

Advanced Clinicals with CPOE

Physician/Mid-Level Provider Pocket Guide



- + COMPUTERIZED PROVIDER ORDER ENTRY
- + EVIDENCE-BASED ORDER SETS (EBOS)
- + PROVIDER DOCUMENTATION (PDOC)
- + CLINICAL REVIEW

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The Basics

Standard icons

This toolbar is located on the right side of the MEDITECH window.

-  = OK or F12 key
-  = Exit or F11 key
-  = Help on current screen or field where cursor is placed (access system help)
-  = Lookup or F9 key
-  = Session Management used to open Magic Key menu or suspend session
-  = Tools; opens calculator
-  = Special Function; opens system information or may select items
-  = Selects all items in a list
-  = Move to previous item in display or F6
-  = Opens next level of display
-  = Moves highlight bar up
-  = Moves highlight bar down
-  = Page Up; moves up to previous section
-  = Page Down; moves down to next section

-  = Help on current screen or field where cursor is placed (access system help)
-  = Send print jobs to default printer
-  = Opens MOX if set up at facility
-  = Opens list of provider references (i.e., Web MD, Clinical Pharmacology)
-  = Displays graph of selected patient data



= Locks session for privacy; requires your password to resume the session



= Refreshes data on the screen

Meaning behind colors

Button colors

Pt Summary	= Active button; available data to view
Special Panel	
Daily Review	= Selected button; current viewing location
Order History	= Inactive button; either no available data to view or not available at your facility (grayed out/low lit)
Vital Signs	
I + O	= New data available for review in current session

Abnormal and critical values

Carbon Dioxide	23	21-32
BUN	25 H	7-18
Creatinine	2.0 H	0.6-1.3
Est GFR (African Amer)	32	
Est GFR (Non-Af Amer)	27	
Glucose	70	70-110
Calcium	9.0	8.8-10.5

Yellow = Values out of range high or low (H or L)

Reports			
Type	Date	Time	Exam / Report
Img	Apr 01	UNK	Chest X-Ray
Micro	Mar 31	07:00	Gram Stain
Micro	Mar 31	07:00	Blood Culture STREPTOCOCCUS PNEUMONIAE

Pink = Results with critical values

Pencils

-	+	Consults	(2/5)	ADD
<input checked="" type="checkbox"/>	+	PHYSICIAN CONSULTATION	04/05	
<input checked="" type="checkbox"/>	+	PHARMACY CONSULTS	04/05	

Blue: used to add data


Red: indicates document required data or review of data is required

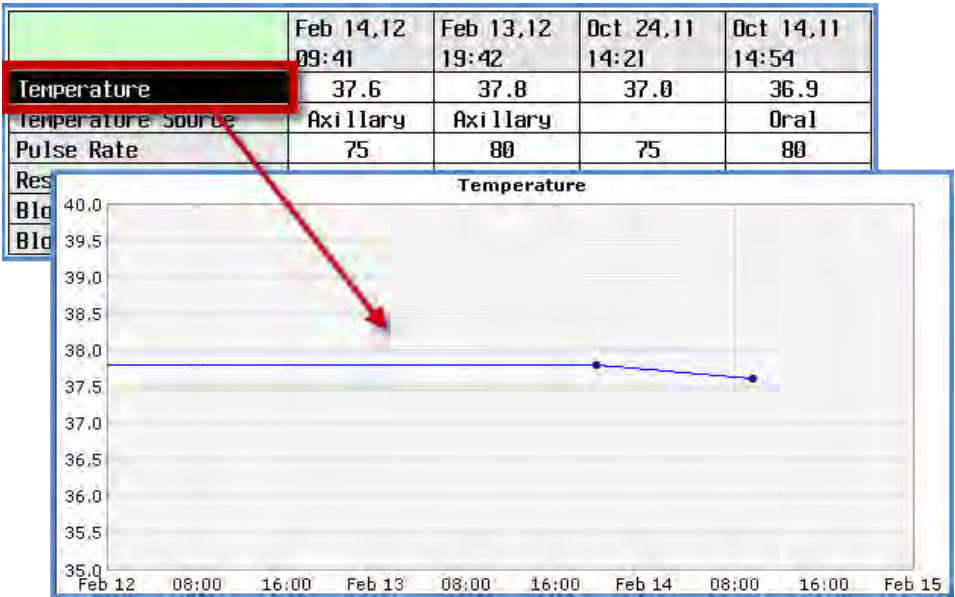
Filtering, sorting, and viewing additional data

- Filter data by clicking blue shaded buttons (usually across the top of a screen).
 - All** medications are visible below (the darker blue indicates current selection), by clicking **Active** or **Discontinued**, data is filtered accordingly (less data visible on the screen).
- Sort data by clicking on column headings.
 - Medications below are sorted by **Start Date**.
- View additional data by clicking gray shaded cells.
 - Clicking on a gray cell below results in displays additional ordering information.

Clinical Review								
BRINEGAR, CHRIS - 29/F		J. IN J.141/A		Uni				
172.72 cm 77.111 kg		ADM IN		Acc				
Allergies/ADRs: Bee, Penicillins, Acetaminophen, Celecoxib								
<div style="border: 2px solid red; padding: 5px; display: inline-block;"> <table border="1" style="display: inline-table;"> <tr> <td style="background-color: #e0e0e0;">Active</td> <td style="background-color: #e0e0e0;">Discontinued</td> <td style="background-color: #e0e0e0;">All</td> </tr> </table> </div>						Active	Discontinued	All
Active	Discontinued	All						
<div style="border: 2px solid red; padding: 5px; display: inline-block;"> <table border="1" style="display: inline-table;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;"></td> </tr> </table> </div>								
Medication	Dose	Sig/Sch	Start Date	Status	Last Admin/ Dose Admin			
Generic (Trade)		Route	Stop Date					
Sodium Chloride (Sodium Chlori)	1000 ml	.0200 IV	Mar 12,12 02:20 Apr 11,12 02:19	CAN				
Benzonatate (Tessalon Perl)	200 mg	QB PO	Mar 10,12 22:00 Apr 09,12 21:59					


Black shaded cells

A cell or cells become black when you “right-click” data elements. This is done in order to graph values and/or use the data in a progress note. To graph data, right-click the data elements, then click the graph  icon.



Comment bubble (Comment indicator)

This is an indicator that there is additional information available for review.

Est GFR (African Amer)	32	
Est GFR (Non-Af Amer)	27	
Glucose	70	
Calcium		

Estimated GFR (African American)	Apr 01, 12 07:00	Back
eGFR less than 60 (ml/min/1.73) square meters may indicate chronic kidney disease. This is an estimated GFR based on the Modification of Diet in Renal Disease (MDRD) equation (Ann Intern Med 1999;130:461-70.), results for which depend on race. This estimate should not be used for renal-dosing of medications or dosing adjustments of radiocontrast dye without patient-specific correction for height and weight. Limitations of the eGFR, guidelines on chronic kidney disease definitions, and clinical action plans can be found at www.kidney.org and NEJM 2006;354:2473-83.		

Covering for a provider

Providers you are covering for appear at the top of the **Rounding List**. When all covering for providers do not fit in the designated area, you see the ellipsis symbol (...).

Rounding List		Thu, Apr 5
Covering for: Drjfk01; Drjfk02; Drjfk03; Drjfk04; Drjfk05; Drjfk06; Drjfk10; Drjfk11; Drjfk12; Drjfk13; Drjfk15; Drjfk16; Drjfk17; Drjfk18; Drjfk19; Drjfk20; Drjfk21; Drjfk22; Drjfk23; Drjfk24; Drjfk25...		Census: 11
Preu Page Next Page Reset		
<input checked="" type="checkbox"/>	St. Xavier Medical Center: 1ST FLOOR NORTH - SURGICAL (6)	
<input type="checkbox"/>	J.131-B Aapreop, Training 79 M N000000051 Feb 2, 11 AAA PRE-OP CPOE, Doctor MD Order	
<input type="checkbox"/>	J.132-B Brinegar, Chris 29 F N000004522 Oct 6, 11 ABDOMINAL PAIN Sartain, Teresa MD Add	
<input type="checkbox"/>	J.138-A Sartain, Teresa 32 F N000000015 Jan 19, 11 TESTING Sartain, Teresa MD Order	

Rounding List
My Admitted
Cover Dischg
My Dischg
Cover Select
Find Patient
Remove

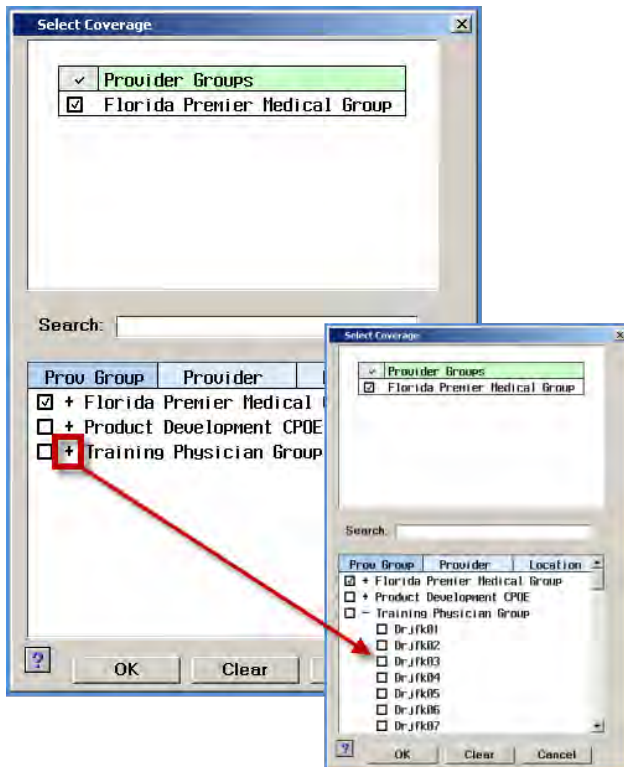
Selecting coverage for a provider

You can access the cover routine from: Physician Desktop, Workload, Inpatient Rounding, or Outpatient Rounding by clicking the **Cover Select** button.

- The options for selecting coverage will vary depending on your cover select entry point.

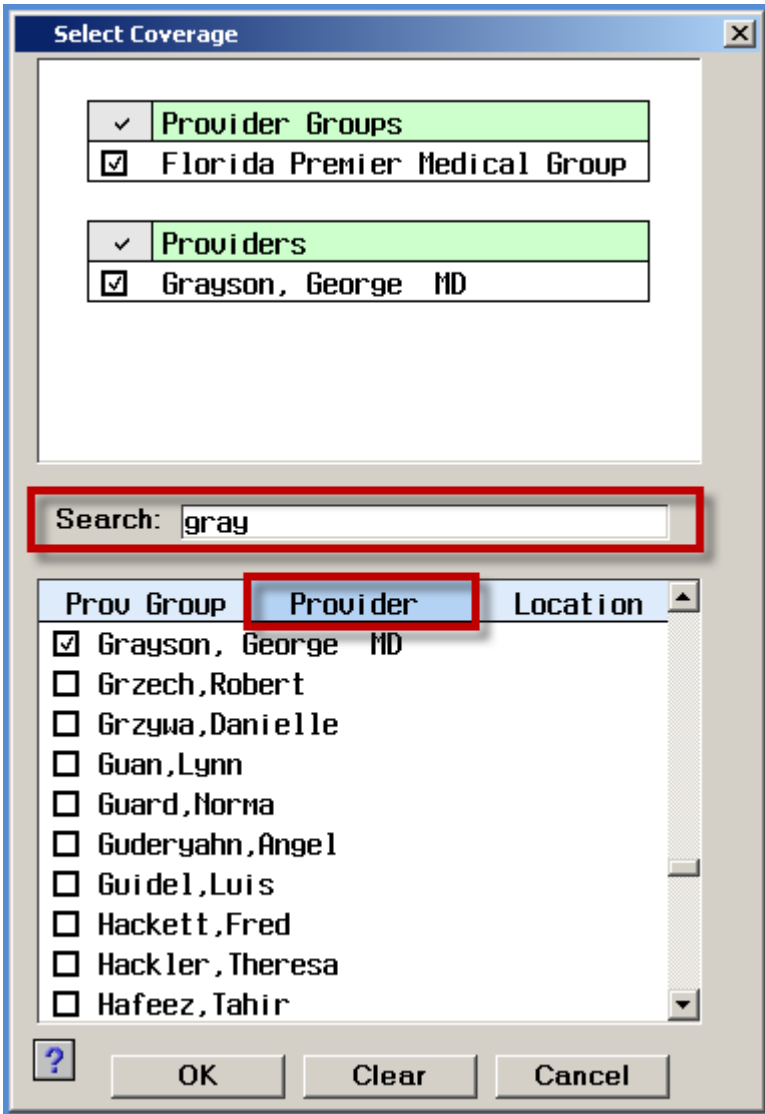
In this example, cover select is done via Inpatient Rounding.

1. From Inpatient Rounding List, click **Cover Select**.
2. In top portion of Select Coverage screen, click desired provider groups.
3. In bottom portion of Select Coverage screen, click check box for the entire provider group.
 - For specific providers under a provider group, click the plus sign (+), then pick specific providers.



4. To search for a specific provider, click the **Provider** heading, then use type-ahead functionality in the **Search** field.

5. Select provider.
6. Click **OK**.

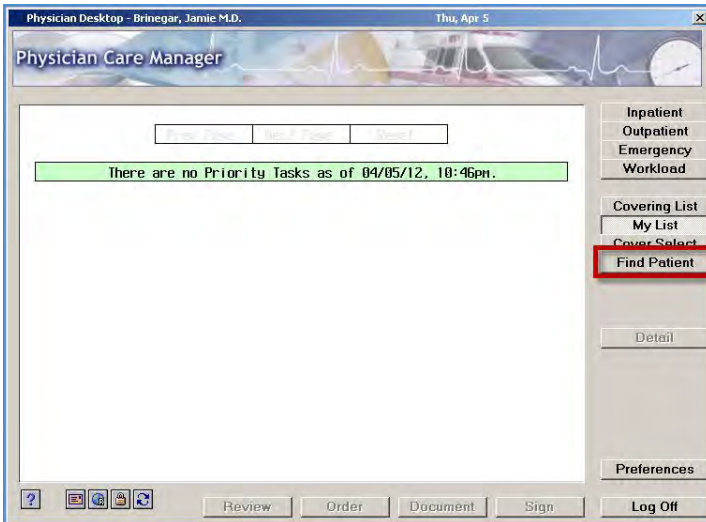


Finding a patient

Whether or not you have established an association with a patient record, if you need to find the patient's record, you can use the **Find Patient**

functionality. You can access a patient record from: Physician Desktop, Workload, Inpatient Rounding, or Outpatient Rounding by clicking the **Find Patient** button. The functionality of **Find Patient** is the same regardless of entry point.

1. Click **Find Patient** button.



2. Enter patient last name, no space, and then first name (LastName,FirstName). If you don't have a full name, enter as much information as possible. You can also use the other fields to narrow your search.
3. Click **Search**.
4. If active, click **Add To List**.
5. Click **OK**.
6. If presented with the *****Warning***** screen, you must select an access reason. Make a selection.
7. Click **OK**.

Rounding Lists

Primary rounding lists

Inpatient	= List of admitted patients
Outpatient	= List of outpatients
Emergency	= Directs you to the ED tracker; providers without EDM are directed to a list of ED patients.

Secondary rounding lists

Rounding List	= All of your admitted & covering inpatients
My Admitted	= All of your admitted inpatients
Cover Dischg	= Discharged patients within the last 48 hrs you are covering
My Dischg	= Only your discharged patients within the last 48 hrs
Cover Select	= Allows you to cover other providers
Find Patient	= Search for a patient to add to the rounding list
Remove	= Use to remove a patient(s) from a rounding list

Please note that when you add or remove patients to these patient lists, there is no transfer of action to PCI. Adding a patient to one of these lists, will not add that same patient to your PCI patient lists and vice versa.

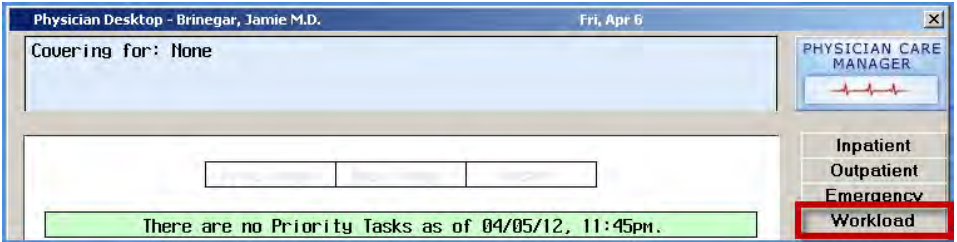
Workflow related buttons

The workflow related buttons become active when a patient is selected. The following four buttons are stationary across the bottom of the MEDITECH screen.

Review	Clinical Review - access to a patient's medical record (the patient's chart) When in Clinical Review, the button name changes to PCI providing you access to PCI
Order	Place orders - meds/fluids, non-med orders, and order sets
Document	Provider Documentation (PDoc) - enter progress notes

Sign

Button will be active if orders and/or reports are in queue for the providers signature for the selected patient.



