



**THE ASSISTANT SECRETARY OF DEFENSE**

**1200 DEFENSE PENTAGON  
WASHINGTON, DC 20301-1200**

**HEALTH AFFAIRS**

**AUG 7 2007**

**MEMORANDUM FOR SURGEON GENERAL OF THE ARMY  
SURGEON GENERAL OF THE NAVY  
SURGEON GENERAL OF THE AIR FORCE**

**SUBJECT: Policy for Use of Structured Text in the AHLTA Clinical Encounter Note**

The clinical encounter note is the foundation for patient information in AHLTA. Its primary purpose is to document and communicate the healthcare provider's assessment and treatment plan for the patient. Second, it provides data for clinical analysis such as medical surveillance, evidence based clinical practice guidelines, and outcomes research. Third, evaluation and management coding is based upon the clinical note and business rules.

Documentation of an episode of care requires an appropriate clinical note that accurately documents and effectively communicates the patient's condition, assessment, and care and is not defined by length or number of structured text terms. Judicious use of structured text (MEDCIN) in combination with narrative (free) text or free text alone can produce a readable clinical note and provide the necessary data for surveillance, clinical analysis, and encounter coding.

The attached guidance and briefing explains the use of structured documentation in AHLTA. This policy is effective immediately, remains in effect for two years from date of signing, and may be renewed.

My point of contact for this action is LTC Thomas W. Greig, who can be reached at (703) 681-1703 or [thomas.greig@ha.osd.mil](mailto:thomas.greig@ha.osd.mil).

A handwritten signature in black ink, appearing to read "S. Ward Casscells".

S. Ward Casscells, MD

Attachments:  
As stated

**HA POLICY: 07-012**

## **Policy Guidance for Use of Structured Text in the AHLTA Clinical Encounter Note**

A standard lexicon (MEDCIN terminology) and the problem oriented medical record structure provide the basis for the AHLTA clinical narrative note and subsequent clinical analysis. AHLTA uses the Subjective, Objective, Assessment, Plan (SOAP) note format with a MEDCIN standard lexicon of defined clinical terms mapped to standard codes.

Using only structured MEDCIN text generated by AHLTA produces an encounter note that contains fragmentary sentences, lacks narrative flow, and is difficult to read. In some instances, implementation of AHLTA has placed an undo emphasis on using MEDCIN structured text. This has led to difficulties in user acceptance of AHLTA and may have contributed to unnecessary consumption of clinical resources.

The distribution of MEDCIN terms across the encounter note is more important than the raw number of terms used. This allows for clinical analysis, disease management, and practice-based research. To produce a clear understandable primary care patient encounter note, keep documentation time to a minimum, and reduce the intrusiveness of the Electronic Health Record (EHR) on the physician-patient encounter while producing a computable medical record, a combination of computable lexicon terminology (MEDCIN terms) and prose (free text) is necessary.

For example, a dozen MEDCIN terms distributed across the SOAP note in combination with free text for an established patient with a relatively simple medical complaint can produce an appropriate, readable clinical note. In this example six MEDCIN terms or node-levels in the History of Present Illness (HPI) and in the Review Of Systems (ROS), one term in the Past Medical Family Surgical and Social History (PMFSSH), and physical examination findings from five different organ systems (PE) with an appropriate level of Medical Decision Making (MDM) provide enough structured text data for surveillance, clinical analysis, and appropriate coding. The judicious addition of free text yields a clinical narrative that has time, tone, and depth.

Although AHLTA's E&M calculator provides a suggested E&M code which is partially based upon the use of structured text, the provider remains responsible for appropriate coding. The MTF Commander is responsible for training the clinical staff in ADM, diagnostic, E&M, and procedure coding as stated in Department of Defense Instruction 6040.42, Medical Encounter and Coding at Military Treatment Facilities. Regardless of the use of structured or free text the provider should confirm appropriate coding prior to signing an AHLTA note.

Judicious use of structured text (MEDCIN) in combination with narrative (free) text or free text alone can produce a readable clinical note and provide the necessary data for surveillance, clinical analysis, and encounter coding.