ABDX

A Decision Support System for the Management of Acute Abdominal Pain

Version 3.0

PROGRAMMER’S MANUAL

by

LCDR David Southerland, MC, USN
and
Karen Fisherkeller.

Released by:

R. G. Walter, CAPT, DC, USN
Commanding Officer
Naval Submarine Medical Research Laboratory

Approved for public release; distribution unlimited
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NAVAL SUBMARINE MEDICAL RESEARCH LABORATORY
NSMRL REPORT NO. 1148

Naval Medical Research and Development Command
Research Work Unit 63706N-M0095.005-5010

Approved and Released by

R. G. WALTER, CAPT, DC, USN
Commanding Officer
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THE PROBLEM:

To provide a programmer's manual for the Acute Abdominal Pain Diagnostic System (ABDX version 3.0) to allow ease of modification to ABDX.

THE FINDINGS:

The manual describes the distributed programs and the non-distributed utility programs. The BASIC source listings for all of the programs are presented. In addition, the formats for the help files, data files, and treatment protocol files are described and the ASCII texts of these files are listed where appropriate.

APPLICATION:

The information presented in this manual will allow programmers to modify ABDX as necessary to enhance its capabilities or to correct program malfunctions. This report replaces NSMRL Report No. 1113.

ADMINISTRATIVE INFORMATION

This investigation was conducted under Naval Medical Research and Development Command Research Work Unit M0095.005-5010. It was submitted for review on 28 August 1989 and approved for publication on 31 October 1989. It has been designated as Naval Submarine Medical Research Laboratory Report No. 1148.
Abstract

ABDX is a medical decision support system for the diagnosis and management of acute abdominal pain. This report is written to function as the programmer's manual for ABDX version 3.0. The report describes the functions of the distributed programs and the non-distributed utility programs and contains the BASIC source listings for the programs. In addition, the formats of the data files, help files, and treatment protocol files are described and the ASCII texts of the files are listed where appropriate.

Familiarity with Microsoft QuickBASIC is required to modify ABDX or to use this manual effectively to identify program malfunctions.

This report replaces NSMRL Report No. 1113.
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<td>H24.TXT</td>
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<td>H34.TXT</td>
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</tr>
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<td>H44.TXT</td>
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<td>C-8</td>
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<td>H15.TXT</td>
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<td>H25.TXT</td>
<td>C-11</td>
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<td>H35.TXT</td>
<td>C-12</td>
</tr>
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<td>H45.TXT</td>
<td>C-14</td>
</tr>
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<td>H55.TXT</td>
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</tr>
<tr>
<td>HELP.ASC</td>
<td>D-2</td>
</tr>
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<td>HP00.ASC</td>
<td>D-4</td>
</tr>
<tr>
<td>HP10.ASC</td>
<td>D-5</td>
</tr>
<tr>
<td>HP11.ASC</td>
<td>D-7</td>
</tr>
<tr>
<td>HP12.ASC</td>
<td>D-8</td>
</tr>
<tr>
<td>HP13.ASC</td>
<td>D-10</td>
</tr>
<tr>
<td>HPT10.ASC</td>
<td>D-11</td>
</tr>
<tr>
<td>HPT12.ASC</td>
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<td>TX2.ASC</td>
<td>E-7</td>
</tr>
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<td>TX3.ASC</td>
<td>E-11</td>
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<td>TX4.ASC</td>
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<tr>
<td>TX5.ASC</td>
<td>E-19</td>
</tr>
<tr>
<td>TX6.ASC</td>
<td>E-22</td>
</tr>
<tr>
<td>TX7.ASC</td>
<td>E-26</td>
</tr>
<tr>
<td>TX8.ASC</td>
<td>E-30</td>
</tr>
<tr>
<td>TX9.ASC</td>
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<tr>
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</tr>
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<thead>
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<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABDX</td>
<td>G-1</td>
</tr>
</tbody>
</table>
1. Intro to ABDX Programmer’s Manual

ABDX is the Abdominal Pain Diagnostic program developed for the diagnosis and medical management of acute abdominal pain by Independent Duty corpsmen aboard submarines.

Since the publication of the ABDX Programmer’s manual, Naval Submarine Medical Research Laboratory (NSMRL) Report # 1113, a gynecological database, updated treatment protocols, EGA support, and color have been added. A new manual is necessary to document the new program.

1.1 Purpose of the Programmer’s Manual

The purpose of this manual is to document the actual program listings to aid any future modifications to ABDX version 3.0. This report is a programmer’s manual. It contains a brief description of each program and its listing. This manual should be used by a programmer familiar with Microsoft BASICA or QuickBASIC. The manual will not be useful to other readers.

The original programmer’s manual for the TEKTRONIX based program (Report #974, "Computer-Assisted Diagnosis Program for Acute Abdominal Pain Program Elements") was published in 1982 and contains much useful information on the original TEKTRONIX version of the program. NSMRL Report No.1113 documented ABDX version 2.0, the first version to run under MS-DOS.

1.2 Background of ABDX

The original program was implemented on the TEKTRONIX 4051 which was available at sea for partial use by the corpsman. In practice, the corpsman did not have adequate access to the machine and NSMRL felt that the Medical Department needed its own small microcomputer. At the time this decision was made, the MS-DOS based laptop microcomputers were the only promising compact microcomputers available. The diagnostic module was then rewritten and enhancements added to allow it to run under MS-DOS.

The only MS-DOS language compilers available at NSMRL were Microsoft BASICA and Microsoft Pascal. BASICA was chosen as the programming language since it had built-in graphics functions and Pascal did not. Also, the original program was written in TEKTRONIX BASIC and we felt that it would be easier to port the program to another dialect of BASIC than to change to an entirely different language. In retrospect, TEKTRONIX BASIC differs so much from BASICA that neither time nor effort was saved by rewriting the program in BASICA.

During conversion of the program to MS-DOS, we found that we wanted to improve the user interface. Modifications were made to the program throughout the conversion based on opinions expressed by individuals observing different interfaces we were testing. The procedure of modifying the interface as different parts were developed resulted in an acceptable user interface, but required much patch work to allow the program to function as we desired. Therefore the source code of the program is
somewhat difficult to follow, but this was a necessary trade-off to have a working program in a reasonable amount of time. Future enhancements to the program will result in a more modular format to the program source code.

The initial IBM PC version of the program ran under the BASICA interpreter. This allowed the programmers to run changes immediately without having to re-compile the program. Afterwards, the program was compiled using the BASICA compiler.

The latest version of the program is compiled with Microsoft QuickBASIC 4.0. Microsoft QuickBASIC has superseded BASICA. When the QuickBasic compiler was obtained, new modifications were coded using the QuickBasic syntax (i.e., line numbers not essential, new statements, subprograms, etc).

The program will run on a machine with 512 kilobytes of RAM, and may run on a machine with less memory, but we have no microcomputers with less than 512K at NSMRL. The ABDX system takes approximately 410 kilobytes of disk storage, so it will not run on a 360 kilobyte floppy. It will run on a 3 1/2 inch floppy or a 5 1/4 high density floppy.

2. Description of the Distributed Program Files.

There is one executable program (ABDX.EXE) distributed with the ABDX system. It is the main program. The separately compiled modules ABDX.BAS, ABDXNARA.BAS, TEMPLATE.BAS, DATES.BAS, ABDXONLY.BAS, ABDXSHAR.BAS, ABDXSUB1.BAS, ABDXSUB2.BAS, ABDXSUB3.BAS, ABDXSUB4.BAS, ABDXSUB5.BAS, ABDXSUB6.BAS, FSF600.BAS, FPRINT.ASM, INTRPT.ASM, and CIPHER.C are linked together to form the single executable file, ABDX.EXE.

3. Description of Programmer’s Utility Files.

The following programs are not included in the distributed ABDX system, but are useful to the programmer.

3.1 ABDXSTAT.BAS

This program is similar to ABDX and allows the user the ability to modify or delete any real case stored in the database. The simulated case and SF-600 generation routines are unavailable to make room on the Main Option Page for the new selections.

3.2 CONVTEXT.BAS

This program converts ASCII files to and from encrypted data files using the current method of encryption. Also, if the ASCII file was run thru WORD using the TTYPF.PRD printer driver and the DOC.STY stylesheet, this program will automatically add the page formatting to the encrypted data file.

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3.3 CRYPTDAT.BAS

This program converts ASCII files to and from encrypted data files using the current method of encryption. This program is used for ASCII files with text only. If dealing with DATA statements, the word "DATA " and double quotes must be stripped out before using this program. Note that this program does just a straight encryption/decryption. No page formatting is done. For encrypted help files, use CONVTEXT.BAS program.

3.4 INSTALL.BAS

This program installs the ABDX system on a hard drive from a distribution floppy. The program prompts the user for the desired hard drive and sub-directory where the ABDX files will reside. It creates the subdirectory if necessary and un-compresses the files from a single compressed file ABDXPARK.EXE. It also creates batch files in the root directory of drive C: to start the program and to make backups of the patient data to a floppy disk.

3.5 OLDCONV.BAS

This program converts ASCII files to and from encrypted data files using the old method of encryption ("David was here once ... "). This program will be used only to get ASCII text from data files in old versions of the diagnostic programs.

3.6 PACKDATA.BAS

This program packs the database (including a priori data) into a compressed file for use by ABDX. The database is supplied as an ASCII file containing the probabilities as numbers between 0.1 and 100 in BASIC DATA statements. Any probability under 128 is placed in a single byte using CHR$(). If the probability is < 1, then that number is multiplied by 10 (to get a whole number) and then added to 128.

3.7 TRAINCAS.BAS

This program creates a binary file ABDKRN.DAT, containing the fifty training cases used in the program.

3.8 TXTMAKE.BAS

This program will take an input ASCII file containing the all definitions of questions used in ABDX and create the appropriate .TXT files used by ABDX.
4. Description of Data Files.

The following files contain information modified by the user.

4.1 REAL.DAT

This is the data file containing the real cases entered. Every time a real case is stored, the case information is appended to the end of this file. If the file does not exist, then it is created.

The data file is a random access file of length 128. Each record contains ten variables which are listed below along with their position in the 128 byte string and a brief description of the variable. Remember that in Microsoft BASIC, all data must be converted to strings before being saved in a random access file.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Starting Position</th>
<th>Length</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSN$</td>
<td>1</td>
<td>11</td>
<td>SSN including hyphens.</td>
</tr>
<tr>
<td>AGE$</td>
<td>1</td>
<td>22</td>
<td>Age as a string.</td>
</tr>
<tr>
<td>A$</td>
<td>14</td>
<td>26</td>
<td>Responses in packed format.</td>
</tr>
<tr>
<td>OTHER$</td>
<td>40</td>
<td>40</td>
<td>&quot;Other&quot; diagnosis entered by HM.</td>
</tr>
<tr>
<td>STARTTIMES$</td>
<td>80</td>
<td>5</td>
<td>Time of exam as a string.</td>
</tr>
<tr>
<td>STARTDATE$</td>
<td>85</td>
<td>10</td>
<td>Date of exam as a string.</td>
</tr>
<tr>
<td>HMDX</td>
<td>95</td>
<td>2</td>
<td>HM's DX; use CVI().</td>
</tr>
<tr>
<td>SIMULATE</td>
<td>97</td>
<td>2</td>
<td>0 = Simulate; 1 = Real; use CVI().</td>
</tr>
<tr>
<td>MAXNUM</td>
<td>99</td>
<td>2</td>
<td># of computer's DX (1-6); use CVI().</td>
</tr>
<tr>
<td>MAXPROB</td>
<td>10</td>
<td>12</td>
<td>Maximum probability of computer's DX; use CVI().</td>
</tr>
</tbody>
</table>

4.2 SETUP.DAT

This line sequential ASCII file is called by the SF600.BAS module. It contains on separate lines seven printer characteristics used in printing the SF600. These characteristics are:

a. LEFTMAR1 = left margin of the front page of the SF600.
b. LEFTMAR2 = left margin of the back page of the SF600.
c. TOP1 = Top margin of the front page of the SF600.
d. TOP2 = Top margin of the back page of the SF600.
e. BOP1 = Bottom margin of the front page of the SF600.
f. BOP2 = Bottom margin of the back page of the SF600.
g. LINWIDTH = Width of each line.
If the file does not exist, it is created the first time SF600.BAS checks for it. The contents of the default file appear at the top of the next page.

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>44</td>
</tr>
<tr>
<td>56</td>
<td>66</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4.3 SHIP.DAT

A four line sequential ASCII file containing on separate lines the ship name, ship hull number, the corpsman's name as signed on the SF-600, and the corpsman's SSN (or blank line if the corpsman desires no SSN to be printed on the SF600). An example file looks like this:

```
USS NSMRL
SSN 999
ARTHUR DENT
123-45-6789
```

4.4 SIMUL.DAT

This data file contains the simulated cases entered by the user. The format of the file is exactly the same as that of REAL.DAT (See REAL.DAT for format information).

4.5 ABDGRAPH.DAT

This ASCII data file contains information on the type of monitor. The format of the file is a single character terminated with a CR-LF combination. The single character is "C" if a color monitor is present or "M" if a monochrome monitor is used.

5. Description of Database Files.

5.1 FEMABD.DAT

This file contains the Bayesian database information for the gynecological database. It also contains the a priori information used with the database. PACKDATA.BAS takes FEMABD.BAY as input and creates this file. The format of the file is a random access file with a record length of seven (i.e., the number of diseases considered) bytes and total number of record equals the total number of responses in ABDX.
5.2 REGABD.DAT

This file contains the Bayesian database information for the "regular" non-gynecological database. It also contains the a priori information used with the database. PACKDATA.BAS takes REGABD.BAY as input and creates this file. The format of the file is a random access file with a record length of X bytes and total number of record equals the total number of responses in ABDX. X is seven, the number of diseases considered by the database; however, dyspepsia is combined with NONSAP to give a total of six disease categories.

6. Description of Definition Files.

Each of the following files contains the definitions for the questions on its associated display page. The definition files are not encrypted and are sequential ASCII files. Each line has a single digit number followed by a comma and then a text string. The number refers to the relative question number on the page. The program will compare the single digit number on every line with the relative number of the question for which a definition is desired. For every number match, the corresponding text string is printed. When the number in the file exceeds the number of the question, all text associated with that question has been printed. The last line of the text file will be the last line of the highest numbered question on that page. Do not have extra carriage returns at the end of the file or the program will lock up. If your text editor places extra carriage returns at the end of the file, you can add another line at the end of the text that contains a number higher than the highest numbered question followed by a comma and several spaces or other characters. That line will never be printed, but will show the computer where the last question ends. A sample definition file for a page with three questions appears at the top of the next page.

| 1, This is text associated with the first question on the page. |
| 2, This text goes with question 2 |
| 3, This text goes with question 3. |
| 3, Notice that the definition may be longer than one line |
| 3, and that the last line of the file must have a single digit number greater that the number of questions on the page. |
| 4, This will never be printed. |

6.1 H14.TXT

This is a sequential ASCII file containing the help text for page 1 of the History section. SITE OF PAIN(onset) and SITE OF PAIN(now) are defined.

6.2 H24.TXT

This is a sequential ASCII file containing the help text for page 2 of
the History section. TYPE OF PAIN, SEVERITY OF PAIN, AGGRAVATING FACTORS, PROGRESS OF PAIN, DURATION OF PAIN, and RELIEVING FACTORS are defined.

6.3 H34.TXT

This is a sequential ASCII file containing the help text for page 3 of the History section. NAUSEA, VOMITING, BOWELS, APPETITE, JAUNDICE, and URINATION are defined.

6.4 H44.TXT

This is a sequential ASCII file containing the help text for page 4 of the History section. PREVIOUS INDIGESTION, PREVIOUS SIMILAR PAIN, PREVIOUS SURGERY, PREVIOUS ILLNESS, and TAKING MEDICATIONS are defined.

6.5 H54.TXT

This is a sequential ASCII file containing the help text for page 5 of the History section. Page 5 is displayed only if the patient is female. PERIODS, LAST PERIOD, VAGINAL D/C, PREGNANCY, FAINT/DIZZY, and PREV GYN HX are defined.

6.6 H15.TXT

This is a sequential ASCII file containing the help text for page 1 of the Physical Exam section. TEMPERATURE (F), PULSE RATE, BP (Systolic), and BP (Diastolic) are defined.

6.7 H25.TXT

This is a sequential ASCII file containing the help text for page 2 of the Physical Exam section. MOOD, COLOR, and WBC COUNT are defined.

6.8 H35.TXT

This is a sequential ASCII file containing the help text for page 3 of the Physical Exam section. INSPECTION, SCARS, GUARDING, RIGIDITY, BOWEL SOUNDS, DISTENTION, and MASSES are defined.

6.9 H45.TXT

This is a sequential ASCII file containing the help text for page 4 of the Physical Exam section. TENDERNESS is defined.

6.10 H55.TXT

This is a sequential ASCII file containing the help text for page 5 of the Physical Exam section. MURPHY'S SIGN, REBOUND TENDERNESS, RECTAL EXAM, and VAG EXAM are defined. The VAG EXAM definition is available only if the patient is female.
7. Description of Help Files.

The following files are help files used throughout the program. The files are BASICA random access files with a record length of 75 characters. Each record is encrypted. The method of decryption involves first shortening the record string by removing the spaces that were added by BASIC in order to pad each record string out to the proper length. Then each two character segment (equivalent to one word) of the shortened record string is exclusive OR'ed (XOR'ed) with each two corresponding characters of a 75 character "key" string and is also XOR'ed with the 2 byte word &H3A73. The resulting string is now decrypted and appears as a normal ASCII string.

A "|" in the first column of the decrypted string marks the end of a display page. A "|" in the second column marks the end of the text file. Columns 3-15 contain page information which is printed in the lower right corner of the screen. Columns > 15 contain the record number of the first line of the previous page. If the number is negative, then the current page is the first page.

The strings were encrypted by performing the XOR procedure above; i.e., XOR once to encrypt, XOR again to decrypt. The same procedure was used on the treatment protocol files.

The help files and tx protocols are maintained in Microsoft WORD.DOC format. Use the DAT.STY style sheet, especially the MD division style sheet. The files can be easily modified within WORD and printed to a file using the TTYFF printer driver. Then the print file can be entered into CONVTEXT program, which will read it, encrypt it, compute page pointers, and create the appropriate .DAT random access file for use by ABDX.

The TTYFF driver inserts a CR as the first character to cause printing to begin at the beginning of a line. The CONVTEXT program automatically removes it if present.

A temporary file T$EMP.$AT will be written, and it will be used for input for making the encrypted .DAT file. You can still use files with the "|". Just make sure that you count correctly and end each file with "|"; make sure that there are no FF's in the file. If you use files with "|", no temporary file is created.

NOTE: You can use any word processor to maintain the files as long as you set the page length to 22 lines, set the page width to 74, and set the top, bottom, left, and right margins to 0. In addition, you need a printer driver which will print to disk using form feeds as end of page markers instead of filling out the end of the page with carriage return/line feed characters.

7.1 HABCT.DAT

This encrypted file contains general information for selecting the proper database to use if the patient is female.

7.2 HELP.DAT
This encrypted file contains general information for the program.

7.3  HP00.DAT

This encrypted file contains the help text for the Corpsman's Diagnosis Page.

7.4  HP10.DAT

This encrypted file contains the help text for the Diagnostic Summary Page.

7.5  HP11.DAT

This encrypted file contains the help text for the Treatment Summary Page.

7.6  HP12.DAT

This encrypted file contains the help text for the Main Options Page.

7.7  HP13.DAT

This encrypted file contains the help text for the Data Entry Options Page.

7.8  HPT10.DAT

This encrypted file contains the help text for the Training Diagnostic Summary Page.

7.9  HPT12.DAT

This encrypted file contains the help text for the Training Option Page.

7.10 HSF00.DAT

This encrypted file contains the help text for selecting the desired output device in the SF600 generation portion of the program.

8. Description of Treatment Protocol Files.

The following files contain the treatment protocols for each of the diagnoses considered in the program. The files are BASICA random access files with a record length of 75 characters. Each record is encrypted. The method of decryption involves first shortening the record string by removing the spaces that were added by BASIC in order to pad each record string out to the proper length. Then each two character segment (equivalent to one word) of the shortened record string is exclusive OR'ed (XOR'ed) with each two corresponding characters of a 75 character "key" string and is also
XOR'ed with the 2 byte word &H3A73. The resulting string is now decrypted and appears as a normal ASCII string.

A "|" in the first column of the decrypted string marks the end of a display page. A "|" in the second column marks the end of the text file. Columns 3-15 contain page information which is printed in the lower right corner of the screen. Columns > 15 contain the record number of the first line of the previous page. If the number is negative, then the current page is the first page.

The strings were encrypted by performing the XOR procedure above; i.e., XOR once to encrypt, XOR again to decrypt. The same procedure was used on the help files.

These files have been maintained in Microsoft WORD format. See 7. Description of Help Files for more information.

8.1 TX1.DAT
This is the encrypted treatment protocol for Appendicitis.

8.2 TX2.DAT
This is the encrypted treatment protocol for Non Specific Abdominal Pain.

8.3 TX3.DAT
This is the encrypted treatment protocol for Renal Colic.

8.4 TX4.DAT
This is the encrypted treatment protocol for Perforated Duodenal Ulcer.

8.5 TX5.DAT
This is the encrypted treatment protocol for Cholecystitis.

8.6 TX6.DAT
This is the encrypted treatment protocol for Small Bowel Obstruction.

8.7 TX7.DAT
This is the encrypted treatment protocol for Pelvic Inflammatory Disease.

8.8 TX8.DAT
This is the encrypted treatment protocol for Urinary Tract Infection.

8.9 TX9.DAT
This is the encrypted treatment protocol for Ovarian Cyst.

8.10 TX10.DAT

This is the encrypted treatment protocol for Ectopic Pregnancy.

8.11 TX11.DAT

This is the encrypted treatment protocol for Threatened Abortion.

9. Description of Miscellaneous Files.

The following files are grouped here for convenience.

9.1 ABDSX.DAT

This encrypted sequential file contains a list of the responses for the History and Physical Exam sections of the datasheet. It is called by ABDX.BAS to display the history items marked by the user if SHOW H & P or SHOW MISSED ITEMS is selected while on the Diagnostic Summary Page. It is created by CRYPTDAT.BAS with its ASCII version, ABDSX.ASC, as input.

9.2 ABURN.DAT

This binary data file contains history and physical examination information for each of the fifty training cases used in the program. Each case consumes 26 bytes, giving this file a total length of 1300 bytes. The compression method is the same one used when storing real and simulated cases. It is created by TRAINCAS.BAS.

9.3 EESTQUES.DAT

This encrypted sequential file contains questions or statements for the corpsman to consider in differentiating his diagnosis from the computer generated diagnosis, if the gynecological database is used. The format is:
xx yy zz Disease 1 vs Disease 2

Consider Disease 1 if ...
Consider Disease 2 if ...
Consider neither if ...

Disease 1 vs Disease 3

Consider Disease 1 if ...
Consider Disease 3 if ...
Consider neither if ...

xx yy zz Disease 1 vs Disease 4

etc.

xx is a number identifying the two diseases being contrasted. Since the seven gynecological diseases can be numbered sequentially, it is computed by taking the smaller number of the two diseases and placing it in the ten's position, while the larger number is placed in the unit's position. This ensures that the same text is chosen whether the corpsman's diagnosis is Disease 1 and the computer's diagnosis is Disease 2 or vice versa.

yy is the number of lines of text, and zz is the number of characters in the longest line of the text. The phrase "Disease 1 vs Disease 2" is just a heading for your convenience. It is not displayed in the program. It is created by CRYPTDAT.BAS with its ASCII version, BESTQUES.ASC, as input.

9.4 PHRASE.DAT

This encrypted sequential file is used by the SF-600 generation module SF600.BAS to generate a patient narrative for the medical record. Each line contains a number occupying the first two positions of the line. The remainder of the line comprises a phrase associated with the response identified by the number. The file is created by CRYPTDAT.BAS from the input file PHRASE.ASC.

9.5 SUBPIC.BIN

This binary file contains the submarine or other vessel picture drawn at the beginning of the program. It is loaded directly into video RAM with the BASIC command BLOAD. The file was created by saving the desired graphics screen using BSAVE to dump the video RAM ($HB800 - $HBC00) to the file.

This file is unnecessary. If it is not present, the ABDX will display the name and vessel for whom the program has been configured.

10. Compilation/Linking Routine

The files with the .BAS extension will compile using the QuickBASIC 4.0 (or greater) compiler BC.EXE. The assembly language routines were compiled.

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with the Microsoft MACRO Assembler Version 5.1, MASM.EXE, but they also compile with versions as early as 1.27 if the 5.0 specific .MODEL commands are replaced with the conventional model designations. Microsoft QuickC version 1.0 was used to compile CRYPT.C. LINK.EXE, the Microsoft linker, should be version 3.05 or greater to use the /E option which will reduce the disk storage size of the program.

MAKE is a neat utility used to compile the different files as necessary and link them together to create ABDX.EXE. MAKE allows you to re-compile just those files which have changed since you last compiled the program. MAKE was included with QuickC.

ABDX (no extension) is the MAKE script file used to compile ABDX.EXE. It is listed in Appendix G.

11. Installation Routines

Before distribution, all necessary files are compressed into a single file using PKZIP. The single file is then converted into ABDXPAK.EXE which when run, un-compresses itself into the original files.

The user receives a distribution disk containing three files. The first file is ABDXPAK.EXE. The second file is a compiled QuickBASIC program INSTALL.EXE which the user runs to install ABDX on the target computer. The third file is an ASCII sequential file containing multiple lines (approximately 50) of the letter "Y" followed by carriage return/line feed characters and is used by the installation program if the program is installed in the same sub-directory as a previous version of the program.

For the user to install the program, he places the distribution diskette in a floppy drive and makes the floppy drive the default drive. Then he enters INSTALL and follows the directions. The install program will ask him for the drive and subdirectory in which to place the ABDX. It will create two batch files in the root directory of drive C:. ABDCOMEN.BAT is used to start the program. ABDBKUP.BAT is used to backup the data files to a floppy in drive A:.
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Appendix A
Distributed Program Listings

ABDX.BAS

DECLARE SUB UnPackDatabase (filename$, VARIABLE!(), APRIORI#(), arraywidth%, arraylength%)
DECLARE SUB encipher CDECL (a$)
DECLARE SUB decipher CDECL (a$)
DECLARE SUB CompareFemDXes (HMDX%, MAXNUM%)
DECLARE SUB TextPause ()
DECLARE SUB SetVideoMode (vm%)
DECLARE SUB experimental ()
DECLARE FUNCTION Translate% (HMDX%)
DECLARE SUB SF600 (BOAT1$, BOAT2$, HMNAM$, HMSSN$)
DECLARE SUB CompareAbdDXes (COMPAR%(), VARIABLE%(), MAXNUM%, HMDX%, QUESTPTR%(), QUESTIONS$())
DECLARE FUNCTION Centered% (s$)
DECLARE SUB SelectDatabase (lookatfemale%, VARIABLE%())
DECLARE SUB ComputeFinalProbs (NUMDISEASES%, MAXNUMBER%, MAXPROBABILITY%, PROB#(), FINALPROB#())
DECLARE SUB TXMenu (MAXNUM%, Ptsex$)
DECLARE SUB MaleGraph (FINPROB#())
DECLARE SUB DisplayEncryptedFile (TheFile$, ReturnPage%)
DECLARE SUB FemaleGraph (FINPROB#())
DECLARE SUB TextDxPause ()
DECLARE SUB PutCase (whichcase%, VARIABLE%(), SSN$, AGE$, OTHER$, STARTIME$, STARTDATE$, HMDX%, SIMULATE%, MAXNUM%, MAXPROB%)
DECLARE SUB ResetVariables (VARIABLE%(), sex$, SSN$, AGE$, STARTIME$, STARTDATE$)
DECLARE SUB MenuSummaryPage (menurow%, menucol%, NR%, resplength%, exitchar$, menuheading$, Choices$(), HELPFILE$)
DECLARE SUB MenuEntryPage (NR%, resplength%, exitchar$, DATAHEADING$, menuheading$, Choices$(), HELPFILE$)
DECLARE SUB GetCase (filnam$, whichcase%, VARIABLE%(), SSN$, AGE$, OTHER$, STARTIME$, STARTDATE$, HMDX%, SIMULATE$, sex$)
DECLARE SUB PackArray (PackString$, thearray%)}
DECLARE SUB ModifyNarrative (CASENUM%, escflag%)
DECLARE SUB UnPackArray (PackString$, thearray%)}
DECLARE SUB DisplayHPgetstatments (SXloc%(), SXresp$( ), abortHP%)
DECLARE SUB DisplayMissedHP (SSN$, STARTIME$, STARTDATE$, VARIABLE%(), THECASE%())
DECLARE SUB DisplayHProwcol (row%, col$, sxstrng$)
DECLARE SUB CenterString (infostring$)
DECLARE SUB DisplayHPFrame (TRAINING%, SIMULATE%, SSN$, STARTTIME$, STARTDATE$)
DECLARE SUB DisplayHP (TRAINING%, SIMULATE%, SSN$, STARTTIME$, STARTDATE%, VARIABLE%())
DECLARE SUB DisplayHPprint (HP%, SXloc%(), SXresp$(), VARIABLE%())
DECLARE SUB TextContinuePrompt ()
DECLARE SUB DisplayHPHelp ()
DECLARE SUB DisplayHPTitle (HP%)
DECLARE FUNCTION Exists! (FIL$)
DECLARE SUB PaintGraph (VAR%, WhichOne%) 
DECLARE SUB DrawGraph (WhichOne%)
DECLARE FUNCTION VideoMode% ()
DECLARE SUB DataEntryPage (exitchar$, question$(), ChoicesSQ, VariablePtr!, MULTIP!, SKIPBLANK%, Numresp%, None%, GraphFlag%, VARIABLE%, NUMCOLIQUESTS%, TOPROW%, TOPCOL%, NUMQUEST%, DATAHEADINGS, PAGEOF$, OFFAGE$, HELPFILE$, STFLAG%)
DECLARE SUB PutCursor (quest%, resp%, Choices$())
DECLARE SUB UpdateAsterisk (FirstRow%, FirstCol%, NonePtr!, VariablePtr%, GraphFlag%, Numresp%, OffSet%, VARIABLE%())
DECLARE SUB LocateCenter (crow%, infostring$)
DECLARE SUB HPframe ()
DEFINT A-Z
DECLARE SUB SexSSNAgeDate (STFLAG%, TRAINING%, SIMULATE%, sex$, SSN$, AGE$, STARTDATE$, STARTTIME$, VARIABLE!())
DECLARE SUB InitializeColors (graphmode$, monmode$)
DECLARE SUB GetGraphMode (graphmode$, monmode$)
DECLARE SUB SetColor (thecolor!)
DECLARE SUB hpresposnPRINT (a$)
DECLARE SUB textPRINT (a$)
DECLARE SUB questionPRINT (a$)
DECLARE SUB headingPRINT (a$)
DECLARE SUB responsePRINT (a$)
DECLARE SUB SetUpTrainingColors (TRAINING%) 
DECLARE SUB SetFrameColor ()
DECLARE SUB SetNormalColor ()
DECLARE SUB SetScreenMode (ScrnMode!)
DECLARE SUB GetKey (a$)
DECLARE SUB narrative (NR%, CASENUM%, THECASE%())
DECLARE SUB LoadTrainingCase (CASENUM%, THECASE%())
DECLARE SUB frame (ulr%, ulc%, numlines%, length%, frametyp%) 
DECLARE SUB GetBoatStuff (BOAT1$, BOAT2$, HMNAM$, HMSSN$,
                 VersionNumber$)
DECLARE SUB Disclaimer (VERSION$)
DECLARE SUB GraphContinuePrompt ()
DECLARE SUB BoxSelections (actyl%, XPOINT%, NumOfResp%, Xwidth%)

` $INCLUDE: 'include.bas'
black% = 0

blue% = 1
green% = 2
cyan% = 3
red% = 4
magenta% = 5
brown% = 6
white% = 7
gray% = 8
ltblue% = 9
ltgreen% = 10
ltcyan% = 11
ltred% = 12
ltmagenta% = 13
yellow% = 14
hiwhite% = 15

'     Dummy values so that variables are declared in main module. They
'      are
'      modified shortly by SetTrainingColors.
headingcolor% = 1
framecolor% = 1
frametype% = 1

REM Copyright (C) 1985,1986,1987,1988 Navy Submarine Medical Research
Laboratory
KEY OFF
RANDOMIZE TIMER
DEFINT A-Z
REM $DYNAMIC
DIM VARIABLE%(200)
DIM question%(10), MULTIP%(10), Numresp%(10)
DIM None(10), GraphFlag(10), SKIPBLANK(10), VariablePtr(10)
DIM Choices$(10, 14)
DIM QUESTPTR%(44), QUESTIONS$(44), DIFFER%(15)
DIM BAYES!(154, 7), PROB%(7), FINPROB%(7), APRIORI%(7)
DIM FEMBAYES!(174, 7), FEMPROB%(7), FEMFINPROB%(7), FEMAPRIORI%(7)
DIM actrow%(MAXQUESTIONS%)
    DIM COMPAR%(6, 6, 15)
DIM THECASE%(200), INARRAY%(7), OUTARRAY%(7), bargraph%(7)

'  male = 0
'  female = 1

' the following is added for testing purposes, but allows the program
' to be used normally, if "test" is not used at the command prompt.
' ie, ABDX test <CR>.
IF COMMAND$ = "TEST" THEN
    davidflag% = 1
ELSE
  davidflag% = 0
END IF

VersionNumber$ = "3.00"
VERSION$ = "(ver " + VersionNumber$ + ")"

TRAINING = 0  ' 0 - main ;  1 - training
STFLAG = 0    ' 0 - no changes; 1 - changes have been made
SIMULATE = 1   ' 1 - main ; 0 - simulated (I know, I know!)

CAL Call SetTrainingColors(TRAINING)
REM main prog > TRAINING=0; training prog > TRAINING=1

CALL GetGraphMode(graphmode$, monmode$)
' Set up graphics mode default (checked for CGA or EGA in graphmode$)
CALL InitializeColors(graphmode$, monmode$)
' Initialize display page colors
CALL SetTrainingColors(TRAINING)
' BIOS to appropriate 80 col text mode
IF monmode$ = "C" THEN
  ' CALL SetVideoMode(3)   'screen 0, 80 col, color
ELSE
  ' CALL SetVideoMode(2)   'screen 0, 80 col, B&W
END IF

' Get name of vessel, user's name, and display submarine if present.
CALL GetBoatStuff(BOAT1$, BOAT2$, HMNAM$, HMSSN$, VersionNumber$)
' Go to subroutine to enter Bayesian probabilities, response and category names, and clear array variable.
GOSUB 60000
CALL GetKey(a$)
' Subprogram which displays warning/disclaimer.
CALL Disclaimer(VERSION$)

SELECT CASE GRAPHICS
CASE 9
  Vertbits = 14
  YOffsetpict = 4
CASE 2
  Vertbits = 8
  YOffsetpict = 6
CASE ELSE
Vertbits = 8
YOffsetpict = 6
END SELECT
GOTO 31000

' REM Enter SS#, Age.
30 CALL SexSSNAgeDate(STFLAG, TRAINING, SIMULATE, sex$, SSN$, AGE$, STARTDATES$, STARTTIMES$, VARIABLE$())

100 REM Data Entry Option Page
   ' Set/Reset flag for frame drawing on H&P pages
   FrameFlag = 0

   ' Choices for Main Option Page.
   Choices$(l, 1) = "GO TO HISTORY PAGES"
   Choices$(l, 2) = "GO TO PHYSICAL EXAM PAGES"
   Choices$(l, 3) = "MAKE DIAGNOSIS"
   Choices$(l, 4) = "GO TO SSN/AGE/TIME PAGE"
   Choices$(l, 5) = "RETURN TO MAIN OPTION PAGE"
   IF TRAINING = 1 THEN
      Choices$(l, 5) = "GO TO TRAINING OPTION PAGE"
      TYP$ = "Training"
   ELSE
      TYP$ = ""
   END IF

   ' New method for menu
   NR% = 1
   resplength% = 5
   DATAHEADING$ = "Abdominal Pain Diagnosis" + TYP$ + "Program" + VERSION$
   menuheading$ = "Data Entry Options:
   HELPFILE$ = "HP13.DAT"
   CALL MenuEntryPage(NR%, resplength%, exitchar$, DATAHEADING$, menuheading$, Choices$(), HELPFILE$)
   ON NR GOTO 1000, 5000, 50000, 30, 31000
   GOTO 100

1000 REM PAGE 1 of Hx. Similar to above page.
   IF sex$ = FEMALE$ THEN
      MaxHxPages$ = "5"
   ELSE
      MaxHxPages$ = "4"
   END IF

1010 NUMQUEST = 2
NUMCOL1QUESTS = 1
TOPROW = 4
TOPCOL = 19
HELPFILE$ = "H14.TXT"
DATAHEADING$ = "   History   
PAGEOF$ = "1"
OFPAGE$ = MaxHxPages$

FOR i = 1 TO 2
  question$(i) = QUESTIONS$(i)
  MULTIP%(i) = 1
  Numresp%(i) = QUESTPTR%(i)
  None(i) = 13
  GraphFlag(i) = i
  SKIPBLANK(i) = 2
  Choices$(i, 1) = "RUQ"
  Choices$(i, 3) = "RLQ"
  Choices$(i, 5) = "UPPER HALF"
  Choices$(i, 7) = "RIGHT HALF"
  Choices$(i, 9) = "CENTRAL"
  Choices$(i, 11) = "RIGHT FLANK"
  Choices$(i, 12) = "LEFT FLANK"
  Choices$(i, 13) = "NO PAIN"
NEXT i

VariablePtr(1) = 11
VariablePtr(2) = 24

CALL DataEntryPage(exitchar$, question$(), Choices$(),
VariablePtr%(), MULTIP%(), SKIPBLANK%(), Numresp%(), None%(),
GraphFlag%(), VARIABLE%(), NUMCOL1QUESTS%, TOPROW%, TOPCOL%,
NUMQUEST%, DATAHEADING$, PAGEOF$, OFPAGE$, HELPFILE$, STFLAG%)

IF exitchar$ = "P" THEN 100
IF exitchar$ = "X" THEN 100

2000 REM Page 2 of Hx
' Multip (Whether Multiple Responses are Possible (1)
' or Not (0)); and Numresp (Number of Symptoms in Each Category).

NUMQUEST = 6
NUMCOL1QUESTS = 3
TOPROW = 4
TOPCOL = 7
HELPFILE$ = "H24.TXT"
DATAHEADING$ = "   History   
PAGEOF$ = "2"
OFPAGE$ = MaxHxPages$
FOR i = 1 TO NUMQUEST
  Numresp%(i) = QUESTPTR%(i + 2)
NEXT i

question$(1) - QUESTIONS$(3)
Choices$(1, 1) - "Intermittent"
Choices$(1, 2) - "Steady"
Choices$(1, 3) - "Colicky"
VariablePtr(1) = 37
MULTIP(1) = 0
None(1) = 0
GraphFlag(1) = 0
SKIPBLANK(1) = 0

question$(2) - QUESTIONS$(4)
Choices$(2, 1) - "Moderate"
Choices$(2, 2) - "Severe"
VariablePtr(2) = 40
MULTIP(2) = 0
None(2) = 0
GraphFlag(2) = 0
SKIPBLANK(2) = 1

question$(3) - QUESTIONS$(5)
Choices$(3, 1) - "Movement"
Choices$(3, 2) - "Cough"
Choices$(3, 3) - "Breathing"
Choices$(3, 4) - "Food"
Choices$(3, 5) - "Other"
Choices$(3, 6) - "None"
VariablePtr(3) = 42
MULTIP(3) = 1
None(3) = 6
GraphFlag(3) = 0
SKIPBLANK(3) = 3

question$(4) - QUESTIONS$(6)
Choices$(4, 1) - "Better"
Choices$(4, 2) - "Same"
Choices$(4, 3) - "Worse"
VariablePtr(4) = 48
MULTIP(4) = 0
None(4) = 0
GraphFlag(4) = 0
SKIPBLANK(4) = 0

question$(5) - QUESTIONS$(7)
Choices$(5, 1) - "12h or less"
Choices$(5, 2) - "12-24h"
Choices$(5, 3) - "24-48h"
Choices$(5, 4) - "48+h"
VariablePtr(5) = 51
MULTIP(5) = 0
None(5) = 0
GraphFlag(5) = 0
SKIPBLANK(5) = 1

question$(6) = QUESTIONS$(8)
Choices$(6, 1) = "Lying Still"
Choices$(6, 2) = "Vomiting"
Choices$(6, 3) = "Antacids"
Choices$(6, 4) = "Food"
Choices$(6, 5) = "Other"
Choices$(6, 6) = "None"
VariablePtr(6) = 55
MULTIP(6) = 1
None(6) = 6
GraphFlag(6) = 0
SKIPBLANK(6) = 1

CALL DataEntryPage(exitchar$, question$(), Choices$(),
VariablePtr(), MULTIP%, SKIPBLANK%, Numresp%, None%,
GraphFlag(), VARIABLE%, NUMCOLQUESTS%, TOPROW%, TOPCOL%,
NUMQUEST%, DATAHEADINGS$, PAGEOF$, OFFPAGE$, HELPFILE$, STFLAG%)
IF exitchar$ = "P" THEN 1010
IF exitchar$ = "X" THEN 100

3000 REM Page 3 of Hx

NUMQUEST = 6
NUMCOLQUESTS = 3
TOPROW = 4
TOPCOL = 7
HELPFILE$ = "H34.TXT"
DATAHEADINGS$ = "History - Other Symptoms"
PAGEOF$ = "3"
OFFPAGE$ = MaxHxPages$
FOR i = 1 TO NUMQUEST
    Numresp%(i) = QUESTPTR%(i + 8)
    GraphFlag(i) = 0
    question$(i) = QUESTIONS$(8 + i)
NEXT i

Choices$(1, 1) = "Present"
: Choices$(1, 2) = "Absent"

VariablePtr(1) = 61
MULTIP(1) = 0
None(1) = 0
SKIPBLANK(1) = 1
CALL DataEntryPage(exitchar$, question$, Choices$, VariablePtr%, MULTIP%, SKIPBLANK%, Numresp%, None%, GraphFlag%, VARIABLE%, NUMCOL1QUESTS, TOPROW, TOPCOL, NUMQUESTS, DATAHEADINGS, PAGEOF$, OFFPAGE$, HELPFILE$, STFLAG%)
IF exitchar$ = "P" THEN 2000
IF exitchar$ = "X" THEN 100
NUMQUEST = 5
NUMCOL1QUESTS = 3
TOPROW = 4
TOPCOL = 7
HELPFILE$ = "H44.TXT"
DATAHEADING$ = " History - Past History"
PAGEOF$ = "4"
OFPAGE$ = MaxHxPages$

FOR i = 1 TO NUMQUEST
  MULTIP%(i) = 0
  Numresp%(i) = QUESTPTR%(i + 14)
  question$(i) = QUESTIONS$(14 + i)
  Choices$(i, 1) = "Yes"; Choices$(i, 2) = "No"
  None(i) = 0
  GraphFlag(i) = 0
  VariablePtr(i) = 79 + (i - 1) * 2
  SKIPBLANK(i) = 1
NEXT i

CALL DataEntryPage(exitchar$, question$, Choices$(),
  VariablePtr$(), MULTIP$(), SKIPBLANK$(), Numresp$(), None$(),
  GraphFlag$(), VARIABLE$(), NUMCOL1QUESTS%, TOPROW%, TOPCOL%,
  NUMQUEST%, DATAHEADING$, PAGEOF$, OFPAGE$, HELPFILE$, STFLAG$)
IF exitchar$ = "P" THEN 3000
IF exitchar$ = "X" THEN 100

4500 IF sex$ = FEMALE$ THEN
  REM PAGE 5 of Hx Only shown if patient is female.
  NUMQUEST = 6
  NUMCOL1QUESTS = 3
  TOPROW = 4
  TOPCOL = 7
  HELPFILE$ = "H54.TXT"
  DATAHEADING$ = " History - OB/GYN"
  PAGEOF$ = "5"
  OFPAGE$ = MaxHxPages$
  FOR i = 1 TO NUMQUEST
    Numresp%(i) = QUESTPTR%(i + 38)
    GraphFlag(i) = 0
    question$(i) = QUESTIONS$(i + 38)
    MULTIP(i) = 0
    SKIPBLANK(i) = 1
    None(i) = 0
  NEXT i
Choices$(1, 1) - "Not Started": Choices$(1, 2) - "Ceased"
VariablePtr(1) = 160

Choices$(2, 1) - "Normal": Choices$(2, 2) - "Late/Overdue"
CHOICES$(2, 3) - "Overdue" -- combined with LATE in the
database.
VariablePtr(2) = 164

Choices$(3, 1) - "Yes": Choices$(3, 2) - "No"
VariablePtr(3) = 166

Choices$(4, 1) - "Impossible": Choices$(4, 2) - "Possible"
Choices$(4, 3) - "Confirmed"
VariablePtr(4) = 168

Choices$(5, 1) - "Yes": Choices$(5, 2) - "No"
VariablePtr(5) = 171
SKIPBLANK(5) = 2

Choices$(6, 1) - "Yes": Choices$(6, 2) - "No"
VariablePtr(6) = 173

CALL DataEntryPage(exitchar$, question$(), Choices$(),
VariablePtr%(), MULTIP%(), SKIPBLANK%(), Numresp%(), None%(),
GraphFlag%(), VARIABLE%(), NUMCOLIQUESTS%, TOPROW%, TOPCOL%,
NUMQUEST%, DATAHEADER$, PAGEOF$, OFFPAGE$, HELPFILE$, STFLAG%)
IF exitchar$ = "P" THEN 4000
' "X" and "N" will fall through the END IF and will goto 100
automatically.
END IF
GOTO 100

5000 REM Page 5; Page 1 of PE.
NUMQUEST = 4
NUMCOLIQUESTS = 2
TOPROW = 4
TOPCOL = 7
HELPFILE$ = "H15.TXT"
DATAHEADER$ = " Physical - Vital Signs ",
PAGEOF$ = "1"
OFFPAGE$ = "5"

FOR i = 1 TO NUMQUEST
MULTIP%(i) = 0
Numresp%(i) = QUESTPTR%(i + 19)
None(i) = 0
GraphFlag(i) = 0
ABDX.BAS (cont'd)

    question$(i) = QUESTIONS$(i + 19)
    NEXT i

    Choices$(1, 1) = "< 98.6" : Choices$(1, 2) = "98.6 - 100.2"
    Choices$(1, 3) = "100.3 - 102" : Choices$(1, 4) = "> 102"
    VariablePtr(1) = 89
    SKIPBLANK(1) = 1

    Choices$(2, 1) = "< 80" : Choices$(2, 2) = "80 - 99"
    Choices$(2, 3) = "> 99"
    VariablePtr(2) = 93
    SKIPBLANK(2) = 1

    Choices$(3, 1) = "< 90" : Choices$(3, 2) = "90 - 129"
    Choices$(3, 3) = "> 129"
    VariablePtr(3) = 96
    SKIPBLANK(3) = 1

    Choices$(4, 1) = "< 70" : Choices$(4, 2) = "70 - 89"
    Choices$(4, 3) = "> 89"
    VariablePtr(4) = 99
    SKIPBLANK(4) = 2

CALL DataEntryPage(exitchar$, question$(i), Choices$(i),
    VariablePtr%, MULTIP%, SKIPBLANK%, Numresp%, None%,
    GraphFlag%, VARIABLE%, NUMCOLQUESTS%, TOPROW%, TOPCOL%,
    NUMQUEST$, DATAHEADING$, PAGEOF$, OFFAGE$, HELPFILE$, STFLAG%)
    IF exitchar$ = "P" THEN 100
    IF exitchar$ = "X" THEN 100

5500 REM Page 6; Page 2 of PE.

    NUMQUEST = 3
    NUMCOLQUESTS = 2
    TOPROW = 4
    TOPCOL = 7
    HELPFILE$ = "H25.TXT"
    DATAHEADING$ = " Physical - General/Lab "
    PAGEOF$ = "2"
    OFFAGE$ = "5"
    FOR i = 1 TO NUMQUEST
        Numresp%(i) = QUESTPTR%(i + 23)
        question$(i) = QUESTIONS$(i + 23)
        GraphFlag(i) = 0
    NEXT i
ABDX.BAS (cont'd)

```vbscript
Choices$(1, 1) = "Normal"  
Choices$(1, 3) = "Anxious"  
VariablePtr(1) = 102  
MULTIP(1) = 0  
None(1) = 0  
SKIPBLANK(1) = 1  

Choices$(2, 1) = "Normal"  
Choices$(2, 3) = "Flushed"  
Choices$(2, 5) = "Cyanotic"  
VariablePtr(2) = 105  
MULTIP%(2) = 1  
None(2) = 1  
SKIPBLANK(2) = 2  

Choices$(3, 1) = "< 8,000"  
Choices$(3, 2) = "8,000 - 10,000"  
Choices$(3, 3) = "10,100 - 12,000"  
Choices$(3, 4) = "12,100 - 15,000"  
Choices$(3, 5) = "> 15,000"  
VariablePtr(3) = 110  
MULTIP%(3) = 0  
None(3) = 0  
SKIPBLANK(3) = 1  

CALL DataEntryPage(exitchar$, question$, Choices$,  
VariablePtr%, MULTIP%, SKIPBLANK%, Numresp%, None%,  
GraphFlag%, VARIABLE%, NUMCOLQUESTS%, TOPROW%, TOPCOL%,  
NUMQUEST$, DATAHEADER$, PAGEOF$, OFFFF$, HELPFILE$, STFLAG%)  
IF exitchar$ = "P" THEN 5000  
IF exitchar$ = "X" THEN 100
```

6000 REM Page 7; Page 3 of PE.

```vbscript
NUMQUEST = 7  
NUMCOLQUESTS = 4  
TOPROW = 4  
TOPCOL = 7  
HELPFILE$ = "H35.TXT"  
DATAHEADER$ = "Physical - Abdominal Exam"  
PAGEOF$ = "3"  
OFFPAGE$ = "5"  
FOR i = 1 TO NUMQUEST  
  Numresp%(i) = QUESTPTR%(i + 26)  
  question$(i) = QUESTIONS$(i + 26)
```
GraphFlag(i) = 0
MULTIP(i) = 0
SKIPBLANK(i) = 1
NEXT i

Choices$(1, 1) = "Normal"
Choices$(1, 2) = "Visible Peristalsis"
Choices$(1, 3) = "Decreased Abd. Movement"
VariablePtr(1) = 115
None(1) = 0

Choices$(2, 1) = "Present"
Choices$(2, 2) = "Absent"
VariablePtr(2) = 118
None(2) = 0

Choices$(3, 1) = "Present"
Choices$(3, 2) = "Absent"
VariablePtr(3) = 120
None(3) = 0

Choices$(4, 1) = "Present"
Choices$(4, 2) = "Absent"
VariablePtr(4) = 122
None(4) = 0

Choices$(5, 1) = "Normal"
Choices$(5, 2) = "Absent"
Choices$(5, 3) = "Hyperactive"
VariablePtr(5) = 124
None(5) = 0

Choices$(6, 1) = "Present"
Choices$(6, 2) = "Absent"
VariablePtr(6) = 127
None(6) = 0

Choices$(7, 1) = "Present"
Choices$(7, 2) = "Absent"
VariablePtr(7) = 129
None(7) = 0

CALL DataEntryPage(exitchar$, question$( ), Choices$( ),
VariablePtr$( ) , MULTIP$( ) , SKIPBLANK$( ) , Numresp$( ) , None$( ) ,
GraphFlag$( ) , VARIABLE$( ) , NUMCOLQUEST$ , TOPROW$ , TOPCOL$ ,
NUMQUEST$ , DATARCT$ , PAGEOF$ , OFFPAGE$ , HELPFILE$ , STFLAG$)
IF exitchar$ = "P" THEN 5500
IF exitchar$ = "X" THEN 100
7000 REM PAGE 8; Page 4 of PE.

NUMQUEST = 1
NUMCOL1QUESTS = 1
TOPROW = 4
TOPCOL = 19
HELPFILE$ = "H45.TXT"
DATAHEADING$ = "Physical - Abdominal Exam"
PAGEOF$ = "4"
OFFAGE$ = "5"

question$(l) = QUESTIONS$(34)
MULTIP%(1) = 1
Numresp%(1) = QUESTPTR%(34)
None(1) = 13
GraphFlag(1) = 3
SKIPBLANK(1) = 2

Choices$(1, 1) = " RUQ " : Choices$(1, 2) = " LUQ "
Choices$(1, 3) = " RLQ " : Choices$(1, 4) = " LLQ "
Choices$(1, 5) = "UPPER HALF " : Choices$(1, 6) = "LOWER HALF "
Choices$(1, 7) = "RIGHT HALF " : Choices$(1, 8) = "LEFT HALF "
Choices$(1, 9) = " CENTRAL " : Choices$(1, 10) = " GENERAL "
Choices$(1, 11) = "RIGHT FLANK": Choices$(1, 12) = "LEFT FLANK "
Choices$(1, 13) = " NO PAIN "

VariablePtr(1) = 131

CALL DataEntryPage(exitchar$, question$( ), Choices$( ),
VariablePtr( ), MULTIP( ), SKIPBLANK( ), Numresp( ), None( ),
GraphFlag( ), VARIABLE( ), NUMCOL1QUESTS, TOPROW, TOPCOL,
NUMQUEST, DATAHEADING$, PAGEOF$, OFFAGE$, HELPFILE$, STFLAG%)

IF exitchar$ = "P" THEN 6000
IF exitchar$ = "X" THEN 100

8000 REM Page 9; Last page of PE.

NUMQUEST = 3
NUMCOL1QUESTS = 3
TOPROW = 4
TOPCOL = 7
HELPFILE$ = "H55.TXT"
DATAHEADING$ = "Physical - Abdominal Exam"
PAGEOF$ = "5"
OFFAGE$ = "5"

FOR i = 1 TO NUMQUEST
  Numresp%(i) = QUESTPTR%(i + 34)
  question$(i) = QUESTIONS$(i + 34)
GraphFlag(i) = 0
SKIPBLANK(i) = 1
NEXT i

Choices$(1, 1) = "Present"
Choices$(1, 2) = "Absent"
VariablePtr(1) = 144
MULTIP(1) = 0
None(1) = 0

Choices$(2, 1) = "Present"
Choices$(2, 2) = "Absent"
VariablePtr(2) = 146
MULTIP(2) = 0
None(2) = 0

Choices$(3, 1) = "Normal"
Choices$(3, 2) = "Mass Felt"
Choices$(3, 3) = "Left Tender"
Choices$(3, 4) = "Right Tender"
Choices$(3, 5) = "General Tenderness"
VariablePtr(3) = 148
MULTIP(3) = 1
None(3) = 1

IF sex$ = FEMALE$ THEN
  'increase width of cursor
  Choices$(1, 1) = Choices$(1, 1) + " 
  NUMQUEST = 4
  VariablePtr(4) = 153
  Numresp%(4) = QUESTPTR%(4 + 34)
  question$(4) = QUESTIONS$(38)
  GraphFlag(4) = 0
  SKIPBLANK(4) = 1
  MULTIP%(4) = 1
  None(4) = 1
  Choices$(4, 1) = "Normal"
  Choices$(4, 2) = "Right Tenderness"
  Choices$(4, 3) = "Left Tenderness"
  Choices$(4, 4) = "Cervical Tenderness"
  Choices$(4, 5) = "General Tenderness"
  Choices$(4, 6) = "Mass"
  Choices$(4, 7) = "Blood (Clots)"
END IF

CALL DataEntryPage(exitchar$, question$(?), Choices$(?),
VariablePtr$(?), MULTIP$(?), SKIPBLANK$(?), Numresp$(?), None$(?),
GraphFlag$(?), VARIABLE$(?), NUMCOL1QUESTS%, TOPROW%, TOPCOL%,
NUMQUEST%, DATAHEADING$, PAGEOF$, OFFAGE$, HELPFILE$, STFLAG$)
ABDX.BAS (cont'd)

. IF exitchar$ = "P" THEN 7000
 IF exitchar$ = "X" THEN 100
 IF exitchar$ = "N" THEN 100

31000 REM Primary Selection routine
 CALL SetTrainingColors(TRAINING)
 IF TRAINING = 0 THEN GOTO 32000

31004 REM Training Option Page

 'check for training case data file
 IF NOT Exists%("ABDTRN.DAT") THEN
 SCREEN 0
 CLS
 LOCATE 10, 10
 PRINT "The Training Module is not available."
 LOCATE 11, 10
 PRINT "The data file for the training cases is not present."
 TRAINING = 0
 CALL TextPause
 CALL SetTrainingColors(TRAINING)
 GOTO 32000
 END IF
 Choices$(1, 1) = "Easy Case Narrative 
 Choices$(1, 2) = "Harder Case Narrative"
 Choices$(1, 3) = "Enter DATA 
 Choices$(1, 4) = "Exit Training Module 

 ' New method for menu
 NR% = 1
 resplength% = 4
 DATAHEADING$ = "Abdominal Pain Diagnosis Training Module" +
 VERSION?
 menuheading$ = "Training Options"
 HELPFILE$ = "HPT12.DAT"

 CALL MenuEntryPage(NR%, resplength%, exitchar$, DATAHEADING$,
 menuheading$, Choices$(), HELPFILE$)

 ' Branch Depending on User's Selection (Case Narrative,
 ' Enter Data, Exit).
 SELECT CASE NR%
 CASE 1, 2
 CALL narrative(NR, CASENUM, THECASE$())
 CASE 3
 CALL ModifyNarrative(CASENUM%, escflag%)
 IF escflag <> 1 THEN
CALL LoadTrainingCase(CASENUM, THECASE%())
IF davidflag% = 1 THEN
  FOR i = 1 TO 190: VARIABLE%i = THECASE%i: NEXT i
END IF
SSN$ = "000-00-0000"
GOTO 30
END IF
CASE 4
TRAINING = 0
CALL SetTrainingColors(TRAINING)
CASE ELSE
  END SELECT
  GOTO 31000
END IF

32000 REM Primary Selection routine for main program.
32004 REM Main Option Page
  Choices$(1, 1) = "Real Case"
  Choices$(1, 2) = "Simulated Case"
  Choices$(1, 3) = "Training Module"
  Choices$(1, 4) = "Last Real Case"
  Choices$(1, 5) = "Last Simulated Case"
  Choices$(1, 6) = "Instructions - HELP"
  Choices$(1, 7) = "Generate SF600"
  Choices$(1, 8) = "Display Treatment"
  Choices$(1, 9) = "Exit Program"

  ' New method for menu
  NR% = 1
  resplength% = 9
  DATAHEADING$ = "Abdominal Pain Diagnosis Program" + VERSION$
  menuheading$ = "Main Options"
  HELPFILE$ = "HP12.DAT"
  DO
    CALL MenuEntryPage(NR%, resplength%, exitchar$, DATAHEADING$, menuheading$, Choices$(, HELPFILE$)
    ' Branch to Main Option Selected.
    ON NR GOTO 32320, 32330, 32340, 32350, 32350, 32600, 32800, 32900
  SELECT CASE NR%
  CASE 1          ' Real Case
    GOSUB 60135
    GOTO 30
  CASE 2          ' Simulated Case
    SIMULATE = 0
    GOSUB 60135
    SSN$ = "000-00-0000"
    GOTO 30
CASE 3  ' Training Module
32340    GOSUB 60135
    ' SSN$ - "000-00-0000"
    TRAINING = 1
    CALL SetTrainingColors(TRAINING)
    GOTO 31000: REM TRAINING PROGRAM ROUTINE
CASE 4, 5  'Last Real and Simulated Cases
STFLAG = 0
32350    IF NR = 4 THEN
    filnam$ = "REAL.DAT".
    SIMULATE = 1
    SimulateString$ = "real"
ELSE
    filnam$ = "SIMUL.DAT"
    SIMULATE = 0
    SimulateString$ = "simulated"
END IF
    ' dummy value
    whichcase = 0
    ' open case, get data
    CALL GetCase(filnam$, whichcase%, VARIABLE%(), SSN$, AGES, OTHER$, STARTIME$, STARTDATE$, HMDX%, SIMULATE%, sex$)
    IF whichcase% = 0 THEN
        SCREEN 0, 1, 3, 3
        CLS
        infostring$ = "No " + SimulateString$ + " cases have been saved."
        CALL LocateCenter(10, infostring$)
        PRINT infostring$;
        CALL TextPause
        SCREEN 0, 1, 0, 0
    ELSE
        ' set lookatfemale variable
        IF HMDX% > 7 THEN
            lookatfemale = 1
        END IF
        GOTO 100
    END IF
END IF
CASE 6  ' Help - instructions
32600    filnam$ = "HELP.DAT"
    thispage% = VideoPage%
    CALL DisplayEncryptedFile(filnara$, thispage%)
    GOTO 32004
32800    CASE 7  ' SF600 generation routine
    CALL SF600(BOAT1$, BOAT2$, HMNAM$, HMSSN$)
    CALL SetScreenMode(ScrnMode)
    CLS 0
    GOTO 31000
CASE 8  ' Call treatment protocol routine
    ' User selects option to Display Treatment Protocol.

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Tell routine that pt. is female so that all protocols are shown.

Ptsex$ = FEMALE$

CALL TXMenu(MAXNUM, Ptsex$)

GOTO 31000

CASE 9
    " Exit Program.

32900    CLS

SCREEN 0, 1, 0, 0

CLS

END

CASE ELSE

END SELECT

" loop forever. Will break out of loop when needed.

LOOP UNTIL I = 2

50000 IF STFLAG <> 0 AND TRAINING = 0 THEN
    CALL SelectDatabase(lookatfemale, VARIABLE())
END IF

" This portion of the program calculates diagnostic probabilities.

REM Initial probabilities - 1DIV 10^25 to keep from getting an
OVERFLOW ERROR.

50020 'DATA 1.8D-25,5.4D-25,0.3D-25,0.01D-25,0.5D-25,0.3D-25,1.6D-25

FOR i = 1 TO 7
    PROB#(i) = APRIORI#(i)
NEXT i

'PROB#(1) = 1.8D-25
'PROB#(2) = 5.4D-25
'PROB#(3) = 3D-26
'PROB#(4) = 1D-27
'PROB#(5) = 5D-26
'PROB#(6) = 3D-26
'PROB#(7) = 1.6D-25

'need: PROB#, TFLAG, TRAINING, VARIABLE(), THECASE%, BAYES!, exitcode
have an exitcode and can remove several vars
(TFLAGIF, TFLAGCASE, NUMCOUNT)

SCREEN 0, 1, 0, 0: CLS

NUMCOUNT = 0

REM All the checks for enough DATA entered can go here.
REM Probabilities computed here
TFLAG = 0: TFLAGCASE = 0: TFLAGIF = 0
FOR i = 1 TO 152
ABDX.BAS (cont'd)

IF TRAINING = 1 THEN
  IF THECASE%(i) = 1 THEN
    TFLAGCASE = TFLAGCASE + 1
    IF VARIABLE%(i) = THECASE%(i) THEN
      TFLAGIF = TFLAGIF + 1
    END IF
  END IF
  IF VARIABLE%(i) = THECASE%(i) THEN
    TFLAG = TFLAG + 1
  END IF
END IF

'NOTE NOTE !!!!!!!!!!!!! the next line is just for Ellen's version for
entering data.

IF dvidflag% = 1 THEN GOTO 51040

51025 IF TRAINING = 1 THEN GOTO 51040
  IF TFLAGIF > .75 * TFLAGCASE THEN
    GOTO 51040
  END IF
END IF

IF NUMCOUNT = 1 THEN 51040
  PRINT "Insufficient DATA has been entered for accurate diagnosis."
  PRINT "Please enter more DATA."
  GOTO 51038
51036 PRINT "You have missed too many items. Are you sure you have the
  right case?"
51038 LOCATE 25, 15
  CALL SetColor(infocolor)
  PRINT " To return to main menu, press any key";
  CALL SetColor(forecolor)
  CALL GetKey(a$)
  GOTO 100

' Calculate final probabilities here (FINPROB). Determine
' the disease (MAXNUM) with the greatest probability (MAXPROB).
51040 CALL ComputeFinalProbs(NUMDISEASES%, MAXNUM%, MAXPROB%, PROB#(), FINPROB#())

FINPROB#(2) = FINPROB#(2) + FINPROB#(7)
IF MAXNUM = 7 THEN MAXNUM = 2
IF FINPROB#(2) > MAXPROB THEN MAXNUM = 2
IF MAXNUM = 2 THEN MAXPROB = FINPROB#(2)
MALEMAXNUM% = MAXNUM

'compute GYN probabilities.
'skip all of the stuff about training checks and number of
questions
'REM Initial probabilities - DIV 10^25 to keep from getting an
OVERFLOW ERROR.
FOR i = 1 TO 7
   FEMPROB#(i) = FEMAPRIORI#(i)
NEXT i

IF sex$ = FEMALE$ THEN
   FOR i = 1 TO 174
      IF VARIABLE(i) = 1 THEN
         FOR j = 1 TO 7
            IF FEMBAYES!(i, j) = 0 THEN
            END IF
         NEXT j
      END IF
   NEXT i

CALL ComputeFinalProbs(NUMDISEASES%, FEMMAXNUM%, FEMMAXPROB%,
FEMPROB#(), FEMFINPROB#())
FEMMAXNUM% = FEMMAXNUM% + 7
END IF

IF sex$ = FEMALE$ AND lookatfemale = 1 THEN
   MAXNUM = FEMMAXNUM%
END IF

REM PAGE 0 -- HM EVALUATION
'Skip this page if the case is not new of if no response
'changes have been made.
IF STFLAG = 0 THEN 52000

'How about here is where the HM is asked re which database to use.

'if female and appropriate responses marked, then
' ask which database to use.
' On this page, can list all of the disease considered.
' Will then need to move agree/disagree part to next screen.

' Can have toggle on diagnostic summary page to switch back and forth
' between abd and gyn databases.