The **Workload** button is accessible from the **Physician Desktop** screen. Orders and/or reports listed here are queued for the provider's electronic signature. Unlike the Sign button, orders and reports listed here are not patient specific. For this reason, it is a recommended best practice to incorporate accessing **Workload** as part of your daily workflow.

Physician Desktop

Accessing Physician Desktop

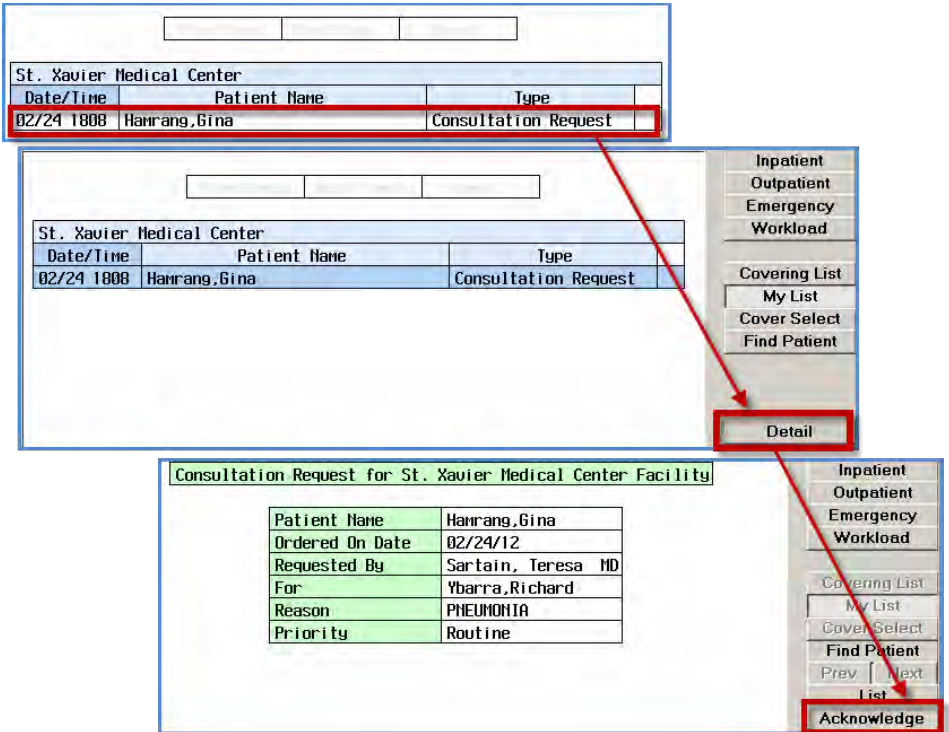
Log on to MEDITECH with your assigned user name and password, then click the Physician Desktop icon.



Notifications

To acknowledge notifications (available to facilities utilizing this feature):

1. Click on a notification.
2. Click **Detail** button.
3. Click **Acknowledge** button.



St. Xavier Medical Center

Date/Time	Patient Name	Type
02/24 1808	Hamrang,Gina	Consultation Request

St. Xavier Medical Center

Date/Time	Patient Name	Type
02/24 1808	Hamrang,Gina	Consultation Request

Inpatient
Outpatient
Emergency
Workload

Covering List
My List
Cover Select
Find Patient

Detail

Consultation Request for St. Xavier Medical Center Facility

Patient Name	Hamrang,Gina
Ordered On Date	02/24/12
Requested By	Sartain, Teresa MD
For	Ybarra,Richard
Reason	PNEUMONIA
Priority	Routine

Inpatient
Outpatient
Emergency
Workload

Covering List
My List
Cover Select
Find Patient
Prev | Next
List

Acknowledge

Recommended best practice – daily routine (Workload)

Click the **Workload** button at the beginning of each shift as part of workflow to address orders and reports requiring provider signature.

From Physician Desktop:

1. Click **Workload** button.
2. Click **Sign** button (active only if items are awaiting signature).
3. Click an order or report.
4. Click **View Detail**.
5. Click **Queue**.
6. Click **Submit**.

Acknowledging a notification removes the notification from your list as well as the list of any providers in your group.

Unsigned Items List - Brinegar, Jamie M.D. 0 Marked (of 0)

Physician Care Manager

All Orders Reports Reports

Date/Time	Patient Name	Category
04/06 B	Brinegar, Chris	Low Fat (DIET) Active

You must follow steps 1 - 5 before Submit button is active.

Tasks

Find Patient

View Detail

Submit

Unsigned Items List - Brinegar, Jamie M.D. 1 Marked (of 1) Fri, Apr 6

Physician Care Manager

All Orders Reports Reports

Date/Time	Patient Name	Category
04/06 B	Brinegar, Chris	Low Fat (DIET) Active

Tasks

Find Patient

View Detail

Submit

Things you can tell about your inpatients from your rounding list

The screenshot shows a 'Rounding List' window with the following information:

- Covering for:** Drjfk01: Drjfk02: Drjfk03: Drjfk04: Drjfk05: Drjfk06: Drjfk10: Drjfk11: Drjfk12: Drjfk13: Drjfk15: Drjfk16: Drjfk17: Drjfk18: Drjfk19: Drjfk20: Drjfk21: Drjfk22: Drjfk23: Drjfk24: Drjfk25...
- Census:** 12
- Buttons:** Patient room#, Location, Reset
- Callouts:**
 - Pt full name, age, gender
 - Pt Census Admitted & Covering
 - Admitting chief complaint
 - Association to patient
 - Attending Provider
 - Signature Required
- Table:**

Room	Admission	Diagnosis	Age	Gender	Signature	Order
St. Xavier Medical Center: 1ST FLOOR NORTH - SURGICAL (6)						
<input type="checkbox"/> J.131-B	Feb 2,11	Aaapreop	79 M	F	AAA	N000000051
<input type="checkbox"/> J.138-A	Jan 19,11	Sartain, Teresa	32 F	F	TESTING	N000004522
<input type="checkbox"/> J.140-A	Apr 22,11	patient08	80 M	M		N000001481
<input type="checkbox"/> J.141-A	Feb 9,12	Brinegar, Chris	29 F	F	Bicycle accident; cuts	N00004522
<input type="checkbox"/> J.145-A		Hedrec, Willow	26 F	F		N000004488
- Right Panel:** Rounding List, My Admitted, Cover Dischg, My Dischg, Cover Select, Find Patient, Summary

Removing patients from a list

To remove one or a few patients:

The screenshot shows the 'Rounding List' window with the following information:

- Covering for:** Drjfk01: Drjfk02: Drjfk03: Drjfk04: Drjfk05: Drjfk06: Drjfk10: Drjfk11: Drjfk12: Drjfk13: Drjfk15: Drjfk16: Drjfk17: Drjfk18: Drjfk19: Drjfk20: Drjfk21: Drjfk22: Drjfk23: Drjfk24: Drjfk25...
- Census:** 12
- Buttons:** Previ Page, Next Page, Reset
- Callouts:**
 - 1. Click checkbox next to patient.
 - 2. Click Remove
- Table:**

Room	Admission	Diagnosis	Age	Gender	Signature	Order
St. Xavier Medical Center: 1ST FLOOR NORTH - SURGICAL (6)						
<input type="checkbox"/> J.131-B	Feb 2,11	Aaapreop, Training	79 M	M	AAA PRE-OP	N000000051
<input type="checkbox"/> J.132-B	Oct 6,11	Brinegar, Chris	29 F	F	ABDOMINAL PAIN	N000004522
<input checked="" type="checkbox"/> J.138-A	Jan 19,11	Sartain, Teresa	32 F	F	TESTING	N000000015
<input type="checkbox"/> J.140-A	Apr 22,11	patient08	80 M	M		N000001481
<input type="checkbox"/> J.141-A	Feb 9,12	Brinegar, Chris	29 F	F	Bicycle accident; cuts	N00004522
<input type="checkbox"/> J.145-A		Hedrec, Willow	26 F	F		N000004488
- Right Panel:** Rounding List, My Admitted, Cover Dischg, My Dischg, Cover Select, Find Patient, Remove

To remove an entire section of patients:

Rounding List Fri, Apr 6

Covering for: Drjfk01: Drjfk02: Drjfk03: Drjfk04: Drjfk05: Drjfk06:
Drjfk10: Drjfk11: Drjfk12: Drjfk13: Drjfk15: Drjfk16: Drjfk17: Drjfk18:
Drjfk19: Drjfk20: Drjfk21: Drjfk22: Drjfk23: Drjfk24: Drjfk25...

Census: 12

Next Page Reset

1. Click checkmark next to section heading. This automatically selects all patients under section.

2. Click Remove.

<input checked="" type="checkbox"/>	J.130-A	Facility10, Patient07 80 M	Apr 22, 11	TRAINING	DRJFK11
-------------------------------------	---------	----------------------------	------------	----------	---------

Rounding List
My Admitted
Cover Dischg
My Dischg
Cover Select
Find Patient
Remove



Be careful not to use **Reset**, unless you want to reset your rounding list to view only your admitted patients. Patients you are covering or that you manually added using the Find Patient functionality will be removed from your rounding list. If you accidentally click **Reset**, it cannot be undone.

Printing your rounding list

Rounding List Fri, Apr 6

Covering for: Drjfk01: Drjfk02: Drjfk03: Drjfk04: Drjfk05: Drjfk06:
Drjfk10: Drjfk11: Drjfk12: Drjfk13: Drjfk15: Drjfk16: Drjfk17: Drjfk18:
Drjfk19: Drjfk20: Drjfk21: Drjfk22: Drjfk23: Drjfk24: Drjfk25...

Census: 12

Print Page Next Page Reset

<input checked="" type="checkbox"/>	St. Xavier Medical Center: 1ST FLOOR NORTH - SURGICAL (6)				
<input type="checkbox"/>	J.131-B	Aaapreop, Training 79 M	Feb 2, 11	AAA PRE-OP	N000000051
<input type="checkbox"/>	J.132-B	Brinegar, Chris 29 F	Oct 6, 11	ABDOMINAL PAIN	N000004522
<input type="checkbox"/>	J.138-A	Sartain, Teresa 32 F	Jan 19, 11	TESTING	N000000015
<input type="checkbox"/>	J.140-A	Facility10, Patient08 80 M	Apr 22, 11	TRAINING	N000001481
<input type="checkbox"/>	J.141-A	Brinegar, Chris 29 F	Feb 9, 12	Bicycle accident: cuts and bruises	N000004522
<input type="checkbox"/>	J.145-A	Medrec, Hillow 26 F			N000004488

Rounding List
My Admitted
Cover Dischg
My Dischg
Cover Select
Find Patient
Remove

Review Order Document Sign Desktop

RUN DATE: 04/06/12	St. Xavier MC EMA PWM **TEST**	PAGE: 1																																																									
RUN TIME: 1003	Rounding List																																																										
RUN USER: 100GEE9016																																																											
<div style="border: 1px solid black; padding: 5px; display: inline-block; background-color: #e0e0e0;"> SAMPLE ROUNDING LIST PRINTOUT </div>																																																											
Brinegar, Jamie M.D. Rounding Patients																																																											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3">St. Xavier Medical Center: 1ST FLOOR NORTH - SURGICAL (6)</td> </tr> <tr> <td>J.131-B</td> <td>Asepracp.Training 79 M</td> <td>N000000051</td> </tr> <tr> <td>Feb 3,11</td> <td>AAA PRE-OP</td> <td></td> </tr> <tr> <td>CFOE, Doctor MD</td> <td></td> <td>Order</td> </tr> <tr> <td>J.132-B</td> <td>Brinegar,Chris 29 F</td> <td>N000004522</td> </tr> <tr> <td>Oct 6,11</td> <td>ABDOMINAL PAIN</td> <td></td> </tr> <tr> <td>Sartain, Teresa MD</td> <td>Sign</td> <td>Order</td> </tr> <tr> <td>J.138-A</td> <td>Sartain,Teresa 32 F</td> <td>N000000019</td> </tr> <tr> <td>Jan 19,11</td> <td>TESTING</td> <td></td> </tr> <tr> <td>Sartain, Teresa MD</td> <td></td> <td>Order</td> </tr> <tr> <td>J.140-A</td> <td>Facility10.Patient08 80 M</td> <td>N000001481</td> </tr> <tr> <td>Apr 22,11</td> <td>TRAINING</td> <td></td> </tr> <tr> <td>Training Provider004</td> <td></td> <td>Direct Care</td> </tr> <tr> <td>J.141-A</td> <td>Brinegar,Chris 29 F</td> <td>N000004522</td> </tr> <tr> <td>Feb 9,12</td> <td>Bicycle accident, cuts and bruises</td> <td></td> </tr> <tr> <td>SALTSMAN DOCTOR</td> <td>Sign</td> <td></td> </tr> <tr> <td>J.145-A</td> <td>Medrec,Willow 26 F</td> <td>N000004488</td> </tr> <tr> <td>Sep 22,11</td> <td></td> <td></td> </tr> <tr> <td>Sartain, Teresa MD</td> <td></td> <td>Add</td> </tr> </table>			St. Xavier Medical Center: 1ST FLOOR NORTH - SURGICAL (6)			J.131-B	Asepracp.Training 79 M	N000000051	Feb 3,11	AAA PRE-OP		CFOE, Doctor MD		Order	J.132-B	Brinegar,Chris 29 F	N000004522	Oct 6,11	ABDOMINAL PAIN		Sartain, Teresa MD	Sign	Order	J.138-A	Sartain,Teresa 32 F	N000000019	Jan 19,11	TESTING		Sartain, Teresa MD		Order	J.140-A	Facility10.Patient08 80 M	N000001481	Apr 22,11	TRAINING		Training Provider004		Direct Care	J.141-A	Brinegar,Chris 29 F	N000004522	Feb 9,12	Bicycle accident, cuts and bruises		SALTSMAN DOCTOR	Sign		J.145-A	Medrec,Willow 26 F	N000004488	Sep 22,11			Sartain, Teresa MD		Add
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The Patient Chart (Clinical Review)

Patient data at a glance

When you go to **Clinical Review**, the first screen you see is the **Daily Review**. This is a comprehensive snapshot of the patient's most current information available within the past five days. If no data is available within the past five days Daily Review button is inactive. You will default to another portion of the patient's chart.

1. Select a patient from **Rounding List**.
2. Click **Review** button.

The information, if available, for the past 5 days includes:

- vital signs
- lab results
- reports

Patient Summary

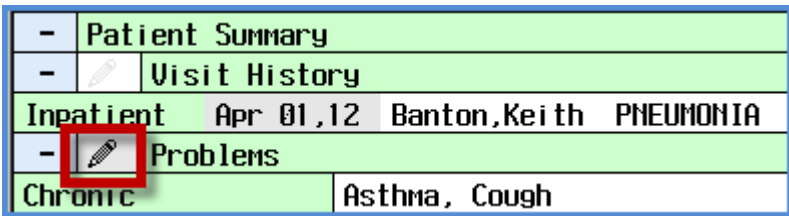
Patient Summary screen helps maintain a continuity of care amongst providers by displaying data that is cumulative rather than for a single visit. Data may include:



- visit history
- acute & active and chronic problems
- allergies
- current inpatient meds and ambulatory meds
- health maintenance and immunizations
- growth charts
- surgical and non-surgical procedures
- substance use
- external medical summary documents

Viewing and updating a problem list

The **Problems list** is a cumulative list of problems presented by the patient across all visits, and not problems that a specific provider is addressing. To add a problem reported by the patient:

1. From **Patient Summary**, click pencil next to Problems.



-	Patient Summary		
-		Visit History	
Inpatient	Apr 01, 12	Banton, Keith	PNEUMONIA
-		Problems	
Chronic	Asthma, Cough		

2. Click **Add Problem**.
3. Use type-ahead functionality to search for a problem.
4. Select a problem from the presented list.
5. Click **OK**.
6. By default, problem appears on both, the **Acute & Active** and **Chronic** lists. If problem is not currently active or is not chronic, remove it by

clicking on the problem under the list you want to remove it from.

- Acute and Active Problems	Priority	Last Edited By	Status
Asthma		Ybarra,Richard	Active
Cough		Jacob,Sonia	Active
Pruritic rash		Ybarra,Richard	Active
- Chronic Problems	Priority	Last Edited By	Onset
Asthma		Ybarra,Richard	
Cough		Jacob,Sonia	
Pruritic rash		Ybarra,Richard	
Resolved Problems	Entered	Last Edited By	Onset
Medical Records History	Type	Code	Last Date
			Visits

7. Click **check mark** next to the problem list you want to remove the problem from.

Pruritic rash ✕

Entered by: Ybarra,Richard on 02/24/12
 Edited by: Ybarra,Richard on 02/24/12

	Priority	Status
<input checked="" type="checkbox"/> Display on Acute & Active Problems		Active
<input checked="" type="checkbox"/> Display on Chronic Problems List		
<input type="checkbox"/> Move to Resolved Problems List		

Onset Date	
Responsible Provider	Ybarra,Richard

8. Click **OK**.

Viewing and updating allergies

1. From **Patient Summary**, click pencil next to **Allergies**.

Clinical Review

Hamrang,Gina - 63/F J.1W J.115/A
 187.96 cm 99.79 kg ADM IN
Allergies/ADRs: Penicillins

Patient Summary
ADM/Demographics
Bulletin Board

- Patient Summary	
- Visit History	
Inpatient Feb 20,12 Adkins,Thomas PNEUMONIA	
- Problems	
Acute & Active	Asthma, Cough, Pruritic rash
Chronic	Asthma, Cough
- Allergies	
Penicillins	

2. From **Allergy Management** screen, click **New**.
3. Use type-ahead functionality to search for the allergy.

4. Select from presented list (coded allergy).
5. If allergy is not present, type in what patient reports (this will be an uncoded allergy).
6. Select **Type**, **Severity**, **Verified**, and **Reaction**.

