Contents

Remote Access SAC	4
Remote access, need to install Citrix	4
Remote access, already installed Citrix	5
Launching SAC from a Hospital Desktop or Via Citrix	7
Signature Manager	8
Purpose	9
Signature Manager Filters	9
Refuse to Sign	10
Telephone Orders	10
SAC Navigation	11
Log IN Screen	11
Toolbar	12
Header Information	12
SAC Icons- quick reference	12
Patient List Tab	13
Creating a Personal List	13
Maintaining Your Personal List	14
To add a patient that you are not a Care Provider on to your list:	15
Creating a Criteria Based List	16
Creating a Criteria-Based List: Location and Provider	16
Creating a Criteria-Based List: Location and Orders	19
Flags in SAC	24
Chart Tab Review	25
Orders Tab	25
Filters	26
Results Tab	29
Results: Summary View	30
Results: Trend View	
Results: Trend & Graph View	32
Patient Info Tab	

	Adding Yourself as a Provider	. 35
	Expiring Yourself as a Provider	. 37
	Documents Tab	. 38
	Documents Tab Options Panel	. 39
	Flowsheets Tab	40
	Viewing a Flowsheet	40
	Flowsheet Summary View	41
	Clinical Summary Tab	42
	Imaging Tab	44
0	rder Entry	45
	To Enter an Order	45
	General Order Entry Worksheet Design	46
	Order Sessions	46
	Order Entry Icons	47
	Individual Worksheet Fields	48
	Routine Orders	49
	Priorities Other Than Routine	50
	Repeat Orders	51
	Medication Order Entry	52
	Medication options and how to use them	52
	IV Order Entry	54
	Radiology Test Order Entry	57
	Lab Order Entry	58
	Order Search	59
	Order Sets	62
	Common Order Sets	62
	Blood Bank Order Set	63
	Managing Order Alerts	67
	Practice: Enter the following orders	
	Admitting a Patient	
	Order Reconciliation Manager	

Admission Medication Reconciliation	
Admission Order Set	72
The Admission Order Set Worksheet	73
Health Issues	79
Health Issues Toolbar	79
Entering a Health Issue	80
Quick Copy	
Health Issues Favorites	
Transfer Orders	
How to Discharge a Patient	87
Discharge Orders	87
Saving Discharge Diagnosis to Discharge Order	89
Conditional Discharge Order	
Discharge Medication Reconciliation	
More Actions in Order Reconciliation Manger	
Document Entry	
Search for a Document	
How to Use "Retrieve Last Charted" and Other Retrieval Options	
Retrieve Last Charted	
Other Charting Retrieval Options	
Completing a Document	100
Items for NP or PA: Assigning a Co-Signer during selection of document:	107
Sovera	109
Searching for Medical Records	110
Addressing Deficiencies	111
Placing a "Sticky Note" on the Chart	114

Remote Access SAC

Website: cag.clarkmemorial.org/

Remote access to CMH systems is granted through Citrix.

Remote access, need to install Citrix

- 1. The Citrix Receiver client can be downloaded from the following URL: <u>http://receiver.citrix.com/</u>
- 2. This URL either hosts the client or will redirect to the appropriate site.

Windows Desktop download

e Edit View Favorites Tools Help @] Insight Webmail 🛃 Google 😥 Bing @] ClarkNet 😥 Supported Sites + @] Web Sice Golley +		🛐 = 🔯 - 🖂 🏨 = Page = Safety = Tools = 🚯 =
CITRIX	Citrix Receiver Access your apps, data and desktops from any de Download Receiver for Watdows tew atter devices	
	6 1066-2012 Citris Optiment, inst. Al Rights W	wewel Trans of Unit Proces

- 1. For full Windows and Mac operating systems such as laptops and desktops, simply download and install the client.
- 2. Once installed open a browser and navigate to <u>https://cag.clarkmemorial.org</u>

Remote access, already installed Citrix

1. If you already have Citrix installed, after opening a browser and navigating to <u>https://cag.clarkmemorial.org</u>, you may click **Already Installed** on the right side.



2. You will then proceed to this screen, which is the Citrix Gateway screen.

Citrix Gateway	As of 4/14/2020 your browser must support TLS 1.2! If TLS 1.2 is not supported, either upgrade your browser or install an alternate such as Chrome or Firefox.
	Test your browser here: https://clienttest.ssllabs.com
	User name
	Password
	Log On

- 3. Log In:
 - a. Username: you will need to use your CMH assigned username, also known as the AD, Windows, or Network username. It is in one of 3 forms:
 - i. First.LastName
 - ii. First.LastName@clarkmemorial.org
 - iii. The last 5 digits of your Indiana Medical License
 - The correct format should be reviewed during CMH Computer orientation.
 - b. Password: the initial password will be given at computer orientation and will be required to be changed upon the first log in.

After logging into Citrix, the icons available to you will be Sovera, Sunrise, and potentially others



You can then double-click on the icon to start the application.

Launching SAC from a Hospital Desktop or Via Citrix

1. Double-click on SAC icon:



2. Enter your Allscripts username & password:

Allscripts Gateway Logon	
Allscripts®	
Sunrise [™] Enterpris	e
UsernamePassword	
User Name	
Password P	
Password	
This System should only be acce	ssed by Authorized Users
Welcome to the Allso	ripts Gateway.
Need Help?	Login
Current Workgroup: CB1	
© 2015 Allucripts Healthcare Solutions, Inc. and/or its allilates. All Rig proprietary information of Allucripts Healthcare Solutions, Inc. and/or	its affiliates. This software is protected by tracle secret and
copyright law. All use of the software is governed by the license terms Notice to U.S. Government Users. This software is "Commential Comp	



Signature Manager

Signature Manager

Upon logging in, *the first thing you may see* is Signature Manager if you have orders or documents that need to be signed.

Function	1						
● Sign	8	Item(s) to		ers / Doc	uments		1 Item Returned
O Approve/Verify			ospital - 2NW	7 7			
Patient Selection		ainInstructor Orders	Train < 4000166	> (Cv/k Mem	orial Hospital - 2NV	N - 01-07-2014)	
All Patients		Orders	J4-07-2014	Requested By:	Entered By:		
Date Range			16:17	aaTemplate, SCE MD (MD)	aaTemplate, SCE RN (RN)		
Start Date:		- V		EKG - 04-07-	04-07-2014 16:17	Active	< Session:> Stan
Earliest Available 🛓 🛄				2014; STAT Reason: Chest			ard;*Auto Activate.
Stop Date:				PainTo be Read			Activate.
Latest Available				by:Cardiologist On Rotation			
Facility Selection		Tasks		on Kotation			
Clark Memorial Hosp Filters		Documents					
Provider Selection			-				
My Signatures 🛓 📖							
Item Type Filter							
Orders, Documents							
Item Status Filter							
Active, Incomplete, Refused							
Sort Sequence							
Location, Patient, Type, Date 🔒							
Item To Process							
Sign/Refuse To Sign							
Reassign	•						
				Show All	Select All Un	select All	ails <u>A</u> lerts Info
<u>G</u> et List)				Edit Sign	n Re <u>f</u> use	Reassign Clos

You can access the Signature Manager by clicking the "To Sign" flag from your patient list or by selecting the signature manager icon in the system toolbar.



Purpose

Signature Manager allows you to:

- Review and sign all verbal/telephone orders for accuracy
- Review and sign PA/NP Orders or Documents
- Review and sign ADMIT TO: or other orders sent via Care Coordination Communication.
- Prevents the need of logging in and signing in Sovera later on.

Signature Manager is no not hard stop, therefore if you need to bypass it, you may. However, *Signature Manager will continue to appear every time you open SAC until your items are addressed.*

Important Note: If a patient is discharged and you have not addressed your items in Signature Manager, you will need to log in to Sovera and address them.

Signature Manager Filters

Filters on are on the left side of the screen. You can filter by date, type, provider, etc.

IMPORTANT NOTE: In order to activate one or more of these filters, you MUST select the GET LIST button below the filters.

Provider Selection My Signatures	Displays items that require YOUR signature ONLY.
My Group Signatures	Displays ANYONE in your group who has items to be signed.
All Providers	This option will display items from ALL providers needing signatures.
Provider Selection Selected Providers	Will display only items that need to be signed by providers you select.
<u>G</u> et List	Activates chosen filter(s).

Refuse to Sign

If you want to "Refuse" to sign an order, highlight the order and click:



You will be asked to give a reason why you are refusing to sign:

Refusal Reason:		لعر
	Did Not Document	Y
	Did Not Order	

If you refuse to sign an order, HIM will follow up with the appropriate person.

Telephone Orders

The physician is expected to enter <u>ALL</u> orders for the patient if they have access to the system. The exception to this is no internet access or while driving a vehicle. You will be required to sign these orders the next time you log into SAC. The nurse will require you to stay on the phone with them until the orders are entered to allow you to acknowledge any and all alerts that are presented to the nurse during order entry.

SAC Navigation

Log IN Screen

This screen displays a default patient list based on your security settings. Here you will see many rows, columns, flags, and information about the patients on the list. Once the SAC option is chosen from the side bar panel, the side bar may be closed to expand your view.



Toolbar

Located in the upper right corner of your screen.



Displays the icons used to set user preferences, suspend, and close SAC, and Launch Help icon.

- 1. Recently Viewed Patient 🚙
 - Allows viewing of recent patients based on application.
- 2. User Preference Icon: 🖇
 - Enables clinician specific settings to be set and reset.
 - Account Settings Tab: This is where clinicians can change the password for logging into SAC.
 - **General Tab:** Allows clinicians to select which application will display when SAC is launched (if more than one application is assigned to that clinician).
- 3. Suspend Session:
 - Allows the current application to be suspended and resumed later (if unsuspending on the same device).
 - This helps protect patient privacy and freezes your current session when you are away from the computer and re-I at mplate...

4. Log Off Session: 🧐

- Closes the open SAC session properly.
- 5. Help Icon: 🕜
 - Allows access for clinicians to reference online SAC help. Online help is organized by topic.

Header Information



Patient List Tab

The *Patient List* Tab is the starting point for selecting patients and creating Patient Lists. You can create personal lists and criteria-based lists in addition to the preconfigured ones.

Creating a Personal List

1. Select the Patient List tab

Patient List	: kg HT: cm BSA: M2 Drders Results	2 BMI: M	~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Clinical Summary			3.				Code Sta	atus: DNF	t
ED Status Board	This Location's Patients	2 🖓	6		15 22 Visit(s	s) Sa	ive Selected Pat	ients						
Current		Pendi	Birthdate	Patient		Privacy	Visit	New	New	New	То	Unack	Check	Flag
Location	Patient Name	Status	Birthdate	ID / Visit Number	Provider	Status	Туре	Ord		Docu			Ord	New
	Patient Name Test, Virginia	Status		ID / Visit Number 1021318/101436863	KNIGHT, E RAY	and the second s	Type Inpatient							
Location		Status	05-27-1952		100 T T T T T T T	and the second s								New
Location 2NW 2401 01	Test, Virginia	Status	05-27-1952 04-29-1960	1021318/101436863	KNIGHT, E RAY	and the second s	Inpatient Observation							New

- 2. Press and hold the *Ctrl* key to select multiple patient names, then release the *Ctrl* key.
- 3. Click the *Save Selected Patients* button to display the Save Selected Patients window.
- 4. Click the *New List Name* radio button and type **Your Name List (ex. Dr. Knight's list)** for the list you are creating.

	Save Selected Patients	
		Available Lists
	Add Patient to Selected List	test
	<u>Replace Patients on Selected List</u>	
2	• O <u>N</u> ew List Name	
	5. OK Can	cel <u>H</u> elp
	5.	

5. Click *OK* to close the **Save Selected Patients** window, and the system will take you to the Patient List tab, which displays your newly created patient list.

Maintaining Your Personal List

Personal Lists must be maintained, meaning patients *will not automatically* add or drop from personal lists as they are admitted, transferred, or discharged.

To remove a patient from your list:

1.

1. Higł	nlight the p	atien	t's nan	ne. 🏽 🎇	5										
2. Click	c on the Re	move	Patier	nt icon. 灯	2										
ient List													1 🌮 🌘		6
	VC CT AC	D (T 1										9		•
	View GoTo Actions			/											
) 🛃 🏲		1	1	₿ 🖻 🖉 🔌	> 🗳 🐫 🔌										
Test, D)ennis				1021328 / 101437044						67y	(01-02-19	944)	Male	
	V 2406 01				BRADLEY, TINA										
ARC				<u> </u>								C -4	e Status		
~	: kg HT: cm BSA: M											Log	e Status		
Patient List	Orders Results	Patient In	fo Docum	ents Flowsheets	Clinical Summary										
ED Status Board	a' a 🗟 4	ها 🗟			💵 🔊 🔊										
		* 1				_									
Current List:	test 1		P.	Select Remove S	elected Visits 4 Visit(s	;) Sa	ve Selected Pa	atients							
Current Location	Patient Name	Pendi Status	Birthdate	Patient ID / Visit Number	Provider	Privacy Status	Visit Type	New Ord	New Res	New Docu	To Sign	Unack Alerts	Check Ord	Flag New	I
2NW 2403 01	Test, Quincy		08-21-1983	1021323/101436947	Punnett, Michael A		Inpatient				7		*		Ĩ
2NW 2403 02	Test, Justin		03-25-1971	1021330/101437028	SLAUGHTER, MARK S		Inpatient								t
2NW 2406 01	Test, Dennis		01-02-1944	1021328/101437044	BRADLEY, TINA		Inpatient						Ÿ		t
3SE 3006 01	testBaggins, Frodo		12-12-1980	1021327/101436996	KNIGHT, E RAY		Inpatient						W		

- > A personal list is noted by a * preceding the list name.
- > Note the similar appearance of these icons:

"Delete Current list" and "Remove Selected Visit"





To add a patient that you are not a Care Provider on to your list:

1. Click the Find Patient icon.



- 2. Enter patient's last name in the **Last** field and enter the patient's first name in the **First** field.
- 3. Click the **Search** button.
- 4. Select correct patient and click Show Visits.

	P <u>r</u> o		<u>O</u> ptio	DINS				Search New Search
Quick	ID:			ID Type:	MRN 😫	ID:		
	Last: Tes	t		First:	Train1	Middle:		
	th Date: //M DD	YYYY /	Age	+/- Range	Search Options Exclude deceased Exclude alias nam Include highest pr Exact name Find similar sound	es ivacy level patients ing last names		
					Exclude persons w	ith no visits		4.
Nar	me 🛆	Birth Date	Gender	Last Visit Dat	te Social Security Number		Deceased	4. Show Visits
Nar TestIs,		Birth Date 09-27-1957		Last Visit Dat 09-26-2011			Deceased -	
TestIs,	Train1		Male	09-26-2011	te Social Security Number	r Medical Record Number		
TestIs, TestIS,	Train1 Train10	09-27-1957	Male Female	09-26-2011	te Social Security Number	Medical Record Number 2026109	NA	
TestIs, TestIS, TestIS,	Train1 Train10 Train11	09-27-1957 06-16-1966 02-12-1962	Male Female Male	09-26-2011 09-26-2011	te Social Security Number	Medical Record Number 2026109 2026119	NA NA	
TestIS, TestIS, TestIS, TestIS,	Train1 Train10 Train11 Train12	09-27-1957 06-16-1966 02-12-1962	Male Female Male Female	09-26-2011 09-26-2011 09-26-2011 09-26-2011	te Social Security Number	Medical Record Number 2026109 2026119 2026121	NA NA NA	
TestIs, TestIS, TestIS, TestIs, TestIS,	Train1 Train10 Train11 Train12 Train13	09-27-1957 06-16-1966 02-12-1962 03-13-1943	Male Female Male Female Female	09-26-2011 09-26-2011 09-26-2011 09-26-2011	te Social Security Number	Medical Record Number 2026109 2026119 2026121 2026122	NA NA NA NA	

- 5. Select the visit and click the Save Selected Patients button.
- 6. Select the Add Patient to Selected List button.
- 7. The *Override Chart Access* window will display. In the **Reason** field type *Consult*.
- 8. Select the list.
- 9. Click OK.

Creating a Criteria Based List

Another list type you can create is a **Criteria Based** List. Unlike Personal Lists, **Criteria Based** lists update with ADT activity.

Criteria Based Lists are built on certain criteria that you set. For the patient to show on the list they must meet all the criteria you set.

Criteria Based List can be based on any or more than one of the following:

- o Provider Roles
- o Patient Location
- \circ Providers
- o Service
- o Visit Status
- \circ Orders

Creating a Criteria-Based List: Location and Provider



1. Select "New Visit List" Icon

The Client Selection Criteria dialog opens:

2. Select the "Location" tab

	Client Selection Criteria	
Client Selection Client	Criteria Your Role Location Providers Service Visit Status Orders cation Providers Service Visit Status Orders	X
П	Check this box if you want to create a list that includes patients where you are a provider	
	Where I have Any Role	
	Selected Roles	
	Include visits where I am no longer an active provider	
	OK Cancel	(<u>H</u> elp

- 3. Select the Include patients at selection locations only option
- 4. Click the + sign next to Clark Memorial Hospital to expand the list
- 5. After selection Clark Memorial Hospital, while holding down the Ctrl key, select the + sign next to the units you want in your list.
- 6. Click Add. (You can select more units if needed)

Client Selection Criteria Your Role Location Providers Service Visit Status Orders Onclude patients at any location.	
O include patients at any location. O include patients at logon location only.	
 Include patients at selected locations only. 	
Available Locations Cark Memorial Houpital Behavioral Health Emergency Department Hold Beds Nursing Units Outpatient ZYYY Conversion	Selected Locations
6. <u>A</u> dd>	< <u>R</u> emove
	OK Cancel Help

7. Then click on the Providers tab

Client Selection Criteria 7.	x
Your Role Location Providers Fervice Visit Status Orders Otherst this box f you want to create that includes provider where you are a provider	
Where I have	- 1
O Any Role	- 1
Selected Roles	
OK Cancel H	1p

- 8. Enter the provider's last name and then highlight their name in the list.
- 9. Click on the Role drop down box to select their role(s) that you want to add this list.

Test, Doctor				Role9.
Name	Occupation	Org Unit	Specialty	Add
Test, CarecoordAssoc Test, Cyndi	Liaison/SIRH MD	Social Services Medicine	Social Work	<u>Remove</u>
Test, Doctor	Physician	Other		
TEST, ERIC Test, Janet EDRN	Non-Affiliated RN	Nursing Services	Emergency Medicine	
Test, Joe	LPN	PATIENT REG	None	
Test, Mikecard	Other	Cardio Diagnostic Ser.	None	•
Include visits where providers are no	longer active	<u> </u>		
Test, Doctor ANY				

10. After adding the provider(s), click OK, and name your list – e.g. Location List



- 11. Click OK
- 12. Now your list is available in your drop down of patient lists.

Creating a Criteria-Based List: Location and Orders

Sometimes you may need a list based on more than one criterion. Example of this would be needing a list of all your patients with a PICC line.



Click the "Modify Visit List" Icon

The Client Selection Criteria dialog opens.

1. Select the Location tab:

1.	Client Selection Criteria		
	Your Roce Location roviders Service Visit Status Orders		
	Check this box if you want to create a list that includes patients where you are a provider		
	Where I have		
	Any Role		
	◯ Selected Roles		
		7	

- 2. Select the Include patients at selection locations only option
- 3. Click the + sign next to Clark Memorial Hospital to expand the list
- 4. After selecting Clark Memorial Hospital, Select the + sign next to Nursing Units
- 5. Select the units you want and click Add.

- 15	Client Selection Criteria	
	Your Role Location Providers Service Visit Status Orders Advanced	
2.	Include patients at any location.	
	Include patients at logon location only.	
2	Include patients at selected locations only.	
3.	Available Locations	
	Clark Memorial Nospital	
	Emergency Department Emergency Department Emergency Department	
	4. Hursing Units	
	自 3NW 自 3SE	
	自 i cu 自 us	
	Nursery 🔽	
	Add > < <u>R</u> emove	
	<u><u>A</u>aa > 5. <u>S</u></u>	
	OK Cancel H	elp

- 6. Next, select the Orders tab
- 7. Check the box to create a list of patients that only have orders as specified below
- 8. Click Add New to create an Order Selection Filter

Client Selection Criteria		X
Your Role Location Provider	rs Service Visit Status Orders 6.	
7. Dicheck this box if you w	vant to create a list of patients that only have orders as specified below.	
Order Selection Filter	Add <u>N</u> ew) <u>M</u> c ify	
Order Status Filter Active	Add <u>N</u> ew) <u>M</u> odify	

- 9. Name the Filter.
- 10. Select the Orders you wish to include, by typing the order names and click ADD to move them from the left to right columns.