51100 IF lookatfemale = 0 THEN
Choices$(l, 1) = "APPENDICITIS"
Choices$(l, 2) = "NON-SPECIFIC ABDOMINAL PAIN"
Choices$(l, 3) = "RENAL COLIC"
Choices$(l, 4) = "PERFORATED DUODENAL ULCER"
Choices$(l, 5) = "CHOLECYSTITIS"
Choices$(l, 6) = "SMALL BOWEL OBSTRUCTION"
Choices$(l, 7) = "OTHER"
resplength% = 7
menuheading$ = "Your Diagnosis"
ELSE
Choices$(l, 1) = "APPENDICITIS"     ' dx # 8
Choices$(l, 2) = "NON-SPECIFIC ABDOMINAL PAIN"  ' dx # 9
Choices$(l, 3) = "PELVIC INFLAMMATORY DISEASE" ' dx # 10
Choices$(l, 4) = "URINARY TRACT INFECTION"   ' dx # 11
Choices$(l, 5) = "OVARIAN CYST"          ' dx # 12
Choices$(l, 6) = "ECTOPIC PREGNANCY"     ' dx # 13
Choices$(l, 7) = "INCOMPLETE ABORTION"    ' dx # 14
Choices$(l, 8) = "OTHER"                 ' dx # 15
resplength% = 8
menuheading$ = "Your Gynecological Diagnosis"
END IF

' New method for menu
NR% = 1
DATAHEADING$ = "Corpsman's Diagnosis Entry Page"
HELPFILE$ = "HP00.DAT"

CALL MenuEntryPage(NR%, resplength%, exitchar$, DATAHEADING$, menuheading$, Choices$(), HELPFILE$)

' Store Corpsman's Diagnosis variable HMDX (# of the Diagnosis) and HMDXS (name of the diagnosis).
IF lookatfemale = 0 THEN
HMDX = NR
ELSE
HMDX = NR + 7
END IF
IF HMDX = 7 OR HMDX = 15 THEN
51250  LOCATE 16, 1: PRINT SPACE$(75);
LOCATE 16, 1: PRINT "Enter name of other diagnosis: ";
LINE INPUT OTHER$
IF OTHER$ = "" THEN
    SOUND 200, 1
    GOTO 51100
END IF
LOCATE 19, 10
PRINT "This database does not consider "; OTHER$;
LOCATE 20, 10
PRINT "in the differential diagnosis of acute abdominal pain."
CALL TextDxPause
GOTO 52000
END IF

51350 IF HMDX = MAXNUM THEN
LOCATE 16, 1
PRINT "The program-generated probabilities AGREE with your
    provisional";
LOCATE 17, 1: PRINT "diagnosis."
CALL TextDxPause
GOTO 52000
END IF

52000 REM PAGE 14 -- Diagnostic Summary Page
52080 CALL SetScreenMode(ScrnMode)
LOCATE 1, 18: headingPRINT ("Diagnostic Summary Page")
LOCATE 1, 59: PRINT "SSN: "; SSN$;
LOCATE 2, 59: PRINT "Time: "; STARTIME$;
LOCATE 3, 59: PRINT "Date: "; STARTDATE$;
IF TRAINING = 1 THEN
LOCATE 5, 59: PRINT "Score: "; INT((TFLAG / 152) * 100); ";
IF TFLAG = 152 THEN PRINT "!!!"
SELECT CASE HMDX
CASE 1
    HMCchosenDX$ = "APPEND"
CASE 2
    HMCchosenDX$ = "NONSAP"
CASE 3

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ABDX.BAS (cont’d)

HMChosenDX$ = "RENCOL"
CASE 4
HMChosenDX$ = "PERFDU"
CASE 5
HMChosenDX$ = "CHOLE"
CASE 6
HMChosenDX$ = "SMBOBS"
CASE ELSE
HMChosenDX$ = OTHER$
END SELECT
LOCATE 6, 59: PRINT "HM dx: "; HMChosenDX$;
LOCATE 17, 59: PRINT "TRAINING CASE";
LOCATE 18, 64: PRINT "; CASENUM;
ELSE
LOCATE 17, 59
IF SIMULATE = 0 THEN
PRINT "SIMULATED CASE";
ELSE
PRINT "REAL CASE";
END IF
END IF
LOCATE 20, 59: PRINT BOAT1$;
LOCATE 21, 59: PRINT BOAT2$;
IF Vertbits = 14 THEN
WINDOW SCREEN (0, 0)-(639, 199)
END IF
IF sex$ = FEMALE$ AND lookatfemale = 1 THEN
MAXNUM = FEMMAXNUM
CALL FemaleGraph(FEMFINPROB#())
ELSE
MAXNUM = MALEMAXNUM
CALL MaleGraph(FINPROB#())
END IF
LINE (0, 150)-(449, 150), hpframecolor
LINE (0, 28)-(449, 28), hpframecolor, &HFO0F
LINE (0, 82)-(449, 82), hpframecolor, &HFO0F
IF TRAINING = 0 THEN
resplength% = 5
HELPFILE$ = "HP10.DAT"
Choices$(1, 1) = "CHANGE INPUT DATA"
Choices$(1, 2) = "ANOTHER DIAGNOSIS"
Choices$(1, 3) = "DISPLAY TREATMENT"
Choices$(1, 4) = "DISPLAY H & P"
Choices$(l, 5) = "END INTERACTION"
IF sex$ = FEMALE$ THEN
  resplength% = resplength% + 1
  IF lookatfemale = 1 THEN
    Choices$(l, resplength%) = "DISPLAY ABD DX'ES"
  ELSE
    Choices$(l, resplength%) = "DISPLAY GYN DX'ES"
  END IF
END IF
ELSE
  resplength% = 6
  HELPFILE$ = "HPT10.DAT"
  Choices$(l, 1) = "CHANGE INPUT DATA"
  Choices$(l, 2) = "ANOTHER CASE"
  Choices$(l, 3) = "DISPLAY TREATMENT"
  Choices$(l, 4) = "DISPLAY H & P"
  Choices$(l, 5) = "END INTERACTION"
  Choices$(l, 6) = "SHOW MISSED ITEMS"
END IF

NR% = 1
menuheading$ = "Options"

DO
  CALL MenuSummaryPage(10, 59, NR%, resplength%, exitchar$, menuheading$, Choices$(), HELPFILE$)
  ' Help text is written in text mode. Have to redraw whole screen.
  IF exitchar$ = "?" THEN EXIT DO

  ' for testing only
  IF davidflag$ = 1 THEN
    LOCATE 1, 1
    PRINT USING "###### ###### ######"; FRE(0), FRE(""), FRE(-1)
  END IF

  '52440 ON NR GOTO 52450, 52501, 54000, 53000, 52500, 55000
  SELECT CASE NR%
  CASE 1
    ' Change Input Data
    ' save it only if real case and changes have been made
    IF (TRAINING = 0 AND STFLAG = 1 AND SIMULATE = 1) THEN
      filnam$ = "REAL.DAT"
      CALL PutCase(0, VARIABLE%(), SSN$, AGE$, OTHER$, STARTIME$, STARTDATE$, HMDX%, SIMULATE%, MAXNUM%, MAXPROB%)
      STFLAG = 0
    END IF
  GOTO 100

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CASE 2
' Another Dx/Case
IF TRAINING = 0 AND STFLAG = 1 THEN
  ' Save both real and simulated cases,
  ' if not training, and changes were made.
  CALL PutCase(0, VARIABLE%, SSN$, AGE$, OTHER$, STARTIME$,
  STARTDATE$, HMDX%, SIMULATE%, MAXNUM%, MAXPROB%)
END IF
CALL ResetVariables(VARIABLE%, sex$, SSN$, AGE$, STARTIME$,
STARTDATE$)
STFLAG = 0
lookatfemale = 0     'may not be necessary
GOTO 31000

CASE 3
' Display Treatment
  ' User selects option to Display Treatment Protocol.
  CALL TXMenu(MAXNUM, sex$)
  CLS
  GOTO 52000

CASE 4
' Display H&P
  CALL DisplayHP(TRAINING, SIMULATE, SSN$, STARTIME$, STARTDATE$,
  VARIABLE%)}
  GOTO 52000

CASE 5
' End
IF TRAINING = 0 AND STFLAG = 1 THEN
  ' save main real or simulated cases if changes made.
  CALL PutCase(0, VARIABLE%, SSN$, AGE$, OTHER$, STARTIME$,
  STARTDATE$, HMDX%, SIMULATE%, MAXNUM%, MAXPROB%)
END IF
SCREEN 0, 1, 0, 0
CLS
END

CASE 6
' Show Missed Items
IF TRAINING = 1 THEN
  CALL DisplayMissedHP(SSN$, STARTIME$, STARTDATE$, VARIABLE%,
  THECASE%)
  GOTO 52000
ELSE
  ' Should only get here with real case if female
  IF lookatfemale = 1 THEN
    CALL MaleGraph(FINPROB#())
    Choices$(l, resplength%) = "DISPLAY GYN DX'ES"
    MAXNUM = MALEMAXNUM
    lookatfemale = 0
  ELSE
    CALL FemaleGraph(FEMFINPROB#())
    Choices$(l, resplength%) = "DISPLAY ABD DX'ES"
  END IF
GOTO 52000
ELSE
  ' Should only get here with real case if female
  IF lookatfemale = 1 THEN
    CALL MaleGraph(FINPROB#())
    Choices$(l, resplength%) = "DISPLAY GYN DX'ES"
    MAXNUM = MALEMAXNUM
    lookatfemale = 0
  ELSE
    CALL FemaleGraph(FEMFINPROB#())
    Choices$(l, resplength%) = "DISPLAY ABD DX'ES"
  END IF
GOTO 52000
END
MAXNUM = FEMAXNUM
lookatfemale = 1
END IF
END IF
CASE ELSE
END SELECT
LOOP UNTIL NR% <> 6 AND sex$ <> FEMALE$
GOTO 52000

60000 REM READ IN BAYESIAN DATA

'RESTORE 61000
'FOR i = 1 TO 152
'FOR j = 1 TO 7: READ BAYES!(i, j): NEXT j: NEXT i
CALL UnPackDatabase("REGABD.DAT", BAYES!(), APRIORI#(), 7, 152)

'RESTORE 62000
'FOR i = 1 TO 174
'READ dumDavid
'READ dumDavid$
'FOR j = 1 TO 7: READ FEMBAYES!(i, j): NEXT j: NEXT i
CALL UnPackDatabase("FEMABD.DAT", FEMBAYES!(), FEMAPRIORI#(), 7, 174)

RESTORE 60300
FOR i = 1 TO 44: READ QUESTIONS$(i): NEXT i
RESTORE 60410
FOR i = 1 TO 44: READ QUESTPZR%(i): NEXT i
RESTORE 60500
FOR i = 1 TO 6
FOR j = 1 TO 6
IF i <> j THEN
FOR N = 1 TO 15
READ COMPAR%(i, j, N)
IF COMPAR%(i, j, N) < 1 THEN EXIT FOR
NEXT N
END IF
NEXT j
NEXT i

'VARIABLE(I) = 0 when the response has not been entered
'and VARIABLE(I) = 1 when the response has been entered.
60135 CALL ResetVariables(VARIABLE%(), sex$, SSN$, AGE$, STARTIME$, STARTDATE$)
RETURN

'QUESTIONS$(())
60300 DATA SITE OF PAIN(onset), SITE OF PAIN(now)
DATA TYPE OF PAIN, SEVERITY OF PAIN, AGGRAVATING FACTORS
DATA PROGRESS OF PAIN, DURATION OF PAIN, RELIEVING FACTORS
DATA NAUSEA, VOMITING, BOWELS, APPETITE, JAUNDICE, URINATION
DATA PREVIOUS INDIGESTION, PREVIOUS SIMILAR PAIN, PREVIOUS SURGERY
DATA PREVIOUS ILLNESS, TAKING MEDICATIONS
DATA "TEMPERATURE (F) ": "PULSE RATE ": "BP (Systolic) ": "BP (Diastolic) ":
DATA "MOOD ": "COLOR ": "WBC COUNT ":
DATA "INSPECTION ": "SCARS ": "GUARDING ": "RIGIDITY ": "BOWEL SOUNDS ":
DATA "DISTENTION ": "MASSES ":
DATA TENDERNESS, "MURPHY'S SIGN ":, REBOUND TENDERNESS, RECTAL EXAM
DATA "VAGINAL EXAMINATION"
DATA PERIODS, "LAST PERIOD ":, "VAGINAL DISCHARGE ", PREGNANCY
DATA "FAINT/DIZZY ", "PREV GYN HISTORY"
'QUESTPTR%'()

60410 DATA 13, 13, 3, 2, 6, 3, 4, 6, 2, 2, 2, 5, 2, 2, 2, 2, 2, 4, 3, 3, 3
DATA 3, 5, 5, 3, 2, 2, 2, 3, 2, 2, 13, 2, 2, 5, 7, 4, 2, 2, 3, 2, 2
'COMPARX'()

60500 DATA 13, 19, 26, 32, 38, 42, 43, 50, 70, 107, 120, 133, 146, 151, 0
DATA 26, 38, 40, 42, 43, 74, 107, 120, 133, 146, 151, 0
DATA 19, 26, 40, 102, 107, 115, 133, 151, 0
DATA 26, 40, 42, 43, 107, 133, 145, 146, 151, 0
DATA 26, 38, 40, 42, 43, 65, 102, 107, 120, 133, 146, 151, 0
DATA 37, 47, 71, 105, 121, 147, 148, 0
DATA 40, 74, 0
DATA 37, 40, 48, 102, 105, 115, 148, 0
DATA 37, 40, 65, 145, 133, 0
DATA 48, 65, 102, 0
DATA 21, 22, 34, 35, 39, 41, 47, 75, 76, 105, 106, 107, 141, 142, 147
DATA 15, 19, 20, 28, 41, 79, 100, 121, 135, 147, 148, 0
DATA 21, 22, 34, 35, 39, 75, 76, 102, 105, 115, 128, 0
DATA 21, 22, 34, 35, 75, 76, 141, 142, 145, 0
DATA 21, 22, 34, 35, 41, 65, 75, 76, 128, 140, 0
DATA 11, 15, 24, 28, 41, 82, 106, 131, 144, 148, 0
DATA 32, 33, 39, 41, 47, 66, 83, 103, 106, 121, 127, 140, 147, 148, 0
DATA 21, 22, 34, 35, 41, 75, 76, 141, 142, 0
DATA 15, 20, 28, 33, 42, 55, 103, 106, 117, 140, 145, 0
DATA 15, 20, 28, 33, 38, 41, 65, 117, 0
DATA 15, 20, 28, 33, 38, 0
DATA 11, 24, 38, 41, 63, 66, 79, 120, 131, 144, 0
DATA 19, 32, 39, 49, 66, 83, 103, 106, 127, 139, 0
DATA 15, 20, 28, 39, 74, 104, 135, 0
DATA 11, 24, 38, 107, 131, 144, 0
DATA 11, 15, 24, 28, 74, 81, 120, 131, 144, 0
DATA 19, 32, 105, 115, 135, 148, 0
DATA 11, 24, 102, 105, 115, 131, 144, 0
DATA 19, 32, 39, 66, 80, 83, 103, 127, 140, 0
DATA 19, 32, 39, 83, 103, 127, 140, 145, 0

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REM $STATIC
SUB CompareFemDXes (HMDX%, MAXNUM%)
' This routine displays the Best Questions to Ask if the HM's
diagnosis differs from the computer's (GYN database only).
' See CompareAbdDXes for abd database.
CLS
TheHMDX = HMDX - 7
TheMAXNUM = MAXNUM - 7
row = 10
col = 10
filnam$ = "bestques.dat"
IF NOT Exists%(filnam$) THEN
EXIT SUB
END IF
' draw window here.
IF TheHMDX = TheMAXNUM THEN
' the dx'es agree. already commented on in ABDX.BAS
ELSEIF TheHMDX = 8 THEN
' other dx not considered. already commented on in ABDX.BAS
ELSE
' create a number such that the smaller of TheHMDX or MAXNUM is in
' the tens' position and the other is in the unit's position.
  IF TheHMDX < TheMAXNUM THEN
    combinednumber = TheHMDX * 10 + TheMAXNUM
  ELSE
    combinednumber = TheMAXNUM * 10 + TheHMDX
  END IF

filenum = FREEFILE
OPEN filnara$ FOR INPUT AS filenum

foundflag = 0
stringnumber = 0
DO WHILE stringnumber < combinednumber
  LINE INPUT #filenum, quest$
  ' decipher string
  CALL decipher(quest$)
  stringnumber = VAL(LEFT$(quest$, 2))
  LOOP
  IF stringnumber = combinednumber THEN
    numofquests = VAL(MID$(quest$, 4, 2))
    questlength = VAL(MID$(quest$, 7, 2))
    col = (80 - questlength) \ 2
foundflag = 1
LOCATE 3, 5: PRINT " At this time the computer-generated probabilities DO NOT AGREE with";
LOCATE 4, 5: PRINT "your preliminary diagnosis. The following categories are particularly";
LOCATE 5, 5: PRINT "useful in differentiating your diagnosis from the others. It may be";
LOCATE 6, 5: PRINT "helpful to review your input in these areas and make any changes you";
LOCATE 7, 5: PRINT "consider appropriate.";

DATAHEADINGS = "Best Questions to Ask"
CALL LocateCenter(1, DATAHEADINGS$)
CALL headingPRINT(DATAHEADINGS$)

'       CALL frame(row, col - 1, numofquests, questlength, frametyp)
CALL BoxSelections(row, col - 1, numofquests, questlength)

FOR i = 1 TO numofquests
    LINE INPUT #filenum, quest$
    'decipher string
    CALL decipher(quest$)
    LOCATE row, col
    PRINT quest$
    row = row + 1
NEXT i
END IF
CLOSE #filenum
IF foundflag = 0 THEN
    LOCATE row, col
    PRINT " At this time, the computer-generated probabilities DO NOT AGREE with";
    PRINT "your preliminary diagnosis. However, in this case, there are no";
    PRINT "specific questions to ask which would differentiate your preliminary";
    PRINT "diagnosis from the current program-generated diagnosis.";
END IF
CALL TextPause
END IF
END SUB

SUB GetCase (filnam$, whichcase%, VARIABLE%(), SSN$, AGE$, OTHER$, STARTIME$, STARTDATE$, HMDX%, SIMULATE%, sex$)
' This routine opens the .DAT file filnam$ and retrieves the appropriate case 'whichcase'.
' NOTE: if whichcase = 0 then the case retrieved is the last stored case.
If it is returned as 0, then file did not exist.

'Globals
'      - MALE$  (constant in include file)
'      - FEMALE$ (constant in include file)

OPEN filnam$ FOR RANDOM AS #1 LEN = 128
' File format for variables.
FIELD #1, 11 AS LSSN$, 2 AS LAGE$, 26 AS LVAR$, 40 AS LOTH$, 5 AS LTIM$, 10 AS LDAT$, 2 AS LHMD$, 2 AS LSIM$, 2 AS LNUM$, 2 AS LPRO$
'  File format for variables.
'  If no previous case has been entered, beep, close
'    the file and request more user input.
N% = LOF(1) / 128
IF N% = 0 THEN
    CLOSE #1
    whichcase% = 0
    EXIT SUB
END IF
IF whichcase% = 0 OR whichcase% > N% THEN
    whichcase% = N%
END IF

'  Get a record from the file.
GET #1, whichcase%

'  Put case data into variables.
SSN$ = LSSN$: AGE$ = LAGE$: a$ = LVAR$: OTHER$ = LOTH$
STARTIME$ = LTIM$: STARTDATE$ = LDAT$
HMDX = CVI(LHMD$): SIMULATE = CVI(LSIM$)
'  Close the file.
    CLOSE #1
    ' unpack data in a$ into VARIABLE%()
    CALL UnPackArray(a$, VARIABLE%())
    ' update sex
    IF VARIABLE% (2) = 1 THEN
    sex$ = FEMALE$
    ELSE
    sex$ = MALE$
    END IF

END SUB

REM $DYNAMIC
SUB InitializeColors (graphmode$, monmode$)

  'GLOBAL - GRAPHICS, ScrnMode, forecolor, backcolor, infocolor
Set up graphics mode default (checked for CGA or EGA in graphmode$)

IF graphmode$ = "C" THEN
  GRAPHICS = 2
  ScrnMode = 2

IF monmode$ = "C" THEN
  ' CGA and color monitor
  MAINHEADINGCOLOR% = red
  MAINFRAMECOLOR% = green
  MAINFRAME% = 1
  TRAININGHEADINGCOLOR% = brown
  TRAININGFRAMECOLOR% = 1
  TRAININGFRAME% = 2
  ' select single frame for default pages.

  forecolor = white
  backcolor = black
  textcolor = white
  questioncolor = yellow
  responsecolor = white
  hpresponsecolor = white
  hpframecolor = 1
  infocolor = green
  graphcolor = white
  helpcolor = white
  bargraph(1) = 1
  bargraph(2) = 1
  bargraph(3) = 1
  bargraph(4) = 1
  bargraph(5) = 1
  bargraph(6) = 1
  bargraph(7) = 1

ELSE
  ' CGA, but no color monitor
  MAINHEADINGCOLOR% = hiwhite
  MAINFRAMECOLOR% = white
  MAINFRAME% = 1
  ' select single frame for default pages.
  TRAININGHEADINGCOLOR% = white
  TRAININGFRAMECOLOR% = white
  TRAININGFRAME% = 2
  ' select double frame for training pages.
  forecolor = white
backcolor = black

textcolor = white

questioncolor = white

responsecolor = white

hpresponsecolor = white

hpframecolor = 1

infocolor = white

graphcolor = white

helpcolor = white

bargraph(1) = 1

bargraph(2) = 1

bargraph(3) = 1

bargraph(4) = 1

bargraph(5) = 1

bargraph(6) = 1

bargraph(7) = 1

END IF

ELSE

GRAPHICS = 9

ScrnMode = 9

IF monmode$ = "C" THEN

' EGA and color monitor

MAINHEADINGCOLOR% = red

MAINFRAMECOLOR% = green

MAINFRAME% = 1

TRAININGHEADINGCOLOR% = brown

TRAININGFRAMECOLOR% = brown

TRAININGFRAME% = 2

' select double frame for training pages.

forecolor = white

backcolor = black

textcolor = white

questioncolor = yellow

responsecolor = white

hpresponsecolor = white

hpframecolor = blue

infocolor = green

graphcolor = white

helpcolor = white

bargraph(1) = ltred

bargraph(2) = ltgreen

bargraph(3) = ltcyan

bargraph(4) = ltmagenta

bargraph(5) = ltbblue

bargraph(6) = yellow

bargraph(7) = red

ELSE

' EGA, but no color monitor

MAINHEADINGCOLOR% = hiwhite
MAINFRAMECOLOR% = white
MAINFRAME% = 1  'select single frame for default pages.
TRAININGHEADINGCOLOR% = white
TRAININGFRAMECOLOR% = white
TRAININGFRAME% = 2  'select double frame for training
  pages.
forecolor = white
backcolor = black
textcolor = white
questioncolor = white
responsecolor = white
hpresponsecolor = white
hpframecolor = white
infocolor = white
graphcolor = white
helpcolor = white
bargraph(1) = white
bargraph(2) = white
bargraph(3) = white
bargraph(4) = white
bargraph(5) = white
bargraph(6) = white
bargraph(7) = white
END IF
END IF
END SUB

REM $STATIC
SUB PutCase (whichcase%, VARIABLE%(), SSN$, AGE$, OTHER$, STARTIME$, STARTDATE$, HMDX%, SIMULATE!, MAXNUM%, MAXPROB%)
   '      This routine opens the .DAT file based on SIMULATE and saves the
   '      appropriate case in record 'whichcase'.
   '      NOTE: if whichcase = 0 then the case is appended to the
   '      stored cases.
   IF SIMULATE = 0 THEN
      filnam$ = "SIMUL.DAT"
   ELSE
      filnam$ = "REAL.DAT"
   END IF

   OPEN filnam$ FOR RANDOM AS #1 LEN = 128
      ' File format for variables.
      FIELD #1, 11 AS SSN$, 2 AS AGE$, 26 AS OTHER$, 40 AS STARTIME$, 10 AS STARTDATE$, 5 AS HMDX%, 5 AS SIMULATE!, 2 AS MAXNUM%, 2 AS MAXPROB%

      N% = L0F(1) / 128

   END IF
' If 0, then append case to end of stored cases.
IF whichcase% - 0 THEN
    whichcase% = N% + 1
END IF

CALL PackArray(a$, VARIABLE%Q)

' Left justifies the variables in the field and moves the
' DATA into a random buffer file.
LSET LSSN$ - SSN$: LSET LAGE$ - AGE$: LSET LVAR$ - a$
LSET LOTH$ - OTHER$: LSET LTIM$ - STARTIME$
LSET LDAT$ - STARTDATE$: LSET LHMD$ - MKI$(HMDX)
LSET LSIM$ - MKI$(SIMULATE): LSET LNUM$ - MKI$(MAXNUM)
LSET LPRO$ - MKI$(MAXPROB)

' Save the record.
PUT #1, whichcase%

CLOSE #1

END SUB

SUB SelectDatabase (lookatfemale, VARIABLE())
' Check if female and ask which database if appropriate responses
' have been entered.

'GLOBAL - frametype
'      - FEMALE$ (constant in include file)

SHARED sex$

DIM checkvarlocation(6), Choices$(1, 2)

lookatfemale - 0
' ABD database as a default for females
' not meeting criteria and all males.

IF sex$ = FEMALE$ THEN

checkvarlocation(1) - 32 ' Site of Pain at present - CENTRAL
checkvarlocation(2) - 29 ' Site of Pain at present - LOWER
checkvarlocation(3) - 26 ' Site of Pain at present - RLQ
checkvarlocation(4) - 27 ' Site of Pain at present - LLQ
checkvarlocation(5) - 34 ' Site of Pain at present - R FLANK
checkvarlocation(6) - 35 ' Site of Pain at present - L FLANK
CriteriaMet - 0
FOR i - 1 TO 6
    IF VARIABLE(checkvarlocation(i)) = 1 THEN
        CriteriaMet - 1
        EXIT FOR
    END IF
END FOR
END IF
NEXT i
SCREEN 0, 1, 0, 0
CLS
framtyp = frametype
IF CriteriaMet = 1 THEN
  ' female and gynec database looks good.
  CALL frame(7, 9, 3, 60, framtyp)
  LOCATE 8, 10
  PRINT " Remember the gynecological database is available and is";
  LOCATE 9, 10
  PRINT "especially suitable for this patient. It compares your case";
  LOCATE 10, 10
  PRINT "with 1,000 similar previous patients.";
  NR% = 2
ELSE
  ' Female, but regular database looks better.
  CALL frame(7, 15, 4, 48, framtyp)
  LOCATE 8, 16
  PRINT " At this time, your patient appears to have";
  LOCATE 9, 16
  PRINT "non-gynecological abdominal pain. However, the";
  LOCATE 10, 16
  PRINT "gynecological database is available as an option";
  LOCATE 11, 16
  PRINT "on the Diagnostic Summary Page.";
  NR% = 1
END IF
CALL TextContinuePrompt
CALL GetKey(a$)
menuheading$ = "Select Database"
Choices$(l, 1) = "General Abdominal Database"
Choices$(l, 2) = "Gynecological Database"
HELPFILE$ = "Habgy.dat"
menurow = 16
menucol = Centered(Choices$(l, 1))
resplength% = 2
LOCATE 25, 5
PRINT SPACE$(70);
DO
  CALL MenuSummaryPage(menurow, menucol, NR%, resplength%, exitchar$,
    menuheading$, Choices$(), HELPFILE$)
LOOP UNTIL exitchar$ = ""
PRINT "Choose desired database"
IF NR% = 1 THEN
  lookatfemale = 0
ELSE
  lookatfemale = 1
END IF
ABDX.BAS (cont'd)

END IF

ERASE checkvarlocation, Choices$

END SUB

REM $DYNAMIC
SUB SetTrainingColors (TRAINING)
  ' This routine sets the different display colors between training
  and other displays.

  ' Global vars - headingcolor, framecolor, frametype
  ' Global vars - MAINHEADINGCOLOR%, MAINFRAMECOLOR%, MAINFRAME%
  ' Global vars - TRAININGHEADINGCOLOR%, TRAININGFRAMECOLOR%,
  '   TRAININGFRAME%

  IF TRAINING = 0 THEN
    headingcolor% - MAINHEADINGCOLOR%
    framecolor% - MAINFRAMECOLOR%
    frametype - MAINFRAME%
  ELSE
    headingcolor% - TRAININGHEADINGCOLOR%
    framecolor% - TRAININGFRAMECOLOR%
    frametype - TRAININGFRAME%
  END IF

END SUB

REM $STATIC
FUNCTION Translate% (HMDX)
  'This routine translates the value of HMDX to a number between 1 and 7,
  'the gyn database, otherwise it returns unchanged.
  '  HMDX   the variable to modify
  '  lookatfemale   flag for female database selection.

  SHARED lookatfemale

  IF lookatfemale = 0 THEN
    tempval = HMDX
  ELSE
    tempval = HMDX - 7
  END IF
  Translate = tempval

END FUNCTION

SUB TXMenu (MAXNUM, Ptsex$)

ABDX Programmer's Manual      A-38
'This routine displays the Treatment menu. Upon selection, the treatment is displayed.

SHARED VERSION$

DIM Choices$(1, 12)

30004 REM Tx protocol routine
Choices$(1, 1) = "APPENDICITIS"
Choices$(1, 2) = "NON-SPECIFIC ABDOMINAL PAIN"
Choices$(1, 3) = "RENAL COLIC"
Choices$(1, 4) = "PERFORATED DUODENAL ULCER"
Choices$(1, 5) = "CHOLECYSTITIS"
Choices$(1, 6) = "SMALL BOWEL OBSTRUCTION"

IF Ptsex$ = MALE$ THEN
Choices$(1, 7) = "EXIT DISPLAY"
resplength% = 7
ELSE
Choices$(1, 7) = "PELVIC INFLAMMATORY DISEASE" 'dx # 10
Choices$(1, 8) = "URINARY TRACT INFECTION" 'dx # 11
Choices$(1, 9) = "OVARIAN CYST" 'dx # 12
Choices$(1, 10) = "ECTOPIC PREGNANCY" 'dx # 13
Choices$(1, 11) = "INCOMPLETE ABORTION" 'dx # 14
Choices$(1, 12) = "EXIT DISPLAY" 'dx # 15
resplength% = 12
END IF

' New method for menu
SELECT CASE MAXNUM
    CASE 0, 7, 15 'none marked, or other dx
        NR% = 1
    CASE 8
        'appi in gyn mode
    CASE 9
        'nonsap in gyn mode
    CASE 2
        CASE 10 TO 14 'other gyn diseases
    CASE MAXNUM - 3
    CASE ELSE
    CASE MAXNUM
END SELECT

DATAHEADINGS$ = "Abdominal Pain Diagnosis Program" + VERSION$
menuheading$ = "Treatment Summary"
HELPFILE$ = "HP11.DAT"
DO
    CALL MenuEntryPage(NR%, resplength%, exitchar$, DATAHEADINGS$, menuheading$, Choices$(), HELPFILE$)
    'decrypt and print treatment text.
    IF NR% <> resplength% THEN
    TXfile$ = "TX" + MID$(STR$(NR%), 2) + ".DAT"

thispage$ = VideoPage$
CALL DisplayEncryptedFile(TXfile$, thispage$)
    END IF
    LOOP UNTIL NR$ = resplength$
    ERASE Choices$
END SUB
ABDXNARA.BAS

DECLARE SUB UnPackArray (PackString$, thearray%())
DECLARE FUNCTION Centered% (s$)
DECLARE FUNCTION Exists% (FIL$)
DECLARE SUB questionPRINT (a$)
DECLARE SUB templatehelp (helpstring$, a$, templatestring$, blankchar$, returncode%, errorstring$, errorflag%)
DECLARE SUB LocateCenter (crow%, infostring$)
DECLARE FUNCTION centeredlocation% (infostring$)
DECLARE SUB CenterString (infostring$)
DECLARE SUB SetFrameColor ()
DECLARE SUB SetNormalColor ()
DECLARE SUB frame (ulr%, ulc%, numlines%, length%, frametyp%)
DECLARE SUB SetColor (thecolor%)
DECLARE SUB headingPRINT (a$)
DECLARE SUB GetKey (a$)
DECLARE SUB LoadTrainingCase (CASENUM%, THECASE%())
DECLARE SUB InitiateTHELOOP (THELOOP%())
DECLARE SUB NarrativeHelp (WritePage%, VisualPage%)
DECLARE SUB InitializeTrainingCase (NUMCASE%, DataString$)
'D This contains the key input and training narrative routines.
DEFINT A-Z

' $INCLUDE: 'include.bas'

FUNCTION Centered% (s$)
' This function returns the col location for printing the centered string s$

   Centered% = (80 - LEN(s$)) \ 2

END FUNCTION

SUB CenterPrint (row%, TheString$)
' This routine centers a string on the screen at row and prints it.
   CALL LocateCenter(row, TheString$)
   PRINT TheString$;

END SUB

SUB CenterString (infostring$)
' This routine centers a string on the screen at the current row.
   crow = CSRLIN
   CALL LocateCenter(crow, infostring$)
   PRINT infostring$;
END SUB

ABDX Programmer's Manual   A-41
SUB GetKey (a$)
'  Waits for character input.
'  Originally a subroutine at line 400
  DO
    a$ = INKEY$
  LOOP WHILE a$ = ""
  IF a$ = CHR$(3) THEN STOP
  a$ = UCASE$(a$)
END SUB

SUB InitializeTrainingCase (NumOfTrainingCase, DataString$)
'  This routine loads the array TrainingCase( ) with the desired
  training case in compacted form.
  'No need to check existence of data file. It was checked when training
  'routine was first entered.
  filename$ = TRAININGCASEFILE$
  filenum = FREEFILE
  OPEN filename$ FOR RANDOM AS filenum LEN = 26
  FIELD #filenum, 26 AS CaseString$
  GET #filenum, NumOfTrainingCase
  DataString$ = CaseString$
  CLOSE #filenum
  end of InitializeTrainingCase()
END SUB

SUB LoadTrainingCase (CASENUM, THECASE%())
'  Gets, decompresses case and places it in THECASE%()
'  this should probably be a subprogram, since it is called in 2 places:
'     1. in the narrative printing routine above,
'     2. in the do you want a different case routine below in line
   31880

ABDXNARA.BAS (cont'd)
' DIM TrainingCase(12)

' get packed case string.
CALL InitializeTrainingCase(CASENUM, DataString$)

' Clear case storage array
31710 FOR i = 1 TO NUMBEROFITEMS
   THECASE%(i) = 0
NEXT i

' Unpack into THECASE%( )
CALL UnPackArray(DataString$, THECASE%( ))

' end of LoadTrainingCase()
END SUB

SUB LocateCenter (crow, infostring$)
   ' This routine computes the location to write the string so that
   ' it
   ' is centered on the 80 col wide screen.
   iscenter = Centered(infostring$)
   LOCATE crow, iscenter
END SUB

SUB ModifyNarrative (CASENUM%, escflag%)
   ' This routine allows for the selection of a different case number
   ' used in the training program.
   CaseHeading$ = "Current Case [  ]"
   IF CASENUM% = 0 THEN
      casenumber$ = "__"
   ELSE
      casenumber$ = RTRIM$(LTRIM$(STR$(CASENUM%)))
      IF LEN(casenumber$) = 1 THEN casenumber$ = casenumber$ + "_"
   END IF
   blankstring$ = "__"
   mainrow = 10
   maincol = 20
   SCREEN 0, 1, 0, 0
   CLS
   Casehelp$ = "Enter the desired case number. Valid case numbers are
1|"
   Casehelp$ = Casehelp$ + " through 50. Press 'Enter' to select the
displayed|
   Casehelp$ = Casehelp$ + " case. Press 'Esc' to exit without changing the
case."
   Caseerror$ = " You have to enter a number between 1 and 50, inclusive."
   CALL SetFrameColor

ABDXNARA.BAS (cont'd)
framtyp - frametype
CALL frame(mainrow - 1, maincol - 2, 1, 28, framtyp)
CALL SetNormalColor
LOCATE mainrow, maincol
questionPRINT (CaseHeading$)
LOCATE mainrow, maincol + 14
PRINT casenumber$;
noerror = 1
DO
LOCATE mainrow, maincol + 14
CALL templatehelp(Casehelp$, casenumber$, "%%", blankstring$, rc, 
   Caseerror$, errorcode)
   rc = 0 CR
   1 Esc
   2 up arrow
   3 down arrow
' Check for Escape. If so, then set exitval, and exit sub.
IF rc = 1 THEN
   escflag = 1
   EXIT SUB
ELSE
   ' Check for valid number, ie, >0 and <51
   ' VAL stops looking at first non-number or space. ( _ stops it.)
   IF LEFT$(casenumber$, 1) = " " THEN
      testcase = VAL(RIGHT$(casenumber$, 1))
   ELSE
      testcase = VAL(casenumber$)
   END IF
   IF testcase < 1 OR testcase > 50 THEN
      noerror = 0
      SOUND 200, 1
   END IF
END IF
END IF
   LOOP UNTIL noerror = 1
   CASENUM% = testcase
   escflag = 0
END SUB

SUB NarrativeHelp (WritePage, VisualPage)
' help routine for narrative
30500 SCREEN 0, 1, 3, 3: CLS
   CALL SetColor(framecolor)
   CALL frame(10, 1, 5, 78, frametype)
   CALL SetColor(forecolor)
   LOCATE 11, 3, 0
30510 PRINT "Push 'N' to go to the next page. (If on last page, will go
   back to"
   LOCATE 12, 3, 0
30515 PRINT " previous menu.)"
   LOCATE 13, 3, 0
30520 PRINT "Push 'P' to go to the previous page. (If on first page,
   will go"
   LOCATE 14, 3, 0
30522 PRINT " back to previous menu.)"
   LOCATE 15, 3, 0
30530 PRINT "Push '?' for this help message."
30540 LOCATE 25, 26
   CALL SetColor(infocolor)
   PRINT " To continue, press any key";
   CALL SetNormalColor
30550 CALL GetKey(a$)
30560 SCREEN 0, 1, WritePage, VisualPage
END SUB
'This module contains routines specific only to ABDX.
DEFINT A-Z
DECLARE SUB SetColor (thecolor%)

' $INCLUDE: 'include.bas'

SUB ABDDrawGraph (WhichOne%)
'      This routine draws the abdominal graph at the proper
coordinates.
'      WhichOne% can be 1 - Pain at onset
'      2 - Pain at present
'      3 - Tenderness
'      XX and YY.
'      Shared variables: graphcolor
'      YOffsetpict
'      forecolor

IF WhichOne% = 2 THEN
    xx = 565
    YY = 100
ELSE
    xx = 75
    YY = 100
END IF

WINDOW SCREEN (0, 0)-(639, 199)
1680 CALL SetColor(graphcolor)
LINE (xx, YY - YOffsetpict)-(xx, YY - 50)
LINE (xx, YY + 50)-(xx, YY + YOffsetpict)
LINE (xx - 50, YY + 20)-(xx - 40, YY - 20), , B
LINE -(xx, YY - 50)
LINE -(xx + 40, YY - 20)
LINE -(xx + 50, YY + 20), , B
LINE (xx + 40, YY + 20)-(xx, YY + 50)
LINE -(xx - 40, YY + 20)
LINE (xx - 40, YY)-(xx - 10, YY)
LINE (xx + 10, YY)-(xx + 40, YY)
CIRCLE (xx, YY), 10, , , .6
CALL SetColor(forecolor)

END SUB

SUB ABDPaintGraph (VAR%, WhichOne%)
'      This routine paints the appropriate sections of the abdomen
graph.
'      WhichOne% can be 1 - Pain at onset
Pain at present

Tenderness

XX and YY.

IF WhichOne% = 2 THEN

ELSE

END IF

SELECT CASE VAR
CASE 1
    PAINT (xx - 1, YY - 48)
CASE 2
    PAINT (xx + 1, YY - 48)
CASE 3
    PAINT (xx - 1, YY + 48)
CASE 4
    PAINT (xx + 1, YY + 48)
CASE 5
    PAINT (xx - 1, YY - 48)
    PAINT (xx + 1, YY - 48)
CASE 6
    PAINT (xx - 1, YY + 48)
    PAINT (xx + 1, YY + 48)
CASE 7
    PAINT (xx - 1, YY - 48)
    PAINT (xx - 1, YY + 48)
CASE 8
    PAINT (xx + 1, YY - 48)
    PAINT (xx + 1, YY + 48)
CASE 9
    PAINT (xx, YY)
CASE 10
    PAINT (xx - 1, YY - 48)
    PAINT (xx + 1, YY - 48)
    PAINT (xx - 1, YY + 48)
    PAINT (xx + 1, YY + 48)
    PAINT (xx, YY)
CASE 11
    PAINT (xx - 41, YY - 19)
CASE 12
    PAINT (xx + 41, YY - 19)
CASE 12 'no pain

CASE ELSE
    'should never get here.
SUB FemaleGraph (FINPROB#())
    This routine draws the bar graph using female diseases.
    'uses bargraph()

    DIM dxptr(7)
    DIM DxString$(7)

    hpframecolor2 = bargraph(1)
    ' Clear center of graph
    LINE (1, 15)-(448, 167), 0, BF
    ' Draw frame for bar graph
    LINE (0, 14)-(449, 168), hpframecolor2, B
    ' These are printed inside the box
    LOCATE 5, 54: PRINT "90%;"
    LOCATE 12, 54: PRINT "50%;"

    dxptr(1) = 2: DxString$(1) = "APPEND"
    dxptr(2) = 10: DxString$(2) = "NONSAP"
    dxptr(3) = 20: DxString$(3) = "PID   
    dxptr(4) = 28: DxString$(4) = "UTI   
    dxptr(5) = 34: DxString$(5) = "OVCYST"
    dxptr(6) = 42: DxString$(6) = "ECTOPI"
    dxptr(7) = 50: DxString$(7) = "INC_AB"

    FOR i = 1 TO 7
        LOCATE 20, 2 + ((i - 1) * 8): PRINT DxString$(i):
        LOCATE 20, dxptr(i): PRINT DxString$(i):

        xoffset = (((i - 1) * 8 + 1) * 8
        IF i = 3 OR i = 4 THEN
            x1 = xoffset
            x2 = 23 + xoffset
        ELSE
            x1 = 8 + xoffset
            IF i = 7 THEN
                x2 = 30 + xoffset
            ELSE
                x2 = 31 + xoffset
            END IF
        END IF
    END IF

    yl = 150 - (FINPROB#(i) / 100 * 136)
    yl = 150 - (95 / 100 * 136)
ABDXONLY.BAS (cont'd)

\[
y_2 = 150
\]
\[
\text{LINE (}x_1, y_1\text{)-(}x_2, y_2\text{), bargraph(i), BF}
\]
\[
\text{theprob} = \text{INT}(\text{FINPROB#(i)} \times 10)
\]
\[
\text{theprob} = \text{theprob} / 10
\]
\[
\text{LOCATE 21, 2 + (}i - 1\text{) \times 8: PRINT USING "###.#"; FINPROB#(i);}
\]
\[
\text{PRINT "\%";}
\]
\[
\text{NEXT } i
\]
\[
\text{LINE (0, 150)-(449, 150), hpframecolor2}
\]
\[
\text{LINE (0, 28)-(449, 28), hpframecolor2, , &HF00F}
\]
\[
\text{LINE (0, 82)-(449, 82), hpframecolor2, , &HF00F}
\]
\[
\text{ERASE dxptr, DxString$}
\]

END SUB

\[
\text{SUB MaleGraph (FINPROB#())}
\]
\[
\text{ ' This routine draws the bar graph using male diseases,}
\]
\[
\text{ ' uses hpframecolor%, bargraph()}
\]
\[
\text{DIM DxString$[7]}
\]
\[
\text{DxString$[1] = "APPEND": DxString$[2] = "NONSAP"
}\]
\[
}\]
\[
}\]
\[
\text{ ' Clear center of graph}
\]
\[
\text{LINE (1, 15)-(448, 167), 0, BF}
\]
\[
\text{ ' Draw frame for bar graph}
\]
\[
\text{LINE (0, 14)-(449, 168), hpframecolor, B}
\]
\[
\text{ ' These are printed inside the box}
\]
\[
\text{LOCATE 5, 54: PRINT "90\%";}
\]
\[
\text{LOCATE 12, 54: PRINT "50\%";}
\]
\[
\text{ ' print male abd diseases bar graph and probs.}
\]
\[
\text{FOR } i = 1 \text{ TO 6}
\]
\[
\text{LINE (19 + ((}i - 1\text{) \times 72), (150 - (\text{FINPROB#(i)} / 100 \times 136)))-(}
\]
\[
(43 + ((}i - 1\text{) \times 72), 150), \text{ bargraph(i), BF}
\]
\[
\text{LOCATE 20, 2 + ((}i - 1\text{) \times 9): PRINT DxString$[i];}
\]
\[
\text{LOCATE 21, 2 + ((}i - 1\text{) \times 9): PRINT USING "###.#"; FINPROB#(i);}
\]
\[
\text{PRINT \"\%\";}
\]
\[
\text{NEXT } i
\]
\[
\text{LINE (0, 150)-(449, 150), hpframecolor}
\]
\[
\text{LINE (0, 28)-(449, 28), hpframecolor, , &HF00F}
\]
\[
\text{LINE (0, 82)-(449, 82), hpframecolor, , &HF00F}
\]

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ERASE DxString$
ABDXSHAR.BAS

DECLARE SUB HPframe()
DECLARE SUB SetFrameColor()
DECLARE SUB ScreenMode(smode$)
DECLARE SUB HelpDataEntry(HLPFIL$, quest$)
DECLARE SUB SetColor(thecolor$)
DECLARE SUB questionPRINT(a$)
DECLARE SUB headingPRINT(a$)
DECLARE SUB responsePRINT(a$)
DECLARE SUB LocateCenter(crow%, infostring$)
DECLARE SUB CenterString(infostring$)
DECLARE SUB GetKey(a$)
DECLARE SUB LoadTrainingCase(CASENUM%, THECASE%())
DECLARE SUB NarrativeHelp(WritePage%, VisualPage%)
DECLARE SUB TrainingHPHeading(IBEGIN%, CASENUM%, NR%, NAM$)
DECLARE SUB InitiatePhrase(EasyHard%, PHRASE$())
DECLARE SUB InitiateTHELOOP(THLOOP$())
DECLARE SUB TextContinuePrompt()
DECLARE SUB frame(ulr%, ulc%, numlines%, length%, frametyp%)
DECLARE SUB mainkeyroutine(exitstring$, quest%, resp%, NUMQUEST%,
                         Numresp%, NUMCOLQUESTS%, VariablePtr%, VARIABLE$(),
                         MULTIP$(), None%, actrow%, GRAPHFLAG$, offset%, STFLAG%,
                         Choices$())
DECLARE SUB UpdateAsterisk(FirstRow%, Firstcol%, NonePtr%, VariPtr%,
                          GraphFlg%, NumberOfResp%, offset%, VARIABLE$())
DECLARE SUB PutCursor(quest%, resp%, Choices$())
DECLARE SUB DrawGraph(WhichOne$)
DECLARE SUB ABDPaintGraph(VAR%, WhichOne$)
DECLARE SUB ABDDrawGraph(WhichOne$)
DECLARE SUB DisplayHProwcol(row%, col%, sxstrng$)
DECLARE SUB DisplayHPTitle(HP$)

'This module contains routines which although have common names with
'routines in CPDX, etc, have been modified specifically for ABDX.

'$INCLUDE: 'include.bas'

REM $DYNAMIC
DEFINT A-Z
SUB BlankGraph(WhichOne$)
    'This routine blanks a block containing the Abd graph, so that it
    can be written over fresh.

    IF WhichOne% = 2 THEN
        XX = 565
        YY = 100
    ELSE'
XX = 75
YY = 100
END IF
WINDOW SCREEN (0, 0)-(639, 199)
LINE (XX - 51, YY + 51)-(XX + 51, YY - 51), backcolor, BF
END SUB

SUB DataEntryPage (exitchar$, question$(x), Choices$(x,y), VariablePtr%(x),
MULTIP%(x), SKIPBLANK%(x), Numresp%(x), None%(x), GRAPHFLAG%(x),
VARIABLE%(x), NUMC0L1QUESTS%, TOPROW%, TOPCOL%, NUMQUEST%,
DATAHEADING$, PAGEOF$, OFPAGE$, HELPFILE$, STFLAG%)

This is a generic routine to enter data for the H&P pages.
Hopefully, it can be used with other programs easily.

exitchar$ ch returned upon exit, will be "XNP"
question$(x) list of questions for this page. x-[1-NUMQUEST]
Choices$(x,y) list of responses for each question
x-[1-NUMQUEST], y-[1-numresp(x)]
VariablePtr%(x) list of locations in VARIABLE for each question
x's responses.
MULTIP%(x) -0 only one answer allowed in question x
-1 multiple answers allowed.
SKIPBLANK%(x) number of lines to skip before question x
used to line up questions side-by-side
Numresp%(x) number of responses for question x
None%(x) response number of any normal/no pain item for
question x. Used to reset other responses
to 0 if it is selected.
GRAPHFLAG(x) - 0 -- any question not requiring graphics
GRAPHFLAG(x) - 1 -- Pain at onset question
GRAPHFLAG(x) - 2 -- pain at present question
GRAPHFLAG(x) - 3 -- Tenderness question
VARIABLE%() the data array
NUMC0L1QUESTS% the number of questions in the first column
TOPROW% row of first response of first question
TOPCOL% col of asterisks for first response of first
question. Is also the starting col
for printing out the question.
NUMQUEST% number of questions on page
DATAHEADING$ title printed at top of screen
PAGEOF$ Number of current page (string form)
OFPAGE$ Maximum number of pages in grouping (string form)
HELPFILE$ Help file for H&P. Remember, that it is
sequential
and not encrypted.
STFLAG% =0 if no changes made to data, -1 if CR pressed.
Global variable
FrameFlag = 0 if framework has not been drawn
= 1 if framework has been drawn. No need to re-draw.

initialize stuff
initialize location for first response of each question
actrow(1) = TOPROW + SKIPBLANK(1) + 1
FOR i = 2 TO NUMCOLIQUESTS
    actrow(i) = actrow(i - 1) + SKIPBLANK(i) + Numresp(i - 1) + 1
NEXT i
IF NUMCOLIQUESTS < NUMQUEST THEN
    actrow(NUMCOLIQUESTS + 1) = TOPROW + SKIPBLANK(i) + 1
    FOR i = NUMCOLIQUESTS + 2 TO NUMQUEST
        actrow(i) = actrow(i - 1) + Numresp(i - 1) + SKIPBLANK(i) + 1
    NEXT i
END IF

All Choices$(i)'s should be the same length, so max length is the
length of any of them; therefore, use the first one.
Xwidth = LEN(Choices$(1, 1))

ShareTOPCOL = TOPCOL
'Set up column pointer for graphics(page 1 of hx, pain at present
should
'not be 40 greater than pain at onset; would overlie abd graph on
right.
IF NUMQUEST > 1 AND GRAPHFLAG(2) = 2 THEN
    ShareTOPCOL2 = 46
ELSE
    ShareTOPCOL2 = TOPCOL + 40
END IF
ShareNUMCOLIQUESTS = NUMCOLIQUESTS

curquest = 1
curresp = 1
'main loop
DO
    headings, frames, info
    headings
    IF FrameFlag = 0 THEN
        CALL SetScreenMode(ScrnMode)
    END IF
    CALL LocateCenter(2, DATAHEADING$)
    headingPRINT (DATAHEADING$)
    Pageheading$ = "Page " + PAGEOF$ + " of " + OFPAGE$
    LOCATE 2, (78 - LEN(Pageheading$))
    headingPRINT (Pageheading$)
IF FrameFlag = 0 THEN
    CALL HPframe

    ' This portion of the subroutine prints the help message at the bottom of the screen.
    SetColor (infocolor)
    LOCATE 23, 1: PRINT "Use the TAB key or arrow keys to move the cursor to the desired position."
    LOCATE 24, 1: PRINT "Push RETURN to select the desired response or (P)revious page, (N)ext page,"
    LOCATE 25, 1, 0
    PRINT "e(X)it, or '?' for more information on that response.";
    SetColor (forecolor)
ELSE
    ' Frame already drawn is OK; need to blank response areas.
    ' Clear left side
    LINE (5, 21)-(314, 171), 0, BF
    ' Clear right side
    LINE (317, 21)-(635, 171), 0, BF

END IF

' Set flag for frame drawing above.
FrameFlag = 1
' Print questions, choices
actcol = TOPCOL
FOR questnum = 1 TO NUMQUEST
    IF questnum > NUMCOL1QUESTS THEN
        actcol = ShareTOPCOL2
    END IF
    ' Print appropriate question heading.
    SELECT CASE GRAPHFLAG(questnum)
    CASE 0
        ' Non-graphics questions
        LOCATE actrow(questnum) - 1, actcol
        questionPRINT (question$(questnum))
    CASE 1
        ' Pain at onset question
        LOCATE 4, 5: questionPRINT ("SITE OF PAIN")
        LOCATE 5, 7: questionPRINT ("At ONSET")
        ' LOCATE 4, 39: questionPRINT ("SITE")
        CALL DrawGraph(1)
    CASE 2
        ' Pain at present question
        LOCATE 4, 66: questionPRINT ("SITE OF PAIN")
        LOCATE 5, 67: questionPRINT ("At PRESENT")
        CALL DrawGraph(2)
    CASE 3
        ' Tenderness question
        LOCATE 4, 6: questionPRINT (question$(1))
        CALL DrawGraph(3)
CASE ELSE
END SELECT

FOR rowptr = 0 TO Numresp%(questnum) - 1
    LOCATE actrow(questnum) + rowptr, actcol + 4, 0
    responsePRINT (Choices$(questnum, rowptr + 1))
NEXT rowptr

'Update asterisks
FirstRow = actrow(questnum)
Firstcol = actcol
NonePtr = None(questnum)
VariPtr = VariablePtr(questnum)
GraphFlg = GRAPHFLAG(questnum)
NumberofResp = Numresp(questnum)
offset = 0
CALL UpdateAsterisk(FirstRow, Firstcol, NonePtr, VariPtr, GraphFlg,
    NumberofResp, offset, VARIABLE())

NEXT questnum

'initialize cursor on page at first question, first response
CALL PutCursor(curquest, curresp, Choices$())

'now comes the key entry routine.
CALL mainkeyroutine(exitstring$, curquest%, curresp%, NUMQUEST,
    NumrespO, NUMCQULUESTS, VariablePtr%(), VARIABLE(), MULTIP(),
    None%(), actrow(), GRAPHFLAG(), offset, STFLAG%, Choices$())
exitchar$ = exitstring$

'print help for H&P questions
IF exitstring$ = "?" THEN
    CALL HelpDataEntry(HELPFILE$, curquest%)
    ' After displaying help file, will need to redraw fully the H&P page.
    FrameFlag = 0
END IF

LOOP UNTIL INSTR("NPX", exitchar$) <> 0

END SUB

REM $STATIC
SUB Disclaimer (VERSION$)
    ' This subprogram displays the warning/disclaimer.
    ' Do not need to save variables; Therefore, not STATIC.
    64290 SCREEN 0, 1, 0, 0: CLS
CALL SetFrameColor
CALL frame(1, 1, 23, 78, 1)
CALL SetNormalColor
64295 LOCATE 1, 16: PRINT "Abdominal Pain Diagnosis Program"; VERSION$ 64300 LOCATE 3, 4: PRINT "This computer-assisted diagnosis and medical support program can"
64301 LOCATE , 4: PRINT "reliably aid the corpsman in differentiating the five illness which"
64302 LOCATE , 4: PRINT "represent the most common serious causes of acute abdominal pain."
64304 LOCATE , 4: PRINT "In addition, a sixth category, non-specific abdominal pain, is"
64305 LOCATE , 4: PRINT "intended to represent those cases which are non-surgical, not life"
64306 LOCATE , 4: PRINT "threatening, and therefore, not reasons for evacuation."
64307 LOCATE , 4: PRINT
64308 LOCATE , 4: PRINT "IMPORTANT - Not all diseases causing acute abdominal pain are"
64309 LOCATE , 4: PRINT "considered. Input of symptom complexes associated with other diseases"
64310 LOCATE , 4: PRINT "will result in a diagnosis of one of the six categories most closely"
64311 LOCATE , 4: PRINT "resembling that disease."
64312 LOCATE , 4: PRINT
64313 LOCATE , 4: PRINT "THE CORPSMAN'S JUDGEMENT MUST TAKE PRECEDENCE WHEN ANY DOUBT"
64314 LOCATE , 4: PRINT "EXISTS. Remember that the computer does not have the capability"
64319 LOCATE , 4: PRINT "to think or make the subjective evaluations which are so important"
64320 LOCATE , 4: PRINT "in medical diagnosis."
LOCATE , 4: PRINT
LOCATE , 4: PRINT "NOTE - This program routinely stores patient information which"
LOCATE , 4: PRINT "requires protection under the Privacy Act of 1974. Users should"
LOCATE , 4: PRINT "ensure that files created by this program are not subject to"
LOCATE , 4: PRINT "unauthorized disclosure."

' This paragraph was in the above. Had to pull it to insert the privacy act
' stuff.
'
' The computer will consider only its questions in making a diagnosis. For example, severe hematemesis would surely play a part
' in the diagnosis and management of the patient, but the computer will be ignorant of the finding, since it will not ask any questions concerning hematemesis. Remember that the computer does not have the capability to think or make the subjective evaluations which are so important in medical diagnosis.

64330 CALL TextContinuePrompt
64980 CALL GetKey(a$)
END SUB

REM $DYNAMIC
SUB DisplayHPprint (HP%, SXloc%(), SXresp$(), VARIABLE%())
' This routine prints the synopses for the hx or pe, depending on the value of HP. HP=0 HX; HP=1 PE

'uses backcolor

'initialize
IF HP = 0 THEN
    IBEGIN = 1
    iend = 88
    fembegin = 160
    femend = 174
ELSE
    IBEGIN = 89
    iend = 152
    fembegin = 153
    femend = 159
END IF

' Print correct heading
CALL DisplayHPTitle(HP)
CALL scrollup(4, 2, 22, 79, 0, backcolor)
row = 0
col = 0

'cycle through and check responses
FOR i = IBEGIN TO iend
    IF VARIABLE(i) = 1 THEN
        CALL DisplayHProwcol(row, col, SXresp$(i))
    END IF
NEXT i
'female questions
FOR i = fembegin TO femend
    IF VARIABLE(i) = 1 THEN
        CALL DisplayHProwcol(row, col, SXresp$(i))
    END IF
NEXT i
ABDXSHAR.BAS (cont’d)

END SUB

SUB DrawGraph (WhichOne%)
' This routine allows mainkeyroutine to be used by all
' programs (ABDX, CPDX, etc), by modifying only the next line to call the
' proper subroutine.

CALL ABDDrawGraph(WhichOne%)
END SUB

REM $STATIC

SUB InitiatePhrase (EasyHard, PHRASE$())
' Initializes the array PHRASE$() with easy or hard case narrative
' phrases.
'     EasyHard = 1  -> Easy case narrative phrases
'     EasyHard = 2  -> Hard case narrative phrases

IF EasyHard = 1 THEN
  REM Data for easy case narrative data phrases.
  PHRASE$(11) = " the right upper quadrant"
  PHRASE$(12) = " the left upper quadrant"
  PHRASE$(13) = " the right lower quadrant"
  PHRASE$(14) = " the left lower quadrant"
  PHRASE$(15) = " the upper half"
  PHRASE$(16) = " the lower half"
  PHRASE$(17) = " the right half"
  PHRASE$(18) = " the left half"
  PHRASE$(19) = " the central part of his belly"
  PHRASE$(20) = " a rather vague area over the whole abdomen"
  PHRASE$(21) = " the right flank area"
  PHRASE$(22) = " the left flank area"
  PHRASE$(23) = " 
  PHRASE$(24) = " and is now located in the right upper quadrant"
  PHRASE$(25) = " and is now located in the left upper quadrant"
  PHRASE$(26) = " and is now located in the right lower quadrant"
  PHRASE$(27) = " and is now located in the left lower quadrant"
  PHRASE$(28) = " and is now located in the upper half"
  PHRASE$(29) = " and is now located in the lower half"
  PHRASE$(30) = " and is now located in the right half"
  PHRASE$(31) = " and is now located in the left half"
  PHRASE$(32) = " and is now located centrally"
  PHRASE$(33) = " and is now located over the whole abdomen"
  PHRASE$(34) = " and is now located in the right flank area"
  PHRASE$(35) = " and is now located in the left flank area"
  PHRASE$(36) = " 
  PHRASE$(37) = " and seems to come and go."
it and seems to be fairly constant."
" and seems to come and go but never really goes away entirely."
" not very bad right now"
" a really intense pain"
" Movement seems to make the pain worse and"
" Coughing seems to make the pain worse and"
" Breathing seems to make the pain worse and"
" Food seems to make the pain worse and"
" Applying ice to the area of pain seems to make the pain worse and"
" Nothing the patient does makes the pain worse and"
" and it seems to be about the same as when it first began."
" and it seems to be getting worse."
" The pain began less than 12 hours ago and is"
" The pain began 14 hours ago and is"
" The pain began some time yesterday and is"
" The pain began two days ago and is"
" lying still makes the pain a little better."" vomiting relieves the pain a little."" antacids seems to relieve the pain a little."" eating bland foods seems to relieve the pain a little."
" applying heat to the area of pain seems to help a little."
" nothing he does makes the pain any better."" He has felt sick to his stomach all day"
" He hasn’t been nauseated today"
" and has vomited twice."" and has not been vomiting."" His bowels have been relatively normal"
" He has been experiencing some constipation recently"
" He has had some diarrhea recently"
" He has noticed some blood in his bowel movements recently"
" He has noticed some stringy white material in his stool recently"
" He states that he has not felt like eating today because of his discomfort."
" He states that he still feels like eating in spite of the discomfort."
" One of his friends has told him that his eyes have been turning a yellow color recently."" He hasn’t noticed any change in the color of his skin or eyes recently."" and his urinary habits have been normal."
PHRASE$(75) - " and he complains of having to urinate more often than usual."
PHRASE$(76) - " and he has had some discomfort when he urinates."
PHRASE$(77) - " and his urine has been darker than usual."
PHRASE$(78) - " and he has noticed a red tint to his urine recently."
PHRASE$(79) - " He has been bothered by minor G-I upset from time to time."
PHRASE$(80) - " There is no history of previous G-I upset."
PHRASE$(81) - " and he relates an episode of pain very similar to this a couple of months ago."
PHRASE$(82) - " and he cannot recall ever having a pain like this before."
PHRASE$(83) - " An appendectomy was performed when he was very young and he doesn't remember any other hospitalization."
PHRASE$(84) - " Repair of a hernia has been his only hospitalization."
PHRASE$(85) - " The patient relates a history of many episodes of abdominal illness."
PHRASE$(86) - " The patient denies a history of G-I illnesses."
PHRASE$(87) - " and is now taking aspirin and Maalox for his pain."
PHRASE$(88) - " and is not taking any medication for his pain."
PHRASE$(89) - " 98.4,"
PHRASE$(90) - " 100.2,"
PHRASE$(91) - " 101.1,"
PHRASE$(92) - " 102.6,"
PHRASE$(93) - " pulse 74,"
PHRASE$(94) - " pulse 86,"
PHRASE$(95) - " pulse 110,"
PHRASE$(96) - " blood pressure 86/"
PHRASE$(97) - " blood pressure 122/"
PHRASE$(98) - " blood pressure 144/"
PHRASE$(99) - " 62,"
PHRASE$(100) - " 80,"
PHRASE$(101) - " 94,"
PHRASE$(102) - " Your examination reveals a patient who is well developed and well nourished, in no apparent distress, and who"
PHRASE$(103) - " Your examination reveals a patient who is in obvious distress from his pain and who"
PHRASE$(104) - " Your examination reveals a patient who is concerned about his condition but doesn't appear to be in distress and who"
PHRASE$(105) - " se color appears normal."
PHRASE$(106) - " appears pale."
PHRASE$(107) - " appears flushed."
PHRASE$(108) - " appears to have a yellow color to his skin and eyes."
PHRASE$(109) - " se skin has a slight blue color."
PHRASE$(110) - " and his white blood cell count is 6,800."
AEDXSHAR.BAS (cont'd)

PHRASE$(111) - " and his white blood cell count is 8,800."
PHRASE$(112) - " and his white blood cell count is 10,800."
PHRASE$(113) - " and his white blood cell count is 13,000."
PHRASE$(114) - " and his white blood cell count is 16,200."
PHRASE$(115) - " Inspection of the abdomen reveals no abnormalities."
PHRASE$(116) - " Inspection of the abdomen reveals visible peristaltic waves."
PHRASE$(117) - " The patient experienced difficulty in raising his belly to touch your hand when requested to during the abdominal inspection."
PHRASE$(118) - " A surgical scar is present in the midline"  
PHRASE$(119) - " There are no surgical scars on the abdomen"
PHRASE$(120) - " The patient reflexively tenses his abdominal muscles during palpation and"
PHRASE$(121) - " The patient doesn't appear to be guarding and"
PHRASE$(122) - " there is some residual muscle spasm throughout the examination."
PHRASE$(123) - " the abdomen is soft during palpation."
PHRASE$(124) - " Bowel sounds are normal."
PHRASE$(125) - " No bowel sounds could be appreciated."
PHRASE$(126) - " Bowel sounds are markedly increased."
PHRASE$(127) - " and there is a generalized swelling of the entire abdomen."
PHRASE$(128) - " and there is no apparent distention."
PHRASE$(129) - " There is a mass appreciated centrally and"
PHRASE$(130) - " There are no masses and"
PHRASE$(131) - " Tenderness is noted in the right upper quadrant"
PHRASE$(132) - " Tenderness is noted in the left upper quadrant"
PHRASE$(133) - " Tenderness is noted in the right lower quadrant"
PHRASE$(134) - " Tenderness is noted in the left lower quadrant"
PHRASE$(135) - " Tenderness is noted in the upper half of the abdomen"
PHRASE$(136) - " Tenderness is noted in the lower half of the abdomen"
PHRASE$(137) - " Tenderness is noted in the right half of the abdomen"
PHRASE$(138) - " Tenderness is noted in the left half of the abdomen"
PHRASE$(139) - " Tenderness is noted in the middle of the abdomen"
PHRASE$(140) - " Tenderness is noted over the entire abdomen"
PHRASE$(141) - " Tenderness is noted in the right flank area"
PHRASE$(142) - " Tenderness is noted in the left flank area"
PHRASE$(143) - " Tenderness is not noted"
PHRASE$(144) - " Murphy's sign is present."
PHRASE$(145) - " Murphy's sign is not present."
PHRASE$(146) - " and rebound tenderness is appreciated."
PHRASE$(147) - " and rebound tenderness is not appreciated."
PHRASE$(148) - " The rectal examination is non-revealing."
ABDXSHAR.BAS (cont'd)

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PHRASE$(149) - " A mass is appreciated anteriorly on rectal examination."
PHRASE$(150) - " Tenderness is elicited on the left side during rectal examination."
PHRASE$(151) - " Tenderness is elicited on the right side during rectal examination."
PHRASE$(152) - " Rectal examination reveals generalized tenderness."

ELSE
RE Harder case narrative data phrases.
PHRASE$(11) - " the right side of his belly below his ribs"
PHRASE$(12) - " the left side of his belly below his ribs"
PHRASE$(13) - " the lower part of his belly and mostly on the right side"
PHRASE$(14) - " the lower part of his belly and mostly on the left side"
PHRASE$(15) - " the upper part of his belly"
PHRASE$(16) - " the lower part of his belly"
PHRASE$(17) - " the middle area of his belly but mostly on the right"
PHRASE$(18) - " the middle area of his belly but mostly on the left"
PHRASE$(19) - " the area right around his navel"
PHRASE$(20) - " the middle of his belly but spread out all over"
PHRASE$(21) - " his right side mostly around the back"
PHRASE$(22) - " his left side but mostly around the back"
PHRASE$(23) - " "
PHRASE$(24) - " and is now located on the right side mostly just below the ribs"
PHRASE$(25) - " and is now located on the left side mostly just below the ribs"
PHRASE$(26) - " and is now located on the right side below his navel"
PHRASE$(27) - " and is now located on the left side below his navel"
PHRASE$(28) - " and is now located mostly in a vague area above his navel"
PHRASE$(29) - " and is now located mostly in a vague area below his navel"
PHRASE$(30) - " and is now located mostly on the right side of his belly"
PHRASE$(31) - " and is now located mostly on the left side of his belly"
PHRASE$(32) - " and is now located mostly in the middle (he puts his finger on his navel when asked to point to the pain)"
PHRASE$(33) - " and it now hurts everywhere"
PHRASE$(34) - " and it now hurts toward the back and over his right hip"
PHRASE$(35) - " and it now hurts toward the back and over his left hip"
PHRASE$(36) - " "
but he doesn't have it right now."
and it just won't seem to go away."
and although it seems a little better right now, it's still there."
It isn't giving him a great deal of discomfort right now"
It has him doubled-over most of the time"
The pain is worse when he tries to climb ladders and"
The pain is worse when he coughs and"
The pain seems to be accentuated when he exhales deeply and"
He says that the pain seems to get worse when he eats and"
Pressing on the region of the pain seems to make it worse and"
He cannot think of anything that makes the pain worse and"
and it seems to be easing up a little now."
and it really hasn't changed very much."
and he hopes you can ease the pain a little since his discomfort is increasing."
When he began his watch 8 hours ago, he was free of pain."
He has only noticed the pain during the last day."
He was in his usual state of good health until yesterday."
Because of the pain, he has not felt like standing watch for the last three days."
he prefers to stay in his rack since the pain is less then."
vomiting relieves the pain a little."
the one drink of Maalox you just gave him seems to make the pain a little better."
milk seems to relieve the pain a little."
applying heat to the area of pain seems to help."
he hasn't been able to find anything which will relieve the pain."
He has felt sick to his stomach all day and"
He hasn't really felt sick to his stomach and"
has vomited a couple of times."
has not vomited."
He hasn't noticed any change in his bowels."
He has been unable to have a bowel movement in the past three days"
He has had loose stools for the last four days"
He has noticed a red color in the water after a bowel movement"
ABDXSHAR.BAS (cont’d)

PHRASE$(69) - " He has seen some white, stringy material in his stool lately"
PHRASE$(70) - " He states that food is distinctly unappealing to him."
PHRASE$(71) - " He states that he was able to eat a regular meal earlier today."
PHRASE$(72) - " While shaving yesterday, he noticed a yellow tint to his eyes."
PHRASE$(73) - " He hasn’t appreciated any change in the color of his eyes."
PHRASE$(74) - " and has not had a problem with urination."
PHRASE$(75) - " and he complains of having to urinate every 45 minutes."
PHRASE$(76) - " and he complains of burning when he urinates."
PHRASE$(77) - " and his urine has darkened so much that it looks like tea."
PHRASE$(78) - " and his urine has been slightly red-colored recently."
PHRASE$(79) - " He has frequently been bothered by stomach upset after meals"
PHRASE$(80) - " He hasn’t been bothered by stomach upset"
PHRASE$(81) - " and he has occasionally had episodes of pain like this in the last two months."
PHRASE$(82) - " and he has never had this same pain before."
PHRASE$(83) - " Correction of pyloric stenosis as a child has been his only hospitalization."
PHRASE$(84) - " His only hospitalizations were for pneumonia and a tonsillectomy."
PHRASE$(85) - " The patient states that he has a long history of undiagnosed abdominal pains"
PHRASE$(86) - " The patient hasn’t had any major illnesses since childhood"
PHRASE$(87) - " and is now taking probanthine, Maalox and Gaviscon."
PHRASE$(88) - " and denies the need for medication at this time."
PHRASE$(89) - " 98.2,
PHRASE$(90) - " 100.2,"
PHRASE$(91) - " 101.1,"
PHRASE$(92) - " 102.6,"
PHRASE$(93) - " pulse 74,"
PHRASE$(94) - " pulse 86,"
PHRASE$(95) - " pulse 110,"
PHRASE$(96) - " blood pressure 86/"
PHRASE$(97) - " blood pressure 122/"
PHRASE$(98) - " blood pressure 144/"
PHRASE$(99) - " 62,"
PHRASE$(100) - " 80,"
PHRASE$(101) - " 94,"
Your examination reveals a well-developed and well-nourished patient who is calm and is in no apparent distress.

Your examination reveals a patient who is obviously in severe pain.

Your examination reveals a patient who is concerned about his condition but is not in severe pain.

" and whose color is normal.

" and who appears a little pale.

" and the color of his face seems to be redder than usual.

" and his skin and sclera are obviously icteric.

" and his white blood cell count is 6,800.

" and his white blood cell count is 8,800.

" and his white blood cell count is 10,800.

" and his white blood cell count is 13,000.

" and his white blood cell count is 16,200.

Inspection of the abdomen reveals normal movement without obvious peristaltic waves.

Inspection of the abdomen reveals visible wave-like movements on the surface.

Inspection of the abdomen is normal except that the patient has some trouble raising his belly to your hand.

A well-healed surgical scar is noted on the anterior abdominal wall.

And there are no marks or scars on the abdomen.

The patient reflexively tenses his abdominal wall muscles during palpation.

The patient is easily able to relax during the examination.

And there is some residual muscle spasm throughout the examination.

And the abdomen is soft during palpation.

On auscultation of the abdomen, two gurgles were noted per minute.

No bowel sounds could be appreciated.

On auscultation of the abdomen, constant gurgles were heard.

The abdomen appears slightly bloated.

The abdomen is flat.

There appears to be a localized swelling near the umbilicus.

There don’t appear to be any localized swellings.

On the right side of his belly below his ribs.

On the left side of his belly below his ribs.

On the lower part of his belly, mostly on the right side.
PHRASE$(134) = " on the lower part of his belly, mostly on the left side"
PHRASE$(135) = " on the upper part of his belly"
PHRASE$(136) = " on the lower part of his belly"
PHRASE$(137) = " in the middle part of his belly but mostly on the right"
PHRASE$(138) = " in the middle part of his belly but mostly on the left"
PHRASE$(139) = " in the area right around his navel"
PHRASE$(140) = " in the middle of his belly but spread out all over"
PHRASE$(141) = " on his right side but mostly around the back"
PHRASE$(142) = " on his left side but mostly around the back"
PHRASE$(143) = ""
PHRASE$(144) = " and you notice that the patient experiences pain when you are palpating below the right ribs. Palpation of the abdomen reveals an area of tenderness"
PHRASE$(145) = " and no pain or reflex inhibition of inspiration is noted when palpating below the right costal margin. Palpation of the abdomen reveals an area of tenderness"
PHRASE$(146) = " with a marked increase in the pain when quickly withdrawing your hand to the level of the skin."
PHRASE$(147) = " with no increase in the pain when quickly withdrawing your hand to the level of the skin."
PHRASE$(148) = " The rectal examination fails to reveal masses, tenderness, or occult blood."
PHRASE$(149) = " The rectal examination reveals a nodule on the rectal wall."
PHRASE$(150) = " The rectal examination reveals slight tenderness on the left side."
PHRASE$(151) = " The rectal examination reveals slight tenderness on the right side."
PHRASE$(152) = " The rectal examination reveals tenderness on both sides, but more on the right side."