Allergy/Adverse Drug Reaction Lookup - All

Allergy/Adverse Drug Reaction:

Allergy/Adverse Drug Reaction	Other Name	Category
Sular		Multiple
Sulbactam		Drug
Sulconazole		Drug
Sulfa (Sulfonamide Antibiotics)		Drug
Sulfabenzamide		Drug
Sulfacet-R		Multiple
Sulfacetamide		Drug
Sulfadiazine		Drug
Sulfadoxine		Drug
Sucralose		Drug
Sucrets		Multiple
Sucrets Childrens		Multiple

More

Type: Allergy Adverse Reaction

Severity: Mild Severe Intermediate Unknown

Verified: Yes No

Reaction:

7. Click **OK**.

Coded Allergies: interaction checking is performed; **no** brackets around the allergy.

Uncoded Allergies: interaction checking is **not** performed; enclosed by brackets [Allergy Name].

Clinical Review

Hamrang, Gina - 63/F J.1H J.115/A Unit No: N000004182
 187.96 cm 99.79 kg ADM IN Acct No: N00000107586

Allergies/ADRs: [Linen], Penicillins, Sulfa (Sulfonamide Antibiotics)

Uncoded allergy

Coded allergy

View medication details

Clinical Review		
Hamrang, Gina - 63/F 187.96 cm 99.79 kg Allergies/ADRs: Penicillins, Sulfa (Sulfonamide Antibiotics)	J.1W J.115/A ADM IN	Unit Acct
<div style="border: 1px solid red; border-radius: 50%; padding: 10px; display: inline-block; color: red; font-weight: bold;">Active inpatient meds</div>		
<div style="border: 1px solid gray; padding: 2px; display: inline-block; margin-right: 10px;">Patient Summary</div> <div style="border: 1px solid gray; padding: 2px; display: inline-block; margin-right: 10px;">ADM/Demographics</div> <div style="border: 1px solid gray; padding: 2px; display: inline-block;">Bulletin Board</div>		
- Patient Summary		
- Medications		
Active	Ceftriaxone Sodium (Rocephin) Dextrose (Dextrose 10% Water Iv Soln.) Dextrose/Sodium Chloride (Dextrose 5%-1/2) Famotidine (Peppid) Levofloxacin/Dextrose (Levaquin 750mg/150ml USP)	
<div style="border: 1px solid red; border-radius: 50%; padding: 10px; display: inline-block; color: red; font-weight: bold;">Home meds Click gray cell to view more med info</div>		
- Ambulatory Medications		
<input checked="" type="radio"/>	Albuterol (Proventil 90MCG/Act) 17 GM AER 2 PUFF INH Q6H/PRN #90	
<input checked="" type="radio"/>	Albuterol Sulfate (Albuterol Sulfate) 1.25 MG/3 ML VIAL.NEB 1.25 MG NEB ONCE #90	

Demographics

Clinical Review	
BRINEGAR, CHRIS - 29/F 172.72 cm 77.111 kg Allergies/ADRs: Bee, Penicillins, Acetaminophen, Cele	J.1N J.132/B ADM IN
<div style="border: 1px solid gray; padding: 2px; display: inline-block; margin-right: 10px;">Patient Summary</div> <div style="border: 1px solid gray; padding: 2px; display: inline-block; margin-right: 10px;">ADM/Demographics</div> <div style="border: 1px solid gray; padding: 2px; display: inline-block;">Bulletin Board</div>	
+ Visit: ADM IN Oct 6, 11	
+ Demographics	
- Providers	
Primary Care Physician	Sartain, Teresa MD
Attending Physician	Sartain, Teresa MD
Admitting Physician	Sartain, Teresa MD
Family Physician	SALTSMAN, DOCTOR
Other Physician	Brinegar, Jamie M.D.
Referring Physician	Sartain, Teresa MD
Contacts	
+ Insurance	
Directives	
Risk/Legal	

Only reported data will display. Click the plus (+) sign to view additional information.

Working with panels

Special Panels are a standard set of panels that are oriented towards systematic evaluation and condition monitoring. They consist of combined data items from different sources to provide a view of integrated clinical data in a flow sheet format. These are “hard-coded”, meaning that they are not customizable. Access these panels by clicking **Special Panel** button under **Clinical Review**.

Hamrang, Gina - 63/F		J.1H J.115/A					
187.96 cm 99.79 kg		ADH IN					
Allergies/ADRs: [Linen], Penicillins, Sulfa (Sulfonamide Antibiotics)							
Respiratory		04:00 Mar 31,12 - 11:59 Apr 01,12 - 4 Hr Period					
1h	2h	4h	8h	24h	Apr 01,12	Apr 01,12	Mar 31,12
-				Home	0800-1159	0400-0759	0400-0759
- Respiratory Data							
Respiratory Rate					37		
- Supplemental Oxygen							
Pulse Oximetry					88		
- Cardiovascular Data							
Pulse Rate					111		
Blood Pressure					91/68		
- Temp/Weight/General Data							
Patient Temperature					39.1		
Height (kg)					99.790		
- Chemistry							
Sodium						140	
Potassium						4.0	
Calcium						9.0	
Chloride						104	
Carbon Dioxide						23	
Creatinine						2.0 H	
Glucose						70	
BUN						25 H	
- Hematology							
WBC						20.0 H	
Segmented Neutrophils						55.0	
Neutrophils #						Pending	
Lymphocytes						28.0	
Lymphocytes #						Pending	
Monocytes						12.0 H	

Partial sample of the Respiratory special panel.

You can build your own panel to display combined data items from:

- Intake and output
- Medications administered
- Medications
- Vital signs
- Lab
- And other reports

Building a panel

1. From Clinical Review *navigate* to **Other Menu**.

Clinical Review

RIETH, EMILY - 55/F J. LE EPOMI/21 Unit No: N000002179
165.1 cm 62.596 kg ADM IN Acct No: N0000093396
Allergies/ADRs: [Cats], Poinsettia, Penicillin V Potassium (From Pen-Vee K), ... (More)

	Mar 31, 11 08:00	Mar 31, 11 09:45
Temperature	102.8	102.5
Pulse Rate	99	99
Respiratory Rate	24	22
Blood Pressure	138/72	135/70
Bedside Pulse Oximetry	95	96

Pt Summary
Special Panel
Daily Review
Order History
Vital Signs
I + O
LAB
Microbiology
Blood Bank
Pathology
Medications
Imaging
Other Reports
Notes History
Assessments
Other Menu
More Less
Other Visits
Patient List

PCI Order Document Sign

2. Choose a build option, either **This Record** or **All Records**.
For the purpose of this document, All Records is selected.

Other Menu

- View Data Saver
- Reconcile Medications
- Build My Panel (This Record)
- Build My Panel (All Records)**
- Exit

3. After selecting the build option, a window displays prompting you to select any or all of the three options including **Intake and Output**, **Medications Administered**, and **Medications**. For the purpose of this document, all three options were selected.

Select Sections to Include

- Intake and Output
- Medications Administered
- Medications

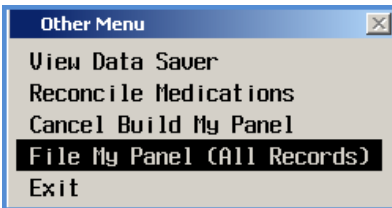
OK Cancel

4. Click **OK**.

5. You are now in build mode. Only panels with information to display will be high lit and clickable.
6. *Select* a high lit panel. For the purpose of this document, **Vital Signs** is selected.
7. To add data, *right-click* on the specific data item (gray cells). The cell of selected data item will appear black. If an item was selected in error, right-click the item to deselect it.

	Mar 31, 11 08:00	Mar 31, 11 09:45
Temperature	102.8	102.5
Pulse Rate	99	99
Respiratory Rate	24	22
Blood Pressure	138/72	135/70
Bedside Pulse Oximetry	95	96

8. *Repeat* steps 6 and 7 until all required data items have been selected.
9. *Click Other Menu*, and *select File My Panel*.



10. You must exit and re enter **Clinical Review** for access to the new panel.

Viewing and navigating around your built panel

1. From Clinical Review, select a patient, and then *navigate* to **Special Panel**.

2. Click on the heading **My Panel**.

Clinical Review

SMITH, JOHN - 55/M J.1E J.103/B Unit No: N000002130
 160.02 cm 61.235 kg ADM IN Acct No: N00000065068
 Allergies/ADRs: Cat Dander, Xanthines, Penicillins, ... (More)

Cardiac	Critical Care	Endocrine	Hematology
Infectious Disease	Other	Renal/Hepatic	Respiratory
	My Panel	Emergency	All LAB Results

Acute Coronary Syndrome
Heart Failure

Pt Summary
Special Panel
Daily Review
Order History
Vital Signs
I + O
LAB
Microbiology
Blood Bank
Pathology
Medications
Imaging
Other Reports
Notes History
Assessments
Other Menu

3. Click on the sub-heading **My Panel**.

Cardiac	Critical Care	Endocrine	Hematology
Infectious Disease	Other	Renal/Hepatic	Respiratory
	My Panel	Emergency	All LAB Results

My Panel

- Only documented results will populate to the flowsheet.
- To view the history of results for an item, *click* an item in the left column (gray cell).
- To view all results for an item within a column, *click* the (+) in the column.
- To view a report, *click* the **comment bubble** in the column.
- To change the timeframe of columns, *select one of the 5 timeframes* (1h to 24h).
- To move back or forward in time by column, *click* < or > .
- To move back or forward in time by page, *click* << or >> .
- To move back or forward in time by day, *click* **Prev Day** or **Next Day**.
- To return display to most recent data, *click* **Home**.

Viewing resulting data

You can view labs, microbiology, pathology, imaging, and blood bank resulting information for a patient by clicking the corresponding button from Clinical Review. What you actually see depends on a couple of factors:

- Has a specific procedure been ordered?
- Have the results been posted?
- Are you viewing selected visit data or lifetime summary data?

Selected visit data

By default you will view most current visit data. In this example, you will view a chemistry report.

1. Click **LAB**.
2. By default, the **Selected Visit** option is preselected.
3. Depending on what has been resulted for the patient, test categories display. In this example, Hematology, Coagulation, and Chemistry are available for selection. You will choose based on what you need.
4. Click the gray cell containing the test name.


The screenshot shows a clinical review window for a patient named Carswell, Ira. The patient's information includes height (180.34 cm), weight (84.056 kg), and allergies (Penicillins). The interface has two tabs: "Selected Visit" (highlighted with a red box and number 2) and "Lifetime Summary". Below the tabs are three test category buttons: "Hematology", "Coagulation", and "Chemistry" (highlighted with a red box and number 3). On the right side, there is a vertical menu with options like "Pt Summary", "Special Panel", "Daily Review", "Order History", "Vital Signs", "I+O", "LAB" (highlighted with a red box and number 1), "Microbiology", "Blood Bank", and "Pathology". Below the categories, a "Potassium" test result is displayed (highlighted with a red box and number 4) with a date of Mar 27, 12, time of 11:09, and a result of 2.9 *L.

5. Click the dated gray cell (remember that gray cells are clickable and provide additional data).

The screenshot shows a detailed view of a "Potassium Level" test result. At the top, there is a "Back" button. Below it are "Previous Page" and "Next Page" buttons. The main data is presented in a table with the following columns: Date, Time, Result, Comment, Units, Reference, and Img.

Date	Time	Result	Comment	Units	Reference	Img
Mar 27,12	11:09	2.9 *L	⊕	mmol/L	3.5-5.2	

6. Click **Specimen Inquiry**.

Collection: Mar 27, 12 at 11:09	Back
Specimen Inquiry	
Potassium	2.9 mmol/L (3.5-5.2) *L 

If you want to view data from more than one visit, from **Clinical Review** click **Other Visits** button on the right panel.

1. Click on the gray cell to place a check mark for desired visit(s).
2. Click **Selected**.

Select Visit				
Time Frame	Visits		View	
1 Year	Inpatient	All	Selected	
2 Years			All	

Visit Date	Type	Location	Doctor	
Apr 01, 12	IN	J.1W	Banton, Keith	✓
Mar 26, 12	IN	J.1W	Macey, John	✓
Mar 19, 12	IN	J.1W	Abbey, Paul	
Mar 11, 12	IN	J.1W	Banton, Keith	
Mar 04, 12	IN	J.1W	Mago, Philip	
Feb 25, 12	IN	J.1W	Mago, Philip	✓
Feb 20, 12	IN	J.1W	Adkins, Thomas	✓
Feb 13, 12	IN	J.1W	Carter, Kenneth	✓
Feb 28, 11	IN	J.FAC9	Kalidindi, Vishnu	✓

If you want to view data across all visits, then click **All**.

Select Visit				
Time Frame		Visits		View
1 Year		By Diagnosis	All	
2 Years		Inpatient	Emergency	
		Outpatient	Office	
				Selected
				All
		Previous Page		Next Page
Visit Date	Type	Location	Doctor	✓
Apr 01, 12	IN	J.1W	Banton, Kei th	✓
Mar 26, 12	IN	J.1W	Macey, John	
Mar 19, 12	IN	J.1W	Abbey, Paul	
Mar 11, 12	IN	J.1W	Banton, Kei th	
Mar 04, 12	IN	J.1W	Mago, Phi lip	
Feb 25, 12	IN	J.1W	Mago, Phi lip	
Feb 20, 12	IN	J.1W	Adkins, Thomas	
Feb 13, 12	IN	J.1W	Carter, Kenneth	
Feb 28, 11	IN	J.FAC9	Kalidindi, Vi shnu	

Lifetime summary data

In order to find whether or not a specific test has ever been ordered and resulted for a patient, use the lifetime summary functionality. Or maybe you want to see the results of a specific exam over a period of time. The lifetime summary is utilized in this scenario as well.

1. Click **LAB**.
2. Click **Lifetime Summary**.
3. Depending on what has been resulted for the patient, test categories display.

- Click the gray cell containing the test name.

Clinical Review

Carswell, Ira - 51/M J.CONF J.800/26 Unit No: N000002237
 180.34 cm 84.056 kg ADM IN Acct No: N00000107473
 Allergies/ADRs: Penicillins

Selected Visi **2** Lifetime Summary

Hematology Coagulation Chemistry
 Microbiology Blood Bank Pathology Medications Imaging

Test	Result	
Sodium	135 L	Mar 25, 2012
Potassium	2.9 *L ☹	Mar 27, 2012
Chloride	99	Mar 25, 2012
Carbon Dioxide	25	Mar 25, 2012

Potassium Level Back

*** Lifetime Results ***

Date	Time	Result	Comment	Units	Reference
Mar 27,12	11:09	2.9 *L	☹	mmol/L	3.5-5.2
Mar 25,12	07:27	3.2 L		mmol/L	3.5-5.2
Mar 16,12	11:23	5.6 H		mmol/L	3.5-5.2

- Click a dated gray cell (remember that gray cells are clickable and provide additional data) to view the report.
- Click **Specimen Inquiry**.

Document reported values in a progress note

One of the benefits available only within Clinical Review (not PCI), is the functionality to easily input reported and resulted values into a progress note.

1. Right-click the result values.
2. Click **Document** button.

Date	Time	Result	Comment	Units	Reference
Mar 27,12	11:09	2.9 *L		mmol/L	3.5-5.2
Mar 25,12	07:27	3.2 L		mmol/L	3.5-5.2
Mar 16,12	11:23	5.6 H		mmol/L	3.5-5.2

Buttons: PCI, Order, **Document**, Sign

3. Click **Enter New**.
4. Search for and select a progress note.
5. Place insertion point within the Meditor (MEDITECH Editor) field.
6. Click **My Data**.