		/
	Add New Order Selection Filter	
9.	Name: PICC LINES	
	Description:	
	Order Selection Order Browse Order Item	Selected
	Enter Order: picc Orders	
10.	PICC Exchange PICC Line Insertion (IV PICC Line Insertion Proc) PICC PLMT RAD NO GUIDE 36569 PICC Reposition	
	\$	Add > Remove
		OK Cancel <u>H</u> elp

- 11. Next Select Order Status Filter.
- 12. From here Name the Filter and make the selections needed for your filter.
- 13. Select OK.

12. Name: Active	
Description: Order Priorities [All] Statuses Any	Include Suspended Orders
 Orders Due to Expire in O Days Orders Pending <u>R</u>eview in O Days Ogelected Select one or more Statuses 	Include PRN Orders Only PRN Only PRN Only Not PRN
Pending Venification Status 9 Hold Pending Scheduled Pending Cellection Active Active Clinical Pathway Active Master Order Auto Activate Status 10 Auto Activate Status 10 Auto Activate Status 5 Auto Activate Status 5 Auto Activate Status 7 Auto Activate Status 7 Auto Activate Status 7 Auto Activate Status 7	Include Discharge Orders Both Only Discharge Only Not Discharge Include Conditional Orders Both Only Conditional Only Not Conditional 3.

14. Make certain the criteria you have selected are in the boxes



15. Name the List a name of your choosing (e.g. PICC LINE ORDERS) and click OK.



16. The list is now available in your drop down of patient lists:

Patient List			Clinical Summary Imag	ging
ED Status Board	💣 / a 🤹 🚅 🖪 🐻 📆 🦹 1	I 🛃 🛃 🚱 🖉		
Current List:	PICC LINE ORDERS	Select All Patients	0 Visit(s)	Save S
Current	. This Location's Patients 2NW all pts PICC LINE ORDERS	Birthdate	Patient ID / Visit Number	Provide
no patient visits				

Flags in SAC

What are Flags?

- Flags alert a caregiver to new things happening within the patient's cart.
- Can alert the user to new orders, new results, new documents, documents that need to be signed, and so on.



Chart Tab Review

Orders Tab	Patient List	Orders	Results	Patient Info	Documents	Flowsheets	Clinical Summary	Imaging	
1. Click the Patien	t List tab								

- Select "Name, Patient."
- 3. Click on the **Orders** tab to view their orders.
- 4. Orders are displayed based on the selections you make in the *Options Panel*, on the left side of the Orders tab.
- 5. Changing the Display format changes how the orders should be organized (grouped), the Default is **By Department**.

Options Panel	🗐. (i). 🔁 💕 🚳 🕸 🍕 🗭. 윱 🖍 🛝 🧐 👰	K 🚵 🕸 🔜 🖬		
4. Chart Selection Orders from this chart only	All orders for this chart for order dates from 09-27-2011; Display Format: By Department; Grouped/Sorted by: Department			(0 of 9 select <u>Clear All Select</u>
Date Range	Order Summary	🛛 😨 🖏 🎝 🖓 🖓 🖉 🍕 ! 🎇 🔗 Order Date	Status Stop	Date Entry Date
	- 🗌 IV Therapy			0/
From: 09-27-2011 >> Start of This Chart To:	Dextrose 5% + 0.45% NaCL + 40 mEq KCL Infusion - Give 1,000 milliLiter(s), IntraVenous Continuous Run at: 75 mL/hrHang Time: 13.33 Hour(s)	09-29-201: Routine	Active 06-2	24-2014 09-29-2011 14:05
Retain selections for next patient	- Laboratory			0/
Usplay Format By Department	Arterial Blood Gases With Co	09-27-201. 23:43	1 or more Final Results Received	09-29-2011 22:36
	Urinalysis, Culture if Indicated	09-27-201. 23:38	1 or more Final Results Received	09-29-201. 22:36
Status/Priority: No Status/Priority Filter	Urinalysis, with Microscopic	09-27-201. 23:35	1 or more Final Results Received	09-29-2011 14:33
Order Selection:	Urinalysis, Culture if Indicated - STAT Source: Urine Mid-Stream , Site: Clean Catch	10-18-201: 13:15	. Collected	10-18-201 13:30
No Order Selection Filter	- Pharmacy			0
Department: No Department Filter Rx Verified: (All	acetaminophen + codeine 120 mg-12 mg/5 mL LIQ - Give 12.5 milliLiter(s), Oral, Every 3 hours Dispense as: acetaminophen-codeine 120 mg-12 mg/5 mL LIQ= 12.5 milliLiter(s), *PRN For Mild Pain (1-3) [Ordered as TYLENOL CODEINE]	אין 09-29-201 Routine	Active 06-2	24-2014 09-29-2011 14:05
Display Styles	CeFAZolin IVPB - Give 2,000 milliGRAM(s), IntraVenous Piggy Back, Every 8 hou Run at: 100 mL/hrHang Time: 30 Minute(s) Placed in: Sodium Chloride 0.9% Infusion 50 milliLi (Dispense as Cefazolin injection)		. Active 06-2	24-2014 09-29-2013 14:05
Show	metFORMIN -	09-29-201	Active 06-2	24-2014 09-29-2013

6. UThis symbol is displayed if you have limited (filtered) what orders are displayed.

Patient List Orders	Results Patient Info	Documents	Flowsheets	Clinical Summary	Imaging		
Options Panel Chart Selection	*		D 📌 🚳	Ø 🖲 🖗 . á	i 🖍 🛝 😳 🕅	ñ 連 🚯 🌄	·
Orders from this chart on	_{ly} 6.				art for order dates from atus/Priority; Grouped	m 09-27-2011 ; d/Sorted by: Departme r	t and Order Date
Date Range Pased on date: • Ord	lered O Entered	Or - IV Th	der Summary		C	1 🗞 🔍 R 🖄 🗗 🌀	🔀 🤣 Order Date
From: 09-27-2011 Start of This Chart	>	De	extrose 5% + 0.	45% NaCL + 40 mEq			09-29-2011 Restrice

Filters

Orders Search Box

Differential:

On the orders tab, there is a search box to quickly find orders, rather than using the scroll.



Once you have typed a few letters, selecting the search icon, or pressing enter will begin your search.



Please note that some items are not consistent, such as CBC and Complete Blood Count with



Some orders may not be shown for this	chart for order dates from 02-12-2020 ; Display Format: By Department; Grou
cbc	
Order Summary	📴 ! 🐯 🙉 Pg
- 🗌 Laboratory	
CBC Without Diff	

To undo the search filter, select the $\overset{\blacksquare}{=}$ at the end of the search box.

Orders Tab Options Panel

1. Chart Selection – This chart or All Available Charts

Date Range

2. Date Range -

or

From: _____ To:____ From: 01-07-2014 × QuickPick Start of This Chart Start of This Chart > Today Use the QuickPick Retain selections for next patient Yesterday Three Days Ago Display Format One Week Ago By Department Two Weeks Ago **[]** 1 One Month Ago Three Months Ago 😨 Filters Six Months Ago Status/Priority: One Year Ago No Status/Priority Filter > Two Years Ago Order Selection: Three Years Ago No Order Selection Filter >

All orders for this chart

3. Display Format –



- 4. Filters
 - a) Status / Priority

Status/Priority:	Call MD For - te
No Status/Priority Filter	X QuickPick Custom
Order Selection:	No Status/Priority Filter
No Order Selection Filter	Orders Pending Review
Department:	Active
No Department Filter	Completed/Discontinued
Dispense Type:	Hold
No Dispense Type Filter	Pending Collection
Perfected: Rx Verified:	Resulted

- b) Order Selection Requested Display Format Patient Care By Department > QuickPick 1 **B**() 🜠 No Order Selection Filter Clinical Paths 😨 Filters Linked Sets Status/Priority: Non-Clinical Paths No Status/Priority Filter > 💿 Order Sets Order Selection: Consults No Order Selection Filter × Diagnostic Cardiology Department: **Diagnostic Imaging**
 - c) Department (No Department Filter) is the Default



CONTRACTED HEADERS)

5. Display Styles:

Or Customized:



(THIS IS WHERE YOU CAN SET THE DEFAULT OF EXPANDED OR

- ilable Item Selected Items The maximum number of levels you can sort by is 3. ntered by ntry Date ealth Issues Use the slider for grouping Order and Dispense Type - Action Attribute Sort Order Order Date-Month Group by Department Facility Sort 🗸 🗸 order Session Type Sort by Order Date riority Ascending 🖌 equested by Sort by Order Name Ascending 🖌 tatus Sort by Stop Date Stop Date-Month Ascending 🖌 4 apeutic Category 14 isit + Expand All Group by Headers ¥
- 6. You can set your Filters to also display additional Views:

Health issues
🗌 Linked set de
Pharmacy inf



Clinical Results can be viewed in the Results tab.

The results displayed are based on the selections you make in the **Options Panel** on the left side of the Results tab.



Results: Summary View

- 1. Select the **Summary** view to show results grouped in categories (Chemistry, Microbiology, CT and Consults etc.).
- 2. Select the Summary view and click on a Red or Green flag to view individual results



Results: Trend View

Select the Trend view to show results at the time they are entered into SAC.



Results: Trend & Graph View

Using the Trend & graph option will display the lab values with those values in graph form.

😨 Display Styles	
Display View:	
Summary	
Report by Order	
Trend	
Trend & Graph	



NOTE: Results such as ECHO, HIV, or Reference Labs can be viewed from the Document Scanning icon and only if you have the security right to do so.

My Applications 🕨 SAC		
File Registration Pharmacy View	v GoTo Actions Preferences Tools	
🕝 🛃 🍢 🖳	💐 🏌 🛉 🔳 🗣	° 🌡 (🗞) 🍰 💐.
Refresh Previous Next Find	Find Health Allergies Worklist Drug	g Print Document Education Discharge
Screen Patient Patient Patient	Visit Issues Summary Manager Info	Reports Scanning Log Instructions D
Testone, Golive		\smile

- 1. Selecting this icon will open the menu window for Scanned Imaging.
- 2. Click on a file folder that has a "+" to view the results in that folder.

🖳 Imaging	
Testone, Golive Patient ID: 1059201	
Patient Demographics Visit Demographics Outpatient Order D Sign In Sheet Insurance Contacts/Directives Payments Observation Clinical Pathology Results Reference Lab Results HIV Results Echo Results	
Scan Import Properties Print Delete List View	

Patient Info Tab

Patient information can be viewed or entered by clicking the **Patient Info** on the main screen.

- 1. Under the Summary Views section, select a category to display information
- 2. Click on the entry for more details.

ummary Views	Role	Provider	Phone	Status	Effective Date	End Date	Entered Date	Org Unit	Specialty
Alerts	Attending	Trommler, Lloyd		Active	08-13-2014		08-13-2014 1	Medicine	Internal Medicine
Allergies/Intolerances Comments	Admitting	Trommler, Lloyd		Active	08-13-2014		08-13-2014 1	Medicine	Internal Medicine
Comments Care Providers	Ordered	Lake, Robin (RN)		Active	09-24-2015		09-24-2015 1	Nursing Services	Nursing
Health Issues	Consulting	Rahman, Zaka Ur	888-269-9786	Active	12-16-2014		12-16-2014 1	Cardiology	Cardiology
Significant Events	Consulting	Cardiovascular As		Active	09-11-2014		09-11-2014 1	Other	Cardiology
Addresses/Phones/Contacts	Consulting	aaTemplate, SCE		Active	08-13-2014		08-13-2014 1	Medicine	Family Practice
Demographics/Visit Data	Primary Care	Trommler, Lloyd		Active	08-13-2014		08-13-2014 1	Medicine	Internal Medicine
Data Entry Address Alias Allergy/Intolerance Care Provider Comment Contacts/Directive	3.1	The Data	Entry (atego	ry allow	5			
Address Alias Allergy/Intolerance Care Provider Comment	່ you	The Data u to select ormation	t a forr	n to ei	nter	5			

Adding Yourself as a Provider

- 1. Select your patient from the patient list.
- 2. Click the Patient Info tab.
 - The Patient Info tab appears
- 3. From the Data Entry list, select Care Provider.
- 4. Click the Add Me button.

Patient List Orders Results	Patient Info Doc	cuments Flowsheets Clinical Summary My Schedule
Summary Views	Role	Care Providers (Adding New) - Train, TrainFifteen
Alerts	Attending	End Date: End Time: Status: Active dic
Allergies/Intolerances	Admitting	End Date: End Time: Status: Active dic
Comments Care Providers	Ordered	Type: Add Me 4.
Health Issues	Consulting	
Significant Events	Consulting	(
Addresses/Phones/Contacts	Consulting	Name:
Demographics/Visit Data	Primary Care	Name Occupation Org Unit dic
Financial/Employer		
Visit History		
Data Entry		
Address		
Alias		
Allergy/Intolerance		
Care Provider	3.	
Comment		Phone: Tune Number Note
Contacts/Directive		Phone: Type Number Note
Patient Demographics		
Discharge	Ξ	
Employer		
Health Issue		
Height/Weight		Entered:
Insurance		Add New
Phone		Last Modified:
Pregnancy/Lactation		OK Cancel Delete Help
Pregnancy/Lactation Significant Event Patient Preference		

- 5. From the Role drop-down list, select your role.
- 6. Click ОК.
- 7. You are now listed as a provider for that patient.

Patient List Orders Results	Patient Info Docur	Care Providers (Adding New)
Summary Views	Role	End Date: End Time: Status: Active
Alerts Allergies/Intolerances Comments Care Providers Health Issues	Ordered i Attending · Admitting · Referring ·	Type Add Me Role: 5. • Name: TestMDTracey, Tracey
Significant Events	Primary Care	Name Occupation Org Unit
Addresses/Phones/Contacts Demographics/Visit Data Financial/Employer Visit History Data Entry Allergy/Intolerance Care Provider Comment Contacts/Directive Employer Health Issue Height/Weight Insurance	E	Phone: Type Number Note
Insurance Pregnancy/Lactation Significant Event Patient Preference		Entered: Last Modified: 6. OK Cancel Delete Help
Expiring Yourself as a Provider

If you are no longer a provider for a patient, you may expire yourself from their list of care providers.

1. Fill in the end date

-OR-

2. You may pull the calendar from the dropdown menu and choose the date.

Patient List Orders Results	Patient Info Docur	Care Pl Adding New)
Summary Views Alerts Allergies/Intolerances Comments Care Providers Health Issues Significant Events	Role Ordered Attending Admitting Referring Primary Care	End Date: End Time: Status: Active Type: Physician Add Me Role: Name: TestMDTracey, Tracey Org Unit Item Provide the status of the status o
Addresses/Phones/Contacts Demographics/Visit Data Financial/Employer Visit History Data Entry Allergy/Intolerance Care Provider Conment Contacts/Directive Employer Health Issue Height/Weight Insurance	Ξ	Phone: Type Number Note
Pregnancy/Lactation Significant Event Patient Preference		Entered: Last Modified: OK Cancel Delete Help

Documents Tab

The documents tab is where you can view all the structured notes and transcribed notes for SAC.

The documents displayed are based on the selections you make in the **Options Panel** on the left side of the documents tab.

Patient List Orders Results Patien Dptions Panel Chart Selection On This chart O All available charts Date Range O Authored Date From: 09-08-2015	Display Format	View Docum	Group Reset M By	Iodify App	Autho	red Document dates from 0	Interval	Select Columns ((Page 1 of ument(s) show
Start of This Chart										
To:	Ti	ime	Document N Doc	umen R	levisio	Signature Status	Finalizing Provider	Docum	Authored	Signed
Retain selections for next patient	- 10-28	8-2015								
Display Format		16:16	Progress No Inco	omple E	ntered	Signed in Full	Non Finalization Documents	General	Clark, Tracey (RN)	10-28-20151
Date (Report)			Progress No Inco	• :		Signed in Full	Non Finalization Documents	General	Clark, Tracey (RN)	10-28-20151
			Progress No Inco			Signed in Full	Non Finalization Documents	General	Clark, Tracey (RN)	10-28-20151
		16:10	Progress No Com	nplete E	ntered	Signed in Full	Non Finalization Documents	General	Clark, Tracey (RN)	10-28-20151
👽 Filters		16:08	Progress No Inco	omple Ei	ntered	Signed in Full	Non Finalization Documents	General	Clark, Tracey (RN)	10-28-20151
Document Status/Priority:		16:04	Progress No Inco	omple E	ntered	Signed in Full	Non Finalization Documents	General	Clark, Tracey (RN)	10-28-20151
No Document Status/Priorit		16:01	Progress No Inco	omple E	ntered	Signed in Full	Non Finalization Documents	General	Clark, Tracey (RN)	10-28-20151
Document Selection:		14:45	Progress No Inco	omple E	ntered	Signed in Full	Non Finalization Documents	General	Clark, Tracey (RN)	10-28-20151
No Document Selection Filte	- 09-09	9-2015								
Type/Category:		08.27	Progress No Com	nnlete F	ntered	Signed in Full	Non Finalization Documents	General	Clark, Tracey (RN)	09-09-2015(
No Type/Category Filter	- 09-08			ipiete e	Intered	Signed in Full	Non Thialization Documents	General	clain, naccy (mil)	05 05 20150
Signature Status:										
No Signature Status		13:47	Certification Com	nplete E	ntered	Signed in Full	Non Finalization Documents	General	Trommler, Lloyd (Physician)	09-08-20151
Revision Status/Author:										
No Revision Status/Author F										
Display Styles										
P Display View:										
Report										
Group by:										

Documents Tab Options Panel

Just like the Orders and Results Tabs, the Documents Tab has filter options. These are a few examples:

1. Chart Selection – This chart or All Available Charts

Options Panel	ľ
Chart Selection	
● This chart ○ All available charts	_

2. Date Range – From: _____ To:____ or Use the QuickPick



3. Display Format –



4. You can set your Filters to also display additional Views:

Show	
Visit details	Health issues
Requested by	🗌 Linked set de
Set/Path details	Pharmacy inf

Flowsheets Tab

Viewing a Flowsheet

Flowsheets can be found and viewed from the flowsheet tab.

A flowsheet is a document that contains information that is entered repeatedly across time, such as Vital Signs and I&O.

1. To get to the flowsheet, first select your patient from the patient list then select Flowsheets from the tabs.

Scieen Fauent Fauent Fauent Visit 1110 135065 Summe	ny manager viewer manager into Alerts Reports From
TestIS. Train10 2NW 2403 02 ARO: Precautions: Pregnant: Kes Allergies: WT: kg HT: cm BSA: M2 BMI: M2 ADM: 09-26-2	2026119 / 2017939 1. Unreviewed Allergies 2011DSC:
Patient List Orders Results Patient Info Document	
ED Status Board 🔊 🌆 🙈 🖓 🔂 🦝 🐂 🖩	

2. Then you can double click on the name of the flowsheet to view.



Flowsheet Summary View

1. The Summary View of a Flowsheet (located in the Filter section of the options panel) is helpful in finding information without the need to horizontal scroll.

2. Using the Suppress blank rows and columns compacts the information for easy review.

3. The Summary View defaults to "Weekly", however double clicking over the "Weekly" column header will fan out the columns to a daily summary.