END IF

END SUB

---

SUB InitiateTHELOOP (THELOOP%())
' Routine initiates the THELOOP%() array with beginning and ending response numbers.
29800 THELOOP%(0, 1) = 11: THELOOP%(0, 2) = 23
   THELOOP%(1, 1) = 24: THELOOP%(1, 2) = 39
   THELOOP%(2, 1) = 51: THELOOP%(2, 2) = 54
   THELOOP%(3, 1) = 40: THELOOP%(3, 2) = 41
   THELOOP%(4, 1) = 48: THELOOP%(4, 2) = 50
   THELOOP%(5, 1) = 42: THELOOP%(5, 2) = 47
   THELOOP%(6, 1) = 55: THELOOP%(6, 2) = 64
   THELOOP%(7, 1) = 70: THELOOP%(7, 2) = 73

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THELOOP%(8, 1) = 65: THELOOP%(8, 2) = 69
THELOOP%(9, 1) = 74: THELOOP%(9, 2) = 88
THELOOP%(10, 1) = 89: THELOOP%(10, 2) = 101
THELOOP%(11, 1) = 110: THELOOP%(11, 2) = 114
THELOOP%(12, 1) = 102: THELOOP%(12, 2) = 109
THELOOP%(13, 1) = 115: THELOOP%(13, 2) = 117
THELOOP%(14, 1) = 124: THELOOP%(14, 2) = 126
THELOOP%(15, 1) = 118: THELOOP%(15, 2) = 119
THELOOP%(16, 1) = 127: THELOOP%(16, 2) = 128
THELOOP%(17, 1) = 120: THELOOP%(17, 2) = 123
THELOOP%(18, 1) = 129: THELOOP%(18, 2) = 130
THELOOP%(19, 1) = 144: THELOOP%(19, 2) = 145
THELOOP%(20, 1) = 131: THELOOP%(20, 2) = 143
THELOOP%(21, 1) = 146: THELOOP%(21, 2) = 152

END SUB

SUB narrative (NR, CASENUM, THECASE%())
  DIM THELOOP%(21, 2), PHRASE$(152)

  ' Initialize PHRASE$( ) array.
  '     NR = 1 -> Easy case narrative phrases
  '     NR = 2 -> Hard case narrative phrases
  CALL InitiatePhrase(NR, PHRASE$( ) )

  31330 LOCATE 15, 10, 1: PRINT "Enter the desired case number (1-50): ";
  31340 LINE INPUT a$
  31342 LOCATE , , 0
  31345 IF a$ = "" THEN
    ERASE THELOOP%, PHRASE$
    EXIT SUB
  END IF
  31350 CASENUM = VAL(LEFT$(a$, 3))

  ' Check Validity of the Number Entered. If Invalid, Beep and Get Another Case Number.
  31360 IF CASENUM < 1 OR CASENUM > 50 THEN
    SOUND 100, 4
    LOCATE 15, 47: PRINT SPACE$(10)
    GOTO 31330
  END IF

  'load desired case
  CALL LoadTrainingCase(CASENUM, THECASE%() )

  ' 31370 GOSUB 31700
'create array with beginning and ending response numbers for each question.
CALL InitiateTHELOOP(THELOOP%())
'31430 RESTORE 29800
'31440 FOR I=0 TO 21:FOR J=1 TO 2:READ THELOOP%(I,J):NEXT J:NEXT I
31445 IBEGIN = 0: NAM$ = "History"
CALL TrainingHPHeading(IBEGIN, CASENUM, NR, NAM$)
31450 FOR i = 3 TO 10
   IF THECASE%(i) <> 0 THEN GOTO 31460
NEXT i
31460 IF i = 4 THEN AGE = 19 ELSE AGE = 10 * (i - 3) + INT(RND * (10))
31470 a$ = "This patient is a" + STR$(AGE) + " year old sailor who presents with pain in his abdomen which began in"
31480 GOSUB 20050
31490 K1 = 0: K2 = 9: GOSUB 20200: a$ = "": GOSUB 20090: LOCATE 1, 1, 0
31500 GOTO 31570
31540 IBEGIN = 1: NAM$ = "Physical": BENTHER = 1
CALL TrainingHPHeading(IBEGIN, CASENUM, NR, NAM$)
31545 a$ = "On physical examination of your patient, he is noted to have a temperature of": GOSUB 20050
31550 K1 = 10: K2 = 11: GOSUB 20200: a$ = "": GOSUB 20090
31560 K1 = 12: K2 = 21: GOSUB 20200: a$ = "": GOSUB 20090: LOCATE 1, 1, 0
31570 CALL GetKey(a$)
   IF a$ = "X" THEN
      ERASE THELOOP%, PHRASE$ EXIT SUB
   END IF
31580 IF a$ = "P" THEN
   IF IBEGIN = 1 THEN
      IBEGIN = 0
      SCREEN 0, 1, 0
      GOTO 31570
   ELSE
      ERASE THELOOP%, PHRASE$ EXIT SUB
   END IF
   END IF
31590 IF a$ = "?" THEN
   CALL NarrativeHelp((IBEGIN), (IBEGIN))
   GOTO 31570
   END IF
31600 IF a$ <> "N" THEN SOUND 100, 4: GOTO 31570
31604 IF IBEGIN = 1 THEN EXIT SUB
ABDXSHAR.BAS (cont’d)

31606 IF BENTHER = 0 THEN
    GOTO 31540
ELSE
    IBEGIN = 1
    SCREEN 0, 1, 1
    GOTO 31570
END IF

20050 B$ = "": COUNTER = 1: ACOUNT = 1
20090 IF a$ = "" THEN
    LOCATE , 3
    PRINT B$
    B$ = "": COUNTER = 1: ACOUNT = 1
    RETURN
END IF

20100 B$ = B$ + MID$(a$, ACOUNT, 1)
20110 ACOUNT = ACOUNT + 1
20120 IF ACOUNT > LEN(a$) THEN ACOUNT = ACOUNT
20130 IF COUNTER > 72 THEN 20150
20140 GOTO 20100
20150 COUNTER = COUNTER - 1: ACOUNT = ACOUNT - 1
20160 IF MID$(B$, COUNTER, 1) = " " THEN
    LOCATE , 3
    PRINT MID$(B$, 1, COUNTER - 1)
    COUNTER = 1
    ACOUNT = ACOUNT + 1
    B$ = ""
    GOTO 20100
END IF
20170 COUNTER = COUNTER - 1: ACOUNT = ACOUNT - 1
20180 GOTO 20160
20200 FOR i = K1 TO K2
20205 IF i = 0 OR i = 20 THEN
    GOSUB 20300
    GOTO 20235
END IF

20210 FOR J = THELOOP%(i, 1) TO THELOOP%(i, 2)
20220 IF THECASE%(J) <> 0 THEN
    a$ = PHRASE$(J)
    GOSUB 20090
END IF

20230 NEXT J
20235 NEXT i
20240 RETURN

20300 MULFLAG = 0
20310 FOR J = THELOOP%(i, 1) TO THELOOP%(i, 2)
ABDXSHAR.BAS (cont'd)

20320 IF THECASE%(J) = 0 THEN 20350
20330 a$ = PHRASES%(J): IF MULFLAG <> 0 THEN a$ = " and" + a$
20340 GOSUB 20090: MULFLAG = 1
20350 NEXT J: RETURN
END SUB

REM $DYNAMIC
SUB PaintGraph (VAR%, WhichOne%)" This routine allows mainkeyroutine to be used by all
' programs(ABDX,CPDX,etc), by modifying only the next line to call the
' proper subroutine.
    CALL ABDPaintGraph(VAR%, WhichOne%)
END SUB

REM $STATIC
SUB TrainingHPHeading (IBEGIN, CASENUM, NR, NAM$)
' Draws heading for Training case narrative H&P
20000 SCREEN 0, 1, IBEGIN, IBEGIN
    CLS
20010 LOCATE 1, 2
    dash$ = "Training Case number:" + STR$(CASENUM)
    dash$ = dash$ + " Difficulty:" + STR$(NR)
    headingPRINT (dash$)
20020 LOCATE 2, 30
    PRINT NAM$;
    CALL SetFrameColor
    framtyp = frametype
    CALL frame(3, 1, 20, 78, framtyp)
    CALL SetNormalColor
20025 LOCATE 25, 8
    SetColor (infocolor%)
    infostring$ = "Enter (P)revious, (N)ext, e(X)it, or (?) for help." 
    CALL CenterString(infostring$)
    SetColor (forecolor%)
20030 LOCATE 4, 1, 0
END SUB

SUB UpdateAge (agevar%, VARIABLE%())
' This routine looks at agevar, and checks it for legality. Then, the
' VARIABLEQ array corresponding to age is zeroed and it is then updated
' at the proper element.
' NOTE: agevar initially is the age. On return, it is the pointer to
' the age in VARIABLEQ.

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ABDXSHAR.BAS (cont'd)

IF agevar > AGEMAXIMUM THEN agevar = AGEMAXIMUM
agevar = INT(agevar / 10) + 3
FOR i = 3 TO 10
    VARIABLE(i) = 0
NEXT i
VARIABLE(agevar) = 1

END SUB
DECLARE SUB SetColor (thecolor%)  
DECLARE FUNCTION VideoMode% ()  
DECLARE SUB CenterPrint (row%, TheString$)  
DECLARE SUB TextPause ()  
DECLARE FUNCTION Centered% (s$)  
DECLARE SUB inversegraph (row%; col%; StrWidth%)  
DECLARE SUB SetFrameColor ()  
DECLARE SUB SetNormalColor ()  
DECLARE FUNCTION FileIsPresent& (nam$)  
DECLARE SUB GetUCResponse (ch$, filter$)  
DECLARE SUB TextContinuePrompt ()  
DECLARE SUB UpdatePtrMinus (ptr%)  
DECLARE SUB UpdatePtrPlus (ptr%)  
DECLARE SUB frame (ulr%, ulc%, numlines%, length*, frametyp%)  
DECLARE SUB GetKey (a$)  
DECLARE SUB ContinuePrompt ()  
DEFINT A-Z  
' $INCLUDE: 'include.bas'

FUNCTION FileIsPresent& (nam$)  
' This routine returns a 0 if file is not present and the length  
' of the file if it is present.  

filename = FREEFILE  
OPEN "R", #1, nam$, filename  
N& = LOF(1)  
CLOSE filename
SUB frame (ulr, ulc, numlines, length, frametyp)

  ' Draws frame about coordinates given which form the corner of
  ' the frame. Numlines and length do not include frame itself.
  ' Also, can have several types of frames.
  ' 1 - single frame, 2 - double frame; 3-5 - block frames.

  ' Will use line statement if in screen 2. It seems that some of the
  ' straight CGA cards to not have the high ASCII graphics characters
  ' in screen 2. (At least that is the case for the IBM CGA board.)

IF VideoMode = 6 THEN  'screen 2
  ulxcoor = (ulc - 1) * 8
  ulycoor = (ulr - 1) * 8
  lrxcoor = (ulc + length) * 8
  lrycoor = (ulr + numlines) * 8

SELECT CASE frametyp
  CASE 1     'single line
    LINE (ulxcoor + 4, ulycoor + 4)-(lrxcoor + 4, lrycoor + 4), 1, B
    LINE (ulxcoor + 5, ulycoor + 4)-(lrxcoor + 3, lrycoor + 4), 1, B
  CASE ELSE  'throw everything else as 2 lines.
    LINE (ulxcoor + 1, ulycoor + 2)-(lrxcoor + 5, lrycoor + 4), 1, B
    LINE (ulxcoor + 2, ulycoor + 2)-(lrxcoor + 4, lrycoor + 4), 1, B
    LINE (ulxcoor + 4, ulycoor + 4)-(lrxcoor + 2, lrycoor + 2), 1, B
    LINE (ulxcoor + 5, ulycoor + 4)-(lrxcoor + 1, lrycoor + 2), 1, B
END SELECT
ELSE

SELECT CASE frametyp
  CASE 1
    tlc$ = CHR$(218)
    trc$ = CHR$(191)
    llc$ = CHR$(192)
    lrc$ = CHR$(217)
    horiz = 196
    vert$ = CHR$(179)
  CASE 2
    tlc$ = CHR$(201)
    trc$ = CHR$(187)
    llc$ = CHR$(200)
    lrc$ = CHR$(188)
    horiz = 205

END SELECT
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CASE 3
  tlc$ = CHR$(176)
  trc$ = CHR$(176)
  llc$ = CHR$(176)
  lrc$ = CHR$(176)
  horiz  = 176
  vert$ = CHR$(176)

CASE 4
  tlc$ = CHR$(177)
  trc$ = CHR$(177)
  llc$ = CHR$(177)
  lrc$ = CHR$(177)
  horiz  = 177
  vert$ = CHR$(177)

CASE 5
  tlc$ = CHR$(178)
  trc$ = CHR$(178)
  llc$ = CHR$(178)
  lrc$ = CHR$(178)
  horiz  = 178
  vert$ = CHR$(178)

CASE ELSE
  tlc$ = CHR$(219)
  trc$ = CHR$(219)
  llc$ = CHR$(219)
  lrc$ = CHR$(219)
  horiz  = 219
  vert$ = CHR$(219)

END SELECT

'reality checks for coordinates -- add later.

  horiz$ = STRING$(length, horiz)
  topstring$ = tlc$ + horiz$ + trc$
  bottomstring$ = llc$ + horiz$ + lrc$
  LOCATE ulr, ulc
  PRINT topstring$;
  lrc = ulc + length + 1
  lrr = ulr + numlines + 1
  FOR r = ulr + 1 TO lrr - 1
    LOCATE r, ulc: PRINT vert$;
  NEXT r
  LOCATE lrr, ulc
  PRINT bottomstring$;
END IF

END SUB

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SUB GetBoatStuff (BOAT1$, BOAT2$, HMNAM$, HMSSN$, VersionNumber$)
    ' This routine checks for SHIP.DAT and gets info from it. If
    ' it is not present, then it asks questions and creates it.
    ' It also checks for SUBPIC.DAT and prints it if found.
64000 REM TITLE PAGE ROUTINE
64010
REM This routine checks for presence of the SHIP.DAT file.
SHIP.DAT contains corpsman's name and SSN and Boat Name.
64020 NAMEOFFILE$ = "SHIP.DAT"
    ' SHIP.DAT file does not exist. Routine to create file.
    IF FileIsPresent&(NAMEOFFILE$) = 0 THEN
SCREEN 0, 1, 0, 0
CLS
64050 PRINT "The SHIP.DAT file is not present on the program disk."
PRINT " This file contains your name, and boat. You will now"
PRINT " create it."
PRINT
    ' Enter Boat Name and Hull Number.
PRINT "Enter your boat name. (ex: USS MISSISSIPPI (do not include hull #))"
PRINT " BOAT NAME > ";
LINE INPUT BOAT1$
PRINT
PRINT "Enter your boat's hull number. (ex: SSBN 999 BLUE)"
PRINT " HULL NUMBER > ";
LINE INPUT BOAT2$
    ' Enter Corpsman's Name.
PRINT
PRINT "Enter your name as signed on an SF-600."
PRINT " NAME > ";
LINE INPUT HMNAM$
PRINT
PRINT "Enter your SSN. If you do not desire your SSN to be printed"
PRINT " beneath your name on an SF-600 entry, just press the ENTER"
PRINT " key by itself."
PRINT
PRINT " SSN > ";
LINE INPUT HMSSN$

    ' Display Boat Name, Hull Number, Corpsman's Name and SSN.
CLS
LOCATE 10, 10: PRINT "Boat Name - "; BOAT1$
LOCATE 11, 10: PRINT "Hull Number - "; BOAT2$
LOCATE 12, 10: PRINT "Your Name - "; HMNAM$
LOCATE 13, 10: PRINT "Your SSN - "; HMSSN$
ABDXSUB1.BAS (cont'd)

Ask user if information is correct. If correct, then store information in file SHIP.DAT. If incorrect, get new information.
LOCATE 17, 10: PRINT "Is this correct? [Y/N] ";
64060 CALL GetUCResponse(a$, "YN")
IF a$ = "N" THEN CLS : GOTO 64050
OPEN "SHIP.DAT" FOR OUTPUT AS #1
PRINT #1, BOAT1$
PRINT #1, BOAT2$
PRINT #1, HNMAM$
PRINT #1, HMSSN$
CLOSE #1
CLS
ELSE
64200 OPEN "I", #1, "SHIP.DAT"
64210 LINE INPUT #1, BOAT1$
64220 LINE INPUT #1, BOAT2$
64230 LINE INPUT #1, HNMAM$
64235 LINE INPUT #1, HMSSN$
64240 CLOSE #1
END IF
64250 NAMEOFFILE$ = "SUBPIC.BIN"
REM This routine checks for presence of the SUBPIC.DAT file.
IF FileIsPresent&(NAMEOFFILE$) = 0 THEN
   File does not exist. Display the title of the program and
   Boat Name, Hull Number, Corpsman's Name and SSN. Display
   instructions at the bottom of the screen.
SCREEN 0, 1, 0, 0
CLS
   CALL SetFrameColor
   CALL frame(1, 1, 23, 78, 1)
   CALL SetNormalColor
64295 LOCATE 1, 16: PRINT "Chest Pain Diagnosis Program"; VERSION$
   CALL SetColor(MAINHEADINGCOLOR$)
   ConfigureTitle$ = PROGRAMTYPE$ + " Diagnostic Program"
   CALL CenterPrint(1, ConfigureTitle$)
   ConfigureVersion$ = "Version " + VersionNumber$
   CALL CenterPrint(2, ConfigureVersion$)
   CALL SetColor(forecolor)
   CALL CenterPrint(10, "Configured For:")
   CALL SetColor(hiwhite)
   CALL CenterPrint(12, BOAT1$
   CALL CenterPrint(13, BOAT2$
   CALL CenterPrint(14, "Naval Submarine Medical Research Laboratory")
   CALL CenterPrint(20, "Naval Submarine Medical Research Laboratory")
   CALL CenterPrint(21, "Box 900, Subase New London")
   CALL CenterPrint(22, "Groton, CT 06349-5900")
   CALL CenterPrint(23, "AV 241-3668, COMM (203) 449-3668")
CALL SetColor(forecolor)

CALL TextContinuePrompt
   'SUBPIC.BIN exists (picture of submarine). Display picture, 
   Boat Name and Hull Number.
ELSE
SCREEN 2, 0, 0, 0: OUT &H3D9, 7
DEF SEG - &HB800
BLOAD NAMEOFFILE$, 0
DEF SEG
64255 LOCATE 15, 30: PRINT BOAT1$;
64260 LOCATE 16, 30: PRINT BOAT2$;
END IF
END SUB

SUB GetGraphMode (GRAPHICS$, MONITOR$)
   CALL returnadapter(adapt)
   SELECT CASE adapt
   CASE 1
      GRAPHICS$ - "C"
   CASE 2
      GRAPHICS$ - "E"
   CASE ELSE
      CLS
      LOCATE 10, 5
      PRINT "According to my sensors, your computer does not support";
      LOCATE 11, 5
      PRINT "CGA, EGA, or VGA graphics. Therefore this program cannot";
      LOCATE 12, 5
      PRINT "continue.";
   END;
   END SELECT
   NAMEOFFILE$ - "ABDGRAPH.DAT"
   IF FileIsPresent&(NAMEOFFILE$) - 0 THEN
SCREEN 0, 1, 0, 0
   CLS
   LOCATE 10, 5, 1
   PRINT "Do you have a color monitor (Y/N)? [ ]";
   col = POS(0)
   col = col - 2
   LOCATE , col, 1
   CALL GetUCResponse(a$, "YN")
   IF a$ = "Y" THEN
      MONITOR$ = "C"
   ELSE
      MONITOR$ = "M"
   END IF
OPEN NAMEOFFILE$ FOR OUTPUT AS #1
PRINT #1, MONITOR$
CLOSE #1
CLS
ELSE
OPEN "I", #1, NAMEOFFILE$
LINE INPUT #1, MONITOR$
CLOSE #1
END IF
END SUB

SUB GetUCResponse (ch$, filter$)
' This routine returns the character ch$ in uppercase, chosen from a
' single character in the filter string filter$. GetKey() is in
            _DXNARA.
DO
CALL GetKey(a$)
LOOP UNTIL INSTR(filter$, a$) <> 0
ch$ = a$
PRINT ch$;
END SUB

SUB GraphContinuePrompt
' This routine displays the "To continue prompt in inverse."
' No need to save variables, so not STATIC.
CP$ = "To continue, press any key"
CPlen = LEN(CP$)
LOCATE 25, 26
PRINT CP$;
CALL inversegraph(25, 26, CPlen)
END SUB

SUB PackArray (PackString$, thearray%())
' This routine packs the data stored in the array VARIABLE() into
' the string a$
PackString$ = ""
FOR i = 0 TO 12
N% = 0
FOR j = 0 TO 14
K% = thearray%(1 + j + i * 15)
N% = N% OR (K% * 2 ^ j)
NEXT j
PackString$ = PackString$ + MKI$(N%)
NEXT i

END SUB
SUB TextContinuePrompt
    ' This routine displays the "To continue prompt in inverse."
    ' This routine is used when in text mode.
    ' ContinuePrompt is used when in graphics mode.
    ' No need to save variables, so not STATIC.
    COLOR backcolor, framecolor
    LOCATE 25, 26
    PRINT "To continue, press any key";
    LOCATE 1, 1, 0
    COLOR forecolor, backcolor
END SUB

SUB UnPackArray (Packstring$, thearray%())
    ' This routine unpacks the data stored in the string Packstring$
    ' into the array VARIABLE().
    FOR i = 0 TO 12
        N% = CVI(MID$(Packstring$, i * 2 + 1, 2))
        FOR j = 0 TO 14
            IF (N% AND 2 ^ j) <> 0 THEN
                thearray%((1 + j + i * 15)) = 1
            ELSE
                thearray%((1 + j + i * 15)) = 0
            END IF
        NEXT j
    NEXT i
END SUB

SUB UpdatePtrMinus (ptr)
    ' Used by SSNAgeDAte subprogram
    ptr = ptr - 1
    SELECT CASE ptr
        CASE 4
            ptr = 3
        CASE 7
            ptr = 6
        CASE IS < 1
            ptr = 1
        CASE ELSE
            ' pass thru with no changes
    END SELECT
END SUB

SUB UpdatePtrPlus (ptr)
    ' Used by SSNAgeDAte subprogram
ptr = ptr + 1
SELECT CASE ptr
    CASE 4
        ptr = 5
    CASE 7
        ptr = 8
    CASE IS > 11
        ptr = 11
    CASE ELSE
        ' pass thru with no changes
END SELECT
END SUB
DECLARE SUB TextPause ()
DECLARE SUB encipher CDECL (a$)
DECLARE SUB decipher CDECL (a$)
DECLARE SUB frame (ulr%, ulc%, numlines%, length%, frametyp%)
DECLARE SUB DecryptClearWindow ()
DECLARE FUNCTION VideoPage% ()
DECLARE SUB GetKey (a$)
DECLARE SUB NarrativeHelp (WritePage%, VisualPage%)
DECLARE SUB TextContinuePrompt ()
DECLARE SUB decryptstring (instring$, outstring$)
DECLARE SUB DisplayEncryptedFile (TheFile$, ReturnPage%)
DECLARE FUNCTION Centered% (s$)
DECLARE SUB textPRINT (a$)
DECLARE SUB Box selections (actyl%, XPOINT%, NumOfResp%, internalwidth%)
DECLARE SUB HelpDataEntry (HLPPIL$, quest%)
DECLARE SUB PaintGraph (VAR%, WhichOne%)
DECLARE SUB BlankGraph (WhichOne%)
DECLARE SUB DrawGraph (WhichOne%)
DECLARE SUB mainkeyroutine (exitstring$, exitquest%, exitresp%,
    NUMQUEST%, NumResp%, VARIABLE%(), MULTIP%(), None%(), actrow%(), GRAPHFLAG%(),
    offset%, STFLAG%, Choices$())
DECLARE SUB UpdateCursors (oldquest%, oldresp%, quest%, resp%,
    Choices$())
DECLARE SUB Remove Cursor (quest%, resp%, Choices$())
DECLARE FUNCTION getkeycode% ()
DECLARE SUB versetext (row%, col%, theresponse$)
DECLARE SUB inversegraph (row%, col%, StrWidth%)
DECLARE FUNCTION VideoMode% ()
DECLARE SUB versetext (row%, col%, theresponse$)
DECLARE SUB HPframe ()
DECLARE SUB SetColor (thecolor%)
DECLARE SUB questionPRINT (a$)
DECLARE SUB headingPRINT (a$)
DECLARE SUB responsePRINT (a$)
DECLARE SUB SetScreenWidth (SMode%)
DECLARE SUB LocateCenter (crow%, infostring$)
DECLARE SUB UpdateAsterisk (FirstRow%, Firstcol%, NonePtr%, VariPtr%,
    GraphFlag%, NumberofResp%, offset%, VARIABLE%)()
DECLARE SUB PutCursor (quest%, resp%, Choices$())
DECLARE FUNCTION VideoMode% ()
DEFINT A-Z

' $INCLUDE: 'include.bas'

REM $DYNAMIC
SUB DecryptClearWindow
'   This routine clears the text window for the decrypted text
'   print out.
'  for now, later will need scrollup to save frame.
'  Draw frame stuff here.
   CALL scrollup(2, 2, 23, 78, 0, backcolor)

END SUB

SUB DisplayEncryptedFile (TheFile$, ReturnPage%)
'   This routine will decrypt and display the help file TheFile$.
'   ReturnPage is the visual page to be set on exiting this routine.

' IF a$ - "?" THEN filnam$ - "HP11.DAT": GOSUB 30252: GOTO 30004
'   move to display page 2
SCREEN 0, 1, 2, 2
CLS
30252 OPEN "R", 1, TheFile$, 75
FIELD #1, 75 AS B$
IF L0F(1) < 1 THEN
   CLOSE #1
   LOCATE 10, 10
   PRINT "File not found"
   SOUND 200, 1
   CALL TextPause
   SCREEN 0, 1, ReturnPage%, ReturnPage%
   EXIT SUB
END IF
RecNum - 1
ExitFlag - 0
'  Draw frame stuff here.
framtyp - frametype
SetColor (framecolor)
CALL frame(l, 1, 22, 78, framtyp)
SetColor (forecolor)
SetColor (infocolor)
infostring$ - " Enter (P)revious, (N)ext, e(X)it, or (?) for help."
LOCATE 25, Centered%(infostring$) - 4
PRINT infostring$;
SetColor (forecolor)
DO
   rowptr - 2
   DO
      30280   GET #1, RecNum
      decryptedstring$ = B$
      'decipher string
      CALL decipher(decryptedstring$)
IF MID$(decryptedstring$, 1, 1) <> "|" THEN
   LOCATE rowptr, 3
   PRINT decryptedstring$;
   rowptr = rowptr + 1
END IF
'check to see if not finding '|', and therefore, file is not
'in proper format.
IF rowptr > 24 THEN
   CLOSE #1
   CALL DecryptClearWindow
   LOCATE 10, 10
   PRINT "File is in improper format. Cannot read."
   SOUND 200, 1
   CALL TextPause
   SCREEN 0, 1, ReturnPage$, ReturnPage$
   EXIT SUB
END IF
RecNum = RecNum + 1
LOOP UNTIL LEFT$(decryptedstring$, 1) = "|
'print bottom header
SetColor (infocolor)
LOCATE 25, 65, 0
PRINT " " + MID$(decryptedstring$, 3, 13);
SetColor (forecolor)
COLOR 7, 0
DO
   CALL GetKey(a$)
   SELECT CASE a$
   CASE "N"
      IF MID$(decryptedstring$, 2, 1) = "|" THEN
         ExitFlag = 1
      ELSE
         CALL DecryptClearWindow
      END IF
   CASE "P"
      RecNum = VAL(MID$(decryptedstring$, 16, 3))
      IF RecNum < 0 THEN
         ExitFlag = 1
      ELSE
         CALL DecryptClearWindow
      END IF
   CASE "X", CHR$(27)
      ExitFlag = 1
      a$ = "X"
   CASE "?"
      CALL NarrativeHelp(2, 2)
   CASE ELSE
      SOUND 200, 1
   END SELECT
   IF ExitFlag THEN EXIT DO
   END DO
   EXIT DO
ABDXSUB2.BAS (cont’d)

END SELECT
LOOP UNTIL INSTR("NPX", a$) <> 0
LOOP UNTIL ExitFlag = 1
CLOSE #1
SCREEN 0, 1, ReturnPage%, ReturnPage%
END SUB

SUB inversegraph (row, col, StrWidth)
' This routine inverses strwidth characters at location row and col
' while in graphics mode.
' $DYNAMIC
REDIM INVERSEARRAY%(1000)
temrow = row - 1
temcol = col
IF Vertbits = 14 THEN WINDOW
GET ((temcol - 1) * 8 - 1, temrow * Vertbits) - ((temcol + StrWidth - 1) * 8, (temrow + 1) * Vertbits - 1), INVERSEARRAY%(0)
PUT ((temcol - 1) * 8 - 1, temrow * Vertbits), INVERSEARRAY%(0), PRESET
IF Vertbits = 14 THEN WINDOW SCREEN (0, 0)-(639, 199)
END IF
END SUB

REM $STATIC
SUB inversetext (row, col, theresponse$)
' This routine prints theresponse$ in inverse print at location row and col.
COLOR backcolor, textcolor
LOCATE row, col, 0
PRINT theresponse$;
COLOR textcolor, backcolor
END SUB

SUB mainkeyroutine (exitstring$, quest%, resp%, NUMQUEST%, Numresp%(), NUMCOLQUESTS%, VariablePtr%(), VARIABLE%, MULTIP%(), None%(), actrow%(), GRAPHFLAG%(), offset%, STFLAG%, Choices$())
' This is the main key entry loop for moving the cursor and updating VARIABLE during data entry.
' exitstring$ - character returned by routine upon exiting (prob key pressed.)
' quest% returns relative question number where cursor is upon exiting.
' resp% - returns response for question quest as above.
' NUMQUEST% - number of questions on the display page.
ABDXSUB2.BAS (cont'd)

' Numresp%() - number of responses for each question on the display page.
' NUMCOLQUESTS% - number of questions in the first column.
' VariablePtr%() - pointer to position in array VARIABLEQ for first response of question ()
' VARIABLE%() - array containing the entered case data to check and update.
' MULTIP%() - 1 if multiple responses allowed, 0 if not.
' None%() - # of response to 0 out all others. 0 if no item clears others.
' actrow%() - array containing the actual row of the first response of question.
' GRAPHFLAG%() - 0 if no graph drawn, 1 if graph is drawn.
' offset% - offset for printing asterisks in UpdateAsterisk.
' STFLAG% - flags changes made to data. 0 if no changes, 1 if changes made.
' Choices$() - 2-d array containing responses for the display page.

'initialize stuff
CONST homekey = &H4700
CONST endkey = &H4F00
CONST uparrow = &H4800
CONST downarrow = &H5000
CONST leftarrow = &H4B00
CONST rightarrow = &H4D00
CONST tabkey = 9
CONST shifttabkey = &HF00
CONST esc = 27
CONST CR = 13
IF resp > 0 THEN
  oldresp = resp
ELSE
  oldresp = 1
  resp = 1
END IF
IF quest > 0 THEN
  oldquest = quest
ELSE
  oldquest = 1
  quest = 1
END IF
exitstring$ = "" 

DO
  keynum = getkeycode
  SELECT CASE keynum

  CASE homekey
    resp = 1
quest = 1
CALL UpdateCursors(oldquest, oldresp, quest, resp, Choices$())

CASE endkey
    quest = NUMQUEST
    resp = Numresp(quest)
    CALL UpdateCursors(oldquest, oldresp, quest, resp, Choices$())

CASE uparrow
    resp = resp - 1
    IF resp < 1 THEN
        quest = quest - 1
        IF quest < 1 THEN
            quest = NUMQUEST
        END IF
        resp = Numresp(quest)
    END IF
    CALL UpdateCursors(oldquest, oldresp, quest, resp, Choices$())

CASE downarrow
    resp = resp + 1
    IF resp > Numresp(quest) THEN
        resp = 1
        quest = quest + 1
        IF quest > NUMQUEST THEN
            quest = 1
        END IF
    END IF
    CALL UpdateCursors(oldquest, oldresp, quest, resp, Choices$())

CASE leftarrow, rightarrow
    'Will check to see if a response is at the same row in the different col. (will use same col if only one col or if currently in 2nd col.) (Note - col here means one of the two col's of questions. determine which column to use
    IF (quest < NUMCOL1QUESTS) AND (NUMQUEST > NUMCOL1QUESTS) THEN
        'use 2nd column
        QuestStart = NUMCOL1QUESTS + 1
        QuestFinish = NUMQUEST
    ELSE
        'use first column.
        QuestStart = 1
        QuestFinish = NUMCOL1QUESTS
    END IF
    'get current row
    thisrow = actrow(quest) + resp - 1
    FOR LRQuestPtr = QuestStart TO QuestFinish
FOR LRRespPtr = 0 TO Numresp%(LRQuestPtr) - 1
    ' compare current row to test row
    IF thisrow = (actrow(LRQuestPtr) + LRRespPtr) THEN
        quest = LRQuestPtr
        resp = LRRespPtr + 1
    END IF
NEXT LRRespPtr
NEXT LRQuestPtr

CALL UpdateCursors(oldquest, oldresp, quest, resp, Choices$())

CASE tabkey
    quest = quest + 1
    IF quest > NUMQUEST THEN quest = 1
    resp = 1
    CALL UpdateCursors(oldquest, oldresp, quest, resp, Choices$())

CASE shifttabkey
    quest = quest - 1
    IF quest < 1 THEN quest = NUMQUEST
    resp = 1
    CALL UpdateCursors(oldquest, oldresp, quest, resp, Choices$())

CASE esc, ASC("X"), ASC("x")
    exitstring$ = "X"

CASE ASC("N"), ASC("n"), ASC("P"), ASC("p")
    exitstring$ = UCASE$(CHR$(keynum))

CASE ASC("?")
    exitstring$ = CHR$(keynum)

CASE CR
    'First check if questions update variables.
    VariPtr = VariablePtr%(quest)
    IF VariPtr = 0 THEN
        exitcode = resp
        EXIT SUB
    END IF
    SpecificVarPtr = VariPtr + resp - 1
    IF VARIABLE(SpecificVarPtr) = 1 THEN
        VARIABLE(SpecificVarPtr) = 0
    ELSE
        VARIABLE(SpecificVarPtr) = 1
    END IF
    STFLAG = 1
    'check if multip answers not allowed. If so, clear other responses
    IF VARIABLE() AND MULTIP(quest) = 0 THEN

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' response was set and other responses are not allowed
FOR i = 1 TO Numresp(quest)
  IF i <> resp THEN VARIABLE(VariPtr + i - 1) = 0
NEXT i
END IF

'if not noneptr, then clear noneptr in VARIABLE(), so that
'updateasterisks routine will work properly.
NonePtr = None%(quest)
IF VARIABLE(SpecificVarPtr) = 1 THEN
  IF NonePtr <> 0 AND NonePtr <> resp THEN
    VARIABLE(VariPtr + NonePtr - 1) = 0
  END IF
END IF

'clean up graph if present.
'If VARIABLE(SpecificVarPtr)=0 and here, then it was just set.
'Therefore, need to erase corresponding portion of graph.
IF VARIABLE(SpecificVarPtr) = 0 AND GRAPHFLAG(quest) THEN
  WhichOne = GRAPHFLAG(quest)
  'first start with clean graph frame
  CALL BlankGraph(WhichOne)
  CALL DrawGraph(WhichOne)
  'now paint all selected responses
  FOR tempresp = 1 TO Numresp(quest)
    IF VARIABLE(VariPtr + tempresp - 1) = 1 THEN
      CALL PaintGraph(tempresp, WhichOne%)  
    END IF
  NEXT tempresp
END IF

'update asterisks
FirstRow = actrow(quest)
IF quest > NUMCOL1QUESTS THEN
  Firstcol = ShareTOPCOL2
ELSE
  Firstcol = ShareTOPCOL
END IF
GraphFlg = GRAPHFLAG(quest)
NumberOfResp = Numresp(quest)
offset = 0
CALL UpdateAsterisk(FirstRow, Firstcol, NonePtr, VariPtr,
    GraphFlg, NumberOfResp, offset, VARIABLE())

CASE ELSE
  error
  SOUND 999, 1
SUB MenuEntryPage (NR%, resplength%, exitchar$, DATAHEADING$, menuheading$, Choices$(), HELPFILE$)
   This routine displays a single menu on the screen and
   obtains the input. It is analogous to the DataEntryPage for the
   H&P section.
   NR% - response upon exit. [0, 1-resplength%]
   resplength% - number of responses for the menu
   exitchar$ - char upon exit, X, or null
   DATAHEADING$ - Display page heading
   menuheading$ - heading over menu box
   Choices$() - list of responses, here will be (1,[1-
   resplength%])
   HELPFILE$ - Help file name. File is encrypted.

   DIM Numresp%(2), dumvar%(2) ' for mainkeyentry routine below
   HeadingRow = 7     'location of first response of menu
   MenuWidth = LEN(Choices$(1,1))
   CenterCol = Centered(Choices$(1,1))

   SCREEN 0, 1, 0, 0
   CLS
   CALL LocateCenter(1, DATAHEADING$)
   CALL headingPRINT(DATAHEADING$)
   CALL LocateCenter(HeadingRow - 2, menuheading$)
   CALL textPRINT(menuheading$)

   FOR i = 0 TO resplength% - 1
      LOCATE HeadingRow + i, CenterCol
      CALL responsePRINT(Choices$(1, i + 1))
   NEXT i

   ' Box the menu.
   CALL BoxSelections(HeadingRow, CenterCol - 1, resplength%,
                     MenuWidth)

   ' Information.
   SetColor (infocolor)
   LOCATE 23, 1: PRINT "Use the arrow keys to move the cursor to the
   desired position. Push RETURN";
   LOCATE 24, 1: PRINT "to select the desired response or '?' for more
   information.";

   ABDX Programmer’s Manual      A-89
SetColor (forecolor)

' Set up so that can use it with PutCursor and RemoveCursor
routines.
Xwidth = MenuWidth
ShareTOPCOL = CenterCol - 4
ShareTOPCOL2 = ShareTOPCOL
actrow(1) = HeadingRow
NUMQUEST = 1
Numresp(1) = resplength%
curquest = 1
currresp = NR%
ShareNUMCOLIQUESTS = 1
dumvar(1) = 0
offset = 0
dummySTFLAG% = 0

'initialize cursor on page at first question, first response
CALL PutCursor(curquest, currresp, Choices$())

'n now comes the key entry routine.
DO
   CALL mainkeyroutine(exitstring$, curquest%, currresp%, NUMQUEST,
   Numresp(), NUMCOLIQUESTS, dumvar%, dumvar(), dumvar(),
   dumvar%(), actrow(), dumvar(), offset, STFLAG%, Choices$())
exitstring$ = exitstring$
'print help for H&P questions
IF exitstring$ = "?" THEN
   thispage% = VideoPage%
   CALL DisplayEncryptedFile(HELPFILE$, thispage%)
END IF
LOOP UNTIL (currresp <> 0 AND exitstring$ = "")
NR% = currresp
ERASE Numresp%, dumvar%

END SUB

SUB MenuSummaryPage (MenuRow, MenuCol, NR%, resplength%, exitchar$,
   menuheading$, Choices$(), HELPFILE$)
   This routine displays a single menu on the summary page and
   obtains the input. It is analagous to the DataEntryPage for the
   H&P section, and is very similar to MenuEntryPage.
   MenuRow        - row location of first response of menu
   MenuCol        - col location of first response of menu
   NR%            - response upon exit. [0, 1-resplength%]
   resplength%    - number of responses for the menu

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exitchar$ - char upon exit, X, or null
menuheading$ - heading over menu box
Choices$(l) - list of responses, here will be (1,[1-
resplength%]
HELPFILE$ - Help file name. File is encrypted.

DIM Numresp%(2), dumvar%(2) ' for mainkeyentry routine below

MenuWidth = LEN(Choices$(1, 1))
HeadingRow = MenuCol + (MenuWidth - LEN(menuheading$)) \ 2
LOCATE MenuRow - 2, HeadingRow
CALL textPRINT(menuheading$)

FOR i = 0 TO resplength% - 1
    LOCATE MenuRow + i, MenuCol
    CALL responsePRINT(Choices$(1, i + 1))
NEXT i

' Box the menu.
CALL BoxSelections(MenuRow, MenuCol - 1, resplength%, MenuWidth)

' Information.
SetColor (infocolor)
LOCATE 23, 1: PRINT "Use the arrow keys to move the cursor to the
desired position. Push RETURN";
LOCATE 24, 1: PRINT "to select the desired response or '?' for more
information.";
SetColor (forecolor)

' Set up so that can use it with PutCursor and RemoveCursor
routines.
Xwidth = MenuWidth
ShareTOPCOL = MenuCol - 4
ShareTOPCOL2 = ShareTOPCOL
actrow(l) = MenuRow
NUMQUEST = 1
Numresp(l) = resplength%
curquest = 1
curresp = NR%
ShareNUMCOLQUESTS = 1
dumvar(l) = 0
offset = 0
dummySTFLAG% = 0

'initialize cursor on page at first question, first response
CALL PutCursor(curquest, curresp, Choices$())

'now comes the key entry routine.
DO
    CALL mainkeyroutine(exitstring$, curquest%, curresp%, NUMQUEST,
    Numresp(), NUMCOL1QUESTS, dumvar%, dumvar(), dumvar(),
    dumvar%(), actrow(), dumvar(), offset, STFLAG%, Choices$())
    exitchar$ = exitstring$
    'print help for H&P questions
    IF exitstring$ = "?" THEN
        thispage% = VideoPage%
        CALL DisplayEncryptedFile(HELPFILE$, thispage%)
    END IF
    LOOP UNTIL (curresp <> 0 AND exitstring$ = ") OR exitstring$ = "?"
    NR% = curresp
    ERASE Numresp%, dumvar%
END SUB

SUB PutCursor (quest, resp, Choices$())
'      This routine places the high-lighted cursor at the appropriate
'      response. It checks to see if in graphics or text mode and uses
'      the appropriate method for inversing the text.
'
'      Variables needed from DataEntryPage routine.
'      actrow(),Xwidth,ShareNUMCOL1QUESTS,ShareTOPCOL2
'
'      compute row and col
'      row = actrow(quest) + resp - 1
'      IF quest <= ShareNUMCOL1QUESTS THEN
'          col = ShareTOPCOL
'      ELSE
'          col = ShareTOPCOL2
'      END IF
'      col = col + 4
'      ' check screen mode
'      '        VideoMode = 3  screen 0, width 80
'      '          6  screen 2
'      '          16 screen 9

    IF VideoMode = 3 THEN
'        text mode
'        theresponse$ = LEFT$(Choices$(quest, resp) + SPACE$(Xwidth), Xwidth)
    CALL inversetext(row, col, theresponse$)
    ELSE
'        else graphics mode
'        StrWidth = Xwidth
    CALL inversegraph(row, col, StrWidth)
    END IF
END SUB
SUB RemoveCursor (quest, resp, Choices$())
    ' This routine clears the high-lighted cursor at the appropriate
    ' response. It checks to see if in graphics or text mode and uses
    ' the appropriate method for versing the text.
    ' NOTE - If in graphics mode, it just inverses the inverse text.
    ' If used on normal text, it will inverse it. In text mode,
    ' nothing
    ' would happen.

    Variables needed from DataEntryPage routine.
    Xwidth

    compute row and col
    row = actrow(quest) + resp - 1
    IF quest <= ShareNUMCOLQUESTS THEN
        col = ShareTOPCOL
    ELSE
        col = ShareTOPCOL2
    END IF
    col = col + 4

    ' check screen mode
    ' Videomode = 3 screen 0, width 80
    ' 6 screen 2
    ' 16 screen 9

    IF Videomode = 3 THEN
        ' text mode
        thereponse$ = LEFT$(Choices$(quest, resp) + SPACE$(Xwidth), Xwidth)
        CALL versetext(row, col, thereponse$)
    ELSE
        ' else graphics mode
        StrWidth = Xwidth
        CALL inversegraph(row, col, StrWidth)
    END IF

END SUB

SUB UpdateAsterisk (FirstRow%, Firstcol%, NonePtr%, VariPtr%, GraphFlg%,
                    NumberofResp%, offset%, VARIABLEQ)
    ' This routine updates the asterisks for the responses by checking
    ' the appropriate areas of VARIABLE(). offset is the offset for
    ' printing the asterisks. offset can be + or -, but is usually 0.

    ' needs:
    ' VARIABLE(), firstrow, firstcol, noneptr, VariPtr, GraphFlg, NumberofResp,
    ' offset
    ' firstrow, firstcol - location of asterisks for first choice
    ' noneptr - location of none/no pain if present
    ' VariPtr - ptr to appropriate area of VARIABLE()
**ABDXSUB2.BAS (cont'd)**

- **GraphFlg** - flag for graphics routines
- **NumberofResp** - number of choices
- **offset** - as above
- **VARIABLE()** - array containing the data to check.

```plaintext
blankasterisk$ = "" 
asterisk$ = "**"

' check first for no/none response
IF NonePtr <> 0 AND VARIABLE(VariPtr + NonePtr - 1) = 1 THEN
    FOR cnt = 0 TO NumberofResp - 1
        LOCATE FirstRow + cnt, Firstcol + offset, 0
        IF cnt <> NonePtr - 1 THEN
            VARIABLE(VariPtr + cnt) = 0
            PRINT blankasterisk$;
        ELSE
            PRINT asterisk$; 're-init graph frame
            WhichOne = GraphFlg
            CALL BlankGraph(WhichOne)
            CALL DrawGraph(WhichOne)
        END IF
    NEXT cnt
ELSE
    FOR cnt = 0 TO NumberofResp - 1
        LOCATE FirstRow + cnt, Firstcol + offset, 0
        IF VARIABLE(VariPtr + cnt) = 1 THEN
            PRINT asterisk$;
            IF GraphFlg > 0 THEN
                WhichOne = GraphFlg
                CALL PaintGraph(cnt + 1, WhichOne%)
            END IF
        ELSE
            PRINT blankasterisk$;
        END IF
    NEXT cnt
END IF
```

END SUB

**SUB UpdateCursors (oldquest, oldresp, quest, resp, Choices$())**

This routine clears the response at oldquest, oldresp and inverses the response number resp, question quest.

- CALL RemoveCursor(oldquest, oldresp, Choices$())
- CALL PutCursor(quest, resp, Choices$())
- oldquest = quest
oldresp = resp

END SUB

SUB versetext (row, col, therespONSE$)
  ' This routine prints therespONSE$ in normal "verse" print at
  ' location
  ' row and col.
  COLOR textcolor, backcolor
  LOCATE row, col, 0
  PRINT therespONSE$;

END SUB

FUNCTION VideoMode%
  ' This function returns the current video mode.
  VideoMode = 1  screen 0, width 40
  3  screen 0, width 80
  6  screen 2
  16 screen 9

DIM reg AS RegType
  reg.ax = &HF00
  CALL interrupt(&H10, reg, reg)
  VideoMode = reg.ax AND &HFF
END FUNCTION

FUNCTION VideoPage%
  ' This function returns the current video page.
  VideoPage = 0  this is the default. Max number will depend
  on the mode. For screen 0, the values are
  0 - 3.

DIM reg AS RegType
  reg.ax = &HF00
  CALL interrupt(&H10, reg, reg)
  thepage% = (CLNG(reg.bx) AND &HFF00) \ 256
  VideoPage = thepage%
END FUNCTION

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DEFINT A-Z
DECLARE FUNCTION VideoMode% ()
DECLARE SUB encipher CDECL (a$)
DECLARE SUB decipher CDECL (a$)
DECLARE SUB TextDxPause ()
DECLARE SUB SetColor (thecolor%)
DECLARE SUB SetFrameColor ()
DECLARE SUB SetNormalColor ()
DECLARE SUB LocateCenter (crow%, infostring$)
DECLARE SUB GetKey (a$)
DECLARE SUB TextContinuePrompt ()
DECLARE SUB frame (ulr%, ulc%, numlines%, length%, frametyp%)
DECLARE SUB DisplayHPgetstatments (SXloc%, SXresp$(), abortHP%)
DECLARE SUB DisplayHProwcol (row%, col%, sxstrng$)
DECLARE SUB DisplayHPframe (TRAINING%, SIMULATE%, SSN$, STARTIME$, STARTDATES$)
DECLARE SUB DisplayHPprint (HP%, SXloc%(), SXresp$(), VARIABLE%())
DECLARE SUB DisplayHPhelp ()
DECLARE SUB DisplayHPTitle (HP%)
DECLARE FUNCTION Exists% (filnam$)

' $INCLUDE: 'include.bas'

SUB CompareAbdDXes (COMPAR%(), VARIABLE%(), MAXNUM%, HMDX%, QUESTPTR%(),
    QUESTIONS$())
    ' This routine searches the compar array for questions to recheck.
    ' This is used only for the original abdominal pain database.
    ' uses questioncolor, forecolor, infocolor

    DIM DIFFER%(15)

51390 COMFLAG = 0
    FOR i = 1 TO 15
    IF COMPAR%(MAXNUM, HMDX, i) = 0 THEN EXIT FOR
    IF VARIABLE%(COMPAR%(MAXNUM, HMDX, i)) = 0 THEN
    COMFLAG = COMFLAG + 1
    DIFFER%(COMFLAG) = COMPAR%(MAXNUM, HMDX, i)
    END IF
    NEXT i
51430 IF COMFLAG = 0 THEN
    LOCATE 15, 1: PRINT " At this time, the computer-generated probabilities DO NOT AGREE with";
    LOCATE 16, 1: PRINT "your preliminary diagnosis. However, in this case, there are no";
LOCATE 17, 1: PRINT "specific categories which would differentiate your preliminary";
LOCATE 18, 1: PRINT "diagnosis from the current program-generated diagnosis."
CALL TextDxPause  
ELSE  
SUM = 11: J = 1: N = 1: COMFLAG1 = COMFLAG  
FOR i = 1 TO 37  
  SUM = SUM + QUESTPTR%(i)  
  IF DIFFER%(J) < SUM THEN  
    DIFFER%(N) = i  
    J = J + 1: N = N + 1  
  END IF
IF J > COMFLAG THEN GOTO 51500  
IF DIFFER%(J) < SUM THEN  
  J = J + 1  
  COMFLAG1 = COMFLAG1 - 1  
  GOTO 51472  
END IF  
IF N > COMFLAG1 THEN GOTO 51500  
NEXT i
51500  LOCATE 15, 1: PRINT "At this time the computer-generated probabilities DO NOT AGREE with";
LOCATE 16, 1: PRINT "your preliminary diagnosis. The following categories are particularly useful in differentiating your diagnosis from the others. It may be";
LOCATE 17, 1: PRINT "helpful to review your input in these areas and make any changes you";
LOCATE 18, 1: PRINT "consider appropriate.";
FOR i = 23 TO 25: LOCATE i, 1: PRINT SPACE$(75); : NEXT i  
dummyc = questioncolor
CALL SetColor(dummyc)  
FOR i = 1 TO COMFLAG1  
  XI = i: YI = 1  
  IF i > 4 THEN XI = i - 4: YI = 26  
  IF i > 10 THEN XI = i - 10: YI = 51  
  LOCATE 20 + XI, YI: PRINT QUESTIONS$(DIFFER%(i));
NEXT i

' Maybe do away with this, because the HM has the option of changing his responses on the summary page.
  dummyc = forecolor  
  CALL SetColor(dummyc)  
  SetColor (infocolor)  
  infostring$ = "Would you like to make any changes? (Y or N) [
  ]"
  CALL LocateCenter(25, infostring$)  
  PRINT infostring$:
SetColor (forecolor)
col = POS(0) - 2
row = CSRLIN
LOCATE row, col, 1
DO
    CALL GetKey(a$)
    SELECT CASE a$
        CASE "Y"
            PRINT a$
            GOTO 100
        CASE "N"
            PRINT a$
            GOTO 52000
        CASE ELSE
            SOUND 200, 1
    END SELECT
LOOP UNTIL 1 - 2
' loop forever. Will exit when necessary.
END IF
CALL TextContinuePrompt
CALL GetKey(a$)
ERASE DIFFER$
END SUB
REM $DYNAMIC
SUB DisplayHP (TRAINING, SIMULATE, SSN$, STARTIME$, STARTDATE$, VARIABLE%0)
    ' This routine was originally at 53000. It displays the brief summary of findings on a history page and a physical exam page.
    DIM SXloc%(1 TO 180)
    DIM SXresp$(1 TO 180)
    CONST HX - 0
    CONST PE - 1
    HP = HX
    ' get comments for each response
    CALL DisplayHPgetstatments(SXloc%(), SXresp$(()), abortHP$)
    IF abortHP - 1 THEN
        ERASE SXloc%, SXresp$
        EXIT SUB
    END IF

    ' draw heading and frame
CALL DisplayHPFrame (TRAINING, SIMULATE, SSN$, STARTIME$, STARTDATE$)

'display HX items first
CALL DisplayHPprint (HP, SXloc%(), SXresp$(), VARIABLE%())

QuitDo = 0
DO
    DO
        CALL GetKey(a$)
        'filter for PNX?
        PNX$ = "PNX?" + CHR$(27)
        LOOP UNTIL INSTR(PNX$, a$) <> 0
        SELECT CASE a$
            CASE "X", CHR$(27)
                QuitDo = 1
            CASE "?”
                CALL DisplayHPhelp
                CASE "F"
                    IF HP = HX THEN
                        QuitDo = 1
                    ELSE
                        HP = HX
                        CALL DisplayHPprint (HP, SXloc%(), SXresp$(), VARIABLE%())
                    END IF
                    CASE "N"
                        IF HP = HX THEN
                            HP = PE
                            CALL DisplayHPprint (HP, SXloc%(), SXresp$(), VARIABLE%())
                        ELSE
                            QuitDo = 1
                        END IF
            CASE ELSE
                'should never get here
        END SELECT
    LOOP UNTIL QuitDo <> 0
    ERASE SXloc%, SXresp$
END SUB

SUB DisplayHPFrame (TRAINING, SIMULATE, SSN$, STARTIME$, STARTDATE$)
    'This routine draws the frame for the H&P synopsis pages. It is
called only once, at the beginning of the displayH&P sub.

    'uses frametype%, infocolor, forecolor
SCREEN 0, 1, 0, 0
CLS
IF TRAINING = 1 THEN
TYP$ = "Training"
leftend = 199
rightend = 182
ELSE
TYP$ = "Simulated"
leftend = 195
rightend = 180
IF SIMULATE = 1 THEN
TYP$ = "Real"
END IF
END IF

CALL SetFrameColor
framtyp = frametype%
CALL frame(1, 1, 21, 78, framtyp)
' print cross bar
LOCATE 3, 1
PRINT CHR$(leftend) + STRING$(78, 196) + CHR$(rightend);
CALL SetNormalColor

LOCATE 2, 40: PRINT "SSN: "; SSN$;
LOCATE 2, 11: PRINT "Summary ("; TYP$; " case)";
LOCATE 2, 63: PRINT STARTIME$; "  "; STARTDATE$;

CALL SetColor(infocolor)
info$ = "Enter (P)revious, (N)ext, e(X)it, or (?) for help."
CALL LocateCenter(24, info$)
PRINT info$;
SetColor (forecolor)
END SUB

SUB DisplayHPgetstatments (SXloc%(), SXresp$(), abortHP%)
' This routine opens the file SX.DAT and loads SXloc() and SXresp$().
' SXloc(x) is the location in the VARIABLE() of response SXresp$(x).
' ___ = "ABD", "CPD", etc.

' TYPE SXformat
' SXloc As INTEGER
' SXresp As STRING * 21
' END TYPE

' DIM SX As SXformat

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'Check for existence of file
abortHP = 0
filnam$ = SXDATAFILE$
IF NOT Exists$(filnam$) THEN
  CLS
  LOCATE 10, 10
  PRINT "File "; filnam$; " not found!"
  CALL TextContinuePrompt
  CALL GetKey(a$)
  abortHP = 1
  EXIT SUB
END IF

OPEN filnam$ FOR INPUT AS #1
i = 1
DO WHILE NOT EOF(1)
  LINE INPUT #1, a$
  'decipher string
  CALL decipher(a$)
  SXloc(i) = i
  SXresp$(i) = RTRIM$(a$)
  i = i + 1
LOOP
CLOSE #1
' Check for proper number of items read in.
IF i <> NUMBEROFITEMS + 1 THEN
  abortHP = 1
END IF

END SUB

SUB DisplayHPhelp
'      This routine prints the help statement for the H&P summary.
'      uses frametype%
' frame based on length of a$
IF TRAINING = 0 THEN
  'not training case
  wid = 33
  hght = 1
ELSE
  'training case
  wid = 38
  hght = 3
END IF

row = 10
col = (80 - wid) \ 2
SCREEN 0, 1, 1, 1

CLS
CALL SetFrameColor
framtyp = frameType$
CALL frame(row, col, hght, wid, framtyp)
CALL SetNormalColor

LOCATE row + 1, col + 1
PRINT "These are the items you selected."
PRINT a$;
IF TRAINING = 1 THEN
  LOCATE row + 2, col + 1
  PRINT "Responses you should have chosen, but"
  LOCATE row + 3, col + 1
  PRINT "did not, are flagged with '(omitted)'."
END IF

CALL TextContinuePrompt

'help heading
CALL GetKey(a$)
SCREEN 0, 1, 0, 0
END SUB

SUB DisplayHProwcol (row, col, sxstrng$)
  '      This routine computes the proper location for printing the SX's
  '      in the display H&P routine.

  minrow = 4
  maxrow = 22
  colIncrement = 34
  IF row = 0 THEN row = minrow - 1
  IF col = 0 THEN col = 4
  row = row + 1
  IF row > maxrow THEN
    row = minrow
    col = col + 34
  END IF
  LOCATE row, col, 0
  PRINT sxstrng$;
END SUB

SUB DisplayHPTitle (HP)
  ' This prints the heading for the H&P display routine at 53000.
  IF HP = 0 THEN
    heading$ = "History"
  ELSE
    heading$ = "Physical"
  END IF
ABDXSUB3.BAS (cont'd)

LOCATE 2, 3
PRINT heading$;

END SUB

REM $STATIC
SUB DisplayMissedHP (SSN$, STARTIME$, STARTDATE$, VARIABLE%(),
THECASE%())
'* This routine displays any inconsistencies between the responses
* the HM entered and the test case.

DIM SXloc%(l TO 180)
DIM SXresp$(l TO 180)

' get comments for each response
CALL DisplayHPSGetStatements(SXloc%(), SXresp$(() , abortHP%)
IF abortHP = 1 THEN
   ERASE SXloc%, SXresp$
   EXIT SUB
END IF

'draw heading and frame
CALL DisplayHPFrame(1, 0, SSN$, STARTIME$, STARTDATE$)
heading$ = "Incorrect Items"
LOCATE 2, 4
PRINT heading$;
ibegin = 1
iend = 180
row = 0
col = 0
've cycle through and check responses
missedsomeflag = 0
FOR i = ibegin TO iend
   IF VARIABLE%(i) O THECASE%(i) THEN
      CALL DisplayHProwcol(row, col, SXresp$(i))
      IF THECASE%(i) = 1 THEN
         PRINT "(omitted)"
      END IF
      missedsomeflag = 1
   END IF
NEXT i
IF missedsomeflag = 0 THEN
   'didn't miss any, so let it be known.
   LOCATE 10, 10
   PRINT "Congratulations! No items were missed."
END IF
QuitDo = 0
DO
   CALL GetKey(a$)
'filter for PNX?
LOOP UNTIL INSTR("PNX?", a$) <> 0
SELECT CASE a$
  CASE "P", "N", "X"
    QuitDo = 1
  CASE "?
    CALL DisplayHPhelp
    CASE ELSE
      'should never get here
    SOUND 200, 1
    END SELECT
    LOOP UNTIL QuitDo <> 0

ERASE SXloc%, SXresp$

END SUB

REM $DYNAMIC
SUB HPframe
  'This routine draws the frame for each of the history and PE pages.
  'uses forecolor, hpframecolor

SetColor (hpframecolor)
CALL frame(1, 1, 20, 78, 1)
IF VideoMode = 6 THEN 'screen 2
  'horiz line just below heading
  LINE (4, 20)-(636, 20), 1

  'vertical line in middle
  LINE (316, 20)-(316, 172), 1
  LINE (315, 20)-(315, 172), 1
ELSE
  'horiz line just below heading
topstring$ = CHR$(195) + STRING$(78, 196) + CHR$(180)
LOCATE 3, 1
PRINT topstring$;

  'vertical line in middle
LOCATE 3, 40
PRINT CHR$(194);
FOR i% = 4 TO 21
  LOCATE i%, 40
  PRINT CHR$(179);
NEXT i%
LOCATE 22, 40
PRINT CHR$(193);
ABDXSUB3.BAS (cont'd)

    END IF
    SetColor (forecolor)

    END SUB
DECLARE SUB CenterString (infostring$)
DECLARE SUB TextPause ()
DECLARE SUB GetKey (a$)
DECLARE SUB TextContinuePrompt ()
DECLARE SUB frame (ulr%, ulc%, numlines%, length%, frametyp%)
DECLARE SUB GraphContinuePrompt ()
DECLARE FUNCTION Exists% (FIL$)
DECLARE SUB SetColor (thecolor%)
DECLARE SUB SetFrameColor ()
DECLARE SUB SetNormalColor ()
DECLARE SUB VideoMode% ()

DEFINT A-Z
' $INCLUDE: 'include.bas'

REM $DYNAMIC
SUB BoxSelections (actyl, XPOINT, NumOfResp, internalwidth)
'     This routine draws a box around the selections for the different
'     option pages.

'GLOBAL - frametype
ulr = actyl - 1
ulc = XPOINT
CALL SetFrameColor
framtyp = frametype
CALL frame(ulr, ulc, NumOfResp, internalwidth, framtyp)
CALL SetNormalColor

END SUB

REM $STATIC
SUB ComputeFinalProbs (NUMDISEASES%, MAXNUMBER%, MAXPROBABILITY%,
                         PROB#(), FINALPROB#())
'     Calculate final probabilities here (FINALPROB). Determine
'     the disease (MAXNUMBER) with the greatest probability
'     (MAXPROBABILITY).
'     Remember that PROB#() and the other vars are local here.
'NUMDISEASES is the number of diseases to consider.

SUMPROB# = 0: MAXPROBABILITY = 0
FOR i = 1 TO NUMDISEASES%: SUMPROB# = SUMPROB# + PROB#(i): NEXT i
FOR i = 1 TO NUMDISEASES%
    FINALPROB#(i) = PROB#(i) / SUMPROB# * 100
    IF MAXPROBABILITY < FINALPROB#(i) THEN
        MAXPROBABILITY = FINALPROB#(i)

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MAXNUMBER = i
END IF
NEXT i

END SUB

REM $DYNAMIC
FUNCTION Exists% (FIL$)
  ' This function checks for the existence of the file fil$. It
  ' returns TRUE (non-zero) if present and false (zero) if not
  ' found.

  CONST FALSE = 0
  filenum = FREEFILE
  OPEN "R", filenum, FIL$, 1
  N% = LOF(filenum)
  CLOSE filenum
  IF N% = 0 THEN
    booltest% = FALSE
  ELSE
    booltest% = NOT FALSE
  END IF
  Exists% = booltest%

END FUNCTION

SUB headingPRINT (a$)
  ' This routine prints the heading A$, using the current color
  ' headingcolor as the foreground color. Checks to see if screen mode
  ' is ok.

  'GLOBAL - headingcolor, forecolor

  dummyc = headingcolor
  SetColor (dummyc)
  PRINT a$;
  dummyc = forecolor
  SetColor (dummyc)

END SUB

SUB HelpDataEntry (HLPFIL$, quest)
  ' This routine prints the help text for the questions in the
  ' data entry section.

  40000 REM Help routine
  ' Check for existence of file
  IF NOT Exists%(HLPFIL$) THEN
    CLS
ABDXSUB4.BAS (cont'd)

SCREEN 0, 1, 0
CLS
LOCATE 10, 10
PRINT "Help file not found."
SOUND 200, 5
CALL TextPause
EXIT SUB
END IF

Open file containing definitions.
OPEN "I", #2, HLPFIL$

Put instructions at the bottom of the screen.
40215 FLAG = 0: CLS
SCREEN 0, 1, 0
CLS
CALL SetColor(hpframecolor)
CALL frame(1, 1, 22, 78, 1)
CALL TextContinuePrompt
CALL SetNormalColor

Check for the existence of a definition. If there is
' No definition, tell the user, close the file and
' return to the symptom page.
LOCATE 2, 2, 0
DO WHILE ((NOT EOF(2)) AND (HLP <= quest))
  INPUT #2, HLP
  IF NOT EOF(2) THEN
    LINE INPUT #2, HLPline$
    Definition exists. Display it
    IF HLP = quest THEN
      IF FLAG = 0 THEN
        CALL SetColor(questioncolor)
        CALL CenterString(LTRIM$(RTRIM$(HLPline$))
        LOCATE CSRLIN + 1
        CALL SetNormalColor
        FLAG = 1
      ELSE
        LOCATE , 3: PRINT HLPline$
      END IF
    END IF
  END IF
END IF
LOOP
CLOSE #2

' No Definition Exists for the Symptom.
40100 IF FLAG = 0 THEN
  LOCATE 10, 10
  PRINT "Sorry, no extra information exists for this question."
END IF
CALL GetKey(a$)
EXIT SUB

END SUB

SUB hresponsePRINT (a$)
' This routine prints the response A$, using the current color
' hresponsecolor as the foreground color.
' Checks to see if screen mode is ok. This routine is used on the H&P
' pages.

'GLOBAL - hresponsecolor, forecolor
dummyc = hresponsecolor
SetColor (dummyc)
PRINT a$;
dummyc = forecolor
SetColor (dummyc)

END SUB

SUB questionPRINT (a$)
' This routine prints the question A$, using the current color
' questioncolor as the foreground color. Checks to see if screen mode
' is ok.

'GLOBAL - questioncolor, forecolor
dummyc = questioncolor
SetColor (dummyc)
PRINT a$;
dummyc = forecolor
SetColor (dummyc)

END SUB

REM $STATIC
SUB ResetVariables (VARIABLE%(), sex$, SSN$, AGE$, STARTIME$, STARTDATE$)
' This routine resets the above variables to their respective
defaults.

FOR i = 1 TO 200
  VARIABLE%(i) = 0
NEXT i
sex$ = ""
SSN$ = ""--"---"
AGE$ = ""--"
ABDXSUB4.BAS (cont'd)

STARTIME$ - ""
STARTDATE$ - ""

END SUB

REM $DYNAMIC
SUB responsePRINT (a$)
''
This routine prints the response A$, using the current color
responsecolor as the foreground color. Checks to see if screen mode
is ok.
''
'GLOBAL - responsecolor, forecolor

dummyc = responsecolor
SetColor (dummyc)
PRINT a$;
dummyc = forecolor
SetColor (dummyc)

END SUB

SUB SetColor (thecolor)
''
This routine sets the color THECOLOR if in appropriate mode.
smode% = VideoMode%
SELECT CASE smode%
CASE 16  'screen 9
COLOR thecolor
CASE 6   'screen 2
'Do nothing. COLOR gives error in mode 2.
CASE 3   'screen 0
COLOR thecolor
CASE ELSE
'Do nothing
END SELECT

END SUB

SUB SetFrameColor
''This routine sets the frame color if in appropriate mode.

'GLOBAL - framecolor

CALL SetColor(framecolor)

END SUB

SUB SetNormalColor
''
This routine returns the color attributes to the normal color
if color is allowed in the current screen mode.

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'GLOBAL - forecolor

CALL SetColor(forecolor)

END SUB

SUB SetScreenMode (smode)
' Routine sets the proper screen mode and clears screen.

SELECT CASE smode
CASE 9
   SCREEN 9, 0, 0, 0
CASE 2
   SCREEN 2, 0, 0, 0
   OUT &H3D9, 7
CASE ELSE
   SCREEN 0
   WIDTH 80
END SELECT
CLS
END SUB

SUB TextDxPause
'      This routine calls TextContinuePrompt and then waits for a
      keypress.
'      It is used by HM DX page, also to erase info at bottom of screen
      before writing prompt.
FOR i = 23 TO 25
   LOCATE i, 1
   PRINT SPACE$(75);
NEXT i
CALL TextPause

END SUB

SUB TextPause
'      This routine calls TextContinuePrompt and then waits for a
      keypress.
CALL TextContinuePrompt
CALL GetKey(a$)

END SUB

SUB textPRINT (a$)
'      This routine prints the text string A$, using the current color
'      textcolor as the foreground color.  Checks to see if screen mode is
      ok.