Subjective	Objective	T&P	Dx&P
Diagnosis, Assessment & Plan			
Problem List	Nausea...		
*Dx/Assessment/Pl...	SHE IS DIZZY		
Orders:			
Consultants:	cardiovascular		
Code status:			

Buttons: Insert, **My Data**, Data Formats, Text, Next Stop (F2), OK/Next, OK, Cancel

SHE IS DIZZY
k **This is the MEDITOR area**

7. Select items to include on progress note.

Using Medications button

Medication		Dose	Sig/Sch	Start Date	Status	Last Admin/ Dose Admin
Generic	(Trade)		Route	Stop Date		
Levofloxacin...	(Levaquin 250m)	50 ml	DAILY IV	Mar 30,12 09:20 Apr 14,12 09:19	UNUr	
Aspirin	(Aspirin Ec)	81 mg	QAM PO	Mar 09,12 09:00 Apr 08,12 08:59	DC	
Famotidine	(Pepcid)	20 mg	BEDTIME PO	Mar 08,12 21:00 Apr 07,12 20:59	DC	
Zolpidem Tar...	(Ambien)	5 mg	BEDTI... PO	Mar 08,12 10:40 Mar 23,12 10:39	DC	
Sodium Chloride	(Sodium Chlori)	1000 ml	.Q13H20M IV	Feb 28,12 11:20 Mar 29,12 11:19	DC	Feb 28,12 11:07 1000 mls
Enoxaparin S...	(Lovenox)	See Detail	Q12 SQ	Feb 16,12 21:00 Mar 17,12 20:59	CAN	
Ceftriaxone ...		2 gm	Q12	Feb 16,12 21:00	CAN	

- Filter meds by clicking **Active**, **Discontinued**, or **All**.
- Sort meds by clicking the blue column headings.
- Click gray cell (med name) to view ordering history.
- View **Last Admin/Dose Admin** information.
- View medication status.

Look up documented reports

Other Reports	Reports include: consults and discharge summary
Notes History	Reports include: provider notes
Assessments	Reports include: provider, nursing, or both

Documenting Progress Notes/Provider Documentation (PDOC)

To access provider documentation, select a patient from your rounding list, then click the **Document** button. If there are existing progress notes documented by any provider, they will display. If there are many notes, use the category headings (**Date/Time, Type, Author, Status**) to sort the view for a quicker search of a specific note or notes. *See pages 52 – 55 for progress note status definitions.*

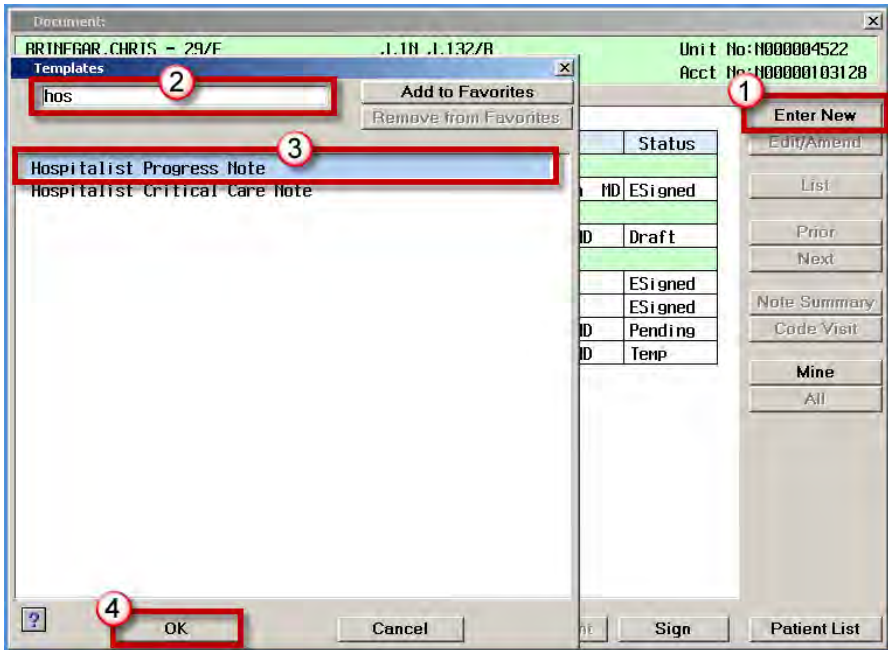
The screenshot shows a software window titled "PWL.EMA (KYNAEDH/EDU.TEST.564.MIS/84) - BRINEGAR,JAMIE". The "Document:" header displays patient details: BRINEGAR, CHRIS - 29/F, 172.72 cm 77.111 kg, J.1H J.132/B ADM IN, Unit No: N000004522, and Acct No: N00000103120. Below this is a table of progress notes with columns for Date/Time, Type, Author, and Status. The table lists several notes, including a Discharge Note, a Hospitalist Progress Note, and several Internal Medicine Progress Notes. To the right of the table is a vertical toolbar with buttons: Enter New, Edit/Amend, List, Prior, Next, Note Summary, Code Visit, Mine, and All. At the bottom of the window are buttons for Review, Order, Document, Sign, and Patient List.

Date/Time	Type	Author	Status
- Discharge Note			
10/07/11 1525	Brief Discharge Note w/Med R	Sartain, Teresa MD	ESigned
- Hospitalist Progress Note			
11/16/11 1529	Hospitalist Progress Note	CPDE, Doctor MD	Draft
- Internal Medicine Progress Note			
04/11/12 1527	Internal Medicine Prog. Note	Jacob,Susan	ESigned
04/11/12 1525	Internal Medicine Prog. Note	Jacob,Susan	ESigned
11/16/11 1526	Internal Medicine Prog. Note	CPDE, Doctor MD	Pending
10/21/11 1120	Internal Medicine Prog. Note	CPDE, Doctor MD	Temp

Selecting a new progress note (Enter New button)

1. From the Document screen, click **Enter New**.
2. Use type-ahead functionality to search for a progress note template. If favorites have been set up, you may skip this step.
3. Select a note.

4. Click **OK**.

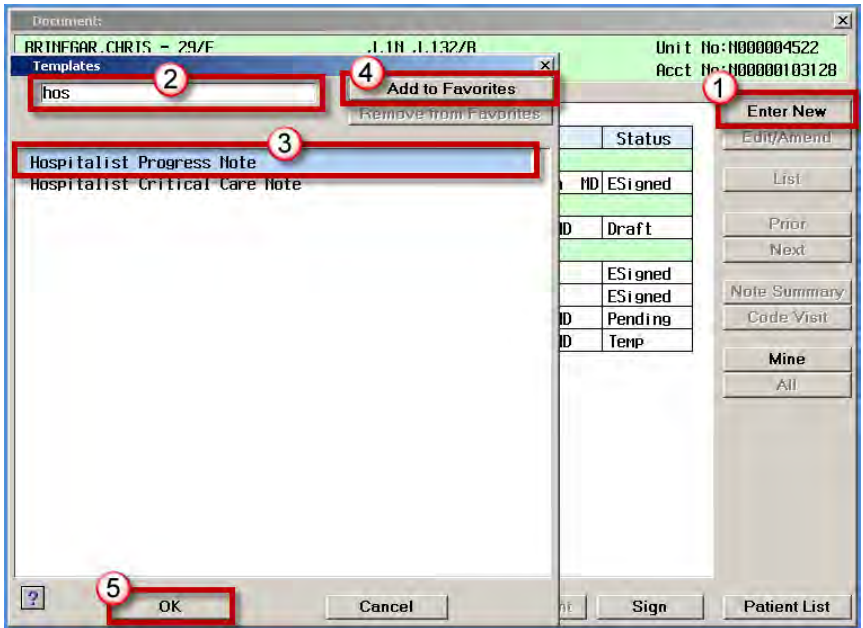


Adding progress note templates to your favorites

You can add as many templates as you wish to your list of favorites. This is a time saving tip that provides you with quicker access to your most frequently used templates.

1. From the Document screen, click **Enter New**.
2. Use type-ahead functionality to search for a progress note template.
3. Select a note.
4. Click **Add to Favorites**.

5. Click **OK** twice.



Removing progress note templates from your favorites

If you no longer want a template on your favorites list:

1. Click **Enter New**. You are directed to your list of **Favorites** only if favorites have been set up.
2. Select note from Favorites.
3. Click **Remove** from favorites.
4. Click **OK**.

Navigating around a template

While the format of the notes vary, the concepts behind navigation are the same. The format generally consists of tabs, sections within a tab, list of selection options, and buttons.

Document: Hospitalist Progress Note - Objective

BRINEGAR, CHRIS - 29/F J. IN J.132/B Unit No: H000004522
 172.72 cm 77.111 kg ADM IN Acct No: H00000103128

TABS

Subjective | Objective | T&P | DxA&P

SECTIONS

Physical Exam

US/I&O: Vital Signs: ...

Temperature maxi ...

Foley:

*General appearan...

Head/Eyes:

ENT:

Neck:

Cardiovascular:

Murmur:

Respiratory:

Abdomen:

Abdomen quadra...

Genitourinary:

Extremities:

Musculoskeletal:

Neuro/CNS:

Skin:

Lymphatics:

LIST OF RESPONSES

✓ General appearance:

alert

awake

conversant

face symmetrical

facial erythema

intubated/sedated

MS normal

no acute distress


obese

Comment: _____

BUTTONS

OK/Next | OK | Cancel | Normal

Review | Order | Document | Patient List

- Blue cells are clickable. They are tabs and sections under a tab.
- The slightly darker blue cells indicate current document position.
- Entering data into a section is done via selecting from the list of responses, creating customized responses, or documenting in free text fields.
- To move from one section to another use **OK/Next** button, **Tab** key on keyboard  , or using the mouse, click to the section you want.
- When you reach the very last section under a tab, by clicking **OK/Next** button or **Tab** key, you advance to the first section of the next tab.
 - Ex: From last section under **Objective** tab, pressing **OK/Next** or **Tab** key advances you to the first section of **T&P** tab.
- You are not required to document in every single section, unless there is an asterisk (*) associated with a section.

Making selections

List of responses may be multiple selection (check boxes) or single selection (radio buttons).

Document: Hospitalist Progress Note - Subjective

Hamrang, Gina - 63/F J.1W J.115/A Unit No: N000004182
187.96 cm 99.79 kg ADM III Acct No: N00000108849

Subjective	Objective	T&P	DxA&P
Subjective			
Patient Reports:			
Nursing reports:			

Negative responses are generally before positive responses. Click in box to make selections.

Use scroll bar to view all options.

Make as many selections as need when presented with check boxes.

✓ Patient Reports:

- no pain
- no palpitation
- no shortness of breath
- no swelling
- no vomiting
- continent
- feeling better
- good urine output
- pain controlled
- PO intake good
- resting comfortably
- sedated
- slept well
- abdominal pain
- back pain
- chest pain
- confused

Comment: _____

OK/Next OK Cancel

Review Order Document Patient List

TPN:

- Yes
- No

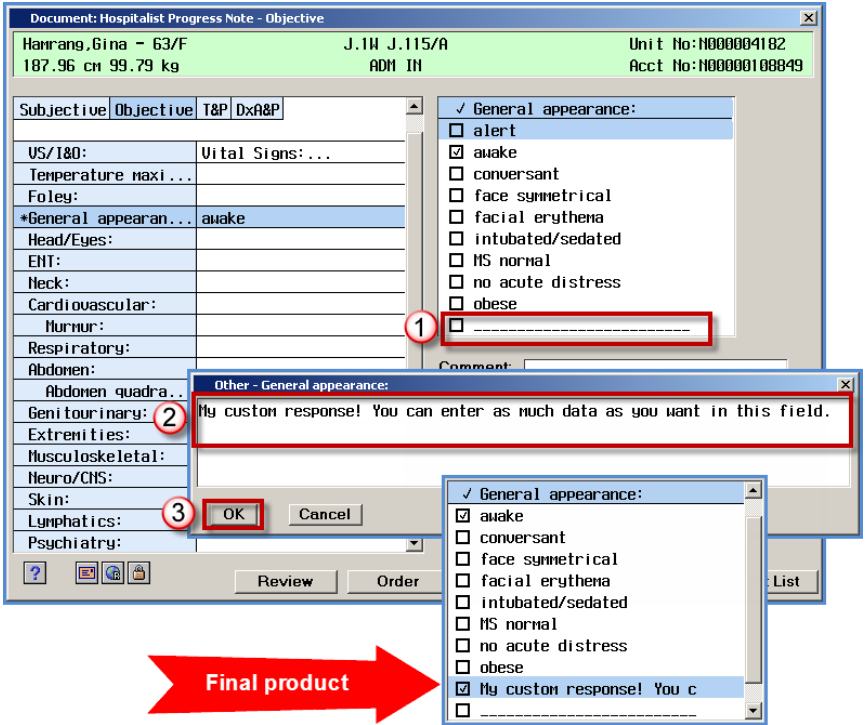
Only one response allowed with radio buttons

Creating your own responses

While list of responses present the most likely clinical options based on the section your documenting in, you can create custom responses for unlisted responses.

1. Go to the bottom of the responses list, and click the check box associated with the dotted line.
2. Enter the response. You do not have a character limitation in this field.

3. Click **OK**.



Why is there data entered on my progress note?

Some templates will default in data documented by nursing or ancillary staff. For example, the Vital Signs field will often default in the last documented vital signs. Also, some progress note templates will automatically recall the last entered data on predefined fields when the same template is used to document again on the same patient, regardless of who entered the data. Typically, the predefined fields include only objective data and some fields in treatment and plan sections.

For instance, in the example below a Hospitalist Progress Note has been documented and signed for the patient.

PWM.EMA (KYNAEDH/EDU.TEST.564.MIS/65) - BRINEGAR, JAMIE

Document:

Carswell, Ira - 51/M	J.CONF J.800/26	Unit
180.34 cm 84.056 kg	ADM IN	Acct

Date/Time	Type	Author	Status
- Hospitalist	Progress Note		
03/29/12 1220	Hospitalist Progress Note	Hamed, Sabi	ESigned

If you or another provider begin a new Hospitalist Progress Note, then some information previously documented on this same type of progress note, displays on the new progress note.

PWM.EMA (KYNAEDH/EDU.TEST.564.MIS/65) - BRINEGAR, JAMIE

Document: Hospitalist Progress Note - Objective

Carswell, Ira - 51/M	J.CONF J.800/26	Unit No
180.34 cm 84.056 kg	ADM IN	Acct No

Subjective	Objective	T&P	DxA&P
Physical Exam			
VS/I&O:			
Temperature maxi ...			
Foley:			
*General appearan...			
Head/Eyes:	normal fundi		
ENT:	abnormal ear left		
Neck:	full range of motion, non-tender, no bruit/NL carot...		
Cardiovascular:	normal capillary refill, regular rate & rhythm		
Murmur:			
Respiratory:	prolonged exp phase		
Abdomen:	no CVA tenderness		
Abdomen quadra...	RUQ normal bowel sounds, RUQ abnormal bowel sounds,...		
Genitourinary:			
Extremities:	normal motor function		
Musculoskeletal:			
Neuro/CNS:			
Skin:			
Lymphatics:			

All of these responses carried over from the previously documented Hospitalist Progress Note.

The data should be changed to reflect clinically appropriate information for the current visit generating the progress note.

1. Click on the section to modify.

2. Click on responses to add or click on previously reported responses to remove invalid responses for current visit.

PWM.EMA (KYNAEDH/EDU.TEST.564.M15/65) - BRINEGAR, JAMIE

Document: Hospitalist Progress Note - Objective

Carswell, Ira - 51/M J.CONF J.800/26 Unit No: N000002
180.34 cm 84.056 kg ADH IN Acct No: N000001

Subjective	Objective	T&P	DxA&P
Head/Eyes:	normal fundi		
ENT:	abnormal ear left		
Neck:	full range of motion...		
Cardiovascular:	normal capillary ref...		
Murmur:			
Respiratory:	prolonged exp phase		
Abdomen:	no CVA tenderness		
Abdomen quadra...	RUC normal bowel sou...		
Genitourinacu:			
Extremities:	normal motor function		
Musculoskeletal:			
Neuro/CNS:			
Skin:			
Lymphatics:			
Psychiatry:			
-	Results		

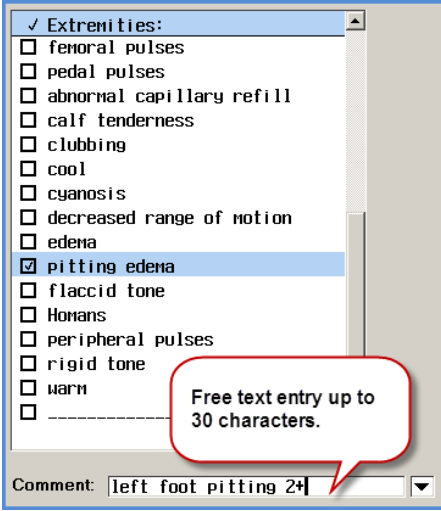
Extremities:

- femoral pulses
- pedal pulses
- abnormal capillary refill
- calf tenderness
- clubbing
- cool
- cyanosis
- decreased range of motion
- edema
- pitting edema
- flaccid tone
- Homans
- peripheral pulses
- rigid tone
- warm
-

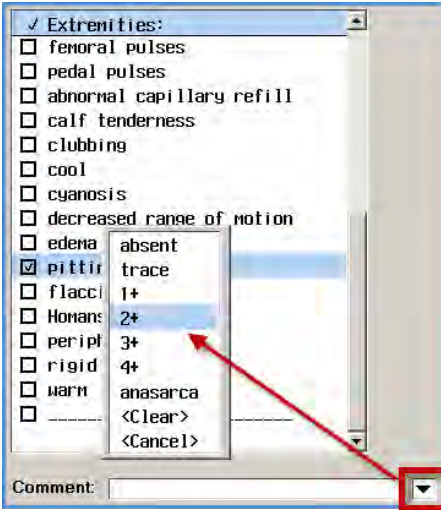
Working with comment fields

After selecting a response, add comments to a response as needed by:

- Free text up to 30 characters in the comments field.