Patient List Orders Results Pati	ent Info Documents Flowsheets Clinical	Summary Imag	ing CCDA Tran	smission Log	Nanual Fax	
Options Panel <		1 1				
Flowsheet Criteria	Display Row Column Cell Add Time	Auto Expa	nd InfoButton			
Chart Selection	Format Actions Actions Actions Column Option		e Rows			
This chart O All available charts	Blank Rows and Columns Suppress	ed. VIEW ONLY 2	2. KBC Adult 3	• ent Interver	ntion 4.0, From 01-0	1-2
Date Range	04-2019					
From: 01-01-2019	Name	Туре	Weekly	Daily 🔀	Daily 🔀	
Three Days Ago			6-Jan-19	3-Jan-19	4-Jan-19	
To: 0			23:59	23:59	23:59	
Tod 1.	Access Lines/Monitoring Devices (1 P	aramotors)				
Filter	Peripheral IV Insertion/Assessment					
Default to summary	Site: (null) Insertion Date/Time Site Day	Last Last	1		1	
Show abnormal only ✓ Suppress blank rows and cols	Unsuccessful Insertion Attempts	Last	ó		ò	
Show ml/Kq	Insertion Compliance	Last Last				
Show cancelled columns	Device/Gauge/Length	Last	Þ		Þ	
	Cognitive (1 Parameters)					
Retain selections for next patient	- Cognitive/Neuro/Behavioral Cognitive/Neuro/Behavioral [WDL Definition: ▶	Last	WDL		WDL	
Flowsheet Selection	Respiratory (1 Parameters)					
Flowsheet	Respiratory Respiratory (WDL Definition: Regular depth a	Last	WDL except		WDL except	
01. Vital Signs, CC 1.0	Rhythm/Pattern, Respiratory	Last				
02. Intake and Output, CC 1.0	Cardiac (1 Parameters)					
	Cardiac [WDL Definition: Regular rhythm, S1, D	Last	WDL		WDL	
Care Coordination Discharge Plan	Peripheral Neurovascular (1 Parameter	rs)				
CMH Nursing Assistant Flowsheet	Peripheral Neurovascular Peripheral Neurovascular [WDL Definition: C D	Last	WDL		WDL	
Communications	□ Gastrointestinal (1 Parameters)	2000				
 Knowledge Based Charting 	Gastrointestinal					
1. KBC Adult Plan of Care 4.0	GI [WDL Definition: Abdomen soft, nondisten Abdominal Appearance	Last Last	WDL except firm	WDL except distended: firm	WDL except firm	
2. KBC Adult Assessment Inter	Abdominal Palpation	Last	RUQ: tender		RUQ: tender	
KBC Adult Rehab Record 🛛 🖃	Genitourinary (1 Parameters)					
Save Options	GU [WDL Definition: No reported or observed	Last	WDL		WDL	
	Skin (2 Parameters)					
For the second secon	Skin Skin W/DL Definition: Warm: dru: intact: elasti	tec	WDI		WDI	

Clinical Summary Tab

The Clinical Summary is a view that pulls together information from throughout the chart in one view. Some tiles are view only; others are interactive for getting more information.

- Select your patient from the patient list then Click the Clinical Summary Tab.
- Each Section is called a "Tile".
- The Clinical Summary defaults to "24 hours". However, you can click the drop down to choose other starting points.

***Notice the arrows to the left of each tile, these arrows allow you to collapse each row.

	Patient List Orders Resu	Its Patient Info Documents Flow	vsheets Clinical Summary	Imaging				
	View: CMH Professional Exchange R	Report 🔹 Start of chart 💌 art of	of Chart To 11-02-2011 13:15					
	ALLERGIES		CARE PROVIDERS			EMERGENCY CONTACTS		
	Allergen/Product Ty		Provider Name			Name Re		Home Phone
	No Known Allergies		KNIGHT, E RAY (Physician)	Attending	Internal Medicine Adult			
			KNIGHT, E RAY (Physician)	Admitting	Internal Medicine Adult			
			aaTemplate, SCE RN (RN)	Ordered	Nursing			
	SIGNIFICANT EVENTS		CURRENT ORDERS	11-01-201	11 13:14 To11-02-2011 13:14	CURRENT MEDICATIONS		
	Event Typ	De Onset Date Description	Order	Status	SignificantDate	Medication	Status	Last Given
			Lactated Ringers Infusion	Active	09-27-2011 11:26	Lactated Ringers Infusion	Active	
			omeprazole	Active	09-27-201111:25	omeprazole	Active	
			acetaminophen + codeine	120 Active	09-27-201111:24	acetaminophen + codeine 120	Active	
			ceFAZolin IVPB	Active	09-27-201111:22	ceFAZolin IVPB	Active	10-14-2011 08:09
			metFORMIN	Active	09-27-2011 11:22	TEORMIN	Active	
Contract								
	VITAL SIGNS	11-02-2011 01:14 To11-02-2011 13:1	4 I / O - Unit Of Measure: **	* NO mL/11-01-3	2011 13:14 To 11-02-2011 1	LAB RESULTS -ReportByOrder	11-01-20	1113:14 To11-02-2011-13:14
			•					
			Coll	apsed				



will expand a collapsed set of tiles.



• Select "**Status History**" to display details about the orders

Imaging Tab

- **1.** The "**Imaging**" tab allows you to see all the patient's radiology/diagnostic imaging statuses and results.
- 2. This includes both **a.**) Dictated summaries and access to **b.**) Actual radiology images in PACS.

** <u>Please NOTE:</u> Not all monitors are usable for diagnostic purposes with imaging. Only certain monitors are designated diagnostic appropriate on each unit. Check with a unit staff member as to which monitor is acceptable for diagnostic purposes.

Charts	• View	Images of Sele	ected Order			Result Text
Visit Number	Order Name	01	Jate Performed	Status	Accession Nur	
	Xray Chest AP Portable	2b.	and the second	1 or more Final		
	Xray Abdomen AP Portable	_		Active		2a.
	Xray Chest AP Portable			1 or more Final		
	Xray Chest AP Portable			Interim Results		
	Xray Chest AP Portable		1000	1 or more Final		
	CT Abdomen + Pelvis without Co	ntrast 741		1 or more Final		Result text will appear here.
	US Kidneys + Bladder 76770			1 or more Final		
	CT Head without Contrast			1 or more Final		
	Xray Pelvis			1 or more Final		
	Xray Lumbar Spine Complete			1 or more Final		
	Xray Chest AP Portable			1 or more Final		
	Xray Chest AP Portable			1 or more Final		
	Xray Chest AP Portable			1 or more Final		
	Xray Chest AP Portable			1 or more Final		
	US Vein Lower Extremities Bilate	ral		1 or more Final		
	Xray Chest 2 Views			1 or more Final		
	Xray Chest AP Portable			1 or more Final		
	Xray Chest AP Portable			1 or more Final		

3. You can view "This Chart" or "All Charts" from the drop down menu.

Patient List Orders Results	Patient	Info Documents	Flowsheets	Clinical Summary	Imaging
All Charts	3.	View Images of S	elected Order		
This Chart All Charts	rder	Name	Date Performe	d Status	Accession N

Order Entry

To Enter an Order

All patient orders are entered in a similar fashion using the Enter Order icon. All orders are entered into SAC for the inpatient population.

1. Click the Patient List tab and select your patient's name.



2. Click the **Enter Order** icon, you are then presented with the order entry worksheet (unless the patient's allergies have not been reviewed).

File Registration Pharmacy View GoTo cons Preferences Tools	
Previous Next Refer Find Find Health Clinical Allergies Signature Task Flowsheet Prescription Outpatient Print More Header Secure Water Medication Review Reports Info Meeting View Rescarging View Medication Review Reports Info Meeting View Rescarging Meeting View Review Reports Info Meeting View Review Reports Info Meeting View Review Reports Info Meeting View Review Review Reports Info Meeting View Review Revie	Drug E
Instruction Surgery 4111652 / 410031918 42y (06-06-19) 2NW 2407 01 Unreviewed Allergies LATINO, PETER S 42y (06-06-19) ARO: Precautions: Allergies: LATINO, PETER S 42y (06-06-19)	
WT: In BMI: M2 ADM: 02-09-2018 Med Surg Private LOS: 24d Code Patient List Orders Results Patient Info Documents Flowsheets Clinical Summary Imaging CCDA Transmission Log	Sts:
Patient List 💌 💣 🍋 🤹 🥰 🍋 闷 🙀 🎲 🎲 🎲 👘 🔃 😥 😥 🖉 👘 👘 👘 👘 👘 👘 👘 👘 👘 👘 👘 👘 👘	
Current List all Select All Patients 130 Visit(s) Save Selected Patients	

- 3. If the patient's allergies have not been reviewed, they will present for review.
- 4. To manage the Allergies, you will a.) Review current allergies or b.) add new to enter the patient allergies
 - Note: This window will not display if you have previously clicked on the Mark as Reviewed button or if your patient does not have allergies.

H	Туре	Allergen/Product	< 🛈 🖉	Reaction	Confidence Level	Onset Date	Info Source	Status	Reason	Date Reviewed	Entered Date
Allerg	gy (1)										
		No Known Allergie						Active			11-12-2014 10:38

5. Click the **Mark as Reviewed** button to acknowledge you have seen the allergies and the Allergy Summary window will **not** appear the next time you enter orders for this patient. This is only done once a visit.

6. Click the **Close** button to close the window.

General Order Entry Worksheet Design

Order Entry Worksheet - Test, Tracey2				
Session 701 Type stringsIntolerances		4100269 / 410003750 TestMDTracey, Tracey	75y (06-20-1940)	Female
Leventrellyr ⊙ite Ogtec TesH0Tiace		Search/Manual Entry free text		
First Of Discuss	Reason:			
Start Df Biowne	Type here to enter order name Order	Cost		Add View
Charges Consuls Consuls Citical Zare Diders Discharge		Order List will populate here		Add to Envorites Message
IV Therapy Laboratory NeuroSegnotics Nutritional Services				Ling into 💽
Poliert Care Pharmocy Padiogy Padology Pehab Services				
Respiratory Care				
		"Shopping Basket" – Orders you have entered		
		that are waiting to be submitted.		Edit Dejete
				<u>Copy</u> Add <u>Specimen</u>
				Indication Mark as Done
		Sybmit Order(s) for Test, Tracey2	ide <u>W</u> orksheet) Cancel	Help

Order Sessions

1	Requested By: (<u>Me</u> <u>O</u> ther: TestMDTracey, Tracey Source:
l	Date: Time:
	C Session
I	Type: Standard Reason:
I	Discharge Orders
I	Start D Standard

There are 3 types of Session Types for orders:

- a. **Discharge** used for discharge orders
- b. **Hold** used for direct admit orders or post op orders; these orders are to be activated by nursing
- c. **Standard** *default choice* used for majority of orders.

Order Entry Icons

- Icons to the left of the options represent information about the item. •
- The blue grid indicates that the order needs more details to be complete. When you select an order that requires more details (blue grid) the form will open up for you to enter the details. Some fields will already be populated with data but can be changed if it's not what you are wanting.



- The icon with the blue link and the file type icon indicate these are linked order sets. A plain order set does not have the link. An order set is a group of orders that covers multiple department orders.
- Orders that do not have a blue grid are complete orders that when selected will move to • the order review pane.



- You can select one or more orders to be entered during an order entry session
- The order review pane will also display when the order is to be active/acted upon.

Complete Blood Count + Manual Diff	12.08.20	15 Pending	
Comprehensive Metabolic Panel	12-08-20	15 Pending	
Xray Chest 1 View - Radiology May Change Exam per Protocol: Yes; AM Rad Exam. Sign-Symp :cough		15 AM Rad Pending	
	Exam		

Individual Worksheet Fields

	Order:	EKG -					Order ID: 00114	17QXQ	
	Requested By:	Gill, Connie		Ten	nplate Name:				
	Messages:								
	Requested For		Requested For Time	INI					
	12-08-2015	Portable		ري		Height (inches) Height (c	m) Weight (lb)	Weight (kg)	BSA
a.	Signs and Sym		Gardiologist To Read	Ş	R	Relevant Results:			
		b.		4					
					c.	ConditionalOrder	40X	A 7	(Clear)
	2		ith the red star i field that must be ent e submitted.						

Signs and Symptoms	b. The icon at the end of the Signs
Arrythmia/Change in Pattern Chest Pain PreOp Pre Cath Post PCI Dyspnea TIA/CVA Murmur CHF	and Symptoms box indicates that the field can be typed in or select from one of the options that present.
Assess LV Function	

ConditionalDrder ConditionalDrder Max # of activations: Unlimited At the onset of chest pain	c. A Conditional Order is available to enter a specific "condition" that must be met before the test is to be done. The Nurse activates the order when the condition is met.

Routine Orders

Routine orders that need to be done sometime today: there is no need to indicate a time, date, or priority.

- 1. Select your *patient's name* from the *Patient List* screen.
- 2. Click the **Order Entry** *icon* from the tool bar.
- 3. Select "Me" for the ordering physician, if required.
- 4. Leave the **Session** type as Standard.
- 5. Leave the Date and Time fields as is.

Requested By: Other: TestMDTracey. Tracey Date:	Add View Item Info Add to Eavorites Message Qrug Info
Complete Blood Count With Differential 12-07-2015 Pending	Edit Delete Copy Add Specimen Indication Marg as Done

- 6. Type in the order name (example here is CBC)
- 7. Select CBC (Complete Blood Count) and click Add
- 8. If you had additional orders you could go back to the type in field and type another order name and proceed.
- 9. When you are finished adding orders, review them for correctness in the basket.
- 10. Click "Submit {patient's name} -----this is a safety feature
- 11. Type Password and click OK

If a test has more than one common name, the other common name will be in parenthesis.

i.e.-- CBC (Complete Blood Count)

Priorities Other Than Routine

If you have an order that needs a priority other than Routine, open the order by selecting "View" and the order worksheet will open. The other Priority choices available are:

236 2120			resump fracey, frace	y
Allergie	s: NKDA, Bee StingsIntolerances: Egg			
Order:	Complete Blood Count With Differentia	al		
Requested By:	TestMDTracey, Tracey			Template Na
Messages:				
Collection Dat	e	Collection Priority/Time		
12-07-2015			₽	
Scheduled Dat	te/time	AM Lab Draw Routine STAT		
		Time Critical		

- > The "AM" designation will order for the following morning.
- ➢ STAT
- > The "Time Critical" designation will require a date and time

Collection Date	Collection Priority/Time	
12-07-2015	Time Critical	🛓 🔀 : 🔀 🚝
		Use previous specimen if

> Urgent is not used.

Repeat Orders

1. To place a repeat order, select the button on the bottom *LEFT* of the order entry worksheet.



2. Orders can be repeated: Hourly / Daily / Weekly

Repetition Pattern	Repetition Pattern
○ <u>H</u> ourly Every: 1 Day(s)	<u>Hourly</u> Every: 1 week(s).
	◯ <u>D</u> aily
<u> </u>	● Weekly Sunday Monday Tuesday Wednesday
○ <u>M</u> onthly	Monthly Thursday Friday Saturday

3. You decide when to start & how often:

needs.

• The defaults for occurrences are 2 but can be changed to meet your

Add to list Add to list	Range of repetition Start: 04.08.2014 ±1 • 07:50 • • End After 2 • occurrences. (2-7) • End by: 04.08.2014 ±1 • 23:53 •
	OK Cancel <u>H</u> elp

Sometimes you will see "checkboxes" which allow you to select "more than one option".

Type of Restraint				
				Clear
🗖 Soft Wrist Left	🔲 Soft Wrist Right	🔲 Soft Wrist Bilateral	🗖 Soft Ankle Left	
🔲 Soft Ankle Right	🔲 Soft Ankle Bilateral	🔲 4 Siderails	Mittens	
🔲 Safety Belt	🗖 Enclosure Bed	🔲 Hard Wrist/Ankle	🔲 Hard Wrist Bilateral	
🔲 Hard Ankle Bilateral	🔲 4-point Hard			
Hard Ankle Bilateral	🗖 4-point Hard			

Other times you can see "circles" that allow only <u>one choice</u>:

Prescription Status		
		Clear
C Prescriptions Given to Patient	C Prescriptions on Chart	

Medication Order Entry

- When ordering medication depending on the order there may be items that are complete, but most require you to enter the dose desired.
- The screen shot shows the different administrations but still require a dose to be



- Therapeutic substitutions are configured in SAC for items that are nonformulary at CMH.
- Medication forms default with options that complete the necessary fields to complete an order.
- > Not all substitutions are a 1-1 for dosages.

Medication options and how to use them

- 1. The dose field is required and several of the fields are prefilled in for ease of order entry
- 2. You can either type in a dose or use the check boxes at top of form to complete the dose.
- 3. Frequencies are designed to list appropriate options for that item.

Order: Requested By	APAP/ Butalbital/Ca	ffeine					
Messages:							
	ose	1 2					
		*Start Time Routine *Dose High	پا	Ordered as "UOM Tablet(s)		*Form Code Tablet	
Calculation Inf		*Boute Modifier	*	*Variable Dose (H)	3.		E
Oral	BN ✔	"PRN ReasonText Mild Pain (1-3)		Trequency I Every 6 hours ONCE Every 4 hours Every 4 hours Every 6 hours Every 6 hours Every 2 hours Every 12 hours Every 14 hours Every 14 hours Every 14 hours Every 14 hours Every 14 hours Every 14 hours			2 2 4
*Stop After (D	uration)	Ş	Clear	*Stop Date 11-21-2015		*Stop Time	42

Order: APAP/ But	albital/Ca	affeine					
-							
		1					
Dose 🗌		2					
Dose 🗌							
Dose 🗌							
Dose 🗌							
*Start Date		*Start Time		Ordered as			
07-22-2015		Routine	₽.				
*Dose		*Dose High		<u>*UOM</u>		*Form Code	
0.5	F			Tablet(s)		Tablet	} ₹₽
Calculation Info				*Variable Dose (H)			
			4				
*Route		*Route Modifier		*Frequency			
Oral	₽		Q	Every 6 hours			≥
				Every 4 hours			
		*PBN BeasonText		Every 8 hours			
*PBN 🖌		Mild Pain (1-3)		Every 12 hours Every 24 hours			18
		,		Every night at bedtime			
2.				<qxh></qxh>			•
*Stop After (Duration)				*Stop Date		*Stop Time	
			Clear	11-21-2015			4
	Requested By: Gill, Conn Messages:	Requested By: Gill, Connie Messages:	Requested By: Gill, Connie Messages:	Requested By: Gill, Connie Messages:	Requested By: Gill, Connie Messages:	Requested Byr Gill, Connie Messages:	Requested By Gill, Connie Messages:

- The above example shows that you can type in a dose other than the options listed (remember to check the unit of measure whether it is in mg/mcg/tablet/capsule). Some forms are not eligible for fractions. For frequency you may need to slide the bar down to find the frequency you are looking for.
- 2. If you want the medication to be given only over the next 24 hrs or X2 days, you will want to complete the Stop After (Duration) field.
- Medications that require different doses at different times of the day will require separate orders. Typing in dose changes is not the correct way to enter those orders.
- 4. For medication that you want the first dose to be given stat you only must change the Start Time from Routine to Stat. This lets nursing know to give first dose now. Then the frequency that you have entered will schedule the future doses.

On the bottom, right side of the form are additional fields that can communicate to pharmacy or nursing any specific instructions you may have for administrations of the medication.

*These areas are not appropriate for dosage changes or titration directions or additional orders.

*Note to Pharmacy	
*Nurse Instructions	
1	
]	
	OK Cance

IV Order Entry

- The IV order is displayed with different concentration and amounts of solution.
- Select the intended item to open the form
- Some items are displayed with pre-mixed concentrations of KCL



	Order: Dextrose 5% + 0,45% Sodium Chloride Infusion Requested By: Gill, Connie	Order ID: 001147QXT Template Name: Dextrose 5% + 0.45% Sodium Chloride Infusion 1000 mL	
	Messages: Ordered as "Start Date "Start Time Ordered as 1208/2015 Image: Start Time Ordered as "Requested Volume "UOM "Form Cr. 1,000 ImiliLiter(s) ImiliLiter(s)		
		Height (inches) Height (cm) Weight (kg) BSA Ideal Body Weight (kg) Relevant Results	
a.	"TVAdditiveCalc: Route "Route Modifier		
<u> </u>	Rate "Hang Time (Hours) Pace Solution	b. Total IV Volume: "UM: "Line Type	
c.	"Stop After (Duration) "Stop Date "Stop Til		
	Clear 04-08-016		

• The IV Rate (**a**) is the only required field, but you can also use the Total Volume (**b**) to order an item to be given- for example X 3000 ml - and using the stop after field (**c**) to make the order specific to the patient's needs.

0	rder:	Dextrose 59	- 6 + 0.45% Sodium Chl	oride Infusion					Orde	er ID: 001147QXT	
Re	equested By	Gill, Connie	:				Template Name: De	extrose 5% + 0.45% Sodium C	hloride Infusion 1	000 mL	
м	essages:										
1 *F	Start Date 2-03:2015 Requested Vi ,000	olume	*Start Time Routine	Ordered as UDM "UOM milliLiter(s)	"Form Code	452		Height (inches) Heigh	Review Date	Review Time	BSA
								Ideal Body Weight (Kg) Relevant Results			
	VAdditiveCal	c:		noure mouner			>				4
Ir ×F E	ntraVenous C Rate 3 mL BaseSolution	./hr	E C KVO	*Hang Time (Hours)			Total IV Volume:	*UOM:	*Line Type	5	
ſ	000000000		4		4X7			"Note to Pharmacy			<u>_</u>
*5	Stop After (Du	uration)	<u>्</u> र	"Stop Date lear 04-08-2016	*Stop Time	ي لا		"Nurse Instructions			

• When you select the icon at the end of the IVAdditive Calc field------

A	Additives	_	l.		
	Name: mvi MVI-12(Multivitamin Injectable)			<u>C</u> alculate	
	Nam Multivitamin Injectable	ie			
- 1	Dejete <u>Recalculate</u>	ОК	Cancel	<u>H</u> elp	

it opens the additive box so you can add additional medications to the IV solution.