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ABDXSUB4.BAS (cont'd)

'GLOBAL - textcolor, forecolor

SetColor (textcolor)
PRINT a$;
SetColor (forecolor)

END SUB
DECLARE SUB returnadapter (adapt%)
DEFINT A-Z

' CALL returnadapter(a)
' PRINT a
' STOP

1 ScnERR = 1
RESUME NEXT

SUB returnadapter (adapt)
   ' This routine returns the display adapter type as:
   ' 0 - no graphics adapter
   ' 1 - CGA adapter
   ' 2 - EGA/VGA adapter

   SHARED ScnERR
   ' start error checking
   ON ERROR GOTO 1

   ' check for EGA/VGA.
   ScnERR = 0
   SCREEN 9
   IF ScnERR = 0 THEN
      adapt = 2
   ELSE
      ScnERR = 0
      ' check for CGA
      SCREEN 2
      IF ScnERR = 0 THEN
         adapt = 1
      ELSE
         adapt = 0
      END IF
   END IF

   ' reset screen
   SCREEN 0

   ' end error checking
   ON ERROR GOTO 0
END SUB
DECLARE SUB UnPackDatabase (filename$, VARIABLE!(), APRIORI#(), arraywidth%, arraylength%)
DEFINT A-Z
$INCLUDE: 'include.bas'

SUB UnPackDatabase (filename$, VARIABLE!(), APRIORI#(), arraywidth, arraylength)
    This routine reads in a database in file filename$, and places the data in VARIABLE(). arraywidth refers to the number diseases and arraylength refers to the actual number of response items.
    The first two records are used to store the apriori probabilities for each disease. Record 1 contains the whole integer mantissa; record 2 has the exponent (stored in data file as positive, but converted to neg). The database is packed to a single byte per VARIABLE element.
    If the byte value is less than 128 then a straight conversion is used.
    If the value is > 128, then 128 is subtracted from the byte and the result is divided by 10. ex 25 -> 25; 129 -> 0.1

filenum - FREEFILE
OPEN "R", filenum, filename$, arraywidth
FIELD #filenum, arraywidth AS datarow$
N% - LOF(filenum) \ arraywidth
IF N% = 0 THEN
    BEEP
    PRINT "Database file not found. Unable to continue."
    STOP
END IF

    ' Get apriori values from the first two records.
GET #filenum, 1
    ' Get mantissa as integer; implies a maximum of two digits precision
FOR j = 1 TO arraywidth
    APRIORI#(j) = ASC(MID$(datarow$, j, 1))
NEXT j

GET #filenum, 2
    ' Get exponent as integer; always converted to negative.
FOR j = 1 TO arraywidth
    APRIORI#(j) = APRIORI#(j) * 10 ^ (-1 * (ASC(MID$(datarow$, j, 1)))))
NEXT j

FOR i = 1 TO arraylength
    GET #filenum, i + 2
    FOR j = 1 TO arraywidth
value = ASC(MID$(datarow$, j, 1))
IF value > 128 THEN
    VARIABLE!(i, j) = (value MOD 128) / 10
ELSE
    VARIABLE!(i, j) = value
END IF
NEXT j

NEXT i
CLOSE #filenum
END SUB
DATES.BAS

DECLARE FUNCTION juliantodate$ (julian&)
DECLARE FUNCTION mdytodate$ (month%, day%, year%)
DECLARE FUNCTION ValidDate$ (dat$)
DECLARE FUNCTION DateToJulian& (dat$)
DEFINT A-Z

DEFSNG A-Z
FUNCTION DateToJulian& (dat$)
' This function returns the numerical Julian date for dat$ (MM-DD-YYYY)

' Program modified from one found in:
' "The Microsoft QuickBASIC Programmer's Toolbox"
' by John Clark Craig, Microsoft press, 1988

month% - VAL(LEFT$(dat$, 2))
day% - VAL(MID$(dat$, 4, 2))
year% - VAL(RIGHT$(dat$, 4))
IF year% < 1583 THEN
  ' year is <1583. aborting
  DateToJulian& = -1
  EXIT FUNCTION
END IF
IF month% > 2 THEN
  month% = month% - 3
ELSE
  month% = month% + 9
  year% = year% - 1
END IF
tempa& = 146097 * (year% \\ 100) \ 4
tempb& = 1461& * (year% MOD 100) \ 4
tempc& = (153 * month% + 2) \ 5 + day% + 1721119
DateToJulian& = tempa& + tempb& + tempc&
END FUNCTION

FUNCTION juliantodate$ (julian&)
' Returns a date in MM-DD-YYYY format from Julian day number julian&.

' Program modified from one found in:
' "The Microsoft QuickBASIC Programmer's Toolbox"
' by John Clark Craig, Microsoft press, 1988

x& = 4 * julian& - 6884477
y& = (x& \ 146097) * 100

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d& = (x& MOD 146097) \ 4

x& = 4 * d& + 3
y& = (x& \ 1461) + y&
d& = (x& MOD 1461) \ 4 + 1

x& = 5 * d& - 3
m& = x& \ 153 + 1
d& = (x& MOD 153) \ 5 + 1
IF m& < 11 THEN
  month% = m& + 2
ELSE
  month% = m& - 10
END IF
day% = d&
year% = y& + m& \ 11
dat$ = mdytodate$(month%, day%, year%)
juliantodate$ = dat$

END FUNCTION

FUNCTION mdytodate$ (month%, day%, year%)
  Converts m,d,y to date string in format MM-DD-YYYY.

  Program modified from one found in:
  "The Microsoft QuickBASIC Programmer’s Toolbox"
  by John Clark Craig, Microsoft press, 1988

  yr$ = RIGHT$("000" + MID$(STR$(year%), 2), 4)
  mon$ = RIGHT$("0" + MID$(STR$(month%), 2), 2)
  da$ = RIGHT$("0" + MID$(STR$(day%), 2), 2)
  mdy$ = mon$ + "." + da$ + "." + yr$
  mdytodate$ = mdy$
END FUNCTION

DEFINT A-Z
FUNCTION ValidDate% (dat$)
  Returns true if valid date dat$, otherwise returns false.

  Program modified from one found in:
  "The Microsoft QuickBASIC Programmer’s Toolbox"
  by John Clark Craig, Microsoft press, 1988

  const FALSE = 0
  const TRUE = NOT FALSE
  julian& = DateToJulian&(dat$)
  convert$ = juliantodate$(julian&)
  if dat$ = convert$ then
    ValidDate% = TRUE
  else
DATES.BAS (cont'd)

ValidDate* = FALSE
END IF

END FUNCTION
DECLARE SUB GetUCResponse (ch$, filter$)
DECLARE SUB GetYNResponse (N$)
DECLARE SUB PrintDumpBuffer (a$, B$)
DECLARE SUB splititem (a$, B$, APRINT$, txtwidth$)
DECLARE SUB BottomOfPageCheck ()
DECLARE SUB ActualPrint (ASTRING$, TabFlag$)
DECLARE SUB PrintWordWrap (a$, B$)
DECLARE SUB TopMarginPrint (TOPMARGIN$)
DECLARE SUB encipher CDECL (a$)
DECLARE SUB decipher CDECL (a$)
DECLARE SUB UnPackArray (?PackString$, thearray$)
DECLARE SUB DrawWindow (ulr%, ulc%, numlines%, length%, frametyp%, thecolor$)
DECLARE FUNCTION Exists% (FIL$)
DECLARE SUB ClearBuffer ()
DECLARE SUB InitPHRASE (PHRASE$())
DECLARE SUB MenuEntryPage (NR%, resplength%, exitchar$, DATAHEADING$, menuheading$, Choices$(), HELPFILE$)
DECLARE SUB frame (ulr%, ulc%, numlines%, length%, frametyp$)
DECLARE SUB inverseText (row%, col%, thereponse$)
DECLARE SUB versetext (row%, col%, thereponse$)
DECLARE SUB TextPause ()
DECLARE SUB SetColor (thecolor$)
DECLARE SUB CenterPrint (row%, CenterString$)
DECLARE SUB GetSF600Case (RealFileName$, heading$, FORGND$, BACGND$, RECORD$)
DECLARE SUB ReplaceIt (mainstring$, oldstring$, newstring$)
DECLARE SUB SF600Help ()
DECLARE SUB KarenWindow ()
DEFINT A-Z
DECLARE SUB DrawSFBox (heading$, PAGE%, maxpages$)
DECLARE SUB NewInverseRoutine (NEWROW%, NEWCOL%, RCASE$())
DECLARE SUB OldInverseRoutine (OLDROW%, OLDCOL%, RCASE$())
DECLARE SUB computeStop (PAGE%, maxpages%, N%, NSTOP$)
DECLARE SUB GetKey (N$)
REM $DYNAMIC

' $INCLUDE: 'include.bas'

REM $STATIC
SUB ActualPrint (ASTRING$, TabFlag$)
' This routine prints ASTRING$ using tabbing as defined by TabFlag.
'
ABDX Programmer's Manual  A-119
SHARED TABNUM, LMARGIN, OPUT, CLICK, MAXCLICK

' check for bottom of page and act upon it.
CALL BottomOfPageCheck
'divvy up job by output device
SELECT CASE OPUT
  CASE 1 'screen
    SELECT CASE TabFlag
      CASE 0 'CR with tabs
        LOCATE CLICK, TABNUM + LMARGIN
        CLICK = CLICK + 1
      CASE 1 'CR no tabs
        LOCATE CLICK, LMARGIN + 1
        CLICK = CLICK + 1
      CASE ELSE ' no CR, no tabs - (TabFlag - 2)
        LOCATE CLICK, 2
        ' Ensure that ASTRING$ fits on screen OK, since no wordwrapping.
        ' This is mainly for the read in stored plan routine. The string
        ' width may be OK for a printer, but too wide here.
        IF LEN(ASTRING$) > 78 THEN
          ASTRING$ = LEFT$(ASTRING$, 77) + CHR$(16)
        END IF
    END SELECT
  END SELECT

' Use the ; for all screen printing so that the CR won't
' mess up the frame.
PRINT ASTRING$;

CASE 2 'printer
  SELECT CASE TabFlag
    CASE 0 ' CR with tabs
      PRINT #2, TAB(TABNUM + LMARGIN); ASTRING$
      PRINT #2,
      CLICK = CLICK + 2
    CASE 1 ' CR no tabs
      PRINT #2, ASTRING$
      PRINT #2,
      CLICK = CLICK + 2
    CASE ELSE ' no CR, no tabs - (TabFlag - 2)
      PRINT #2, ASTRING$;
  END SELECT
CASE 3  'file
SELECT CASE TabFlag
CASE 0  ' CR with tabs
   PRINT #2, TAB(TABNUM + LMARGIN); ASTRING$
   CLICK = CLICK + 1
CASE 1  ' CR no tabs
   PRINT #2, ASTRING$
   CLICK = CLICK + 1
CASE ELSE  ' no CR, no tabs - (TabFlag = 2)
   PRINT #2, ASTRING$;
END SELECT
CASE ELSE
   'should never get here.
   BEEP
END SELECT
END SUB

SUB BottomOfPageCheck
   ' This routine checks for the bottom of the page. If there,
   appropriate
   ' action is taken.
   ' Shared variables
   SHARED CLICK, MAXCLICK, OPUT, PAGE
   SHARED LMARGIN, TOPMARGIN, THEDATE$, THEBOAT$, TIM$
   SHARED LEFTMAR1, TOP1, BOP1, LEFTMAR2, TOP2, BOP2
   ' Check for end of page. If not there, exit
   IF CLICK < MAXCLICK THEN
      EXIT SUB
   END IF
   SELECT CASE OPUT
   CASE 1  ' screen
      'Bottom of screen directions.
      CALL ClearBuffer
      CALL TextPause
      CLS
      'Draw frame if scrn output
      CALL SetColor(framecolor)
      CALL frame(1, 1, 23, 78, 3)
      CALL SetColor(ForeColor)
      CLICK = 2
LOCATE CLICK, 2, 0

CASE 2 ' printer
   ' How about framing this?
   CLS
   BEEP
   PRINT "This page is full."
   PRINT "Change the SF-600 in the printer."
   PRINT
   LOCATE , , 0
   COLOR backcolor, ForeColor
   PRINT "Press the ENTER/RETURN key when ready."
   COLOR ForeColor, backcolor
   LINE INPUT N$
   IF PAGE = 1 THEN PAGE = 2 ELSE PAGE = 1
   IF PAGE = 1 THEN
      LMARGIN = LEFTMAR1
      TOPMARGIN = TOP1
      MAXCLICK = BOP1
   ELSE
      LMARGIN = LEFTMAR2
      TOPMARGIN = TOP2
      MAXCLICK = BOP2
   END IF
   ' Print top margin
   CALL TopMarginPrint(TOPMARGIN)
   ' Print SF600 heading.
   PRINT #2, SPACE$(LMARGIN) + THEDATE$ + SPACE$(3) + "(CONT'D)" + SPACE$(3) + THEBOAT$ + "  " + TIM$;
   CLICK = 3

CASE 3 ' file
   CLICK = 1

CASE ELSE
   ' Should never get here.
   BEEP
END SELECT
END SUB

SUB ClearBuffer
   ' This routine clears the text input buffer
   DO
      a$ = INKEY$
   LOOP UNTIL a$ = ""
END SUB

ABDX Programmer's Manual A-122
REM $DYNAMIC
SUB computeStop (PAGE, maxpages, N%, NSTOP%)
    IF PAGE < maxpages THEN
        NSTOP% = 60
    ELSE
        NSTOP% = N% - ((maxpages - 1) * 60)
    END IF
END SUB

SUB DrawSFBox (heading$, PAGE, maxpages)

    This routine draws the box used for the SF600 generator.

    CLS
    a$ = heading$
    a$ = a$ + " Page " + STR$(PAGE) + " of " + STR$(maxpages)
    CALL SetColor(headingcolor)
    CALL CenterPrint(1, a$)
    CALL SetColor(ForeColor)
    CALL SetColor(framecolor)
    LOCATE 2, 1, 0
    PRINT CHR$(201);
    REM LUC
    LOCATE 23, 1, 0
    PRINT CHR$(200);
    FOR I = 2 TO 78
        FOR J = 0 TO 1
            LOCATE 2 + (J * 21), I, 0
            IF I <> 27 AND I <> 53 THEN
                PRINT CHR$(205);
                GOTO 1100
            END IF
            IF J = 0 THEN PRINT CHR$(209); ELSE PRINT CHR$(207);
        NEXT J
    NEXT I
    END IF
    IF J = 0 THEN PRINT CHR$(209); ELSE PRINT CHR$(207);
1100  NEXT J
    NEXT I
    LOCATE 2, 79, 0
    PRINT CHR$(187);
    REM RUC
    LOCATE 23, 79, 0
    PRINT CHR$(188);
    REM RLC
    FOR I = 3 TO 22
        FOR J = 0 TO 1
            LOCATE I, 1 + (J * 78), 0
            PRINT CHR$(186);
            LOCATE I, 27 + (J * 26), 0
            PRINT CHR$(179);
        NEXT J
    NEXT I
NEXT I  
CALL SetColor(ForeColor)  

REM Print Options  
CALL SetColor(infocolor)  
LOCATE 24, 1, 0  
PRINT "Arrow keys move the cursor, PgUp, PgDn to change the page.  
Push Enter";  
LOCATE 25, 1, 0  
PRINT "to select the desired response or '?' for more information.  
ESC to exit.";  
CALL SetColor(ForeColor)  
END SUB  

REM $STATIC  
SUB DrawWindow (ulr, ulc, numlines, length, frametyp, thecolor)  
' Draws frame about coordinates given which form the corner of  
' the frame. Numlines and length do not include frame itself.  
' Also, can have several types of frames.  
' 1 = single frame, 2 = double frame; 3-5 = block frames.  
 
CALL SetColor(thecolor)  
CALL frame(ulr, ulc, numlines, length, frametyp)  
CALL SetColor(ForeColor)  
END SUB  

REM $DYNAMIC  
SUB GetSetupStuff (LEFTMAR1%, LEFTMAR2%, TOP1%, TOP2%, BOP1%, BOP2%,  
LINWIDTH%)  
' This routine checks for existence of SETUP.DAT. If found, it  
' retrieves the margins and page lengths. If not found, it uses  
' default values.  
3000 OPEN "R", #1, "SETUP.DAT", 1  
N% = LOF(1)  
CLOSE #1  
IF N% = 0 THEN  
KILL "SETUP.DAT"  
' LEFTMAR1 = left margin of the front of the SF600.  
' LEFTMAR2 = left margin of the back of the SF600.  
' TOP1 = Top margin of the front of the SF600.  
' TOP2 = Top margin of the back of the SF600.  
' BOP1 = Bottom margin of the front of the SF600.  
' BOP2 = Bottom margin of the back of the SF600.  
LEFTMAR1 = 0  
LEFTMAR2 = 0  
TOP1 = 0  
TOP2 = 0  
BOP1 = 44  
BOP2 = 56
LINWIDTH = 65
CLS
LOCATE 10, 10
PRINT "SETUP.DAT file is not found. Program will use system"
LOCATE 11, 10
PRINT "default values."
CALL TextPause
ELSE
OPEN "SETUP.DAT" FOR INPUT AS #1
IF NOT EOF(1) THEN
    INPUT #1, LEFTMAR1
    INPUT #1, LEFTMAR2
    INPUT #1, TOP1
    INPUT #1, TOP2
    INPUT #1, BOP1
    INPUT #1, BOP2
    INPUT #1, LINWIDTH
END IF
3080 CLOSE #1
END IF

END SUB

SUB GetSF600Case (RealFileName$, heading$, FORGND, BACGND, RECORD)
'This routine displays all cases in the SF600 window and returns the
'selected case as RECORD.

REM $DYNAMIC
REDIM RCASE$(60)

REM READ REAL.DAT ROUTINE
OPEN "R", #1, RealFileName$, 128
FIELD #1, 11 AS LSSN$, 2 AS LAGE$, 26 AS LVAR$, 40 AS LOTH$, 5 AS
    LTH$, 10 AS LDAT$, 2 AS LHMD$, 2 AS LSIM$, 2 AS LNUM$, 2 AS
    LPRO$
N% = LOF(1) / 128
IF N% = 0 THEN
    CLS
    LOCATE 10, 10
    PRINT "No real cases stored."
    CALL TextPause
    RECORD = 0
    CLOSE #1
    ERASE RCASE$
    EXIT SUB
END IF

PAGE = 1

ABDX Programmer's Manual  A-125
maxpages = 1 + INT(N% / 60)
CALL computeStop(PAGE, maxpages, N%, NST0P%)

1220 REM box routine
CALL DrawSFBox(heading$, PAGE, maxpages)
row = 0
COLNUM = 0
COLFLAG = 0
REM show a page of cases (<= 60 cases per page)
FOR I = 1 TO NST0P%
GET #1, I + ((PAGE - 1) * 60)
row = row + 1
IF row > 20 THEN
row = 1
COLNUM = COLNUM + 1
END IF
NEWSSN$ = MID$(LSSN$, 1, 3) + MID$(LSSN$, 5, 2) + MID$(LSSN$, 8, 4)
REM REMOVE '-S
NEWDATE$ = LEFT$(LDAT$, 6) + RIGHT$(LDAT$, 2)
REM GET RID OF 19 IN 1985
RCASE$(I) = NEWSSN$ + " " + NEWDATE$ + " " + LTIM$ + " "
LOCATE 2 + row, 2 + (COLNUM * 26), 0
PRINT RCASE$(I);
NEXT I
LASTROW = row
LASTCOL = COLNUM
NUMRESP = N%
OLDROW = 1
NEWROW = 1
OLDCOL = 0
NEWCOL = 0
CALL NewInverseRoutine(NEWROW, NEWCOL, RCASE$())
REM Answer Routine
1410 DO
CALL GetKey(N$)
LOOP UNTIL (LEN(N$) = 1 OR LEN(N$) = 2)
IF LEN(N$) = 1 THEN
SELECT CASE N$
CASE "?"
CALL SF600Help
CASE CHR$(13)
RECORD = NEWROW + 20 * NEWCOL
RECORD = RECORD + ((PAGE - 1) * 60)
CLOSE #1
ERASE RCASE$
EXIT SUB

CASE CHR$(27)
CLS
RECORD = 0
CLOSE #1
ERASE RCASE$
EXIT SUB

CASE ELSE
BEEP
GOTO 1410

END SELECT
ELSE
N$ = MID$(N$, 2, 1)
SELECT CASE N$

CASE CHR$(80)
GOSUB 1590

CASE CHR$(72)
GOSUB 1640

CASE CHR$(77)
GOSUB 1730

CASE CHR$(75)
GOSUB 1690

CASE CHR$(81)    '      pagedown
PAGE = PAGE + 1
IF PAGE > maxpages THEN
    BEEP
    PAGE = maxpages
END IF
CALL computeStop(PAGE, maxpages, N%, NSTOP%)
GOTO 1220

CASE CHR$(73)    '      pageup
PAGE = PAGE - 1
IF PAGE < 1 THEN
    BEEP
    PAGE = 1
END IF
CALL computeStop(PAGE, maxpages, N%, NSTOP%)
GOTO 1220

CASE ELSE

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SOUND 100, 4

END SELECT
END IF
GOTO 1410

REM DOWN ARROW
1590 NEWROW = NEWROW + 1
IF NEWROW > 20 THEN
NEWCOL = NEWCOL + 1
NEWROW = 1
IF NEWCOL > LASTCOL THEN NEWCOL = 0
END IF
IF NEWROW > LASTROW AND NEWCOL = LASTCOL THEN
NEWROW = 1
NEWCOL = 0
END IF
GOSUB 1760
RETURN

REM UP ARROW
1640 NEWROW = NEWROW - 1
IF NEWROW < 1 THEN
NEWCOL = NEWCOL - 1
NEWROW = 20
IF NEWCOL < 0 THEN NEWCOL = LASTCOL
END IF
IF NEWROW > LASTROW AND NEWCOL = LASTCOL THEN NEWROW = LASTROW
GOSUB 1760
RETURN

REM LEFT ARROW
1690 NEWCOL = NEWCOL - 1
IF NEWCOL < 0 THEN
NEWCOL = LASTCOL
IF NEWROW > LASTROW THEN NEWROW = LASTROW
END IF
GOSUB 1760
RETURN

REM RIGHT ARROW
1730 NEWCOL = NEWCOL + 1
IF NEWCOL > LASTCOL THEN NEWCOL = 0
IF NEWROW > LASTROW AND NEWCOL = LASTCOL THEN NEWROW = LASTROW
GOSUB 1760
RETURN

1760 CALL OldInverseRoutine(OLDROW, OLDCOL, RCASE$())
CALL NewInverseRoutine(NEWROW, NEWCOL, RCASE$())
OLDROW = NEWROW
OLDCOL = NEWCOL
RETURN
END SUB

REM $STATIC
SUB GetYNResponse (N$)
   ' returns either Y or N for sf600 program
11900 COLOR questionColor + 16, backcolor
   PRINT CHR$(177);
   CALL GetUCResponse(N$, "YN")
   LOCATE CSRLIN, POS(0) - 1, 0
   COLOR ForeColor, backcolor
   PRINT " ";
END SUB

REM $DYNAMIC
SUB KarenWindow
   'This routine draws the lines and boxes that Karen designed for the CPDX program.
   CLS
   CALL SetColor(framecolor)
   CALL frame(1, 2, 9, 73, 2)
   CALL SetColor(ForeColor)
END SUB

SUB NewInverseRoutine (NEWROW, NEWCOL, RCASE$())
   'This routine inverses the cursor on the case selection page.
   '50010 REM NEW INVERSE ROUTINE
   NROW = 2 + NEWROW
   NCOL = 26 * NEWCOL + 2
   rcaseptr = NEWROW + 20 * NEWCOL
   CALL inversetext(NROW, NCOL, RCASE$(rcaseptr))
END SUB

SUB OldInverseRoutine (OLDROW, OLDCOL, RCASE$())
   'This routine normalizes the inversed cursor on the case page.
   '50070 REM OLD INVERSE ROUTINE
   NROW = 2 + OLDROW
   NCOL = 26 * OLDCOL + 2
   rcaseptr = OLDROW + 20 * OLDCOL
CALL versetext( NROW, NCOL, RCASE$(rcaseptr))

END SUB

REM $STATIC
SUB PrintDumpBuffer (a$, B$)
' This routine prints all of B$, then resets a$ and B$ to NULL
' originally a$="":gosub 35090

' Shared variables
SHARED TEXTWIDTH

a$ = ""
' This IF statement ensures that B$ would not be printed twice if it
' was the exact length of TextWidth.
IF B$ <> "" THEN
    CALL PrintWordWrap(a$, B$)
END IF
CALL ActualPrint(B$, 0)
B$ = ""
END SUB

SUB PrintWordWrap (a$, B$)
' This routine word wraps lines and prints them by calling ActualPrint.

' Shared variables
SHARED TEXTWIDTH

DO
    CALL splitem(a$, B$, APRINT$, TEXTWIDTH)
    IF APRINT$ <> "" THEN
        CALL ActualPrint(APRINT$, 0)
    END IF
LOOP UNTIL APRINT$ = ""
END SUB

REM $DYNAMIC
SUB ReplaceIt (mainstring$, oldstring$, newstring$) STATIC
mainstring$ = tempstring$
ptr% = INSTR(tempstring$, oldstring$)
IF ptr% <> 0 THEN
    firstpart$ = LEFT$(tempstring$, ptr% - 1)
    lastpos = LEN(tempstring$) - ptr% - LEN(oldstring$) + 1
    lastpart$ = RIGHT$(tempstring$, lastpos)
    tempstring$ = firstpart$ + newstring$ + lastpart$
    mainstring$ = tempstring$
END IF
END SUB
SUB SF600 (BOAT1$, BOAT2$, HMNAM$, HMSSN$)
REM PROG ver 1.03
REM SF-600 GENERATION FOR ABDX PROGRAM
DEFINT A-Z
REM Copywrite (C) 1985,1986,1987 Navy Submarine Medical Research
Laboratory
REM author: David G. Southerland, MD
REM 1.01- Corrected bug in canned PLAN routine.
REM 1.02- 3/12/86 - Added capability to change LINE WIDTH from
SETUP.DAT.
REM 1.03- 2/2/87 - Combined diagnostic, training,
REM and this program into a single program. Removed refs to LOOP% and
changed CASE% to THECASE%.
REM 2.00 - addition of female pronouns and female questions to
medical record entry form.

Dynamic array allocation.
REM $DYNAMIC

THECASE%() - array containing response data.
PHRASE$( ) - array of strings associated with corresponding
elements of THECASE%().
MONTH$( ) - array containing the months.
RCASE$( ) - array of displayed patients with SSN, date and
time.
CASEPTR() - array containing all chosen responses in a
question that allows multiple responses.

Shared Variables
SHARED TABNUM, CLICK, MAXCLICK, OPUT, PAGE, TEXTWIDTH
SHARED LMARGIN, TOPMARGIN, THEDATE$, THEBOAT$, TIM$
SHARED LEFTMAR1, TOP1, BOP1, LEFTMAR2, TOP2, BOP2

REDim THECASE%(200), PHRASE$(200)
REDim MONTH(12) AS STRING * 3
REDim RCASE$(60)
REDim CASEPTR(15)
REDim Choices$(10, 14)

heading$ = "ABDX Program SF-600 Generator Version 2.0"
SCREEN 0, 0, 0
KEY OFF
SCREEN 0, 1, 0

This routine reads the text phrases for PHRASE$( ), for
use in FSF600.BAS.
Phrase ( PHRASE$( ) ) data.
FSF600.BAS (cont'd)

FILNAM$ = "phrase.dat"
IF NOT Exists%(FILNAM$) THEN

CLS
LOCATE 10, 10
PRINT "File "; FILNAM$; " not found. Cannot continue without it."
SCREEN 0, 1, 0, 0
END

filenum = FREEFILE
OPEN FILNAM$ FOR INPUT AS filenum
FOR I = 11 TO 174
LINE INPUT #filenum, a$
'decrypt
CALL decipher(a$)
PHRASE$(I) = RIGHT$(a$, LEN(a$) - 3)
NEXT I
CLOSE filenum

BP$ = ""
malesex = 1
femalesex = 0
TABNUM = 13
CLICK = 1

'show some color
sfquestcolor = questionColor

'Maximum number of lines printed on the display screen.
MAXCLICK = 23
DUM = 0
SKIP = 1
RealFileName$ = "REAL.DAT"
CALL GetSF600Case(RealFileName$, heading$, headingcolor, backcolor, RECORD)
IF RECORD = 0 THEN
  ERASE THECASE%, PHRASE$, MONTH, RCASE$, CASEPTR, Choices$
  EXIT SUB
END IF

OPEN "R", #1, RealFileName$, 128
FIELD #1, 11 AS LSSN$, 2 AS LAGE$, 26 AS LVAR$, 40 AS LOTH$, 5 AS LTIM$, 10 AS LDAT$, 2 AS LHMD$, 2 AS LSIM$, 2 AS LNUM$, 2 AS LPRO$
GET #1, RECORD
SSN$ = LSSN$
AGE$ = LAGE$
OTHER$ = LOTH$
TIM$ = LTIM$
DAT$ = LDAT$

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Unpack data and place it into THECASE%().
CALL UnPackArray(LLVAR$, THECASE%())

IF THECASE%(2) = 1 THEN
    sex = femalesex
    UpPronoun$ = "She"
    LowPronoun$ = "she"
    sex$ = "female"
    UpPosPronoun$ = "Her"
ELSE
    sex = malesex
    UpPronoun$ = "He"
    LowPronoun$ = "he"
    sex$ = "male"
    UpPosPronoun$ = "His"
END IF

IF sex = femalesex THEN
    CALL ReplaceIt(PHRASE$(60), "he", "she")
    CALL ReplaceIt(PHRASE$(68), "his", "her")
    CALL ReplaceIt(PHRASE$(69), "his", "her")
    CALL ReplaceIt(PHRASE$(81), "he", "she")
    CALL ReplaceIt(PHRASE$(82), "he", "she")
END IF

CALL GetSetupStuff(LEFTMAR1%, LEFTMAR2%, TOP1%, TOP2%, B0P1%, B0P2%, LINWIDTH%)

Select output
Choices$(1, 1) = "CONSOLE - SF600 printed on display screen"
Choices$(1, 2) = "PRINTER - SF600 printed on printer"
Choices$(1, 3) = "FILE - SF600 printed to a file"
NR% = 1
resplength% = 3
DATAHEADING$ = heading$
menuheading$ = "Select Output"
HELPFILE$ = "HSF00.DAT"
CALL MenuEntryPage(NR%, resplength%, exitchar$, DATAHEADING$, menuheading$, Choices$(1), HELPFILE$)
OPUT = NR%

SELECT CASE OPUT
CASE 1  ' Output goes to the display screen.
a$ - "SCRN:"
LMARGIN - 1

CASE 2  ' Output goes to the printer.
SKIP - 2
a$ - "LPT1:"
GOSUB 3090

CASE 3  ' Output goes to a file.
CLS
LOCATE 9, 5
PRINT "Enter the file name for output : ";
LINE INPUT a$

CASE ELSE
CLS
ERASE THECASE%, PHRASE$, MONTH, RCASE$, CASEPTR, Choices$
EXIT SUB
END SELECT

2210 IF OPUT <> 1 THEN
OPEN "0", #2, a$
IF OPUT = 2 THEN WIDTH #2, 255
END IF
GOTO 10000

3090 CLS
PRINT "Are you starting on the first page of the SF-600? (Y/N)";
CALL GetYNResponse(N$)
IF N$ = "N" THEN PAGE - 2 ELSE PAGE = 1

3150 IF PAGE = 1 THEN
LMARGIN - LEFTMAR1
TOPMARGIN - TOP1
MAXCLICK - BOP1
ELSE
LMARGIN - LEFTMAR2
TOPMARGIN - TOP2
MAXCLICK - BOP2
END IF
3230 RETURN

10000 REM DATA CHECK
CLS
CALL DrawWindow(1, 2, 8, 73, 2, framecolor)
LOCATE 3, 9: PRINT "Currently, the system will print range values for Vital Signs"
LOCATE 4, 6: PRINT "and WBC results. To replace the range values
with specific"
LOCATE 5, 6: PRINT "findings, enter the new value at the prompt.
To leave the values"
LOCATE 6, 6: PRINT "as shown, press the Enter/Return key at each
prompt. If you would"
LOCATE 7, 6: PRINT "like the category not to be listed on the SF-
600, then enter the"
LOCATE 8, 6: PRINT "letter 'X' followed by the Enter/Return key."
BLANK$ = SPACE$(18)
CHKSTART = 89
CHKSTOP = 92
row = 12
CATEGORY$ = "Temp - 
REM TEMP
GOSUB 34000
GOSUB 10100
GOTO 10250
10100 LOCATE row, 1
PRINT CATEGORY$;
IF NUMCOUNT = 0 THEN 10130
LOCATE row, 8
PRINT PHRASE$(CASEPTR(1));
10130 LOCATE row, 40
PRINT "New " + CATEGORY$;
COLOR backcolor, ForeColor
PRINT SPACE$(28)
LOCATE row, 52, 1
LINE INPUT I$
COLOR ForeColor, backcolor
' Clears question of any positive response.
IF I$ = "X" OR I$ = "x" THEN
FOR I = CHKSTART TO CHKSTOP
THECASE%(I) = 0
NEXT I
I$ = ""
GOTO 10210
END IF
IF I$ = "" THEN 10220
IF I$ <> "" THEN
I$ = " " + I$
IF NUMCOUNT = 0 THEN
PHRASE$(CHKSTART) = I$
THECASE%(CHKSTART) = 1
ELSE
PHRASE$(CASEPTR(1)) = I$
END IF
END IF
10210 LOCATE row, 8, 0
PRINT MID$(I$ + SPACES$(30), 1, 29);
10220 LOCATE 0, 0
RETURN
10250 CHKSTART = 93
CHKSTOP = 95
row = 14
CATEGORY$ = "Pulse - "
REM PULSE
GOSUB 34000
GOSUB 10100
CHKSTART = 96
CHKSTOP = 101
row = 16
CATEGORY$ = "BP - "
REM BP(SYS/DIAS)
GOSUB 34000
LOCATE row, 1, 0
PRINT CATEGORY$;
IF BP$ = "" THEN IF NUMCOUNT = 0 THEN 10330
LOCATE row, 8, 0
IF BP$ <> "" THEN
PRINT BP$;
ELSE
PRINT PHRASE$(CASEPTR(1)); PHRASE$(CASEPTR(2));
END IF
10330 LOCATE row, 40
PRINT "New " + CATEGORY$;
COLOR backcolor, ForeColor
PRINT SPACES$(28)
LOCATE row, 52, 1
LINE INPUT I$
COLOR ForeColor, backcolor
IF I$ = "X" OR I$ = "x" THEN
FOR I = CHKSTART TO CHKSTOP
THECASE%(I) = 0
NEXT I
I$ = ""
BP$ = ""
GOTO 10405
END IF
IF I$ = "" THEN 10410
BP$ = " " + I$
10405 LOCATE row, 8
PRINT MID$(BP$ + SPACES$(30), 1, 29);
10410 CHKSTART = 110
CHKSTOP = 114
row = 18
CATEGORY$ = "WBC - "

REM WBC
GOSUB 34000
GOSUB 10100
10440 LOCATE 21, 1, 0
PRINT "Are all these OK ? (Y/N) ";
COLOR ForeColor, backcolor
CALL GetYNResponse(N$)
IF N$ = "N" THEN 10000

CHKSTART = 42
CHKSTOP = 47
ITEM = 46
REM AGG FACTORS
IF THECASE%(ITEM) = 0 THEN 11100
CATEGORY$ = "OTHER for Aggravating Factors"
B$ = " The OTHER aggravating factor is 
 a$ = "
GOSUB 34000
GOSUB 12000
a$ = " + a$
IF RIGHT$(a$, 1) = "." THEN a$ = MID$(a$, 1, LEN(a$) - 1)
PHRASE$(ITEM) = a$
11100 CHKSTART = 55
CHKSTOP = 60
ITEM = 59
REM REL FACTORS
IF THECASE%(ITEM) = 0 THEN 11200
CATEGORY$ = "OTHER for Relieving Factors"
B$ = " The OTHER relieving factor is 
 a$ = "
GOSUB 34000
GOSUB 12000
a$ = " + a$
IF RIGHT$(a$, 1) = "." THEN a$ = MID$(a$, 1, LEN(a$) - 1)
PHRASE$(ITEM) = a$
11200 CHKSTART = 83
CHKSTOP = 84
ITEM = 83
REM PREV ABDOMINAL SURGERY
IF THECASE%(ITEM) = 0 THEN 11300
CATEGORY$ = "positive Previous Abdominal Surgery"
B$ = " + UpPronoun$ + " has had 
 a$ = "
GOSUB 34000
GOSUB 12000
a$ = " + a$
IF RIGHT$(a$, 1) <> "." THEN a$ = a$ + "."
PHRASE$(ITEM) = a$
11300 CHKSTART = 85
FSF600.BAS (cont’d)

CHKSTOP = 86
ITEM = 85
REM PREV ILLNESS
IF THECASE%(ITEM) = 0 THEN 11400
CATEGORY$ = "positive Previous Illness"
B$ = " " + UpPronoun$ + " has had "
a$ = ""
GOSUB 34000
GOSUB 12000
a$ = " " + a$
IF RIGHT$(a$, 1) <> "." THEN a$ = a$ + "."
PHRASE$(ITEM) = a$

11400 CHKSTART = 87
CHKSTOP = 88
ITEM = 87
REM MEDICATION
IF THECASE%(ITEM) = 1 THEN
CATEGORY$ = "positive Medication"
B$ = " " + UpPronoun$ + " is currently taking "
a$ = ""
GOSUB 34000
GOSUB 12000
a$ = " " + a$
IF RIGHT?(a$, 1) - "." THEN a? = MID?(a?, 1, LEN(a?) - 1)
PHRASE?(ITEM) = a?
END IF

' Beginning of Female specific question, more info gathering routines
'LMP
CHKSTART = 164
CHKSTOP = 165
ITEM = 165
IF THECASE%(ITEM) = 1 THEN
CATEGORY$ = "late/overdue"
a$ = " Her period "
B$ = ""
GOSUB 34000
GOSUB 12000
a$ = " " + a$
IF RIGHT$(a$, 1) - "." THEN a$ = MID$(a$, 1, LEN(a$) - 1)
PHRASE$(ITEM) = a$
END IF

'Vaginal Discharge
CHKSTART = 166
CHKSTOP = 167
ITEM = 166
IF THECASE%(ITEM) = 1 THEN
CATEGORY$ = "recent vaginal discharge"
a$ = " She has had a recent vaginal discharge which "
B$ = ""
GOSUB 34000
GOSUB 12000
a$ = " + a$
IF RIGHT$(a$, 1) = "." THEN a$ = MID$(a$, 1, LEN(a$) - 1)
PHRASE$(ITEM) = a$
END IF

11500 CHKSTART = 118
CHKSTOP = 119
ITEM = 118
REM SCARS
IF THECASE%(ITEM) = 0 THEN 11600
CATEGORY$ = "positive Abdominal Surgical Scars"
a$ = " The patient has "
B$ = ""
GOSUB 34000
GOSUB 12000
a$ = " + a$
IF RIGHT$(a$, 1) = "." THEN a$ = a$ + "."
PHRASE$(ITEM) = a$

11600 CHKSTART = 129
CHKSTOP = 130
ITEM = 129
REM MASSES
IF THECASE%(ITEM) = 0 THEN 11700
CATEGORY$ = "positive Abdominal Masses"
a$ = " There is an abdominal mass "
B$ = ""
GOSUB 34000
GOSUB 12000
a$ = " + a$
IF RIGHT$(a$, 1) = "." THEN a$ = MID$(a$, 1, LEN(a$) - 1)
PHRASE$(ITEM) = a$

11700 CHKSTART = 148
CHKSTOP = 152
ITEM = 149
REM RECTAL
FOR I = CHKSTART TO CHKSTOP
IF THECASE%(I) = 1 THEN 11705
NEXT I
GOTO 11950

11705 IF THECASE%(ITEM) = 0 THEN 11800
CATEGORY$ = "positive Rectal Mass"
B$ = " The rectal examination reveals "
a$ = ""
GOSUB 34000
FSF600.BAS (cont'd)

GOSUB 12000
a$ = " " + a$
IF RIGHT$(a$, 1) = "." THEN a$ = MID$(a$, 1, LEN(a$) - 1)
PHRASE$(ITEM) = a$

11800 CLS
PRINT " Did you check the stool for occult blood? (Y/N) ";
COLOR ForeColor, backcolor
CALL GetYNResponse(N$)
IF N$ = "N" THEN 11950
PRINT
PRINT " Is the stool positive for occult blood? (Y/N) ";
CALL GetYNResponse(N$)
IF N$ = "Y" THEN
HEME$ = " The stool is positive for occult blood."
ELSE
HEME$ = " The stool is negative for occult blood."
END IF

' Female specific physical question, more info gathering routines
' Vaginal exam - similar to rectal exam (the programming, that is)
11950 CHKSTART = 153
CHKSTOP = 159
ITEM = 158
REM PELVIC MASSES
IF THECASE%(ITEM) = 1 THEN
CATEGORY$ = "positive Pelvic Masses"
B$ = " The pelvic examination reveals 
a$ = ""
GOSUB 34000
GOSUB 12000
a$ = " " + a$
IF RIGHT$(a$, 1) = "." THEN a$ = MID$(a$, 1, LEN(a$) - 1)
PHRASE$(ITEM) = a$
END IF
GOTO 13000

12000 AA$ = a$
BB$ = B$
12005 a$ = AA$
B$ = BB$
CLS
CALL KarenWindow
LOCATE 2, 5
PRINT " You have selected ";
COLOR backcolor, ForeColor
PRINT CATEGORY$;
COLOR ForeColor, backcolor
PRINT ".";
LOCATE 4, 5: PRINT "Complete the following sentence. Be as brief as possible. If"
LOCATE 5, 5: PRINT "you desire the programmed default statement, then enter the ENTER/
LOCATE 6, 5: PRINT "RETURN key on the first line. If you desire to delete the item, enter"
LOCATE 7, 5: PRINT "the letter 'X' followed by the ENTER/RETURN key on the first line.
LOCATE 8, 5: PRINT "After entering all the statements you desire, enter the ENTER/RETURN"
LOCATE 9, 5: PRINT "key on a line by itself. Note - Use only one sentence."
CONTER = 1
LOCATE 12, 1, 1
COLOR sfquestcolor, backcolor
PRINT CONTER: ">";
COLOR ForeColor, backcolor
IF a$ - "" THEN PRINT b$; ELSE PRINT a$;
12110 LINE INPUT I$
   IF I$ - "" THEN
   IF CONTER > 1 THEN
      GOTO 12160
   ELSE
      a$ - MID$(PHRASE$(ITEM), 2, (LEN(PHRASE$(ITEM)) - 1))
      GOTO 12160
   END IF
   IF I$ - "X" OR I$ - "x" THEN
      THECASE%(ITEM) - 0
      GOTO 12160
   ELSE
      THECASE%(ITEM) - 1
   END IF
   IF INSTR(. ?!", RIGHT$(I$, 1)) - 0 THEN I$ - I$ + " 
      a$ - a$ + I$
      CONTER - CONTER + 1
      COLOR sfquestcolor, backcolor
      PRINT CONTER: ">";
      COLOR ForeColor, backcolor
      GOTO 12110
12160 LOCATE 22, 1, 0
   PRINT " Is the above correct ? (Y/N) ";
   CALL GetYNResponse(N$)
   IF N$ - "N" THEN GOTO 12005
12220 IF RIGHT$(a$, 1) - " " THEN a$ - MID$(a$, 1, (LEN(a$) - 1))
   RETURN
13000 a$ = ""
    TITLENAM$ = "HISTORY"
    GOSUB 41000
    HXTXT$ = a$
    a$ = ""
    TITLENAM$ = "PHYSICAL EXAM"
    GOSUB 41000
    PETXT$ = a$

    SELECT CASE HMDX
    CASE 1
        DX$ = "APPENDICITIS"
    CASE 2
        DX$ = "NON-SPECIFIC ABDOMINAL PAIN"
    CASE 3
        DX$ = "RENAL COLIC"
    CASE 4
        DX$ = "PERFORATED DUODENUM"
    CASE 5
        DX$ = "CHOLECYSTITIS"
    CASE 6
        DX$ = "SMALL BOWEL OBSTRUCTION"
    CASE 7
        DX$ = OTHER$
    CASE 8
        DX$ = "APPENDICITIS"
    CASE 9
        DX$ = "NON-SPECIFIC ABDOMINAL PAIN"
    CASE 10
        DX$ = "PELVIC INFLAMMATORY DISEASE"
    CASE 11
        DX$ = "URINARY TRACT INFECTION"
    CASE 12
        DX$ = "OVARIAN CYST"
    CASE 13
        DX$ = "ECTOPIC PREGNANCY"
    CASE 14
        DX$ = "INCOMPLETE ABORTION"
    CASE ELSE
        DX$ = OTHER$
    END SELECT

14080 CLS
    PRINT "Your original diagnosis was ";
    COLOR backcolor, ForeColor
    PRINT DX$;
    COLOR ForeColor, backcolor
    PRINT "."
PRINT
PRINT "Do you desire to change it? (Y/N) ";
CALL GetYNResponse(N$)
IF N$ = "N" THEN 14130
14090 LOCATE 15, 1
PRINT "Enter your new diagnosis - ";
COLOR backcolor, ForeColor
PRINT SPACES(50)
LOCATE 15, 28, 1
LINE INPUT D$
COLOR ForeColor, backcolor
IF D$ = "" THEN BEEP: GOTO 14080
DX$ = D$
14130 LOCATE , , 0
15000 FILNAM$ = ""
PLAN$ = ""
15010 CLS
PRINT "You may type in the plan or if you have a routine plan"
PRINT "stored as a file, you may use it."
PRINT
PRINT "Do you have a routine plan already on disk? (Y/N) ";
CALL GetYNResponse(N$)
IF N$ = "N" THEN 15080
PRINT "Enter the name of the file containing the plan - ";
LINE INPUT FILNAM$
IF FILNAM$ = "" THEN 15010
IF NOT Exists%(FILNAM$) THEN
CLS
LOCATE 10, 10
PRINT "File "; FILNAM$; " is not found."
CALL TextPause
GOTO 15000
END IF
GOTO 20000
15080 CLS
CALL KarenWindow
C$ = ""
a$ = "Plan: 1. 
LOCATE 3, 5: PRINT "Enter as many lines as you desire for each plan number. When you are"
LOCATE 4, 5: PRINT "finished with a plan number, press the ENTER/RETURN key on a line by"
LOCATE 5, 5: PRINT "itself and you will proceed to the next plan number. When you are"
LOCATE 6, 5: PRINT "finished with the plan, press the ENTER/RETURN key on the first line"
LOCATE 7, 5: PRINT "of the next new plan number. You can exit the plan only by pressing"
LOCATE 8, 5: PRINT "the ENTER/RETURN key on the first line of a new plan number."
CONTER = 1
LOCATE 12, 1, 1
COLOR sfquestcolor, backcolor
PRINT CONTER; ">";
COLOR ForeColor, backcolor
PRINT STR$(CONTER); ";."
FIRSTLIN = 0
15210 LINE INPUT I$
IF I$ = "" THEN 15260
IF RIGHTS(I$, 1) = " " THEN I$ = MID$(I$, 1, (LEN(I$) - 1))
IF INSTR(".?!", RIGHTS(I$, 1)) = 0 THEN I$ = I$ + " " ELSE I$ = I$ + "
A$ = A$ + C$ + I$
FIRSTLIN = 1
B$ = ""
C$ = ""
15240 COLOR sfquestcolor, backcolor
PRINT CONTER; "">"
COLOR ForeColor, backcolor
PRINT B$;
GOTO 15210
15260 IF FIRSTLIN = 0 THEN 15269
CONTER = CONTER + 1
A$ = A$ + CHR$(13)
B$ = STR$(CONTER) + "."
C$ = " " + B$
FIRSTLIN = 0
GOTO 15240
15269 LOCATE 25, 1, 0
PRINT " Is the above correct? (Y/N) ";
CALL GetYNResponse(N$)
IF N$ = "N" THEN 15080
15320 IF A$ = "" THEN 15330
IF RIGHTS(A$, 1) = " " THEN A$ = MID$(A$, 1, (LEN(A$) - 1))
IF RIGHTS(A$, 1) = " " THEN A$ = MID$(A$, 1, (LEN(A$) - 1))
15330 PLAN$ = A$
IF OPUT = 2 THEN
CLS
PRINT "Make sure the printer is on and the SF-600 aligned."
PRINT " If not, then do so before answering the question below."
PRINT
PRINT
PRINT " Is the printer now on and the paper in place? (Y/N) ";
CALL GetYNResponse(N$)
' exit subprogram
IF N$ = "N" THEN 31010
END IF

20000 CLS
' Print top margin (@ 42400)
CALL TopMarginPrint(TOPMARGIN)

MONTH(1) = "JAN": MONTH(2) = "FEB"
MONTH(3) = "MAR": MONTH(4) = "APR"
MONTH(5) = "MAY": MONTH(6) = "JUN"
MONTH(7) = "JUL": MONTH(8) = "AUG"
MONTH(9) = "SEP": MONTH(10) = "OCT"
MONTH(11) = "NOV": MONTH(12) = "DEC"

THEDATE$ = MID$(DAT$, 4, 2) + " " + MONTH(VAL(MID$(DAT$, 1, 2))) +
" " + MID$(DAT$, 7, 4)
THEBOAT$ = BOAT1$ + " (" + BOAT2$ + ")"
TBOAT = INT((LINWIDTH - LEN(THEBOAT$)) / 2) ' actual column width for text
TEXTWIDTH = LINWIDTH - LMARGIN

'Draw frame if scrn output
IF OPUT = 1 THEN
CALL SetColor(framecolor)
CALL framed, 1, 23, 78, 3)
CALL SetColor(ForeColor)
CLICK = 2
END IF

' Prints APRINT$ without added tabbing and without a CR.
APRINT$ = SPACE$(LMARGIN) + THEDATE$
CALL ActualPrint(APRINT$, 2)

APRINT$ = SPACE$(TBOAT) + THEBOAT$
' Prints APRINT$ with added tabbing and with a CR.
CALL ActualPrint(APRINT$, 0)

APRINT$ = SPACE$(LMARGIN) + " " + TIM$
CALL ActualPrint(APRINT$, 2)

REM History

a$ = " This " + AGE$ + " year old " + sex$ + " presents with abdominal pain which began in"

' Print as much of A$ as you can on a per line basis.
B$ = ""
CALL PrintWordWrap(a$, B$)
FSF600.BAS (cont'd)

' Pain at onset.
CHKSTART = 11
CHKSTOP = 23

' Check for multiple responses and load into CASEPTR().
GOSUB 34000

' Join multiple responses into one phrase.
GOSUB 34050

' Pain at present.
CHKSTART = 24
CHKSTOP = 36
GOSUB 34000
IF NUMCOUNT = 0 THEN 20150
a$ = " and is now located in"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050

' Type of pain.
20150 CHKSTART = 37
CHKSTOP = 39
GOSUB 34000
IF NUMCOUNT = 0 THEN 20220
a$ = " and is described as being"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050
a$ = " in nature"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
20220 a$ = "."
' GOSUB 35090
CALL PrintWordWrap(a$, B$)

' Duration of pain.
CHKSTART = 51
CHKSTOP = 54
PRIOR = 0
GOSUB 34000
a$ = " The pain"
IF NUMCOUNT = 0 THEN 20270
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
PRIOR = 1
GOSUB 34050
Severity of pain.
20270 CHKSTART - 40
CHKSTOP - 41
GOSUB 34000
IF NUMCOUNT - 0 THEN 20305
IF PRIOR - 0 THEN a$ = " The pain is"
IF PRIOR - 1 THEN a$ = " and is"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
PRIOR = PRIOR + 2
GOSUB 34050

Progress of pain.
20305 CHKSTART - 48
CHKSTOP - 50
GOSUB 34000
IF NUMCOUNT - 0 THEN 20335
IF PRIOR - 0 THEN
a$ = " The pain"
GOTO 20330
END IF
a$ = " and it"
20330 ' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050
20335 IF PRIOR > 0 THEN
a$ = "."
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
END IF

Aggravating factors.
CHKSTART - 42
CHKSTOP - 47
GOSUB 34000
FLG = 1
a$ = " By history,"
IF NUMCOUNT - 0 THEN
FLG = 0
GOTO 20410
END IF
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050
IF NUMCOUNT > 1 THEN a$ = " seem" ELSE a$ = " seems"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
a$ = " to make the pain worse"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
a$ = " and"

' Relieving factors.
20410 CHKSTART = 55
   CHKSTOP = 60
   GOSUB 34000
   IF NUMCOUNT = 0 THEN
   IF FLG = 0 THEN
      GOTO 20480
   ELSE
      a$ = "."
   ' GOSUB 35090
   CALL PrintWordWrap(a$, B$)
   GOTO 20470
   END IF
   END IF
   ' GOSUB 35090
   CALL PrintWordWrap(a$, B$)
   GOSUB 34050
   IF NUMCOUNT > 1 THEN a$ = " seem" ELSE a$ = " seems"
   ' GOSUB 35090
   CALL PrintWordWrap(a$, B$)
   a$ = " to relieve the pain."
   ' GOSUB 35090
   CALL PrintWordWrap(a$, B$)

' Nausea.
20470 CHKSTART = 61
   CHKSTOP = 62
20480 a$ = " + UpPronoun$ + " has experienced"
   GOSUB 34000
   FLG = 1
   IF NUMCOUNT = 0 THEN
   FLG = 0
   GOTO 20510
   GOTO 20510
   END IF
   ' GOSUB 35090
   CALL PrintWordWrap(a$, B$)
   GOSUB 34050
   a$ = " and"

' Vomiting.
20510 CHKSTART = 63
   CHKSTOP = 64
   GOSUB 34000
   IF NUMCOUNT = 0 THEN
IF FLG = 0 THEN
  GOTO 20540
ELSE
  a$ = "."
  ' GOSUB 35090
  CALL PrintWordWrap(a$, B$)
  GOTO 20540
END IF

' Appetite
20540 CHKSTART = 70
  CHKSTOP = 71
  GOSUB 34000
  IF NUMCOUNT = 0 THEN 20580
  a$ = " " + UpPosPronoun$ + " appetite has been"
  ' GOSUB 35090
  CALL PrintWordWrap(a$, B$)
  GOSUB 34050

' Jaundice
20580 CHKSTART = 72
  CHKSTOP = 73
  GOSUB 34000
  IF NUMCOUNT = 0 THEN 20620
  GOSUB 34050

' Bowels.
20620 CHKSTART = 65
  CHKSTOP = 69
  GOSUB 34000
  IF NUMCOUNT = 0 THEN 20670
  a$ = " The patient has had"
  ' GOSUB 35090
  CALL PrintWordWrap(a$, B$)
  GOSUB 34050
  a$ = "."
  ' GOSUB 35090
  CALL PrintWordWrap(a$, B$)

' Urination
20670 CHKSTART = 74
  CHKSTOP = 78
  GOSUB 34000
  IF NUMCOUNT = 0 THEN 20710
  a$ = " " + UpPronoun$ + " has also had"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050
a$ = "."
' GOSUB 35090
CALL PrintWordWrap(a$, B$)

' Previous indigestion.
20710 CHKSTART = 79
CHKSTOP = 80
GOSUB 34000
IF NUMCOUNT = 0 THEN 20740
GOSUB 34050

' Similar pain.
20740 CHKSTART = 81
CHKSTOP = 82
GOSUB 34000
IF NUMCOUNT = 0 THEN 20770
GOSUB 34050

' Surgery.
20770 CHKSTART = 83
CHKSTOP = 84
GOSUB 34000
IF NUMCOUNT = 0 THEN 20810
a$ = " " + UpPronoun$ + " has had"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050

' Previous illness.
20810 CHKSTART = 85
CHKSTOP = 86
GOSUB 34000
IF NUMCOUNT = 0 THEN 20850
a$ = " Also, the patient has had"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050

' Current medication.
20850 CHKSTART = 87
CHKSTOP = 88
GOSUB 34000
IF NUMCOUNT > 0 THEN
a$ = " " + UpPronoun$ + " is currently taking"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050
END IF

' Female Specific History Questions
' Periods
CHKSTART = 160
CHKSTOP = 163
GOSUB 34000
IF NUMCOUNT > 0 THEN
a$ = " Her periods"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050
END IF

'LMP
CHKSTART = 164
CHKSTOP = 165
GOSUB 34000
GOSUB 34050
a$ = "."
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
END IF

'Vaginal Discharge
CHKSTART = 166
CHKSTOP = 167
GOSUB 34000
GOSUB 34050
a$ = "."
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
END IF

'Pregnancy
CHKSTART = 168
CHKSTOP = 170
GOSUB 34000
IF NUMCOUNT > 0 THEN
a$ = " The patient states that pregnancy"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050
END IF
'Faint/Dizzy
CHKSTART = 171
CHKSTOP = 172
GOSUB 34000
IF NUMCOUNT > 0 THEN
  a$ = " She"
  ' GOSUB 35090
  CALL PrintWordWrap(a$, B$)
  GOSUB 34050
  a$ = " recently felt faint/dizzy."
  ' GOSUB 35090
  CALL PrintWordWrap(a$, B$)
END IF

'PID/VD history
CHKSTART = 173
CHKSTOP = 174
GOSUB 34000
IF NUMCOUNT > 0 THEN
  a$ = " She has"
  ' GOSUB 35090
  CALL PrintWordWrap(a$, B$)
  GOSUB 34050
  a$ = " prior history of pelvic inflammatory disease or venereal disease."
  ' GOSUB 35090
  CALL PrintWordWrap(a$, B$)
END IF

20900 IF HXTXT$ <> "" THEN
  a$ = " " + HXTXT$
  ' GOSUB 35090
  CALL PrintWordWrap(a$, B$)
END IF
  a$ = ""
  ' GOSUB 35090
  CALL PrintDumpBuffer(a$, B$)
  a$ = ""
  ' GOSUB 35090
  CALL PrintDumpBuffer(a$, B$)

  ' Temp.
  CHKSTART = 89
  CHKSTOP = 92
  GOSUB 34000
  a$ = "Vital Signs:"
  IF NUMCOUNT = 0 THEN 20980
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
a$ = " Temp -"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050
a$ = ""

' Pulse.
20980 CHKSTART = 93
CHKSTOP = 95
GOSUB 34000
IF NUMCOUNT = 0 THEN 21050
IF a$ = "" THEN
' GOSUB 35090
CALL PrintDumpBuffer(a$, B$)
a$ = ""
END IF
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
a$ = " Pulse -"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050
a$ = ""

' BP (systolic).
21050 CHKSTART = 96
CHKSTOP = 98
GOSUB 34000
IF BPS = "" THEN 21070
IF a$ = "" THEN
' GOSUB 35090
CALL PrintDumpBuffer(a$, B$)
a$ = ""
END IF
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
a$ = " BP -" + BPS
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOTO 21110
21070 GOSUB 34000
IF NUMCOUNT = 0 THEN 21110
IF a$ = "" THEN
' GOSUB 35090
CALL PrintDumpBuffer(a$, B$)
a$ = ""
END IF
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
a$ = " BP -"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050

' BP (diastolic).
CHKSTART = 99
CHKSTOP = 101
GOSUB 34000
GOSUB 34050

' WBC.
21110 CHKSTART = 110
CHKSTOP = 114
GOSUB 34000
IF NUMCOUNT = 0 THEN 21170
a$ = ""
' GOSUB 35090
CALL PrintDumpBuffer(a$, B$)
CALL PrintDumpBuffer(a$, B$)
a$ = " Lab: WBC -"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050

21170 a$ = ""
' GOSUB 35090
CALL PrintDumpBuffer(a$, B$)
a$ = ""
' GOSUB 35090
CALL PrintDumpBuffer(a$, B$)

' Mood.
CHKSTART = 102
CHKSTOP = 104
GOSUB 34000
IF NUMCOUNT = 0 THEN 21230
a$ = " Physical examination reveals a patient whose mood is"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050

' Color.
21230 CHKSTART = 105
CHKSTOP = 109
GOSUB 34000
IF NUMCOUNT = 0 THEN 21290
a$ = " The patient's color is"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050
a$ = "."
' GOSUB 35090
CALL PrintWordWrap(a$, B$)

' Inspection.
21290 CHKSTART = 115
CHKSTOP = 117
GOSUB 34000
IF NUMCOUNT = 0 THEN 21330
GOSUB 34050

' Scars.
21330 CHKSTART = 118
CHKSTOP = 119
GOSUB 34000
IF NUMCOUNT = 0 THEN 21380
GOSUB 34050

' Bowel Sounds.
21380 CHKSTART = 124
CHKSTOP = 126
GOSUB 34000
IF NUMCOUNT = 0 THEN 21420
GOSUB 34050

' Distention.
21420 CHKSTART = 127
CHKSTOP = 128
GOSUB 34000
IF NUMCOUNT = 0 THEN 21460
GOSUB 34050

' Vol guard.
21460 CHKSTART = 120
CHKSTOP = 121
PRIOR = 0
GOSUB 34000
IF NUMCOUNT = 0 THEN GOTO 21510
GOSUB 34050
PRIOR = 1

' Rigidity.
21510 CHKSTART = 122
CHKSTOP = 123
GOSUB 34000
IF NUMCOUNT = 0 THEN
IF PRIOR = 1 THEN
a$ = " ."
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOTO 21560
ELSE
GOTO 21560
END IF
END IF
IF PRIOR = 0 THEN a$ = " Involuntary" ELSE a$ = " and involuntary"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050

Tenderness.
21560 CHKSTART = 131
CHKSTOP = 143
PRIOR = 0
GOSUB 34000
IF NUMCOUNT = 0 THEN GOTO 21620
a$ = " Tenderness is noted in"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050
PRIOR = 1

' Rebound.
21620 CHKSTART = 146
CHKSTOP = 147
GOSUB 34000
IF NUMCOUNT = 0 THEN
IF PRIOR = 1 THEN
a$ = " ."
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOTO 21670
ELSE
GOTO 21670
END IF
END IF
IF PRIOR = 0 THEN a$ = " Rebound" ELSE a$ = " and rebound"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050

' Abd mass.
21670 CHKSTART = 129
CHKSTOP = 130
GOSUB 34000
FSF600.BAS (cont'd)

IF NUMCOUNT = 0 THEN
a$ = " "
ELSE
GOSUB 34050
END IF

' Murphy's sign.
21730 CHKSTART = 144
CHKSTOP = 145
GOSUB 34000
IF NUMCOUNT = 0 THEN
IF a$ = " and" THEN
a$ = "."
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
END IF
GOTO 21780
END IF
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050

' Rectal.
21780 CHKSTART = 148
CHKSTOP = 152
GOSUB 34000
IF NUMCOUNT > 0 THEN
a$ = " The rectal exam reveals"
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
GOSUB 34050
a$ = "."
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
IF HEME$ <> "" THEN
a$ = HEME$
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
END IF

' Female Specific Physical Questions
' Vaginal Examination
' A little messy since mass in in the middle of the responses.

' First check for normal. If so, use complete sentence.
IF THECASE%(153) = 1 THEN
a$ = PHRASE%(153)
FSF600.BAS (cont'd)

' GOSUB 35090
CALL PrintWordWrap(a$, B$)
ELSE
' pelvic multiple responses - L, R, cx, and general tenderness, and
' pelvic mass.
CHKSTART = 154
CHKSTOP = 158
GOSUB 34000
IF NUMCOUNT > 0 THEN
  a$ = "The pelvic exam reveals"
  GOSUB 35090
  CALL PrintWordWrap(a$, B$)
GOSUB 34050
a$ = "."
  GOSUB 35090
  CALL PrintWordWrap(a$, B$)
END IF
IF THECASE%(159) = 1 THEN
  ' Clots - last response of question
  a$ = PHRASE$(159)
  GOSUB 35090
  CALL PrintWordWrap(a$, B$)
END IF
END IF

21840 IF PETXT$ O "" THEN
  a$ = " " + PETXT$
  GOSUB 35090
  CALL PrintWordWrap(a$, B$)
END IF
  a$ = ""
  CALL PrintDumpBuffer(a$, B$)
  a$ = "Impression: " + DX$
  GOSUB 35050
  B$ = ""
  CALL PrintWordWrap(a$, B$)

  a$ = ""
  GOSUB 35090
  CALL PrintDumpBuffer(a$, B$)
  IF PLAN$ O "" THEN
FSF600.BAS (cont’d)

a$ - ""
' GOSUB 35090
CALL PrintDumpBuffer(a$, B$)
a$ - ""
FOR I = 1 TO LEN(PLAN$)
  AA$ - MID$(PLAN$, I, 1)
  IF AA$ = CHR$(13) THEN
    'end of line, so print CR
    GOSUB 35090
    CALL PrintWordWrap(a$, B$)
  a$ - ""
  ELSE
    a$ - a$ + AA$
  END IF
NEXT I
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
a$ - ""
' GOSUB 35090
CALL PrintDumpBuffer(a$, B$)
ELSE
  a$ - a$ + AA$
END IF
NEXT I
' GOSUB 35090
CALL PrintWordWrap(a$, B$)
a$ - ""
' GOSUB 35090
CALL PrintDumpBuffer(a$, B$)
GOTO 23000
END IF
22110 IF FILNAM$ = "" THEN 23000

  ' Incorporate previously stored plan.
a$ - ""
  ' GOSUB 35090
  CALL PrintDumpBuffer(a$, B$)
  OPEN "I", #1, FILNAM$
  IF EOF(1) THEN
    CLOSE #1
  GOTO 23000
END IF
22150 IF EOF(1) THEN
CLOSE #1
GOTO 23000
END IF
LINE INPUT #1, I$
  ' APRINT$ = SPACE$(TABNUM + L Margin) + "Plan: " + I$
  ' DUM = 0

  APRINT$ = "Plan: " + I$
  CALL ActualPrint(APRINT$, 0)

GOTO 23000
END IF
LINE INPUT #1, I$
  IF I$ = "" THEN
DUM = 0
APRINT$ = "$" 

CALL ActualPrint(APRINT$, 1)
GOTO 22150
END IF
APRINT$ = SPACE$(7) + "$"
' GOSUB 42000
CALL ActualPrint(APRINT$, 0)
GOTO 22150

23000 REM FINISH UP
FOR I = 1 TO 2
APRINT$ = ""
CALL ActualPrint(APRINT$, 1)
NEXT I

' Print name, SSN for signature.
NUM = TABNUM + INT((LINWIDTH - LEN(HMNAM$)) / 2)
OLDTAB = TABNUM
TABNUM = NUM
APRINT$ = HMNAM$
' GOSUB 42000
CALL ActualPrint(APRINT$, 0)
APRINT$ = HMSSN$
' GOSUB 42000
CALL ActualPrint(APRINT$, 0)
TABNUM = OLDTAB
a$ = ""
' GOSUB 35090
CALL PrintDumpBuffer(a$, B$)
IF QPUT = 1 THEN
CALL TextPause
END IF

31010 CLOSE
SCREEN 0, 1, 0, 0
ERASE THECASE%, PHRASE$, MONTH, RCASE$, CASEPTR, Choices$
EXIT SUB

' Check for multiple responses.
34000 NUMCOUNT = 0
FOR I = 1 TO 15
CASEPTR(I) = 0
NEXT I
FOR I = CHKSTART TO CHKSTOP
IF THECASE%(I) = 1 THEN
NUMCOUNT = NUMCOUNT + 1
CASEPTR(NUMCOUNT) = I
END IF
NEXT I
RETURN

  ' Joins multiple responses into one string.
34050 IF NUMCOUNT <= 2 THEN
   a$ = PHRASE$(CASEPTR(1))
   ' GOSUB 35090
   CALL PrintWordWrap(a$, B$)
   IF NUMCOUNT = 2 THEN
      a$ = " and" + PHRASE$(CASEPTR(2))
      ' GOSUB 35090
      CALL PrintWordWrap(a$, B$)
   END IF
RETURN
   FOR I = 1 TO NUMCOUNT - 1
      a$ = PHRASE$(CASEPTR(I)) + ","
      ' GOSUB 35090
      CALL PrintWordWrap(a$, B$)
   NEXT I
   a$ = " and" + PHRASE$(CASEPTR(NUMCOUNT))
   ' GOSUB 35090
   CALL PrintWordWrap(a$, B$)
RETURN

41000 AA$ = a$
41005 a$ = AA$
CLS
   CALL KarenWindow
   LOCATE 2, 5: PRINT " Here you may enter anything you feel is important to the " ; TITLENAM$ ; "."
   LOCATE 3, 5: PRINT "Type the ENTER/RETURN key on the first line if you have nothing to add."
   LOCATE 4, 5: PRINT "Otherwise, enter as many lines as you wish. When you have finished, type"
   LOCATE 5, 5: PRINT "the ENTER/RETURN key on a separate line by itself."
   CONTER = 1
   LOCATE 12, 1, 1
   COLOR sfquestcolor, backcolor
   PRINT CONTER ; ">>";
   COLOR ForeColor, backcolor
   'David, this was IF a$="" then print a$. I think it should be <>".
   IF a$ <> "" THEN PRINT a$;
41110 LINE INPUT I$
   IF I$ = "" THEN 41160
   IF RIGHT$(I$, 1) = " " THEN I$ = MID$(I$, 1, (LEN(I$) - 1))
IF INSTR("?.!", RIGHT$(I$, 1)) = 0 THEN I$ = I$ + " " ELSE I$ = I$ + "+"

a$ = a$ + I$
CONTER = CONTER + 1
COLOR sfquestcolor, backcolor
PRINT CONTER; ">>";
COLOR ForeColor, backcolor
GOTO 41110

41160 LOCATE 25, 1, 0
PRINT " Is the above correct ? (Y/N) ";
COLOR backcolor + 16, ForeColor
PRINT CHR$(177);
COLOR ForeColor, backcolor
CALL GetKey(N$)
IF N$ = "Y" THEN 41220
IF N$ <> "N" THEN
BEEP
GOTO 41160
END IF
GOTO 41005

' More of the print routine.
41220 IF a$ <> "" THEN
IF RIGHT$(a$, 1) = " " THEN a$ = MID$(a$, 1, (LEN(a$) - 1))
IF RIGHT$(a$, 1) <> " . " THEN a$ = a$ + "."
END IF
RETURN

END SUB

SUB SF600Help
' This routine displays a simple help text for the case selection
display pages for the SF600 module.
SCREEN 0, 1, 3
CLS
CALL DrawWindow(1, 2, 8, 73, 2, framecolor)
LOCATE 3, 5: PRINT "These are the real cases which you have saved.
The dashes have been"
LOCATE 4, 5: PRINT "eliminated from the SSN to save space. To
select a case printing, use"
LOCATE 5, 5: PRINT "the arrow keys to highlight the appropriate
case and then press the"
LOCATE 6, 5: PRINT "ENTER/RETURN key to continue. You may press
the ESC key from the SSN"
LOCATE 7, 5: PRINT "listing page to exit the program. The PgUp
and PgDn keys will move"
LOCATE 8, 5: PRINT "you through the display pages of real cases."
CALL TextPause
SCREEN 0, 1, 0

END SUB

REM $.STATIC
SUB splitem (a$, b$, APRINT$, txtwidth%)
' This combines a$ and b$ and if the resultant width is > txtwidth,
' splits the string (wordwraps) into APRINT$ with the rest in b$.
' a$ - input string
' b$ - buffer string grows until > txtwidth
' APRINT$ - output string - returns null if not enough string in b$
' txtwidth% - width of formatted string (does not include indents).

