in turn, will liberate you to channel your energies towards innovation, creativity, and providing patient-centered care. The humdrum routines and bureaucratic chores will be efficiently managed by your computer, granting you more time and freedom to excel in your medical practice.

We extend our heartfelt thanks for your unwavering support and valuable insights. Your feedback guides us on this journey to reshape healthcare, ensuring it benefits both patients and dedicated healthcare providers.

Sincerely,

Joihul

Richard M. Low, MD CEO

Infor-Med Corporation - Praxis® Electronic Medical Records 5800 S Eastern Ave Suite 500, Commerce, CA 90040, USA Direct: (818) 264 4032 Office: (818) 592-2900 x 5 <Richard.Low@PraxisEMR.com> Direct fax: (818)743-7759 http://www.praxisemr.com

<sup>i</sup> ZOOM is a trademark of Zoom Video Communications, Inc.