- First type in the additive name, select the additive and then Add, once the additive is in the lower box you will need to enter the dose and UOM.
- When you select OK the additive will display in the IVadditiveCalc box and be a part of the order on the orders tab.

*IVAdditiveCalc:	\mathbf{k}	
Multivitamin Injectable 10 milliLiter(s)		Ē

Radiology Test Order Entry

You can type the name of test you are looking for or use the Start of Browse.

- Xray
- o MRI
- o CT
- o US

The list is all the tests that can be ordered for that department.



Order:	Xray Chest 1 View	pleted: [Pregnancy Status]			Order ID: 001147QYP	
Requested By	Gill, Connie			Template Name: Xray Chest 1 View In AM		
Messages:						
Requested Fo	or Date	Requested For Priority/Time				
12-09-2015		AM Rad Exam	₽			
		Pregnancy Status		Height (inches) Height (cm)	Weight (lb) We	ight (kg) BSA
Radiology Ma Exam per Prot Yes	ay Change tocol					
Signs and Sy	vmptoms:(ex:Pain, SOA, Edema)			Relevant Results:		
×			4			* 7
Special Instru	ictions			Health Issues		
			A.			*
			~			

- Radiology test entered on female patients from the age of 12-50 will require you to answer if the patient is pregnant. There is an option of unknown and that requires the technician to determine this before the test can be done.
- Signs and Symptoms are required for radiology tests. R/O is not an acceptable entry.

Lab Order Entry

- Type in the name of test you are looking for or use the Start of Browse.
- You can "double-click" the name of the test, and it will show up in your pending orders and scheduled as "Routine".
- If you "view" the order:

Order: Urinalysis, with Microscopic				Order ID: 001147QYQ
Requested By: Gill, Connie		Template Name:		
Messages:				
Collection Date	Collection Priority/Time			
12-08-2015		F		
Scheduled Date/time				
			- Height (inches) Height (cm)	Weight (lb) Weight (kg)
Specimen Source	Site: * Please Choose Correct Site			
	N DI ALICEERSA CIERE			
Unknown - Add to Label When Collected	Unknown - Add to Label When Collected	Ş		
Unknown - Add to Label When Collected Medication Info (Last Dose/Antibiotics)	Unknown - Add to Label When Collected	Ş	Health Issues	
,	Unknown - Add to Label When Collected	V	Health Issues	
ľ	Unknown - Add to Label When Collected		Health Issues	
Medication Info (Last Dose/Antibiotics)	Unknown - Add to Label When Collected	y		Minimum Volume
,	Unknown - Add to Label When Collected		Health Issues Collection Container	Minimum Volume
Medication Info (Last Dose/Antibiotics)	Unknown - Add to Label When Collected			Minimum Volume
Medication Info (Last Dose/Antibiotics)	Unknown - Add to Label When Collected			Minimum Volume
Medication Info (Last Dose/Antibiotics)	Unknown - Add to Label When Collected			Minimum Volume

- The current date is already populated. If this is correct, you can then select the appropriate Collection Priority/Time.
- If you want the lab test to be done at a later date, you will need to use the calendar to enter the correct collection date and select the appropriate Collection Priority /Time.

Order Search

All patient orders are entered in a similar fashion using either *Start of Browse* or *Manual Entry* (Type here to enter order name). Order Entry Options

- 1. *Start of Browse* allows you to browse various orders from a hierarchical tree structure and then select your order.
 - When you select the "+" to the left of an item it will either open for more specific options or will display all of the options for order entry in that category.



2. Manual Entry, the "Type here to enter order" name field

ype here to enter order nam Order

allows you to type in part or all of an order item name (i.e., ABG, urine, cbc, etc).

Requested By: <u>Me</u> <u>O</u> ther: Denny, D Ma	ty Source: .Written	(Allergy Details)
Date: Time:	▼	
	Reason:	
	ABG	
	Order	Cost
	Date:Time: Session Type: Standard Manual Entry V Search og for	Date: Time: Time: Time: Type: Standard Reason: Reason: Reason: ABG

Type here to enter order name Order When the Type here to enter order name is blue you can start typing to fin you need to enter.	d the order
Corder Combigan (brimonidine + timolol) 0.2 mG / 0.5 mG OPTH 1 Drop(s) 2 times per day Combigan (brimonidine + timolol) 0.2 mG / 0.5 mG OPTH Combigan (brimonidine + timolol) 0.2 mG / 0.5 mG OPTH Combigan (brimonidine + timolol) 0.2 mG / 0.5 mG OPTH Combigan (brimonidine + timolol) 0.2 mG / 0.5 mG OPTH Combigan (brimonidine + timolol) 0.2 mG / 0.5 mG OPTH Combigan (brimonidine + timolol) 0.2 mG / 0.5 mG OPTH Combivent Respimat Inhaler 100/20mcg (pratropium + albuterol CFC free AEROSOL 100/20mcg) Combivent Respimat Inhaler 100/20mcg (pratropium + albuterol CFC free AEROSOL 100/20mcg) 1 Puff Combiver Combouro Combouro Combouro Common IV Fluids) Common Labs (CMH Common Labs) Common Radiology (CMH Common Radiol	

• Note: The more you type the less options you are presented with



3. You also have the option of saving your favorite order sets for easy reference. By choosing "*My Favorite Sets*" from the drop-down menu, you can view your already saved order sets.

Order Entry Worksheet - Test, Tracey2			
Test. Tracey2 2SE 2120 01 Allergies: NKDA, Bee StingsIntolerance	TestMDTracey, Tracey es: Egg	4100269 / 410003750	75y (06-20-1940) Fer
Requested By: Me Other: TestMDTra Date:T Time: Session Type: Standard Start Of Browse Start Of Browse	Reason:		Add
Manual Entry My Favorite Sets	Type here to enter order name Order	Cost	View. Item Ir (Remove E Messa Drug Inf

• To add order sets to your favorites, highlight the name of the order set and choose "Add to Favorites".

Me Uther: TestMD	racey, Tracey Source: Allergy Details	
±+ Tjme:		
	Reason:	
Contents of 7.0	der Sets/Cardiology'	<u>A</u> dd
ĺ	Type here to enter order name	<u>V</u> iew
Ì	Order Cost	Item Info
l.	CARD Heart Failure	
Health	GaRD Post PCI Orders	Add to <u>F</u> avorites
v ab	CARD Radial Arm Post PCI	Message
aD	CARD TEE	<u>Message</u>
rders	ිකු Cardiac Cath Routine Orders බො Cardiac Cath Arm PostOp	[<u>D</u> rug Info]]▼]
0010	Cardiac Cath Ann Postop	
	Cardia Cath Candocath Pacemaker/ALD PostOp	
	Gradiac Cath Pacemaker/AICD PreOp	
Medicine	🐐 Cardiac Cath PostOp Orders	
ology	🖓 Cardiac Cath PreOp Orders	
	🛞 CMH Cardiac Enzymes	
Delivery		
	T	
l		

Order Sets

Order sets of various types are available for various conditions.

Common Order Sets

There are common orders ets that can expedite order entry. They contain the most commonly ordered items of their type: IV Fluids, Labs, Labs for Pharmacy, Radiology, and ED Medications.



Blood Bank Order Set

- 1. When ordering Blood Product and Transfusion, the order set allows for entering type & screen as well as ordering product.
- 2. When ordering blood, first complete the required fields at the top of the order form. (These will then populate the orders you select from the grids.)

CMH_Blood Product and Tranfusio	on [1 orders of 18 are selected]	
LAB Trans Reason		AB Bid Bank No. of Units
	<u></u>	
LAB Trans Give/Hold		
	<u>B</u>	
© <u>LAB Trans Give/Hold</u> © © <u>Does the Pt. Have Sickle Cell Anemia?</u> ©		Has the Pt. Had an Organ Transplant?
	<u>F</u>	6
		RelevantResults
Labs		
🚯 🗹 Type + Screen	🚯 🗌 ABO and RH - Adult	t
	-	
Red Blood Cells		

3. TRANSFUSION REASON: There is a drop down with suggested reasons, but the field allows for doctor to free text a reason not listed.

🔡 Blood Bank Order and T	ransfusion Form Adult - TrainInstructor, Train					x
TrainInstructor, Train 2NW 2425 01 Allergies: Drug Allergies	Not Recorded Shellfish	Havens, James M	4000166 / 400001988	70y (03-14-1944)	Female	0
	ranfusion [1 orders of 18 are selected]					
LAB Trans Reason Trains Reason Telinogen < 200mg/dl HBs x 8 HBs x 8 HBN > 15 Paiert Having Picedure Platert Having Picedure Platert Having Platert Having Hould Torres	♥ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■	Has the Pt. Had an Organ Transplant? RelevantResults	● LAB Bist Bank No. of Units ☑	9 E		
Red Blood Cells						
Red Blood Cells Leuko Reduc	ed - 5 item(s)	H of Now/Later Units To Reas	on for Transfuse Special Instruc	tions		

4. TRANSFUSION GIVE/HOLD: Select status of blood product—Give/Hold/Conditional.

Give = give now.

Hold = Hold, will probably order to transfuse in 24-48 hours.

Conditional = if specific condition met, want nurse to transfuse; but **only** if condition met.

🔡 Blood Bank Order and Transfusion Fo	rm Adult - TrainInstructor, Train				
TrainInstructor, Train 2NW 2425 01 Allergies: Drug Allergies Not Recorded,	Shellfish	Havens, James M	4000166 / 400001988	70y (03-14-1	944) Female 🕜
CMH_Blood Product and Tranfusion [
Lans Reason Plaient Active Bleeding Plaient Active Bleeding Lans Give/Hold Torie Torie Hold Conditional	2 R	Has the Pt. Had an Organ Transplant? RelevantResults	 LAE Bid Bank No. of Units 	9 	•
Labs Type + Screen Red Blood Cells Red Blood Cells Red Blood Cells Leuko Reduced - 5 Rem(s)	ABO and RH - Adult Requested Requested Time		eason for Transfuse	sciel Instructions	

5. SICKLE CELL Question: This is a mandatory question that blood bank needs answered to do the crossmatch checking on the blood.

😼 Blood Bank Order and Transfusion Form Adult -	TrainInstructor, Trai	n								25
TrainInstructor, Train 2NW 2425 01 Allergies: Drug Allergies Not Recorded, Shellfish			Have	ens, James N	1	4000166 / 40000	01988	70y (03-14-1944)	Female	•
CMH_Blood Product and Tranfusion [1 orders o	f 18 are selected]									
LAB Trans Reason						LAB Bld Bank No. of	Units			
Patient Actively Bleeding		Ş	Í			4				٦[
LAB Trans Give/Hold										~ I I
Give		Ę.	Ĩ							
Does the Pt. Have Sickle Cell Anemia?			Has the F	> Had an Or	an Transplant?	,				
Yes		ţ.		c mad an on	Juri Franspiane.		ц.			
100			Belevant				•			
			Helevant	Hesults						
							_ <u>F</u>			
Labs										
Type + Screen		and RH - Adu	+							
• Silve serven	• • • • • • •									
Red Blood Cells										
Order	Bequested	Requested Time	# of Unite	Now/Later	Units To Transfuse	Reason for Transfuse	Special Instructions			
Red Blood Cells Leuko Reduced - 5 item(s)										
Red Blood Cells Leuko Reduced (Most Common	າ) T									
Red Blood Cells Leuko Reduced Irradiated	T									-11
D Bed Blood Cells Leuko, CMV Neg, Irradiated	T									411
O HI Transfuse (Red Blood Cells - Now)	<u> </u>						Red Blood Cells - Now			411
Image: Conditional Image: Con	T				1	1	Red Blood Cells - Conditional			1
Platelets										- L

6. Number of Units: Enter number of units needed

💀 Blood Bank Order and Transfusion Form Adult - TrainIr	istructor, Trai	n								
TrainInstructor. Train 2NW 2425 01 Allergies: Drug Allergies Not Recorded, Shellfish			Hav	vens, James N	И		4000166 / 40000	01988	70y (03-14-1944)	Female
CMH_Blood Product and Tranfusion [3 orders of 18 a	re selected]	1								
LAB Trans Reason							🗇 LAB Bid Bank No. ol	<u>f Units</u>		
Patient Actively Bleeding		Ş	Ī				4			
LAB Trans Give/Hold						L				
Give		Ę.	Ī							
Does the Pt. Have Sickle Cell Anemia?			Has the	Pt. Had an Or	gan Transplant'	?				
Yes		Ę.	í 🗌					Ę.		
,			Relevar	ntResults						
								<u> </u>		
Labs										
Type + Screen	1 Паво	and RH - Adu	lt							
Red Blood Cells										
	Requested Date	Requested Time	# of Units	Now/Later	Units To Transfuse	Reason	for Transfuse	Special Instructions		
Red Blood Cells Leuko Reduced - 5 item(s)						_				
Red Blood Cells Leuko Reduced (Most Common)	04-29-2014		4	Give		Patient A	Actively Bleeding			
Red Blood Cells Leuko Reduced Irradiated Red Blood Cells Leuko, CMV Neg, Irradiated	T									
V I I Transfuse (Red Blood Cells - Now)	04-29-2014				4	Patient A	Actively Bleeding	Red Blood Cells - Now		
Transfuse (Red Blood Cells · Conditional)	T							Red Blood Cells - Conc	litional	

Patients must have a Type + Screen for blood products. It is valid for 72 hours.

	RelevantResults ABO: A; RH Typing: POS; Coombs Test-Indirect: NEG;	
Labs Orghter Screen Orghter Consen	nt	

- If the patient has a *current* Type + Screen, it will show in the 'Relevant Results' box.
- If the patient does not have a *current* Type + Screen, the box will be blank

*If results are present, please uncheck the box for 'Type + Screen'.

With the questions answered on the top of the form, once a blood product is selected it automatically fills in appropriate fields and selects the transfuse now order.



Managing Order Alerts

- 1. Managing alerts when presented ensure that the most current order is active.
- 2. The alert presents the current order in process and the duplicate order for review:

Alert:	Duplicate Order	
Message: <u>Expand</u>	The current order: enoxaparin Pre-Filled SYNG Give 120 milliGRAM(s), SubCutaneous, Every 12 hours Pharm Note If patient is on an Epidural, contact Anesthesiology before starting. RENAL DOSE ADJUSTMENT FOR CRCL<30[Ordered as Lovenox Pre-Filled SYNG] Date: 04-15-2016 17:41 Status: Pending	
	May be duplicate with:	
	enoxaparin Pre-Filled SYNG Give 40 milliGRAM(s), SubCutaneous, Every 12 hours Pharm Note If patient is on an Epidural, contact Anesthesiology before starting. RENAL DOSE ADJUSTMENT FOR CRCL<30[Ordered as Lovenox Pre-Filled SYNG] Date: 04-14-2016 11:47 Status: Active Warning duplicate order - enoxaparin Pre-Filled SYNG has already been ordered for the same date and tin	ne.

- 3. In some cases, it is appropriate to keep both orders. To do so, click "Proceed".
- 4. Managing alerts can be done by selecting the "View Actions..." button.
 - a. By selecting view actions, you can choose what to do with both orders.
 - b. Exiting or cancelling the current screen (possibly losing any other orders already entered) is not necessary.

1	Viewed	Docu	Alert	Priority	Туре	Comment	Sco	pe			
 ✓ 	\checkmark		Duplicate Order	LOW	WARNING		Chart				
Alert:	Duplicate (Order									
Message:	The curren enoxap		ed SYNG								
Expand	Pharm Not	e If patient	, SubCutaneous, E is on an Epidural, 4ENT FOR CRCL<3	contact Anesth	esiology before	starting.					
	Date: 0	415-2016 1 Pending		ulOrdered as ro	venox Pre-Filled	I SYNG]					
		plicate with	1:								
Acknowledg	ement Comr	nent:					V				
								4			
									•		-
_	edge when s			Unackno	wledge	< Previous	Alert 1 of 1	Next >>		View Actions.)
Acknowle	edge all on F	roceed	10xaparin Pre-Fille			< Previous	_	Next >>			ř
Acknowle	edge all on F gested action	roceed is for the e	noxaparin Pre-Fille Filled SYNG unch	ed SYNG order c	ick View Action	<< Previous	_		Ľ	View Actions.	ř
Acknowle To view sugg To continue	edge all on F gested actior with the end	roceed is for the ei ixaparin Pre		ed SYNG order c	ick View Action	<< Previous	_	iew Actions	F		
Acknowle To view sugg To continue	edge all on F gested actior with the end	roceed is for the ei ixaparin Pre	-Filled SYNG unch	ed SYNG order c	ick View Action	< Previous	_	iew Actions Proceed	F		ř

5. The first order presented is the order trying to be submitted.

- a. There are 3 options to manage this order:
 - i. Cancel
 - ii. Modify
 - iii. Keep

	1	Available Act	ions				
5.		enoxaparin Pre-	Filled SYNG - Give 120 milliGRAM(s)	, SubCutaneous, Every 12 hou	ırs Pharm Note If patien	t is on an Epidural, coi	ntact Anesthesiolog 🕨
		enoxaparin Pre-Filled SYNG - Give 120 milliGRAM(s), SubCutaneo Cancel This Order You may select additional actions Type Order Date Existing enoyanarin Pre-Filled SYNG - 04-14-		p This Order Actions	Action Taken	Undo	
	<mark>6.</mark>	Existing	enoxaparin Pre-Filled SYNG - Give 40 milliGRAM(s),	04-14-2016 Routine			

- 6. The existing order is displayed for review.
 - a. There are 3 options to manage this order:
 - i. Modify
 - ii. Suspend
 - iii. Cancel

Practice: Enter the following orders

These are examples only

- 1. Diet clear liquids,
- 1. Diet NPO after midnight
- 2. Activity Activity ambulate with assist, up to chair 2 times/ day
- 3. Orthostatic Blood Pressure/Pulse 2 times a day. Stop after 5 days.
- 4. Notify MD Temp >101
- 5. Troponin q8hrs x3
- 6. EKG unlimited conditional order; when patient complains of chest pain.
- 7. CT PE protocol symptoms SOA/Chest pain (patient takes metformin)
- 8. Consult Internal Medicine for medical management
- 9. 500ml LR bolus 999ml/hr, stop after 1 dose
- 10. LR @ 100ml/hr (start after LR bolus)
- **11**. Sucralfate 1 gram PO once a day
- **12**. Docusate Sodium 100mg 2 times a day
- 13. Flagyl 500mg IV every 8 hours
- 14. Ativan 0.5mg 2x a day IM prn anxiety/agitation
- 15. Maalox Plus 30ml every 8 hours prn indigestion

(Submit orders when finished)

Admitting a Patient

The workflow for admitting a patient is Reconciling Home Medications then placing the Admission Order Set.

Order Reconciliation Manager



There are three Order Reconciliation types:



Admission Medication Reconciliation

Upon admission, the patient's home medication list must be reviewed to -

- address continuing/discontinuing home medications for the patient visit
- modify the dose/frequency of home medications during hospitalization
- not continue the medication during this hospitalization

When a patient is admitted, a flag is triggered in the Order Rec column on the patient list.

Current List Select All Patients 22 Visit(s) Save Selected Patients									
Admit Date	Planned/Actual Discharge Date	Current Location	Patient Name	Age	Provider	New Orders	New Results	Order Rec	New Docu
08-13-2		3SE 3007 01	Train, TrainOne	64y	Addas, Mouhamad				
08-13-2		3SE 3007 02	Train, TrainTwo	63y	HARPER, MICHAEL C				
08-13-2		3SE 3008 01	Train, TrainThree	62y	Trommler, Lloyd C				
08-13-2		3SE 3008 02	Train, TrainFour	61y	Brahmbhatt, Vipul D				
08-13-2		3SE 3009 01	Train, TrainFive	60y	GOLDSTEIN, STEVEN			Y	
08-13-2		3SE 3010 01	Train, TrainSix	59y	Knight, E Ray				

To Complete the Admission Order Reconciliation:

- 1. Either double click on the flag in the Order Rec column or click on the Order Reconciliation
 - icon
- 2. Select to perform the Admission Reconciliation



- 3. When the reconciliation manager opens, home medications entered will appear on the left.
- 4. Current, active orders will appear on the right.