' initialize
CONST punch$ = ".!?, "

' allow a tab analog (4 spaces) here; otherwise strip spaces.
IF LEFT$(a$, 4) <> "    " THEN
    a$ = LTRIM$(a$)
END IF

IF LEN(B$) > 0 THEN
    ' if a$ begins with punctuation, then don't insert space.
    ' also, spaces not added if a$ is NULL.
    IF INSTR(punch$, LEFT$(a$, 1)) = 0 THEN
        IF INSTR(punch$, RIGHT$(B$, 1)) > 0 THEN
            B$ = B$ + " " + a$
        ELSE
            B$ = B$ + a$
        END IF
    ELSE
        B$ = a$
    END IF
ELSE
    B$ = a$
END IF

' set up variables for exit without changes
a$ = ""
APRINT$ = ""

' check size
lenb = LEN(B$)
IF lenb < txtwidth THEN
    ' Too small - no changes necessary.
ELSEIF lenb = txtwidth THEN
    ' just the right size
    APRINT$ = B$
B$ = ""
ELSE
' Too big; break into two
' look for rightmost space
ptr = txtwidth + 1
DO WHILE MID$(B$, ptr, 1) <> " " AND ptr > 1
ptr = ptr - 1
LOOP

' Split 'em
IF ptr = 1 THEN
' What! No spaces?
APRINT$ = LEFT$(B$, txtwidth)
B$ = MID$(B$, txtwidth + 1)
ELSE
APRINT$ = LEFT$(B$, ptr - 1)
B$ = MID$(B$, ptr + 1)
B$ = LTRIM$(RTRIM$(B$))
END IF

END IF

END SUB

SUB TopMarginPrint (TOPMARGIN)
' This routine prints the proper number of CR's to make the top margin.
42400 IF TOPMARGIN <> 0 THEN
FOR I = 1 TO TOPMARGIN
PRINT #2,
NEXT I
END IF

END SUB
DECLARE SUB UpdateAge (agevar%, VARIABLE%)()
DECLARE SUB GetUCResponse (ch$, filter$)
DECLARE FUNCTION ValidDate% (dat$)
DECLARE FUNCTION validtime% (ttme$)
DECLARE SUB templatehelp (helpstring$, a$, templatestring$, blankchar$, returncode%, errorstring$, errorflag%)
DECLARE SUB SetColor (thecolor%)
DECLARE SUB parseLine (x$, sep$, a$())
DECLARE SUB parseWord (a$, sep$, word$)
DECLARE SUB headingPRINT (a$)
DECLARE SUB LocateCenter (crow%, infostring$)
DECLARE SUB questionPRINT (a$)
DECLARE SUB SetFrameColor()
DECLARE SUB SetNormalColor()
DECLARE SUB frame (ulr%, ulc%, numlines%, length%, frametyp%)
DEFINT A-Z
DECLARE FUNCTION checktemplate% (ke$, checkchar$, blankchar$)
DECLARE SUB SkipHardForward (hardstring$, templatestring$, ptr%, length%)
DECLARE SUB SkipHardBackward (hardstring$, templatestring$, ptr%)
DECLARE SUB template (a$, templatestring$, blankchar$, returncode%)
DECLARE FUNCTION getkeycode%()

' $INCLUDE: 'include.bas'

FUNCTION checktemplate (ke$, checkchar$, blankchar$) STATIC
   This function compares the character ke$ with the corresponding
template char, checkchar$ and returns 1 if OK, 0 if not.
   Numeric data required, and obligatory
   IF checkchar$ = "#" THEN
      IF ke$ >= "0" AND ke$ <= "9" THEN
         tempfunc = 1
      ELSE
         tempfunc = 0
      END IF
   ELSEIF checkchar$ = "%" THEN
      IF (ke$ >= "0" AND ke$ <= "9") OR ke$ = blankchar$ THEN
         tempfunc = 1
      ELSE
         tempfunc = 0
      END IF
   ELSE
      UC alphanumeric data required and obligatory.
   ELSEIF checkchar$ = "A" THEN
      ke$ = UCASE$(ke$)

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IF ke$ >= "A" AND ke$ <= "Z" THEN
    tempfunc = 1
ELSE
    tempfunc = 0
END IF

    UC alphanumeric data required, but not obligatory.
ELSEIF checkchar$ = "Z" THEN
    ke$ = UCASE$(ke$)
    IF (ke$ >= "A" AND ke$ <= "Z") OR ke$ = blankchar$ THEN
        tempfunc = 1
    ELSE
        tempfunc = 0
    END IF
    ' Male/Female [M/F] required.
ELSEIF checkchar$ = "M" THEN
    ke$ = UCASE$(ke$)
    IF ke$ = "M" OR ke$ = "F" THEN
        tempfunc = 1
    ELSE
        tempfunc = 0
    END IF
    ' Anything else passes OK
ELSE
    tempfunc = 1
END IF
checktemplate = tempfunc

END FUNCTION

FUNCTION getkeycode STATIC
    ' This function waits for a key to be pressed and returns its
    ' unique key-code integer.
    DO
        k$ = INKEY$
    LOOP UNTIL k$ = ""
    getkeycode = CVI(k$ + CHR$(0))
END FUNCTION

SUB parseline (x$, sep$, a$()) STATIC
    ' Parses a line (x$) using sep$ as the separator descriptor, and
    ' returns the parsed words in an array (a$() ).
    t$ = x$
    FOR i = LBOUND(a$) TO UBOUND(a$)
        CALL parseword(t$, sep$, a$(i))
        IF a$(i) = "" THEN EXIT FOR
    NEXT i
    t$ = ""
END SUB
SUB parseword (a$, sep$, word$)
; Parses a word (word$) from a string (a$) using sep$ as the
; string containing the separators.

   word$ = ""
   lena = LEN(a$)
   IF a$ = "" THEN EXIT SUB
   FOR i = 1 TO lena
      IF INSTR(sep$, MID$(a$, i, 1)) = 0 THEN EXIT FOR
   NEXT i
   FOR j = i TO lena
      IF INSTR(sep$, MID$(a$, j, 1)) THEN
         EXIT FOR
      END IF
   NEXT j
   FOR k = j TO lena
      IF INSTR(sep$, MID$(a$, k, 1)) = 0 THEN
         EXIT FOR
      END IF
   NEXT k
   IF i > lena THEN
      a$ = ""
      EXIT SUB
   END IF
   IF j > lena THEN
      word$ = MID$(a$, i)
      a$ = ""
      EXIT SUB
   END IF
   word$ = MID$(a$, i, j - i)
   IF k > lena THEN
      a$ = ""
   ELSE
      a$ = MID$(a$, k)
   END IF
END SUB

SUB SexSSNAgeDate (STFLAG, TRAINING, SIMULATE, sex$, SSN$, AGE$, STARTDATE$, STARTIME$, VARIABLE%())
; This routine allows input for sex, ssn, age, date, and time.

    'init sex
    IF VARIABLE(1) = 1 THEN
       sex$ = "M"
    ELSEIF VARIABLE(2) = 1 THEN
       sex$ = "F"
    ELSE
       sex$ = "_"
    END IF
'init time and date
IF STARTIME$ = "" THEN STARTIME$ = LEFT$(TIME$, 5)
IF STARTDATE$ = "" THEN STARTDATE$ = DATE$

tempsx$ = sex$
tempssn$ = SSN$
tempage$ = AGE$
tempdate$ = STARTDATE$
temptime$ = STARTIME$

SCREEN 0, 1, 0, 0
CLS

blankstring$ = "_"
pointtoInput - 0
finishpage - 0
mainrow - 6
maincol - 26
errorcode - 0

SexPageHeading1$ = "Sex / SSN / Age / Date / Time"
SexPageHeading2$ = "Data Entry Page"
SexHeading$ = "Patient's Sex [ ]"
SSNHeading$ = "Patient's SSN [ ]"
AgeHeading$ = "Patient's age [ ]"
DateHeading$ = "Date of exam [ ]"
TimeHeading$ = "Time of exam [ ]"
Sexhelp$ = "Enter 'M' for male or 'F' for female. This must be answered."
Agehelp$ = "Enter the age of the patient (between" + STR$(AGEMINIMUM) + " and" + STR$(AGEMAXIMUM) + "). A valid age must be present to continue."
sexerror$ = "Only M or F accepted."
ssnerror$ = "Only numbers accepted for the SSN."
ageerror$ = "Invalid age. Must be between" + STR$(AGEMINIMUM) + " and" + STR$(AGEMAXIMUM) + ", inclusive."
dateerror$ = "Invalid date. Use format MM-DD-YYYY"
timeerror$ = "Invalid time. Use 24 hour format."

IF TRAINING = 1 OR SIMULATE = 0 THEN
    Modify helpstrings if either in training mode or simulated mode.
    I know that SIMULATE should equal 1 for consistency, but it doesn't.
    SSNhelp$ = "A Social Security number has been chosen for you. There is no need to change it. With a REAL case, you would enter the patient's SSN here."
Datehelp$ = "Today's date has been chosen for you. There is no need to change it. With a real CASE, you would enter the date of the exam here."

Timehelp$ = "The current time has been chosen for you. There is no need to change it. With a real CASE, you would enter the time of the exam here."

ELSE

SSNhelp$ = "Enter the Social Security Number. The hyphens will be added automatically. A numeric SSN must be present to continue."

Datehelp$ = "The current date has been chosen. If this is incorrect, change it."

Timehelp$ = "The current time has been chosen. If this is incorrect, change it."

END IF

'page heading
CALL LocateCenter(2, SexPageHeading1$)
headingPRINT (SexPageHeading1$)
CALL LocateCenter(3, SexPageHeading2$)
headingPRINT (SexPageHeading2$)

'frame data
CALL SetFrameColor
frametyp = frametype
CALL frame(mainrow - 1, maincol - 2, 9, 28, frametyp)
CALL SetNormalColor

'initially show question
LOCATE mainrow, maincol
questionPRINT (SexHeading$)
LOCATE mainrow + 2, maincol
questionPRINT (SSNHeading$)
LOCATE mainrow + 4, maincol
questionPRINT (AgeHeading$)
LOCATE mainrow + 6, maincol
questionPRINT (DateHeading$)
LOCATE mainrow + 8, maincol
questionPRINT (TimeHeading$)

LOCATE mainrow, maincol + 15
PRINT sex$;
LOCATE mainrow + 2, maincol + 15
PRINT SSN$;
LOCATE mainrow + 4, maincol + 15
PRINT AGE$;
LOCATE mainrow + 6, maincol + 15
PRINT STARTDATE$;
LOCATE mainrow + 8, maincol + 15
PRINT STARTIME$;
DO
SELECT CASE pointtoinput
CASE 0
    'male/female stuff
    LOCATE mainrow, maincol + 15
    CALL templatehelp($Sexhelp$, tempsex$, "M", blankstring$, rc, sexerror$, errorcode)
    rc = 0  CR
    1  Esc
    2  up arrow
    3  down arrow
    IF rc = 1 THEN
        finishpage = 1
    ELSEIF rc = 0 OR rc = 3 THEN
        pointtoinput = 1
    END IF
CASE 1
    'ssn stuff
    LOCATE mainrow + 2, maincol + 15
    CALL templatehelp($SSNhelp$, tempssn$, "###-##-####", blankstring$, rc, ssnerror$, errorcode)
    IF rc = 1 THEN
        finishpage = 1
    ELSEIF rc = 0 OR rc = 3 THEN
        pointtoinput = 2
    ELSEIF rc = 2 THEN
        pointtoinput = 0
    END IF
CASE 2
    'age stuff
    LOCATE mainrow + 4, maincol + 15
    CALL templatehelp($Agehelp$, tempage$, "##", blankstring$, rc, ageerror$, errorcode)
    IF rc = 1 THEN
        finishpage = 1
    ELSEIF rc = 0 OR rc = 3 THEN
        pointtoinput = 3
    ELSEIF rc = 2 THEN
        pointtoinput = 1
    END IF
'if did not escape...
IF rc <> 1 THEN
    'Check for valid age. For ABDX, age >=17 and <=79.
valage = VAL(tempage$).
IF valage < AGEMINIMUM OR valage > AGEMAXIMUM THEN
    SOUND 900, 1
    finishpage = 0
    pointtoinput = 2
    errorcode = 1
END IF
END IF

CASE 3
'date stuff
LOCATE mainrow + 6, maincol + 15
CALL templatehelp(Datehelp$, tempdate$, "##-##-####", blankstring$, rc, dateerror$, errorcode)
IF rc = 1 THEN
    finishpage = 1
ELSEIF rc = 0 OR rc = 3 THEN
    pointtoinput = 4
ELSEIF rc = 2 THEN
    pointtoinput = 2
END IF
'if did not escape...
IF rc <> 1 THEN
    'Check for valid date
    IF NOT (ValidDate%(tempdate$)) THEN
        SOUND 900, 1
        finishpage = 0
        pointtoinput = 3
        errorcode = 1
    END IF
END IF

CASE 4
'time stuff
LOCATE mainrow + 8, maincol + 15
CALL templatehelp(Timehelp$, temptime$, "##:##", blankstring$, rc, timeerror$, errorcode)
IF rc = 1 THEN
    finishpage = 1
ELSEIF rc = 0 OR rc = 3 THEN
    pointtoinput = 5
ELSEIF rc = 2 THEN
    pointtoinput = 3
END IF
'if did not escape...
IF rc <> 1 THEN
    'Check for valid time
    IF NOT valitme(temptime$) THEN
        SOUND 900, 1
finishpage = 0
pointtointput = 4
errorcode = 1
END IF
END IF

CASE 5
' Routine to check if all responses entered are OK
' get confirmation
CALL scrollup(17, 2, 23, 79, 0, backcolor)
LOCATE 20, 26
PRINT "Are These correct? (Y/N) [ ]";
LOCATE 20, 52
YNEsc$ = "YN" + CHR$(27)
CALL GetUCResponse(ch$, YNEsc$)
' if not OK then cycle back
IF ch$ = "N" THEN
finishpage = 0
pointtointput = 0
ELSE
IF ch$ = CHR$(27) THEN rc = 1
finishpage = 1
END IF
CASE ELSE
' shouldn't get here.
finishpage = 1
END SELECT
LOOP UNTIL finishpage = 1

Since using temp values, don't need to change anything if Escape was pressed. Check for other than Escape
IF rc <> 1 THEN
' Check if any variables are different from original. If so, then
' do update STFLAG
IF tempsex$ <> sex$ THEN
STFLAG = 1
sex$ = tempsex$
IF tempsex$ = "M" THEN
VARIABLE(1) = 1
VARIABLE(2) = 0
ELSE
' if not male, then by def, female.
VARIABLE(1) = 0
VARIABLE(2) = 1
END IF
END IF
END IF
IF tempssn$ <> SSN$ THEN
  STFLAG = 1
  SSN$ = tempssn$
END IF
IF tempage$ <> AGE$ THEN
  STFLAG = 1
  AGE$ = tempage$
  agevar = VAL(AGE$)
  CALL UpdateAge(agevar%, VARIABLE%())
END IF
IF tempdate$ <> STARTDATE$ THEN
  STFLAG = 1
  STARTDATE$ = tempdate$
END IF
IF tempmtime$ <> STARTTIME$ THEN
  STFLAG = 1
  STARTTIME$ = tempmtime$
END IF
END IF

END SUB

SUB SkipHardBackward (hardstring$, templatestring$, ptr)
  ' This routine will decrement ptr to the appropriate location
  ' skipping any hard chars in the template
  DO WHILE INSTR(hardstring$, MID$(templatestring$, ptr + 1, 1)) <> 0
    AND ptr > 0
    ptr = ptr - 1
  LOOP
END SUB

SUB SkipHardForward (hardstring$, templatestring$, ptr, length)
  ' This routine will increment ptr to the appropriate location
  ' skipping any hard chars in the template
  DO WHILE INSTR(hardstring$, MID$(templatestring$, ptr + 1, 1)) <> 0
    AND ptr < length
    ptr = ptr + 1
  LOOP
END SUB

SUB template (a$, templatestring$, blankchar$, returncode%)
  ' This routine will display a$ at the current location
  ' and replace any deletions with blankchar$. It will allow
  ' modification of the string using keys and the template.

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Returncode will return 0, 1, 2, or 3 if CR, Esc, up arrow, or down arrow.
Template now is: # - 0-9
    A - alphanumeric
    - - a dash, a hard character. You can't modify it.
    : - a colon, another hard character.

'initialize stuff
CONST CR = 13
CONST esc = 27
CONST uparrow = 18432
CONST downarrow = 20480
CONST leftarrow = 19200
CONST rightarrow = 19712
CONST home = 18176
CONST endkey = 20224
CONST backspace = 8
CONST delete = 21248

hardstring$ = "-:"
quitsub = 0
startcol = POS(0)
startrow = CSRLIN
length = LEN(templatestring$)
oldptr = 0
ptr = 0

Main loop
DO
  LOCATE startrow, startcol, 0
  PRINT a$;
    Position blinking cursor
  IF ptr < 0 THEN ptr = 0
  IF ptr > length - 1 THEN ptr = length - 1
  IF ptr < oldptr THEN
    CALL SkipHardBackward(hardstring$, templatestring$, ptr)
  ELSE
    CALL SkipHardForward(hardstring$, templatestring$, ptr, length)
  END IF
  LOCATE startrow, startcol + ptr, 1, 6, 7
  oldptr = ptr
  keynum = getkeycode

SELECT CASE keynum

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CASE backspace  
   MID$(a$, ptr + 1, 1) = blankchar$  
   ptr = ptr - 1

CASE delete  
   MID$(a$, ptr + 1, 1) = blankchar$

CASE uparrow  
   returncode = 2  
   quitsub = 1

CASE downarrow  
   returncode = 3  
   quitsub = 1

CASE leftarrow  
   IF ptr > 0 THEN  
      ptr = ptr - 1  
   END IF

CASE rightarrow  
   IF ptr < length - 1 THEN  
      ptr = ptr + 1  
   END IF

CASE home  
   ptr = 0

CASE endkey  
   ptr = length - 1

CASE esc  
   returncode = 1  
   quitsub = 1

CASE CR  
   returncode = 0  
   quitsub = 1

CASE IS < 32  
   SOUND 999, 1

CASE IS > 255  
   SOUND 999, 1

CASE ELSE  
   all writable characters, I hope.
ke$ = CHR$(keynum)

IF ptr < length THEN
    Check template.
    checkchar$ = MID$(templatestring$, ptr + 1, 1)
    IF checktemplate(ke$, checkchar$, blankchar$) = 1 THEN
        IF ptr < LEN(a$) THEN
            MID$(a$, ptr + 1, 1) = ke$
        ELSE
            a$ = a$ + ke$
        END IF
        ptr = ptr + 1
    ELSE
        SOUND 54, 5
    END IF
ELSE
    SOUND 999, 1
END IF

END SELECT
LOOP UNTIL quitsub > 0

'      Finally, check that obligatory fields are filled in, unless
'      escaping
obligflag = 1
IF returncode <> 1 THEN
    FOR i = 1 TO length
        checkchar$ = MID$(templatestring$, i, 1)
        mainchar$ = MID$(a$, i, 1)
        IF checktemplate(mainchar$, checkchar$, blankchar$) = 0 THEN
            obligflag = 0
        END IF
    NEXT i
    quitsub = 0
END IF
LOOP UNTIL obligflag > 0

END SUB

SUB templatehelp (helpstring$, a$, templatestring$, blankchar$, returncode%, errorstring$, errorflag%)
'      This routine displays a help string at the bottom of the page
'      and then calls subroutine template.
'      Also displays errorstring if errorflag = 1
Save cursor position while typing help text.

```
DIM hlp$(2)
origrow - CSRLIN
origcol - POS(0)
helprow - 19

CALL scrollup(helprow - 2, 2, helprow - 2, 79, 0, backcolor)
IF errorflag = 1 THEN
    CALL LocateCenter(helprow - 2, errorstring$)
    PRINT errorstring$;
    SOUND 999, 1
    errorflag - 0
END IF

CALL parseline(helpstring$, "|", hlp$(2))

CALL scrollup(helprow, 2, helprow + 4, 79, 0, backcolor)
SetColor (infocolor)
FOR i = 0 TO 2
    IF hlp$(i) O " " THEN
        CALL LocateCenter(helprow + i, hlp$(i))
        PRINT hlp$(i);
    END IF
NEXT i
SetColor (forecolor)

LOCATE origrow, origcol
CALL template(a$, templatestring$, blankchar$, returncode$)

ERASE hlp$
```

**FUNCTION validtime (ttime$)**

This routine returns true (non-0) if the ttime$ represents a valid time in 24 hour format.

```
CONST FALSE = 0
CONST TRUE = NOT FALSE

hr$ = LEFT$(ttime$, 2)
min$ = RIGHT$(ttime$, 2)
IF hr$ < "00" OR hr$ > "24" OR min$ < "00" OR min$ > "59" THEN
    validtime = FALSE
    EXIT FUNCTION
END IF
IF hr$ = "24" AND min$ <> "00" THEN
    validtime = FALSE
    EXIT FUNCTION
END IF
```
validtime = TRUE

END FUNCTION
FPRINT.ASM

;This routine will print a string of text faster than QuickBASIC does.
;It will check for a monochrome monitor or CGA/EGA. It should only be
;used in text modes, ie where the video RAM begins at either B000h
(mono)
or B800h (color). It will write to the current page. You send the
;text string and attribute in the form:

; CALL fprint(text$, attr$)

DATASEGMENT WORD PUBLIC 'DATA'

dispage  db ?
attrib  db ?
vidseg  dw ?

DATAENDS

DGROUP GROUP DATA

CODESEGMENT WORD PUBLIC 'CODE'

ASSUME CS:CODE,DS:DGROUP,ES:DGROUP,SS:DGROUP

Public FPRINT

FPRINT Proc Far
push BP
mov BP,SP
mov AH,0Fh
int 10h ; get screen mode, return it in AL
mov dispage,BH ; current display page returned in BH
mov BX,08000h ; add video ram base to it.
cmp AL,7 ; is it monochrome display?
jz mono ; yes then skip add
add BX,08000h

mono: mov vidseg,BX ; Now BX contains the segment address for
; the video ram
mov AH,3
mov BH,dispage
int 10h ; read cursor position, DH=row, DL=col
mov AL,DH
mov CL,160 ; multiply row by 80 chars and 80 attrib
mul CL ; per line.
mov DH,0
add AX,DX ; add col, correcting for chars

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add AX,DX ; add again, correcting for attributes

mov BH,dispage ; put display page in BH
mov BL,0 ; then multiply by 1000h using shifts
shl BX,1 ; to compute page offset from beginning
shl BX,1 ; of video ram.
shl BX,1
shl BX,1
add ax,bx ; add display page offset to cursor offset
mov DI,AX ; save video ram offset address in DI

mov ES,vidseg
mov SI,[BP+06]
mov AH,[SI]
mov SI,[BP+08]
mov CX,[SI]
jcxz exit
mov SI,[SI+02]
cld
riteit: lodsb
stosb
loop riteit

exit: pop BP
ret 4

FPRINT ENDP

; routine to scroll active window up SCROLLINE% lines at a time
;
; QuickBASIC declaration:
; CALL SCROLLUP(Lrow%,Lcol%,Rrow%,Rcol%,scroline%,attribute%)
; note: 1,1 = upper left hand corner
;
; NOTE - This routine was modified from the one called by TICK,
; a MS Pascal program. That original one passed values by value,
; whereas QB passes by reference.
;
public SCROLLUP
SCROLLUP proc far
    push bp
    mov bp,sp
    mov si,[bp+14] ; get lcol in cl
    mov cx,[si]
FPRINT.ASM (cont'd)

dec cl ; adjust frame of reference
mov si,[bp+16]

mov ax,[si]
mov ch,al ; get lrow in ch
dec ch ; adjust
mov si,[bp+10] ; get rcol in dl

mov dx,[si]
dec dl ; adjust
mov si,[bp+12]
mov si,[bp+16]
mov si,[bp+10]
mov si,[bp+12]
mov ax,[si]
mov si,[bp+10]
mov si,[bp+12]
mov bx,[si]
mov bx,bl ; get attribute in bh
mov si,[bp+6]
mov si,[bp+8] ; get number of lines to scroll in al

mov ax,[si]
mov ah,6
int 10h
pop bp
ret 12

SCROLLUP endp

;---------------------------------------------------------------
;
; routine to scroll active window down SCROLINE% lines at a time
;
; QuickBASIC declaration:
; CALL SCROLLDN(Lrow%,Lcol%,Rrow%,Rcol%,scroline%,attribute%)
;
; note: 1,1 - upper left hand corner
;
; NOTE - This routine was modified from the one called by TICK,
; a MS Pascal program. That original one passed values by value,
; whereas QB passes by reference.
;
public SCROLLDN
SCROLLDN proc far
push bp
mov bp,sp
mov si,[bp+14] ; get lcol in cl
mov cx,[si]
dec cl ; adjust frame of reference
mov si,[bp+16]
mov ax,[si]
mov ch,al ; get lrow in ch
dec ch ; adjust

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FPRINT.ASM (cont'd)

    mov si,[bp+10] ; get rcol in dl
    mov dx,[si]
    dec dl        ; adjust
    mov si,[bp+12]
    mov ax,[si]
    mov dh,al     ; get rrow in dh
    dec dh         ; adjust
    mov si,[bp+6]
    mov bx,[si]
    mov bh,bl     ; get attribute in bh
    mov si,[bp+8] ; get number of lines to scroll in al
    mov ax,[si]
    mov ah,7
    int 10h
    pop bp
    ret 12

SCROLLDN endp
;
;
CODEENDS

END
INTRPT.ASM

This program is included with Microsoft QuickBASIC 4.0 and higher. It is therefore not listed here.
/* Routines used in encryption and decryption of .DAT files in ABDX and CPDX. 
   These two routines are called by QuickBASIC. */

/* define QB string descriptor structure */
struct bas_str
{
    int s_len;
    char *s_addr;
};

void encipher(QB_string)
struct bas_str *QB_string;
{
    int len=QB_string->s_len;
    unsigned char *str=QB_string->s_addr;
    register i;
    unsigned a_byte;
    if (len>0)
    {
        for (i=0;i<len;i++)
        {
            a_byte=(str+i);
            /* take a char, add 1, and XOR the result with 0 thru 31, then 
               XOR with 3 */
            *(str+i)=a_byte^(i%31)^3) +1;
        }
    }
}

void decipher(QB_string)
struct bas_str *QB_string;
{
    int len=QB_string->s_len;
    unsigned char *str=QB_string->s_addr;
    register i;
    unsigned a_byte;
    if (len>0)
    {
        for (i=0;i<len;i++)
        {
            a_byte=(str+i);
            /* take a char, subtract 1, and XOR the result with 0 thru 32 */
            *(str+i)=--a_byte^(i%31)^3;
        }
    }
}
CIPHER.C (cont'd)

} } }

/*
main()
{
}
*/
ABDXSTAT.BAS

DECLARE SUB encipher CDECL (a$)
DECLARE SUB decipher CDECL (a$)
DECLARE SUB STATSexSSNAgeDate (STFLAG%, TRAINING%, SIMULATE%, sex$, SSN$, AGE$, STARTDATE$, STARTTIME$, VARIABLE%())
DECLARE SUB GetUCResponse (ch$, filter$)
DECLARE FUNCTION ValidDate% (dat$)
DECLARE FUNCTION validtime% (ttime$)
DECLARE SUB templatehelp (helpstring$, a$, templatestring$, blankchar$, returncode%, errorstring$, errorflag%)
DECLARE SUB GetSF600Case (RealFileName$, heading$, FORGND%, BACGND%, RECORD%)
DECLARE SUB CompareFemDXes (HMDX%, MAXNUM%)
DECLARE SUB TextPause ()
DECLARE SUB SetVideoMode (vm%)
DECLARE SUB experimental ()
DECLARE FUNCTION Translate% (HMDX%)
DECLARE SUB SF600 (BOAT1$, BOAT2$, HMNAM$, HMSSN$)
DECLARE SUB CompareAbdDXes (COMPAR%, VARIABLE%(), MAXNUM%, HMDX%, QUESTP%(), QUESTIONS$())
DECLARE FUNCTION Centered% (s$)
DECLARE SUB SelectDatabase (lookatfemale%, VARIABLE%())
DECLARE SUB ComputeFinalProbs (MAXNUMBER%, MAXPROBABILITY%, PROB#(), FINALPROB#())
DECLARE SUB TXMenu (MAXNUM%, sex$)
DECLARE SUB MaleGraph (FINPROB#())
DECLARE SUB DisplayEncryptedFile (TheFile$, ReturnPage%) 
DECLARE SUB FemaleGraph (FINPROB#())
DECLARE SUB TextDxPause ()
DECLARE SUB PutCase (whichcase%, VARIABLE%(), SSN$, AGE$, OTHER$, STARTIME$, STARTDATE$, HMDX%, SIMULATE%, MAXNUM%, MAXPROB%)
DECLARE SUB ResetVariables (VARIABLE%(), sex$, SSN$, AGE$, STARTTIME$, STARTDATE$)
DECLARE SUB MenuSummaryPage (menurow$, menucol$, NR%, resplength$, exitchar$, menuheading$, Choices$(), HELPFILE$)
DECLARE SUB MenuEntryPage (NR%, resplength$, exitchar$, DATAHEADINGS$, menuheading$, Choices$(), HELPFILE$)
DECLARE SUB GetCase (filnam$, whichcase%, VARIABLE%(), SSN$, AGE$, OTHER$, STARTIME$, STARTDATE$, HMDX%, SIMULATE%, sex$)
DECLARE SUB PackArray (PackString$, thearray%())
DECLARE SUB ModifyNarrative (CASENUM%, escflag%)
DECLARE SUB UnPackArray (PackString$, thearray%)()
DECLARE SUB DisplayHPgetstatments (SXloc%, SXresp$( ), abortHP$)
DECLARE SUB DisplayMissedHP (SSN$, STARTIME$, STARTDATE$, VARIABLE$( ),
               THECASE$( ))
DECLARE SUB DisplayHProwcol (row%, col%, sxstring$)
DECLARE SUB CenterString (infostring$)
DECLARE SUB DisplayHPFrame (TRAINING%, SIMULATE%, SSN$, STARTIME$,
               STARTDATE$)
DECLARE SUB DisplayHP (TRAINING%, SIMULATE%, SSN$, STARTIME$,
               STARTDATE$, VARIABLE$( ))
DECLARE SUB DisplayHPprint (HP%, SXloc%( ), SXresp$( ), VARIABLE$( ))
DECLARE Sub TextContinuePrompt ()
DECLARE Sub DisplayHPHelp ()
DECLARE Function Exists% (FIL$)
DECLARE Sub PaintGraph (VAR%, WhichOne%)
DECLARE Sub DrawGraph (WhichOne%)
DECLARE Function VideoMode% ()
DECLARE Sub DataEntryPage (exitchar$, question$( ), Choices$( ),
            VariablePtr$( ), MULTIP$( ), SKIPBLANK$( ), Numresp$( ), None$( ),
            GraphFlag$( ), VARIABLE$( ), NUMCOLQUEST$( ), TOPROW$, TOPCOL$, Nun
            QUEST$( ), DATABEADING$( ), PAGEOF$, OFFAGE$, HELPFILE$, STFLAG$)
DECLARE Sub PutCursor (quest$, resp$, Choices$( ))
DECLARE Sub UpdateAsterisk (FirstRow%, FirstCol%, NonePtr%
            VariablePtr%, GraphFlag%, Numresp%, OffSet$, VARIABLE$( ))
DECLARE Sub LocateCenter (crow%, infostring$)
DECLARE SUB HPframe ()
DEFINT A-Z
DECLARE SUB SexSSNAgeDate (STFLAG%, TRAINING%, SIMULATE%, sex$, SSN$, 
               AGE$, STARTDATE$, STARTIME$, VARIABLE$( ))
DECLARE SUB InitializeColors (graphmode$, monmode$)
DECLARE SUB GetGraphMode (graphmode$, monmode$)
DECLARE SUB SetColor (thecolor%)
DECLARE SUB hpresponsePRINT (a$)
DECLARE SUB textPRINT (a$)
DECLARE SUB questionPRINT (a$)
DECLARE SUB headingPRINT (a$)
DECLARE SUB responsePRINT (a$)
DECLARE Sub SetTrainingColors (TRAINING%)
DECLARE Sub setFrameColor ()
DECLARE Sub SetNormalColor ()
DECLARE Sub SetScreenMode (ScrnMode$)
DECLARE Sub GetKey (a$)
DECLARE SUB narrative (NR%, CASENUM%, THECASE$( ))
DECLARE SUB LoadTrainingCase (CASENUM%, THECASE$( ))
DECLARE Sub frame (ulr%, ulc%, numlines%, length%, frametyp%)
DECLARE SUB GetBoatStuff (BOAT1$, BOAT2$, HMMNAMS$, HMSSN$)
DECLARE SUB Disclaimer (VERSION$)
DECLARE SUB GraphContinuePrompt ()

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DECLARE SUB BoxSelections (actyl%, XPOINT%, NumOfResp%, Xwidth%)

COMMON SHARED /normalcolor/ forecolor AS INTEGER, backcolor AS INTEGER
COMMON SHARED /ColorName/ black!, blue%, green%, cyan!, red!, magenta!
COMMON SHARED /ColorName2/ brown!, white%, gray%, ltblue%, lttgreen!, ltcyan!
COMMON SHARED /ColorName3/ lttred!, ltmagenta!, yellow!, hiwhite!
COMMON SHARED /DefaultStuff/ headingcolor%, textcolor%, framecolor%
COMMON SHARED /Questioncolor%, responsecolor%, hpresponsecolor%, graphcolor%
COMMON SHARED /helpcolor%, frametype%
COMMON SHARED /DefaultStuff2/ infocolor%
COMMON SHARED /ScreenStuff/ GRAPHICS!, MONITOR!, ScrnMode AS INTEGER,
Vertbits AS INTEGER, Yoffsetpict AS INTEGER
COMMON SHARED /GraphStuff/ hpframecolor!, bargraph%()

' $INCLUDE: 'include.bas'
black! = 0
blue! = 1
green! = 2
cyan! = 3
red! = 4
magenta! = 5
brown! = 6
white! = 7
gray! = 8
ltblue! = 9
ltgreen! = 10
ltcyan! = 11
ltmagenta! = 12
ltred! = 13
yellow! = 14
hiwhite! = 15

' Dummy values so that variables are declared in main module. They are modified shortly by SetTrainingColors.
headingcolor! = 1
framecolor! = 1
frametype! = 1

REM Copyright (C) 1985,1986,1987,1988 Navy Submarine Medical Research Laboratory
KEY OFF
RANDOMIZE TIMER
DEFINT A-Z
REM $DYNAMIC
DIM VARIABLE!(200)
DIM question$(10), MULTIP!(10), Numresp!(10)
DIM None(10), GraphFlag(10), SKIPBLANK(10), VariablePtr(10)
DIM Choices$(10, 14)
DIM QUESTPTR%(44), QUESTIONS$(44), DIFFER%(15)
DIM BAYES!(154, 7), PROB#(7), FINPROB#(7)
DIM FEMBAYES!(174, 7), FEMPROB#(7), FEMFINPROB#(7)

DIM COMPAR%(6, 6, 15)
DIM THECASE%(200), INARRAY%(7), OUTARRAY%(7), bargraph%(7)

' male = 0
' female = 1

' the following is added for testing purposes. but allows the program
' to be used normally, if "test" is not used at the command prompt.
' ie, ABDX test <CR>.
IF COMMAND$ = "TEST" THEN
davidflag% = 1
ELSE
   davidflag% = 0
END IF

VERSION$ = " STATS (ver 3.00)"
TRAINING = 0
   ' 0 - main ; 1 - training
STFLAG = 0
   ' 0 - no changes; 1 - changes have been
   made
SIMULATE = 1
   ' 1 - main ; 0 - simulated (I know, I
   know!)

CALL SetTrainingColors(TRAINING)
REM main prog > TRAINING=0; training prog > TRAINING=1
CALL GetGraphMode(graphmode$, monmode$)

   Set up graphics mode default (checked for CGA or EGA in
   graphmode$)
CALL InitializeColors(graphmode$, monmode$)
   Initialize display page colors
CALL SetTrainingColors(TRAINING)

   BIOS to appropriate 80 col text mode
IF monmode$ = "C" THEN
   ' CALL SetVideoMode(3)   'screen 0, 80 col, color
ELSE
   ' CALL SetVideoMode(2)   'screen 0, 80 col, B&W
END IF

' experimental program
CALL experimental

' Get name of vessel, user's name, and display submarine if present.
CALL GetBoatStuff(BOAT1$, BOAT2$, HMNAM$, HMSSN$)
' Go to subroutine to enter Bayesian probabilities,
' response and category names, and clear array variable.
GOSUB 60000
CALL GetKey(a$)
' Subprogram which displays warning/disclaimer.
CALL Disclaimer(VERSION$)

SELECT CASE GRAPHICS
CASE 9
   Vertbits = 14
   YOffsetpict = 4
CASE 2
   Vertbits = 8
   YOffsetpict = 6
CASE ELSE
   Vertbits = 8
   YOffsetpict = 6
END SELECT
GOTO 31000

' REM Enter SS#, Age.
30 'stat change
CALL STATSexSSNAgeDate(STFIAG, TRAINING, SIMULATE, sex$, SSN$, AGE$, STARTDATE$, STARTIME$, VARIABLE%())
' CALL SexSSNAgeDate(STFLAG, TRAINING, SIMULATE, sex$, SSN$, AGE$, STARTDATE$, STARTIME$, VARIABLE%())

100 REM Data Entry Option Page
   ' Choices for Main Option Page.
   Choices$(1, 1) - "GO TO HISTORY PAGES"
   Choices$(1, 2) - "GO TO PHYSICAL EXAM PAGES"
   Choices$(1, 3) - "MAKE DIAGNOSIS"
   Choices$(1, 4) - "GO TO SSN/AGE/TIME PAGE"
   Choices$(1, 5) - "RETURN TO MAIN OPTION PAGE"
   IF TRAINING = 1 THEN
      Choices$(1, 5) - "GO TO TRAINING OPTION PAGE"
      TYP$ = "Training"
   ELSE
      TYP$ = ""
   END IF

   ' New method for menu
   NR% = 1
resplength% = 5
DATAHEADING$ = "Abdominal Pain Diagnosis " + TYP$ + "Program" + VERSION$
menuheading$ = "Data Entry Options:"
HELPFILE$ = "HP13.DAT"

CALL MenuEntryPage(NR%, resplength%, exitchar$, DATAHEADING$, menuheading$, Choices$(), HELPFILE$)
ON NR GOTO 1000, 5000, 50000, 30, 31000
GOTO 100

1000 REM PAGE 1 of Hx. Similar to above page.
   IF sex$ = FEMALE$ THEN
      MaxHxPages$ = "5"
   ELSE
      MaxHxPages$ = "4"
   END IF

1010 NUMQUEST = 2
NUMCOLQUESTS = 1
TOPROW = 4
TOPCOL = 19
HELPFILE$ = "H14.TXT"
DATAHEADING$ = "History"
PAGE0F$ = "1"
OFFAGE$ = MaxHxPages$

FOR i = 1 TO 2
   question$(i) = QUESTIONS$(i)
   MULTIP%(i) = 1
   Numresp%(i) = QUESTPTR%(i)
   None(i) = 13
   GraphFlag(i) = 1
   SKIPBLANK(i) = 2
   Choices$(i, 1) = " RUQ    " : Choices$(i, 2) = " LUQ  "
   Choices$(i, 3) = " RLQ  " : Choices$(i, 4) = " LLQ  "
   Choices$(i, 5) = "UPPER HALF " : Choices$(i, 6) = "LOWER HALF 
   Choices$(i, 7) = "RIGHT HALF " : Choices$(i, 8) = "LEFT HALF  
   Choices$(i, 9) = " CENTRAL ": Choices$(i, 10) = " GENERAL  
   Choices$(i, 11) = "RIGHT FLANK": Choices$(i, 12) = "LEFT FLANK 
   Choices$(i, 13) = " NO PAIN  
NEXT i

VariablePtr(1) = 11
VariablePtr(2) = 24
CALL DataEntryPage(exitchar$, question$(), Choices$(),
VariablePtr(), MULTIP(), SKIPBLANK(), Numresp(), None(),
GraphFlag(), VARIABLE(), NUMCOLQUESTS%, TOPROW%, TOPCOL%,
NUMQUEST%, DATAHEADING$, PAGEOF$, OFPAGE$, HELPFILE$, STFLAG%)

IF exitchar$ = "P" THEN 100
IF exitchar$ = "X" THEN 100.

2000 REM Page 2 of Hx
'Multip (Whether Multiple Responses are Possible (1)
'or Not (0)); and Numresp (Number of Symptoms in Each Category).

NUMQUEST = 6
NUMCOLQUESTS = 3
TOPROW = 4
TOPCOL = 7
HELPFILE$ = "H24.TXT"
DATAHEADING$ = "History"
PAGEOF$ = "2"
OFFAGE$ = MaxHxPages$
FOR i = 1 TO NUMQUEST
  Numresp%(i) = QUESTPTR%(i + 2)
NEXT i

question$(1) = QUESTIONS$(3)
  Choices$(1, 1) = "Intermittent"
  Choices$(1, 2) = "Steady"
  Choices$(1, 3) = "Colicky"
  VariablePtr(1) = 37
  MULTIP(1) = 0
  None(1) = 0
  GraphFlag(1) = 0
  SKIPBLANK(1) = 0

question$(2) = QUESTIONS$(4)
  Choices$(2, 1) = "Moderate"
  Choices$(2, 2) = "Severe"
  VariablePtr(2) = 40
  MULTIP(2) = 0
  None(2) = 0
  GraphFlag(2) = 0
  SKIPBLANK(2) = 1

question$(3) = QUESTIONS$(5)
  Choices$(3, 1) = "Movement"
  Choices$(3, 2) = "Cough"
  Choices$(3, 3) = "Breathing"
  Choices$(3, 4) = "Food"
  Choices$(3, 5) = "Other"
ABDXSTAT.BAS (cont'd)

Choices$(3, 6) - "None"
VariablePtr(3) - 42
MULTIP(3) - 1
None(3) - 6
GraphFlag(3) - 0
SKIPBLANK(3) - 3

question$(4) - QUESTIONS$(6)
Choices$(4, 1) - "Better"
Choices$(4, 2) - "Same"
Choices$(4, 3) - "Worse"
VariablePtr(4) - 48
MULTIP(4) - 0
None(4) - 0
GraphFlag(4) - 0
SKIPBLANK(4) - 0

question$(5) - QUESTIONS$(7)
Choices$(5, 1) - "12h or less"
Choices$(5, 2) - "12-24h"
Choices$(5, 3) - "24-48h"
Choices$(5, 4) - "48+h"
VariablePtr(5) - 51
MULTIP(5) - 0
None(5) - 0
GraphFlag(5) - 0
SKIPBLANK(5) - 1

question$(6) - QUESTIONS$(8)
Choices$(6, 1) - "Lying Still"
Choices$(6, 2) - "Vomiting"
Choices$(6, 3) - "Antacids"
Choices$(6, 4) - "Food"
Choices$(6, 5) - "Other"
Choices$(6, 6) - "None"
VariablePtr(6) - 55
MULTIP(6) - 1
None(6) - 6
GraphFlag(6) - 0
SKIPBLANK(6) - 1

CALL DataEntryPage(exitchar$, question$(), Choices$(),
VariablePtr%(), MULTIP%(), SKIPBLANK%(), Numresp%(), None%(),
GraphFlag%, VARIABLE%, NUMCOLQUESTS%, TOPROW%, TOPCOL%,
NUMQUEST%, DATAHEADING$, PAGEOF$, OFPAGE$, HELPFILE$, STFLAG%)
IF exitchar$ = "P" THEN 1010
IF exitchar$ = "X" THEN 100

3000 REM Page 3 of Hx
NUMQUEST = 6
NUMCOLIQUESTS = 3
TOPROW = 4
TOPCOL = 7
HELPFILE$ = "H34.TXT"
DATAHEADING$ = "History - Other Symptoms"
PAGEOF$ = "3"
OFFPAGE$ = MaxHxPages$
FOR i = 1 TO NUMQUEST
    Numresp%(i) = QUESTPTR%(i + 8)
    GraphFlag(i) = 0
    question$(i) = QUESTIONS$(8 + i)
NEXT i

Choices$(1, 1) = "Present" : Choices$(1, 2) = "Absent"
VariablePtr(1) = 61
MULTIP(1) = 0
None(1) = 0
SKIPBLANK(1) = 1

Choices$(2, 1) = "Present" : Choices$(2, 2) = "Absent"
VariablePtr(2) = 63
MULTIP(2) = 0
None(2) = 0
SKIPBLANK(2) = 1

Choices$(3, 1) = "Normal" : Choices$(3, 2) = "Constipated"
Choices$(3, 3) = "Diarrhea" : Choices$(3, 4) = "Blood in Stool"
Choices$(3, 5) = "Mucus in Stool"
VariablePtr(3) = 65
MULTIP(3) = 1
None(3) = 1
SKIPBLANK(3) = 1

Choices$(4, 1) = "Decreased" : Choices$(4, 2) = "Normal"
VariablePtr(4) = 70
MULTIP(4) = 0
None(4) = 0
SKIPBLANK(4) = 1

Choices$(5, 1) = "Present" : Choices$(5, 2) = "Absent"
VariablePtr(5) = 72
MULTIP(5) = 0
None(5) = 0
SKIPBLANK(5) = 1
Choices$(6, 1) = "Normal"
Choices$(6, 2) = "Frequency"
Choices$(6, 3) = "Painful"
Choices$(6, 4) = "Dark Urine"
Choices$(6, 5) = "Blood in Urine"
VariablePtr(6) = 74
MULTIP(6) = 1
None(6) = 1
SKIPBLANK(6) = 1

CALL DataEntryPage(exitchar$, question$, Choices$, VariablePtr%, MULTIP%, SKIPBLANK%, Numresp%, None%, GraphFlag%, VARIABLE%, NUMCOLQUESTS%, TOPROW%, TOPCOL%, NUMQUEST%, DATAHEADING$, PAGEOF$, OFFAGE$, HELPFILE$, STFLAG%)

IF exitchar$ = "P" THEN 2000
IF exitchar$ = "X" THEN 100

4000 REM PAGE 4 of Hx
NUMQUEST = 5
NUMCOL QUESTS = 3
TOPROW = 4
TOPCOL = 7
HELPFILE$ = "H44.TXT"
DATAHEADING$ = "History - Past History"
PAGEOF$ = "4"
OFFAGE$ = MaxHxPages$

FOR i = 1 TO NUMQUEST
    MULTIP%(i) = 0
    Numresp%(i) = QUESTPTR%(i + 14)
    question$(i) = QUESTIONS$(14 + i)
    Choices$(i, 1) = "Yes": Choices$(i, 2) = "No"
    None(i) = 0
    GraphFlag(i) = 0
    VariablePtr(i) = 79 + (i - 1) * 2
    SKIPBLANK(i) = 1
NEXT i

CALL DataEntryPage(exitchar$, question$, Choices$, VariablePtr%, MULTIP%, SKIPBLANK%, Numresp%, None%, GraphFlag%, VARIABLE%, NUMCOL QUESTS%, TOPROW%, TOPCOL%, NUMQUEST%, DATAHEADING$, PAGEOF$, OFFAGE$, HELPFILE$, STFLAG%)

IF exitchar$ = "P" THEN 3000
IF exitchar$ = "X" THEN 100

4500 IF sex$ = FEMALE$ THEN
    REM PAGE 5 of Hx Only shown if patient is female.
    NUMQUEST = 6
    NUMC0L1QUESTS = 3
    TOPROW = 4
    TOPCOL = 7
    HELPFILE$ = "H54.TXT"
    DATAHEADER$ = "History - OB/GYN"
    PAGEOF$ = "5"
    OFFPAGE$ = MAXHxPages$
    FOR i = 1 TO NUMQUEST
        Numresp%(i) = QUESTPTR%(i + 38)
        GraphFlag(i) = 0
        question$(i) = QUESTIONS$(i + 38)
        MULTIP(i) = 0
        SKIPBLANK(i) = 1
        None(i) = 0
        NEXT i
    Choices$(1, 1) = "Not Started": Choices$(1, 2) = "Ceased"
    Choices$(1, 3) = "Regular": Choices$(1, 4) = "Irregular"
    VariablePtr(1) = 160
    Choices$(2, 1) = "Normal": Choices$(2, 2) = "Late/Overdue"
    Choices$(2, 3) = "Overdue" -- combined with LATE in the database.
    VariablePtr(2) = 164
    Choices$(3, 1) = "Yes": Choices$(3, 2) = "No"
    VariablePtr(3) = 166
    Choices$(4, 1) = "Impossible": Choices$(4, 2) = "Possible"
    Choices$(4, 3) = "Confirmed"
    VariablePtr(4) = 168
    Choices$(5, 1) = "Yes": Choices$(5, 2) = "No"
    VariablePtr(5) = 171
    Choices$(6, 1) = "Yes": Choices$(6, 2) = "No"
    VariablePtr(6) = 173
    CALL DataEntryPage(exitchar$, question$(i), Choices$(i),
        VariablePtr%(i), MULTIP%(i), SKIPBLANK%(i), Numresp%(i), None%(i),
        GraphFlag%(i), VARIABLE%(i), NUMC0L1QUESTS%, TOPROW%, TOPCOL%,
        NUMQUEST%, DATAHEADER$, PAGEOF$, OFFPAGE$, HELPFILE$, STFLAG%)
ABDXSTAT.BAS (cont’d)

IF exitchar$ = “P” THEN 4000
"X" and "N" will fall through the END IF and will goto 100
automatically.
END IF
GOTO 100

5000 REM Page 5; Page 1 of PE.
NUMQUEST = 4
NUMC0L1QUESTS = 2
TOPROW = 4
TOPCOL = 7
HELPFILE$ = "H15.TXT"
DATAHEADING$ = "Physical- Vital Signs"
PAGE0F$ = "1"
OFFAGE$ = "5"

FOR i = 1 TO NUMQUEST
  MULTIP%(i) = 0
  Numresp%(i) = QUESTPTR%(i + 19)
  None(i) = 0
  GraphFlag(i) = 0
  question$(i) = QUESTIONS$(i + 19)
NEXT i

Choices$(1, 1) = "< 98.6 " : Choices$(1, 2) = "98.6 - 100.2"
Choices$(1, 3) = "100.3 - 102 " : Choices$(1, 4) = "> 102"
VariablePtr(1) = 89
SKIPBLANK(1) = 1

Choices$(2, 1) = "< 80 " : Choices$(2, 2) = "80 - 99"
Choices$(2, 3) = "> 99"
VariablePtr(2) = 93
SKIPBLANK(2) = 1

Choices$(3, 1) = "< 90 " : Choices$(3, 2) = "90 - 129"
Choices$(3, 3) = "> 129"
VariablePtr(3) = 96
SKIPBLANK(3) = 1

Choices$(4, 1) = "< 70 " : Choices$(4, 2) = "70 - 89"
Choices$(4, 3) = "> 89"
VariablePtr(4) = 99
SKIPBLANK(4) = 2

CALL DataEntryPage(exitchar$, question$(i), Choices$(i),
VariablePtr%(i), MULTIP%(i), SKIPBLANK%(i), Numresp%(i), None%(i),
GraphFlag%(i), VARIABLE%(i); NUMC0L1QUESTS%, TOPROW%, TOPCOL%,
NUMQUEST%, DATAHEADING$, PAGE0F$, OFFAGE$, HELPFILE$, STFLAG%)
IF exitchar$ = "P" THEN 100
ABDXSTAT.BAS (cont'd)

IF exitchar$ = "X" THEN 100

5500 REM Page 6; Page 2 of PE.

NUMQUEST = 3
NUMCOLQUESTS = 2
TOPROW = 4
TOPCOL = 7
HELPFILE$ = "H25.TXT"
DATAHEADINGS$ = "Physical - General/Lab"
PAGEOF$ = "2"
OPPAGE$ = "5"
FOR i = 1 TO NUMQUEST
  Numresp%(i) = QUESTPTR%(i + 23)
  question$(i) = QUESTIONS$(i + 23)
  GraphFlag(i) = 0
  SKIPBLANK(i) = 1
NEXT i

Choices$(1, 1) = "Normal"
Choices$(1, 3) = "Anxious"
VariablePtr(1) = 102
MULTIP(1) = 0
None(1) = 0

Choices$(2, 1) = "Normal"
Choices$(2, 2) = "Distressed"
Choices$(2, 3) = "Flushed"
Choices$(2, 4) = "Jaundiced"
Choices$(2, 5) = "Cyanotic"
VariablePtr(2) = 105
MULTIP%(2) = 1
None(2) = 1

Choices$(3, 1) = "< 8,000"
Choices$(3, 2) = "8,000 - 10,000"
Choices$(3, 3) = "10,100 - 12,000"
Choices$(3, 4) = "12,100 - 15,000"
Choices$(3, 5) = "> 15,000"
VariablePtr(3) = 110
MULTIP%(3) = 0
None(3) = 0
CALL DataEntryPage(exitchar$, question$, Choices$(), VariablePtr%, MULTIP%, SKIPBLANK%, Numresp%, None%, GraphFlag%, VARIABLE%, NUMCOLQUESTS%, TOPROW%, TOCCOL%, NUMQUEST%, DATAHEADING$, PAGEOF$, OFPAGE$, HELPFILE$, STFLAG%)
IF exitchar$ = "P" THEN 5000
IF exitchar$ = "X" THEN 100

6000 REM Page 7; Page 3 of PE.
NUMQUEST = 7
NUMCOLQUESTS = 4
TOPROW = 4
TOCCOL = 7
HELPFILE$ = "H35.TXT"
DATAHEADING$ = "Physical - Abdominal Exam"
PAGEOF$ = "3"
OPPAGE$ = "5"
FOR i = 1 TO NUMQUEST
  Numresp%(i) = QUESTPTR%(i + 26)
  question$(i) = QUESTIONS$(i + 26)
  GraphFlag(i) = 0
  MULTIP(i) = 0
  SKIPBLANK(i) = 1
NEXT i

Choices$(1, 1) = "Normal"
Choices$(1, 2) = "Visible Peristalsis"
Choices$(1, 3) = "Decreased Abd. Movement"
VariablePtr(1) = 115
None(1) = 0

Choices$(2, 1) = "Present"
Choices$(2, 2) = "Absent"
VariablePtr(2) = 118
None(2) = 0

Choices$(3, 1) = "Present"
Choices$(3, 2) = "Absent"
VariablePtr(3) = 120
None(3) = 0

Choices$(4, 1) = "Present"
Choices$(4, 2) = "Absent"
VariablePtr(4) = 122
None(4) = 0

Choices$(5, 1) = "Normal"
Choices$(5, 2) = "Absent"
ABDXSTAT.BAS (cont'd)

Choices$(5, 3) - "Hyperactive"
VariablePtr(5) = 124
None(5) = 0

Choices$(6, 1) - "Present"
Choices$(6, 2) - "Absent"
VariablePtr(6) = 127
None(6) = 0

Choices$(7, 1) - "Present"
Choices$(7, 2) - "Absent"
VariablePtr(7) = 129
None(7) = 0

CALL DataEntryPage(exitchar$, question$(), Choices$(),
VariablePtr%, MULTIP%, SKIPBLANK%, Numresp%, None%,
GraphFlag%, VARIABLE%, NUMCOLQUESTS%, TOPROW%, TOPCOL%,
NUMQUEST%, DATAHEADINGS$, PAGEOF$, HELPFILE$, STFLAG%)

IF exitchar$ = "P" THEN 5500
IF exitchar$ = "X" THEN 100

7000 REM PAGE 8; Page 4 of PE.

NUMQUEST = 1
NUMCOLQUESTS = 1
TOPROW = 4
TOPCOL = 19
HELPFILE$ = "H45.TXT"
DATAHEADINGS$ = "Physical Exam"
PAGEOF$ = "4"
OFFAGE$ = "5"

question$(1) = QUESTIONS$(34)
MULTIP$(1) = 1
Numresp$(1) = QUESTPTR%(34)
None(1) = 13
GraphFlag(1) = 3
SKIPBLANK(1) = 2
Choices$(1, 1) = "RUQ" : Choices$(1, 2) = "LUQ"
Choices$(1, 3) = "RLQ" : Choices$(1, 4) = "LLQ"
Choices$(1, 5) = "UPPER HALF" : Choices$(1, 6) = "LOWER HALF"
Choices$(1, 7) = "RIGHT HALF" : Choices$(1, 8) = "LEFT HALF"
Choices$(1, 9) = "CENTRAL" : Choices$(1, 10) = "GENERAL"
Choices$(1, 11) = "RIGHT FLANK" : Choices$(1, 12) = "LEFT FLANK"
Choices$(1, 13) = "NO PAIN"

VariablePtr(1) = 131
CALL DataEntryPage(exitchar$, question$(), Choices$(i), VariablePtr$(i), MULTIP$(i), SKIPBLANK$(i), Numresp$(i), None$(i),
GraphFlag$(i), VARIABLE$(i), NUMCOLQUESTS$, TOPROW$, TOPCOL$, 
NUMQUEST$, DATAHEADING$, PAGEOF$, OFPAGE$, HELPFILE$, STFLAG$)
IF exitchar$ = "P" THEN 6000
IF exitchar$ = "X" THEN 100

8000 REM Page 9; Last page of PE.
NUMQUEST = 3
NUMCOLQUESTS = 3
TOPROW = 4
TOPCOL = 7
HELPFILE$ = "H55.TXT"
DATAHEADING$ = "Physical- Abdominal Exam"
PAGEOF$ = "5"
OFPAGE$ = "5"
FOR i - 1 TO NUMQUEST
    Numresp$(i) = QUESTPTR$(i + 34)
    question$(i) = QUESTIONS$(i + 34)
    GraphFlag(i) = 0
    SKIPBLANK(i) = 1
NEXT i

Choices$(1, 1) = "Present"
Choices$(1, 2) = "Absent"
VariablePtr(1) = 144
MULTIP(1) = 0
None(1) = 0

Choices$(2, 1) = "Present"
Choices$(2, 2) = "Absent"
VariablePtr(2) = 146
MULTIP(2) = 0
None(2) = 0

Choices$(3, 1) = "Normal"
Choices$(3, 2) = "Mass Felt"
Choices$(3, 3) = "Left Tender"
Choices$(3, 4) = "Right Tender"
Choices$(3, 5) = "General Tenderness"
VariablePtr(3) = 148
MULTIP(3) = 1
None(3) = 1

IF sex$ = FEMALE$ THEN
    NUMQUEST = 4
    VariablePtr(4) = 153
ABDXSTAT.BAS (cont'd)

Numresp%(4) = QUESTPTR%(4 + 34)
question$(4) = QUESTIONS$(38)
GraphFlag(4) = 0
SKIPBLANK(4) = 1
MULTIP%(4) = 1
None(4) = 1
Choices$(4, 1) = "Normal"
Choices$(4, 2) = "Left Tenderness"
Choices$(4, 3) = "Right Tenderness"
Choices$(4, 4) = "Cervical Tenderness"
Choices$(4, 5) = "General Tenderness"
Choices$(4, 6) = "Mass"
Choices$(4, 7) = "Blood (Clots)"

END IF

CALL DataEntryPage(exitchar?, question?(), Choices$(),
VariablePtr%(), MULTIP%(), SKIPBLANK%(), Numresp%(), None%(),
GraphFlag%, VARIABLE%, NUMCOLQUESTS%, TOPROW%, TOPCOL%,
NUMQUEST$, DATAHEADINGS$, PAGEOF$, OFPAGE$, HELPFILE$, STFLAG%)
IF exitchar? = "P" THEN 7000
IF exitchar? = "X" THEN 100
IF exitchar? = "N" THEN 100

31000 REM Primary Selection routine
CALL SetTrainingColors(TRAINING)
IF TRAINING = 0 THEN GOTO 32000

31004 REM Training Option Page

'check for training case data file
IF NOT Exists%("ABDTRN.DAT") THEN
SCREEN 0
CLS
LOCATE 10, 10
PRINT "The Training Module is not available."
LOCATE 11, 10
PRINT "The data file for the training cases is not present."
TRAINING = 0
CALL TextPause
GOTO 32000
END IF
Choices$(1, 1) = "Easy Case Narrative"
Choices$(1, 2) = "Harder Case Narrative"
Choices$(1, 3) = "Enter DATA"
Choices$(1, 4) = "Exit Training Module"

' New method for menu
ABDXSTAT.BAS (cont’d)

NR% = 1
resplength% = 4
DATAHEADING$ = "Abdominal Pain Diagnosis Training Module" +
VERSION$
menuheading$ = "Training Options"
HELPFILE$ = "HPT12.DAT"

CALL MenuEntryPage(NR%, resplength%, exitchar$, DATAHEADING$, menuheading$, Choices$((), HELPFILE$)

' Branch Depending on User’s Selection (Case Narrative, Enter Data, Exit).
SELECT CASE NR%
CASE 1, 2
CALL narrative(NR, CASENUM, THECASE%())
CASE 3
CALL ModifyNarrative(CASENUM%, escflag%)
IF escflag <> 1 THEN
CALL LoadTrainingCase(CASENUM, THECASE%())
GOTO 30
END IF
CASE 4
TRAINING = 0
CALL SetTrainingColors(TRAINING)
CASE ELSE
END SELECT
GOTO 31000

32000 REM Primary Selection routine for main program.
32004 REM Main Option Page
Choices$(1, 1) = "Real Case"
Choices$(1, 2) = "Modify Real Case"
Choices$(1, 3) = "Delete Real Case"
Choices$(1, 4) = "Exit Program"
resplength% = 4

'Mode$(1, 2) = "Simulated Case"
'Mode$(1, 3) = "Training Module"
'Mode$(1, 4) = "Last Real Case"
'Mode$(1, 5) = "Last Simulated Case"
'Mode$(1, 6) = "Instructions - HELP"
'Mode$(1, 7) = "Generate SF600"
'Mode$(1, 8) = "Exit Program"
'resplength% = 8

' New method for menu
NR% = 1
DATAHEADING$ = "Abdominal Pain Diagnosis Program" + VERSION$
menuheading$ = "Main Options"
HELPFILE$ = "HP12.DAT"

DO
' initialize StatWhichCase% for stat program.
StatWhichCase% = 0
CALL MenuEntryPage(NR%, resplength%, exitchar$, DATAHEADING$, menuheading$, Choices$(), HELPFILE$)

' Branch to Main Option Selected.
ON NR GOTO 32320, 32330, 32340, 32350, 32350, 32600, 32800, 32900
SELECT CASE NR%
CASE 1
  StatWhichCase% = 0
  32320 SIMULATE = 1
  GOSUB 60135
  GOTO 30
CASE 2
  ' Modify Real Case
  STFLAG = 0
  filnam$ = "REAL.DAT"
  SIMULATE = 1

  ' open case, get data
  modheading$ = "Modify Real Case"
  RealFileName$="REAL.DAT"
  CALL GetSF600Case(RealFileName$, modheading$, normalcolor%, backcolor%, whichcase%)
  IF whichcase% <> 0 THEN
    CALL GetCase(filnam$, whichcase%, VARIABLE%(), SSN$, AGE$, OTHER$, STARTIME$, STARTDATE$, HMDX%, SIMULATE%, sex$)
    StatWhichCase% = whichcase%
    ' set lookatfemale variable
    IF HMDX% > 7 THEN
      lookatfemale = 1
    END IF
  END IF
  GOTO 100
END IF

CASE 3
  ' Delete Real Case
  filnam$ = "REAL.DAT"
  SIMULATE = 1

  ' select case
  modheading$ = "Delete Real Case"
  RealFileName$="REAL.DAT"
  CALL GetSF600Case(RealFileName$, modheading$, normalcolor%, backcolor%, whichcase%)
IF whichcase% <> 0 THEN

CLS
LOCATE 10, 10, 1
PRINT "Are you sure you want to delete case # "; whichcase%;
"[Y/N];"
DO
CALL GetKey(a$)
LOOP UNTIL INSTR("YN", a$) <> 0
IF a$ = "Y" THEN

'get num of cases
delfilenum = FREEFILE
realfile$ = "REAL.DAT"
OPEN "R", #delfilenum, realfile$, 128
FIELD #delfilenum, 128 AS Lstring$
N% = LOF(1) / 128
IF N% > 1 THEN

'open new file temp.p.$$'
temfilenum = FREEFILE
tempfile$ = "TEMP.$$"
OPEN "R", #temfilenum, tempfile$, 128
FIELD #temfilenum, 128 AS temstring$

'copy up to delete case
FOR i = 1 TO whichcase% - 1
GET #delfilenum, i
LSET temstring$ = Lstring$
PUT #temfilenum, i
NEXT i

'copy cases after delete case
FOR i = whichcase% + 1 TO N%
GET #delfilenum, i
LSET temstring$ = Lstring$
PUT #temfilenum, i - 1
NEXT i

'close both files
CLOSE #temfilenum
CLOSE #delfilenum

'copy org real.dat to real.bak
bakfile$ = "REALABD.BAK"
IF Exists%(bakfile$) THEN

' For some bizarre reason, a file with length 0 exists.
'So, calling exists% will always create a file if not present.
END IF
KILL bakfile$
NAME realfile$ AS bakfile$
ren temp.p.$$ to real.dat
NAME tempfile$ AS realfile$
ELSE
'since only one case, kill it.
ABDXSTAT.BAS (cont’d)

CLOSE #delfilenum
KILL realfile$
END IF

END IF
GOTO 31000
END IF

CASE 4
'Exit Program.
32900    CLS
SCREEN 0, 1, 0, 0
CLS
END
CASE ELSE

END SELECT
' loop forever. Will break out of loop when needed.
LOOP UNTIL 1 - 2

50000 IF STFLAG <> 0 AND TRAINING = 0 THEN
CALL SelectDatabase(lookatfemale, VARIABLE())
END IF

This portion of the program calculates diagnostic probabilities.
REM Initial probabilities - DIV 10^25 to keep from getting an OVERFLOW ERROR.
50020 'DATA 1.8D-25,5.4D-25,0.3D-25,0.01D-25,0.5D-25,0.3D-25,1.6D-25.
PR0B#(1) = 1.8D-25
PR0B#(2) = 5.4D-25
PR0B#(3) = 3D-26
PR0B#(4) = 1D-27
PR0B#(5) = 5D-26
PR0B#(6) = 3D-26
PR0B#(7) = 1.6D-25

' need: PROB#(),TFLAG,TRAINING,VARIABLE(),THECASE%(),BAYES!(),exitcode
' have an exitcode and can remove several vars
(TFLAG,TFLAGCASE,NUMCOUNT

SCREEN 0, 1, 0, 0: CLS
NUMCOUNT = 0
REM All the checks for enough DATA entered can go here.
REM Probabilities computed here
TFLAG = 0: TFLAGCASE = 0: TFLAGIF = 0

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FOR i = 1 TO 152
IF TRAINING = 1 THEN
  IF THECASE%(i) = 1 THEN
    TFLAGCASE = TFLAGCASE + 1
    IF VARIABLE%(i) = THECASE%(i) THEN
      TFLAGIF = TFLAGIF + 1
    END IF
  END IF
  IF VARIABLE%(i) = THECASE%(i) THEN
    TFLAG = TFLAG + 1
  END IF
ENDIF
IF VARIABLE%(i) = 1 THEN
  NUMCOUNT = NUMCOUNT + 1
  FOR j = 1 TO 7
    PROB#(j) = PROB#(j) * BAYES!(i, j)
  NEXT j
END IF
NEXT i

51025 IF TRAINING = 1 THEN
  IF TFLAGIF > .75 * TFLAGCASE THEN
    GOTO 51040
  ELSE
    GOTO 51036
  END IF
END IF

'NOTE NOTE !!!!!!!!!!!!! the next line is just for Ellen’s version for entering data.
' IF davidflag% = 1 THEN GOTO 51040
GOTO 51040

IF NUMCOUNT > 32 THEN 51040
PRINT "Insufficient DATA has been entered for accurate diagnosis."
PRINT "Please enter more DATA."
GOTO 51038
51036 PRINT "You have missed too many items. Are you sure you have the right case?"
51038 LOCATE 25, 15
CALL SetColor(infocolor)
PRINT " To return to main menu, press any key";
CALL SetColor(infocolor)
CALL GetKey(a$)
GOTO 100

Calculate final probabilities here (FINPROB). Determine the disease (MAXNUM) with the greatest probability (MAXPROB).
CALL ComputeFinalProbs(MAXNUM%, MAXPROB%, PROB#(), FINPROB#())

FINPROB#(2) = FINPROB#(2) + FINPROB#(7)
IF MAXNUM = 7 THEN MAXNUM = 2
IF FINPROB#(2) > MAXPROB THEN MAXNUM = 2
IF MAXNUM = 2 THEN MAXPROB = FINPROB#(2)
MALEMAXNUM% = MAXNUM

'compute GYN probabilities.
'skip all of the stuff about training checks and number of
'questions
'REM Initial probabilities - DIV 10^25 to keep from getting an
'OVERTFLOO ERROR.
'FOR NOW, BOGUS PROBABILITIES.
FEMPROB#(1) = 1.8D-25
FEMPROB#(2) = 5.4D-25
FEMPROB#(3) = 3D-26
FEMPROB#(4) = 1D-27
FEMPROB#(5) = 5D-26
FEMPROB#(6) = 3D-26
FEMPROB#(7) = 1.6D-25

IF sex$ = FEMALE$ THEN
FOR i = 1 TO 174
  IF VARIABLE(i) = 1 THEN
    FOR j = 1 TO 7
      IF FEMBAYES!(i, j) <> 0 THEN
        FEMPROB#(j) = FEMPROB#(j) * FEMBAYES!(i, j)
      END IF
    NEXT j
  END IF
NEXT i
END IF

CALL ComputeFinalProbs(FEMMAXNUM%, FEMMAXPROB%, FEMPROB#(),
FEMFINPROB#())
FEMMAXNUM% = FEMMAXNUM% + 7
END IF

REPE PAGE 0 -- HM EVALUATION
'Skip this page if the case is not new or if no response
'changes have been made.
'stat change. Always come thru HM dx page.
'IF STFLAG = 0 THEN 52000

'How about here is where the HM is asked re which database to use.
'if female and appropriate responses marked, then
' ask which database to use.
'On this page, can list all of the disease considered.
'Will then need to move agree/disagree part to next screen.
'Can have toggle on diagnostic summary page to switch back and
forth
'between abd and gyn databases.