- Or if there is drop-down arrow next to the comment field, you can make a predefined comment selection.



- Or use a combination selecting a predefined comment option and of entering free text.

The image shows a screenshot of a medical form titled "Extremities:". The form contains a list of checkboxes for various symptoms. The "pitting edema" checkbox is checked. At the bottom, there is a "Comment:" field with the text "2+ (left foot)" and a dropdown arrow. Two red callout boxes are present: one pointing to the dropdown arrow with the text "Selection from drop-down arrow", and another pointing to the text in the comment field with the text "Free text entry."

✓ Extremities:

- femoral pulses
- pedal pulses
- abnormal capillary refill
- calf tenderness
- clubbing
- cool
- cyanosis
- decreased range of motion
- edema
- pitting edema
- flaccid tone
- Homans
- peripheral pulses

Comment: 2+ (left foot) ▼

Selection from drop-down arrow

Free text entry.

Identifying and viewing comments

Comments can be identified by the thought bubble next to a response, or within a section.


The screenshot shows a software interface with a list of extremities on the left and a table of findings on the right. A red box highlights a comment bubble next to 'pitting edema' in the list. Another red box highlights a comment bubble next to 'pitting edema' in the 'Extremities' row of the table.


✓ Extremities:	
<input type="checkbox"/> femoral pulses	
<input type="checkbox"/> pedal pulses	
<input type="checkbox"/> abnormal capillary refill	
<input type="checkbox"/> calf tenderness	
<input type="checkbox"/> clubbing	
<input type="checkbox"/> cool	
<input type="checkbox"/> cyanosis	
<input type="checkbox"/> decreased range of motion	
<input type="checkbox"/> edema	
<input checked="" type="checkbox"/> pitting edema	
<input type="checkbox"/> flaccid tone	
<input type="checkbox"/> Homans	
<input type="checkbox"/> peripheral pulses	
<input type="checkbox"/> rigid tone	
<input type="checkbox"/> warm	
<input type="checkbox"/>	

Abdomen:	no CVA tenderness
Abdomen quadra...	RUQ normal bowel sounds, RUQ abnormal bowel sounds,...
Genitourinary:	
Extremities:	normal motor function, pitting edema

To read the information in the comment indicator, click the comment bubble, look for the response containing the comment, then click on the comment bubble again. Do not click the check box associated with the comment indicator or the response and comment will be removed.

Extremities:


- femoral pulses
- pedal pulses
- abnormal capillary refill
- calf tenderness
- clubbing
- cool
- cyanosis
- decreased range of motion
- edema
- pitting edema 
- flaccid tone
- Homans
- peripheral pulses

Abdomen: no CVA tenderness
 Abdomen quadra... RUQ normal bowel sounds, RUQ abnormal t...
 Genitourinary:
 Extremities: normal motor function, pitting edema 

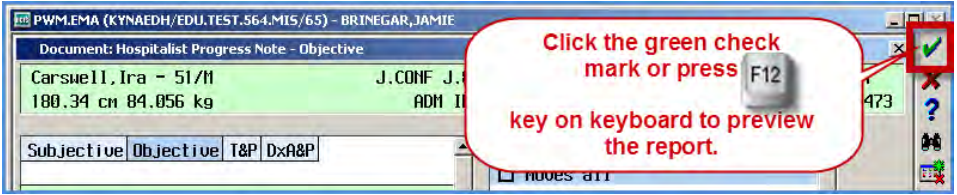
Click here to view comment

Click here to view comment

Do not click on the check box or the response and the comment will be removed unless that is the result you want!

edema
 pitting edema 
 flaccid tone

Previewing a progress note in report form



All information entered on the progress note displays as a formatted, easy to read report. Note that free text comments appear on the report in parentheses.

Submit

Hospitalist Progress Note

Patient Name: Ira Carswell
Date of Birth: 08/23/60
Attending Doctor: Hamed, Sabi

Unit Number: N000002237
Patient Status: ADM IN
Account Number: N000001074

Objective

Physical Exam
VS/I&O:
Vital Signs:

	Result	Date Time
Pulse Ox	98	03/27 1020
B/P	134/70	03/27 1020
Temp	37.7	03/27 1020
Pulse	88	03/27 1020
Resp	18	03/27 1020

Submit

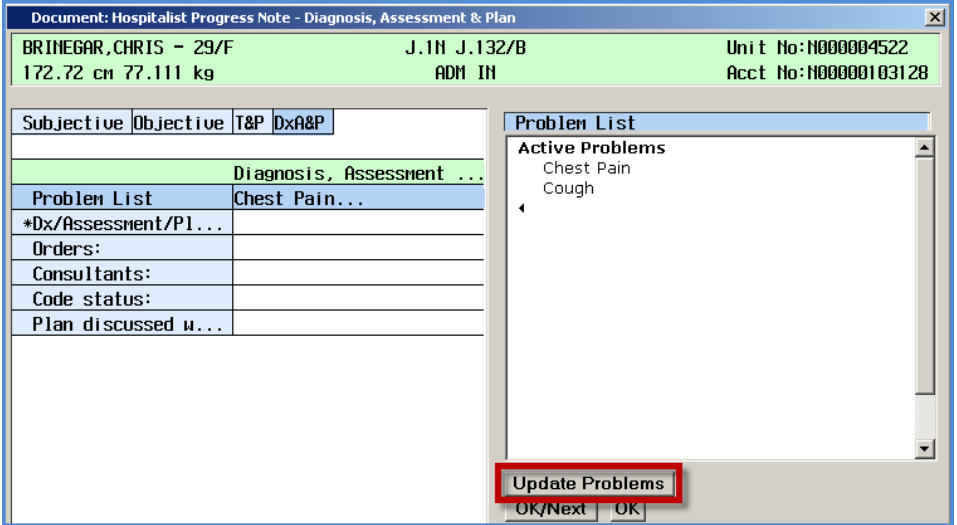
Head/Eyes:
ENT: abnormal
Neck: full range of motion, non-tender, no bruit/NL carotids, no JVD, no lymphadenopathy, no masses or swelling, normal thyroid, supple/no crepitations
Cardiovascular: normal capillary refill, regular
Respiratory: prolonged exp phase
Abdomen: no CVA tenderness
Abdomen quadrants:
 RUQ normal bowel sounds, RUQ abnormal bowel sounds, RUQ guarding
Extremities: normal motor function, pitting edema (left foot pitting 2+)

Treatment & Prophylaxis
Lines: PICC (purulence)
Tube feeding: No
Oxygen: simple mask

Free text comments display in parentheses

Problem lists from a progress note

You can manage a patient’s problem list from **Clinical Review** under **Pt Summary**, by clicking the pencil next to problems (see page 21). You can also update a patient’s problem list from within a progress note by clicking the **Update Problems** button. Then follow steps 2 – 8 on page 21.



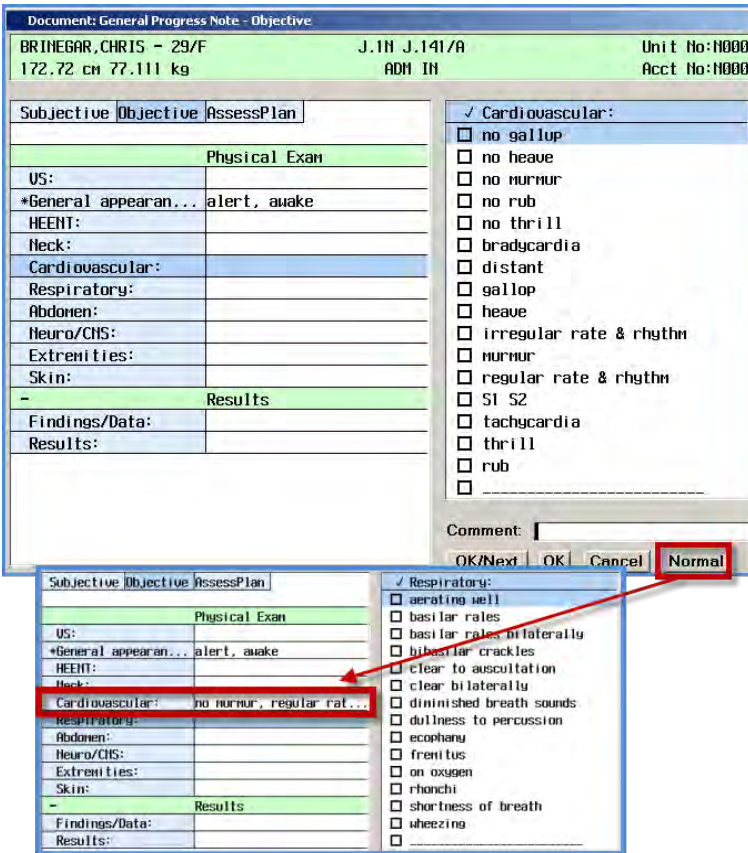
Time savers

Within normal limits (Normal button)

Use the **Normal** button to document responses within normal limits. Using this functionality is a great time saver. Be sure to double check these responses to be ensure they are clinically appropriate for your patient.

- When you click the Normal button within a section, you are automatically advanced to the next section.
- Depending on the number of responses within normal limits, you may or you may not be able to see all the responses.
- As demonstrated in the figure below, not all responses are visible.

- You need to go back to the section where you clicked the Normal button to see what all of the responses within normals are. If all are appropriate, no further action is needed.
- You can remove responses that are not true for your patient, or you can select additional responses along with the within normal limit responses.



Another way to work with the **Normal** button is by using the Normal button in a more global manner, versus using the **Normal** button within a section.

1. From the progress note window, click **OK**.
2. Click **Normal** on the right panel.
3. Click check mark next to Physical Exam heading.

4. Remove checkmarks from body systems where exam is not performed.
5. Click **Preview**. This allows you to see all the within normal limits responses for each selected body system.
6. Click **Close**.
7. Click **OK**.

Document: General Progress Note - Subjective

BRINEGAR, CHRIS - 29/F J.1H J.141/A Unit No: H000004522
172.72 cm 77.111 kg ADM IN Acct No: H00000103946

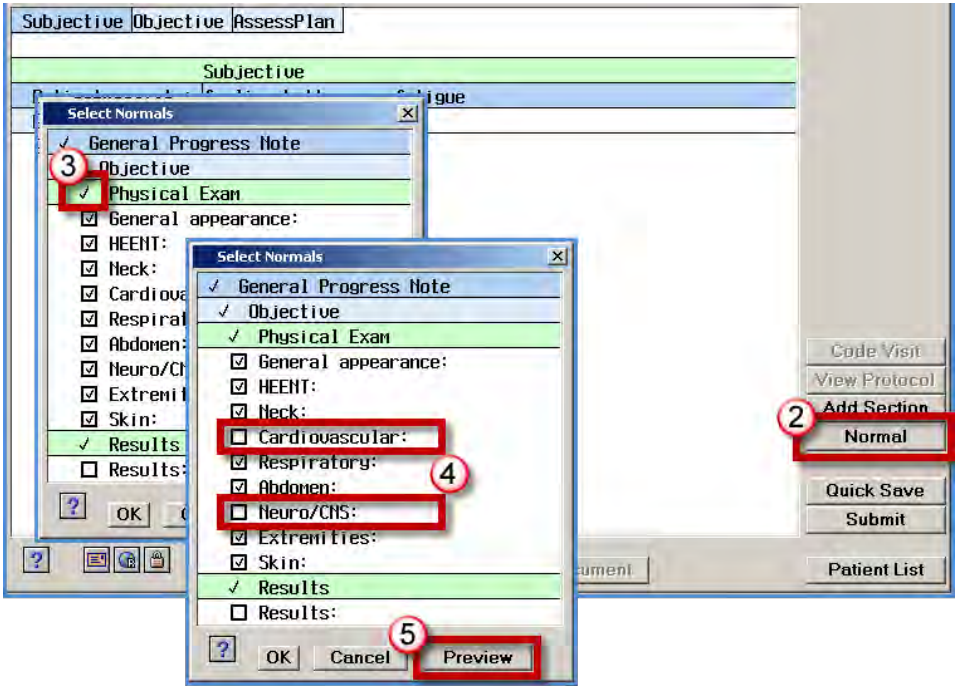
Subjective	Objective	AssessPlan
Subjective		
Patient reports:	feeling better, no fatigue	
Nursing reports:		

✓ Patient reports:

- feeling better
- resting comfortably
- no complaints
- no abdominal pain
- no back pain
- no constipation
- no cough
- no chest pain
- no diarrhea
- no dizziness
- no fatigue
- no fever
- no headache
- no heartburn
- no itching
- no nausea
- no pain

Comment **1**

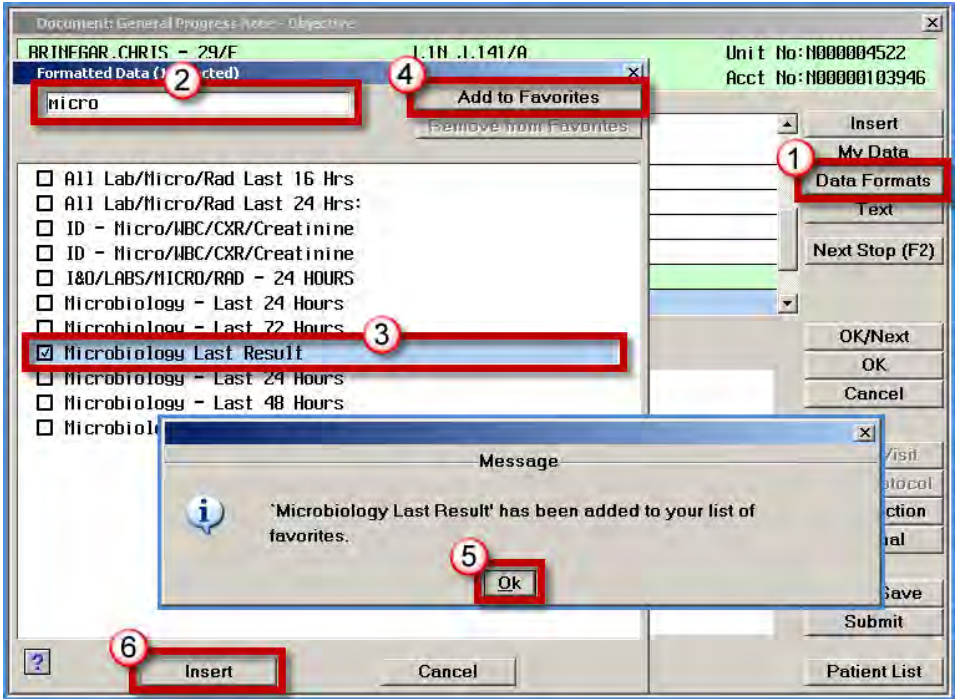
OK/Next **OK** Cancel



Using preformatted data, canned text, and select data as time savers

Data Formats button allows you to include the most recent or time-based clinical information (or formatted data) for a patient in a text component.

1. Click **Data Formats**.
2. Use type-ahead functionality for a quick search, or scroll down to view list of options to choose from
3. Make selection(s) from the list.
4. Click **Add to Favorites** if (a) used frequently and (b) not on favorites already.
5. Click **Ok**.
6. Click **Insert**.



If there is no data reported for the selection(s), nothing will be added to the progress note.

Text button is used to insert frequently used text passages from the list of available options defined at your facility.

1. Click **Text**.
2. Use type-ahead functionality for a quick search, or scroll down to view list of options to choose from
3. Make selection(s) from the list.
4. Click **Add to Favorites** if (a) used frequently and (b) not on favorites already.
5. Click **Ok**.
6. Click **Insert**.

Canned text displays on the progress note.

Document: General Progress Note - Objective

BRINEGAR, CHRIS - 29/F J.1N J.141/A Unit
 172.72 cm 77.111 kg ADM IN Acct

Subjective	Objective	AssessPlan
Abdomen:	bowel sounds present	
Neuro/CNS:		
Extremities:	no edema, normal capillary refill	
Skin:	dry, intact, no gross abnormalities, warm	
Results		
Findings/Data:		

The patient was instructed to present to the nearest Emergency Department or call 911 should their symptoms return or worsen.

My Data button is used to insert clinical information from Clinical Review that you selected (data elements in Clinical Review that you right-clicked to store on your **Data Saver**).

1. Click **My Data**.
2. Select elements to be added to the progress note.
3. Click **Insert**.

Document: General Progress Note - Objective

BRINEGAR, CHRIS - 29/F J.1N J.141/A Unit No: N000004522
 172.72 cm 77.111 kg ADM IN Acct No: N00000103946

Subjective	Objective	AssessPlan
Abdomen:	bowel sounds present	
Neuro/CNS:		
Extremities:	no edema, normal capillary refill	

1 **My Data**

Data Formats
Text

My Data	Value	Date/Time ↑	Category	Save/
<input checked="" type="checkbox"/> Arterial pH	6.8	02/14/12 0700	Lab	<input type="checkbox"/>
<input checked="" type="checkbox"/> Urine Glucose	NORM mg/dL	02/14/12 0700	Lab	<input type="checkbox"/>
<input checked="" type="checkbox"/> Urine Color	YELLOW	02/14/12 0700	Lab	<input type="checkbox"/>
<input checked="" type="checkbox"/> Urine Appearance	CLEAR	02/14/12 0700	Lab	<input type="checkbox"/>
<input checked="" type="checkbox"/> CBC	25.0 K/mcl H	02/14/12 0700	Lab	<input type="checkbox"/>

2 **Insert** Cancel Delete

The information displays on the progress note.