- 1	ſ	Reconcile Orders View/Maintain History					
	Gr /Sc	Group Format Reconciliation Ture Admission by asTemplate, SCE MD; New orders swill be in session type of Standard					
\triangleleft		HOME MEDICATIONS (0 of 6 reconciled)	ATIONS 4.				
	10	nalosis (central nervous systems gents) (0/1 reconciled)					
3.		ibuprofen 200 mg oral tablet - 2 tab(s) orally every 6 hours, As Needed - PRN Pain 👘 <table-cell></table-cell>					
	ne	anticonvulsants (central nervous system agents) (0/2 reconciled)					
		gabapentin 300 mg oral capsule - 1 cap(s) orally 3 times a day Last Dose Taken:					
		Keppra 250 mg oral tablet - 1 tab(s) orally 2 times a day Last Dose Taken:					
		diuretics (cardiovascular agents) (no items)					
		Furosemide IV - Give 20 milliGRAM	المحتفظ				
□ nutraceutical products (alternative medicines) (0/1 reconciled)							
		melatonin 3 mg oral tablet - 1 tab(s) orally once (at bedtime), As Needed - PRN insomnia 👘 💶					
	proton pump inhibitors (gastrointestinal agents) (0/1 reconciled)						
		NexIUM OTC 20 mg oral delayed release capsule - 1 cap(s) orally once a day Last Dose Taken:					
			ntinous Infusion - Active A(s), IntraVenous Continuous				

- 5. To take action with a home medication, hover over the medication name and click on the
- 6. Choose the appropriate action for that medication.

Last Dose Taken: Into Source: Patient	Continue As Gabapentin Reconcile with Existing Order	🖥 Gabapentin
Last Dose Taken: Info Source: Patient anticonvulsants (central nervous system agents) (0/2 reconciled) gabapentin 300 mg oral capsule - 1 cap(s) orally 3 times a day Last Dose Taken: Info Source: Patient		🖥 Gabapentin
gabapentin 300 mg oral capsule - 1 cap(s) orally 3 times a day 5. Last Dose Taken: Info Source: Patient		Gabapentin
Last Dose Taken: Info Source: Patient		Gabapentin
	Reconcile with Existing Order	
	Needs Further Review	gabapentin SOLN 250 mG / 5 mL Order Entry
and ences (cardiovascular agencs) (no iterns)	No Longer Taking Reviewed and Reconciled Held on Adm	Other Orders
nutraceutical products (alternative medicines) (0/1 reconciled)	Clear Reconciliation 6.	e Daily @06:00 & 18:00[Ordered as LASIX IV]
Last Dava Talana Jafa Savara Batiant	Modify Remove Follow Up Flag	
proton pump inhibitors (gastrointestinal agents) (0/1 reconciled)	Show Details	
New HIM OTC 20 min and defended entering a family and a day	Show History	J

7. If continuing a home medication, look for **bold print**. This indicates a best match for that medication. Click on the **bold name** to continue.

8. To save time, you can just mark which home medications should be continued using steps 4-6 above. Then for all the medications left (which will be held on admission), simply click the *Mark All Remaining as Held on Admission* icon in the toolbar.



Admission Order Set



1. The Enter Order Icon ^{Order} allows you to perform order entry, such as the Admission Orders. Selecting the Enter Order Icon will take you to the Order Entry Worksheet.

Order Entry Worksheet - Test, Tracey2				
Test. Tracey2 2SE 2120 01 Allergies: NKDA, Bee StingsIntolerances: Egg	TestMDTracey, Tracey	4100269 / 410003750	75y (06-20-1940)	Female
Requested By: Other TestMDTacey, Tracey Date: Tracey Trace Session Type: Standard Stand Reavon: Stand D Bowno	Source (Allergy Details			<u>A</u> dd
Orde Sets Advar / Discharge / Transfer Advar / Discharge / Transfer Cadolog Candolog Charges Conde Cond	order name	Cost		Yiew Jtem Info Add to Eworites Message Drug Info
				Edit Delete Copy Add Specimen Indication Mark as Done
	(Submit Order(s) for Test, Tracey2	(Hide Worksheet) Cancel	Help

2. Then you can type "Admission" which will bring up the Admission Order Set

Session						
Type: Standard	Reason:					
Manual Entry Searching for						
2.	admission					
	Order					
	💼 Admission (MED GENERAL ADMISSION)					
	Admission Assessment					
	Admission Evidence Link					
	Admission History					
	Admission Reason					

3. When you click on the admission order set, it opens the admission worksheet.
The Admission Order Set Worksheet

- 1. Evidence links are provided in the order set to allow you to include them into your orders.
- 2. Selecting the "E" in the grid will take you to articles related to the topic.

A	lmit	:To:										
		Order		St	atus			Unit		Admit Diagnosis		Special Instru
	Ad	lmit - 1 item(s)										
		Admit To:				*		*			E.	
						10		*				
		ar at an at										
		SE 2120 01 Illergies: NKDA, Bee StingsIntolerances	s: Foo			TestMD	Tracey, Tr	acey				
M		GENERAL ADMISSION [13 orders		41								
Ē	200	LICKAL ADDITION [15 orders	o. 245 are selecte	~1								
			Crea	tinine Cle	arance (Actual))				Relevant Results:		A 🗖
		1	Creat	nine (mg/	/dl)	Creat Clear (a	ctual)	Actual				
3		1.						Estimated				
E	VIDE			IDTION							CUCKOUR	2 71151
		EVIDENCE LINK	EVIDENCE DESCR	IPTION							CLICK ON "E BUTTON	THEN
		idence - 11 item(s)										
		Allergy Evidence Link	Allergy to penicillin		of life						E	
		Code Status Evidence Link Respiratory Evidence Link	Ethical issues near Pulse Oximetry Evi		DT IITË						E	
	V	IV Fluids Evidence Link	Maintenance and re	placeme								
		Antiemetic Evidence Link	Selection of antiem								<u> </u>	
		Medication Consult Evidence Link Med Pain Evidence Link	Overview of the print NSAIDs: Therapeut					edicine			E	
	V	Sedative Evidence Link	Sedatives and hypr	otics abu	use and depend	dence: Pharmacole	ogy and ep				E	
		Stress Ulcer Evidence Link	Stress ulcer prophy				and recom	mendations			E	
		Urinalysis Evidence Link Xray Evidence Link	Urinalysis in the dia Evaluation of diffus				ography				E	
ŀ	2	ATOY LYICKING LINK	Evaluation of diffusi	and dis	case by conve	encondi chest fadi	ograpny				15	
4	dmit 1	To:										
In		Order	Status	_	Unit		Admit Diag	gnosis	Special Ins	tructions		
	Adr	mit - 1 item(s)										
		Admit To:										
L				_								
		I Care Admission Order		C	art Date	Start Time	Corre	ial Instructions				
		Urder tical Care Admission - 2 item(s)		Sta	an Udle	Start Time	Spec	an mstructions				
		Use Critical Care Chest Pain/Rule Out M	/I/Long Form Orders If N									
		Use Critical Care Short Form Ordes If No	ot Already Entered	Т								
L												
	ode S											
		Order de Status - 3 item(s)	Code Status									
		Code Status	DO NOT RESUSCI									
		Code Status	DO NOT INTUBAT									
		Code Status	COMFORT MEASL	RESION	LY							
Ľ												
ľ	ital Si		15	001	PRN Reaso	-	Stee AB	[Instruction				
		Order al Signs - 6 item(s)	Frequency	PRIV	PRN Reaso	n	Stop After	Instructions				
		Vital Signs	Every 4 hours									
		Vital Signs	Every 8 hours									
		Vital Signs Vital Signs	<multiple></multiple>									
		Intake and Output	Every 8 hours									
		Urine Output	Every 2 hours									
							-					

3. The order sets are set up to have the same grid sequence from one order set to another. Columns on the grids are also consistent from one order set to another.

	Ord	der	Frequency			Stop After		Special Instructions		
-		- 6 item(s)	1							
	Acti	ivity (- As Tolerated)								
	Acti	ivity (- Ambulate with Assistance)								
	Acti	ivity (- Bedrest with Bathroom								
	Acti	ivity (- Bedrest, Strict)								
	Acti	ivity (- Up in Chair)	with Meals							
	Acti	ivity								
N	ursing									
		Order	Frequency	PRN	PRN Reason		Special Instruct	ions	F	Reason Cath Continued
Ξ.	Assess	ments: - 6 item(s)								
		Weight	Daily							
		Cardiac Monitor, Bedside Device								
		Ceizore Freedotions								
		Glucoscan								
		Influenza Vaccine Protocol	OLCE				Seasonal Septe	mber Through March		
	V	Filedinosocour receine Filedico	ONCE							
=		tory: - 1 item(s)								
		Saline Lock								
-		: - 2 item(s)								
		Urinary Catheter Order Set								
		Straight Catheter, Bladder	PRN	V	If Unable to Void					

- 4. Orders that are pre checked do not require any actions by the user to initiate the order
- 5. If you do not want this order to be on the patient just select the check and remove itexcept for Evidence and quality indicators.

Lab - AM			
BNP Triage	CBC Without Diff	Protime INR	Thyroid Stimulating Hormone, Serum TSH
Basic Metabolic Panel	Comprehensive Metabolic Panel	Πρ	
Complete Blood Count With Differential	Lipid Panel	T4 Serum	
Complete blood Count with Differential		14 Serum	
Lab - Repeat Daily For 3 Days			
📺 🗌 Basic Metabolic Panel	📺 🗌 Complete Blood Count With Differential	📺 🗌 Protime INR	
📺 🗌 BNP Triage	📺 🗆 CBC Without Diff	📺 🗌 Troponin I, Serum	
·			
LAB - Repeat Every 8 Hours X 3		Labs - Other	
📺 🗌 Creatine Kinase MB, Serur	📺 🗆 Troponin I, Serum	Other Laboratory	
Radiology			
	Priority Signs & Symptoms Signs & Symptoms	Special Instructions	
X-Ray: - 6 item(s)			
Xray Chest 2 Views	7.		
Xray Chest 2 Views Xray Chest 1 View Xray Chest 1 View Xray Chest AP Portable Xray Abdomen KUB 2 Views	/		
Xray Chest AP Portable			
Xray Abdomen KUB 2 Views			
Other Diagnostic Imaging Other CT Exams			

- 6. Typing in the Radiology Signs and Symptoms in the box provided on the form will populate ALL of the x-rays you order from this form.
- 7. If you have a different reason for ordering an exam, make sure to select the column for the signs and symptoms for each individual order and modify.

Lab-STAT	Type + Screen	Basic Metabolic Panel	
Protime INR	Arterial Blood Gases With Co	HCG, Qual Serum	
Troponin I, Serum	Complete Blood Count With Differential	Urine Pregnancy Test	
Lab-Today 8.			
Ammonia, Serum	Complete Blood Count With Differential	Hepatic Function Panel	Thyroid Stimulating Hormone, Serum TSH
Arterial Blood Gases with Co	CBC Without Diff	Lipase, Serum	Urinalysis, Culture if Indicated
Amylase, Serum	Comprehensive Metabolic Panel	Sedimentation Rate, Westergren	🍓 🗌 Blood Cultures X 2 Routine 15 Mins Apart
Basic Metaboli, Panel	C Reactive Protein, Serum	Type + Screen	Culture Sputum
BNP Triage	Creatine Kinase MB, Serum	T4 Serum	
Lab - AM	CBC Without Diff	Protime INR	Thyroid Stimulating Hormone, Serum TSH
Basic Metabolic Panel	Comprehensive Metabolic Panel		Inyroid stimulating Hormone, serum ISH
Complete Blood Count With Differential	Lipid Panel	T4 Serum	
		14 Serum	
Lab - Repeat Daily For 3 Days			
🗂 🗆 Basic Metabolic Panel 9.	📺 🔲 Complete Blood Count With Differential	📺 🗌 Protime INR	
📺 🗆 BNP Triage	CBC Without Diff	📺 🗆 Troponin I, Serum	
LAB - Repeat Every 8 Hours X 3		Labs - Other	
📺 🗌 Creatine Kinase MB, Serum	📺 🗆 Troponin I, Serum	Other Laboratory	
Radiology Signs and Symptoms			

- 8. The headers in each lab section let you know what priority is pre-selected for the items in that grouping.
- 9. Note the icon beside the repeat orders. This is the indication that the repeat criteria have been set (daily x3 days). You can open the lab item and modify the repeat criteria if needed.

		Add Generic Item	
	Cardiology	Type here to enter order name Order Cost	Add View
10.	Respiratory Therapy Order Frequencies Respiratory Therapy - 3 item(s) Stem(s) Oxygen Therapy RT: C Oxygen Setup (Once) RT: C Mini Neb Order Set Acute Care Stem Care	11.	[Item Info]
	IV Fluids IV Fluids - 11 item(s) IV Fluids - 11 item(s) Dextrose 5%: +0.45%; Sodium Chloride Infusion (10) Dextrose 5%: +0.45%; NaCL + 20 mEg KCL Infusic Dextrose 5%: +0.45%; NaCL + 40 mEg KCL Infusic Dextrose 5%: +0.45%; Sodium Chloride Infusion (100) Dextrose 5%: +0.45%; Sodium Chloride Infusion (100) Dextrose 5%: +0.45%; Sodium Chloride Infusion (100) Dextrose 5%: +0.45%; Infusion (1000 mL) Sodium Chloride 0.45%; Infusion (1000 mL)	Added Orders: Close	ium level is required. ium level is required.
	Sodium Chloride 0.9% Infusion (1000 mL) Sodium Chloride 0.9% Infusion (1000 mL)	I.000 milliLiter(s) Multivitamin_ 1.000 milliLiter(s)	This is a 'rally bag'. Contains MVI, Thia

- 10. Note some of the grids have folders at the bottom that allow for ordering items outside of what is on the order set.
- 11. Once you select the order(s) and enter them, you will be able to come back to the order set.

12. When possible, the medication grid will have complete orders for you to select. If there are multiple options, you can select the column and pick/type in the desired amount/option.

	_		Dose Low	Dose High	Units	Route	Frequency	PRN	PRN Reason	Duration	Special Instructions
- P	ain: - i	Bitem(s)									
		Acetaminophen Tablet ()	650		milliGRAM(s)	Oral	Every 4 hours	1	Mild Pain (1-3) or fever		Per P&T policy, if dose is greater than
		Ibuprofen Tablet ()	200		milliGRAM(s)	Oral	Every 8 hours	1	Mild Pain (1-3) or Fever		
		Ibuprofen Tablet ()	800		milliGRAM(s)	Oral	Every 8 hours	1	Mild Pain (1-3)		
		acetaminophen + HYDROcodone 325 mg-5 mg (Tablet			Tablet(s)	Oral	Every 4 hours	4	Mild Pain (1-3)		Total daily dose of acetaminophen given
		acetaminophen + HYDROcodone 325 mg-10 mg_			Tablet(s)	Oral	Every 4 hours	4	Moderate Pain (4-7)		Total daily dose of acetaminophen given
		acetaminophen + oxyCODONE 325 mg/5 mg (TAB)			Tablet(s)	Oral	Every 4 hours	4	Moderate Pain (4-7)		Total daily dose of acetaminophen given
		morphine Injectable ()			milliGRAM(s)	IntraVenous	Every 2 hours	4	Severe Pain (8-10)		
		HYDROmorphone 2 mg/mL Injectable ()			milliGRAM(s)	IntraVenous	Every 2 hours	4	Severe Pain (8-10)		
- C	onstip	ation - 1 item(s)									
		Docusate Sodium Capsule ()	100		milliGRAM(s)	Oral	Daily	¥	constipation		Do Not Crush (taste)
- G	iastroi	ntestinal Agents: - 4 item(s)									
		pantoprazole (ECT)	40		milliGRAM(s)	Oral	Daily @ 0600				Do Not Crush.; Formulary sub for all PPI's
		Pantoprazole Injectable ()	40		milliGRAM(s)	IntraVenous	Daily @ 0600				Dilute vial with 10mL Normal Saline. Give
		Metoclopramide Tablet ()			milliGRAM(s)		Every 6 hours	¥	nausea/vomiting		Administer on an empty stomach
		Metoclopramide Injectable ()			milliGRAM(s)	IntraVenous	Every 6 hours	¥	nausea/vomiting		For IV use. Give over 1 to 2 minutes.
- A		etic Agents: - 5 item(s)									
		Ondansetron (Tablet)	4		milliGRAM(s)			¥	nausea/vomiting		
		Ondansetron Injectable ()	4		milliGRAM(s)	IntraVenous		4	Nausea/vomiting		per 2014 IV Handbook: Doses upto 4mG
		Promethazine Tablet ()			milliGRAM(s)	Oral	Every 6 hours	¥	nausea/vomiting		
		Promethazine Rectal (Suppository)	25		milliGRAM(s)	Rectal	Every 6 hours	4	nausea/vomiting		
		Promethazine Injectable ()			milliGRAM(s)	IntraVenous	Every 6 hours	¥	Nausea/vomiting		IF ADMINISTERED IV DILUTE WITH.
<u>-</u> S	edativ	e-Hypnotics: - 3 item(s)									
		Zolpidem (Tablet)	5		milliGRAM(s)		Every night at	¥	Insomnia		
		Zolpidem (Tablet)	10		milliGRAM(s)	Oral	Every night at	4	Insomnia		
		Temazepam (Capsule)			milliGRAM(s)	Oral	Every night at	4	insomnia		
<u>-</u> S		Ulcer Prophylaxis: - 1 item(s)									
		Pantoprazole Injectable ()	40		milliGRAM(s)	IntraVenous	Daily @ 0600				Dilute vial with 10mL Normal Saline. Give
-1 M	liscell	aneous: - 2 item(s)									
		Nicotine Transdermal (Patch)	21		mG/24 Hour	TransDermal	Daily				Wash hands after handling patch
	ם ב	Other Medications									

13. The communication order Call MD For allows you to type in the special instructions.

Communications	
Order	Special Instructions
Communication - 1 item(s)	
Call MD For	
	0

14. In some order sets this can be pre-filled out.

0	Communication		
	Order	Priority	Special Instructions
	Communications - 3 item(s)		
	Call MD For		Notify Cardiologist if Change in Rhythm and/or ST Segment, Complains of Chest Pain, or Hypotension (systolic B/P less than 95)
	🗖 🚺 Call MD For		Notify Cardiologist if Bleeding or if Extremity Becomes Cold/Hematoma/Bleeding Occurs, or Change in Condition.
	Call MD For		N

15. You can order consult from this worksheet as well. If you check the box, the Consult worksheet will open.



- 16. Each check box will open the appropriate worksheet. After selecting the information you need, it will revert to this screen, and then you can click "OK" to return to the Admission Order Set Worksheet.
- At the bottom of the Admission Order Set worksheet is the CMH VTE order set. This link will take you to another order set to select items and then those items will become a part of this set for this patient.

This must be completed for EVERY ADMISSION or you will not be able to perform a discharge at the end of the stay. (Requirement may not be present for BHS patients).

PLEASE COMPLETE VTE PROPHYLAXIS ORDERS:
 ✓ VTE Prophylaxis Order Set (0 orders of 16 selected)

- To optimize positive patient outcomes, each patient that is in ICU/TCU should have two forms of VTE prophylaxis, both pharmacologic AND mechanical, OR a documented contraindication reason.
- For example, it will ensure patients that move from a lower level of care (Med-Surg) to a higher level of care (ICU/TCU) consistently have their VTE risk re-evaluated on transfer.