IF lookatfemale = 0 THEN
Choices$(1, 1) = "APPENDICITIS"
Choices$(1, 2) = "NON-SPECIFIC ABDOMINAL PAIN"
Choices$(1, 3) = "RENAL COLIC"
Choices$(1, 4) = "PERFORATED DUODENAL ULCER"
Choices$(1, 5) = "CHOLECYSTITIS"
Choices$(1, 6) = "SMALL BOWEL OBSTRUCTION"
Choices$(1, 7) = "OTHER"
resplength% = 7
menuheading$ = "Your Diagnosis"
ELSE
Choices$(1, 1) = "APPENDICITIS" 'dx # 8
Choices$(1, 2) = "NON-SPECIFIC ABDOMINAL PAIN" 'dx # 9
Choices$(1, 3) = "PELVIC INFLAMMATORY DISEASE" 'dx # 10
Choices$(1, 4) = "URINARY TRACT INFECTION" 'dx # 11
Choices$(1, 5) = "OVARIAN CYST" 'dx # 12
Choices$(1, 6) = "ECTOPIC PREGNANCY" 'dx # 13
Choices$(1, 7) = "INCOMPLETE ABORTION" 'dx # 14
Choices$(1, 8) = "OTHER" 'dx # 15
resplength% = 8
menuheading$ = "Your Gynecological Diagnosis"
END IF

' New method for menu
-------------------stat routine begins-------------------

IF HMDX > 7 THEN
NR% = HMDX - 7
ELSEIF HMDX = 0 THEN
NR% = 1
ELSE
NR% = HMDX
END IF

-------------------stat routine ends-------------------

DATAHEADING$ = "Corpsman's Diagnosis Entry Page"
HELPFILE$ = "HP00.DAT"

CALL MenuEntryPage(NR%, resplength%, exitchar$, DATAHEADING$, menuheading$, Choices$(), HELPFILE$)

' Store Corpsman's Diagnosis variable HMDX (# of the
' Diagnosis) and HMDX$ (name of the diagnosis).
IF lookatfemale = 0 THEN
HMDX = NR
ELSE
HMDX = NR + 7
END IF

IF HMDX = 7 OR HMDX = 15 THEN
' stat change
51250 ' DO
LOCATE 16, 1
PRINT "HM's OTHER diagnosis: "; OTHER$
LOCATE 17, 1: PRINT SPACE$(75);
LOCATE 17, 1
PRINT "Enter name of other diagnosis (CR if no change): ";
LINE INPUT tempOTHER$
IF tempOTHER$ <> "" THEN
   OTHER$ = tempOTHER$
END IF
' LOOP UNTIL OTHER$ <> ""
LOCATE 19, 10
PRINT "This database does not consider "; OTHER$;
LOCATE 20, 10
PRINT "in the differential diagnosis of acute abdominal pain."
CALL TextDxPause
GOTO 52000
END IF

' stat line
GOTO 52000

51350 IF Translate%(HMDX) = MAXNUM THEN
LOCATE 16, 1
PRINT " The program-generated probabilities AGREE with your
provisional";
LOCATE 17, 1: PRINT "diagnosis."
CALL TextDxPause
GOTO 52000
END IF

' Put all of this on another page.

' Check for questions to recheck if original database selected.
IF lookatfemale = 0 THEN
CALL CompareAbdDXes(COMPAR%(), VARIABLE%(), MAXNUM%, HMDX%, QUESTPTR%(),
QUESTIONS$())
ELSE
CALL CompareFemDXes(HMDX%, MAXNUM%)
END IF

52000 REM PAGE 14 -- Diagnostic Summary Page
52080 CALL SetScreenMode(ScrnMode)
LOCATE 1, 18: headingPRINT ("Diagnostic Summary Page")
LOCATE 1, 59: PRINT "SSN: "; SSN$;
LOCATE 2, 59: PRINT "Time: "; STARTIME$;
LOCATE 3, 59: PRINT "Date: "; STARTDATE$;
IF TRAINING - 1 THEN
LOCATE 5, 59: PRINT "Score:"; INT((TFLAG / 152) * 100); "; ";
IF TFLAG = 152 THEN PRINT "!!!";
SELECT CASE HMDX
CASE 1
HMChosenDX$ = "APPEND"
CASE 2
HMChosenDX$ = "NONSAP"
CASE 3
HMChosenDX$ = "RENCOL"
CASE 4
HMChosenDX$ = "PERFDU"
CASE 5
HMChosenDX$ = "CHOLE"
CASE 6
HMChosenDX$ = "SMBOBS"
CASE ELSE
HMChosenDX$ = OTHER$
END SELECT
LOCATE 6, 59: PRINT "HM dx: "; HMChosenDX$;
LOCATE 17, 64: PRINT "#"; CASENUM;
ELSE
LOCATE 17, 59
IF SIMULATE - 0 THEN
PRINT "SIMULATED CASE";
ELSE
PRINT "REAL CASE";
END IF
END IF
LOCATE 20, 59: PRINT BOAT1$;
LOCATE 21, 59: PRINT BOAT2$;
IF Vertbits = 14 THEN
WINDOW SCREEN (0, 0)-(639, 199)
END IF
ABDXSTAT.BAS (cont'd)

IF sex$ = FEMALE AND lookatfemale = 1 THEN
MAXNUM = FEMMAXNUM
CALL FemaleGraph(FEMFINPROB#())
ELSE
MAXNUM = MALEMAXNUM
CALL MaleGraph(FINPROB#())
END IF

LINE (0, 150)-(449, 150), hpframecolor
LINE (0, 28)-(449, 28), hpframecolor, , &HFOOF
LINE (0, 82)-(449, 82), hpframecolor, , &HFOOF

IF TRAINING = 0 THEN
resplength% = 5
HELPFILE$ = "HP10.DAT"
Choices$(l, 1) = "CHANGE INPUT DATA"
Choices$(l, 2) = "ANOTHER DIAGNOSIS"
Choices$(l, 3) = "DISPLAY TREATMENT"
Choices$(l, 4) = "DISPLAY H & P"
Choices$(l, 5) = "END INTERACTION"
IF sex$ = FEMALE$ THEN
resplength% = resplength% + 1
IF lookatfemale = 1 THEN
Choices$(l, resplength%) = "DISPLAY ABD DX'ES"
ELSE
Choices$(l, resplength%) = "DISPLAY GYN DX'ES"
END IF
END IF
ELSE
resplength% = 6
HELPFILE$ = "HPT10.DAT"
Choices$(l, 1) = "CHANGE INPUT DATA"
Choices$(l, 2) = "ANOTHER CASE"
Choices$(l, 3) = "DISPLAY TREATMENT"
Choices$(l, 4) = "DISPLAY H & P"
Choices$(l, 5) = "END INTERACTION"
Choices$(l, 6) = "SHOW MISSED ITEMS"
END IF

NR% = 1
menuheading$ = "Options"

DO
CALL MenuSummaryPage(10, 59, NR%, resplength%, exitchar$, menuheading$, Choices$(), HELPFILE$)
' Help text is written in text mode. Have to redraw whole screen.
IF exitchar$ = "?" THEN EXIT DO

' for testing only
IF davidflag$ = 1 THEN
    LOCATE 1, 1
    PRINT USING "###### ###### ######"; FRE(0), FRE(""), FRE(-1)
END IF

'52440 ON NR GOTO 52450, 52501, 54000, 53000, 52500, 55000
SELECT CASE NR%
CASE 1
    ' Change Input Data
    ' save it only if real case and changes have been made
    IF (TRAINING = 0 AND STFLAG = 1 AND SIMULATE = 1) THEN
        filnam$ = "REAL.DAT"
        StatWhichCase% = whichcase%
        CALL PutCase(whichcase%, VARIABLE$(), SSN$, AGE$, OTHER?, STARTIME$, STARTDATE$, HMDX%, SIMULATE%, MAXNUM%, MAXPROB%)
    STFLAG = 0
    END IF
GOTO 100

CASE 2
    ' Another Dx/Case
    IF TRAINING = 0 AND STFLAG = 1 THEN
        ' Save both real and simulated cases,
        ' if not training, and changes were made.
        StatWhichCase% = whichcase%
        CALL PutCase(whichcase%, VARIABLE$(), SSN$, AGE$, OTHER$, STARTIME$, STARTDATE$, HMDX%, SIMULATE%, MAXNUM%, MAXPROB%)
    END IF
    CALL ResetVariables(VARIABLE$(), sex$, SSN$, AGE$, STARTIME$,
    STARTDATE$)
    STFLAG = 0
    lookatfemale = 0     'may not be necessary
GOTO 31000

CASE 3
    ' Display Treatment
    ' User selects option to Display Treatment Protocol.
    CALL TXMenu(MAXNUM, sex$)
    CLS
GOTO 52000

CASE 4
    ' Display H&P
    CALL DisplayHP(TRAINING, SIMULATE, SSN$, STARTIME$, STARTDATE$, VARIABLE$())
GOTO 52000
CASE 5
   ' End
   IF TRAINING = 0 AND STFLAG = 1 THEN
      ' save main real or simulated cases if changes made.
      CALL PutCase(StatWhichCase%, VARIABLE%(), SSN$, AGE$, OTHER$, STARTIME$, STARTDATE$, HMDX%, SIMULATE%, MAXNUM%, MAXPROB%)
   END IF
   SCREEN 0, 1, 0, 0
   CLS
   END

CASE 6
   ' Show Missed Items
   IF TRAINING = 1 THEN
      CALL DisplayMissedHP(SSN$, STARTIME$, STARTDATE$, VARIABLE%(), THECASE%0)
      GOTO 52000
   ELSE
      ' Should only get here with real case if female
      IF lookatfemale = 1 THEN
         CALL MaleGraph(FINPROB*())
         Choices$(1, resplength%) = "DISPLAY GYN DX'ES"
         MAXNUM = MALEMAXNUM
         lookatfemale = 0
      ELSE
         CALL FemaleGraph(FEMFINPROB*())
         Choices$(1, resplength%) = "DISPLAY ABD DX'ES"
         MAXNUM = FEMMAXNUM
         lookatfemale = 1
      END IF
   END IF
   END IF
CASE ELSE
   END SELECT
   LOOP UNTIL NR% <> 6 AND sex$ <> FEMALE$
   GOTO 52000

60000 REM READ IN BAYESIAN DATA
   CALL UnPackDatabase("REGABD.DAT", BAYES!(), 7, 152)
   CALL UnPackDatabase("FEMABD.DAT", FEMBAYES!(), 7, 174)
   RESTORE 60300
   FOR i = 1 TO 44: READ QUESTIONS$(i): NEXT i
   RESTORE 60410
   FOR i = 1 TO 44: READ QUESTP$R%(i): NEXT i
   RESTORE 60500
   FOR i = 1 TO 6
      FOR j = 1 TO 6
         IF i <> j THEN
            FOR N = 1 TO 15
               READ COMPAR%(i, j, N)
IF COMPAR%(i, j, N) < 1 THEN EXIT FOR
NEXT N
END IF
NEXT j
NEXT i

' VARIABLE(I) = 0 when the response has not been entered
' and VARIABLE(I) = 1 when the response has been entered.

60135 CALL ResetVariables(VARIABLE%(), sex$, SSN$, AGE$, STARTIME$, STARTDATE$)
RETURN

' QUESTIONS$( )
60300 DATA SITE OF PAIN(onset), SITE OF PAIN(now)
DATA TYPE OF PAIN, SEVERITY OF PAIN, AGGRAVATING FACTORS
DATA PROGRESS OF PAIN, DURATION OF PAIN, RELIEVING FACTORS
DATA NAUSEA, VOMITING, BOWELS, APPETITE, JAUNDICE, URINATION
DATA PREVIOUS INDIGESTION, PREVIOUS SIMILAR PAIN, PREVIOUS SURGERY
DATA PREVIOUS ILLNESS, TAKING MEDICATIONS
DATA "TEMPERATURE (F):", "PULSE RATE:", "BP (Systolic):", "BP (Diastolic):"
DATA "MOOD:", "COLOR:", "WBC COUNT:"
DATA "INSPECTION:", "SCARS:", "GUARDING:", "RIGIDITY:", "BOWEL SOUNDS:"
DATA "DISTENTION:", "MASSES:"
DATA TENDERNESS, MURPHY'S SIGN:, REBOUND TENDERNESS, RECTAL EXAM
DATA "VAGINAL EXAMINATION"
DATA PERIODS, "LAST PERIOD", "VAGINAL DISCHARGE", PREGNANCY
DATA "FAINT/DIZZY", "PREV HISTORY"

' QUESTPTR%( )
60410 DATA 13, 13, 3, 2, 6, 3, 4, 6, 2, 2, 5, 2, 2, 5, 2, 2, 2, 2, 2, 4, 3, 3, 3
DATA 3, 5, 3, 2, 2, 3, 2, 13, 2, 2, 5, 7, 4, 2, 2, 2, 3, 2, 2

' COMPAR%( )
60500 DATA 13, 19, 26, 32, 38, 42, 43, 50, 70, 107, 120, 133, 146, 151, 0
DATA 26, 38, 40, 42, 43, 74, 107, 120, 133, 146, 151, 0
DATA 19, 26, 40, 102, 107, 115, 133, 151, 0
DATA 26, 40, 42, 43, 107, 133, 145, 146, 151, 0
DATA 26, 38, 40, 42, 43, 65, 102, 107, 120, 133, 146, 151, 0
DATA 37, 47, 71, 105, 121, 147, 148, 0
DATA 40, 74, 0
DATA 37, 40, 48, 102, 105, 115, 148, 0
DATA 37, 40, 65, 145, 133, 0
DATA 48, 65, 102, 0
DATA 21, 22, 34, 35, 39, 41, 47, 75, 76, 105, 106, 107, 141, 142, 147
DATA 15, 19, 20, 28, 41, 79, 100, 121, 135, 147, 148, 0
DATA 21, 22, 34, 35, 39, 75, 76, 102, 105, 115, 128, 0
DATA 21, 22, 34, 35, 75, 76, 141, 142, 145, 0
DATA 21, 22, 34, 35, 41, 65, 75, 76, 128, 140, 0
DATA 11, 15, 24, 28, 41, 82, 106, 131, 144, 148, 0
DATA 32,33,39,41,47,66,83,103,106,121,127,140,147,148,0
DATA 21,22,34,35,41,75,76,141,142,0
DATA 15,20,28,33,42,55,103,106,117,140,145,0
DATA 15,20,28,33,41,65,117,0
DATA 15,20,28,33,38,0
DATA 11,24,38,41,63,66,79,120,131,144,0
DATA 19,32,39,49,66,83,103,106,127,139,0
DATA 15,20,28,39,74,104,135,0
DATA 11,24,38,107,131,144,0
DATA 11,15,24,28,74,81,120,131,144,0
DATA 19,32,105,115,135,148,0
DATA 11,24,102,105,115,131,144,0
DATA 19,32,39,66,80,83,103,127,140,0
DATA 19,32,39,83,103,127,140,145,0

REM $STATIC
SUB CompareFemDXes (HMDX%, MAXNUM%)
   ' This routine displays the Best Questions to Ask if the HM's
diagnosis differs from the computer's (GYN database only).
   ' See CompareAbdDXes for abd database.

   CLS
   TheHMDX - HMDX - 7
   row - 10
   col - 10

   filnam$ - "bestques.dat"
   IF NOT Exists%(filnam$) THEN
      EXIT SUB
   END IF

   ' draw window here.
   IF TheHMDX = MAXNUM THEN
      'the dx'es agree. already commented on in ABDX.BAS
   ELSEIF TheHMDX = 8 THEN
      'other dx not considered. already commented on in ABDX.BAS
   ELSE
      'create a number such that the smaller of TheHMDX or MAXNUM is in
      'the tens' position and the other is in the unit's position.
      IF TheHMDX < MAXNUM THEN
         combinednumber = TheHMDX * 10 + MAXNUM
      ELSE
         combinednumber = MAXNUM * 10 + TheHMDX
      END IF

      filenum = FREEFILE
OPEN filnam$ FOR INPUT AS filenum

foundflag = 0
stringnumber = 0
DO WHILE stringnumber < combinednumber
LINE INPUT #filenum, quest$
'decrypt string
CALL decipher(quest$)
stringnumber = VAL(LEFT$(quest$, 2))
LOOP
IF stringnumber = combinednumber THEN
numofquests = VAL(MID$(quest$, 4, 2))
questlength = VAL(MID$(quest$, 7, 2))
col = (80 - questlength) \ 2
foundflag = 1
LOCATE 3, 5: PRINT " At this time the computer-generated probabilities DO NOT AGREE with";
LOCATE 4, 5: PRINT "your preliminary diagnosis. The following categories are particularly";
LOCATE 5, 5: PRINT "useful in differentiating your diagnosis from the others. It may be";
LOCATE 6, 5: PRINT "helpful to review your input in these areas and make any changes you";
LOCATE 7, 5: PRINT "consider appropriate.";
DATAHEADINGS$ = "Best Questions to Ask"
CALL LocateCenter(l, DATAHEADINGS$)
CALL headingPRINT(DATAHEADINGS$)

CALL frame(row , col - 1, numofquests, questlength, frametyp)
CALL BoxSelections(row, col - 1, numofquests, questlength)

FOR i = 1 TO numofquests
LINE INPUT #filenum, quest$
'decrypt string
CALL decipher(quest$)
LOCATE row, col
PRINT quest$
row = row + 1
NEXT i
END IF
CLOSE #filenum
IF foundflag = 0 THEN
LOCATE row, col
PRINT " At this time, the computer-generated probabilities DO NOT AGREE with";
PRINT "your preliminary diagnosis. However, in this case, there are no";

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PRINT "specific questions to ask which would differentiate your preliminary";
PRINT "diagnosis from the current program-generated diagnosis."

END IF
CALL TextPause
END IF
END SUB

SUB experimental
' This sub states that the program is experimental and is not for distribution.
CLS
LOCATE 10, 10
PRINT "This program is EXPERIMENTAL and is not for distribution."
CALL TextPause
END SUB

SUB GetCase (filnam$, whichcase%, VARIABLE%(), SSN$, AGE$, OTHER$, STARTTIM$, STARTDATE$, HMDX$, SIMULATE%, sex$)
' This routine opens the .DAT file filnam$ and retrieves the appropriate case 'whichcase'.
' NOTE: if whichcase = 0 then the case retrieved is the last stored case.
' If it is returned as 0, then file did not exist.

' Globals
' - MALE$ (constant in include file )
' - FEMALE$ (constant in include file )

OPEN filnam$ FOR RANDOM AS #1 LEN - 128
' File format for variables.
FIELD #1, 11 AS LSSN$, 2 AS LAGE$, 26 AS LVAR$, 40 AS LOTH$, 5 AS LTIM$, 10 AS LDAT$, 2 AS LHMD$, 2 AS LSIM$, 2 AS LNUM$, 2 AS LPRO$
' If no previous case has been entered, beep, close the file and request more user input.
N% - LOF(1) / 128
IF N% = 0 THEN
    SOUND 150, 4
    LOCATE 15, 10
    PRINT "No previous case stored.";
    CLOSE #1
    whichcase% - 0
    EXIT SUB
END IF
IF whichcase% = 0 OR whichcase% > N% THEN
    whichcase% - N%
END IF

' Get a record from the file.
GET #1, whichcase$

' Put case data into variables.
STARTIME$ - LTIM$: STARTDATE$ - LDAT$
HMDX - CVI(LHMD$): SIMULATE - CVI(LSIM$)

' Close the file.
CLOSE #1
' unpack data in a$ into VARIABLE%()
CALL UnPackArray(a$, VARIABLE%())
' update sex
IF VARIABLE%(2) = 1 THEN
sex$ = FEMALE$
ELSE
sex$ = MALE$
END IF

END SUB

REM $DYNAMIC
SUB InitializeColors (graphmode$, monmode$)

'GLOBAL - GRAPHICS, ScrnMode, forecolor, backcolor, infocolor
'GLOBAL - textcolor, questioncolor, responsecolor, hpresponsecolor
'GLOBAL - graphcolor, helpcolor, hpframecolor, bargraph()
'GLOBAL - red,green, brown, white, black, yellow
'GLOBAL - ltrd, lttred, ltmagenta, ltbodylue

SHARED mainheadingcolor, mainframecolor, mainframe
SHARED trainingheadingcolor, trainingframecolor, trainingframe

' Set up graphics mode default (checked for CGA or EGA in graphmode$)
IF graphmode$ = "C" THEN
GRAPHICS = 2
ScrnMode = 2
IF monmode$ = "C" THEN
' CGA and color monitor
mainheadingcolor = red
mainframecolor = green
mainframe = 1           'select single frame for default pages.
trainingheadingcolor = brown
trainingframecolor = 1
trainingframe = 2       'select double frame for training pages.

forecolor - white
backcolor - black
textcolor - white
questioncolor - yellow
responsecolor - white
hpresponsecolor - white
hpframecolor - 1
infocolor - green
graphcolor - white
helpcolor - white
bargraph(1) = 1
bargraph(2) = 1
bargraph(3) = 1
bargraph(4) = 1
bargraph(5) = 1
bargraph(6) = 1
bargraph(7) = 1
ELSE
'  CGA, but no color monitor
mainheadingcolor - white
mainframecolor - white
mainframe = 1
  'select single frame for default pages.
trainingheadingcolor - white
trainingframecolor - white
trainingframe = 2
  'select double frame for training
pages.
forecolor - white
backcolor - black
textcolor - white
questioncolor - white
responsecolor - white
hpresponsecolor - white
hpframecolor - 1
infocolor - white
graphcolor - white
helpcolor - white
bargraph(1) = 1
bargraph(2) = 1
bargraph(3) = 1
bargraph(4) = 1
bargraph(5) = 1
bargraph(6) = 1
bargraph(7) = 1
END IF
ELSE
GRAPHICS = 9
ScrnMode = 9
IF monmode$ = "C" THEN
  '  EGA and color monitor
mainheadingcolor = red
mainframecolor = green
mainframe = 1  'select single frame for default pages.
trainingheadingcolor = brown
trainingframecolor = brown
trainingframe = 2  'select double frame for training
pages.
forecolor = white
backcolor = black
textcolor = white
questioncolor = yellow
responsecolor = white
hpresponsecolor = white
hpframecolor = blue
infocolor = green
graphcolor = white
helpcolor = white
bargraph(1) = ltred
bargraph(2) = ltmagenta
bargraph(3) = ltcyan
bargraph(4) = lttgreen
bargraph(5) = ltbblue
bargraph(6) = yellow
bargraph(7) = red
ELSE
'  EGA, but no color monitor
mainheadingcolor = white
mainframecolor = white
mainframe = 1  'select single frame for default pages.
trainingheadingcolor = white
trainingframecolor = white
trainingframe = 2  'select double frame for training
pages.
forecolor = white
backcolor = black
textcolor = white
questioncolor = white
responsecolor = white
hpresponsecolor = white
hpframecolor = white
infocolor = white
graphcolor = white
helpcolor = white
bargraph(1) = white
bargraph(2) = white
bargraph(3) = white
bargraph(4) = white
bargraph(5) = white
bargraph(6) = white
bargraph(7) = white
bargraph(7) - white
END IF
END IF

END SUB

REM $STATIC
SUB PutCase (whichcase%, VARIABLE%(), SSN$, AGE$, OTHER$, STARTIME$,
STARTDATES, HMDX%, SIMULATE%, MAXNUM%, MAXPROB%)
' This routine opens the .DAT file based on SIMULATE and saves the
' appropriate case in record 'whichcase'.
' NOTE: if whichcase = 0 then the case is appended to the
' stored cases.

IF SIMULATE = 0 THEN
filnam$ = "SIMUL.DAT"
ELSE
filnam$ = "REAL.DAT"
END IF

OPEN filnam$ FOR RANDOM AS #1 LEN = 128
' File format for variables.
FIELD #1, 11 AS LSSN$, 2 AS LAGE$, 26 AS LVAR$, 40 AS LOTH$, 5 AS
LTIM$, 10 AS LDAT$, 2 AS LHMD$, 2 AS LSIM$, 2 AS LNUM$, 2 AS
LPRO$
N% = LOF(l) / 128
' If 0, then append case to end of stored cases.
IF whichcase% = 0 THEN
   whichcase% = N% + 1
END IF

CALL PackArray(a$, VARIABLE%())

' Left justifies the variables in the field and moves the
' DATA into a random buffer file.
LSET LSSN$ = SSN$: LSET LAGE$ = AGE$: LSET LVAR$ = a$
LSET LOTH$ = OTHER$: LSET LTIM$ = STARTIME$
LSET LDAT$ = STARTDATE$: LSET LHMD$ = MKI$(HMDX)
LSET LSIM$ = MKI$(SIMULATE): LSET LNUM$ = MKI$(MAXNUM)
LSET LPRO$ = MKI$(MAXPROB)

' Save the record.
PUT #1, whichcase%

CLOSE #1

END SUB
SUB SelectDatabase (lookatfemale, VARIABLE())

'Check if female and ask which database if appropriate responses have been entered.

'GLOBAL - frametype
    - FEMALE$ (constant in include file)

SHARED sex$

DIM checkvarlocation(6), Choices$(1, 2)

lookatfemale = 0 'ABD database as a default for females not meeting criteria and all males.

IF sex$ = FEMALE$ THEN

    checkvarlocation(1) = 32 ' Site of Pain at present - CENTRAL
    checkvarlocation(2) = 29 ' Site of Pain at present - LOWER
    checkvarlocation(3) = 26 ' Site of Pain at present - RLQ
    checkvarlocation(4) = 27 ' Site of Pain at present - LLQ
    checkvarlocation(5) = 34 ' Site of Pain at present - R FLANK
    checkvarlocation(6) = 35 ' Site of Pain at present - L FLANK
    CriteriaMet = 0

    FOR i = 1 TO 6
        IF VARIABLE(checkvarlocation(i)) = 1 THEN
            CriteriaMet = 1
            EXIT FOR
        END IF
    NEXT i

    CALL frame(7, 9, 3, 60, frametyp)
    LOCATE 8, 10
    PRINT "Remember the gynaecological database is available and is":
    LOCATE 9, 10
    PRINT "especially suitable for this patient. It compares your case":
    LOCATE 10, 10
    PRINT "with 1,000 similar previous patients.");
    CALL TextContinuePrompt
    CALL GetKey(a$)
    menuheading$ = "Select Database"
    Choices$(1, 1) = "General Abdominal Database"
    Choices$(1, 2) = "Gynaecological Database"
    HELPFILE$ = "Habgy.dat"
    menurow = 16
    menucol = Centered(Choices$(1, 1))
    NR% = 2
resplength% = 2
LOCATE 25, 5
PRINT SPACE$(70);
DO
    CALL MenuSummaryPage(menurow, menucol, NR%, resplength%, exitchar$,
                            menuheading$, Choices$(), HELPFILE$)
LOOP UNTIL exitchar$ = ""
PRINT "Choose desired database"
IF NR% = 1 THEN
    lookatfemale = 0
ELSE
    lookatfemale = 1
END IF
ELSE
    'female, but abd database looks better.
    CALL frame(9, 9, 4, 60, framtyp)
    LOCATE 10, 10
    PRINT "At this time, your patient appears to have";
    LOCATE 11, 10
    PRINT "non-gynecological abdominal pain. However, the";
    LOCATE 12, 10
    PRINT "gynecological database is available as an option";
    LOCATE 13, 10
    PRINT "on the Diagnostic Summary Page."
    CALL TextContinuePrompt
    CALL GetKey(a$)
END IF
END IF
ERASE checkvarlocation, Choices$

END SUB

REM $DYNAMIC
SUB SetTrainingColors (TRAINING)
'  This routine sets the different display colors between training
' and other displays.
'  Global vars - headingcolor, framecolor, frametype

SHARED mainheadingcolor%, mainframecolor%, mainframe%
SHARED trainingheadingcolor%, trainingframecolor%, trainingframe%

IF TRAINING = 0 THEN
    headingcolor% = mainheadingcolor
    framecolor% = mainframecolor
    frametype = mainframe
ELSE

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headingcolor% = trainingheadingcolor
framecolor% = trainingframecolor
frametype = trainingframe
END IF

END SUB

REM $STATIC
SUB STATSexSSNAgeDate (STFLAG, TRAINING, SIMULATE, sex$, SSN$, AGE$, STARTDATE$, STARTIME$, VARIABLE%())
This routine allows input for sex, ssn, age, date, and time.

' init sex
IF VARIABLE(1) = 1 THEN
sex$ = "M"
ELSEIF VARIABLE(2) = 1 THEN
sex$ = "F"
ELSE
sex$ = "_"
END IF

' init time and date
IF STARTIME$ = "" THEN STARTIME$ = LEFT$(TIME$, 5)
IF STARTDATE$ = "" THEN STARTDATE$ = DATE$

tempsex$ = sex$
tempssn$ = SSN$
tempage$ = AGE$
tempdate$ = STARTDATE$
temptime$ = STARTIME$
SCREEN 0, 1, 0, 0
CLS

blankstring$ = " _"
pointtoinput = 0
finishpage = 0
mainrow = 6
maincol = 26
errorcode = 0

SexPageHeading1$ = "Sex / SSN / Age / Date / Time"
SexPageHeading2$ = "Data Entry Page"
SexHeading$ = "Patient's Sex [ ]"
SSNHeading$ = "Patient's SSN [ ]"
AgeHeading$ = "Patient's age [ ]"
DateHeading$ = "Date of exam [ ]"
TimeHeading$ = "Time of exam [ ]"
ABDXSTAT.BAS (cont'd)

Sexhelp$ = "Enter 'M' for male or 'F' for female. This must be answered."
Agehelp$ = "Enter the age of the patient (between 0 and 99)."
sexerror$ = "Only M or F accepted."
ssnerror$ = "Only numbers accepted for the SSN."
ageerror$ = "Invalid age. Must be between 0 and 99, inclusive."
dateerror$ = "Invalid date. Use format MM-DD-YYYY"
timeerror$ = "Invalid time. Use 24 hour format."

IF TRAINING = 1 OR SIMULATE = 0 THEN
    Modify helpstrings if either in training mode or simulated mode.
    I know that SIMULATE should equal 1 for consistency, but it doesn't.
    SSNhelp$ = "A Social Security number has been chosen for you. There is no need to change it. With a REAL case, you would enter the patient's SSN here."
    Datehelp$ = "Today's date has been chosen for you. There is no need to change it. With a real CASE, you would enter the date of the exam here."
    Timehelp$ = "The current time has been chosen for you. There is no need to change it. With a real CASE, you would enter the time of the exam here."
ELSE
    SSNhelp$ = "Enter the Social Security Number. The hyphens will be added automatically. A numeric SSN must be present to continue."
    Datehelp$ = "The current date has been chosen. If this is incorrect, change it."
    Timehelp$ = "The current time has been chosen. If this is incorrect, change it."
END IF

'page heading
CALL LocateCenter(2, SexPageHeading1$)
headingPRINT (SexPageHeading1$)
CALL LocateCenter(3, SexPageHeading2$)
headingPRINT (SexPageHeading2$)

'frame data
CALL SetFrameColor
framtyp = frametype
CALL frame(mainrow - 1, maincol - 2, 9, 28, framtyp)
CALL SetNormalColor

'initially show question
LOCATE mainrow, maincol
questionPRINT (SexHeading$)
LOCATE mainrow + 2, maincol
questionPRINT (SSNHeading$)
LOCATE mainrow + 4, maincol
questionPRINT (AgeHeading$)
LOCATE mainrow + 6, maincol
questionPRINT (DateHeading$)
LOCATE mainrow + 8, maincol
questionPRINT (TimeHeading$)

LOCATE mainrow, maincol + 15
PRINT sex$;
LOCATE mainrow + 2, maincol + 15
PRINT SSN$;
LOCATE mainrow + 4, maincol + 15
PRINT AGE$;
LOCATE mainrow + 6, maincol + 15
PRINT STARTDATE$;
LOCATE mainrow + 8, maincol + 15
PRINT STARTIME$;

' finishpage = 0 cycle thru for more input
' finishpage = 1 exit sex/ssn/etc page

DO
  SELECT CASE pointtoinput
    CASE 0
      'male/female stuff
      LOCATE mainrow, maincol + 15
      CALL templatehelp(Sexhelp$, tempsex$, ", blankstring$, re, sexerror$, 
        errorcode)
        rc = 0 CR
        1 Esc
        2 up arrow
        3 down arrow
      IF rc = 1 THEN
        finishpage = 1
      ELSEIF rc = 0 OR rc = 3 THEN
        pointtoinput = 1
      END IF
    END CASE
    CASE 1
      'ssn stuff
      LOCATE mainrow + 2, maincol + 15
      CALL templatehelp(SSNhelp$, tempssn$, ", blankstring$, re, ssnerror$, 
        errorcode)
      IF rc = 1 THEN
        finishpage = 1
      ELSEIF rc = 0 OR rc = 3 THEN
        pointtoinput = 2
      ELSEIF rc = 2 THEN
        pointtoinput = 0
END IF

CASE 2
'age stuff
LOCATE mainrow + 4, maincol + 15
CALL templatehelp(Agehelp$, tempage$, "##", blankstring$, rc, ageerror$, errorcode)
IF rc = 1 THEN
  finishpage = 1
ELSEIF rc = 0 OR rc = 3 THEN
  pointtoinput = 3
ELSEIF rc = 2 THEN
  pointtoinput = 1
END IF
'Check for valid age >= 1 and <= 99
valage = VAL(tempage$)
IF valage < 0 OR valage > 99 THEN
  SOUND 900, 1
  finishpage = 0
  pointtoinput = 2
  errorcode = 1
END IF

CASE 3
'date stuff
LOCATE mainrow + 6, maincol + 15
CALL templatehelp(Datehelp$, tempdate$, "##-##-####", blankstring$, rc, dateerror$, errorcode)
IF rc = 1 THEN
  finishpage = 1
ELSEIF rc = 0 OR rc = 3 THEN
  pointtoinput = 4
ELSEIF rc = 2 THEN
  pointtoinput = 2
END IF
'Check for valid date
'skip this for stat program.
'IF NOT (ValidDate%(tempdate$)) THEN
  SOUND 900, 1
  finishpage = 0
  pointtoinput = 3
  errorcode = 1
'END IF

CASE 4
'time stuff
LOCATE mainrow + 8, maincol + 15
CALL templatehelp(Timehelp$, temptime$, "##:##", blankstring$, rc, timeerror$, errorcode)
ABDXSTAT.BAS (cont'd)

IF rc = 2 THEN
  pointtoinput = 3
ELSE
  finishpage = 1
END IF

' Check for valid time
' skip this for stat program.
' IF NOT validtime(temptime$) THEN
  SOUND 900, 1
  finishpage = 0
  pointtoinput = 4
  errorcode = 1
' ELSE
  Routine to check if all responses entered are OK
  IF rc <> 2 AND rc <> 1 THEN
    get confirmation
    CALL scrollup(17, 2, 23, 79, 0, backcolor)
    LOCATE 20, 26
    PRINT "Are These correct? (Y/N) [ ]";
    LOCATE 20, 52
    CALL GetUCResponse(ch$, "YN")
    ' if not OK then cycle back
    IF ch$ = "N" THEN
      finishpage = 0
      pointtoinput = 0
    END IF
  END IF
' END IF

CASE ELSE
' shouldn't get here.
finishpage = 1

END SELECT
LOOP UNTIL finishpage = 1

Since using temp values, don't need to change anything if Escape was pressed. Check for other than Escape

IF rc <> 1 THEN
  Check if any variables are different from original. If so, then
  do update STFLAG
  IF tempsex$ <> sex$ THEN
    STFLAG = 1
    sex$ = tempsex$
    IF tempsex$ = "M" THEN
      VARIABLE(1) = 1
    VARIABLE(2) = 0
    ELSE
      ' if not male, then by def, female.
VARIABLE(1) = 0
VARIABLE(2) = 1

END IF
   END IF
      IF tempssn$ <> SSN$ THEN
         STFLAG = 1
         SSN$ = tempssn$
      END IF
      IF tempage$ <> AGE$ THEN
         STFLAG = 1
         AGE$ = tempage$
         agevar = VAL(AGE$)
         IF agevar > 79 THEN agevar = 79
         agevar = INT(agevar / 10) + 3
         FOR i = 3 TO 10
            VARIABLE(i) = 0
         NEXT i
         VARIABLE(agevar) = 1
      END IF
      IF tempdate$ <> STARTDATE$ THEN
         STFLAG = 1
         STARTDATE$ = tempdate$
      END IF
      IF temptime$ <> STARTIME$ THEN
         STFLAG = 1
         STARTIME$ = temptime$
      END IF
   END IF

END SUB

FUNCTION Translate% (HMDX)
   'This routine translates the value of HMDX to a number between 1 and 7,
   'the gyn database, otherwise it returns unchanged.
   '      HMDX   the variable to modify
   '      lookatfemale   flag for female database selection.
   SHARED lookatfemale
   IF lookatfemale = 0 THEN
      tempval = HMDX
   ELSE
      tempval = HMDX - 7
   END IF
   Translate = tempval
END FUNCTION
SUB TXMenu (MAXNUM, sex$)

This routine displays the Treatment menu. Upon selection, the treatment is displayed.

SHARED VERSION$

DIM Choices$(l, 12)

30004 REM Tx protocol routine

Choices$(l, 1) = "APPENDICITIS"
Choices$(l, 2) = "NON-SPECIFIC ABDOMINAL PAIN"
Choices$(l, 3) = "RENAL COLIC"
Choices$(l, 4) = "PERFORATED DUODENAL ULCER"
Choices$(l, 5) = "CHOLECYSTITIS"
Choices$(l, 6) = "SMALL BOWEL OBSTRUCTION"

IF sex$ = MALE$ THEN

Choices$(l, 7) = "EXIT DISPLAY"
resplength% = 7
ELSE

Choices$(l, 7) = "PELVIC INFLAMMATORY DISEASE" 'dx # 10
Choices$(l, 8) = "URINARY TRACT INFECTION" 'dx # 11
Choices$(l, 9) = "OVARIAN CYST" 'dx # 12
Choices$(l, 10) = "ECTOPIC PREGNANCY" 'dx # 13
Choices$(l, 11) = "INCOMPLETE ABORTION" 'dx # 14
Choices$(l, 12) = "EXIT DISPLAY" 'dx # 15
resplength% = 12

END IF

' New method for menu
SELECT CASE MAXNUM

CASE 0, 7, 15 'none marked, or other dx
NR% = 1
CASE 8 'appi in gyn mode
NR% = 1
CASE 9 'nonsap in gyn mode
NR% = 2
CASE ELSE
NR% = MAXNUM
END SELECT

DATAHEADING$ = "Abdominal Pain Diagnosis Program" + VERSION$
menuheading$ = "Treatment Summary"
HELPFILE$ = "HP11.DAT"
DO

CALL MenuEntryPage(NR%, resplength%, exitchar$, DATAHEADING$, menuheading$, Choices$( ), HELPFILE$)

' decrypt and print treatment text.
IF NR ≤ resplength% THEN

TXfile$ = "TX" + MID$(STR$(NR%), 2) + ".DAT"
thispage% = VideoPage$

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CALL DisplayEncryptedFile(TXfile$, thispage%)
  END IF
  LOOP UNTIL NR% = resplength%
  ERASE Choices$

END SUB
DECLARE FUNCTION Exists% (FIL$)
DEFINT A-Z
DECLARE SUB encipher CDECL (a$)
DECLARE SUB decipher CDECL (a$)

' This routine converts the data file PHRASE.DAT from the original
' ASCII version to the encrypted version.
CLS
PRINT "This program encrypts or decrypts the ..DAT files used in ABDX."
PRINT "(PHRASE.DAT, BESTQUES.DAT, and ABDSX.DAT)"
PRINT
PRINT "What do you desire:"
PRINT
PRINT "  1.  Encrypt ASCII file to encrypted file."
PRINT "  2.  Decrypt .DATA file to ASCII file."
PRINT
DO
LOCATE , 1
PRINT "Enter your choice > "
LOCATE , 21
resp$ = INPUT$(1)
IF resp$ = "" OR resp$ = CHR$(13) THEN
END
END IF
LOOP UNTIL INSTR("12", resp$) > 0
CLS

' encrypt file
IF resp$ = "1" THEN
PRINT "Enter name of ASCII file to encrypt. > ";
LINE INPUT infile$
IF infile$ = "" THEN END
IF NOT Exists%(infile$) THEN
LOCATE 10, 10
PRINT infile$; " does not exist! Aborting."
END
END IF
PRINT "Enter name of output encrypted file. > ";
LINE INPUT outfile$
IF outfile$ = "" THEN END
IF Exists%(outfile$) THEN
LOCATE 10, 10
PRINT outfile$; " already exists! Aborting."
END
END IF
ELSE
' decrypt .DAT file
PRINT "Enter name of .DAT file to decrypt. > ";
LINE INPUT infile$
IF infile$ = "" THEN END
IF NOT Exists%(infile$) THEN
  LOCATE 10, 10
  PRINT infile$; " does not exist! Aborting."
END IF
PRINT "Enter name of output ASCII decrypted file. > ";
LINE INPUT outfile$
IF outfile$ = "" THEN END
IF Exists%(outfile$) THEN
  LOCATE 10, 10
  PRINT outfile$; " already exists! Aborting."
END IF
END IF
OPEN infile$ FOR INPUT AS #1
OPEN outfile$ FOR OUTPUT AS #2
DO WHILE NOT EOF(1)
  LINE INPUT #1, a$
  IF resp$ = "1" THEN
    PRINT a$
    CALL encipher(a$)
  ELSE
    CALL decipher(a$)
    PRINT a$
  END IF
  PRINT #2, a$
LOOP
CLOSE #2
CLOSE #1
END

REM $DYNAMIC
FUNCTION Exists% (FIL$)
' This function checks for the existance of the file fil$. It
' returns TRUE (non-zero) if present and false (zero) if not
' found.
CONST FALSE = 0
filenum = FREEFILE
OPEN "R", filenum, FIL$, 1
N% = LOF(filenum)
CLOSE filenum
IF N% = 0 THEN
CRYPTDAT.BAS (cont'd)

    booltest% = FALSE
ELSE
    booltest% = NOT FALSE
END IF
Exists% = booltest%

END FUNCTION
DECLARE SUB encipher CDECL (a$)
DECLARE SUB decipher CDECL (a$)
DECLARE SUB SplitEm (orgstring$, string1$, string2$, splitchar$)
DECLARE SUB FFPresent (infile$, FFFlag$)
DECLARE SUB modifyFFfile (infile$, tempfile$)
DECLARE SUB encryptstringroutine (instring$, outstring$)
DECLARE SUB EncryptiontoASCII ()
DECLARE SUB ASCIItoEncryption ()
DECLARE SUB decryptstring (instring$, outstring$)
DECLARE FUNCTION Exists% (FIL$)

'Program is designed to take the ASCII version of a .DAT file for ABDX or CPDX and convert it to format used by those programs or vice versa.

'linecount - ptr for current line number of infile.

DEFINT A-Z
CLS
PRINT "This program converts an ASCII file to the encrypted data file"
PRINT "required by ABDX/CPDX. Which do you desire?"
PRINT
PRINT "1. Convert ASCII file to new encrypted data file."
PRINT "2. Convert new encrypted data file to ASCII file."
PRINT
DO
  PRINT "Enter 1 or 2. > ";
  LOCATE , 17
  a$ = INPUT$(1)
  IF a$ = "" OR a$ = CHR$(13) THEN
    END
    END IF
  aval = VAL(a$)
LOOP UNTIL aval = 1 OR aval = 2

IF aval = 1 THEN
  'ASCII to encrypted.
  CALL ASCIItoEncryption
ELSE
  'encrypted to ASCII version
  CALL EncryptiontoASCII
END IF

SUB ASCIItoEncryption
  'This routine convert an ASCII file to the encrypted

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' format required by ABDX/CPDX. The user must mark the end of
'each display page with the character '|' on a line by itself.
'Mark the last page with two characters '||' on a line by themselves.

CLS
PRINT "Enter name of ASCII tx file for ABDX/CPDX. >";
LINE INPUT infile$
IF infile$ = "" THEN END
ELSEIF NOT Exists%(infile$) THEN END
END IF
PRINT "Enter name of encrypted output file. >";
LINE INPUT outfile$
IF outfile$ = "" THEN END
END IF
IF Exists%(outfile$) THEN
LOCATE 10, 10
PRINT "Output file "; outfile$; " already exists!!! Aborting."
END
END IF

' check for FF's in file. If present, then convert to "\n" lines
'in temporary file.
tempfile$ = ""
CALL FFPresent(infile$, FFFlag)
IF FFFlag = 1 THEN ' file uses FF
tempfile$ = "T$emp.$at"
CALL modifyFFfile(infile$, tempfile$)
infile$ = tempfile$
END IF

pageflag$ = "\n" ' identifies end of page if in col 1.
DIM pageno(50) ' max of 50 pages

' open input file
OPEN infile$ FOR INPUT AS #1

' first pass thru infile to count number of pages.
' pageno(x) points to first line of page x.
' if = -1 then on first page.
pageno(0) = -1
pageno(1) = 1
pagectr = 0
linecount = 0
DO WHILE NOT EOF(#1)
LINE INPUT #1, a$
linecount = linecount + 1
IF LEFT$(a$, 1) = pageflag$ THEN
   'end of page
   pagectr = pagectr + 1
   pageno(pagectr + 1) = linecount + 1
END IF
LOOP
maxpages = pagectr
maxp$ = STR$(maxpages)
CLOSE #1

' open files
OPEN infile$ FOR INPUT AS #1
OPEN "R", 2, outfile$, 75
FIELD #2, 75 AS encrypt$

' second pass thru to modify program.
pagectr = 0
linecount = 0
lastpagestring$ = " 
DO WHILE NOT EOF(1)
   LINE INPUT #1, a$
   linecount = linecount + 1
   IF LEFT$(a$, 1) = pageflag$ THEN
      'end of page
      pagectr = pagectr + 1
      IF pagectr = maxpages THEN
         lastpagestring$ = " |
      END IF
      ' PRINT #2, USING "| ! ### Page ## of ##"; lastpagestring$, 
      ' pageno (pagectr - 1), pagectr, maxpages
      pageloc$ = RIGHT$((" " + STR$(pageno(pagectr - 1))), 3)
      pnum$ = RIGHT$((" " + STR$(pagectr)), 3)
      pagemostuff$ = "Page" + STR$(pagectr) + " of" + maxp$
      a$ = "|
      a$ = LEFT$((a$ + pagemostuff$ + SPACE$(13)), 15)
      a$ = a$ + pageloc$
   END IF
   PRINT a$
   a$ = a$ + SPACE$(75)
   a$ = LEFT$(a$, 75)
   CALL encipher(a$)
   LSET encrypt$ = a$
   PUT #2
   LOOP
CLOSE #1
CLOSE #2

' IF tempfile$ = infile$ THEN KILL tempfile$
SUB EncryptiontoASCII

' This routine will convert an encrypted data file to a
'straight ASCII file. It will place a '|' at the end of each page,
'and '||' at the end of the file.

CLS
PRINT "Enter name of encrypted input file for ABDX/CPDX. >";
LINE INPUT infile$
IF infile$ = "" THEN
END
ELSEIF NOT Exists$(infile$) THEN
END IF
PRINT "Enter name of ASCII output file >";
LINE INPUT outfile$
IF outfile$ = "" THEN
END
ELSEIF Exists$(outfile$) THEN
LOCATE 10, 10
PRINT "Output file "; outfile$; " already exists!!! Aborting."
END IF

' open input file
OPEN "R", 1, infile$, 75
FIELD #1, 75 AS B$
maxRecNum = L0F(1) \ 75
OPEN outfile$ FOR OUTPUT AS #2
FOR RecNum = 1 TO maxRecNum
GET #1, RecNum
decryptedstring$ = B$
CALL decipher(decryptedstring$)
IF MID$(decryptedstring$, 1, 1) = "|" THEN
' end of page.
' check for end of file.
IF LEFT$(decryptedstring$, 2) = "||" THEN
decryptedstring$ = "||"
ELSE
' Convert to just "|" on line.
decryptedstring$ = "|
END IF
END IF
PRINT decryptedstring$
PRINT #2, decryptedstring$
NEXT RecNum
CLOSE #2
CLOSE #1

END SUB

REM $DYNAMIC
FUNCTION Exists% (FIL$)
    ' This function checks for the existence of the file fil$. It
    ' returns TRUE (non-zero) if present and false (zero) if not
    ' found.

    CONST FALSE = 0
    filenum = FREEFILE
    OPEN "R", filenum, FIL$, 1
    N% = LOF(filenum)
    CLOSE filenum
    IF N% = 0 THEN
        booltest% = FALSE
    ELSE
        booltest% = NOT FALSE
    END IF
    Exists% = booltest%

END FUNCTION

REM $STATIC

SUB FFPresent (infile$, FFFlag)
    ' This routine checks for a FF in the file infile$. If present,
    ' it returns 1 in FFFlag, otherwise 0.

    FFFlag = 0
    filenum = FREEFILE
    OPEN infile$ FOR INPUT AS #filenum
    DO WHILE NOT EOF(filenum)
        LINE INPUT #filenum, a$
        IF a$ <> "" THEN
            IF INSTR(a$, CHR$(12)) > 0 THEN
                FFFlag = 1
                EXIT DO
            END IF
        END IF
    LOOP
    CLOSE filenum

END SUB

SUB modifyFFfile (infile$, tempfile$)
    ' This file converts the FF's in infile$ to "|" in tempfile$.
    ' This is a quick hack, so it will only pick up the first FF in a line.
    ' Be aware.

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FF$ = CHR$(12)
linecounter = 0
OPEN infile$ FOR INPUT AS #1
OPEN tempfile$ FOR OUTPUT AS #2
DO WHILE NOT EOF(1)
   LINE INPUT #1, a$
   linecounter = linecounter + 1
   IF a$ = "" THEN
      ' the TTYFF WORD printer driver always throws in a CR at the
      beginning
      ' of the file to ensure that the printer head is to the far left.
      ' We don't want that initial CR, since it wastes a line.
      IF linecounter > 1 THEN
         PRINT #2,
      END IF
   ELSE
      FFloc = INSTR(a$, FF$)
      IF FFloc = 0 THEN
         PRINT #2, a$
      ELSE
         CALL SplitEm(a$, stringl$, string2$, FF$)
         IF stringl$ <> "" THEN PRINT #2, stringl$
         IF EOF(1) THEN
            PRINT #2, "||"
         ELSE
            PRINT #2, "|
         END IF
         IF string2$ <> "" THEN PRINT #2, string2$
      END IF
   END IF
   LOOP
CLOSE #2
CLOSE #1
END SUB

SUB SplitEm (orgstring$, stringl$, string2$, splitchar$)
   ' Splits orgstring$ into stringland string2 about splitchar$

   stringl$ = ""
   string2$ = ""

   IF orgstring$ = "" THEN
      EXIT SUB
   END IF

   IF splitchar$ = "" THEN
      stringl$ = orgstring$
      EXIT SUB
   END IF
CONVTEXT.BAS (cont'd)

orglen = LEN(orgstring$)
splitpos = INSTR(orgstring$, splitchar$)

IF splitpos = 0 THEN
    'FF not found.
    string1$ = orgstring$
ELSEIF splitpos = 1 THEN
    'FF at beginning
    string2$ = RIGHT$(orgstring$, orglen - 1)
ELSEIF splitpos = orglen THEN
    'FF at end
    string1$ = LEFT$(orgstring$, orglen - 1)
ELSE
    string1$ = MID$(orgstring$, 1, splitpos - 1)
    string2$ = MID$(orgstring$, splitpos + 1)
END IF

END SUB
DECLARE SUB AskQuestion (question$, response$, filter$, exitcode$)
DEFINT A-Z
' This program installs the abdominal Pain diag program.
ON ERROR GOTO errorhandler
CLS
PROGTYPE$ = "Abdominal Pain"
BATCHNAME$ = "ABDOMEN"
EXECNAME$ = "ABDX.EXE"
SUBDIR$ = "ABDOMEN"
ARCFILE$ = "ABDXPAK.EXE"
BACKUPNAME$ = "ABDBKUP"
REALFILE$ = "REAL.DAT"
SIMULFILES$ = "SIMUL.DAT"

esc$ = CHR$(27)
YNESC$ = "YN" + esc$

a$ = PROGTYPE$ + " Diagnostic Program Installation"
LOCATE 1, (80 - LEN(a$)) \ 2
PRINT a$
LOCATE 5, 1
PRINT "This program will install the "; PROGTYPE$; " on your hard drive."
PRINT "Normally, just press the Enter key in response to each question asked"
PRINT "and the default values will be used."
PRINT question$ = "Enter the letter of the hard drive on which the program will be installed."
driveletter$ = "D"
filter$ = "CDEFGHIJKLMNOP"
CALL AskQuestion(question$, driveletter$, filter$, exitcode)$
PRINT
PRINT
row = CSRLIN
DO
    LOCATE row, 1
    PRINT "The subdirectory name used will be "; driveletter$; ":\";
        SUBDIR$
    PRINT
    question$ = "Is this OK?"
    YNresponse$ = "Y"
    filter$ = "YN"
    CALL AskQuestion(question$, YNresponse$, filter$, exitcode)$
    IF YNresponse$ = "N" THEN

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PRINT
PRINT "Enter the name of the subdirectory "; driveletter$; ":\";
LINE INPUT SUBDIR$
SUBDIR$ = UCASE$(SUBDIR$)
subrow = CSRLIN - 1
LOCATE subrow, 1: PRINT SPACE$(78)
LOCATE row, 36: PRINT SPACE$(30)

END IF
LOOP UNTIL YNresponse$ = "Y"

SUBDIR$ = driveletter$ + ":\" + SUBDIR$
CLS
PRINT "Creating subdirectory "; SUBDIR$
Mkdir SUBDIR$
CHDIR SUBDIR$
SHELL driveletter$ + ":"
' need input file of y's if subdir had old version of program in it.
PRINT
PRINT "Now copying program files. (This may take a while.)"
SHELL "a:" + ARCFILE$ + " <A:Y.DAT >nul"
PRINT "Program files have been copied."

PRINT "Now copying the batch files."
OPEN "C:" + BATCHNAME$ + ".BAT" FOR OUTPUT AS #1
PRINT #1, "ECHO OFF"
PRINT #1, driveletter$ + ":\"
PRINT #1, "cd "; SUBDIR$
PRINT #1, EXECNAME$
PRINT #1, "cd"
CLOSE #1
' create backup batch file.
OPEN "C:" + BACKUPNAME$ + ".BAT" FOR OUTPUT AS #1
PRINT #1, "ECHO OFF"
PRINT #1, "COPY/V "; SUBDIR$; "\"; REALFILE$; " A:*.*"
PRINT #1, "COPY/V "; SUBDIR$; "\"; SIMULFILE$; " A:*.*"
CLOSE #1

PRINT " Batch files written."
PRINT
PRINT "Finished with installation of "; LCASE$(PROGTYPE$); " program."
PRINT
PRINT " To start the "; LCASE$(PROGTYPE$); " program, enter ";
PRINT BATCHNAME$; ".
PRINT
PRINT " To backup the data files, put the backup disk into disk A, and"
PRINT "enter "; BACKUPNAME$; "."
errorhandler:
'Error 75 - subdirectory already exists.
IF ERR = 75 THEN
   PRINT "Subdirectory already exists."
   RESUME NEXT
END IF
ON ERROR GOTO 0

SUB AskQuestion (question$, response$, filter$, exitcode)
' This routine asks question$ at the current location, returning
' response$ as the result. Filter$ is list of permitted responses.
' exitcode -1 if esc from question.

filterstring$ = filter$ + CHR$(27) + CHR$(13)
exitcode = 0
PRINT question$; " [";
row = CSRLIN
col = POS(O)
PRINT " ]";
DO
   LOCATE row, col, 0
   PRINT response$;
   LOCATE row, col, 1
   a$ = INPUT$(1)
   a$ = UCASE$(a$)
   filtered = INSTR(filterstring$, a$)
   IF filtered = 0 THEN
      SOUND 450, 1
   END IF
LOOP UNTIL filtered > 0
IF INSTR(filter$, a$) > 0 THEN
   'valid new selection
   response$ = a$
ELSEIF a$ = CHR$(27) THEN
   exitcode = 1
ELSE
   'a$ = CHR$(13)
   'just pressed enter; selected the default
   ' don't need to do anything.
END IF
INSTALL.BAS (cont'd)

IF exitcode = 1 THEN
  BEEP
  END
END IF

  LOCATE row, col, 0
  PRINT response$;

END SUB

SUB GetPhrase (question$, response$, exitcode)

END SUB
OLDCONV.BAS

DECLARE SUB SplitEm (orgstring$, string1$, string2$, splitchar$)
DECLARE SUB FFPresent (infile$, FFFlag%)
DECLARE SUB modifyFFfile (infile$, tempfile$)
DECLARE SUB encryptstringroutine (instring$, outstring$)
DECLARE SUB EncryptiontoASCII ()
DECLARE SUB ASCIItoEncryption ()
DECLARE SUB decryptstring (instring$, outstring$)
DECLARE FUNCTION Exists% (FIL$)

'Program is designed to take the ASCII version of a .DAT file for ABDX
'or CPDX and convert it to format used by those programs or vice versa.

'linecount = ptr for current line number of infile.

DEFINT A-Z
CLS
PRINT "This program converts an ASCII file to the encrypted data file"
PRINT "required by ABDX/CPDX.  Which do you desire?"
PRINT
PRINT "1.  Convert ASCII file to encrypted data file."
PRINT "2.  Convert encrypted data file to ASCII file."
PRINT
DO
  PRINT "Enter 1 or 2. >
  LINE INPUT a$
  IF a$ = "" THEN
    END
  END IF
  aval = VAL(a$)
LOOP UNTIL aval = 1 OR aval = 2

IF aval = 1 THEN
  'ASCII to encrypted.
  CALL ASCIItoEncryption
ELSE
  'encrypted to ASCII version
  CALL EncryptiontoASCII
ENDIF

SUB ASCIItoEncryption
  'This routine convert an ASCII file to the encrypted
  'format required by ABDX/CPDX.  The user must mark the end of
  'each display page with the character '|' on a line by itself.

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Mark the last page with two characters "||" on a line by themselves.

CLS
PRINT "Enter name of ASCII tx file for ABDX/CPDX. >";
LINE INPUT infile$
IF infile$ = "" THEN
END
ELSEIF NOT Exists$(infile$) THEN
END
END IF
PRINT "Enter name of encrypted output file. >";
LINE INPUT outfile$
IF outfile$ = "" THEN
END
END IF
IF Exists$(outfile$) THEN
LOCATE 10, 10
PRINT "Output file "; outfile$; " already exists!!! Aborting."
END
END IF

'check for FF's in file. If present, then convert to "|" lines
'in temporary file.
tempfile$ = ""
CALL FFPresent(infile$, FFFlag)
IF FFFlag = 1 THEN ' file uses FF
   tempfile$ = "T$emp.$at"
   CALL modifyFFfile(infile$, tempfile$)
   infile$ = tempfile$
END IF

pageflag$ = "|" ' identifies end of page if in col 1.
DIM pageno(50) ' max of 50 pages

' open input file
OPEN infile$ FOR INPUT AS #1

'first pass thru infile to count number of pages.
'    pageno(x) points to first line of page x.
'    if = -1 then on first page.
pageno(0) = -1
pageno(1) = 1
pagectr = 0
linecount = 0
DO WHILE NOT EOF(1)
   LINE INPUT #1, a$
   linecount = linecount + 1
   IF LEFT$(a$, 1) = pageflag$ THEN
      'end of page
OLDCNV.BAS (cont’d)

    pagectr = pagectr + 1
   pageno(pagectr + 1) = linecount + 1
END IF
LOOP
maxpages = pagectr
maxp$ = STR$(maxpages)
CLOSE #1

' open files
OPEN infile$ FOR INPUT AS #1
OPEN "R", 2, outfile$, 75
FIELD #2, 75 AS encrypt$

' second pass thru to modify program.
pagectr = 0
linecount = 0
lastpagestring$ = " "

DO WHILE NOT EOF(1)
    LINE INPUT #1, a$
    linecount = linecount + 1
    IF LEFT$(a$, 1) = pageflag$ THEN
        ' end of page
        pagectr = pagectr + 1
        IF pagectr = maxpages THEN
            lastpagestring$ = "|"
        END IF
        PRINT #2, USING "| ! ### Page ## of ##"; lastpagestring$, 
        , pageno (pagectr - 1), pagectr, maxpages
        pageloc$ = RIGHT$(" | + STR$(pageno(pagectr - 1))), 3)
        pnum$ = RIGHT$(" ! + STR$(pagectr)), 3)
        pagestuff$ = "Page" + STR$(pagectr) + " of" + maxp$
        a$ = "|" + lastpagestring$
        a$ = LEFT$((a$ + pagestuff$ + SPACE$(13)), 15)
        a$ = a$ + pageloc$
    END IF
    PRINT a$
    a$ = a$ + SPACE$(75)
    a$ = LEFT$(a$, 75)
    CALL encryptstringroutine(a$, encryptedstring$)
    LSET encrypt$ = encryptedstring$
    PUT #2
LOOP
CLOSE #1
CLOSE #2

' IF tempfile$ = infile$ THEN KILL tempfile$

END SUB
OLDCONV.BAS (cont’d)

SUB decryptstring (instring$, outstring$)
  'This routine decrypts the string instring$ into outstring$
  E$ = " &%David Southerland was here once upon a
time.1EC07\'X'4OB$|:<-_ )@t?_-.)["'
  K = 73
  'clear extra spaces at end of record.
  'new method, but I don't know if it is any faster.
  instring$ = RTRIM$(instring$)
  kk = LEN(instring$)
  IF kk MOD 2 O 0 THEN
    kk = kk + 1
  instring$ = instring$ + " "
  END IF
  36010 DO
    F$ = MID$(instring$, K, 2)
    IF F$ = " " THEN
      K = K - 2
    END IF
  LOOP UNTIL K < 3 OR F$ <> " "
  36020 outstring$ = ""
  FOR I = K TO 1 STEP -2
    F$ = MID$(instring$, I, 2)
    G$ = MID$(E$, K + 1 - I, 2)
    F = CVI(F$)
    G = CVI(G$)
    H = F XOR G XOR &H3A73
    outstring$ = outstring$ + MKI$(H)
  NEXT I
END SUB

SUB EncryptiontoASCII
  'This routine will convert an encrypted data file to a
  'straight ASCII file. It will place a '|' at the end of each page,
  'and '||' at the end of the file.

  CLS
  PRINT "Enter name of encrypted input file for ABDX/CPDX. >";
  LINE INPUT infile$
  IF infile$ = "" THEN
    END
  ELSEIF NOT Exists%(infile$) THEN
    END
  END IF
  PRINT "Enter name of ASCII output file . >";
  LINE INPUT outfile$
  IF outfile$ = "" THEN
    END
  ELSEIF Exists%(outfile$) THEN
    END
  ELSE
    END SUB

  CLS
  PRINT "Enter name of encrypted input file for ABDX/CPDX. >";
  LINE INPUT infile$
  IF infile$ = "" THEN
    END
  ELSEIF NOT Exists%(infile$) THEN
    END
  END IF
  PRINT "Enter name of ASCII output file . >";
  LINE INPUT outfile$
  IF outfile$ = "" THEN
    END
  ELSEIF Exists%(outfile$) THEN
    END
  ELSE
    END SUB

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LOCATE 10, 10
PRINT "Output file "; outfile$; " already exists!!! Aborting."
END
END IF

' open input file
OPEN "R", 1, infile$, 75
FIELD #1, 75 AS B$
maxRecNum = LOF(1) \ 75
OPEN outfile$ FOR OUTPUT AS #2
FOR RecNum = 1 TO maxRecNum
  GET #1, RecNum
  encryptstring$ = B$
  CALL decryptstring(encryptstring$, decryptedstring$)
  IF MID$(decryptedstring$, 1, 1) = "|" THEN
    ' end of page.
    ' check for end of file.
    IF LEFT$(decryptedstring$, 2) = "||" THEN
      decryptedstring$ = "||"
    ELSE
      ' Convert to just "|" on line.
      decryptedstring$ = "|"
    END IF
  END IF
  PRINT decryptedstring$
  PRINT #2, decryptedstring$
NEXT RecNum
CLOSE #2
CLOSE #1

END SUB

SUB encryptstringroutine (instring$, outstring$)
  ' This routine decrypts the string instring$ into outstring$
  E$ = " &gt;David Southerland was here once upon a
  time.LEC07\X'40B$\:<- )@t?_-|.}[^" 
  outstring$ = ""
  K = 73
  DO
  210 F$ = MID$(instring$, K, 2)
  IF F$ = " " THEN
    K = K - 2
  IF K < 3 THEN
    K = 3
  END IF
  END IF
  LOOP UNTIL F$ <> " " OR K = 3
  FOR I = K TO 1 STEP -2
OLDCONV.BAS (cont'd)

F$ - MID$(instring$, I, 2)
G$ - MID$(E$, I, 2)
F - CVI(F$)
G - CVI(G$)
'H&h3A73 is added as an extra encryption step.
H - F XOR G XOR &H3A73
outstring$ = outstring$ + MKI$(H)
NEXT I

END SUB

REM $DYNAMIC
FUNCTION Exists% (FIL$)
' This function checks for the existance of the file fil$.  It
' returns TRUE (non-zero) if present and false (zero) if not
' found.
CONST FALSE = 0
filenum = FREEFILE
OPEN "R", filenum, FIL$, 1
N% - LOF(filenum)
CLOSE filenum
IF N% = 0 THEN
   booltest% = FALSE
ELSE
   booltest% = NOT FALSE
END IF
Exists% = booltest%
END FUNCTION

REM $STATIC
SUB FFPresent (infile$, FFFlag)
' This routine checks for a FF in the file infile$.  If present,
' it returns 1 in FFFlag, otherwise 0.
FFFlag = 0
filenum = FREEFILE
OPEN infile$ FOR INPUT AS #filenum
DO WHILE NOT EOF(filenum)
   LINE INPUT #filenum, a$
   IF a$ = "" THEN
      IF INSTR(a$, CHR$(12)) > 0 THEN
         FFFlag = 1
      END IF
   EXIT DO
   END IF
LOOP
CLOSE filenum
OLDCONV.BAS (cont’d)

END SUB

SUB modifyFFfile (infile$, tempfile$)
  ' This file converts the FF’s in infile$ to "|" in tempfile$.
  ' This is a quick hack, so it will only pick up the first FF in a line.
  ' Be aware.
  FF$ = CHR$(12)
  linecounter = 0
  OPEN infile$ FOR INPUT AS #1
  OPEN tempfile$ FOR OUTPUT AS #2
  DO WHILE NOT EOF(1)
    LINE INPUT #1, a$
    linecounter = linecounter + 1
    IF a$ = "" THEN
      ' the TTYFF WORD printer driver always throws in a CR at the
      ' beginning
      ' of the file to ensure that the printer head is to the far left.
      ' We don’t want that initial CR, since it wastes a line.
      IF linecounter > 1 THEN
        PRINT #2,
      END IF
    ELSE
      FFloc = INSTR(a$, FF$)
      IF FFloc = 0 THEN
        PRINT #2, a$
      ELSE
        CALL SplitEm(a$, string1$, string2$, FF$)
        IF string1$ <> "" THEN PRINT #2, string1$
        IF EOF(1) THEN
          PRINT #2, "|
        ELSE
          PRINT #2, "|
        END IF
        IF string2$ <> "" THEN PRINT #2, string2$
      END IF
    END IF
  LOOP
  CLOSE #2
  CLOSE #1
END SUB

SUB SplitEm (orgstring$, string1$, string2$, splitchar$)
  ' Splits orgstring$ into string1$ and string2$ about splitchar$
  string1$ = ""
  string2$ = ""
  IF orgstring$ = "" THEN

OIDCONV.BAS (cont'd)

EXIT SUB
END IF

IF splitchar$ = "" THEN
    stringl$ = orgstring$
    EXIT SUB
END IF

orglen = LEN(orgstring$)
splitpos = INSTR(orgstring$, splitchar$)

IF splitpos = 0 THEN
    'FF not found.
    stringl$ = orgstring$
ELSEIF splitpos = 1 THEN
    'FF at beginning
    string2$ = RIGHT$(orgstring$, orglen - 1)
ELSEIF splitpos = orglen THEN
    'FF at end
    stringl$ = LEFT$(orgstring$, orglen - 1)
ELSE
    stringl$ = MID$(orgstring$, 1, splitpos - 1)
    string2$ = MID$(orgstring$, splitpos + 1)
END IF

END SUB
DECLARE FUNCTION Exists% (FIL$)
'Program Pack_DATABASE
' This program takes the BASIC data statements in a file and converts
' them to a packed data file. This program is used only for converting
' the ABD, CPDX database. Any probability under 128 is placed in a
'single byte using CHR$( ). If the probability is < 1 then, that number
' is multiplied by 10 (to get a whole number) and then added to 128.
' Conversion back will go like this:
' modcheck = byte MOD 128
' if modcheck = 0 then
' prob = asc(byte)
' else
' prob = modcheck/10
' end if

' NOTE that the input data file will contain BASIC DATA statements.
' Comments
' are allowed, but all REMs should be changed to '. Also, if the comment
' is anywhere in the line then that particular line will be eliminated.
' Therefore, don’t add comments at the end of a DATA statement line.

' The format for the input data file is:
' OUTPUTFILE.DAT    <-- the output file name has to be on first line.
' 7,152              <-- Second line contains # of diseases (cols) and
                  'the number of responses. The numbers here are
                  'examples for the male abd program. There are
                  '7 diseases (dyspepsia and NONSAP get
                  'combined),
                  'and there are 152 responses on the program
                  '(count-
                  'ing sex and age) The comments by each line
                  'would not be present in the actual input

' Next come two DATA lines containing the mantissa for each disease
'in the
'first line and the integer exponent in the second line. The exponent is
'always converted to negative, so you do not have to insert the negative
'sign in the data statement. For example:
'DATA 1,2,3,4,5,6,7
'DATA 25,25,25,25,25,25,26
' Again the comment quote would not be present in the actual file.
' the a priori for disease (1) is 1 x 10^-25.
' for disease (7), 7 X 10^-26.

