Creating a new Mail Group to send notifications

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Core Applications ...
     Device Management ...
     Menu Management ...
     Programmer Options ...
     Operations Management ...
     Spool Management ...
     Information Security Officer Menu ...
     Taskman Management ...
     User Management ...
 EHR CAREVUE-EHR MASTER CONFIGURATION MENU ...
 FM VA FileMan ...
     Application Utilities ...
     Capacity Planning ...
     HIMS DIRECTOR MENU ...
     HL7 Main Menu ...
     Test an option not in your menu
Select Systems Manager Menu CCTEST(GTM) Option: TEST an option not in your menu
Option entry to test: XMEDITMG Mail Group Edit
Select MAIL GROUP NAME: TESTING MAIL GROUP
Are you adding 'TESTING MAIL GROUP' as a new MAIL GROUP? No// Y (Yes)
MAIL GROUP NAME: TESTING MAIL GROUP//
Select MEMBER: VEGA, NICOLE
                               NV
                                       SYSTEM MANAGER
Are you adding 'VEGA, NICOLE' as a new MEMBER (the 1ST for this MAIL GROUP)? No// Y (Yes)
TYPE: I INFO
Select MEMBER: USER, PHYSICIAN
                                 PU
                                         M.D.
Are you adding 'USER, PHYSICIAN' as a new MEMBER (the 2ND for this MAIL GROUP)? No// Y (Yes)
TYPE: ?
   • Choose from:
       C
            CC
       ı
           INFO
TYPE: I INFO
                                SH
Select MEMBER: HOOTEN,SARA
                                       SYSTEM MANAGER
Are you adding 'HOOTEN, SARA' as a new MEMBER (the 3RD for this MAIL GROUP)? N
o// Y (Yes)
TYPE: C CC
Select MEMBER:
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DESCRIPTION: < OPTIONAL> THERE ARE NO LINES! Edit? NO// YES ==[WRAP]==[INSERT]========== DESCRIPTION >====[Press <F1>H for help]==== THIS IS A TESTING MAIL GROUP ***** TO SAVE TEXT ENTER F1+E ***** TYPE: • Choose from: PU public PR private ALLOW SELF ENROLLMENT?: • If users may join this group by themselves, say "YES"

Choose from:

- YES У
- NO

ORGANIZER: VEGA, NICOLE//

COORDINATOR:

Select AUTHORIZED SENDER:

- You may enter a new AUTHORIZED SENDER, if you wish Enter name of user who may address this group, if it is to be limited
- Answer with NEW PERSON NAME, or INITIAL, or SSN, or VERIFY CODE, or NICK NAME, or SERVICE/SECTION, or DEA#, or PHYSICIAN ID, or EMPLOYEE NUMBER, or ALIAS, or NPI, or **STATE PROVIDER ID (SPI)**

Select MEMBER GROUP NAME:

 You may enter a new MEMBER GROUPS, if you wish If you would like another mail group to be a member of this one enter a partial match to its name. A mail group may not be a member of itself.

Select REMOTE MEMBER:

• You may enter a new MEMBERS - REMOTE, if you wish Enter a remote address (name@domain) or local device (D.device or H.device) or local server (S.server).

Select DISTRIBUTION LIST:

 You may enter a new DISTRIBUTION LIST, if you wish NAME MUST BE 3-30 CHARACTERS, NOT NUMERIC OR STARTING WITH PUNCTUATION