Alert Su	mmary	/								
Ac \	Vie	Doc	Alert		Priority	Туре	Comment	Scope		
\checkmark	\checkmark		Patient with No Active IC	CU VTE Or	LOW	WARNING		Chart		
Alert: Message Expand	e:	All Crit PLEASE	with No Active ICU VTE Q ically III Patients Should F Select a Pharmacologic Order Entry, locate the V	Alert: Messa <u>Expar</u>		PLEASE Select	I Patients S a Pharma	hould Have TW cologic and Me	chai	TE Orders For ICU/TCU Admission. anical item or a Contraindication Reason axis Order Set and complete.
Acknowi				(Unacknov	wledge (<< Previ	V pł	<mark>FE Prophy</mark>	/la	l appear on all ICU/TCU patients for axis that <i>do not already</i> have a gic and mechanical item active
			Order Set unchanged clici r Set and discard alerts cli					Go Back Help	///	

Health Issues



The Health Issues Manager, Issues, holds all the health issues entered on the patient for

diagnostic purposes.

int,	10.00 X X X X	DA DE	in the second se		20.01.000			_		
			A			The second second		-		6
	2 🗇 🗮	er e	14	40	4		2 6			
							1000000			nfoB
iew ivio	any	Copy Detai	is Favorites	iviapping	iviapping	Fliter	Fliters	Selection C	ptions	
	Hastth Transa Curron	the chowing the	alth Iccup Tw	nas (All): St	atus (Astino	Ophy): Entoro	I D., (AID			
	Health Issues: Curren	tiy snowing - He	earth issue Ty	pes (All); St	atus (Active	: Only); Entered	i by (All)			
	Hea	dth Issue		Code	P-01	ICD-10	SNOMED CT	Тире		. †
	-	init 25/dC		oode	100 5	100 10	Sitemed of	170-	- 01150	
- Admitti										
	Acute ischemic str	oke	43	4.91 4	34.91	163.50	422504002	Admitting Dx		
<u></u>										
Uther L	Diagnosis (3)									
• Uther L		S	56	7.22 5	67.22	K65.0	75100008	Other Diagnosis		
dd Show/ Modify Discontinue Delete Quick Copy with Details Add To Favorites Manual Mapping Preferred Mapping Type Default Filter Reset Clear All Filters Column * Selection Grid Options InfoBut Health Issue Code ICD-9 ICD-10 SNOMED CT Type V Onset Admitting Dx (1) Acute ischemic stroke 434.91 434.91 I63.50 422504002 Admitting Dx Other Diagnosis (3) Column Stroke Column Stroke Column Stroke Column Stroke Column Stroke										
Uther L	Abdominal absces Atrial fibrillation	-	Manual Mapping Manual Mapping Preferred Mapping Image: Second Seco							
	Abdominal absces Atrial fibrillation Diabetes type 2, ur	-	42	7.31 4	27.31	I48.91	49436004	Other Diagnosis		
	Abdominal absces Atrial fibrillation Diabetes type 2, ur ge Dx (1)	ncontrolled	42	7.31 4 0.02 2	27.31 50.02	I48.91 E11.9	49436004 443694000	Other Diagnosis Other Diagnosis		
Dischar	Abdominal absces Atrial fibrillation Diabetes type 2, ur ge Dx (1) Acute ischemic str	ncontrolled	42	7.31 4 0.02 2	27.31 50.02	I48.91 E11.9	49436004 443694000	Other Diagnosis Other Diagnosis		
Dischar	Abdominal absces Atrial fibrillation Diabetes type 2, ur ge Dx (1) Acute ischemic str	ncontrolled	42	7.31 4 0.02 2 4.91 4	27.31 50.02 34.91	I48.91 E11.9 I63.50	49436004 443694000 422504002	Other Diagnosis Other Diagnosis Discharge Dx		
Dischar	Abdominal absces Atrial fibrillation Diabetes type 2, ur ge Dx (1) Acute ischemic str : (2)	ncontrolled	42 25 43	7.31 4 0.02 2 4.91 4	27.31 50.02 34.91	I48.91 E11.9 I63.50	49436004 443694000 422504002	Other Diagnosis Other Diagnosis Discharge Dx		

Health Issues Toolbar

The toolbar allows you to quickly perform various functions within the Health Issues Manager window.

H H	e I.	e Manager	Add -	en dis e	ALC: NO					5.		4		
1	in, Tu	out so				2.	10	No.	** Z	+ `		4	•	
Add lew	Show/ Modify	Discontinue	XX Delete	Quick Capy	Copy with Details	Add To Favorites		Preferred Mapping	Type Default Filter	R eset	Clear All Filters	Column - Selection	Grid Options	-

- 1. Health issues can be added, modified, and discontinued.
- 2. Add to Favorites Commonly used health issues can be saved to the physician favorites list
- 3. Filters can be used to organize the list of health issues
- 4. Column Selection allows the physician to customize the columns that present when viewing the added health issues.

Entering a Health Issue

- 1. Physicians can enter health issues for the patient by:
 - a) Clicking on the Health Issues icon Issues
 - b) Clicking on the drop-down field in the "Admission Diagnosis" heading in the Admission Order Set

Π					1B.	
1	Admit To:					
	Order	Status	Unit	Admit Diagnosis		Special Instruc
	Admit - 1 item(s)				<u> </u>	
	Admit To: Order Admit - 1 item(s) Admit To:	*	*			Z

c) Clicking on the mandatory field in the "Discharge Diagnosis" heading in the Discharge Order Set.

Discharge Diagnosis		10
X		IC.
_	-	

2. Select the type of health issue being added

Add New Health Issu	ue E	Action List 📀
Select a Type:	Favorites Browse Full Catalog Search	Cancel
Admitting Dx Axis I Axis II Axis III	Browse by Category Start Of Browse Coding Scheme ICD10-CM Coding Scheme ICD10-CM	Show All Code Linkages
Axis IV Chronic Discharge Dx Family History Other Diagnosis Pt. Medical Hx. Pt.Surgical Hx.	Cop Discharge Diagnoses	Add to Favorites Add Non-Coded Issue
	Find in < no category selected>:	
		se Help

IMPORTANT: This step is important to ensure that the health issue is being entered correctly. Diagnoses can easily be entered incorrectly if this step is skipped.

3. Search for the health issue using the favorites tab, the browse tab, or the full catalog

search tab.	Add New Health Issu	<u>e</u>	Action List 🛛 🔕
	Select a Type: Adds I Adds I Adds II Adds II	Favorites Browse Full Catalog Search Browse V Coding Scheme CD10-CM Top Admitting Diagnoses 3.	Cancel Show All Code Linkages Add to Favorites Add Non-Coded Issue
		Find in < no category selected>:	e Help

4. Once the health issue is located, highlight it, and click ADD

NOTE: Clicking the *M* will allow the health issue to be edited before it is added.

Quick Copy

To speed up entry of health issues, physicians can use the quick copy feature. This feature allows them to take an existing health issue and copy to another health issue type.

- Example: admitting diagnosis copied to discharge diagnosis.
- 1. In the Health Issue Manger, highlight the health issue that needs to be copied.
- 2. Then in the "Copy To" column, choose what type the health issue is being copied to.



3. Once the type is selected, click the Quick Copy icon in the toolbar.

🛃 Health Iss	ue Manager Add -				
Tana, Ita	and the (10 (2014) M	a 1678	(FCB)		
Add Show/ New Modify	Discont 3. Copy with Add Copy with Favor	To Manual Pref	Type Default Reset Filter	Clear All Column Gri Filters Selection Optio	d 🎽
	Health Issues: Currently showing - Health Is	sue Types (All); Statu	s (Active Only); Entered By	(All)	
H 🖉	Health Issue	Onset	POA Relationship to P	atient Copy To Sta	itus 🔻 Entered By 🗸
- Admitting [)x (1)				
	CHF, acute			Discharg 💌 Activ	e aaTemplate, SCE MD (M
Other Diag	iosis (z)				
- Other Diagi	Wrist fracture			Activ	e aaTemplate, SCE MD (

4. The health issue will copy over to the new type.

rainFive Hea	alth Issues: Currently s	showing - Health	Issue Types (All);	Status (Activ	e Only); Entered By
	Health Issu	Je	Onset	POA	Relationship to P
itting Dx (1)					
CH	HF, acute		<u> </u>		
r Diagnosis (2)				
W	rist fracture				
cc)PD (chronic obstruct	tive pulmonary d.	-		
arge Dx (1)					
CH	IF, acute				
	Itting Dx (1) Cf r Diagnosis (W CC narge Dx (1)	Image: With the second seco	Health Issue Health Issue CHF, acute r Diagnosis (2) Wrist fracture COPD (chronic obstructive pulmonary d. harge Dx (1)	Image Diagnosis (2) Wrist fracture COPD (chronic obstructive pulmonary d	itting Dx (1) CHF, acute r Diagnosis (2) Wrist fracture COPD (chronic obstructive pulmonary d harge Dx (1)

Health Issues Favorites

- 1. From system toolbar select Preferences,
- 2. then select Health Issues:

🛞 Allscripts Gateway My Applications SAC	+ 8	iscln(
My Applications 🕨 SAC		
File Registration Pharmacy View Go 1. s	Preferences Toc s	-
Refresh Previous Next Find Find More Head Screen Patient Patient Visit Info	Toolbar Order Entry Order Review Results	dd Care Outpatient Order rovider Medication Review Reconciliat
TestPatient, TestConsult 2NW 2401 01 ARO: Precautions: Pregnant:	Document Review	Test, Doctor
Patient List Orders Results 2.	Health Issues Maintain Health Issue Browse	ary Imaging CCDA Transmissio
Patient List 💌 💣 🍋 🐗 New Visit Modify Delete D List Visit List Current List V	Worklist Manager Task Viewer Acronym Expansion	ve Selected Select Visit Define Sar Visits List Column Sort Order C
Current List: Nursing	Document Copy Forward Show Additional Lines In Header	s 172 Visit(s) Save
Current Anne Patient Name	Include Override Providers in Provider Listings	New New Order To N Orders Results Rec Sign Doc
2NW 2401 TestPatient, TestConsult	63y 01-10-2018 Test, Doctor	

3. From this screen, you can use the menu to perform actions to edit and customize your health issues.

🖳 Health Issues Option	3. 0 8
Favorite Health Issues Browse Start Point	
My Favorites	Add Favorites
V96.00XA Accident involving balloon vehicle	Create Category
V93.49 Activities involving dancing and rhythmic movements	Remove
Y93.K3 Activities involving grooming and shearing an animal	Rename
M16.12 Arthropathy of left hip	Preferred Mappings
W56.81XS Bitten by other nonvenomous marine animals, sequela	Manual Mapping
G56.20 Cell phone elbow, unspecified laterality	Move Up
W17.1XXD Fall into storm drain or manhole, subsequent encounter	Move Down
W61.92XD Struck by other birds, subsequent encounter	Copy From
V97.33XA Sucked into jet engine	
A90 Suspected dengue fever	
A90 Suspected dengde lever	
	-
	Group by Type
	Sort Alphabetically
Show List Initially Collapsed	Cancel Help

4. The results will then appear in your favorites tab in Health Issues:

estPatient,	Test	Consu	ılt		/ 2401 01 r gy - Drug/Di	Fema rug 🤇 iss: sulfa e		63y (03-04-19 Garlic Powder/C			
dd Show/ ew Modify TestPatient, T	Discor estCons		Dele Ith Iss	Conv	Detz			ial Preferrec		Reset	Clea Filt
ealth Issues My	/ Ranked	1									
H 🖉			Healt	h Issue		Code	ICD-9	ICD-10	SNOMED CT	Туре	V
Admitting Dx (1		te MI				121.3		121.3	57054005	Admitting [Эх
Other Diagnosis						104.0		104.0	5705 1005		
(1)	Acut	te MI				I21.3		I21.3	57054005	Other Diagn	IOSIS
Chronic (1)	Chro	nic obst	ructiv	pulmonary	disease	496	496	J44.9	13645005	Chronic	
Abst Other Diag				pannonary	ansease	150	150	51115	15015005	Childhic	
	Cent	tral abdo	nal j	pain		789.09	789.09	R10.9	162046002	Abst Other I	Diag
New Health Ico ct a Type:	Eavo		rowse	Y Eull Cotol	log Search						
	Selec	t by Favo	orites:	Full Catal	log search						
Finl Diag Other Diag	Selec	_	orites: gory>		log search						
Finl Diag Other Diag Proc Code Vis Reason	Selec	t by Favo No cate	orites: gory>	6	Health Is		Code				Со
Finl Diag Other Diag Proc Code Vis Reason tting Dx	Selec	t by Favo No cate	orites: gory>	Acciden	Health Is	alloon vehicle	V96.00X	ICD10-CM			Со
Finl Diag Other Diag Proc Code Vis Reason tting Dx I	Selec	t by Favo No cate	orites: gory> 2 2	Acciden Accivitie	Health Is t involving basis s involving d	alloon vehicle ancing and rhyt	V96.00X Y93.49	ICD10-CM			Co
Finl Diag Other Diag Proc Code Vis Reason tting Dx I II V V	Selec	t by Favo No cate Add Add Add	gory>	Acciden Activitie Activitie	Health Is t involving b s involving d s involving g	alloon vehicle ancing and rhyt rooming and s	V96.00X Y93.49 Y93.K3	ICD10-CM ICD10-CM			Co
Finl Diag Other Diag Proc Code Vis Reason ttting Dx I I I V Complaint nic arge Dx	Selec	t by Favo No cate Add Add Add Add	orites: gory> 2 2 2 2	Acciden Activitie Activitie Arthropa	Health Is t involving b s involving d s involving g athy of left hi	alloon vehicle ancing and rhyt rooming and s P	V96.00X Y93.49 Y93.K3 M16.12	ICD10-CM ICD10-CM ICD10-CM			Co
Finl Diag Other Diag Proc Code Vis Reason tting Dx I I I Complaint nic narge Dx I I History	Selec	t by Favo No cate Add Add Add Add Add Add	gory>	Acciden Activitie Activitie Arthropa Bitten by	Health Is t involving bi s involving d s involving g athy of left hi y other nonve	alloon vehicle ancing and rhyt rooming and s p enomous marin	V96.00X Y93.49 Y93.K3 M16.12 W56.81X	ICD10-CM ICD10-CM ICD10-CM ICD10-CM			Co
Finl Diag Other Diag Proc Code Vis Reason ting Dx I I I I V f Complaint nic narge Dx Iy History rr Diagnosis Iedical Hx.	Selec	t by Favo No cate Add Add Add Add Add Add Add	orites: gory>	Accident Activitie Activitie Arthropa Bitten by Cell pho	Health Is t involving ba s involving g athy of left hi y other nonve me elbow, un	alloon vehicle ancing and rhyt rooming and s p enomous marin ispecified latera	V96.00X V93.49 V93.K3 M16.12 W56.81X G56.20	ICD10-CM ICD10-CM ICD10-CM ICD10-CM ICD10-CM			Co
Finl Diag Other Diag Proc Code Vis Reason tting Dx I I V Complaint nic narge Dx Iy History r Diagnosis edical Hx.	Selec	t by Favo No cates Add Add Add Add Add Add Add	orites: gory> () () () () () () () () () () () () ()	Acciden Activitie Activitie Arthropa Bitten by Cell pho Fall into	Health Is t involving b s involving g athy of left hi y other nonve ne elbow, un storm drain o	alloon vehicle ancing and rhyt rooming and s p enomous marin specified latera or manhole, su	V96.00X Y93.49 Y93.K3 M16.12 W56.81X G56.20 W17.1XX	ICD10-CM ICD10-CM ICD10-CM ICD10-CM ICD10-CM ICD10-CM			Со
Finl Diag Other Diag Proc Code Vis Reason itting Dx I II II II F Complaint nic narge Dx Iy History er Diagnosis Iedical Hx.	Selec	t by Favo No cates Add Add Add Add Add Add Add Add Add	orites: gory> () () () () () () () () () () () () ()	Accident Activitie Activitie Arthropa Bitten by Cell pho Fall into Struck by	Health Is t involving bi s involving d s involving g athy of left hi y other nonve me elbow, un storm drain o y other birds,	alloon vehicle ancing and rhyt rooming and s p enomous marin ispecified latera or manhole, su subsequent e	V96.00X Y93.49 Y93.K3 M16.12 W56.81X G56.20 W17.1XX W61.92X	ICD10-CM ICD10-CM ICD10-CM ICD10-CM ICD10-CM ICD10-CM ICD10-CM			Со
Admit Diag Finl Diag Other Diag FProc Code Vis Reason itting Dx I II II II f Complaint onic harge Dx Iy History er Diagnosis ledical Hx. irgical Hx.	Selec	t by Favo No cate Add Add Add Add Add Add Add Add Add Ad	orites: gory> () () () () () () () () () () () () ()	Accident Activitie Activitie Arthropa Bitten by Cell pho Fall into Struck by Sucked i	Health Is t involving b s involving g athy of left hi y other nonve ne elbow, un storm drain o	alloon vehicle ancing and rhyt rooming and s p enomous marin specified latera or manhole, su , subsequent e e	V96.00X Y93.49 Y93.K3 M16.12 W56.81X G56.20 W17.1XX	ICD10-CM ICD10-CM ICD10-CM ICD10-CM ICD10-CM ICD10-CM			Сос

Transfer Orders

To Complete the Transfer Order Reconciliation (in house only):

1. Either double click on the flag in the Order Rec column or click on the Order Reconciliation



2. Select to perform the Transfer Reconciliation

ect a reconciliation to p		
Admission (Outstanding)	09-08-2015	
-	link to start this reconciliation.	
	nciliation as not done, go to View/Maintain History tab.	
TO Mark this reco	icitation as not done, go to view/maintain history tab.	
TO Mark this feet	inclination as not done, go to view/maintain history tab.	
	ncination as not done, go to view, maintain history tab.	_
	ncmation as not done, go to view/maintain history tab.	7
nsfer	2-2015; modified by: TestMDTracey, Tracey	7
nsfer Transfer (Complete) 12-0		1
nsfer Transfer (Complete) 12-0	2-2015; modified by: TestMDTracey. Tracey	1

3. In the Icon Toolbar of the Transfer Reconciliation worksheet, select the



icon to enter the order. This will open the order entry worksheet.

4. Select the Transfer Request order.

Session	
Type: Standard	▼ Reason:
Manual Entry Searching for	
4.	transfer Vorder Cost Transfer Request
	Transferrin - TIBC
	Transferrin, Serum

5. Select the appropriate unit.

1	Allergie	s: NKDA, Bee StingsIntolerances: Egg			,.	,			
	Order:	Transfer Request	7					Order ID:	001147RBD
	Requested By:	Clark, Tracey				Ten	mplate Name: Transfer Request		
	Messages:								
\triangleleft	Unit		B	>	Make Private 🗌	Med	dically Necessary?		
	Other Informat	ion 5.					lation Type		

6. The transfer order shows up in the shopping cart.

6.		
0.	Transfer Request - ICU 12-11-2015 Pending	
		<u>E</u> dit
		Delete
		<u>С</u> ору
		Add Specimen
		Indication
		Mark as Don
-		
	Return to Order Reconciliation][<u>H</u> elp

Reconcile Orders View/Maintain History			
Group Format Reconciliation Enter Order Entry Orde	F Entry Enter Home Outpatient sted By Medications Medication Review	Mark All Remaining As Continued On Transfer	Multi Order Reconciliation
Reconciliation Type: Transfer by Clark, Tracey; New or	ders will be in session type of Standard		
ITEMS TO RECONCILE (0 of 33 reconciled)		ORDERS AFTER TRANSFER RECONCILIAT	ION
Pharmacy			
Active (0/1 reconciled)			
Rosuvastatin - Give 20 milliGRAM(s), Oral, Daily Pharm Note Renal dose adjustment For CrCl <30: Date: 12-11-2015 Routine	Active Maximum 10mg daily Disc/Stop: 04-11-2016		
■ IV Therapy			
Laboratory (0/9 reconciled)			
Blood Bank (0/3 reconciled)			
Radiology			
Active (0/1 reconciled)			
Xray Chest 2 Views - Radiology May Change Exa Symp :soa	m per Protocol: Yes. Sign- Active	80 🖸	
Date: 09-08-2015	Disc/Stop:		
Diagnostic Cardiology			
Active (0/3 reconciled)			
EKG 10-20-2015 ,Chest Pain For Chest Pain <avail. activations="Unlimited"> Date: 10-20-2015</avail.>	Available fo Disc/Stop:	Activation	
EKG 10-27-2015; Routine ,Chest Pain Date: 10-27-2015 Routine	Active Disc/Stop:		
EKG 11-18-2015; STAT ,Chest Pain	Active		
Section 2 (2 items)			

7. Can review all orders, not just medications before transfer.

8.

- 8. Home medications can be reviewed again with the transfer since they may now be appropriate for the patient.
- 9. After review and changing necessary orders, can use the the continuation of all remaining orders.



to expedite

Because patients can be transferred more than once, this type of Reconciliation can be performed several times.

How to Discharge a Patient

When discharging a patient, the physician should **FIRST** enter their discharge orders. Then they should complete the discharge reconciliation, followed by signing printed prescriptions (if applicable).