DEFINT A-Z
CLS
PRINT "Enter the name of the BASIC DATA file to pack. >";
LINE INPUT infile$
IF infile$ = "" THEN END
IF NOT (Exists%(infile$)) THEN
  PRINT infile$; " NOT FOUND!!"
END
END IF

OPEN infile$ FOR INPUT AS #1

INPUT #1, outfile$
PRINT "The name of the output packed data file is "; UCASE$(outfile$)
IF outfile$ = "" THEN
  CLOSE
END
END IF
IF Exists%(outfile$) THEN
  BEEP
  PRINT outfile$; " ALREADY EXISTS!!"
  CLOSE
END
END IF
PRINT
PRINT #1, arraywidth, arraylength
IF arraywidth = 0 OR arraylength = 0 THEN
  BEEP
  PRINT "Input file is in improper format!"
  PRINT "I cannot continue."
END IF

OPEN outfile$ FOR RANDOM AS #2 LEN = arraywidth
FIELD #2, arraywidth AS outline$

recordnumber = 1
WHILE NOT EOF(1)
  LINE INPUT #1, a$
  IF LEN(a$) < 0 THEN
    startcomma = INSTR(a$, "DATA")
    IF INSTR(a$, "") = 0 AND startcomma < 0 THEN
      'got a data line.
      startcomma = startcomma + 4
      printstring$ = "output ", a$
      outstring$ = ""
      PRINT a$
      FOR i = 1 TO arraywidth
        endcomma = INSTR(startcomma, a$, ",")
        outline$ = outline$ + a$(startcomma, endcomma) + ","
        startcomma = startcomma + (endcomma - startcomma)
      NEXT
    ELSE
      printstring$ = "skip ", a$
      outstring$ = ""
      PRINT a$
      FOR i = 1 TO arraywidth
        endcomma = INSTR(startcomma, a$, ",")
        outline$ = outline$ + a$(startcomma, endcomma) + ","
        startcomma = startcomma + (endcomma - startcomma)
      NEXT
    END IF
  END IF
NEXT

PRINT outline$
CLOSE
CLOSE

PRINT "Done."
PRINT "File name: "; outfile$
PRINT "Size: "; arraywidth
PRINT "Elements per line: "; arraylength
PRINT "Record number: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "; arraywidth
PRINT "Elements: "; arraylength
PRINT "Records: "; recordnumber
PRINT "Memo: "; a$
PRINT "Comment: "; a$
PRINT "Name: "; outfile$
PRINT "Length: "); 
IF endcomma = 0 THEN
  'last item on line
  stringvalue$ = MID$(a$, startcomma)
ELSE
  stringvalue$ = MID$(a$, startcomma, endcomma - startcomma)
END IF
startcomma = endcomma + 1
stringvariable! = ABS(VAL(stringvalue$))
IF stringvariable! = 0 THEN stringvariable! = .1
printstring$ = printstring$ + " " + STR$(stringvariable!)
IF stringvariable! < 1 THEN
  stringvariable! = stringvariable! * 10 + 128
END IF
outstring$ = outstring$ + CHR$(stringvariable!)
NEXT i
PRINT printstring$
LSET outline$ = outstring$
PUT #2, recordnumber
recordnumber = recordnumber + 1
END IF
WEND
CLOSE #2
CLOSE #1
PRINT
PRINT
PRINT recordnumber - 1; " records printed, "; arraylength + 2;
PRINT " records expected. (including a priori values)"
REM $DYNAMIC
FUNCTION Exists% (FIL$)
  ' This function checks for the existance of the file FIL$. It returns TRUE (non-zero) if present and false (zero) if not found.
CONST FALSE = 0
filenum = FREEFILE
OPEN "R", filenum, FIL$, 1
N% = LOF(filenum)
CLOSE filenum
IF N% = 0 THEN
  booltest% = FALSE
ELSE
  booltest% = NOT FALSE
END IF
Exists% = booltest%
PACKDATA.BAS (cont'd)

END FUNCTION
This program converts the 13 element array storing each of
50 training cases for ABDX into 26 byte (2 bytes per integer) record,
giving a total of 1300 bytes for the data file. (13 * 2 * 50)

```
DEFINT A-Z

DIM TrainingCase(12)
OPEN "abdtrn.dat" FOR BINARY AS #1
FOR NumCase = 1 TO 50
    CALL InitializeTrainingCase(NumCase, TrainingCase())
    FOR i = 0 TO 12
        caseval% = TrainingCase(i)
        PUT #1, , caseval%
    NEXT i
NEXT NumCase
CLOSE #1
```

```
SUB OrgInitializeTrainingCase (NumOfTrainingCase, TrainingCase())

    SELECT CASE NumOfTrainingCase
    CASE 1
        TrainingCase(0) = 33: TrainingCase(1) = 8201
        TrainingCase(2) = 3136: TrainingCase(3) = 8240
        TrainingCase(4) = 21017: TrainingCase(5) = 21704
        TrainingCase(6) = 4676: TrainingCase(7) = 21025
        TrainingCase(8) = 596: TrainingCase(9) = 1544
        TrainingCase(10) = 2: TrainingCase(11) = 0
        TrainingCase(12) = 0
    CASE 2
        TrainingCase(0) = 17: TrainingCase(1) = 1040
        TrainingCase(2) = 4736: TrainingCase(3) = 592
        TrainingCase(4) = 21061: TrainingCase(5) = 5448
        TrainingCase(6) = 18762: TrainingCase(7) = 26752
        TrainingCase(8) = 4690: TrainingCase(9) = 1280
        TrainingCase(10) = 1: TrainingCase(11) = 0
        TrainingCase(12) = 0
    CASE 3
        TrainingCase(0) = 33: TrainingCase(1) = 1
        TrainingCase(2) = 3138: TrainingCase(3) = 8240
        TrainingCase(4) = 21017: TrainingCase(5) = 21704
        TrainingCase(6) = 4676: TrainingCase(7) = 21025
        TrainingCase(8) = 596: TrainingCase(9) = 1544
        TrainingCase(10) = 2: TrainingCase(11) = 0
    END SELECT

```

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TRAINCAS.BAS (cont'd)

TrainingCase(12) = 0

CASE 4
TrainingCase(0) = 17: TrainingCase(1) = 1032
TrainingCase(2) = 5248: TrainingCase(3) = 8264
TrainingCase(4) = 12825: TrainingCase(5) = 5328
TrainingCase(6) = 4681: TrainingCase(7) = 21121
TrainingCase(8) = 4682: TrainingCase(9) = 1280
TrainingCase(10) = 1: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 5
TrainingCase(0) = 33: TrainingCase(1) = 1026
TrainingCase(2) = 2624: TrainingCase(3) = 552
TrainingCase(4) = 12869: TrainingCase(5) = 5448
TrainingCase(6) = 21066: TrainingCase(7) = 26880
TrainingCase(8) = 4498: TrainingCase(9) = 1536
TrainingCase(10) = 2: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 6
TrainingCase(0) = 33: TrainingCase(1) = 16
TrainingCase(2) = 3202: TrainingCase(3) = 560
TrainingCase(4) = 21253: TrainingCase(5) = 5328
TrainingCase(6) = 4677: TrainingCase(7) = 21122
TrainingCase(8) = 652: TrainingCase(9) = 1537
TrainingCase(10) = 2: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 7
TrainingCase(0) = 1033: TrainingCase(1) = 16384
TrainingCase(2) = 3136: TrainingCase(3) = 560
TrainingCase(4) = 10822: TrainingCase(5) = 5416
TrainingCase(6) = 4393: TrainingCase(7) = 26753
TrainingCase(8) = 4690: TrainingCase(9) = 1536
TrainingCase(10) = 1: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 8
TrainingCase(0) = 65: TrainingCase(1) = 2
TrainingCase(2) = 3336: TrainingCase(3) = 16432
TrainingCase(4) = 3093: TrainingCase(5) = 5460
TrainingCase(6) = 4433: TrainingCase(7) = 8721
TrainingCase(8) = 653: TrainingCase(9) = 2592
TrainingCase(10) = 1: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 9
TrainingCase(0) = 129: TrainingCase(1) = 16386
TRAINCAS.BAS (cont'd)

TrainingCase(2) = 1280: TrainingCase(3) = 592
TrainingCase(4) = 12933: TrainingCase(5) = 19752
TrainingCase(6) = 21064: TrainingCase(7) = 10272
TrainingCase(8) = 661: TrainingCase(9) = 6688
TrainingCase(10) = 8: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 10
TrainingCase(0) = 17: TrainingCase(1) = 16386
TrainingCase(2) = 3200: TrainingCase(3) = 16432
TrainingCase(4) = 5145: TrainingCase(5) = 11444
TrainingCase(6) = 4388: TrainingCase(7) = 21099
TrainingCase(8) = 650: TrainingCase(9) = 6688
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 11
TrainingCase(0) = 33: TrainingCase(1) = 64
TrainingCase(2) = 2704: TrainingCase(3) = 584
TrainingCase(4) = 5193: TrainingCase(5) = 13620
TrainingCase(6) = 4744: TrainingCase(7) = 8737
TrainingCase(8) = 405: TrainingCase(9) = 6784
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 12
TrainingCase(0) = 2113: TrainingCase(1) = 0
TrainingCase(2) = 3329: TrainingCase(3) = 1104
TrainingCase(4) = 4629: TrainingCase(5) = 12969
TrainingCase(6) = 21064: TrainingCase(7) = 21056
TrainingCase(8) = 660: TrainingCase(9) = 19008
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 13
TrainingCase(0) = 33: TrainingCase(1) = 2049
TrainingCase(2) = 2624: TrainingCase(3) = 16424
TrainingCase(4) = 5146: TrainingCase(5) = 21844
TrainingCase(6) = 4392: TrainingCase(7) = 8769
TrainingCase(8) = 653: TrainingCase(9) = 19008
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 14
TrainingCase(0) = 17: TrainingCase(1) = 64
TrainingCase(2) = 9488: TrainingCase(3) = 16464
TrainingCase(4) = 5189: TrainingCase(5) = 21844
TrainingCase(6) = 21640: TrainingCase(7) = 8736
TrainingCase(8) = 8845: TrainingCase(9) = 18944
TRAINCAS.BAS (cont'd)

TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 15
TrainingCase(0) = 8257: TrainingCase(1) = 0
TrainingCase(2) = 2640: TrainingCase(3) = 1064
TrainingCase(4) = 21061: TrainingCase(5) = 21808
TrainingCase(6) = 2384: TrainingCase(7) = 10258
TrainingCase(8) = 661: TrainingCase(9) = 6657
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 16
TrainingCase(0) = 4161: TrainingCase(1) = 0
TrainingCase(2) = 9480: TrainingCase(3) = 16528
TrainingCase(4) = 5146: TrainingCase(5) = 21204
TrainingCase(6) = 3204: TrainingCase(7) = 22561
TrainingCase(8) = 652: TrainingCase(9) = 6688
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 17
TrainingCase(0) = 129: TrainingCase(1) = 4
TrainingCase(2) = 2640: TrainingCase(3) = 560
TrainingCase(4) = 5146: TrainingCase(5) = 5460
TrainingCase(6) = 5266: TrainingCase(7) = 26753
TrainingCase(8) = 660: TrainingCase(9) = 6720
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 18
TrainingCase(0) = 1089: TrainingCase(1) = 4096
TrainingCase(2) = 9344: TrainingCase(3) = 1064
TrainingCase(4) = 12873: TrainingCase(5) = 5416
TrainingCase(6) = 5265: TrainingCase(7) = 26689
TrainingCase(8) = 1362: TrainingCase(9) = 5376
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 19
TrainingCase(0) = 129: TrainingCase(1) = 258
TrainingCase(2) = 9344: TrainingCase(3) = 560
TrainingCase(4) = 10821: TrainingCase(5) = 13512
TrainingCase(6) = 4680: TrainingCase(7) = 22657
TrainingCase(8) = 594: TrainingCase(9) = 5384
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 20

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TRAINCAS.BAS (cont'd)

TrainingCase(0) = 1057: TrainingCase(1) = 0
TrainingCase(2) = 1154: TrainingCase(3) = 16529
TrainingCase(4) = 12821: TrainingCase(5) = 2888
TrainingCase(6) = 4682: TrainingCase(7) = 21121
TrainingCase(8) = 594: TrainingCase(9) = 1296
TrainingCase(10) = 2: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 21
TrainingCase(0) = 1041: TrainingCase(1) = 0
TrainingCase(2) = 3204: TrainingCase(3) = 560
TrainingCase(4) = 10778: TrainingCase(5) = 13640
TrainingCase(6) = 4388: TrainingCase(7) = 26648
TrainingCase(8) = 594: TrainingCase(9) = 1288
TrainingCase(10) = 2: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 22
TrainingCase(0) = 16417: TrainingCase(1) = 0
TrainingCase(2) = 1156: TrainingCase(3) = 16434
TrainingCase(4) = 13338: TrainingCase(5) = 5424
TrainingCase(6) = 4681: TrainingCase(7) = 26760
TrainingCase(8) = 594: TrainingCase(9) = 5392
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 23
TrainingCase(0) = 65: TrainingCase(1) = 2
TrainingCase(2) = 9346: TrainingCase(3) = 16432
TrainingCase(4) = 10777: TrainingCase(5) = 21832
TrainingCase(6) = 5264: TrainingCase(7) = 25105
TrainingCase(8) = 594: TrainingCase(9) = 5648
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 24
TrainingCase(0) = 1057: TrainingCase(1) = 0
TrainingCase(2) = 3140: TrainingCase(3) = 584
TrainingCase(4) = 10821: TrainingCase(5) = 11440
TrainingCase(6) = 4680: TrainingCase(7) = 22657
TrainingCase(8) = 596: TrainingCase(9) = 5640
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 25
TrainingCase(0) = 16393: TrainingCase(1) = 0
TrainingCase(2) = 1156: TrainingCase(3) = 16433
TrainingCase(4) = 12825: TrainingCase(5) = 13608
TrainingCase(6) = 5264: TrainingCase(7) = 25352
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<td>658</td>
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**CASE 26**

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**CASE 27**

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**CASE 28**

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**CASE 29**

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<th>TrainingCase(7)</th>
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**CASE 30**

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<th>TrainingCase(7)</th>
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CASE 31
TrainingCase(0) = 65: TrainingCase(1) = 258
TrainingCase(2) = 9280: TrainingCase(3) = 560
TrainingCase(4) = 2597: TrainingCase(5) = 3370
TrainingCase(6) = 9354: TrainingCase(7) = 26692
TrainingCase(8) = 596: TrainingCase(9) = 5378
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 32
TrainingCase(0) = 33: TrainingCase(1) = 16
TrainingCase(2) = 3202: TrainingCase(3) = 648
TrainingCase(4) = 12874: TrainingCase(5) = 13520
TrainingCase(6) = 4496: TrainingCase(7) = 21528
TrainingCase(8) = 354: TrainingCase(9) = 1544
TrainingCase(10) = 2: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 33
TrainingCase(0) = 16401: TrainingCase(1) = 0
TrainingCase(2) = 578: TrainingCase(3) = 16457
TrainingCase(4) = 21125: TrainingCase(5) = 3272
TrainingCase(6) = 5266: TrainingCase(7) = 21521
TrainingCase(8) = 612: TrainingCase(9) = 9736
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 34
TrainingCase(0) = 257: TrainingCase(1) = 2
TrainingCase(2) = 1154: TrainingCase(3) = 16466
TrainingCase(4) = 21029: TrainingCase(5) = 11464
TrainingCase(6) = 5264: TrainingCase(7) = 21570
TrainingCase(8) = 418: TrainingCase(9) = 9736
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 35
TrainingCase(0) = 33: TrainingCase(1) = 4
TrainingCase(2) = 3137: TrainingCase(3) = 584
TrainingCase(4) = 5189: TrainingCase(5) = 5290
TrainingCase(6) = 2633: TrainingCase(7) = 22664
TrainingCase(8) = 674: TrainingCase(9) = 1544
TrainingCase(10) = 2: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 36
TrainingCase(0) = 65: TrainingCase(1) = 1
TrainingCase(2) = 17538: TrainingCase(3) = 8240
TrainingCase(4) = 13385: TrainingCase(5) = 13480
TRAINCAS.BAS (cont'd)

TrainingCase(6) = 8528: TrainingCase(7) = 21122
TrainingCase(8) = 338: TrainingCase(9) = 1288
TrainingCase(10) = 2: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 37
TrainingCase(0) = 2065: TrainingCase(1) = 0
TrainingCase(2) = 1153: TrainingCase(3) = 16454
TrainingCase(4) = 13445: TrainingCase(5) = 3280
TrainingCase(6) = 8777: TrainingCase(7) = 5256
TrainingCase(8) = 2389: TrainingCase(9) = 5632
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 38
TrainingCase(0) = 9: TrainingCase(1) = 8193
TrainingCase(2) = 16960: TrainingCase(3) = 2180
TrainingCase(4) = 10777: TrainingCase(5) = 1048
TrainingCase(6) = 2340: TrainingCase(7) = 25124
TrainingCase(8) = 588: TrainingCase(9) = 2561
TrainingCase(10) = 2: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 39
TrainingCase(0) = 9: TrainingCase(1) = 8193
TrainingCase(2) = 16960: TrainingCase(3) = 2180
TrainingCase(4) = 10777: TrainingCase(5) = 1048
TrainingCase(6) = 2340: TrainingCase(7) = 25124
TrainingCase(8) = 588: TrainingCase(9) = 2561
TrainingCase(10) = 2: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 40
TrainingCase(0) = 33: TrainingCase(1) = 2064
TrainingCase(2) = 17024: TrainingCase(3) = 16520
TrainingCase(4) = 3145: TrainingCase(5) = 11562
TrainingCase(6) = 8776: TrainingCase(7) = 25108
TrainingCase(8) = 8788: TrainingCase(9) = 17920
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 41
TrainingCase(0) = 16449: TrainingCase(1) = 0
TrainingCase(2) = 17028: TrainingCase(3) = 1104
TrainingCase(4) = 2581: TrainingCase(5) = 2890
TrainingCase(6) = 2377: TrainingCase(7) = 26884
TrainingCase(8) = 610: TrainingCase(9) = 1544
TrainingCase(10) = 2: TrainingCase(11) = 0
TrainingCase(12) = 0
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TRAINCAS.BAS (cont’d)

TrainingCase(4) = 12837: TrainingCase(5) = 3368
TrainingCase(6) = 9361: TrainingCase(7) = 8722
TrainingCase(8) = 17059: TrainingCase(9) = 6400
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 48
TrainingCase(0) = 8209: TrainingCase(1) = 0
TrainingCase(2) = 3140: TrainingCase(3) = 592
TrainingCase(4) = 13353: TrainingCase(5) = 13640
TrainingCase(6) = 9360: TrainingCase(7) = 25122
TrainingCase(8) = 610: TrainingCase(9) = 6664
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 49
TrainingCase(0) = 1033: TrainingCase(1) = 0
TrainingCase(2) = 17028: TrainingCase(3) = 2308
TrainingCase(4) = 10777: TrainingCase(5) = 19624
TrainingCase(6) = 8584: TrainingCase(7) = 22660
TrainingCase(8) = 610: TrainingCase(9) = 6416
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE 50
TrainingCase(0) = 17: TrainingCase(1) = 2056
TrainingCase(2) = 9280: TrainingCase(3) = 16464
TrainingCase(4) = 12869: TrainingCase(5) = 13640
TrainingCase(6) = 8848: TrainingCase(7) = 25730
TrainingCase(8) = 8804: TrainingCase(9) = 5632
TrainingCase(10) = 0: TrainingCase(11) = 0
TrainingCase(12) = 0

CASE ELSE
'should never get here, since range checking is done earlier.
CLS
PRINT "selected case "; CASENUM; " which does not exist."
STOP
END SELECT

end of InitializeTrainingCase()
DECLARE SUB ErrorStuff (num%, click%)
DEFINT A-Z
KEY OFF
'This program will take an input ASCII file and create the appropriate
'.TXT file for use by CPDX or ABDX.
'The format for the input file is:
'|H14.TXT
'##1
'text, blah, blah
'##2
'text for question 2. blah
'same stuff again.

CLS
PRINT "This program will take an input ASCII file and create the"
PRINT "appropriate .TXT help file for use by ABDX or CPDX."
PRINT "The format for the input file is:"
PRINT "|H14.TXT
'##1
'text, blah, blah
'##2
'text for question 2. blah
'same stuff again.
TXTMAKE.BAS (cont'd)

PRINT "*blah.
  *
PRINT "*##END
  *
PRINT "|H24.TXT
  *
PRINT "*##1
  *
PRINT " As above, but this time, use a different file.
  *
PRINT "##END
  *
PRINT
COLOR 0, 7: LOCATE 25, 27: PRINT "Press any key To Continue.";
COLOR 7, 0
a$ = INPUT$(1)
CLS
PRINT
PRINT "Note that the text file name begins with the character |."
PRINT "The number of the question begins with ##"
PRINT "and the end of the question text ends with ##END."
PRINT
PRINT " Enter name of the input ASCII file. > ";
INPUT infilen$; END IF

' check for input file existence.
OPEN infilen$ FOR RANDOM AS #1 LEN = 1
N = LOF(1)
CLOSE #1
IF N = 0 THEN
  PRINT "File ;infilen$; NOT found.; Aborting.; ""
END

' open input file for real.
OPEN infilen$ FOR INPUT AS #1
questnum = 0: ' The question number.
InAQuestion = 0 ' Text is in a question 0-false, 1-true.
screenlines = 0 ' line counter for display screen.
LinesPerScreen = 23 ' Max lines per screen.
fileopen = 0: ' output file is open 0-false, 1-true.
click = 0: ' infile absolute line counter.
DO WHILE NOT EOF(1)

LINE INPUT #1, inline$
click = click + 1
inlength = LEN(inline$)
IF inlength > 1 THEN
    char1$ = LEFT$(inline$, 1)
    char2$ = MID$(inline$, 2, 1)
    char12$ = MID$(inline$, 1, 2)

    IF char1$ = "|" THEN
        ' file open/close.
        ' open file.  eg: |H14.TXT
        IF fileopen <> 0 THEN
            ' file is already open. Close it first.
            PRINT #2, questnum + 1; ", END"
            PRINT "Closing file "; outfile$
            PRINT
            CLOSE #2
            fileopen = 0
            questnum = 0
            screenlines = 0
        END IF
        outfile$ = MID$(inline$, 2, inlength - 1)
        PRINT "Opening file "; outfile$
        PRINT
        OPEN outfile$ FOR OUTPUT AS #2
        fileopen = 1
    ELSEIF char12$ = "##" THEN
        'get question number
        '#1
        qstring$ = UCASE$(RIGHT$(inline$, inlength - 2))
        IF RTRIM$(qstring$) <> "END" THEN
            ' check for question number.
            qnum = VAL(qstring$)
            IF qnum <> questnum + 1 THEN
                'question numbers are out of sequence.
                CALL ErrorStuff(3, click)
            ELSE
                questnum = qnum
                InAQuestion = 1
                screenlines = 0
            END IF
        ELSE
            'end of question statements
            InAQuestion = 0
    ELSE

ABDX Programmer's Manual  B-86
END IF

ELSE
  'normal help line of text.
  IF fileopen = 1 AND InAQuestion = 1 THEN
    ' text for output file.
    PRINT #2, questnum; ","; inline$
    PRINT questnum; ","; inline$
    screenlines = screenlines + 1
    IF LinesPerScreen < screenlines THEN
      CALL ErrorStuff(4, click)
      CLOSE #2
    END IF
  END IF
END IF
;
END IF
END IF

ELSE
  'len is less than 2
  IF fileopen = 1 AND InAQuestion = 1 THEN
    ' text for output file.
    PRINT #2, questnum; ","; inline$
    PRINT questnum; ","; inline$
    screenlines = screenlines + 1
    IF LinesPerScreen < screenlines THEN
      CALL ErrorStuff(4, click)
      CLOSE #2
    END IF
  END IF
END IF

LOOP
CLOSE #1
IF fileopen <> 0 THEN
  'output file is open. Add extra line number, then close it.
  PRINT #2, questnum + 1; ", END"
  PRINT questnum; ", END"
  CLOSE #2
END IF
END

SUB ErrorStuff (num, click)
  ' This routine prints out the error statements.
  PRINT
  PRINT
  BEEP
  PRINT "***** ERROR AT LINE "; click; " *****"

  SELECT CASE num

  ABDX Programmer's Manual  B-87
CASE 1
    PRINT "Output file is already open. Aborting."
CASE 2
    PRINT "Output file is already closed. Aborting."
CASE 3
    PRINT "Question numbers are out of sequence. Aborting."
CASE 4
    PRINT "Too many lines for display screen. Aborting."
CASE 5
    PRINT "End of input file encountered before end of .TXT file. Aborting."
CASE ELSE
    PRINT "Undefined error."
    END SELECT

CLOSE
END SUB
Appendix C
Definition File Listings

H14.TXT

1, SITE OF PAIN at ONSET definition:
1,
1, Mark the response in the left column which represents the
1, site at the time the pain started. The corresponding area of the
1, diagram will then be highlighted. Occasionally, pain isn’t the
1, first symptom of an illness which later involves abdominal pain.
1, This would require an entry of NO PAIN.
2, SITE OF PAIN at PRESENT definition:
2,
2, Mark the response in the right column which represents the
2, site of pain at the time of examination. The corresponding area
2, of the diagram will then be highlighted.
3, END
TYPE OF PAIN definition:

INTERMITTENT
STEADY
COLICKY

It's especially important to distinguish between the types of pain. If the pain is constant and present the whole time, mark STEADY on your data sheet. If the pain is present the whole time but varies rhythmically in intensity, mark COLICKY. If your patient has times when he's free of pain, mark INTERMITTENT.

SEVERITY OF PAIN definition:

MODERATE
SEVERE

Do not ask the patient directly and do not expect to rely on the answer if you do. If the pain is obviously intense and is causing obvious distress such as sweating or shivering, then it is SEVERE, otherwise it is MODERATE. The difficulty in distinguishing between mild and moderate pain is so great that we prefer to call all pain moderate or severe. Be especially wary of relying on the patient's description since the threshold for pain varies greatly between people. A patient with mild or moderate pain may make a great deal of fuss about it. The patient who is quiet may be in severe pain. Use your own judgment.

AGGRAVATING FACTORS definition:

MOVEMENT
COUGH
BREATHING
FOOD
OTHER
NONE

These are factors which make the pain worse. The patient should be asked about each item specifically. The patient should be asked to actually perform some MOVEMENT, deep BREATHING and COUGH to see if his pain is aggravated.

PROGRESS OF PAIN definition:

BETTER
SAME
WORSE
Pain which has subjectively remained unchanged is termed SAME. The categories of BETTER and WORSE refer to subjective changes in pain prior to seeing the practitioner. It is often difficult to evaluate this category since abdominal pain can vary so much. In this instance, don't mark any of the choices. Instead, write 'VARIABLE' on the data sheet and skip this entry when performing data input.

DURATION OF PAIN definition:

- 12h or less
- 12-24h
- 24-48h
- 48+h

Acute abdominal pain is classically defined as pain beginning less than 48 hours prior to presentation. The term DURATION refers to the length of time which the patient has had the pain during this current episode. Similar pain in the past (i.e. at some time greater than 48 hours ago), should be entered under the category of PREVIOUS SIMILAR PAIN.

RELIEVING FACTORS definition:

- LYING STILL
- VOMITING
- ANTACIDS
- FOOD
- OTHER
- NONE

These are factors that make the pain subside. The patient should be asked about each item specifically.
NAUSEA definition:

PRESENT
ABSENT

NAUSEA refers to the feeling of being sick to one's stomach. It is possible to have nausea without vomiting and occasionally, vomiting without nausea. This category refers to the entire present episode, not just at the time he is seen by the practitioner.

VOMITING definition:

PRESENT
ABSENT

Ask if the patient has vomited at any time during this present episode of pain.

BOWELS definition:

NORMAL
CONSTIPATED
DIARRHEA
BLOOD IN STOOL
MUCUS IN STOOL

Identify any recent change in the patient's bowel habits. Remember that 'normal' bowel habits vary widely from one patient to another. BLOOD IN STOOL refers to either bright red blood (hematochezia) or black, tarry stool (melena). If the duration of the present illness is too short to be certain of a choice from this category, leave the entry blank on the data sheet and skip this category when entering data.

APPETITE definition:

DECREASED
NORMAL

This category is intended to reflect any recent change in the patient's appetite. If the patient typically has a poor appetite with no significant change during this current illness, then his appetite is NORMAL.

JAUNDICE definition:

PRESENT
ABSENT
The term JAUNDICE in the portion refers to an appearance of yellow color to the patient's skin or sclera. Mark PRESENT if you note it now or has been noticed recently by the patient.

URINATION definition:

NORMAL
FREQUENCY
PAINFUL
DARK URINE
BLOOD IN URINE

Note to any recent change in urinary habits. Mark FREQUENCY if the patient relates that he has been urinating more often than usual. DARK URINE may be due to gall bladder illness but occasionally indicates dehydration.

BLOOD IN URINE (either grossly or by Labstix) often indicates a stone in the urinary tract, especially when accompanied by flank pain.

END
PREVIOUS INDIGESTION definition

YES
NO

PREVIOUS INDIGESTION refers to gastrointestinal upset prior to, or as a prodrome to the present episode.

PREVIOUS SIMILAR PAIN definition:

YES
NO

Mark YES if your patient has had a bout of similar abdominal pain prior to the present episode.

PREVIOUS SURGERY definition:

YES
NO

Mark YES if the patient has had abdominal surgery. Only those operations where the peritoneum was entered should be counted. When in doubt, check for operative reports in the patient's health record.

Prior history of inguinal herniorrhaphy may be very important to the diagnosis, especially if there was incarceration of bowel involved. Note this history carefully, but do not enter it as a YES in the program.

PREVIOUS ILLNESS definition:

YES
NO

This requires judgment on the part of the practitioner. Answer YES if there are items in the history (including hospitalizations) which are thought to be pertinent to the present illness. If YES, add details to the back of the data sheet.

TAKING MEDICATIONS definition:

YES
NO

Mark YES if your patient is taking medication to relieve symptoms associated with this episode only. Any medication may be of importance. For example, if the patient is taking a non-
H44.TXT (cont'd)

5, steroidal anti-inflammatory drug, such as Motrin, this is 5, important to know, because this may contribute to ulcer disease. 5, Record all medications carefully, but do not enter YES unless it 5, is associated with the present illness as described above. 6, END
PERIODS definition:

NOT STARTED
CEASED
REGULAR
IRREGULAR

Categorize the typical pattern of the patient's menstrual cycle. NOT STARTED is reserved for patients who have never had a period and CEASED indicates that the patient is post-menopausal. REGULAR does not necessarily mean every 28 days, some women have slightly longer or shorter cycles. Additionally, women who are ordinarily regular, who have missed their last period may still be marked REGULAR. IRREGULAR indicates a long standing variable interval between periods or bleeding between periods.

LAST PERIOD definition:

NORMAL
LATE/OVERDUE

Ask the patient for the date of the last period and the one prior to that. If the last period was more than one week past its anticipated date, mark LATE/OVERDUE. There may be some variation from cycle to cycle, but a week is used here as the cut-off point.

Also mark LATE/OVERDUE if the date of the last period indicates that the patient is currently overdue for her period.

VAGINAL DISCHARGE definition:

Does the patient have a discharge, not to include vaginal bleeding, that is abnormal for her.

A scanty clear discharge of variable magnitude may be normal for some women.

Note a report of increased flow or frequency of discharge, or change in consistency, color or odor.

PREGNANCY definition:

IMPOSSIBLE
POSSIBLE
CONFIRMED

IMPOSSIBLE - The patient has not had intercourse recently.
It is important to make the patient understand that any intercourse however brief, particularly if the 'withdrawal' technique of contraception is practiced, may result in a pregnancy. Although no form of birth control is 100% effective, mark this response if you are confident that the patient is practicing adequate contraception.

POSSIBLE - The patient is sexually active without adequate contraception, or if you suspect improperly used or careless contraceptive technique. Strongly supported by late menses.

CONFIRMED - Strong suspicion that the patient is pregnant by history and examination, ideally confirmed by positive laboratory tests.

FAINT/DIZZY definition:

These terms may mean different things to different people. In the context of this program DIZZY refers to lightheadedness rather than the sensation of abnormal motion as is seen in vertigo.

Record both history of actual fainting spells or complaints of feelings of lightheadedness or dizziness as part of the current illness. This may indicate hypovolemia from blood loss or dehydration or may be secondary to pregnancy.

PREVIOUS GYN HISTORY definition:

Though a thorough gynecological history should be taken and recorded, only enter YES for a history of prior sexually transmitted disease, salpingitis, pelvic inflammatory disease, ectopic pregnancy or gynecological surgery.

END
TEMPERATURE definition:
Mark the appropriate range for temperature in degrees Fahrenheit.

PULSE definition:
Mark the appropriate range of values in beats per minute.

BLOOD PRESSURE (Systolic) definition:
Mark the appropriate range of values in mmHg.

BLOOD PRESSURE (Diastolic) definition:
Mark the appropriate range of values in mmHg.

END
MOOD definition:

NORMAL
DISTRESSED
ANXIOUS

Although interpretation of MOOD is very subjective it allows insight into the patient's psychological status. There is a subtle difference between DISTRESSED and ANXIOUS. A patient who is experiencing significant physical symptoms (such as pain, nausea, vomiting) may be DISTRESSED, but the patient who is primarily worried about his illness would be ANXIOUS.

COLOR definition:

NORMAL
PALE
FLUSHED
JAUNDICE
CYANOTIC

FLUSHED, is an important finding but is meaningful only if the patient's environment is not uncomfortably warm, which might cause flushing normally. A patient with JAUNDICE will have yellowish skin and/or sclerae (whites of the eyes). Patients who are CYANOTIC will present with a blue tint, especially around the lips and nail beds.

In some patients (especially blacks and orientals) these findings are difficult to appreciate; sometimes examination of the sclera and palm creases is helpful. If doubt exists, skip this category on the data sheet and when entering data into the computer.

WHITE BLOOD CELL COUNT definition:

Mark the appropriate range of values.

END
1, INSPECTION definition:
1, NORMAL
1, VISIBLE PERISTALSIS
1, DECREASED ABDOMINAL MOVEMENT
1, Look at the abdomen closely without touching it. VISIBLE
1, PERISTALSIS will appear as wave-like movement occasionally
1, accompanied by audible rushes.
1, To observe for DECREASED ABDOMINAL MOVEMENT, the patient
1, should lie on his back with knees flexed while the practitioner
1, holds his hand approximately 1 to 2 inches above the patient's
1, umbilicus. The patient is then asked to raise his belly to touch
1, the practitioner's hand. If the patient has difficulty doing
1, this, mark DECREASED ABDOMINAL MOVEMENT.
2, SCARS definition:
2, PRESENT
2, ABSENT
2, Mark PRESENT if the patient has either surgical scars or
2, scars indicating penetrating trauma to the abdomen.
3, GUARDING definition:
3, PRESENT
3, ABSENT
3, In the context of this program guarding is present when
3, there is voluntary tightening of the abdominal wall muscles,
3, when the practitioner attempts to palpate.
3, This can often be overcome by the gentle persuasion of the
3, examiner. Guarding must be distinguished from involuntary
3, tightening of the abdominal muscles and cannot be overcome by
3, gentle persuasion and reassurance. The latter is entered as
3, RIGIDITY.
4, RIGIDITY definition:
4, PRESENT
4, ABSENT
4, Rigidity is the involuntary tightening of the abdominal
4, wall muscles which cannot be overcome by the examiner's
4, reassurance. It is an important finding since it often indicates
4, peritonitis. Rigidity must be distinguished from voluntary
tightening of the abdominal muscles which can be overcome gentle persuasion, which is entered as GUARDING.

**BOWEL SOUNDS definition:**

- NORMAL
- ABSENT
- HYPERACTIVE

This category requires judgment since the difference between normal and abnormal bowel sounds may be difficult to appreciate. Use this rule: unless bowel sounds are markedly increased or decreased, mark NORMAL.

Constant gurglings with periods of rushing, high-pitch squeaks, or tinkling are HYPERACTIVE. Constant gurglings alone are probably NORMAL. To mark absent you must listen for five minutes hearing no, or only one or two gurglings, mark ABSENT. One gurgling sound per minute, is probably normal.

**DISTENTION definition:**

- PRESENT
- ABSENT

Distention is a generalized swelling or bloating of the abdomen and should be distinguished from a mass or localized swelling.

**MASSES definition:**

- PRESENT
- ABSENT

A mass is a localized or discrete swelling, visible or palpable on examination. Generalized swelling of the abdomen is entered as DISTENTION.
TENDERNESS definition:

Enter the appropriate response for the location of most significant tenderness. The corresponding area of the diagram will be highlighted.

END
MURPHY'S SIGN definition:

PRESENT

ABSENT

MURPHY'S SIGN may be elicited as the practitioner hooks his fingers under the patient's right costal margin at the midclavicular line and asks the patient to inspire deeply. This is best done with the patient lying on his back with his knees flexed. If the patient exhibits reflex inhibition of inspiration, sometimes described as a catch, a positive Murphy's sign is PRESENT.

REBOUND TENDERNESS definition:

PRESENT

ABSENT

There are three steps to eliciting rebound tenderness:

1. Slowly depress the tender area.

2. Hold until the pain lessens and the patient relaxes.

3. Quickly withdraw to skin level only.

If the patient grimaces or demonstrates other obvious signs of pain upon withdrawal, rebound is present. The practitioner should not have to ask the patient.

This maneuver should be saved for late in the exam, since it may be difficult to get the patient to relax afterward.

RECTAL EXAMINATION definition:

NORMAL

MASS FELT

LEFT TENDER

RIGHT TENDER

GENERAL TENDERNESS

The rectal exam is often neglected. No abdominal exam is complete without the rectal examination.

Some degree of discomfort is normal during the rectal exam. The patient should be verbally prepared for the examination and the examiner should be as gentle as possible. The patient should be asked if he feels pain as the practitioner moves his finger right, left and centrally. If there is tenderness on both sides, mark GENERAL TENDERNESS even though one side might
If the guaiac test, for occult blood in the stool, is positive, the patient should be examined for obvious sources such as hemorrhoids or a fissure.

VAGINAL EXAMINATION definition:

NORMAL
RIGHT TENDERNESS
LEFT TENDERNESS
CERVICAL TENDERNESS
GENERAL TENDERNESS
MASS
BLOOD (CLOTS)

Vaginal examination should be performed if there is any suspicion of gynecological disease. This involves inspection, bimanual internal examination and speculum examination.

Unilateral tenderness may be indicative of ovarian or tubal involvement. Cervical tenderness, particularly with cervical motion may indicate ectopic pregnancy or PID. Palpation with one hand on the lower abdomen above the pubis and two fingers of the other hand internally should help identify any masses.

Microscopic examination of any vaginal discharge may be useful, but does not effect this program's diagnosis.
Appendix D
Help File Source Listings

HABGY.ASC

Select Appropriate Female Database

At this time, you select the appropriate female database to use of the two available. The computer will high-light its recommendation, but you may override its decision.

The program recommends that you select the GYNECOLOGICAL DATABASE if the patient’s age is between 15 and 50 and she presents with central, lower abdominal, or flank pain at present. The GENERAL DATABASE is suggested for all other patients.

NOTE - Of the thousand cases comprising the gynecological database, very few patients presented with upper abdominal pain. Of those very few patients, most had a UTI with both upper abdominal pain and flank pain.
Welcome to the world of computer-assisted diagnosis for abdominal pain. The following instructions should enable you to run me with little difficulty. Please remember that I am to be used as an aid only. I cannot take your place or make decisions for you.

I am designed to aid you in making a diagnosis of abdominal pain. I only look at the six most common causes of abdominal pain in the submarine crew population. Based on the answers you give me I will then give the probability for each of the causes I know. You will then be able to change any of the answers if you made a mistake when answering the questions.

I can reliably aid you in differentiating the 5 illnesses which represent both the most common and the most serious causes of acute abdominal pain.

In addition, a 6th category, non-specific abdominal pain, is intended to represent those cases which are non-surgical, not life-threatening, and, therefore, not reasons for evacuation.

IMPORTANT—Not all diseases causing acute abdominal pain are considered. Input of symptom complexes associated with other diseases will result in my diagnosis of one of the 6 categories most closely resembling that disease.

YOUR JUDGMENT MUST TAKE PRECEDENCE when any doubt exists. I do not have the capability to think or make the subjective evaluations which are so important in medical diagnosis.

When using the program, be sure always to look at the bottom line. This will usually tell you which commands you may use. Normally you will use the up, down, left, and right arrows to move the cursor in their respective positions.

Press the letter 'N' to take you to the next page. Press the letter 'P' to take you to the previous page, i.e., the one you just left. Press the RETURN/ENTER key to select your response which is highlighted by the cursor. The key is located on the right side of the keyboard, usually above the right shift key. Press the letter 'X' to exit the section and return to the previous menu. Press '?' (the question mark) to receive help.

If you are in the history or physical exam section, pressing the '?' will give you the definition of the question corresponding to the high-lighted response and pressing the TAB key will take you to the first response of each question. Try it when you get there. It can save you time.
Options:

Select the response corresponding to your diagnosis. If your diagnosis is not listed, select OTHER. You will then be asked to enter your diagnosis. Type in your diagnosis followed by pressing the ENTER/RETURN key.

If OTHER was not selected then your response will be compared to the computer derived diagnosis. The computer will then state whether or not it agrees with you and if it doesn't, it will then check for key questions on which you and it disagreed. If any are present it will then print them.
This page is the main summary page. The graph to the left shows the computed probability for each diagnostic category. The tallest bar corresponds to the most likely diagnosis. The program is "most sure" of the diagnosis when it is greater than 90% and "less certain" when the probability is less than 90%. To help keep this in mind, a line is drawn across the graph at the 90% level.

The date and time of the exam are listed in the upper right hand corner. If the case is real, the patient's SSN will also be listed there. The type of case - real or simulated - is shown in the lower right hand corner along with the name of your vessel.

OPTIONS

1. CHANGE INPUT DATA - Choose this option if you need to go back and change any of your responses.

2. ANOTHER DIAGNOSIS - Choose this option to enter a new case, either real or simulated. Note - The current case is saved on disk and then all responses are erased from memory. This is equivalent to restarting the program.

3. DISPLAY TREATMENT - Select this option to access treatment protocols. Protocols exist for each diagnostic category.

4. DISPLAY H & P - Select this response if you want to list your history and physical exam symptom entries. History symptoms are given on one page and physical exam findings are given on another page. If you have a printer connected to the computer, you can get a hard copy of the symptom entries (while they are on the computer screen) by pressing the Shift key and the PRTSC key at the same time.

5. END INTERACTION - Choose this option to exit the program. You will be returned to the operating system of the computer so that you may run other programs. NOTE - If you desire to have the SF-600 printed for a patient entered into the program, you must have selected either this response or ANOTHER DIAGNOSIS to save the patient's data on the disk for later retrieval by the SF-600 printing program.

6. DISPLAY ABD DX'ES / DISPLAY GYN DX'ES - This response toggles back and forth between the regular abdominal disease data base and the gynecological database. If the GYN database is displayed, DISPLAY ABD DX'ES will be on the menu. If the non-gynecological abdominal pain graph is displayed, then DISPLAY GYN DX'ES will be on the menu.

NOTE - This option is displayed only if the patient is female.
Choose the response for which you would like the treatment protocol. To exit this menu, choose the last response, EXIT THIS DISPLAY.

Initially the response pointed to is the diagnosis chosen by the computer. Use the arrow keys to select another choice.

Remember that pressing the SHIFT key and the PRISC key at the same time will give you a copy of the current display screen printed on the printer (if you have one connected). This will give you a copy of the treatment plan page. You will need to check your specific computer manual for the PRISC key since it’s location varies from machine to machine.
Main Options:

1. **REAL CASE** - Select this response if you have an honest-to-goodness patient that you want the computer to diagnosis.

   NOTE- Real Cases are stored so that the data you entered can be used to print out the SF-600 entry for the patient. Only Real Cases are stored in this manner, so anytime you have a real patient be sure to mark him as such.

2. **SIMULATED CASE** - Select this response for training only. If you want to try different responses to see how the probabilities vary with changes in the history or physical, this is the case option to use. If you have a real patient, you can go ahead and enter him as a Real Case, so that his data is stored and then select a Another Diagnosis on the summary page so that you return to this menu and then can select Simulated Case to play around with his responses. Remember that although data is stored on the disk, it is not stored so that an SF-600 entry can be made.

3. **TRAINING PROGRAM** - Select this response if you desire to run the training program. This program will first give you a patient narrative. Using this, you then can fill out a data sheet, make your diagnosis, and then compare it to the computer derived diagnosis. This program is for your own training. No record is kept on how often the program is used or your scores.

4. **LAST REAL CASE** - Select this response and the computer will put the latest real case into memory. This will allow you to review which responses were given at the time. Also, if you have a real patient for whom you are doing serial exams because of a confusing or early presentation, you can call in the previous exam and update his change since the previous exam instead of having to reenter all of the history and physical each time. Remember to change the time of the exam so that you can keep the different cases separate.

5. **LAST SIMULATED CASE** - Select this response to have the computer get the last simulated case and place it in memory. This allows you to come back to the previous simulated case at a later date and continue with simulation.

6. **INSTRUCTIONS / HELP** - Select this response for much more in-depth instructions for using the Abdominal Pain Diagnosis Program in general. This selection includes what keys to use and how to move around to different parts of the program.

7. **GENERATE SF600** - Select this response to run the SF600 generation routine. If your computer does not have much installed memory, or if
you have many memory-resident programs installed in the system, the routine may cause the computer to "crash" or "lock up" when you attempt to use it while in this program. If that happens, do not try to run the SF600 generation routine from this program until you either add more memory to the computer or you remove some of the memory-resident programs as appropriate.

8. DISPLAY TREATMENT - Select this option to access treatment protocols. Protocols exist for each diagnostic category considered by the program. Both male and female treatment protocols are shown here.

9. EXIT PROGRAM - Select this response to leave the program. No data will be stored at this exit.
OPTIONS:

1. GO TO HISTORY PAGES - This area consists of several pages dealing with the patient history. Here is entered all the data concerning the patient’s present and past history relevant to the computer. There are 4 pages for male patients and 5 pages for female patients.

   NOTE - If on the first page, pressing 'P' will return you to the data entry menu. If on the last page, pressing 'N' will return you to the data entry menu. 'Q' or the 'Esc' key will return you to the data entry menu.

2. GO TO PHYSICAL EXAM PAGES - This area consists of 5 separate pages dealing with the patient’s physical exam. The results of the physical exam are entered here. See NOTE above.

3. MAKE DIAGNOSIS - This selection will take you to the diagnosis area to view the computer’s diagnosis. If you do not answer enough questions in the history and physical sections the computer will not have information to make a reasonable diagnosis and so the computer will not allow you to proceed until you have gone back and answered enough of the program.

   If you have answered enough questions you will then be asked for your diagnosis. You must enter your diagnosis before the computer will show you it’s computed diagnosis. Next comes the summary page where you may look at a graphic representation of the computed probabilities, treatment protocols, history and physical summaries, etc.

   NOTE - If you chose the last real or simulated case, you will not be asked to give your diagnosis before going on to the summary unless you change any answers to any history, physical exam, or age questions.

4. GO TO SSN/AGE/TIME PAGE - Normally you probably will not use this selection if you have selected a real or simulated patient since you went through that page before getting to this menu. This page allows you to change the age, date, time, and SSN of the patient. Note that you do not need to change the SSN for a simulated patient. It will be set to 000-00-0000.

5. RETURN TO MAIN OPTION PAGE - This response will return you to the Main Option Page. Choose this option if you entered the Data Entry Option Page by mistake.
This is the training main summary page. It is very similar to the summary page on the ABDX program. The graph to the left shows the computed probability based on your data responses for each category. The bar graph shows pictorially the relative probability for each diagnostic category.

Note - Since the display is based only upon the information you entered, the actual training case diagnostic probabilities will be correct only when you have entered all of the responses correctly.

For a real patient, you should be more sure of the diagnosis if the computed probability is greater than 90% and you should be less certain of the diagnosis if the probability is less than 90%. To help you keep this in mind, I have drawn a line across the graph at the 90% probability level.

The patient's SSN and date and time of the exam are listed in the upper right hand corner. Your score will be listed below the date. This score is only for your own use. No record of it is kept. The score is based on the ratio of your correct responses to the actual case data responses. The maximum score is 100% which means that your entered responses agreed with all of the actual responses of that particular case. The minimum score will be above 70, since you will not be able to continue to the summary page if you have too many incorrect responses. The type of case and case number will be shown in the lower right hand corner. Also, the name of the vessel to which the program is assigned will be shown in the lower right hand corner.

If you have a printer capable of printing graphics connected to the computer and the GRAPHICS.COM program has been installed so that a screen dump may be obtained, then you can get a copy of the summary page printed on the printer by pressing the CTRL key and the PRIS key at the same time while the summary page is shown on the screen of the computer. If you do not understand this paragraph that is OK. This paragraph deals only with getting a printed copy of the summary screen including the bar graph. If you desire to keep a copy of the summary page, ask someone that has had experience with the IBM-compatible computers to help.
OPTIONS

1. SHOW MISSED ITEMS - Choose this response to see which items you missed. Those with the word "(omitted)" beside the item are correct responses which failed to select. All others displayed are responses which you should not have chosen.

2. CHANGE INPUT DATA - Choose this category if you need to go back and change any of your responses. Your case will not be stored on the disk if this option is selected.

3. ANOTHER CASE - Choose this response if you desire to try a new training case. Note - all responses are cleared when this response is chosen. This is equivalent to restarting the program.

4. DISPLAY TREATMENT - Treatment protocols are shown here. Protocols exist for each diagnostic category. You may select any of those.

5. DISPLAY H & P - Select this response if you desire to have your responses listed from the H & P. All of your responses from the history are listed on a page and those from the physical exam are listed on another page. If you have a printer connected to the computer on which I am running then you can get a copy printed by pressing the CTRL key and the PRScSC key at the same time while looking at each of the pages on the screen.

6. END INTERACTION - Choose this response if you are finished. You will be returned to the operating system of the computer so that you may run other programs.
Welcome to the Abdominal Pain Diagnosis (ABDX) training program. This program is designed to help you to use the ABDX Program more effectively by allowing you to solve imaginary cases. The format for this program has been kept as close to that of the ABDX Program as reasonably possible. On similar screens, the training version will have double-lined boxes while the main ABDX displays will have single-lined boxes. Also, the screen heading colors will differ (if you have a color monitor).

As with the main ABDX Program, the basic instructions are listed at the bottom of each page of text on this screen. If you need more help, you may press the question mark " ? " key for more information in most cases (as you did to get here).

MAIN OPTIONS:

1. EASY CASE NARRATIVE - Choose this response for a straightforward patient narrative. You will be prompted to enter a case number. Currently there are 50 cases. The narrative will be presented in 2 pages: a history page and a physical exam page. If you have a printer connected to this computer you can get a printed copy of the case narrative by pressing the PRITSC key on your computer. This will cause the printer to print a copy of this screen (make sure your printer is on).

2. HARDER CASE NARRATIVE - Choose this response for a less straightforward patient narrative. You will be prompted to enter a case number. These are the same cases as those above. Only the narrative is different.

3. ENTER DATA - Choose this response when you are ready to enter the data on a case. If you have just finished reviewing a case, it will be assumed that that case is the one you want. However, you will be asked to confirm that. If you desire to use another case, enter the new case number. If you have not reviewed a case, then you will be asked to enter the desired case number. If you desire to return to the main option menu, when you are asked to enter a case number, just press the RETURN/ENTER key. Once you have selected a case under this option, you will be taken to the ABDX Program where you will enter the data. If you miss too many items for that particular case, you will not be able to continue to the computerized diagnostic section. This is to keep people from attempting to use real patients on the training program.
SF600 Output Selection Page

Use the cursor keys to high-light the method to print the SF-600. Press ENTER/RETURN to select the high-lighted response.

Select CONSOLE to print the SF-600 only on the screen.

PRINTER will print the SF-600 on your printer. The printer routine is specifically designed to use actual SF-600 paper. The routine will automatically double space and use the margins found in the SETUP.DAT file. See your user's manual for information on changing the default margins if these are unsatisfactory.

FILE prints the SF-600 to a file, where you can later modify it with your favorite word processor.
Appendix E
Treatment Protocol Listings

TX1.ASC

Acute Appendicitis (APPEND)

1. TREATMENT PROTOCOL AT A GLANCE (see detailed discussion of treatment below; this section is for quick reference).

Definitive treatment of acute appendicitis is surgical.

Notify command of need for immediate MEDEVAC.

The treatment goals pending MEDEVAC:

a. bed rest
b. intravenous antibiotics
c. intravenous fluid and electrolyte replacement
d. intestinal rest-NPO
e. abdominal ice packs
f. analgesia

Place patient at strict bedrest with head of bed slightly elevated. Monitor vital signs, fluid intake and output, and progress of symptoms and examination.

b. Appropriate antibiotic therapy is crucial:

1) Cefoxitin 2 gm IV every 6 hours; and
   Gentamicin 80 mg IV every 8 hours; or

2) For patient's with a history of Penicillin or Cephalosporin allergy only:
   Gentamicin 80 mg IV q8h; and
   Metronidazole (Flagyl):
   Loading dose - 15 mg/kg body weight IV infused over one hour (approximately 1 gm for average sized male); and
   Maintenance dose - 7.5 mg/kg IV infused over one hour every 6 hours (approximately 500 mg).

Slow IV infusions are best accomplished by mixing in small bags of IV solution and running "piggy backs."

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c. Start IV D5NS or D5LR at 150 ml/hr and adjust rate as needed to maintain adequate hydration. Monitor urine output as an indicator of hydration status.

d. Make patient NPO. Place NG tube to low-intermittent suction.

e. Abdominal ice packs intermittently as tolerated.

f. Analgesics are usually contraindicated since they will mask the symptoms and make it difficult to follow the progress of the illness.

2. DISCUSSION

Acute appendicitis results from a bacterial invasion of the appendix with inflammation. Incidence is highest in adolescents and young adults, peaking between ages 15 and 24. Typically, the pain is initially poorly localized in the periumbilical region. This pain represents irritation of the lumen of the appendix itself. Gradually the pain shifts to the right lower quadrant, becoming constant and discrete as the inflamed appendix begins to irritate the surrounding peritoneum. Anorexia, fever, and diminished bowel sounds are usually noted; nausea, vomiting, and diarrhea are variable. Temperature, pulse, and respiratory rate may be only slightly elevated unless perforation occurs.

A history of right lower quadrant pain and a finding of right lower quadrant tenderness and guarding are the most important indicators in acute appendicitis. Since the appendix may lie dorsally, the rectal examination is also extremely important. The white blood cell count is usually elevated above 10,000 with a preponderance of neutrophils. The urinalysis may also reveal an increase in WBC’s. There are no specific laboratory tests.

3. DIFFERENTIAL DIAGNOSIS

Other illnesses that produce findings that may mimic acute appendicitis and which should be considered are:

a. mesenteric adenitis
b. Meckel’s diverticulitis
c. diverticulitis
d. regional enteritis
e. inguinal hernia
f. ureteral calculus
g. perforated ulcer
h. acute cholecystitis

a. Mesenteric adenitis can be indistinguishable from acute appendicitis, but the pain may not be as well localized and the white blood cell count may contain an increased fraction of lymphocytes. Initial medical management is the same as for appendicitis.

b. Meckel’s diverticulitis may also closely mimic the presentation of acute appendicitis if the diverticulum is in its usual position in the right
lower quadrant. Meckel’s diverticulitis may also lead to other intraabdominal complications including bowel obstruction and G.I. bleeding. The definitive treatment, as with appendicitis, is surgical; initial medical management is the same as outlined below for appendicitis.

c. Diverticulitis confined to the cecum can be hard to distinguish from appendicitis. However, it more commonly involves the descending (left) colon. These symptoms are often intermittent and less severe, but may be acute. This condition has been described figuratively as a "left-sided appendicitis." The presence of diverticular disease does not preclude development of acute appendicitis concomitantly. The initial medical treatment is the same as for appendicitis.

d. Regional enteritis attacks are usually preceded by bouts of crampy abdominal pain and diarrhea. An attack of regional enteritis involving the terminal ileum, located in the right lower quadrant, can be indistinguishable from acute appendicitis. The pre-existence of regional enteritis does not preclude development of acute appendicitis concomitantly. Initial medical management is the same as for appendicitis. Additional treatments include steroids and analgesics, but these should not be used unless the diagnosis is firm and a Medical Officer is consulted.

e. An inguinal hernia can be easily distinguished by its sharp, localized pain which radiates into the testicle and by a palpable lump in the inguinal canal accentuated by valsalva. Treatment is symptomatic pending surgical consultation ashore. Reduction should be attempted. If the hernia is not reducible (i.e. incarcerated), it will be necessary to follow the patient closely. If the hernia becomes strangulated, the patient may present with the symptoms of an acute abdomen. In this latter case use the medical management outlined for appendicitis.

f. Ureteral calculus - see RENAL COLIC

g. Perforated ulcer - see PERFORATED DUODENAL ULCER

h. Acute cholecystitis - see CHOLECYSTITIS

4. TREATMENT OF ACUTE APPENDICITIS

Definitive treatment of acute appendicitis is surgical. Medical management can, however, avert or delay serious morbidity in many cases. Treatment includes bowel rest and aggressive antibiotic therapy. The body’s own primary defense consists of omental migration toward the inflamed appendix in an attempt to surround and confine the infectious process.

Arrange immediately to MEDEVAC the patient. The treatments outlined are intended to stabilize the patient while awaiting evacuation. However, MEDEVAC’s are not always immediately available or operationally feasible. Always remain prepared to care for the patient for a prolonged period of time. The treatments as outlined are written for this contingency.

The treatment regimen should consist of the following:
a. bed rest
b. intravenous antibiotics
c. intravenous fluid and electrolyte replacement
d. intestinal rest - NPO
e. abdominal ice packs
f. analgesia

a. Place patient at strict bed rest with head of bed slightly elevated (semi-Fowler's position). Monitor vital signs, fluid intake and output, and progress of symptoms and examination.

b. Appropriate antibiotic therapy is crucial. Bowel flora will be predominantly gram-negative organisms, enterococci (Streptococcus faecalis), and anaerobes. Specific intravenous antibiotic regimens are as follows:

1) Cefoxitin 2 gm IV every 6 hours; and
   Gentamicin 80 mg IV every 8 hours; or
2) For patients with a history of Penicillin or Cephalosporin allergy only:
   Gentamicin 80 mg IV q8h; and
   Metronidazole (Flagyl):
   Loading dose - 15 mg/kg body weight IV infused over one hour (approximately 1 gm for average sized male); and
   Maintenance dose - 7.5 mg/kg IV infused over one hour every 6 hours (approximately 500 mg)

Slow IV infusions are best accomplished by mixing in small bags of IV solution and running "piggy backs."

c. Intravenous fluids are utilized to maintain fluid and electrolyte requirements in the face of increased need and decreased intake. Dextrose 5% and Lactated Ringer's solution (D5IR) should be started at 150 ml/hour. Additional fluid replacement will be needed for the additional losses caused by fever, diaphoresis, emesis, diarrhea, and nasogastric suctioning. Fluid and electrolyte replacement must keep pace with losses to prevent dehydration and electrolyte imbalance. Monitor the urine output to maintain at least 1000 ml/day (or 1/2 ml per kg body wt per hour) and increase fluid intake as needed. Urine specific gravity and hematocrit are also good indicators of the adequacy of hydration.

d. Intestinal rest is accomplished by making patient NPO (nothing by mouth) and by nasogastric suctioning. Low-intermittent suction (1-3 psi) is most effective. Irrigation of the tube with small volumes of
saline may be needed periodically to maintain patency.

e. Abdominal ice packs applied to the right lower quadrant may
decrease inflammation and offer some psychological benefit to the
patient. If used as an adjunct to the above treatment regimen, it
should be continued only if subjective relief is obtained. Use
intermittently to avoid a reduction in the rate of diffusion of
antibiotics to the region.

f. Analgesics are relatively contraindicated since they will mask the
symptoms and make it difficult to follow the progress of the illness.
However, it may become necessary to offer the patient some pain relief
by judicious use of morphine or Demerol.

5. USUAL COURSE WITH TREATMENT

Response to the therapeutic regimen will be slow initially. The
patient's discomfort will resolve over the first 48 hours, temperature and
pulse will remain elevated for 48-72 hrs, and the leukocytosis will continue
to rise well beyond 72 hours as the inflammatory response peaks and begins
to resolve. By 96 hours the patient's symptoms should have abated, and he
should be ambulatory. A clear liquid diet should be tolerated when bowel
sounds return and the pain resolves. At this point, intravenous fluids can
be decreased or discontinued as appropriate. Antibiotics must be continued
for at least 10 days.

6. COMPLICATIONS AND THEIR MANAGEMENT

Perforation, diffuse peritonitis and/or abscess formation are the
principal complications of concern. The incidence of these complications
should be significantly reduced in patients expeditiously treated as
outlined above.

a. Perforation and diffuse peritonitis will result in a rapid
deterioration of the patient's condition as indicated by:

1) progressive tachycardia, fever, and tachypnea

2) a diffusely distended, tender, silent, rigid abdomen despite
nasogastric suction,

3) difficulty maintaining adequate hydration and electrolyte
balance despite vigorous fluid replacement.

These signs can develop with frightening rapidity during any stage of
management of an acute appendicitis and are further indications for
immediate MEDEVAC. Continue fluid and antibiotic therapy while observing
for indications of shock. Septic shock is treated with supportive measures
in an effort to maintain blood pressure and adequate tissue perfusion.
Place the patient in Trendelenburg and use fluid boluses as necessary.

b. A right lower quadrant mass may indicate the formation of an

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abscess around the inflamed appendix. A mass may develop, however, as the inflamed appendix is walled off by omentum or adjacent viscera, and thereby represent resolution rather than a complication. If the mass is accompanied by improvement, an abscess is less likely. If the fever and abdominal examination fails to improve, an abscess may be forming. Fluids and antibiotics should be continued with close observation for signs of perforation. Abscess formation is not a critical event and can be managed surgically at a later date as long as medical management is continued.
The category of NONSAP is reserved for causes of abdominal pain which are non-surgical and not life threatening, and are amenable to symptomatic treatment. This category is not meant to cover all maladies not included in the remainder of the program, but, rather, is meant to include those illnesses which are likely to be self-limited and, therefore, not reasons for MEDEVAC. NONSAP includes some specific diagnoses requiring specific treatments. In addition NONSAP is used for those patients whose symptoms are non-specific and resolve spontaneously without a diagnosis being made.

Peptic ulcer disease (PUD) is included in this section. Its diagnosis and treatment are discussed below. One of the complications of PUD, perforated duodenal ulcer, is treated as a separate diagnosis and may be reviewed from the REVIEW TREATMENTS menu.

Peptic Ulcer Disease (PUD)

1. DISCUSSION

PUD will affect 1 person in 10 during his lifetime. The stomach normally secretes a highly corrosive acid to aid in the digestion of food. The stomach also has defenses to protect itself from these secretions. A disruption of this balance between acid secretion and the protective mechanisms can result in damage or destruction of the stomach lining. Emotional stress, cigarette smoking, alcohol abuse, and many drugs have been cited as risk factors for PUD. Some drugs may alter the stomach's protective lining and allow damage to occur. Family history may play a role. Contrary to popular belief a spicy diet plays no role in the development of ulcers. The stomach's normal secretions are far more acidic than any spice or food that the patient could eat. Ulcer disease tends to be chronic with exacerbations and remissions. The duration of symptoms will vary, most cases resolve without complication if properly treated.

The pain of ulcer disease is often described as a steady, gnawing, burning ache in the epigastrium radiating laterally, usually to the right. The pain characteristically occurs 1/2 to 2 1/2 hours after meals and is rapidly relieved by ingestion of food or antacids. The temporal relationship to meals and the history of relief of the pain with food are important diagnostically. Also characteristic is the history of pain in the middle of the night and the absence of pain upon awakening in the morning.

A history of melena or black, tarry stools is indicative of upper gastrointestinal bleeding. Ask the patient specifically about changes in their stool or bowel habits. Patients often fail to volunteer this history.
The physical examination may be non-specific except for tenderness corresponding to the location of the pain in the epigastrium. Test the stool for occult blood and draw blood for a hematocrit to rule out bleeding.

2. DIFFERENTIAL DIAGNOSIS

The vague initial symptoms of a new ulcer can sometimes cloud the diagnosis. Several other illnesses may produce similar pain in the epigastrium. A partial list of the more common ones follows:

a. gastritis
b. gastroenteritis
c. cholecystitis
d. pancreatitis
e. hepatitis

a. Gastritis is a diffuse more superficial inflammation and degeneration of the gastric mucosa. History will help differentiate it from PUD in that the symptoms are usually aggravated by food rather than relieved. Initial management is the same as for PUD.

b. Gastroenteritis may initially present as a crampy pain in the epigastrium but will quickly involve symptoms of nausea, vomiting, and diarrhea, thereby differentiating it from ulcer disease. Gastroenteritis is usually viral and accompanied by symptoms of fever, myalgias, and malaise. The course is usually self limiting and benign, but bowel rest and dehydration may necessitate IV hydration.

c. Cholecystitis – see CHOLE

d. Pancreatitis is associated with duodenal ulcer, cholecystitis, trauma, and alcoholism and will present as a boring epigastric pain radiating to the back. Signs and symptoms of peritoneal irritation are sometimes present. Antacids will not relieve the pain of pancreatitis. Food and particularly fatty foods will exacerbate the pain. Treatment should include bowel rest, with absolutely no fatty foods or alcohol permitted.

e. Hepatitis may initially present with a dull epigastric or right upper quadrant pain. The patient may complain of mild constitutional, flu-like symptoms or may feel quite well. Low grade fever may be noted. Jaundice may be noted, pay particular attention to the sclerae. "Coca-cola" urine is often the first sign. The liver edge is often apparent and may be tender on gentle palpation. Treat patient with bedrest and symptomatically. Though most causes of hepatitis are not highly infectious, isolation is advisable. Preventing contact with the patient’s secretions is adequate. Some patient’s may have a fulminant course and some rare cases are fatal. Those cases that require MEDEVAC should be self-evident.

3. TREATMENT OF PEPTIC ULCER DISEASE
The mainstay of ulcer therapy is the reduction of gastric acidity through neutralization and decreased secretion. This is accomplished with a regimen of antacids and a relatively new class of drugs, the H-2 blockers, that inhibit acid production. Food adequately buffers stomach acidity for approximately 90 minutes, after which the stomach is empty and secreting un-neutralized acid. Antacids taken 1 hour after meals will effectively buffer acid for an additional 2 hours.

A liquid antacid (Maalox, Mylanta) and Cimetidine (Tagamet), an H-2 blocker, are used according to the following regimen:

a. ACUTE CASE

Liquid antacid 30 ml at 1 and 3 hours after meals and once before bedtime. This regimen should be continued for 2 months.

Cimetidine (Tagamet) 300 mg PO qid for at least 4-6 weeks.

b. OCCASIONAL PAIN: 15-30 ml of liquid antacid PRN.

c. RECURRENCE: Treat as an acute case.

The diet should be modified to decrease fatty foods, as they stimulate acid secretion. Alcohol, caffeine, and smoking should be limited if not eliminated. Aspirin and other drugs in the non-steroidal anti-inflammatory drug (NSAID) class (Motrin, Tolectin, Indocin, etc.) should not be used except as absolutely necessary.

4. USUAL COURSE WITH TREATMENT

Most patients treated with the above regimen will have at least partial relief of their pain immediately. A gradual diminution of all symptoms within 2 to 4 weeks follows. Recurrences exacerbated by life-style (i.e. diet, alcohol, tobacco) are common and should be treated as acute cases.

5. COMPLICATIONS AND THEIR MANAGEMENT

The most common complications of peptic ulcer disease are intractable pain, hemorrhage, and perforation. These complications develop in 10-20% of symptomatic cases. Interestingly, 20-30% of all hemorrhage and perforation cases occur with no antecedent history of ulcer symptoms. Less often, the complications of obstruction and intractable pain will arise, requiring definitive (surgical) treatment.

Intractable pain may be an indication for surgery. The patient should be transported to a shore based facility when possible.

Hemorrhage will be evident as either vomitus which is colored bright red (hematemesis) if the bleeding is profuse or containing older, partially digested blood having a "coffee grounds" appearance. Black, tarry stool (melena) may occur if the bleeding is slow and subclinical.
Hematemesis is a medical emergency and can result in hypovolemic shock or death. It should be treated with the aim of maintaining the patient’s blood pressure and fluid and electrolyte balance while preparing him for MEDEVAC. Start the IV with Normal Saline or Lactated Ringer’s at maintenance rate (125-150 ml/hr). Be prepared for massive infusions to counteract the potentially massive blood loss from an ulcer which has eroded an artery within the duodenal wall. Additional fluid replacement should be calculated to compensate for the extra fluid losses from temperature elevation, diaphoresis, emesis, diarrhea, and nasogastric suctioning as well as estimated blood loss. Fluid and electrolyte replacement must keep pace with losses to prevent dehydration and electrolyte imbalance. Serial hematocrits will permit a rough estimate of the magnitude of the bleed. Remember, however, bleeding does not lower the hematocrit until the volume has been replaced either by IV solutions or the body’s own fluid reserve. Monitoring of the urine output is a good indicator of the adequacy of hydration. If the bleeding is profuse, an attempt should be made to stop the hemorrhage using iced saline lavage. The patient should be kept NPO and a nasogastric tube placed. Iced saline lavage should be administered via the nasogastric tube until the lavage is clear.

Although melena is a cause for concern and investigation at the earliest convenience, it is not life-threatening and can be treated with the acute case protocol above and followed with serial hematocrits. Melena supports the diagnosis of FUD, but is not diagnostic in and of itself.

Perforation and obstruction should be managed by the protocols for PERFDU and SMBORS, respectively.
Renal Colic (RNCOLIC)

1. TREATMENT PROTOCOL AT A GLANCE (see detailed discussion of treatment below; this section is for quick reference).

   **Analgesia:**
   
   Demerol 50-150 mg IM q 3-4 hours

   **Hydration:**
   
   D5NS at 150-200 ml/hour

2. DISCUSSION

Renal colic is caused by the passage of a calculus or stone, through the renal pelvis or ureter or other cause of acute ureteral obstruction. It presents with the sudden onset of severe, sharp pain in the flank and upper abdomen with radiation to the lower abdomen, scrotum (or labia) or thigh area. The pain is intermittent, but without complete remission between attacks. This is described as wave-like fluctuations in the pain or colic. The pain typically is described as the worst ever experienced by the patient and has been said to be worse than child-birth. A history of milder symptoms or of past stones is often elicited. Nausea and vomiting may occur.

The physical examination reveals costo-phrenic angle and flank tenderness without rebound. Fever and chills as the stone passes are not uncommon. Gross or microscopic hematuria are usually evident. Pyuria or crystalluria may be noted. Some stones will be visible on plain films of the abdomen, others only on IVP.

3. DIFFERENTIAL DIAGNOSIS

Renal calculi are not always associated with classic flank pain or referred pain. Rule out other causes of intra-abdominal pain, especially the potentially surgical cases.

4. TREATMENT OF RENAL CALCULI

Treatment of uncomplicated renal colic consists of analgesics and hydration.

   a. Large doses of narcotics may be necessary. The usual drug of choice is Demerol in the following dosage:

   Meperidine (Demerol) 50-150 mg IM every 3-4 hours as needed.

   Doses at the higher end of this range are typically needed.
subcutaneous route may be used, but will be slower acting. Nausea and vomiting are common and may be aggravated by the Demerol. For this reason Demerol is often given concomitantly with an anti-emetic. Most anti-emetics will potentiate CNS depressants, and will, therefore, necessitate lower doses of narcotics.

CAUTION: Whenever narcotics are used, the opiate antagonist naloxone (Narcan) should be kept available. If the patient should demonstrate excessive CNS depression, respiratory depression, or hypotension, 1-2 ampules (0.4-0.8 mg) of naloxone should be given IV and the A-B-C's of resuscitation employed as necessary. If the episode is due to narcotic overdose, consciousness will return within a minute or two. The pain will likely return and can be re-treated. The maximum dose of Demerol may then have to be judiciously overstepped. The duration of action of naloxone is less than that of Demerol. Patients treated with naloxone for opiate overdose must be monitored for 3 or more hours.

b. Fluid therapy is instituted to increase urine volume and help the stone pass. D5NS at 150-200 ml/hour is used.