Lab

WBC	25.0 K/mcl H	02/14/12 0700
Urine Appearance	CLEAR	02/14/12 0700
Urine Color	YELLOW	02/14/12 0700
Urine Glucose	NORM mg/dL	02/14/12 0700
Urine pH	6.0	02/14/12 0700

The patient was instructed to present to the nearest Emergency Department or call 911 should their symptoms return or worsen.

Progress note status

All progress notes consist of the following statuses:

Pending = Is not part of Clinical Review, but is viewable under the Document button by all providers who have access to document. These are not considered complete and shouldn't be used in decision making.

Draft = Is the default status for notes that have not been signed; these notes may be changed and updated. Is viewable as draft status by all MEDITECH users in Clinical Review under Notes History button, Document button, and PCI area. You can also save a note in the Draft status by clicking the **Quick Save** button. These are not considered complete and shouldn't be used in decision making.

Subjective Objective T&P Dx&R

Subjective

Patient Reports: no back pain

Nursing reports:

Code Visit

View Protocol

Add Section

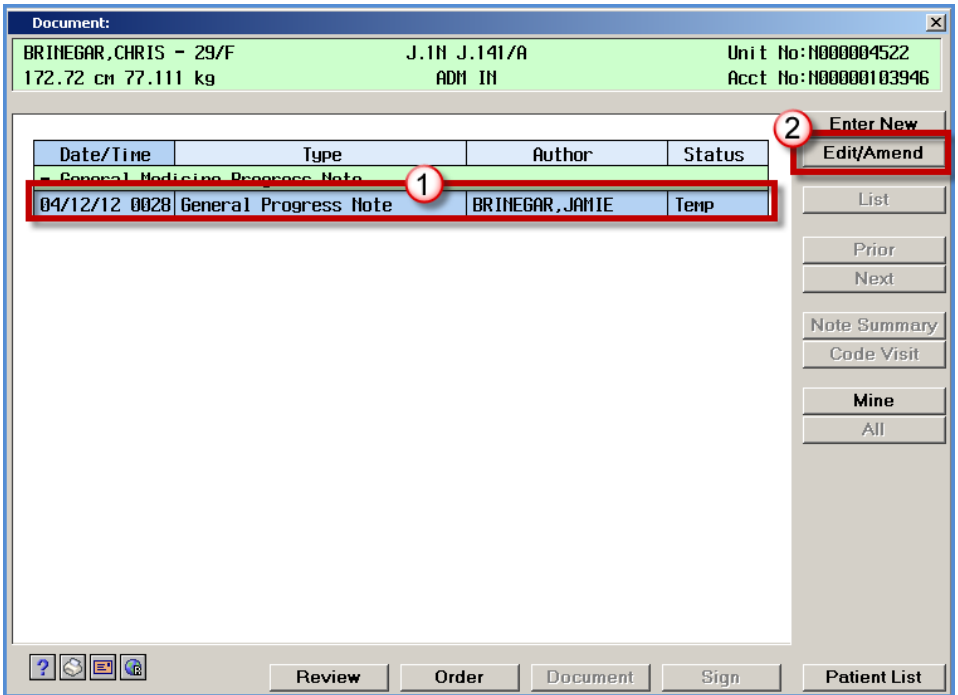
Normal

Quick Save

Submit

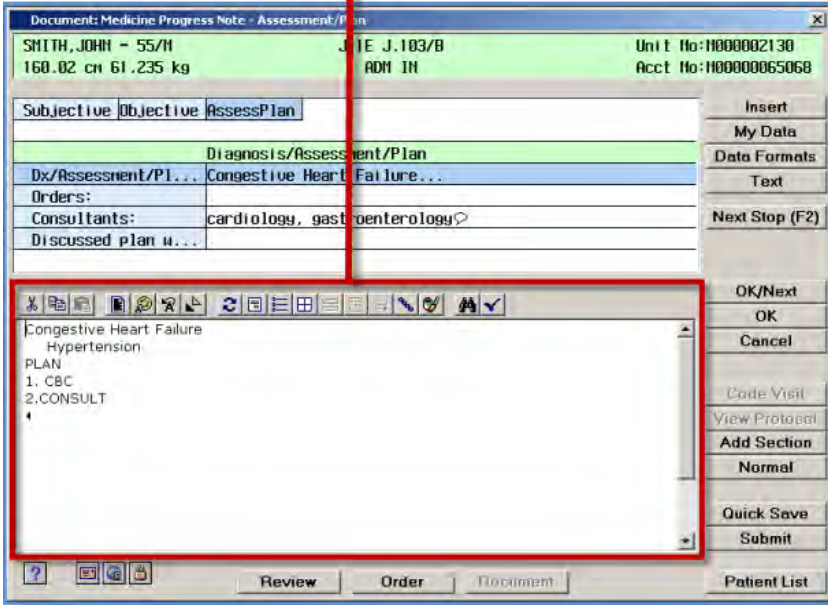
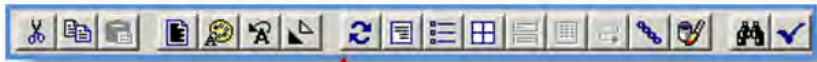
Signed = The PIN field appears for your electronic signature. Once you sign the note, you cannot go back to edit it. However, you can do an addendum. Is











To resume a progress note in the **TEMP** status, click on the note, then **Edit/Amend** button, and then **Resume**.











Text editor in MEDITECH (Meditor)

The MEDITECH editor, Meditor, has some industry standard word processor's functionality.



Icon	Functionality	Icon	Functionality
	Cut selected text		Bullet list
	Copy selected text		Inserts a table
	Paste selected text		Insert page break
	Select all text		Divide columns
	Format text (size, color, style)		Join selected text to one line

	Reset to default formatting		Insert a hyperlink
Default		Link	
	Show non-printing characters		If available, goes to image library
Visible		Image	
	Left, center, right align		Find text and replace text
Align		Find	
	Indent text		Spell check
Indent		Spell	

Amending a note after it has been signed

A signed note cannot be edited. However, you can edit a signed progress note.

1. From PDOC, select note to amend.
2. Click **Edit/Amend**.
3. Scroll down to the very bottom of the report.
4. Type information and/or use the **Insert, My Data, Data Format, or Text** buttons to add clinical information to the report.
5. Click **Submit**.
6. **PIN** the report.
7. Press **Enter** on keyboard.

Document: BRINEGAR, CHRIS - 29/F J.1N J.132/B Unit No: N000004522
172.72 cm 77.111 kg ADM IN Acct No: N00000103128

Date/Time	Type	Author	Status
- Discharge Note			
10/07/11 1525	Brief Discharge Note w/ Med R	Sartain, Teresa MD	ESigned
- Hospitalist Progress Note			
11/16/11 1529	Hospitalist Progress Note	CPOE, Doctor MD	Draft
- Internal Medicine Progress Note			
04/11/12 1527	Internal Medicine Prog. Note	Jacob, Susan	ESigned
04/11/12 1525	Internal Medicine Prog. Note	Jacob, Susan	ESigned

Enter New
Edit/Amend
List
Prior
Next
Note Summary

Document: 04/11/12 1527 - Internal Medicine Prog. Note Jacob, Susan ESigned

BRINEGAR, CHRIS - 29/F J.1N J.132/B Unit No: N000004522
172.72 cm 77.111 kg ADM IN Acct No: N00000103128

ST. XAVIER MEDICAL CENTER (COCEM1A)
Medicine Progress Note
REPORT #: 0411-0005
DATE: 04/11/12 TIME: 1527

PATIENT: BRINEGAR, CHRIS UNIT #: N000004522
ACCOUNT #: N00000103128 ROOM/BED: J.132-B
ADM DATE: 10/06/11 AGE: 29 SEX: F
AUTHOR: Jacob, Susan

*** ALL edits or amendments must be made on the electronic/computer document. ***

Objective

Physical Exam
VS:
Vital Signs:

	Result	Date Time
B/P	120/80	02/14 0941

Enter New
Edit/Amend
List
Prior
Next
Note Summary
Code Visit
Mine
All

Document: 04/11/12 1527 - Internal Medicine Prog. Note Jacob, Susan ESigned

BRINEGAR, CHRIS - 29/F J.1N J.132/B Unit No: N000004522
172.72 cm 77.111 kg ADM IN Acct No: N00000103128

Dx/Assessment/Plan:
Pneumonia.

Electronically Signed by Jacob, Susan on 04/11/12 at 1529
RPT #: 0411-0005
END OF REPORT

SECTION 2 ADDENDUM 1: 04/13/12 0559 BRINEGAR, JAMIE

► This is the location where you can free text to amend your note. You can also use the Insert, My Data, Data Format, and/or the Text buttons to add clinical information to the note. However, you cannot go back to any section and make adjustments to documented information once a note has been signed! ◀

Insert
My Data
Data Format
Text

Submit
Cancel

Electronic Signature (ESig) and Co-Signature

All progress notes and orders entered electronically by a provider or a mid-level provider must be signed electronically. You must use the unique 4-digit PIN provided to you by your facility.

Signing a progress note

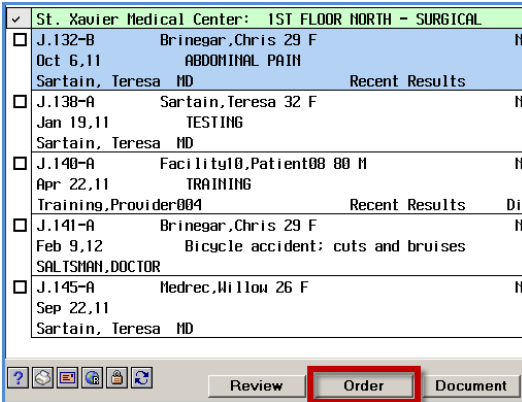
1. Once a note is complete, click **OK** button to view the **Submit** button.
2. Click **Submit**.
3. Review the progress note thoroughly. If needed, click Return button to go back to the progress note and back changes. Otherwise, click **Signed**.
4. Your user information autopopulates. Enter the unique 4-digit PIN assigned to you by your facility.
5. Press the Enter key on the keyboard to complete the electronic signature and filing of the progress note.



Warning: once the note is signed you cannot make edits to it. You will only be able to make an addendum.

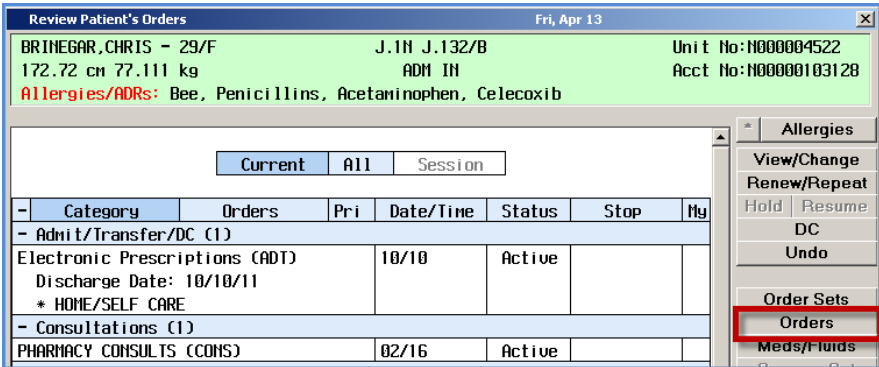
Placing Orders

To enter the orders functionality, a patient record must be selected, then click the **Order** button.



Non med orders

From the **Review Patient's Orders** screen, click **Orders**.



Labs

1. Use type-ahead functionality to search for a lab. Most labs have aliases for a quick search. For instance, you can type "basic" to look up and Basic Metabolic Panel. Another way of searching for it would be by entering BMP (not case sensitive).
2. Select the lab.
3. You can also save lab orders as favorites by clicking Add to **Favorites**.

- Click **Select** button, then continue ordering or click **Done** button.

Review Patient's Orders

BRINEGAR, CHRIS - 29/F J.1N J.132/B Unit No: N000004522
 172.72 cm 77.111 kg ADM IN Acct No: N00000103128
 Allergies/ADRs: Rec. Penicillins, Acetaminophen, Celecoxib

Any Order Lookup

Search on: basic

Preview/Edit Go to Favorites
 Add to Favorites

Order Description	Category
BASIC METABOLIC PANEL	LABORATORY
MYELIN BASIC PROTEIN CSF	LABORATORY

RADS

- Use type-ahead functionality to search for a radiology procedure. Most labs have aliases for a quick search.
- Select the radiology procedure.
- You can also save lab orders as favorites by clicking Add to **Favorites**.
- Click **Select** button, then continue ordering or click **Done** button.
- The **Preview/Edit** screen appears if there is additional data to document for an order. Click **Done** to process the additional information.

Review Patient's Orders

BRINEGAR, CHRIS - 29/F J.1N J.132/B Unit No: N000004522
 172.72 cm 77.111 kg ADM IN Acct No: N00000103128
 Allergies/ADRs: Rec. Penicillins, Acetaminophen, Celecoxib

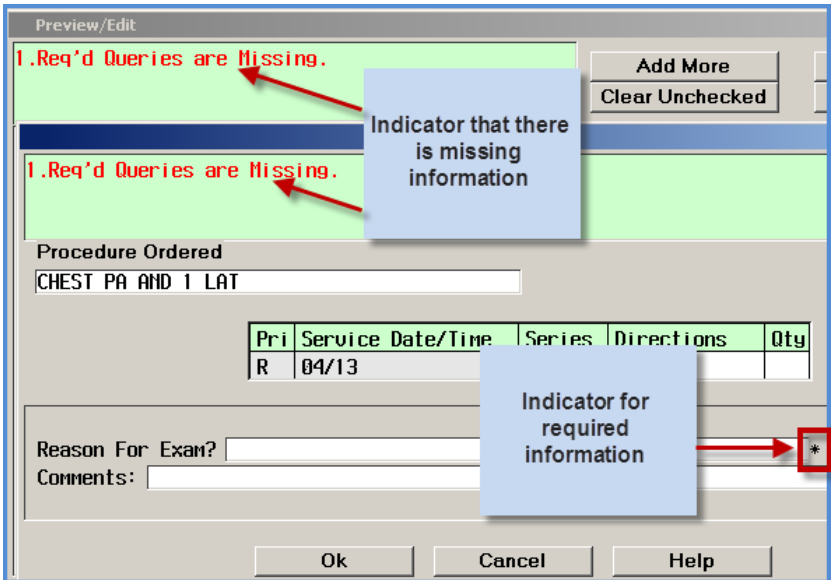
Preview/Edit

Add More Add to Favorites
 Clear Unchecked Save as Set

Orders	Pri	Start/Service	Series	Directions	Qty	Details
<input checked="" type="checkbox"/> BASIC METABOLIC PANEL (LAB)	R	04/13				Avail
<input checked="" type="checkbox"/> CHEST PA AND I LAT (RAD)	R	04/13				Req

Requires more data

6. Enter the requested information.

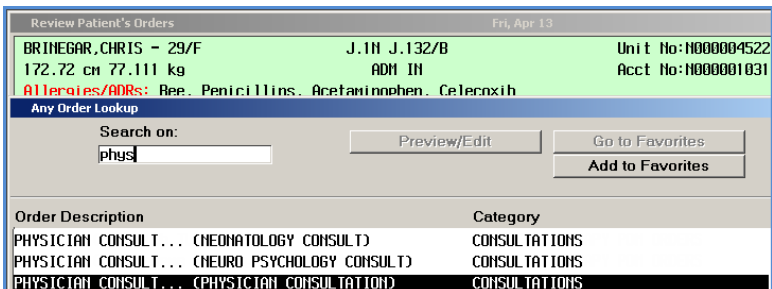


7. Click **OK**.

Consults (Provider/PHA)

Provider

1. Use type-ahead functionality to search for a consult.
2. Select the **Physician Consult**.



3. You can also save the consult as a favorite by clicking Add to **Favorites**.
4. Click **Select** button, then continue ordering or click **Done** button.
5. From **Preview/Edit** screen, click **Done**.
6. Complete required information (*).
7. Click **OK**.

In order for the consultation order to be routed to the correct provider, follow these search tips:

- In the Consult Physician field type the consulting provider’s physician mnemonic.
- If you do not know the mnemonic, type the following:
N\partial last name (Ex: N\Brin) then press **F9** key.
- Select provider from list.