Discharge Orders



- 1. With the patient highlighted, choose the Enter Order icon.
- 2. On the order entry worksheet, change the session type to "Discharge Orders"

Requested By:	Source:
Date: Time:	· · · ·
- Session	
Type: Discharge Orders	Reason:
Discharge Orders Hold Start O Standard	2.
Urder Sets	
庄 Admit / Discharge / Transfer	Order
⊕ Cardiology	
Consults	

3. Search for the Discharge Order Set

Searching for	3.
	discharge Order
	Discharge * Order Set Discharge Planning

4. Choose the appropriate discharge order and then enter discharge orders for the patient.

<u></u> e	Gen I	Medicine Discharge Order Set -	and -						
		lajolies Inf D			1.0	PROBALC			anner, state
Disc	har	ge * Order Set [O orders of 84 are s	elected]						
⊘ <u>R</u> e	aques	sted Date		ls	s LVEF <40?				
10-13	3-201	5		Ľ	2				
Discł	harge		I Direker	T.	Description Chalus	Dk to	Diet	Activity	1 manual and
		Order	Discharg	910	Preseciption Status	Discharge	Diet	Activity	Follow up wth
_ 0	RDE	R DISCHARGE PLAN SEPARATE - 17 item(s)							
		Discharge Medicine		*					
		Discharge Cardiology					Healthy		
		Discharge GYN	Home (F	putine)					Follow up
		Discharge Orthopedics							
		Discharge Plastic Surgery 4.							Follow up
			ome (F	putine)					Call 812-282
		Discharge-Shoulder/Elbow							
		Discharge Behavioral Health							
	<u>]</u>	Consultant Follow Up							
		Consultant Follow up Cardiology							
	<u>_</u>	Consultant Follow up Gastroenterology							
		Consultant Follow up Oncology							
]	Consultant Follow up Pulmonary							
									-

5. The medication grids below the discharge orders will be greyed out unless the patient is a Core Measure patient. Then, only the grids for medication type(s) recommended for that core measure will be available for selection.

Order	Dose	Dose	Units	Route	Frequency	Form	Omission Reason	Other Reason
Beta Blocker - 13 item(s)								
Acebutolol (200 mg Capsule)			milliGRAM(s)	Oral	2 times per day	Capsule		
Atenolol (Tablet)			milliGRAM(s)	Oral	Daily	Tablet		
Bisoprolol (Tablet)			milliGRAM(s)	Oral	Daily	Tablet		
Carvedilol (Tablet)			milliGRAM(s)	Oral	2 times per day	Tablet		
Labetalol (Tablet)			milliGRAM(s)	Oral		Tablet		
Metoprolol Tartrate (Tablet)			milliGRAM(s)	Oral	2 times per day	Tablet		
nebivolol (Tablet)			milliGRAM(s)	Oral	Daily	Tablet		
Propranolol (Tablet)			milliGRAM(s)	Oral	2 times per day	Tablet		
Sotalol (Tablet)			milliGRAM(s)	Oral	2 times per day	Tablet		
Timolol (10 mg Oral)	10		milliGRAM(s)	Oral	2 times per day	Tablet		
Beta Blocker Omission Reason								
Discharge medication ordered by another MD								
Home Medication continued at discharge (: Beta								

6. When grids are lit up, the physician must make a selection in each category that is accessible (ACE, ARB, etc.). If not selected, you will be unable to submit the discharge orders.

7. Please note: There are 3 options that will satisfy the requirement regarding omission of the medication, the required medication being ordered by another MD, or the required medication is a HOME medication that is continued on discharge.

			1					1
ACE								
Order	Dose	Dose	Units	Route	Frequency	Form	Omission Reason	Other Reasor
ACE - 13 item(s)								
amLODIPine + Benazepril 2.5mg-10 mg (Capsule)			Capsule(s)	Oral		Capsule		
🔲 Benazepril (Tablet)			milliGRAM(s)	Oral	Daily	Tablet		
Captopril (Tablet)			milliGRAM(s)	Oral		Tablet		
Enalapril (Tablet)			milliGRAM(s)	Oral	Daily	Tablet		
Fosinopril (Tablet)			milliGRAM(s)	Oral	Daily	Tablet		
Hydrochlorothiazide-Lisinopril 12.5mg-10mg			Tablet(s)	Oral		Tablet		
Lisinopril (Tablet)			milliGRAM(s)	Oral	Daily	Tablet		
Moexipril (Tablet)			milliGRAM(s)	Oral		Tablet		
Quinapril (Tablet)			milliGRAM(s)	Oral	Daily	Tablet		
Remipril (Copculo)			milliGRAM(s)	Oral		Capsule		
ACE or ARB Omission Order								
Discharge medication ordered by another MD								
Home Medication continued at discharge (- ACE)								
ARB	1.5	L.S.	Luc s	15 .	1-			Lou
Order	Dose	Dose	Units	Route	Frequency	Form	Omission Reason	0ther reason
ARB - 9 item(s)								
Candesartan (Tablet)			milliGRAM(s)	Oral	Daily	Tablet		
Irbesartan (Tablet)			milliGRAM(s)	Oral	Daily	Tablet		
Losartan (Tablet)			milliGRAM(s)	Oral	Daily	Tablet		
Olmesartan (Tablet)			milliGRAM(s)	Oral		Tablet		
🔲 telmisartan (Tablet)			milliGRAM(s)	Oral	Daily	Tablet		
Valsartan (Tablet)			milliGRAM(s)	Oral	Daily	Tablet		
ACE or ARB Omission Order								
Discharge medication ordered by another MD								
Home Medication continued at discharge (ARB)								

Saving Discharge Diagnosis to Discharge Order

1. In the discharge order, select the square icon to the right of the Discharge Diagnosis

Order:	Discharge Medicine			
Requested By:	Gill, Connie			Template Name:
Messages:				
Discharge D)ate	Discharge Time	Discharge to	
06-24-2014		A	Home (Routine)	2
Prescription Sta	atus		(Clear with Doctor/Specialty
			Clear	
C Prescription	s Given to Patient	C Prescriptions on Chart	O No Prescriptions Net	
Discharge Diag	gnosis			

- 2. This opens up Health Issue Manager:
- Note on the left side of screen at the bottom Discharge Dx is highlighted. If not, make sure to select before entering in the appropriate diagnosis.

H 🖉	Health Issue	Code	Type 🗸	Onset	POA	Relationship to Patient (Age at Diagnosis)	Сору То	Status 🖪
- Other Dx (1)								
Anemia		285.9	Other Dx					Active
•								
dd New Health Issue								
	rowse Full Catalog Search							
dmitting Dx								
wis I	tegory Start Of Browse		Coding Scheme ICD9	-				
	Admitting Diagnoses							
ons in the second se	Discharge Diagnoses							
Discharge Dx Dther Dx								

3. You can use any of the browse tabs, Favorites Browse, or Full Catalog Search to find the diagnosis you wish to add to this patient's visit.

▲ Add New Health Is	5 <mark>.ac</mark>		3.							
ielect a Type: Admitting Dx	Favorites)	Browse Full Catalog Search					a- Q T	Search Code Only		(Showing Up to First 500 Re:
Axis I Axis II Axis III			Health Issues		Code	ICD-9	ICD-10	SNOMED CT		Coding Scheme
Axis IV	Add 🧷	Anemia, hyperchromic		2	85.9	285.9	D64.9	271737000	ICD9	
Discharge Dx Dther Dx	Add 🧷	Hypoplastic anemia		2	84.9	284.9	D61.9	41614006	ICD9	
	Add 🧷	Anemia, hypoplastic		2	84.9	284.9	D61.9	41614006	ICD9	
	Add 🧷	Anemia in chronic renal disea	se	2	85.21	285.21	N03.9	310647000	ICD9	
	Add 🧷	Anemia in CKD (chronic kidn	ey disease)	2	85.21	285.21	N03.9	310647000	ICD9	
	Add 🧷	Anemia in end-stage renal dis	ease	2	85.21	285.21	N18.6	234348004	ICD9	
	A38 /	Anemia in ESRD (end-stage re	nal disease)	21	85.21	285.21	N18.6	234348004	ICD9	

4. Select the ADD button for the Health Issue. The Discharge Diagnosis will be added to this visit.

Add New Health	Issue							Action List
Select a Type:	Favorites	Browse Full Catalog Search						Done
Admitting Dx Axis I	amerima				4 Q 🛛	Search Code Only	(26 of 500 R	
Axis II		Health Issues	Code	ICD-9	ICD-10	SNOMED CT	Coding Scheme	Hide All Code Link
Axis III Axis IV	Add 🧷	Anemia, hyperchromic	285.9	285.9	D64.9	271737000	ICD9	
Discharge Dx Other Dx	Add 🧷	Hypoplastic anemia	284.9	284.9	D61.9	41614006	ICD9	Add to Favorites
	Add 🧷	Anemia, hypoplastic	284.9	284.9	D61.9	41614006	ICD9	Add to Pavorites Add Non-Coded I:
	Add 🧷	Anemia in chronic renal disease	285.21	285.21	N03.9	310647000	ICD9	
	Add 🧷	Anemia in CKD (chronic kidney disease)	285.21	285.21	N03.9	310647000	ICD9	
	Add 🧷	Anemia in end-stage renal disease	285.21	285.21	N18.6	234348004	ICD9	
	Add 🧷	Anemia in ESRD (end-stage renal disease)	285.21	285.21	N18.6	234348004	ICD9	InfoButton
	Add 🧷	Maternal anemia complicating pregnancy, childbirth, or the puerperium	648.20	648.20	O99.019	45828008	ICD9	-

5. Now you will need to select the Save to Order button to add this discharge diagnosis to your Discharge order.

6. You can now continue to add the appropriate instructions to complete the Discharge order.

Discharge Date D6-24-2014 Prescription Status	Discharge Time
C Prescriptions Given to Patient C Pre Discharge Diagnosis	scriptions on Chart C No Prescriptio
N18.6 Anemia in end-stage renal disease	

Conditional Discharge Order

NOTE: If multiple physicians need to approve the discharge or specific requirements must be met prior to discharge:

- 1. Enter the discharge orders on the Order Entry worksheet per your specialty. (Current workflow)
- 2. After entering the discharge information and prior to submitting the order, in the bottom right of the screen, select the conditional order box

Follow Discharge order Instructions						A
This is INFORMATIONAL ONLY: Need to ORDER DI	SCHARGE PLANNING SE	PARATELY!				·
Referred to Home Health Agency Agency						
	Ş					
FOLLOW UP INSTRUCTIONS:						
Return to Office for Follow Up With Dr.	Follow up in	Day(s)	Week(s)	Month(s)	As Needed	
Return to Office for Follow Up With Dr.	Follow up in	Day(s)	Week[s]	Month(s)	As Needed	
Return to Office for Follow Up With Dr.	Follow up in	Day(s)	Week(s)	Month(s)	As Needed	
Return to Office for Follow Up With Dr.	Follow up in	Day(s)	Week(s)	Month(s)	As Needed	
Follow-up	Followup-in	Day(s)	Week(s)	Month(s)		2.
Additional Instructions	,					
]		
]	Conditional Order	ns:

3. You will then need to select how many times this is applicable (usually once)



- 4. Then, type the condition (this is an example only and not meant to be a guideline) in the free text box so the nurse knows what conditions need to be met to activate the order.
- Other Condition examples: if okay with (physician / specialty) *, after (medication administration, blood draw, or test), if can void after foley catheter removal, etc.

* In the event another physician/specialty has not previously signed off on the patient as documented in the progress notes.

- 5. Once completed, select OK and save the order.
- If saved correctly, it will appear on the patient's orders tab in the Patient Care heading (6a.) and will have a Question mark in front of it to designate as conditional and (6b.) will have Available for Activation in the status column.



Discharge Medication Reconciliation

Once the discharge orders are submitted, these orders trigger the discharge reconciliation and a new flag appears in the Order Rec column on the patient list.

Current List	My Patient List		Sele-	Select All Patients 22 Visit(s) Save Selected Patients					
Admit Date	Planned/Actual Discharge Date	Current Location	Patient Name	Age	Provider	New Orders	New Results	Order Rec	New Docu
08-13-2		3SE 3007 01	Train, TrainOne	64y	Addas, Mouhamad				
08-13-2		3SE 3007 02	Train, TrainTwo	63y	HARPER, MICHAEL C				
08-13-2		3SE 3008 01	Train, TrainThree	62y	Trommler, Lloyd C			1	
08-13-2		3SE 3008 02	Train, TrainFour	61y	Brahmbhatt, Vipul D				
08-13-2		3SE 3009 01	Train, TrainFive	60y	GOLDSTEIN, STEVEN			Y	
08-13-2		3SE 3010 01	Train, TrainSix	59y	Knight, E Ray				

NOTE: The discharge medication reconciliation should be completed by the admitting physician/service.

To complete the discharge medication reconciliation:

1. Either double click on the flag in the Order Rec column on the patient list, or click on the

Order Reconciliation icon 🍄

2. Select the Discharge Order (Outstanding) to complete the discharge reconciliation.

ſ	Reconcile Orders View/Maintain History
	Select a reconciliation to perform:
	Admission
	Admission (Complete) 10-14-2015; modified by: aaTemplate, SCE MD To perform functions such as viewing details, canceling, or resetting this reconciliation, go to View/Maintain History tab.
	Transfer <u>Transfer(New)</u> Select the 2. which to perform the transfer reconciliation.
Ι.	
	Discharge <u>Discharge Order (Outstanding) 10-14-2015</u> Select the above link to start this reconciliation. To mark this reconciliation as not done, go to View/Maintain History tab.
	To perform functions such as viewing details, canceling, or resetting this reconciliation, go to View/Maintain History tab. Transfer Transfer(New) Select the 2. ink to perform the transfer reconciliation. Discharge Discharge Order (Outstanding) 10-14-2015 Select the above link to start this reconciliation.

3. Indicate which medications will be continued on discharge and which will be discontinued on discharge by using the icons in the middle of the screen:



6. To save time, after continuing all the medications that are appropriate on discharge, for all the medications left (ones to be discontinued), the physician can use the *Mark All Remaining As Discontinued on Discharge* icon.



More Actions in Order Reconciliation Manger

If an additional medication prescription needs to be entered that are not listed under the items to reconcile, the physician can use the enter prescription icon.



Document Entry

Search for a Document



2. Select "Start of Browse"

Authored by: Occurrent Entry WorkSneet - Tester Authored: Date Now Authored by: Me Other Co-Signer(s):	06 - 19 - 2017 CT Time: 11:48
2. Mark Note As: 🗌 Incomplete 🤅	Results pending Priority
Start Of Browse Start Of Browse Manual Entry Personal Documents Most Recent Documents Document Recovery	Type here to enter document Document Name Progress Note, Adult
Need help?	Document <u>H</u> elp Open Close

- 3. Select "Physician Documentation" in the browse tree.
- 4. Select desired document.
- 5. Select "Open" and the document will open.

Authored: ○ Date ④ Now Authored by: ④ Me ○ Other Co-Signer(s): Mark Note As: □ Incomplete	07 - 11 - 2017 Time: 12:04 Source:
Start Of Browse 🔻	Content of '/Physician Documentation'
- Profiles/Assessments	Type here to enter document
3. - Rehab	Document Name
 Physician Documentation ED Physicians BH Discharge Addenda Miscellaneous 	Progress Note Adult Progress Note Adult - Anesthesia Progress Note Adult - Behavioral Medicine Progress Note Adult - Cardiology Progress Note Adult - Germatology Progress Note Adult - Hoepitalist Progress Note Adult - Infectious Disease Progress Note Adult - Infectious Disease Progress Note Adult - Neurology Progress Note Adult - Union Progress Note Adult - Surgerer Progress Note Adult - Neurology Progress No
Need help?	Document <mark>5. Open Close</mark>

How to Use "Retrieve Last Charted" and Other Retrieval Options

Retrieve Last Charted

1. Highlight the main section header in ALL CAPS.

1. Preview	3.
	Assessment & Plan ansion Imaging reviewed Copy My Last Chart reviewed Copy My Last Chart reviewed Imaging reviewed Imaging reviewed Medications reviewed Medications reviewed Office records verified/reviewed Office records verified/reviewed Imaging reviewed Imaging reviewed Imaging reviewed Imaging reviewed
Retrieve Last Charted Val Insert Default Values Clear Unsaved Data	2.

- 2. Select this option. This will copy forward information from the last note with this name on this patient for the Assessment and Plan (Free Text) Heading, *IF* there was information placed in the previous note.
- 3. An icon will appear next to the heading to indicate information has been brought in.

By repeating the above steps, the user can retrieve last charted information on the following sections:



Other Charting Retrieval Options

Each section has a separate option as well to bring in past charting.

Review of Systems Copy Forward (not using <u>Retri</u>eve Last Charted)

Apply Default	All Other Systems Reason Not Obta			Default	
C APPLY NEGATIVES (male 18+ yrs)		negative statement negative detailed	C family not present C mental status C unable to respond		C my last
General	Skin meg pos Answer All		Breast		
neg pos Answer All			neg pos Answer Al		

- 1. Will copy in the "users" default (preset) negatives.
- 2. Will select negatives from a system-supplied dictionary for all items not selected as positive.
- 3. Will copy in the "users" last charted values from this patient.

Physical Examination Copy Forward (not using Retrieve Last Charted)

Physical Exam		3.	4.
SAVE DEFAULTS	DEFAULT	DEFAULT	DEFAULT
C save my normal defaults	⊂ normal	C my normal	⊂ my last
General Appearance Comments			General

- 1. Will save the normal defaults as set by the provider.
- 2. Will copy in the system supplied (canned) normal.
- 3. Will copy in the "users" preset normal values.
- 4. Will copy in the "users" last charted values on this note for this patient.

Problem A&P Copy Forward (not using Retrieve Last Charted)

Copy Problem List C Copy Problem List C Copy from my last saved note Problem 1 Assessment/Plan 1	Problem/Assessment Plan	
C Copy from my last saved note 2. Problem 1 C Move Down C Clear Data	Copy Problem List	
Problem 1 1 - Actions C Move Down C Clear Data		
C Move Down	C Copy from my last saved note 2.	
C Clear Data	Problem 1	1 - Actions
Assessment/Plan 1		C Move Down
Assessment/Plan 1		C Clear Data
		-

- 1. Copy Problem List Will copy in all of the problems listed in Health Issues.
- 2. Copy from my last saved note Will copy in the "users" last charted values on this note for this patient.

Completing a Document

Create	e Preview				
	ections P	🎭 Preview 🕶 📝	Modify Template 🔬 Acronym Expansion 📴 Orders		<u> </u>
Document Info	ASSESSMENT & PLAN	Assessment & Plan R			
umer	 Assessment & Plan Review 	Opp My Last	Reviewed/Verified		
nt Int	Copy My Last	C Copy My Last	Chart reviewed		
0	Reviewed/Verified	,	□ Imaging reviewed		
	Assessment and Plan Revie		Lab results reviewed		
	ASSESSMENT & PLAN - PROBLE		Medications reviewed		
	VITAL SIGNS		□ Vital Signs reviewed		
	ADMISSION INFORMATION / OV		Gfice records verified/reviewed		
	REVIEW OF SYSTEMS				
	LAB TRENDS - 3 DAYS	Assessment and Plan			
	LAB RESULTS - FISHBONE	🕺 💾 🔂 🗳			
	DAD RESOLITS CONNERT CREEK	Segoe UI	▼ ¹⁰ ▼ B I <u>u</u> Ξ Ξ Ξ ≡ Ξ Ξ		
	DIAGNOSTIC RESULTS - CURREN				
	CERTIFICATE OF INPATIENT ADM				
	CERTIFICATE OF INPATIENT ADM				
	• · · · · · · · · · · · · · · · · · · ·				
	Retrieve Last Charted				
	Insert Default Values				
	Clear Unsaved Data				······
		•			
Need H	Help? Mark Note As: 🗌 Results p	oending 🗌 Priority 🗌] Incomplete	E&M Calculation	Charge Capture SuperBill
					Save Cancel

Amount of content charted is determined by the provider. There is no "required" amount of charting or "required" charting fields in a note. The ONLY exception to this is if the provider is completing the "Certificate of Inpatient Admission" section, which has required fields.