If nausea and vomiting are problematic, the patient should be kept NPO and, if severe enough, may require placement of a nasogastric tube.

Every effort should be made to recover the stone when it's passed. This can be accomplished by having the patient urinate through a strainer or gauze sponges. The stone should be saved for analysis in conjunction with an intravenous pyelogram (IVP) performed ashore. Most cases can be treated adequately underway.

5. USUAL COURSE WITH TREATMENT

The stone will usually pass spontaneously within minutes or hours. This will be marked by the sudden cessation of the pain. Hematuria, dysuria, and a dull ache in the flank may persist for a day or two.

Encouraging the patient to drink a sufficient quantity of liquids to keep his daily urine volume over 2500 ml has been thought to decrease the incidence of stone recurrence. The patient should receive a urology consult to determine factors which might predispose him to form another stone.

Anticipate submarine disqualification if applicable.

6. COMPLICATIONS AND THEIR MANAGEMENT

Renal stones which become impacted and do not pass spontaneously must be removed surgically. Renal colic lasting over 24 hours is unusual and is an indication for MEDEVAC. Pain lasting this long will be very exhausting for the patient.
Patients may develop urinary tract infections as a result of a calculus. This presents as dull residual flank pain, dysuria, and residual hematuria with urinary frequency, hesitancy and fever. Treatment is:

Trimethoprim-Sulfamethoxazole (Bactrim, Septra) two tablets (one if double strength DS preparation) PO twice daily for 7 days.

If Sulfa allergic:

Doxycycline (Vibramycin) 100 mg PO twice daily.
Perforated Duodenal Ulcer (PERFDU)

1. TREATMENT PROTOCOL AT A GLANCE (see detailed discussion of treatment below; this section is for quick reference)

Definitive treatment of perforated duodenal ulcer is surgical.

Notify command of need for immediate MEDEVAC.

The treatment goals pending MEDEVAC:

   a. bed rest/observation
   b. antibiotics
   c. intravenous fluid and electrolyte replacement
   d. intestinal rest.

   a. Place patient at strict bedrest with head of bed slightly elevated. Monitor vital signs, fluid intake and output, and progress of symptoms and examination.

   b. Appropriate antibiotic therapy is crucial:

      1) Cefoxitin 2 gm IV every 6 hours; and
         Gentamicin 80 mg IV every 8 hours; or

      2) For patient’s with a history of Penicillin or Cephalosporin allergy only:
         Gentamicin 80 mg IV q8h; and
         Metronidazole (Flagyl):
         Loading dose - 15 mg/kg body weight IV infused over one hour (approximately 1 gm for average sized male); and
         Maintenance dose - 7.5 mg/kg IV infused over one hour every 6 hours (approximately 500 mg)

   Slow IV infusions are best accomplished by mixing in small bags of IV solution and running "piggy backs".

   c. Start IV D5NS or D5LR at 150 ml/hr and adjust rate as needed to maintain adequate hydration. Monitor urine output as an indicator of hydration status.

   d. Make patient NPO. Place NG tube to low-intermittent suction.

   Analgesics are relatively contraindicated since they will mask the
symptoms and make it difficult to follow the progress of the illness.

2. DISCUSSION

Duodenal perforation usually presents with a sudden, steady, severe pain in the right upper quadrant or epigastrium. The patient will lie still in bed with his legs flexed since the pain is aggravated by movement or coughing. He may vomit initially although sustained vomiting is not characteristic. The patient will usually relate a past history of ulcer disease or ulcer symptoms.

Examination of the abdomen reveals a rigid, quiet abdomen with marked tenderness and rebound tenderness. The pain may radiate or migrate depending on the location of the gastric contents which have been allowed to spill into the peritoneal cavity. Peritonitis in the right lower quadrant by this mechanism may cloud the diagnosis and suggest appendicitis. Normal dullness to percussion overlying the liver may be lost due to free air overlying the liver in the supine position.

Perforation may occur adjacent to the pancreas or gall bladder, allowing gastric contents to irritate these organs and possibly cause pancreatitis or cholecystitis and their inherent signs and symptoms.

3. DIFFERENTIAL DIAGNOSIS

Other illnesses that produce symptoms mimicking duodenal perforation and which should be considered are:

a. acute pancreatitis
b. acute cholecystitis
c. acute appendicitis
d. diverticulitis.

a. Acute pancreatitis is associated with duodenal ulcer, cholecystitis, trauma, and alcoholism and will present as a boring epigastric pain radiating to the back. Signs and symptoms of peritoneal irritation are sometimes present. Antacids will not relieve the pain of pancreatitis. Food, particularly fatty foods, will exacerbate the pain. Treatment should include bowel rest with absolutely no fatty foods or alcohol permitted.

b. Acute cholecystitis - see CHOLECYSTITIS
c. Acute appendicitis - see APPENDICITIS

d. Diverticulitis may be present anywhere along the course of the colon including both upper quadrants and the epigastrium. It is more common, however to involve the descending (left) colon. These symptoms are often intermittent and less severe, but may be acute. This condition has been described figuratively as a "left-sided appendicitis".
4. TREATMENT OF PERFORATED DUODENAL ULCER

Acute perforation of any abdominal viscus is a catastrophic event requiring immediate stabilization and preparation for MEDEVAC. Broad-spectrum antibiotic coverage and fluid replacement are required without delay. The aim of treatment of duodenal perforation is to prevent shock and to limit bacterial seeding of the peritoneum which may result in abscess formation. Spread of gastric contents into the peritoneum after perforation occurs rapidly.

The treatment regimen should consist of the following:

a. antibiotics
b. intravenous fluid and electrolyte replacement
c. intestinal rest.

a. Appropriate antibiotic therapy is crucial. Bowel flora will be predominantly gram negative organisms, enterococci (Streptococcus faecalis), and anaerobes. Specific intravenous antibiotic regimens are as follows:

1) Cefoxitin 2 gm IV every 6 hours; and
   Gentamicin 80 mg IV every 8 hours; or
2) For patient's with a history of Penicillin or Cephalosporin allergy only:
   Gentamicin 80 mg IV q8h; and
   Metronidazole (Flagyl):
   Loading dose - 15 mg/kg body weight IV infused over one hour (approximately 1 gm for average sized male); and
   Maintenance dose - 7.5 mg/kg IV infused over one hour every 6 hours (approximately 500 mg)

Slow IV infusions are best accomplished by mixing in small bags of IV solution and running "piggy backs".

b. Intravenous fluids are utilized to maintain fluid and electrolyte requirements in the face of increased need and decreased intake. Dextrose 5% and Lactated Ringer’s solution (D5LR) should be started at 150 ml/hour. Additional fluid replacement will be needed for the additional losses caused by fever, diaphoresis, emesis, diarrhea, and nasogastric suctioning. Fluid and electrolyte replacement must keep pace with losses to prevent dehydration and electrolyte imbalance. Monitor the urine output to maintain at least 1000 ml/day (or 1/2 ml per kg body wt per hour) and increase fluid intake as needed. Urine specific gravity and hematocrit are also good indicators of the adequacy of hydration.
c. Intestinal rest is accomplished by making patient NPO (nothing by mouth) and by nasogastric suctioning. Low-intermittent suction (1-3 psi) is most effective. Irrigation of the tube with small volumes of saline may be needed periodically to maintain patency. Remember anything by mouth may be released into the peritoneal cavity by way of the perforation.

NOTE: PAIN MEDICATIONS ARE CONTRAINDICATED since they will mask the symptoms thereby masking possible deterioration in the patient’s condition difficult to detect. The head of the bed should be kept in bed in a slightly elevated (semi-Fowler’s) position to prevent subdiaphragmatic involvement.

5. USUAL COURSE WITH TREATMENT

Improvement should follow sealing of the perforation and gradual resolution of the chemical peritonitis caused by the gastric contents. Antibiotic therapy and IV fluids may buy the necessary time to allow this to occur. Shock associated with intestinal perforation is, however, usually not well controlled and cases of perforation should be MEDEVAC’ed as soon as possible for surgical treatment.

6. COMPLICATIONS AND THEIR MANAGEMENT

The greatest dangers of duodenal perforation are shock and abscess formation. Spillage of gastric contents into the peritoneal cavity results in a chemical ‘burn’ leading to extravasation of large amounts of fluids into the peritoneal space. This may be followed by hypovolemic shock. The shock produced by the peritoneal irritation and fluid loss can be profound and occur with great rapidity. Worsening of the hypovolemic shock is a grave sign and requires an all out effort at fluid and electrolyte replacement and maintenance of blood pressure.

Dramatic symptomatic relief is often seen 6-10 hours after perforation as adhesions form and halt the flow of gastric contents into the peritoneum. This event will reduce the possibility of shock, but will not affect abscess formation since bacterial seeding occurs early. Abscesses can form in any area of the peritoneal space. Initial resolution followed by development of fever, tachycardia, and a general deterioration in the status of hydration and electrolyte balance despite vigorous fluid replacement indicates abscess formation and sepsis.
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Small Bowel Obstruction (SMBOBS)

1. TREATMENT PROTOCOL AT A GLANCE (see detailed discussion of treatment below; this section is for quick reference)

Notify command of need for immediate MEDEVAC

Goals of treatment pending MEDEVAC:

a. prevent dehydration
b. treat for shock
c. decompress the distension
d. antibiotics

a. Start IV D5NS or D5IR at 150 ml/hr, adjust rate as needed to maintain adequate hydration. Monitor urine output as indicator of hydration status.

b. Bolus therapy may be required to maintain blood pressure if patient goes into shock. Monitor vital signs carefully.

c. Keep patient NPO. Place NG tube to low-intermittent suction.

d. Appropriate antibiotic therapy is crucial:
   1) Cefoxitin 2 gm IV every 6 hours; and
      Gentamicin 80 mg IV every 8 hours; or
   2) For patient's with a history of Penicillin or Cephalosporin allergy only:
      Gentamicin 80 mg IV q8h; and
      Metronidazole (Flagyl):
      Loading dose - 15 mg/kg body weight IV infused over one hour (approximately 1 gm for average sized male); and
      Maintenance dose - 7.5 mg/kg IV infused over one hour every 6 hours (approximately 500 mg)

Slow IV infusions are best accomplished by mixing in small bags of IV solution and running "piggy backs".

Note: Analgesics are relatively contraindicated since they will mask the symptoms and make it difficult to follow the progress of the illness.
2. DISCUSSION

Intestinal obstruction represents the prevention of passage of intestinal contents by mechanical blockage or failure of bowel motility. The causes include scarring or adhesions from previous surgery or peritonitis, entrapment of a section of bowel in a hernia, fecal impaction, intestinal parasites, carcinoma, twisting, or intussusception of the bowel, inflammatory disease of the bowel and paralytic ileus.

Patients with intestinal obstruction will typically present with abdominal pain, constipation, vomiting, abdominal distension, and failure to pass flatus. The abdominal pain is described as crampy and intermittent, occurring at 3-5 minute intervals. If the obstruction is proximal (close to the stomach), the vomiting may be profuse and the distention not as pronounced. Distal obstruction (closer to the colon or involving the colon itself) will present with less vomiting, but vomitus may contain fecal material. More distal obstruction will be associated with greater distension as intestinal gas and liquid contents accumulate behind the obstruction. Diarrhea may be evident early, followed by failure to pass either flatus or feces.

Examination will reveal abdominal distension, and hyperactive, high-pitched bowel sounds, often described as tinkling or rushes. Increased peristaltic activity may be visible proximal to the obstruction. Dehydration will be of variable severity, dependent on the duration of the complaint and the extent of the vomiting. Rectal examination should be performed to rule out fecal impaction which could be manually removed, detect lesions and test for occult blood (which might indicate the presence of a carcinoma). The white blood cell count will reveal an increased number of neutrophils.

3. DIFFERENTIAL DIAGNOSIS

The diagnosis of intestinal obstruction is usually easily made on the basis of physical examination. Early cases or partial obstructions or other conditions resulting in peritonitis, decreased bowel motility and distention may present diagnostic challenges. Other conditions to consider include:

a. acute appendicitis
b. acute cholecystitis
c. perforated duodenal ulcer
d. pancreatitis

ea. Acute appendicitis - see APPEND
b. Acute cholecystitis - see CHOLE
c. Perforated duodenal ulcer - see PERFU
d. Pancreatitis is associated with duodenal ulcer, cholecystitis, trauma, and alcoholism and will present as a boring epigastric pain radiating to the back. Signs and symptoms of peritoneal irritation are sometimes present. Antacids will not relieve the pain of pancreatitis. Food, particularly fatty foods, will exacerbate the pain. Treatment should
include bowel rest, with absolutely no fatty foods or alcohol permitted.

4. TREATMENT OF BOWEL OBSTRUCTION

The aims of treatment of intestinal obstruction are to prevent dehydration and shock and to attempt to decompress the distension in preparation for MEDEVAC.

a. Intravenous fluids are utilized to maintain fluid and electrolyte requirements in the face of increased need and decreased intake. There is also a potentially massive fluid shift into the lumen of the obstructed bowel. D5NS or D5LR should be started at 150 ml/hour. Additional fluid replacement will be needed for the additional losses caused by fever, diaphoresis, emesis, diarrhea, and nasogastric suctioning. Fluid and electrolyte replacement must keep pace with losses to prevent dehydration and electrolyte imbalance. Monitor the urine output to maintain at least 1000 ml/day (or 1/2 ml per kg body wt per hour) and increase fluid intake as needed. Urine specific gravity and hematocrit are also good indicators of the adequacy of hydration.

b. Decompression of the stomach and relief of distension can be accomplished by placement of a nasogastric tube and keeping the patient NPO. Low-interrittent suction (1-3 psi) is most effective. Irrigation of the tube with small volumes of saline may be needed periodically to maintain patency.

c. Appropriate antibiotic therapy is crucial. Bowel flora will be predominantly gram negative organisms, enterococci (Streptococcus faecalis), and anaerobes. Specific intravenous antibiotic regimens are as follows:

1) Cefoxitin 2 gm IV every 6 hours; and
   Gentamicin 80 mg IV every 8 hours; or
2) For patient’s with a history of Penicillin or Cephalosporin allergy only:
   Gentamicin 80 mg IV q8h; and
   Metronidazole (Flagyl):
   Loading dose 15 mg/kg body weight IV infused over one hour (approximately 1 gm for average sized male); and
   Maintenance dose 7.5 mg/kg IV infused over one hour every 6 hours (approximately 500 mg)

Slow IV infusions are best accomplished by mixing in small bags of IV solution and running "piggy backs".

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d. Analgesics are relatively contraindicated since they will mask the symptoms and make it difficult to follow the progress of the illness. However, it may become necessary to offer the patient some pain relief by judicious use of morphine or Demerol.

5. USUAL COURSE WITH TREATMENT

Intestinal obstruction is an indication for immediate MEDEVAC since there is no reliable way to determine if necrosis of the involved bowel has occurred due to strangulation of the blood supply. The mortality is greatly increased by a delay in definitive care. Obstruction ordinarily does not resolve spontaneously.

6. COMPLICATIONS AND THEIR MANAGEMENT

Strangulation with or without perforation and peritonitis is heralded by a change in the character of the pain which will be continuous and severe. Abdominal sounds will be diminished, and tachycardia, fever, tachypnea and a deterioration of the hydration status despite rigorous efforts will be evident. Morbidity is high in this scenario. Continue supportive care pending MEDEVAC.
Small Bowel Obstruction (SMBOBS)

1. **TREATMENT PROTOCOL AT A GLANCE** (see detailed discussion of treatment below; this section is for quick reference)

   Notify command of need for immediate MEDEVAC

   **Goals of treatment pending MEDEVAC:**
   
   a. prevent dehydration
   b. treat for shock
   c. decompress the distension
   d. antibiotics

   a. Start IV D5NS or D5LR at 150 ml/hr, adjust rate as needed to maintain adequate hydration. Monitor urine output as indicator of hydration status.

   b. Bolus therapy may be required to maintain blood pressure if patient goes into shock. Monitor vital signs carefully.

   c. Keep patient NPO. Place NG tube to low-intermittent suction.

   d. Appropriate antibiotic therapy is crucial:

   1) Cefoxitin 2 gm IV every 6 hours; and
      Gentamicin 80 mg IV every 8 hours; or

   2) For patient’s with a history of Penicillin or Cephalosporin allergy only:
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   Note: Analgesics are relatively contraindicated since they will mask the symptoms and make it difficult to follow the progress of the illness.
2. DISCUSSION

Intestinal obstruction represents the prevention of passage of intestinal contents by mechanical blockage or failure of bowel motility. The causes include scarring or adhesions from previous surgery or peritonitis, entrapment of a section of bowel in a hernia, fecal impaction, intestinal parasites, carcinoma, twisting, or intussusception of the bowel, inflammatory disease of the bowel and paralytic ileus.

Patients with intestinal obstruction will typically present with abdominal pain, constipation, vomiting, abdominal distension, and failure to pass flatus. The abdominal pain is described as crampy and intermittent, occurring at 3-5 minute intervals. If the obstruction is proximal (close to the stomach), the vomiting may be profuse and the distention not as pronounced. Distal obstruction (closer to the colon or involving the colon itself) will present with less vomiting, but vomitus may contain fecal material. More distal obstruction will be associated with greater distension as intestinal gas and liquid contents accumulate behind the obstruction. Diarrhea may be evident early, followed by failure to pass either flatus or feces.

Examination will reveal abdominal distension, and hyperactive, high-pitched bowel sounds, often described as tinkling or rushes. Increased peristaltic activity may be visible proximal to the obstruction. Dehydration will be of variable severity, dependent on the duration of the complaint and the extent of the vomiting. Rectal examination should be performed to rule out fecal impaction which could be manually removed, detect lesions and test for occult blood (which might indicate the presence of a carcinoma). The white blood cell count will reveal an increased number of neutrophils.

3. DIFFERENTIAL DIAGNOSIS

The diagnosis of intestinal obstruction is usually easily made on the basis of physical examination. Early cases or partial obstructions or other conditions resulting in peritonitis, decreased bowel motility and distention may present diagnostic challenges. Other conditions to consider include:

a. acute appendicitis
b. acute cholecystitis
c. perforated duodenal ulcer
d. pancreatitis

da. Acute appendicitis - see APPEND
b. Acute cholecystitis - see CHOLE
c. Perforated duodenal ulcer - see PERDU

d. Pancreatitis is associated with duodenal ulcer, cholecystitis, trauma, and alcoholism and will present as a boring epigastric pain radiating to the back. Signs and symptoms of peritoneal irritation are sometimes present. Antacids will not relieve the pain of pancreatitis. Food, particularly fatty foods, will exacerbate the pain. Treatment should
include bowel rest, with absolutely no fatty foods or alcohol permitted.

4. TREATMENT OF BOWEL OBSTRUCTION

The aims of treatment of intestinal obstruction are to prevent dehydration and shock and to attempt to decompress the distension in preparation for MEDEVAC.

a. Intravenous fluids are utilized to maintain fluid and electrolyte requirements in the face of increased need and decreased intake. There is also a potentially massive fluid shift into the lumen of the obstructed bowel. D5NS or D5LR should be started at 150 ml/hour. Additional fluid replacement will be needed for the additional losses caused by fever, diaphoresis, emesis, diarrhea, and nasogastric suctioning. Fluid and electrolyte replacement must keep pace with losses to prevent dehydration and electrolyte imbalance. Monitor the urine output to maintain at least 1000 ml/day (or 1/2 ml per kg body wt per hour) and increase fluid intake as needed. Urine specific gravity and hematocrit are also good indicators of the adequacy of hydration.

b. Decompression of the stomach and relief of distension can be accomplished by placement of a nasogastric tube and keeping the patient NPO. Low-intermittent suction (1-3 psi) is most effective. Irrigation of the tube with small volumes of saline may be needed periodically to maintain patency.

c. Appropriate antibiotic therapy is crucial. Bowel flora will be predominantly gram negative organisms, enterococci (Streptococcus fecaealis), and anaerobes. Specific intravenous antibiotic regimens are as follows:

1) Cefoxitin 2 gm IV every 6 hours; and
   Gentamicin 80 mg IV every 8 hours; or

2) For patient's with a history of Penicillin or Cephalosporin allergy only:
   Gentamicin 80 mg IV q8h; and
   Metronidazole (Flagyl):
   Loading dose 15 mg/kg body weight IV infused over one hour (approximately 1 gm for average sized male); and
   Maintenance dose 7.5 mg/kg IV infused over one hour every 6 hours (approximately 500 mg)

   Slow IV infusions are best accomplished by mixing in small bags of IV solution and running "piggy backs".

d. Analgesics are relatively contraindicated since they will mask the
symptoms and make it difficult to follow the progress of the illness. However, it may become necessary to offer the patient some pain relief by judicious use of morphine or Demerol.

5. USUAL COURSE WITH TREATMENT

Intestinal obstruction is an indication for immediate MEDEVAC since there is no reliable way to determine if necrosis of the involved bowel has occurred due to strangulation of the blood supply. The mortality is greatly increased by a delay in definitive care. Obstruction ordinarily does not resolve spontaneously.

6. COMPLICATIONS AND THEIR MANAGEMENT

Strangulation with or without perforation and peritonitis is heralded by a change in the character of the pain which will be continuous and severe. Abdominal sounds will be diminished, and tachycardia, fever, tachypnea and a deterioration of the hydration status despite rigorous efforts will be evident. Morbidity is high in this scenario. Continue supportive care pending MEDEVAC.
Pelvic Inflammatory Disease (PID)

1. DISCUSSION

Pelvic inflammatory disease (PID) is a clinical syndrome characterized by the spread of micro-organisms from the vagina and cervix to the endometrium, fallopian tubes and related pelvic structures. Etiology may be bacterial or nonbacterial. Gonococcus and Chlamydia are the most common offending agents. Polymicrobial infections are common. Predisposing factors include: multiple sexual partners, IUD, and introduction of foreign bodies into the vagina.

History and examination reveal lower quadrant abdominal pain and tenderness, which may be bilateral or unilateral, though infection is usually present bilaterally. On pelvic exam, cervical motion tenderness, purulent cervical discharge, adnexal tenderness, plus one or more of the following is diagnostic:

- a. positive gram stain for gonococcus.
- b. temperature greater than 38°C (100.4°F).
- c. WBC > 10,000/cu mm.
- d. pelvic abscess on examination.

Other findings on physical examination may include liver tenderness, abdominal rigidity and/or guarding, abdominal distension, decreased bowel sounds, adnexal mass, vaginal bleeding, vaginal discharge, dysuria, and/or low back pain.

As a general rule, PID associated with gonococcal infections presents with more severe symptoms than those associated with nongonococcal infections. Many cases are asymptomatic.

2. DIFFERENTIAL DIAGNOSIS:

- a. incomplete abortion and Septic abortion
- b. pyelonephritis
- c. appendicitis
- d. diverticulitis
- e. ruptured ovarian cyst
- f. cholecystitis
- g. pelvic thrombophlebitis
- h. ectopic pregnancy
- i. intestinal obstruction
- j. endometriosis

- a. Incomplete and septic abortion - see INCOMPLETE ABORTION
- b. Pyelonephritis - see URINARY TRACT INFECTION
c. Appendicitis - see APPENDICITIS  

d. Diverticulitis usually occurs in older individuals. It may occur on the right side, but most commonly is on the left. See APPENDICITIS.  

e. Ruptured ovarian cyst - see OVARIAN CYST  

f. Cholecystitis - see CHOLECYSTITIS  

g. Pelvic thrombophlebitis typically presents with abdominal pain and recurrent spiking fever developing 2-21 days post-partum, or following abortion or pelvic surgery. The pain may be minimal and poorly localized. Tachycardia and tachypnea may be associated findings. The white count will range from normal to as high as 25,000/cu mm.  

h. Ectopic pregnancy - see ECTOPIC PREGNANCY  

i. Intestinal obstruction - see SMALL BOWEL OBSTRUCTION  

j. Endometriosis has a nonspecific presentation including progressive dysmenorrhea, pelvic pain, and infertility. Premenstrual spotting, menometrorrhagia, rectal bleeding, and hematuria are common. On pelvic examination tender nodularities may be present. Definitive diagnosis is made with direct visualization by laparotomy or laparoscopy.  

3. TREATMENT OF PELVIC INFLAMMATORY DISEASE  

Treatment of PID requires broad spectrum antibiotic coverage, as well as supportive therapy.  

a. Antibiotics: In the absence of peritoneal signs (stage I PID), therapy may be initiated with oral antibiotics. Suggested regimens are outlined below:  

1) Ceftriaxone (Rocephin) 250 mg IM single dose; and Doxycycline (Vibramycin) 100 mg PO bid for 14 days.  

2) Spectinomycin (Trobicin) 2 gm IM may be substituted for ceftriaxone if the patient is penicillin allergic.  

The patient must be followed closely. If there is no improvement in 48 hours, or the initial evaluation reveals evidence of peritonitis (stage II PID), more aggressive therapy is required:  

3) Ceftriaxone 500 mg IM or IV q 6 hours; and Doxycycline 100 mg IV q 12 hours (if available, not currently on AMAL) or 100 mg PO bid.  

(Cefoxitin 2 gm IV q 6 hours may be substituted for ceftriaxone.)  

4) Metronidazole (Flagyl) 1 gm IV q 12 hours may be substituted  

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for ceftriaxone if the patient is penicillin allergic.

Continue IV antibiotics for a minimum of 2 days after improvement is noted, but for at least 4 days. Switch to the appropriate PO regimen and continue the doxycycline for a total of 14 days.

b. Supportive therapy:

1) Bed rest with elevation of the head.

2) Abstinence from sexual intercourse throughout the course of the treatment.

3) Encourage po fluid intake.

4) Analgesics acetaminophen and codeine (Tylenol 3) 1-2 tablets PO q4 hours PRN.

MEDEVAC and inpatient therapy must be sought if any of the following conditions exist in conjunction with PID:

a. nulliparity
b. presence of tubo-ovarian mass or abscess
c. pregnancy
d. uncertain diagnosis
e. gastrointestinal symptoms
f. peritonitis in upper quadrants
g. presence of an intrauterine device (IUD)
h. recent history of abdominal or pelvic surgery
i. inadequate response to outpatient therapy.

4. USUAL COURSE WITH TREATMENT:

Recovery can be anticipated in the vast majority of patients given appropriate treatment. There is a high degree of recurrence of this disease with future sexually transmitted infections. Scarring of the fallopian tubes secondary to the infection increases the risk of infertility and ectopic pregnancy. Twenty percent may develop chronic pelvic pain without evidence of infection.

5. COMPLICATIONS AND THEIR MANAGEMENT:

a. Tubo-ovarian abscess formation (stage III PID) and intra-abdominal rupture (stage IV PID) are the most serious complications of PID. The mortality of a ruptured abscess ranges from 10-50%. The diagnosis must be suspected if the patient presents with signs of generalized peritonitis or septic shock, especially if accompanied by a high, spiking fever, chills, tachycardia, and hypotension. This condition is a medical emergency requiring immediate MEDEVAC. Prompt intervention with fluid resuscitation to restore blood pressure may be required.

Therapy will include IV antibiotics as outlined above.
Add: Gentamicin 2 mg/kg body weight IV followed by 1.5 mg/kg IV q 8 hours.

b. Fitz-Hugh-Curtis Syndrome is a perihepatitis resulting from the spread of infection into the peritoneal cavity and to the liver capsule. The patient will present with sudden onset of severe sharp pain in the right upper quadrant and liver edge tenderness. The pain may be aggravated by deep breathing, coughing, or movement, and may be referred to the shoulder. Fever, chills, sweats, nausea and headache are common. Presentation may mimic cholecystitis. This condition is a medical emergency which requires immediate MEDEVAC.

c. Infertility occurs in approximately 20% of patients with PID secondary to tubal occlusion. The extent of tubal occlusion increases with repeated bouts of PID and the severity of the infections. Counsel all female STD patients on these risks.

d. Ectopic pregnancy may result from damage to the fallopian tubes. PID is the most common cause of ectopic pregnancy. A patient recovering from PID should be referred for counseling and follow-up with OB-GYN. See ECTOPIC PREGNANCY.
Urinary Tract Infection (UTI)

1. DISCUSSION

Urinary tract infections are divided into lower tract infections involving the bladder (cystitis) and more serious upper tract infections involving the kidneys (pyelonephritis). The offending organism is most commonly E. coli from the patient's own natural flora, though many others are seen. Ninety-five percent of the cases arise as bacteria ascends the urethra, while 5% arise via other routes including hematogenous spread and secondary to bladder catheterization. UTI's are more common in the female due to the shorter, wider urethra. Predisposing factors include decreased resistance to infection, urinary stasis from obstruction or abnormal bladder function, pregnancy, kidney stones, neurogenic bladder, and diabetes.

Signs and symptoms of cystitis include suprapubic abdominal pain, dysuria, and urinary frequency. Fever, nausea, and vomiting are inconstant findings. On microscopic examination the urine will exhibit >8 white blood cells (WBC)/high power field (hpf) and one bacteria per oil emersion field (equivalent to 100,000 bacteria/ml). Routine urinalysis may show an increase in pH, positive leukocytes, and positive nitrite (if organism is urea splitting).

Pyelonephritis may result from the reflux of urine up the ureters. Fever (>101°F), rigors, nausea, vomiting, flank pain, and tenderness are indicative of kidney involvement. Patients with pyelonephritis, if not adequately treated, may become septic. Labs may demonstrate an increased WBC count on CBC, hematuria, proteinuria, ketonuria, and white blood cell casts on microscopic urine examination.

2. DIFFERENTIAL DIAGNOSIS

The differential diagnosis of cystitis includes:

a. urethritis
b. vaginitis
c. genital herpes

a. Urethritis is more common in males and presents with similar symptoms and lab findings. Five to eight WBC/hpf on microscopic urine examination is sufficient for diagnosis. Treatment is the same as for cystitis.

b. Vaginitis may have a similar presentation with a complaint of dysuria, additionally the patient may have evidence of vaginal discharge and vaginal itching.

c. Genital herpes presents with characteristic lesions in most primary cases. However, recurrent episodes may present with symptoms similar to
cystitis. Occasionally, dysuria may precede the appearance of the lesions in both primary and recurrent cases making diagnosis difficult.

The differential diagnosis of pyelonephritis includes:

a. renal contusion  
b. perinephric abscess  
c. glomerulonephritis  
d. cholecystitis  
e. appendicitis  
f. kidney stones  
g. renal neoplasm

a. Renal contusion secondary to trauma may produce flank pain and hematuria. A history of trauma makes the diagnosis clear.

b. Perinephric abscess see Complications of UTI (below)

c. Glomerulonephritis is inflammation and damage to the microscopic structure of the kidney. There are a number of different causes and manifestations. WBC's, RBC's and red and white cell casts may be seen. The urine is usually sterile. Proteinuria may be pronounced.

d. Cholecystitis see CHOLECYSTITIS

e. Appendicitis see APPENDICITIS

f. Kidney stones see RENAL COLIC

g. Renal neoplasms (tumor) may present with hematuria, flank pain, and fever. White cells and bacteria will not be seen in the urine ordinarily. A neoplasm may cause urinary stasis, producing an infection, however.

3. TREATMENT OF URINARY TRACT INFECTION

a. The treatment of cystitis involves the administration of fluids and antibiotics.

1) Fluids: The patient should be advised to drink several (8-10) glasses of water per day to help flush out the urinary tract as well as to prevent dehydration.

2) Antibiotics: Single dose regimens for uncomplicated cystitis include:

   a) Amoxicillin 3 grams PO, or

   b) Trimethoprim-Sulfamethoxazole (Bactrim, Septra) one double strength (DS) tablet PO

3) Ten day regimens should be employed if the patient:

   is pregnant.
is unresponsive to initial single dose therapy.
has evidence of upper urinary tract infection.
has evidence of urologic abnormalities.
is a child.
is male.
is unreliable or non-compliant.
is greater than six days past the onset of symptoms.

Ten day antibiotic regimens include:

a) Trimethoprim/Sulfamethoxazole (Septra, Bactrim) one DS tablet PO BID (not for use during pregnancy or while breast feeding).

b) Ampicillin 250 mg PO QID (use this drug in pregnant and breast feeding women).

c) Sulfisoxazole (Gantrisin) 1.5 gm PO QID (not for use during pregnancy or while breast feeding).

d) Nitrofurantoin (Furdantin, Macrodantin) 100 mg PO QID x 10 days (not for use during pregnancy or while breast feeding).

4) Pyridium is a drug that is excreted in the urine and acts as a topical anesthetic on the bladder and urethral mucosa.

Phenazopyridine (Pyridium) 200 mg PO TID x 2-3 days. Do not use for more than three days. Longer courses may mask the symptoms of continued infection.

Warn the patient that this drug may cause their urine to be red or orange.

b. The treatment of pyelonephritis involves antibiotics and fluid administration. Patients with mild illness who are not toxic (septic) and able to maintain hydration orally can be managed locally with close follow-up. Patients who are toxic or who cannot maintain good hydration with oral fluids or who fail to improve should be evacuated for inpatient IV hydration, and antibiotics. If the patient is pregnant they should be MEDEVAC’ed for inpatient care.

The treatment for uncomplicated pyelonephritis is:

1) Fluids: The patient should be instructed to drink 3-4 L of water or other clear fluids per day to increase urine output and maintain hydration.

2) Antibiotics

a) Ampicillin 1 gm PO QID x 10 days. (use in pregnant and breast feeding women).
b) Trimethoprim/Sulfamethoxazole (Bactrim, Septra) one DS tablet PO BID x 10 days. (Not for use during pregnancy or while breast feeding).

c) Sulfisoxazole (Gantrisin) 1 gram PO QID x 10 days. (Not for use during pregnancy or while breast feeding).

3) Pyridium may be used as outlined above.

4. USUAL COURSE WITH TREATMENT:

Patients with uncomplicated cystitis usually begin to feel relief within 48 hours, sooner if Pyridium is used. The patient must be instructed to return if the symptoms continue. The importance of drinking large amounts of fluids cannot be over stressed. The patient must be instructed to complete the course of antibiotics and continue the medications even after the symptoms improve. A follow-up urinalysis should be done after completion of the antibiotic course.

Patients with pyelonephritis may notice relief of their urinary symptoms (dysuria, frequency etc.) before their constitutional symptoms and flank pain. Improvement should be noted within 48 hours. Worsening symptoms should be treated aggressively. Permanent kidney damage can result.

5. COMPLICATIONS AND THEIR MANAGEMENT:

a. Complications of cystitis include:

1) Pyelonephritis see PYELONEPHRITIS above.

2) Septic shock - see BACTEREMIA under complications of pyelonephritis.

3) Kidney stones see RENAL COLIC

b. Complications of pyelonephritis include:

1) Bacteremia is the spread of bacteria into the blood stream. This may be asymptomatic, or the patient may demonstrate signs of septicemia with high, spiking fevers, shaking chills (rigors), nausea, vomiting and prostration. Some cases may progress to septic shock, with tachycardia, tachypnea, and hypotension. These patients are gravely ill and require aggressive care pending MEDEVAC.

Treatment for bacteremia/septicemia:

a) notify command of the need for MEDEVAC
b) start IV D5NS or D5LR

c) Ampicillin 1 gram IV q 4 hours; and Gentamicin 80 mg IV q 8 hours

d) Remain prepared for large volume fluid resuscitation should patient's blood pressure begin to fall.

2) Perinephric abscess primarily occurs in association with recurrent infections, immunocompromise, diabetes, or urinary tract obstruction. The patient may present up to 2-3 weeks following an episode of pyelonephritis with persistent fever, vague constitutional symptoms, and flank or chest pain. Such abscesses require MEDEVAC and inpatient treatment and may require surgical drainage. Treat with the above IV antibiotic regimen pending MEDEVAC.

3) Acute renal failure (ARF) is a rare complication of pyelonephritis most often seen in severely dehydrated patients. It may be transient or permanent. It may present as a marked decrease in urine output despite evidence of adequate hydration. It requires immediate MEDEVAC for intervention. Use of IV fluids in the interim must be closely monitored. It is possible to fluid overload the patient and produce respiratory compromise.
1. DISCUSSION

Benign ovarian cysts are fluid filled masses located on the ovary. They are most common in women in the child-bearing years and are under hormonal influence. They may be filled with clear fluid or blood, vary greatly in size, and may be unilateral or bilateral. There are different types of ovarian cysts with differing potentials for later malignancy. They are usually asymptomatic unless torsion (twisting) or rupture occurs. Large cysts may cause aching pelvic pain, dyspareunia, and, occasionally, abnormal uterine bleeding. On pelvic exam, the ovary may be slightly enlarged and tender to palpation.

Some cysts have thin walls and are prone to rupture during the pelvic examination. This rupture occasionally causes transient pain and very rarely significant bleeding. Other types of cysts are less prone to rupture, but may cause significant bleeding if they do. The rupture of a cyst can cause peritoneal irritation from fluid or blood. The pain associated with this irritation tends to be constant and exacerbated by motion.

With torsion of a cyst, the pain may be mild and intermittent if the torsion is incomplete, or severe and constant if infarction occurs. An infarcted, gangrenous cyst may cause peritonitis.

There are a number of malignancies that are cystic. All patients suspected of having ovarian cysts should, therefore, be referred to a Gynecologist at the earliest opportunity.

2. DIFFERENTIAL DIAGNOSIS

a. ectopic pregnancy
b. acute appendicitis
c. pelvic inflammatory disease
d. diverticulitis

da. Ectopic Pregnancy see ECTOPIC PREGNANCY. If an adnexal mass is palpated and there is a possibility that the patient is pregnant (e.g.: history of unprotected intercourse) MEDEVAC. Err on the side of over-diagnosing ectopic pregnancy. Failure to do so could be catastrophic.

b. Acute appendicitis see APPENDICITIS.

c. Pelvic inflammatory disease see PID.

d. Diverticulitis most commonly involves the descending (left) colon. Symptoms are often intermittent and moderate, but may be acute. This condition has been described figuratively as a "left-sided appendicitis",
but may present with a pelvic or lower abdominal mass and peritoneal signs, thus mimicking a gynecological problem.

3. TREATMENT OF OVARIAN CYST

Treatment of ovarian cysts is symptomatic and supportive. For intermittent pain due to torsion, Motrin 400 mg PO qid should provide relief. The pain associated with the majority of ruptured cysts will resolve spontaneously in several hours. If the pain does not subside, consider one of the complications of ovarian cyst and carefully monitor the patient accordingly.

4. USUAL COURSE WITH TREATMENT

The symptoms of ovarian cysts will usually resolve spontaneously, but it may take up to 8 weeks, as the cyst reabsorbs. If the cyst ruptures, symptoms should resolve in a matter of hours if the bleeding is not severe.

5. COMPLICATIONS AND THEIR MANAGEMENT

a. Rupture may result in significant hemorrhage in rare cases. These cases will become obvious as symptoms persist and become more severe. Immediate MEDEVAC is required. Two IV lines (18g or larger) should be placed with NS or IR at KVO. The patient should be closely monitored for signs of shock (tachycardia, tachypnea, hypotension, etc.) and volume resuscitation implemented accordingly. If pain is severe, narcotic analgesics may be used judiciously, but care should be taken to avoid hypotension.

b. Malignancy must be ruled out. Refer all cases to a Gynecologist as soon as possible.

c. Pregnancy: Presence of any of the symptoms of an ovarian cyst in conjunction with pregnancy requires immediate MEDEVAC to rule out ectopic pregnancy.
Ectopic Pregnancy

1. DISCUSSION

Ectopic pregnancy is the implantation of a fertilized ovum outside the fundus of the uterus. It is a medical emergency which requires immediate MEDEVAC and surgical intervention. It is the leading cause of maternal death in the first trimester of pregnancy, with delay in diagnosis contributing to the majority of these deaths. The fertilized ovum may implant in the fallopian tube, ovary, abdominal viscera, or the cervix. Regardless of the site of implantation, the fetus grows until it ruptures the supporting structure. This rupture results in massive bleeding which may ultimately exsanguinate the patient. Signs and symptoms may occur prior to or following the rupture. There is often a history of PID or other gynecologic infections.

Typically, menses are 1 to 2 weeks late, with spotting and intermittent cramping pelvic pain. Rupture may be preceded by increased vaginal bleeding. Abdominal pain will increase and may initially present as pressure in the pelvis; it is variable in character and intensity. Hemorrhage may be gradual or catastrophic, resulting in rapid onset of shock.

On examination, the uterus is enlarged, but smaller than anticipated for dates. There will be cervical motion tenderness and an adnexal mass may be present. Absence of the latter does not rule out the diagnosis. Intraperitoneal bleeding may produce generalized abdominal pain and tenderness, rebound, and other signs of peritonitis. The peritonitis may, however, be lateralized to the side of the rupture. Vital sign derangement will reflect the degree of hemorrhage.

2. DIFFERENTIAL DIAGNOSIS

Other illnesses and conditions which may produce symptoms mimicking ectopic pregnancy are listed below.

Err on the side of over-diagnosing ectopic pregnancy. Failure to do so could be catastrophic.

a. Pelvic inflammatory disease
b. Acute appendicitis
c. Ovarian cyst
d. Threatened/incomplete abortion
e. Endometriosis
f. Diverticulitis

a. Pelvic inflammatory disease see PID
b. Acute appendicitis see APPENDICITIS
c. Ovarian cyst see OVARIAN CYST

d. Threatened/Incomplete abortion see INCOMPLETE ABORTION

e. Endometriosis has a nonspecific presentation, including progressive dysmenorrhea, pelvic pain, and infertility. Premenstrual spotting, meno-metrorrhagia, rectal bleeding, and hematuria are common. On pelvic examination tender nodularities may be present. Definitive diagnosis is made with direct visualization by laparotomy or laparoscopy.

f. Diverticulitis most commonly involves the descending (left) colon. Symptoms are often intermittent and moderate, but may be acute. This condition has been described figuratively as a "left-sided appendicitis", but may present with a pelvic or lower abdominal mass and peritoneal signs, thus mimicking a gynecological problem.

3. TREATMENT OF ECTOPIC PREGNANCY

Regardless of whether the diagnosis of ectopic pregnancy is made before or after rupture, arrange for immediate MEDEVAC.

Definitive, life-saving care is surgical.

Treatment pending MEDEVAC is supportive and adjusted according to the severity of the hemorrhage.

The treatment regimen for the patient with no signs or symptoms of rupture or shock include:

a. Establish intravenous access with two large-bore (18 ga or larger) catheter with NS or LR at 100-125 ml/hour.

b. Carefully monitor for signs of rupture and/or shock.

c. Avoid the use of analgesics. Masking symptoms of a ruptured ectopic pregnancy could be catastrophic.

The treatment regimen for the patient with any sign of rupture and/or shock include:

a. Immediate placement of two large-bore (18 ga or larger) catheters and fluid administration (NS or LR) to maintain blood pressure. Rapid infusion of several liters may be necessary. If facilities for transfusion are available, consider transfusing whole blood as needed.

b. Oxygen 2 liters/minute via nasal canula.

c. Avoid the use of analgesics as they may exacerbate hypotension.

d. Use of MAST suit to assist in the treatment of profound shock may
be indicated.

4. USUAL COURSE WITH TREATMENT

The overall mortality rate of ectopic pregnancy is less than 1% when definitive, surgical treatment is available. Delay in obtaining treatment, either due to misdiagnosis or to delay in the patient's seeking care, contributes significantly to the morbidity.

Failure to maintain adequate volume infusion and to support the patient's blood pressure may result in death.

5. COMPLICATIONS AND THEIR MANAGEMENT

The most serious complication of an ectopic pregnancy is hemorrhaging and shock secondary to rupture. Once the diagnosis of ectopic pregnancy is made, or even in the case where it cannot be ruled out, MEDEVAC must be arranged at once. Should rupture occur without immediate access to surgical care, the prognosis is poor.
1. DISCUSSION

Abortion is defined as the delivery of the products of conception (POC) prior to the twentieth week of gestation. In spontaneous abortion this occurs without outside inducement or influence. Spontaneous abortion may be classified as threatened, inevitable, incomplete, or complete.

Threatened abortion: any bleeding or cramping during first 20 weeks of gestation. Cervix is closed. No passage of POC.

Inevitable abortion: intolerable pain, or bleeding that threatens maternal well-being. Cervix may be partially open. No passage of POC.

Incomplete abortion: same as inevitable abortion except cervix will be partially open and there is some passage of POC. Retained POC may be visible in cervical os on speculum exam.

Complete abortion: history of pain and bleeding. All POC are passed. Cervix is closed. Uterus has shrunk back down to its normal size. A loss of the subjective signs of pregnancy may be reported. Bleeding at time of presentation may be limited to spotting.

Threatened abortion occurs in approximately 20 to 30% of pregnancies. Ten to fifteen percent of pregnancies actually end in spontaneous abortion. Most of these occur between the 8th and 14th weeks of pregnancy.

Frequently, the pregnancy has not been diagnosed prior to presentation with spontaneous abortion. Therefore, a discussion of the presentation must include the signs and symptoms of pregnancy. These include a history of unprotected intercourse or inadequate contraception, delay of menses greater than one week in an ordinarily regular cycle, breast engorgement or tenderness, nausea and vomiting, fatigue, abdominal enlargement and uterine enlargement on pelvic exam. Signs and symptoms will change with increasing gestational age. Several other signs may be noted by the experienced examiner on pelvic exam. A urine HCG, if available, is highly supportive of the diagnosis of pregnancy, but may be negative with spontaneous abortion.

Missed abortion is a related complication of early pregnancy. This is defined as a pregnancy which has been retained for 2 months or more following the death of the fetus. It occurs more commonly later in the first trimester or early second trimester. Missed abortion is manifested by the loss of subjective signs of pregnancy and a decrease in uterine size. The cervical os will be closed with no evidence of fresh bleeding. A brown discharge may be present. There is an absence of pain or tenderness. The pregnancy test will be negative.
2. DIFFERENTIAL DIAGNOSIS

The differential diagnosis of a spontaneous abortion includes:

a. ectopic pregnancy
b. ovarian cyst

a. Ectopic pregnancy see ECTOPIC PREGNANCY. If an adnexal mass is palpated and there is a possibility that the patient is pregnant (e.g., history of unprotected intercourse) MEDEVAC. Err on the side of over-diagnosing ectopic pregnancy. Failure to do so could be catastrophic.

b. Ovarian cyst see OVARIAN CYST

3. TREATMENT OF SPONTANEOUS ABORTION

a. Threatened Abortion:
   1) Place the patient at strict bed rest.
   2) Notify command of need for MEDEVAC.
   3) No intercourse, tampons, or other foreign objects in vagina.
   4) Observe and quantify bleeding in units of 'pads soaked per hour', record in note.
   5) Start a large bore IV (18g or larger) with NS or LR at KVO.
   6) Monitor vital signs carefully to insure hemodynamic stability.
   7) Avoid use of sedatives and analgesics, if possible, until viability of fetus is determined; however, diazepam (Valium) 2.5 mg IM q 3-4 hours for sedation or meperidine (Demerol) 50-75 mg IM q 3-4 hours for pain may be used if absolutely necessary.

b. Inevitable and Incomplete Abortion:
   1) Institute treatment plan for threatened abortion including plans for MEDEVAC.
   2) Start second large bore IV (18g or larger). Monitor vital signs for signs of hemodynamic compromise and infuse fluids as needed.
   3) To control bleeding, if greater than 1-2 pads soaked per hour, use:

                  Oxytocin 10 units (1 ml) in 500 ml of D5NS to run at 10-40 drops per minute.

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4) Preserve all passed products of conception and transport with patient for later examination. (Use formalin if available; if not a 50% solution of ethanol or isopropyl alcohol in saline may be used).

5) Diazepam (Valium) 2.5 mg IM q 3-4 hours PRN and meperidine (Demerol) 50-75 mg IM q 3-4 hours PRN may be used for sedation and analgesia respectively.

c. Complete abortion: As it is difficult to determine whether the abortion is complete without a gynecological examination, the protocol for inevitable or incomplete abortion should be followed.

4. USUAL COURSE WITH TREATMENT

With prompt medical treatment the prognosis for maternal survival is excellent. The patient may experience intermittent bleeding and cramping during the following week.

With the above measures approximately 50% of threatened abortions will be carried to term. In the majority of spontaneous abortions the fetus is either absent or has abnormalities incompatible with life. A single spontaneous abortion is usually ascribed to chance. You must use careful judgment, but some patients may find these facts reassuring. Since all of these patients must ultimately be referred for gynecological care, a discussion of further work-up is unnecessary here.

5. COMPLICATIONS AND THEIR MANAGEMENT

a. Septic abortion develops when the contents of the uterus become infected before, during, or after abortion. Prior to legalized abortion, this was most often associated with induced abortions by untrained persons.

In addition to the signs and symptoms of spontaneous abortion, the patient will present with fever (> 102°F), weakness, purulent, foul-smelling vaginal discharge, and cervical pain on pelvic exam. The patient may also be tachycardic and hypotensive due to the infection or blood loss. On CBC, the white count will be elevated. This is a life-threatening situation which require immediate MEDEVAC.

Add the following antibiotics to the inevitable/incomplete abortion regimen for the first 24 hours:

Penicillin 3 million u IV q 4 hours and

Gentamicin 1.5 mg/kg IV q 8 hours

b. Coagulation disorders including disseminated intravascular coagulopathy (DIC) may rarely develop, particularly with missed abortion. The patient may develop massive bleeding due to a consumption of their own
clotting factors. This disorder requires very complex management including transfusions of fresh frozen plasma and platelets. Immediate MEDEVAC is warranted.
MALE
FEMALE
AGE 0-9
AGE 10-19
AGE 20-29
AGE 30-39
AGE 40-49
AGE 50-59
AGE 60-69
AGE >69
PAIN ONSET RUQ
PAIN ONSET LUQ
PAIN ONSET RLQ
PAIN ONSET LLQ
PAIN ONSET UPPER 1/2
PAIN ONSET LOW HALF
PAIN ONSET RT HALF
PAIN ONSET LEFT HALF
PAIN ONSET CENTRAL
PAIN ONSET GENERAL
PAIN ONSET RT FLANK
PAIN ONSET LT FLANK
NO PAIN AT ONSET
PAIN NOW RUQ
PAIN NOW LUQ
PAIN NOW RLQ
PAIN NOW LLQ
PAIN NOW UPPER HALF
PAIN NOW LOWER HALF
PAIN NOW RIGHT HALF
PAIN NOW LEFT HALF
PAIN NOW CENTRAL
PAIN NOW GENERAL
PAIN NOW RT FLANK
PAIN NOW LT FLANK
NO PAIN NOW
PAIN INTERMITTENT
PAIN STEADY
PAIN COLICKY
PAIN IS MODERATE
PAIN IS SEVERE
MOVEMENT AGGRAVATES
COUGHING AGGRAVATES
BREATHING AGGRAVATES
FOOD AGGRAVATES
AGGRAVATED BY OTHER
NOTHING AGGRAVATES
PROGRESS - BETTER
PROGRESS - SAME
PROGRESS - WORSE
DURATION <12 HRS
DURATION 12-24 H
DURATION 24-48 H
DURATION 48+HRS
LYING STILL RELIEVES
VOMITING RELIEVES
ANTACIDS RELIEVE
FOOD RELIEVES
RELIEVED BY OTHER
NOTHING RELIEVES
NAUSEA PRESENT
NO NAUSEA
VOMITING PRESENT
NO VOMITING
BOWELS NORMAL
CONSTIPATION PRESENT
DIARRHEA PRESENT
BLOOD IN STOOLS
MUCUS IN STOOLS
APPETITE DECREASED
APPETITE NORMAL
JAUNDICE PRESENT
NO JAUNDICE
URINATION NORMAL
URINATION - FREQUENT-
URINATION - PAINFUL
URINATION - DARK
BLOOD IN URINE
PREVIOUS INDIGESTION
NO PREV. INDIGESTION
PREV. SIMILAR PAIN
NO PREV. SIM. PAIN
PREV. ABD. SURGERY
NO PREV. ABD. SURG.
PREVIOUS ILLNESS(es)
NO PREVIOUS ILLNESS
TAKING MEDS
NOT TAKING MEDS
TEMP <98.6
TEMP 98.6 - 100.2
TEMP 100.3 - 102
TEMP >102
PULSE <80
PULSE 80-99
PULSE >99
SYST. BP <90
SYST. BP 90-129
SYST. BP >129
DIAST. BP <70
DIAST. BP 70-89
DIAST. BP >89
MOOD NORMAL
MOOD DISTRESSED
MOOD ANXIOUS
COLOR NORMAL
COLOR PALE
COLOR FLUSHED
COLOR JAUNDICED
COLOR CYANOTIC
WBC < 8000
WBC 8,100-10,000
WBC 10,100-12,000
WBC 12,100-15,000
WBC >15,000
ABD INSPECT. NORMAL
VISIBLE PERISTALYSIS
DECREASED ABD MOVE.
ABD SCARS PRESENT
NO ABDOMINAL SCARS
GUARDING PRESENT
NO GUARDING
RIGIDITY PRESENT
NO RIGIDITY
BOWEL SOUNDS NORMAL
BOWEL SOUNDS ABSENT
HYPER. BOWEL SOUNDS
ABDOMEN DISTENDED
NO ABD DISTENTION
MASS(es) PRESENT
NO ABD MASSES
TENDERNESS RUQ
TENDERNESS LUQ
TENDERNESS RLQ
TENDERNESS LLQ
TENDER UPPER HALF
TENDER LOWER HALF
TENDER RIGHT HALF
TENDER LEFT HALF
ABDX.DAT (cont'd)

CENTRAL TENDERNESS
GENERAL TENDERNESS
TENDERNESS RT FLANK
TENDERNESS LT FLANK
NO TENDERNESS
MURPHY'S POSITIVE
MURPHY'S NEGATIVE
REBOUND PRESENT
NO REBOUND
RECTAL - NORMAL
RECTAL MASS
LT RECTAL TENDERNESS
RT RECTAL TENDERNESS
GEN. RECTAL TENDERNESS
PELVIC - NORMAL
RT PELVIC TENDERNESS
LT PELVIC TENDERNESS
CERVICAL TENDERNESS
GEN. PELVIC TENDERNESS
PELVIC - MASS
PELVIC - BLOOD (clots)
PERIODS NOT STARTED
PERIODS CEASED
PERIODS REGULAR
PERIODS IRREGULAR
L.M.P. NORMAL
L.M.P. LATE/OVERDUE
VAGINAL D/C PRESENT
VAGINAL D/C ABSENT
PREG. IMPOSSIBLE
PREG. POSSIBLE
PREG. CONFIRMED
FAINT/DIZZY PRESENT
FAINT/DIZZY ABSENT
PREV. GYN. HISTORY
NO PREV. GYN. HISTORY
12 9 42 Appendicitis vs NSAP
The following features favor Appendicitis:
- Pain moving to RLQ.
- Aggravated by movement and coughing.
- Nausea, vomiting and anorexia.
- Facial Flushing.
- Focal RLQ tenderness.
- Rebound and guarding.
- Tender on R on rectal exam.
- Tender on R on vaginal exam.

13 7 49 Appendicitis vs PID
Is pain focal RLQ (Appx) or more diffuse (PID).
Nausea, vomiting AND anorexia favor Appendicitis.
Urinary symptoms, where present, favor PID.
Focal RLQ tenderness favors Appendicitis.
Flank tenderness favors Appendicitis.
Vaginal discharge favors PID.
Cervical tenderness favors PID.

14 6 57 Appendicitis vs UTI
Focal RLQ pain favors Appendicitis.
Flank pain favors UTI.
Frequency, dysuria favor UTI.
Focal RLQ tenderness favors Appendicitis.
Rebound, guarding favor Appendicitis.
Rectal tenderness, focal to R. side, favors Appendicitis.

15 5 53 Appendicitis vs Ovarian Cyst.
Pain MOVING to low Abd/RLQ favors Appendicitis.
Flushed, Temp. over 100.4F (38C) favors Appendicitis.
Scar, Distension favor Ovarian Cyst.
Abd. Mass favors Ovarian Cyst.
Abnormal bowel sounds favor Ovarian Cyst.

16 6 64 Appendicitis vs Ectopic
Focal RLQ pain favors Appendicitis. More diffuse, Ectopic.
Ectopic either presents SUDDENLY or after a few days.
Pallor favors Ectopic, Flushing favors Appendicitis.
Focal RLQ tenderness favors Appendicitis. More diffuse, Ectopic.
Late LMP, possible or confirmed pregnancy favors Ectopic.
Faintness/dizziness favor Ectopic.

17 8 64 Appendicitis vs Incomplete Abortion
Pain localizing in RLQ favors Appendicitis.
Abortion pain usually mild/moderate, lower half.
Pain aggrav. by movement, coughing favors Appendicitis.
Nausea, vomiting, anorexia favor Appendicitis.
Tenderness - same considerations as for pain.
Rebound, guarding favor Appendicitis.
Rectal or vaginal tenderness on R favors Appendicitis.
Blood clots on vaginal exam + possible pregnancy favor Abortion.
23 6 42 NSAP vs PID
Pain outside lower half favors NSAP.
Tenderness outside lower half favors NSAP.
Rebound tenderness favors PID.
Vaginal discharge favors PID.
Previous History PID favors PID.
Rectal/vaginal tenderness favor PID.
24 5 36 NSAP vs UTI
Flank pain favors UTI.
Frequency/dysuria favor UTI.
Abnormal urine color favors UTI.
Flushed/feverish patient favors UTI.
Flank tenderness favors UTI.
25 7 52 NSAP vs Ovarian Cyst.
Focal pain RLQ favors Ovarian Cyst.
Pain aggravated by movement favors Ovarian Cyst.
Short history, severe pain favors Ovarian Cyst.
Focal lower quadrant tenderness favors Ovarian Cyst.
Rebound, Guarding, Rigidity favor Ovarian Cyst.
Mass, altered Bowel Sounds favor Ovarian Cyst.
Rectal/Vaginal tenderness favor Ovarian Cyst.
26 7 65 NSAP vs Ectopic
Ectopic pain tenderness usually lower half or one lower quadrant.
Pain aggrav. by movement, respiration favors ectopic.
Severe pain favors ectopic - often with previous mild pain.
Pallor favors ectopic, flushing favors NSAP.
Rebound, Guarding, Rigidity favor Ectopic.
LMP overdue, possible pregnancy, favors Ectopic.
Fainting or dizziness favors Ectopic.
27 7 61 NSAP vs Incomplete Abortion
Pain of abortion usually lower half, short history, mild/nod.
Nausea, vomiting, anorexia favor NSAP.
Previous similar episodes favor NSAP.
In abortion, tenderness usually absent, or mild lower half.
Rebound, Guarding RARE in abortion.
In abortion, usually LMP late/overdue. PG often confirmed.
34 7 69 PID vs UTI
Flank pain suggests UTI.
Frequency, dysuria may occur in either condition.
Flank tenderness suggests UTI.
Rebound tenderness suggests PID.
Vaginal discharge suggests PID.
Previous History PID suggests PID.
Cervical tenderness suggests PID.
35 7 48 PID vs Ovarian Cyst.
Focal pain constant in RLQ favors Ovarian Cyst.
Aggrav. of pain by movement favors Ovarian Cyst.
Severe pain favors Ovarian Cyst.
G.I. symptoms favor Ovarian Cyst.
Distension, mass favor Ovarian Cyst.
Focal tenderness (RLQ) favors Ovarian Cyst.
Vaginal discharge, Cx tenderness favor PID.
36 7 56 PID vs Ectopic
Some days pain, suddenly worse, favors Ectopic.
Nausea, vomiting favor Ectopic.
Previous similar episodes favor PID.
Pallor + Tachycardia favors Ectopic.
Once ruptured rapid silent abdomen favors Ectopic.
Late/overdue period, possible pregnancy, favors Ectopic.
Faintness/dizziness favors Ectopic.

37 8 52 PID vs Abortion
Pain of Abortion usually low 1/2, short duration.
Pain aggrav. by movt. coughing, resp. favors PID.
Previous episodes/past history of PID favor PID.
Temperature <98.6F (36.9C) favors Abortion.
Rectal, vaginal tenderness favor PID.
LMP overdue, pregnancy possible, favor Abortion.
Cardinal sign Abortion, blood clots posterior vault.
Rebound, guarding favor PID.

45 7 45 UTI vs Ovarian Cyst
Focal/RLQ pain/tenderness favor Ovarian Cyst.
Flank pain/tenderness favor UTI.
Frequency/dysuria favor UTI.
Flushing/pyrexia favor UTI.
Distension/mass favor Ovarian Cyst.
Rebound/guarding favor Ovarian Cyst.
Rectal/vaginal tenderness favor Ovarian Cyst.

46 7 52 UTI vs Ectopic
Flank pain/tenderness favor UTI.
Frequency/dysuria favor UTI.
Flushing favors UTI, pallor favors Ectopic.
Silent abdomen, decreased movement favors Ectopic.
Rebound, guarding, rigidity favor Ectopic.
Late/Overdue LMP, possible pregnancy, favor Ectopic.
Faintness or dizziness favor Ectopic.

47 8 56 UTI vs Abortion
Pain in Abortion usually low 1/2 moderate.
Flank pain/tenderness favors UTI.
Frequency/dysuria favors UTI.
"G.I. Symptom" favor UTI.
Flushing favors UTI.
Absence of tenderness favors Abortion.
Late overdue LMP/possible pregnancy favor Abortion.
Cardinal sign of abortion - blood/clots posterior vault.

56 6 55 Ovarian Cyst vs Ectopic
Ovarian Cyst pain usually starts focally, severe.
BESTQUES.DAT (cont'd)

Ectopic pain usually starts milder, diffuse.
Pallor, tachycardia favor Ectopic.
Focal lower quadrant tenderness favors Ovarian Cyst.
Possible pregnancy, late/overdue period favors Ectopic.
Faintness/dizziness favors Ectopic.
57 8 58 Ovarian Cyst vs Abortion
Pain of Abortion usually mild, diffuse, low 1/2.
Pain of Ovarian Cyst worse on movement, coughing, resp.
G.I. symptoms favor Ovarian Cyst.
Overt distress with pain favors Ovarian Cyst.
Silent abdomen/poor movement favors Ovarian Cyst.
Absence of tenderness, rebound, guarding favors Abortion.
Possible pregnancy, late/overdue period favors Abortion.
Cardinal sign of Abortion - blood + clots posterior vault.
67 1 58 Ectopic vs Abortion
Cardinal sign of Abortion - blood + clots posterior vault.
99
11 the right upper quadrant
12 the left upper quadrant
13 the right lower quadrant
14 the left lower quadrant
15 the upper half of the abdomen
16 the lower half of the abdomen
17 the right half of the abdomen
18 the left half of the abdomen
19 the periumbilical area
20 a rather diffuse area over the whole abdomen
21 the right flank area
22 the left flank area
23 no abdominal area
24 the right upper quadrant
25 the left upper quadrant
26 the right lower quadrant
27 the left lower quadrant
28 the upper half of the abdomen
29 the lower half of the abdomen
30 the right half of the abdomen
31 the left half of the abdomen
32 the periumbilical area
33 a diffuse area over the whole abdomen
34 the right flank area
35 the left flank area
36 no abdominal area
37 intermittent
38 fairly constant
39 colicky
40 a moderate pain
41 a severe pain
42 movement
43 coughing
44 breathing
45 food
46 OTHER
47 nothing the patient does
48 seems to be getting better
49 seems to be about the same as when it first began
50 seems to be getting worse
51 began less than 12 hours ago
52 began 12-24 hours ago
53 began 24-48 hours ago
54 began greater than 48 hours ago
55 lying still
56 vomiting
antacids
eating bland foods
OTHER
nothing he does
nausea
no nausea
vomiting.
no vomiting.
normal bowel movements
constipation
diarrhea
blood in his stool
mucus in his stool
decreased.
normal.
There is a history of jaundice in the recent past.
There is no history of recent jaundice.
normal urination
frequency
dysuria
dark urine
hematuria
The patient has a history of previous indigestion
There is no history of previous indigestion
and he has had similar pain in the past.
and he has had no similar pain in the past.
abdominal surgery.
oabdominal surgery.
past GI illnesses.
o pertinent G-I illnesses.
medication for this illness.
o medication for this illness.
less than 98.6
98.6-100.2
100.3-102
greater than 102
less than 80
80-99
greater than 99
less than 90/
90-129/
greater than 129/
less than 70
70-89
greater than 89
normal.
distressed.
anxious.
normal
106 pale
107 flushed
108 jaundiced
109 cyanotic
110 less than 8,000
111 8,100-10,000
112 10,100-12,000
113 12,000-15,000
114 greater than 15,000
115 Inspection of the abdomen reveals no abnormalities.
116 Inspection of the abdomen reveals visible peristaltic waves.
117 Inspection of the abdomen reveals decreased abdominal movement.
118 Abdominal surgical scars are present.
119 There are no surgical scars on the abdomen.
120 Voluntary guarding is present
121 Voluntary guarding is absent
122 guarding (rigidity) is present.
123 guarding is absent.
124 Bowel sounds are normal.
125 Bowel sounds are absent.
126 Bowel sounds are hyperactive.
127 Abdominal distention is present.
128 There is no apparent abdominal distention.
129 There is an abdominal mass
130 There are no masses
131 the right upper quadrant
132 the left upper quadrant
133 the right lower quadrant
134 the left lower quadrant
135 the upper half of the abdomen
136 the lower half of the abdomen
137 the right half of the abdomen
138 the left half of the abdomen
139 the periumbilical area
140 a diffuse area over the whole abdomen
141 the right flank area
142 the left flank area
143 not noted
144 Murphy’s sign is present.
145 Murphy’s sign is not present.
146 tenderness is noted.
147 tenderness is absent.
148 no tenderness or mass
149 a mass
150 tenderness on the left side
151 tenderness on the right side
152 generalized tenderness
153 The pelvic examination is normal.
154 right adnexal tenderness
left adnexal tenderness
cervical tenderness
general tenderness
a pelvic mass
Clots are noted in the vaginal vault.
have not started.
have ceased.
are regular.
are irregular.
Her last period was normal
Her last period was late/overdue
She has had a recent vaginal discharge
She has had no recent vaginal discharge
is impossible.
is possible.
has been confirmed.
has
has not
a
no
Appendix G
MAKE Script file for creating ABDX.EXE

ABDX

abdx.obj: abdx.bas include.bas
bc abdx.bas /o;

abdxnara.obj: abdxnara.bas include.bas
bc abdxnara.bas /o;

abdxonly.obj: abdxonly.bas include.bas
bc abdxonly.bas /o;

abdxshar.obj: abdxshar.bas include.bas
bc abdxshar.bas /o;

abdxsub1.obj: abdxsub1.bas include.bas
bc abdxsub1.bas /o;

abdxsub2.obj: abdxsub2.bas include.bas
bc abdxsub2.bas /o;

abdxsub3.obj: abdxsub3.bas include.bas
bc abdxsub3.bas /o;

abdxsub4.obj: abdxsub4.bas include.bas
bc abdxsub4.bas /o;

template.obj: template.bas include.bas
bc template.bas /o;

dates.obj: dates.bas
bc dates.bas /o;

fsf600.obj: fsf600.bas include.bas
bc fsf600.bas /o;

abdxsub5.obj: abdxsub5.bas
bc abdxsub5.bas /o/e/x;

abdxsub6.obj: abdxsub6.bas include.bas
bc abdxsub6.bas /o;

win.lib: fprint.obj intrpt.obj cipher.obj abdxsub5.obj

ABDX Programmer's Manual (G-1)
ABDX (cont’d)

lib win.lib +fprint +intrpt +cipher +abdxsub5;

abdx.exe:  abdx.obj abdxnara.obj template.obj dates.obj \ 
           abdxonly.obj abdxshar.obj \ 
           abdxsubl.obj abdxsub2.obj abdxsub3.obj \ 
           abdxsub4.obj abdxsub6.obj fsf600.obj win.lib \ 
link /e abdx abdxnara abdxsubl abdxsub2 \ 
       abdxsub3 abdxsub4 abdxonly abdxshar fsf600 template \ 
       dates abdxsub6,,abdx.map,win.lib;
ABDX - A Decision Support System for the Management of Acute Abdominal Pain - Version 3.0 - PROGRAMMER'S MANUAL

At sea, the Independent Duty Corpsman (8402) is responsible for the diagnosis and management of illnesses. He must decide whether to treat the patient aboard the ship, or, if necessary, make recommendations regarding the evacuation of the patient. The corpsman's laboratory facilities are limited and, in most instances, he is unable to communicate with short-based medical facilities.

A computer based medical decision support system (ABDX) was developed at the Naval Submarine Medical Research Laboratory (NSMRL) to assist the corpsman in the diagnosis, triage, and management of patients who present with acute abdominal pain at sea. The original system was designed for use with the Tektronix 4051 to which the corpsman was to have access. In practice, the corpsman's access has been very limited due to the use of the machine by other departments for tactical programs. The medical support system was then modified and additions were made to allow the system to run on an IBM PC or

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     421
18. cont. Small bowel obstruction; ectopic pregnancy; ovarian cyst; ovarian cyst; pelvic inflammatory disease; threatened abortion; urinary tract infection; and non-specific abdominal pain

19. cont. compatible (MS-DOS) microcomputer. During FY89, a gynecological database for acute abdominal pain was incorporated into the program, resulting in a new product, ABDX version 3.0.

The original non-gynecological portion of the program is intended for use with males, between the ages of 17 and 70, and provides medical support for the 5 most common causes of serious abdominal pain in this population. The 5 diseases are: Appendicitis, Cholecystitis, Perforated Duodenal Ulcer, Renal colic, and Small Bowel Obstruction. In addition, a sixth category, Non-Specific Abdominal Pain, is used to represent those cases of non-serious abdominal pain. The gynecological portion of the program is used with females between the ages of 15 and 50, and provides medical support for the six most common causes of serious abdominal pain in this female population. The diseases are: Appendicitis, Ectopic Pregnancy, Ovarian Cyst, Pelvic Inflammatory Disease, Threatened Abortion, and Urinary Tract Infection. In addition, a seventh category, Non-Specific Abdominal Pain, is again used to represent those cases of non-serious abdominal pain.

The program consists of a diagnostic module, which provides diagnostic and treatment suggestions for each of the abdominal pain diseases, a training module, which tests the corpsman's accuracy in abstracting data from patient narratives, and a SF-60Q generation module, which prints medical record entries based on patient data entered into the program.

This report is a programmer's reference manual for the ABDX system implemented on MS-DOS computers. The manual briefly describes the functions of programs designed for the corpsman user and other programs designed for the programmer making modifications to ABDX. The Microsoft QuickC, Microsoft QuickBASEC, and Microsoft MACRO assembly language source code listings for all the programs are listed. In addition, the formats for the help files and data files are described.

Familiarity with QuickBASIC is required to modify ABDX or to use this manual effectively to identify program malfunctions.

This report replaces NSMRL Report No. 1113.