Procedure Ordered

PHYSICIAN CONSULTATION

Pri	Service	Date/Time	Directions	Qty
R		04/13		

Reason for consult: PNEUMONIA *

<<Enter physician mnemonic: N\Partial Last Name & Look Up>>

Consult Physician: N\BRI *

Provider Name Lookup

Select Press <Lookup> for Extended Lookup

Name	Mnemonic	Abs Service	City/State
1 BRIARSWOOD, ANDREW P	BRIAN	FAMILY PRACTI	NASHVILLE/TN
2 Brient, Bruce	BRIBR	FAMILY PRACTI	
3 Briley, Susan	BRISU	FAMILY PRACTI	
4 Brill, Roger	BRIRO	FAMILY PRACTI	
5 Brinegar, Janie M.D.	1CQGBE9016	EMERGENCY DOC	
6 Brinegar, Janie	GBE9016	EMERGENCY MED	
7 Brinkley, Katie	BRIKA	FAMILY PRACTI	

PHA

1. Use type-ahead functionality to search for a consult.
2. Select the **Pharmacy Consult**.

Review Patient's Orders		Fri, Apr 13	
BRINEGAR, CHRIS - 29/F		J.1N J.132/B	Unit No: N000004
172.72 cm 77.111 kg		ADM IN	Acct No: N000001
Allergies/ADRs: All. Penicillins. Acetaminophen. Celecoxib			
Any Order Lookup			
Search on:	<input type="text" value="pha"/>	<input type="button" value="Preview/Edit"/>	<input type="button" value="Go to Favorites"/>
			<input type="button" value="Add to Favorites"/>
Order Description	Category		
PHARMACY CONSULTS	CONSULTATIONS		

3. You can also save the consult as a favorite by clicking Add to **Favorites**.
4. Click **Select** button, then continue ordering or click **Done** button.
5. From **Preview/Edit** screen, click **Done**.
6. In the **Select Pharmacy Consult** Category field, press **F9** to do a look up.
7. Select consult category.
8. Click **OK**.

Nursing Intervention

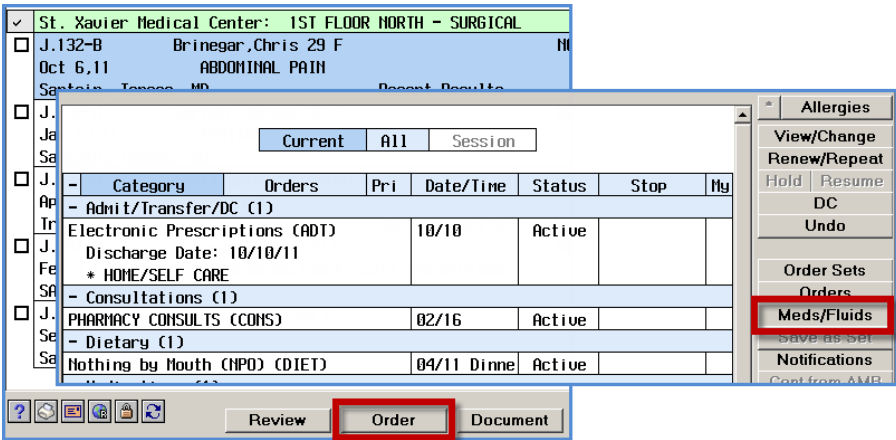
1. Use type-ahead functionality to search for a nursing intervention.
2. Select intervention from list.

Review Patient's Orders		Fri, Apr 13	
BRINEGAR, CHRIS - 29/F		J.1N J.132/B	Unit No: N000004
172.72 cm 77.111 kg		ADM IN	Acct No: N000001
Allergies/ADRs: All. Penicillins. Acetaminophen. Celecoxib			
Any Order Lookup			
Search on:	<input type="text" value="nur"/>	<input type="button" value="Preview/Edit"/>	<input type="button" value="Go to Favorites"/>
			<input type="button" value="Add to Favorites"/>
Order Description	Category		
NURSE (POM: Nursing Order General)	Nursing Interventions (POM)		
CPM Monitor by Nursing	Nursing Interventions (POM)		
NBN Nursing Lab	Nursing Interventions (POM)		
Nursing Communication Order +	PROVIDER ENTER NURSING ORDERS		
Nursing Order General	Nursing Interventions (POM)		
Pulse O ₂ By Nursing	Nursing Interventions (POM)		
Suction By Nursing	Nursing Interventions (POM)		
NURSING A (POM: Nursing Order General)	Nursing Interventions (POM)		
NURSING ORDER (POM: Nursing Order General)	Nursing Interventions (POM)		

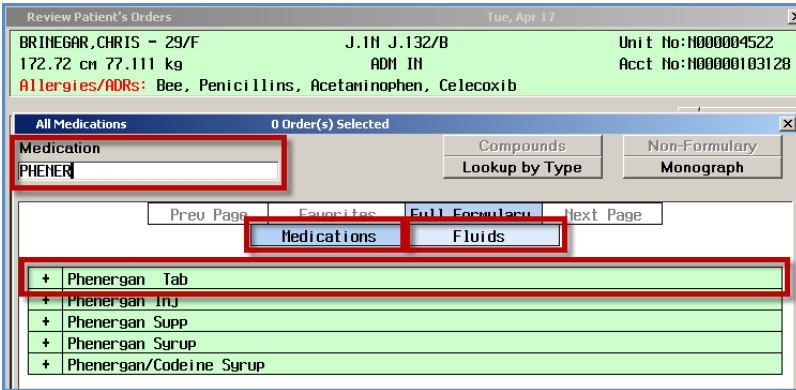
3. You can also save the consult as a favorite by clicking Add to **Favorites**.
4. Click **Select** button, then continue ordering or click **Done** button.
5. From **Preview/Edit** screen, click **Done**.

Meds/Fluids

To enter the meds/fluids functionality, a patient record must be selected, click the **Order** button, then click **Meds/Fluids**.

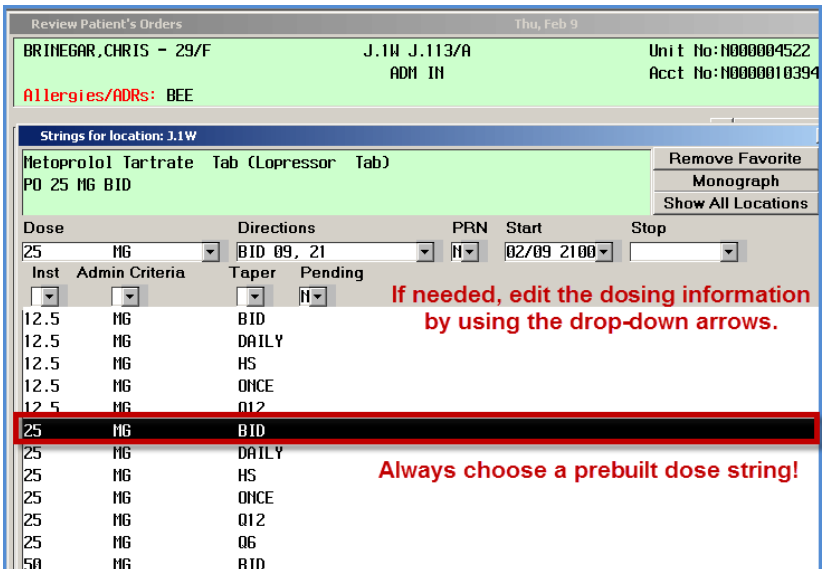


- Medications are under the **Medications** tab. Plain IV fluids are located under the **Fluids** tab.
- Use type-ahead functionality to search for a medication or fluid, but only type in a few characters. If you type too quickly and too much information, you may end up selecting an incorrect medication.
- If you make a mistake typing in the med name, use the **F10** key to remove the entry and enter the new information.
- When available, choose a route from the resulting search.



Scheduled meds

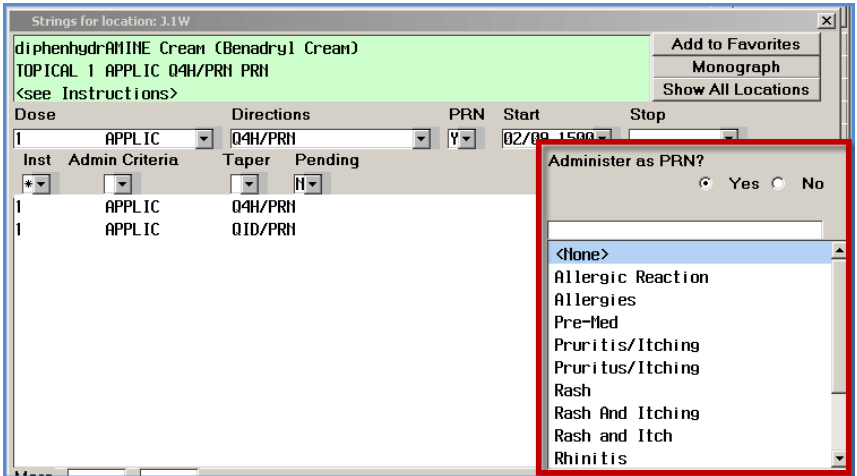
1. Use type-ahead functionality to search for a med.
2. Select the appropriate route if presented with more than one option.
3. Choose a string from the prebuilt doses. If the correct dosage needed is not presented, choose the string closest to what you need, and edit that string.



4. Click **Done**.
5. If you are done ordering, click **Done** button. Otherwise continue ordering medications.

PRN meds

1. Follow steps 1 – 3 as listed under **Scheduled Meds.**
2. Click **Done.**
3. All PRN meds require a PRN reason. You must choose a PRN reason.

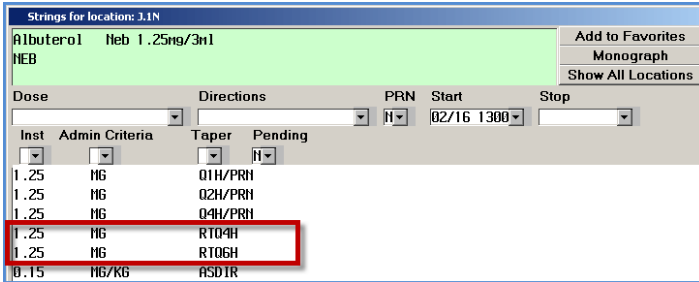


4. If you are done ordering, click **Done** button. Otherwise continue ordering medications.

Respiratory therapy frequencies

Not all facilities use the respiratory therapy (RT) frequencies. You will know if there are any because of the "RT" identifier.

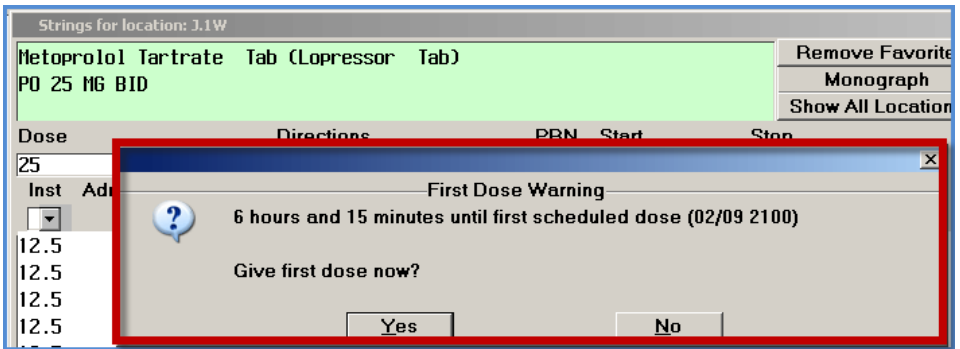
1. Use type-ahead functionality to search for a med.
2. Select the appropriate route if presented with more than one option.
3. If choosing an RT frequency, choose a string from the prebuilt doses containing the RT indicator. If the correct dosage needed is not presented, choose the string closest to what you need, and edit that string.



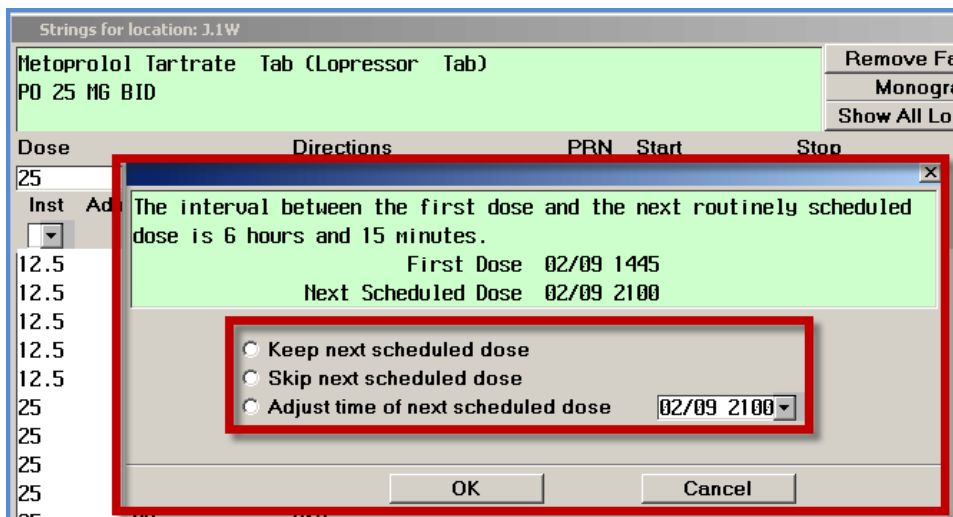
4. Click **Done**.
5. If you are done ordering, click **Done** button. Otherwise continue ordering medications.

First Dose Warning

The first dose warning displays when there is enough time before the next scheduled dose where an initial dose maybe needed. The provider may: (a) choose to order an initial dose and keep the next scheduled dose, (b) order an initial dose and skip the next scheduled dose, or (c) not order an initial dose, and just have the next scheduled dose be the next scheduled dose.

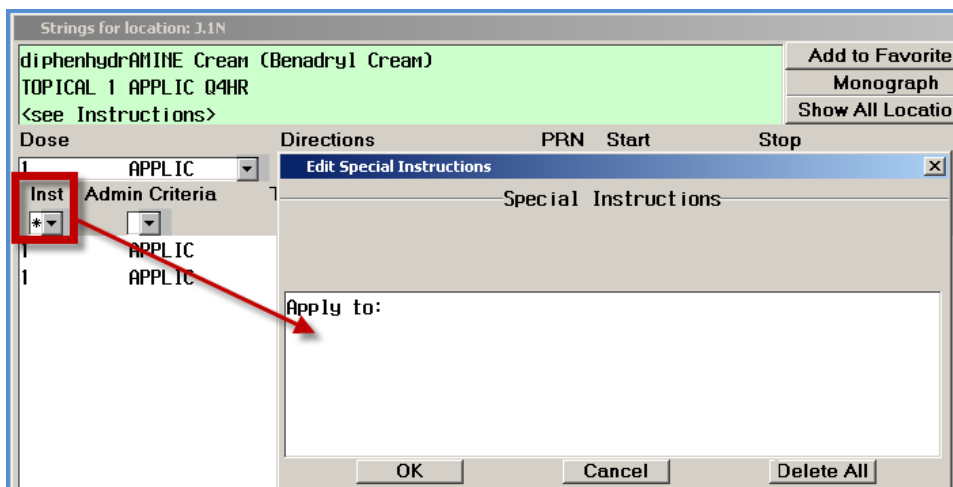


This is a continuation of the first dose warning. If you choose to give first dose now, you will be presented with another screen to make a scheduled dosing selection.



Special Instructions

In the event that a medication needs special instructions, once a prebuilt dose string is selected, click on the **Inst** option to enter special instructions. There may be times, when this is a required field. In this case, there will be an asterisk (*) in the **Inst** field. You will be prompted to enter special instructions. Special Instructions is the best location to provide order-specific instructions to pharmacy and nursing.



Combo meds

1. Use type-ahead functionality to search for a medication.
2. If the medicine is a combo med that is not carried by the facility, you will be prompted to use the combo set process. Do not make a selections from the **All Medications** screen. Click **Done** to exit the screen.

All Medications 0 Order(s) Selected

Medication

Compounds
Lookup by Type

Prev Page Favorites Full Formulary Next Page
Medications Fluids

+ AVALIDE- Use COMBO sets
+ AVANDAMEI- Use COMBO sets
+ AVANDARYL- Use COMBO sets
+ Avandia Tab
+ Avapro Tab
+ Avelox Tab
+ Avelox Inj
+ Avodart Cap
+ Avonex Inj

Select Done Help

3. Click **Order Sets** button from **Review Patient's Orders** screen.
4. Click **Combination Med Sets**.
5. Scroll down to search for the medication. Select the medication.

All Sets 0 Sets Selected

All Sets	ADMIT/DISCHARGE/TRANSFERS	COMBINATION MED SETS
ED	GENERAL	GENERAL SURGERY
LABS	MEDICATIONS	OB/GYN
ORTHOPEDIC	RENAL	RESPIRATORY

- z ARTHROTEC 50 BID
- z ARTHROTEC 75 BID
- z ATRIPLA TAB
- z AVALIDE 150/12.5
- z AVALIDE 300/12.5
- z AVALIDE 300/25
- z AVANDAMET 2/500

6. Click **Done**, then click **Done** again.
7. If there is information that must be reviewed or if additional information is required, you will be prompted accordingly.
8. From the **Modify/View Medication** screen, click **OK**.
9. From the **Process Orderset details** screen, click **Done**.

Therapeutic substitution

There will be times when a medication is automatically substituted by pharmacy to an approved formulary medication. The **NF** (non formulary) indicator alerts you of a therapeutic substitution.