😥 Structured Notes Entry - TestSixteen, NewPati	ient A - CMH Progress Note Adult		
Create Preview			
Sections 7	🗞 Preview 🔹 📝 Modify Template 🛛 💰 Acronym Expansion 🛛 📴 🛛	Orders	
	Problem/Assessment Plan	 Image: A set of the set of the	
Assessment & Plan Review	Problem/Assessment Plan		
Copy My Last			
Kevlewed/vernied	Copy Problem List		
Assessment and Plan Revie ASSESSMENT & PLAN - PROBLE	C Copy Problem List C Copy from my last saved note		
ASSESSMENT & PLAN - PROBLE Problem/Assessment Plan			
Problem/Assessment Plan	Problem 1	1 - Actions	
 VITAL SIGNS 		C Move Down	
ADMISSION INFORMATION / OV	Assessment/Plan 1	C Clear Data	
REVIEW OF SYSTEMS	4		
PHYSICAL EXAMINATION	· ·		
LAB TRENDS - 3 DAYS	Problem 2	2 - Actions	
► LAB RESULTS - FISHBONE	Problem 2	C Move Up	
▶ LAB RESULTS - CURRENT CALEN		C Move Down	
DIAGNOSTIC RESULTS - CURREN	Assessment/Plan 2	C Clear Data	
INTAKE & OUTPUT			
MEDICATION ORDERS	·		
CERTIFICATE OF INPATIENT ADM	Problem 3	3 - Actions	
		C Move Up	
		C Move Down	
	Assessment/Plan 3	C Clear Data	
	Υ		
	Problem 4	4 - Actions	
< · · · · · · · · · · · · · · · · · · ·		C Move Up	
	Assessment/Plan 4	C Move Down	
Retrieve Last Charted		Clear Data	
	*		
Insert Default Values			
Clear Unsaved Data	Problem 5	5 - Actions	
	∥ ∢∫	Nove up	
Need Help? Mark Note As: Results pe	ending Priority Incomplete		&M Calculation 🔲 Charge Capture SuperBill
Results pe	and a month incomplete		
			Save

The provider can use the predefined check boxes and/or radio buttons in each section or use the free text boxes.

₽ St	ructured Notes Entry - TestSixteen, NewPatient A	- CMH	Progress Note Adult					
	odify Preview							
	Sections 4	Sen €	Preview 👻 📝 Modify Templat	e sc	Acronyr	m Expansion 🗊	Orders	
ocun	ASSESSMENT & PLAN ASSESSMENT & PLAN - PROBLEM LIST	01. Vi	tal Signs, CC 1.0					
Document Info	▼ VITAL SIGNS	\bigcirc	📀 Sho	w all a	vailable 🤇	Show selected only	 Suppress empty ro 12/24 	
ηfo	▼ Current Day	Ra	nge: 03-06-2018 to 03-06-2018		Chart Sco	ope: This Chart		
	01. Vital Signs, CC 1.0			03	-06-2018			
	ADMISSION INFORMATION / OVERNIG REVIEW OF SYSTEMS		Description Label	□ 04	k: 32	E 11:30		
	PHYSICAL EXAMINATION	•	degrees F degrees F	+	104.3	98.6		
	LAB TRENDS - 3 DAYS		с	+	40.1	37		
	LAB RESULTS - FISHBONE		Heart Rate Heart Rate (bpm)	+	126	78		
	 LAB RESULTS - CURRENT CALENDAR DA DIAGNOSTIC RESULTS - CURRENT CALE 		Systolic Systolic	+	190	118		
	INTAKE & OUTPUT	•	Diastolic Diastolic (mmHg)	1	100	68		
	▼ MEDICATION ORDERS		Mean Mean (mmHg)	1	130	84		
	Medication Orders (Active/Hold)	•	Resp Rate breaths/min	+	28	16		
	 CERTIFICATE OF INPATIENT ADMISSION 	•	SpO2 %		90	99		
			Oxygen Oxygen (L/min)		4			
			Inch(s)			72		
			cm			182.88		
			lbs			220		l
			oz			0		
			kg			99.79		
			BSA (m2) BSA (m2)			2.2		
			BMI (kg/m2) BMI (kg/m2)			29.8		
	< · · · · · · · · · · · · · · · · · · ·							
	Retrieve Last Charted Values							
	Insert Default Values	Adm	ission / Subjective					
	Clear Unsaved Data		Complaint					

Content highlighted in blue color is automatically added to the note. If content is not desired in note, select the check box or the blue content box itself to remove from note.

🧕 st	ructured Notes Entry - TestSixteen, NewPatient A	- CMH Progress Note Adult		22
M	odify Preview Sections P			
Document Info	ASSESSMENT & PLAN ASSESSMENT & PLAN ASSESSMENT & PLAN VITAL SIGNS ADMISSION INFORMATION / OVERNIG Admission / Subjective	Admission / Subjective	dify Template 🔏 Acronym Expansion 📴 Orders	
	Overnight Events REVIEW OF SYSTEMS PHYSICAL EXAMINATION LAB TRENDS - 3 DAYS LAB RESULTS - FISHBONE LAB RESULTS - CURRENT CALENDAR DA DIAGNOSTIC RESULTS - CURRENT CALE INTAKE & OUTPUT MEDICATION ORDERS	Chief Complaint		
	Medication Orders (Active/Hold) CERTIFICATE OF INPATIENT ADMISSION	Events/Changes Overnight Events include:	no overnight events overnight events (specify) fall altered mental status pain chest pain change in level of care change in cardiac status change in pulmonary status Nurse Blue Code 4 new fever	

The provider can use the predefined check boxes and/or radio buttons in each section or use the free text boxes.

Le st	Gructured Notes Entry - TestSideen, NewPatient A - CMH Progress Note Adult						J 23	
M	odify Preview							
Doc	Sections ASSESSMENT & PLAN	🎭 Preview - 📝 Modify Template	scm Ac	ronym Expansion 📴 🤇	Orders			
Document Info	ASSESSMENT & PLAN - PROBLEM LIST VITAL SIGNS	Review of Systems					3	
Info	 ADMISSION INFORMATION / OVERNIG 	Apply Default	A	l Other Systems	Reason Not Obtained	I 📕 Default		
	Admission / Subjective	C APPLY NEGATIVES (male 18+ yrs)	- 0	negative statement	C family not present	C my last		
	Overnight Events		0	negative detailed	C mental status			
	 REVIEW OF SYSTEMS 				C unable to respond			_
	 Review of Systems 	General		Skin		Breast		
	Review of Systems PHYSICAL EXAMINATION	neg pos Answer All		neq pos Answer All		neg pos Answer All		_
	LAB TRENDS - 3 DAYS	neg pos anorexia 💭		neg pos icterus		neg pos breast lump		
	LAB RESULTS - FISHBONE	neg pos chills		neg pos lesions		neg pos gynecomast		
	LAB RESULTS - CURRENT CALENDAR DA	neg pos fever		neg pos pruritus	-	neg pos nipple disch		
	DIAGNOSTIC RESULTS - CURRENT CALE	neg pos malaise/fatigue		neg pos rash		neg pos nipple retrac neg pos tenderness	tion 📕	
	INTAKE & OUTPUT	neg pos weight loss		neg pos varicose veins		neg pos tendemess		
	 MEDICATION ORDERS 							
	Medication Orders (Active/Hold)	-		Ear		Nose	_	1
	CERTIFICATE OF INPATIENT ADMISSION	Eye neg pos Answer All		neg pos Answer All		neg pos Answer All		1
		neg pos icterus		neg pos discharge		neg pos congestion		-
		neg positching		neg pos hearing distur	rbance	neg pos discharge		
		neg pos lacrimation		neg pos hearing loss		neg pos nose bleeds		
		neg pos pain		neg pos pain		neg pos obstruction		
		neg pos photophobia 💭		neg pos tinnitus		neg pos sneezing		
		neg pos vision changes 💭						
		Mouth/Throat		Respiratory		Cardiovascular		1
		neg pos Answer All		neg pos Answer All		neg pos Answer All		
	Retrieve Last Charted Values	neg pos dysphagia 📕		neg pos cough		neg pos claudication		
	Insert Default Values	neg pos hoarseness 💭		neg pos dyspnea		neg pos lower extrem	nity swelling 📕	
		neg pos lesions		neg pos hemoptysis		neg pos orthopnea		
	Clear Unsaved Data	neg pos rash		neg pos pleuritic chest	t pain 📕	neg pos palpitation		
<u> </u>		4						•
Ne	ed Help? Mark Note As: 🗌 Results pending	Priority 🗌 Incomplete				E&M Calculation	Charge Capture Sup	erBill
						Sav	e Save/Print Ca	ancel
			X		V 11/			

If the provider does not want to use the supplied content or retrieve previous documentation, they can free text.

Мо	odify Preview					
0	Sections	🛛 🗫 Preview 🔹 🗾 Modify	Template scm	cronym Expansion 📴 Orders		
ocu		Physical Exam				-
ment Info	ASSESSMENT & PLAN - PROBLEM LI VITAL SIGNS ADMISSION INFORMATION / OVER	SAVE DEFAULTS	DEFAULT C normal	DEFAULT C my normal	DEFAULT C my last	
	Admission / Subjective Overnight Events	General Appearance Commer	its		General C normal	
	REVIEW OF SYSTEMS PHYSICAL EXAMINATION				C my normal C my last	
	Physical Examination					
SAVE DEFAULTS Skin Comments DEFAULT				Skin C normal		

Content highlighted in blue color is automatically added to the note. If content is not desired in note, select the check box or the blue content box itself to remove from note.

odify Preview					1 -
Sections ASSESSMENT & PLAN			rodify Template 🔬 Acronym Expansion 📴 Orders	_	
 ASSESSMENT & PLAN - P VITAL SIGNS 	ROBLEM LIST	atology (Selected It	G Show all available C Show selected only	8/8	1 .
 ADMISSION INFORMATIO Admission / Subjective 	N / OVERNIG	nge: 03-03-2018	o 03-06-2018 Chart Scope: This Chart	-,-	Clipbo
Overnight Events			03-06-2018		
REVIEW OF SYSTEMS		Result Name	T 11:41 T 11:43		
PHYSICAL EXAMINATION		Laboratory			
 LAB TRENDS - 3 DAYS 		Hematology			
		General Hemato	ogy		
Hematology (Selected		HCT	42 🖡	35	
Blood Chemistry (Sele	ted items)	Hgb	13 🛔	11	
LAB RESULTS - CURRENT	CALENDAR DA	PLT	140 💺	120	1
DIAGNOSTIC RESULTS - C	URRENT CALE	WBC	5.0 🛉	12	
INTAKE & OUTPUT					
 MEDICATION ORDERS 					11.

A fishbone lab section is available if desired.



- Results will only appear if they fall in the designated time frame. For lab and diagnostic results, the default is 1 calendar day.
- An option for 2 calendar days is available in "modify template".

👷 Structured Notes Entry - TestSixteen, NewPatient A	- CMH Progress Note Adult	
Modify Preview		
Sections 4		
	🎭 Preview 👻 📝 Modify Template 🔬 Acronym Expansion 📴 Orders	
ASSESSMENT & PLAN - PROBLEM LIST	Diagnostic Imaging	 Image: A set of the set of the
ASSESSMENT & PLAN	🕝 🗱 👔	
ADMISSION INFORMATION / OVERNIG		
REVIEW OF SYSTEMS	Range: 03-06-2018 to 03-06-2018 Chart Scope: This Chart	
PHYSICAL EXAMINATION	F Result Value Text	
LAB TRENDS - 3 DAYS		
LAB RESULTS - FISHBONE		
LAB RESULTS - CURRENT CALENDAR DA		
DIAGNOSTIC RESULTS - CURRENT CALE		
Diagnostic Imaging		
Diagnostic Cardiology Diagnostic Neuro	4	•
Diagnostic Pulmonary		
INTAKE & OUTPUT	Diagnostic Cardiology	
✓ MEDICATION ORDERS	🕝 🗱 🕖	
Medication Orders (Active/Hold)		
CERTIFICATE OF INPATIENT ADMISSION	Range: 03-06-2018 to 03-06-2018 Chart Scope: This Chart	
	Result Value Text	
	4	•
	Diagnostic Neuro	
Retrieve Last Charted Values	🕝 🗱 🕧	
	Damage 03.05 2010 to 03.05 2010 chart Seamer. This Chart	
Insert Default Values	Range: 03-06-2018 to 03-06-2018 Chart Scope: This Chart	
Clear Unsaved Data	Result Value Text	
	()	
Need Help? Mark Note As: Results pending	Priority Incomplete E&M Calculation I Charge C	apture SuperBill
	Save	rint Cancel

- Most recent I/Os are available for review.
- If content is desired in note, select the check box or the content box itself to add to the note.



Medication orders appear in blue highlight. To remove, de-select the check box to the left.

Modify Preview	
Sections	📮 🗞 Preview 👻 🃝 Modify Template 🔬 Acronym Expansion 📴 Orders
ASSESSMENT & PLAN 📃	
 ASSESSMENT & PLAN Assessment & Plan Review Copy My Last Reviewed 0/arified 	
Copy My Last	
Reviewed/Verified	
Assessment and Plan Re	vie Medication Orders (Active/Hold)
ASSESSMENT & PLAN - PROB	E 📴 🖌 🎯 💯 🕫 Show all available 🔿 Show selected only 0/0
VITAL SIGNS	
ADMISSION INFORMATION /	OV Chart Scope: This Chart
REVIEW OF SYSTEMS	Date Order Name Order Summary Line
PHYSICAL EXAMINATION	
LAB TRENDS - 3 DAYS	
LAB RESULTS - FISHBONE	
LAB RESULTS - CURRENT CAL	N
DIAGNOSTIC RESULTS - CURR	EN
▼ INTAKE & OUTPUT	
▼ Intake & Output	
02. Intake and Output, O	
MEDICATION ORDERS	Certification of Inpatient Admission

Items for NP or PA: Assigning a Co-Signer during selection of document:

NPs or PAs are required to assign a co-signer and indicate document is incomplete. This will allow the designated co-signer to perform necessary actions on the document as well as be properly identified to HIM.

1. Select Co-signer box.

😰 Document Entry Worksheet - TestSixteen, NewPatient A	
Need help? Document Help	Qpen Close

2. Choose a physician from the list or search for the appropriate one:

🔛 Authored By	- TestSixteen, NewPat	ient A	2.		💀 Authored By	- TestSixteen, NewPatient A		
Authored By: Care Provider: Filter Occupation: Org. Unit:		rrent Boviders	Other	Sgarch	Authored By: Care Provider: Filter Occupation: Org. Unit:	O Me O Current Providers ALL ALL	• Other	Sgarch
Schroet	r, Tina N er, Edward O Matthew	Occupation Admitting Attending Consulting	Org Unit Medicine Medicine Cardiology	Specialty Internal Medicine Emergency Medic Cardiology	Source:	Distation		
Need Help?			<u> ok</u>	<u>Cancel</u>	Need Help?		OK	<u>C</u> ancel

3. Mark as incomplete prior (a.) to selecting the note or while already in the note (b.):

🖉 Document Entry Worksheet - Te	StSixteen, NewPatient A	
Authored: 🔿 Date 💿 Nov	03 - 06 - 2018 CT Time: 10:24	
Authored by: OMe Oth	er Bradley, Tina N Source: Dictation	
Co-Signer(s)		
a. Mark Note As: ♥ Incomplete	Results pending Priority	
Start Of Browse	Content of '/Physician Documentation'	
KBC - Profiles/Assessments KBC - Rehab	Type here to enter document	
ED.	Document Name	
-ED Physicians -Physician Documentation -BH -Discharge -Addenda -Miscellaneous	CMH Progress Note Adult CMH Progress Note Adult - Anesthesia CMH Progress Note Adult - Cardiology CMH Progress Note Adult - O Lermatology CMH Progress Note Adult - G CMH Progress Note Adult - Hospitalist CMH Progress Note Adult - Hospitalist CMH Progress Note Adult - Infectious Disease CMH Progress Note Adult - Nephrology CMH Progress Note Adult - Nephrology CMH Progress Note Adult - Nephrology CMH Progress Note Adult - Neurology CMH Progress Note Adult - Pulmonary CMH Progress Note Adult - Pulmonary CMH Progress Note Adult - Surgery	
		,
Retrieve Last Charted Insert Default Values Clear Unsaved Data	b.	
Need Help? Mark Note As: Rest	Its pending 🗆 Priority 🔽 Incomplete	E&M Calculation Charge Capture SuperBill

4. Submit as Incomplete selection results in appearance on documents tab with Document Status of Incomplete:

	Time	Document Name	Document Status	4.
01-	27-2017			
	14:10	CMH Progress Note Adult - Hospitalist	Incomplete	

 If needed, it is possible to still edit this Incomplete Status not by selecting the Modify Document icon, Modify tab, or Modify Document bolded option.



Sovera

- Sovera is CMH's comprehensive medical health record.
- Accessing Sovera
 - o Separate icon on hospital desktop
 - o Through SAC Thin client toolbar icon in SAC
 - o Through CAG

After logging into the Citrix Portal you will see a listing of those applications you have requested and been granted access to.



May take a while for it to launch for the first time.

http://cgiprod.clarkmemorial.org/ - EGI Sovera - Windows Internet Explorer		_02
💫 🗢 🙋 http://cgiprod. darkmemorial.org /himprod/HIMLogonNoCabFile.htm	💌 🐓 🗙 📴 Live Search	P -
Sovera® for HM		

1. When you log in you will need be presented with a search pop up (see next section) or you can find the icon "Retrieval" to search for medical records or deficiencies.



Searching for Medical Records

1. In the new (pop up) window,

change the sort to Name/MRN and enter the appropriate information.

2. Select Retrieve to view that patient's data.

-	
Search	×
Search Type:	Medical Records
Current Search:	Name/MRN
Search Queue:	MRN
Description:	Name/MRN Acct # 1.
- Search Criteria:	Wedical Record Search
Search Cilcola.	MRN and Account
Last Name	-
First Name	-
MRN	-
Account Number	-
	2.
	<u>B</u> etrieve <u>S</u> earch Manager <u>C</u> lose
	<u>B</u> etrieve <u>S</u> earch Manager <u>C</u> lose

3. You can then view documents located in the tabs of the chart. Click on the title of the document and it will appear in the PDF viewer.

Addressing Deficiencies

1. Click on the drop-down box and select "Deficiencies".

	earch			
l	Search Type:	Deficiencies 🔻	•	
	Current Search:	Deficiencies Medical Records		
	Search Queue:			
	Description:	My Deficiencies		
	– Search Criteria: –			

2. The information you need to complete your deficiencies is contained on this desktop.



Current Deficiencies (21 Assigned) Doc Type Message CONSULTATION RADIOLOGY CONSULTATION RADIOLOGY Discharge SUMMARY job # 323477 Bacala 3/14 SHORT STAY job # 322701 GodIstein, Steven 3/13 DISCHARGE SUMMARY job # 323906 Howerton, D. 3/15	This is a list showing all of your Deficiencies. To sort these, you can Click on the headers that you want it to sort by Doc type, message, delinquent Date, Account or Type (scroll to the right to see all columns.)
AutoNext Mode Last Deficiency Edit Show Last Deficiency Edit Show Last Deficiency Deficiency Edit Show Last Deficiency	Lights-headedne Tights-headedne T
Name: TEST, SDVERA Location: Clark Memorial Hospital Account Number: 14109938 Last Updated: 05 General Account Site Def	Be sure to have a check mark in the "AutoNext Mode." (click on box to check)
Admit Date: 11/26/2001 Discharge Date: Patient Type: 0	Always war dialetts Patient educations Diabetes – A Po The patient acknow
Display 1 Display 2 Expand All << < >>> < >>> < >>> Exit Date: 11/26/2001 Account Number: 14109938 Doc Type: CONSENTS Doc Type: CONSULTATION Doc Type: FACE SHEET Doc Type: FACE SHEET	This is where you will find the Name and account number. Click on the account tab to see the admit and discharge date. The general tab will give you the MR# Birth date and attending physician.
Search Or Pare NextPare GotoPare Add Edit N	This is where you will see the list of documents for the selected account. On the right is where you can view the document
Search	Magnifier Z the document

Placing a "Sticky Note" on the Chart

- Please note: If you reject a missing document; for example, an H&P because you want to use the H&P you entered in a Progress Note, you need to put a "sticky note" stating this in the Progress Notes where you wrote the H&P. This will be permanently placed and viewable in the chart. Any notes you type in the box you receive when you reject the deficiency are only seen by the analyst and is not permanently placed in the chart.
- 1. Select the page from the medical records you want to place the sticky note on. (it is selected when you can see it in the right-hand pane.
- 2. Then click on "add sticky"



3.

3. You will then see this window open.

Type your note in this box. (remember, this will be viewable on the chart). Then click "ok".





Sign/Annotate Document

please use this as the H&P

5. You will now see your sticky note on the page to your right. If you left click and hold on that box, you can drag it to where you want to place it on the page.

Set Text Color

Set <u>B</u>ack Color

Sample Text