1. Use type-ahead functionality to search for a medication.
2. If the medication is going to be substituted, you will see the **NF** indicator. Choose the medication.

Once you choose the medication, the Rule Processing screen displays providing you with the information that the the chosen medication is being substituted by an approved formulary substitution.

All Medications 0 Order(s) Selected

Medication Compounds
 Lookup by Ty

Prev Page Favorites Full Formulary
 Medications Fluids

+ Nexium Cap (NF)
+ Nexium Iv

+ Nexium Cap (NF)
+ Nexium Iv

Rule Processing

** Protonix (Pantoprazole) is P&T Approved Formulary Substitution **

Nexium 20 mg PO DAILY -----> Protonix 40 mg PO DAILY
 Nexium 40 mg PO DAILY -----> Protonix 40 mg PO DAILY
 Nexium 40 mg PO Q12H -----> Protonix 40 mg PO Q12H

3. Click **Done**.
4. Choose a prebuilt dosing string.
5. Click **Done**.

Non formulary

1. In the **Medication** search field, begin typing **non-formulary**.
2. Select **Non-Formulary Each**.
3. Choose route.
4. Select **** NONFORMULARY – Pick this string and complete admin criteria when prompted**.
5. Click **Done**.

Strings for location: J.IN

Non-Formulary Each
 PD 1 EACH ASDIR
 <see Admin Crit>

Remove Favorite
 Monograph
 Show All Locations

Dose: 1 EACH Directions: ASDIR PRN: N Start: 02/29 1500 Stop: []

Inst: [] Admin Criteria: ** Taper: [] Pending: N

1 EACH ASDIR
 ** NONFORMULARY - Pick this string and complete admin criteria when prompted **

More [] [] Done Cancel Help

- Enter all the required information, which is the fields containing the asterisk (*) symbol.

Strings for location: J.IN

Non-Formulary Each Remove Favorite

Enter/Edit Rx's Administration Criteria

Administration Criteria: NON FORMULARY Erase Admin Crit Save as Favorite

Reason for Non-Formulary Med: [] *

Medication Name: [] *

Dose: [] * Sig: [] * PRN?: [] * PRN Reason: []

Comments: []

Ok Cancel Help Prev Next

- Click **Done**.

Fluids

Simple IV fluids

1. From the **All Medications** screen, click **Fluids**.
2. Use type-ahead to search for the fluid.
3. Select fluid. If desired string is not available, choose the most appropriate string and edit as needed.
4. Click **Done**.

Edit an IV maintenance fluid

You can edit an IV order before it is filed by:

1. Select the IV order in the New status.

Review Patient's Orders Thu, Feb 9

BRINEGAR, CHRIS - 29/F J.1W J.113/A Unit N
ADM IN Acct N

Allergies/ADRs: BEE

Current All Session

-	Category	Orders	Pri	Date/Time	Status	Stop	My
- New Orders (2)							
	Metoprolol Tartrate Tab (Lopressor... PO 25 MG BID			02/09 1449	New	03/10 1448	*
	0.9% NaCl IV 75 ML/HR	100... 1000 ML		02/09 1500	New	03/10 1459	*

2. Click **View/Change** button.
3. Click **Avail** from **Preview/Edit** screen.

Preview/Edit

Add More Add to Favorites
Clear Unchecked Save as Set

Orders	Pri	Start/Service	Series	Directions	Qty	Details
<input checked="" type="checkbox"/> 0.9% NaCl 100...		02/09 1500				Avail

4. Make necessary changes.

5. Click **OK**.
6. Click **Done**.

IV Bolus

1. Click **Fluids** tab from **All Medications** screen.
2. Type-ahead the name of the fluid.
3. Select the **BOLUS** string.
4. Click **Done**.

Non premixed IV piggyback

If a fluid is premixed, you will not go to the **Fluids** tab to search for the fluid. You will search for the premixed fluid under the default of **Medications** tab. Also, note that dosing information can be changed for a non premixed IV piggyback.

1. Type-ahead to search for the non premixed fluid.
2. Select the fluid and routing form.
3. Choose a string.

Strings for location: J.1N

cefTRIAxone Inj (Rocephin Inj) 1 GM IV *Per Bag* Remove Favorite
 in D5-Water Carrier (D5W Carrier) 50 ML Monograph
 Q12 100 MLS/HR Show All Locations

Rate/Dose	Directions	PRN	Start	Stop		
1 GM	Q12 09, 21	N	02/16 2100			
Inst	Admin Criteria	Taper	Additives	Fluid	Alt IV	Pending
0.6	GM	ONCE		D5-Water Carrier 50 ML		
0.75	GM	ONCE		D5-Water Carrier 50 ML		
1	GM	ONCE		D5-Water Carrier 50 ML		
1	GM	Q12		D5-Water Carrier 50 ML		
1	GM	Q24		D5-Water Carrier 50 ML		
50	MG/KG	Q12H		Syringe D5w Di luent Epon 10 ML		

4. If you need to change the dosing information, click the **Rate/Dose** drop-down arrow.
5. If the dose you want is not listed, click **Other**.
6. From the **Edit Dosing** screen, make the necessary changes.

Modify/View Medication

cefTRIAxone Inj (Rocephin Inj) 1 GM IV *Per Bag* Add
 in D5-Water Carrier (DSM Carrier) 50 ML Show
 Q12 100 MLS/HR Stop 03/02 2059 M

Route	Rate/Dose	Directions	PRN	Start
IV	100 MLS/HR	Q12 AQ. 21	N	02/16 2100

Inst Admin C Edit Dosing

cefTRIAxone Inj (Rocephin Inj)

Rate 100 Rate Units MLS/HR
 Dose or Volume (per bag) 1 Units GM

Define Limit for IV:
 Stop is applied from Rx Start of 02/16 2100

Total Volume to Infuse (mls)
 -or-
 # Bags/Doses
 -or-
 Stop Date/Time 03/02 2059

OK Cancel

7. Click **OK**.
8. Click **Done**.

IV piggyback premixed

Unlike the non premixed IV piggyback, the premixed IV piggyback dosing information cannot be changed to anything other than an available string.

1. Type-ahead to search for the premixed fluid.
2. Choose a string.

Strings for location: J.1N

Levofloxacin Inj (Levaquin Inj) 500 MG IV *Per Bag*
 Premixed at 500 MG/100 ML
 ONCE 200 MLS/HR Stop 1 bags

Rate/Dose	Directions	PRN	Start	Stop		
500 MG	ONCE	N	02/28 1900	1 t		
Inst	Admin Criteria	Taper	Additives	Fluid	Alt IV	Pending
				*		N
250	MG	DAILY				
250	MG	ONCE				
500	MG	DAILY				
500	MG	ONCE				
750	MG	DAILY				

3. Click **Done**.

In this example, if you wanted to change the dosing information, you may only do so, if the change is a prebuilt string. For instance, the 500 MG can only be changed to either 250 or 750 MG since these are prebuilt strings.

IV maintenance with additives

1. Since this is a plain fluid to begin with, you need to select the **Fluids** tab.
2. Type-ahead to search for the plain fluid.
3. Select a string.
4. Click the **Additives** drop-down arrow.

Strings for location: J.1W

0.9% NAACL 1000ml CNS 10...*Per Bag*

75 ML/HR

Rate Start Stop

75 ML/HR 02/09 1640 []

Inst Admin Criteria **Additives** Fluid Alt IV Pending

[] [] [] * [] N

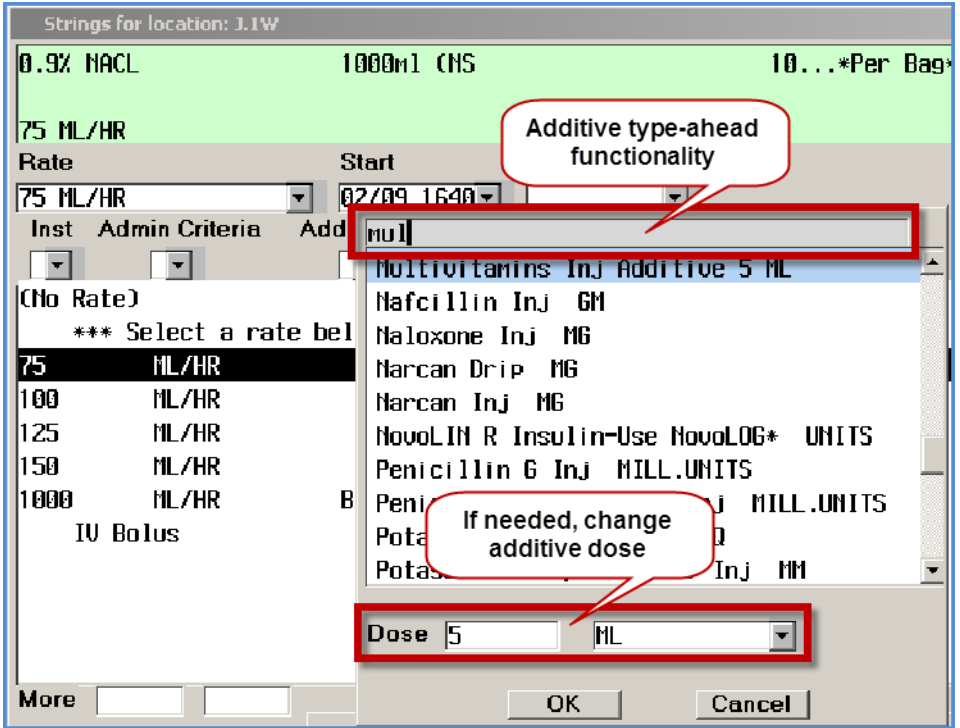
(No Rate)

*** Select a rate below FIRST to change to a new rate ***

75	ML/HR	(1000 ML bag)
100	ML/HR	(1000 ML bag)
125	ML/HR	(1000 ML bag)
150	ML/HR	(1000 ML bag)
1000	ML/HR	BOLUS (1000 ML bag)

IV Bolus

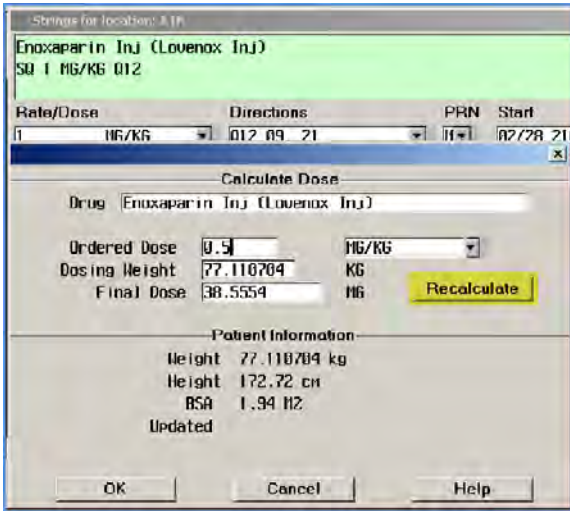
5. Type-ahead to search for the additive.
6. Change dosing information if needed.



7. Click **OK**.
8. You can continue adding more additives or click **Done**.

Weight based doses

1. Type-ahead to search for the medication.
2. Choose a string.
3. Click **Done**.
4. Final dosing information is automatically calculated based on the patient weight and the ordered dose. If you change the ordered dose, click the **Recalculate** button to change the final dose information.

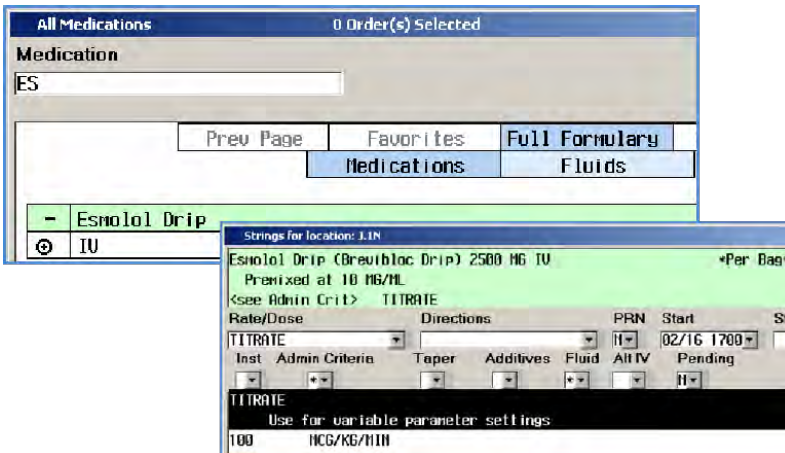


5. Click **Done**.

Administrative criteria

Administrative criteria is used for entry of therapeutic parameters. In this example, an esmolol drip is being ordered.

1. Type-ahead to search for the medication.
2. Select the medication.
3. Select the **TITRATE** string.



4. Click **Done**.
5. In the Administrative Criteria screen, fields will be prepopulated with therapeutic parameters. However, there may also be required fields that need to be addressed. These fields contain the asterisk (*) symbol.
6. Click **OK** when all required fields have been completed.

Enter/Edit Rx's Administration Criteria

Administration Criteria: Esmolol

Erase Admin Crit
Save as Favorite

Initial rate: 50 * mcg/kg/min
 Titrate by: 50* mcg/kg/min every 5 * minutes
 Goal: SBP less than 170 mmHg
 HR between 80 - 100
 Sustained HR greater than 100
 SBP greater than 140* mmHg
 Hold for HR less than 60 or SBP less than 90 mmHg
 ** Maximum rate: 200 mcg/kg/min **
 (At least ONE goal parameter is REQUIRED)

Ok Cancel Help Prev Next

Interactions

Drug/allergy interaction

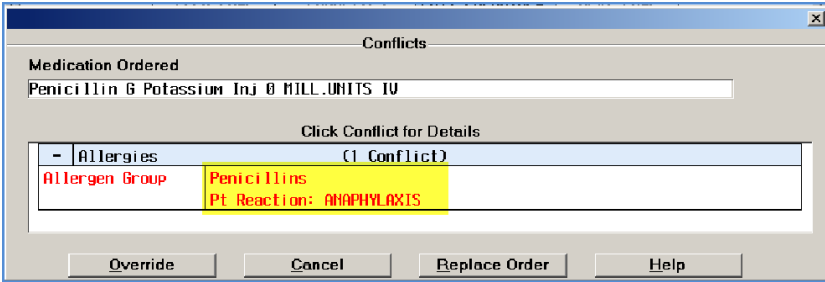
During the course of placing an order, you may be presented with warning messages for drug-drug interactions, duplicate drugs, or allergy interactions.

- Coded allergies do have allergy interaction check.
- Uncoded allergies ***do not*** have allergy interaction check.
- In this example, the patient is allergic to penicillins.

Review Patient's Orders Thu, Feb 16

BRINEGAR, CHRIS - 29/F J.1N J.132/B
 5 ft 8 in 170 lb ADM IN
Allergies/ADRs: Bee, Penicillins, Acetaminophen, Celecoxib

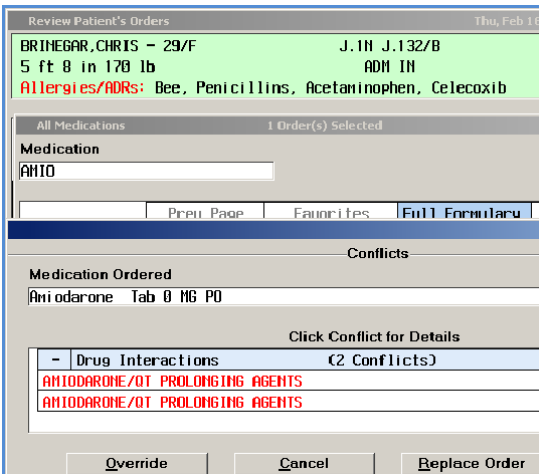
- If there is a drug/allergy interaction, the provider is presented with actions to take.



- If the provider chooses to override the conflict, another screen appears to document the reason for the override.
- To cancel the order for this medication, click **Cancel**.
- To order a medication in place of the conflicting order, click **Replace Order**.

Drug/drug interaction

- Coded meds: drug/drug interaction is performed by the system.
- Uncoded meds: drug/drug interaction is not performed by the system.
- If there is an drug/drug interaction, the conflicts screen displays.
- A provider can exercise clinical judgement and override the conflict, or cancel, or replace the order, which does not discontinue the older order that is causing the interaction with the newly entered order.



Modifying orders

View and change orders

As long as the order is in the status of new (meaning that it has not been electronically signed and filed), you can select it and make edits.

If an order is still in the new status and you wish to view the ordering details or make a change to the order, you will use the view change button.

If an order has already been submitted, the aforementioned still applies. However, you need to be aware of a major difference. Changing a medication that has already been submitted may generate a new order for the provider's electronic signature.

1. From the **Review Patient's Orders** screen, select the medication to view and/or change.
2. Click the **View/Change** button.
3. Click on any of the gray fields to change ordering information.

Review Patient's Orders Thu, Feb 9

BRINEGAR, CHRIS - 29/F J. IW J.113/A Unit No: N000004522
ADM IN Acct No: N00000103946

Allergies/ADRs: RFF

Preview/Edit

Add More Add to Favorites
Clear Unchecked Save as Set

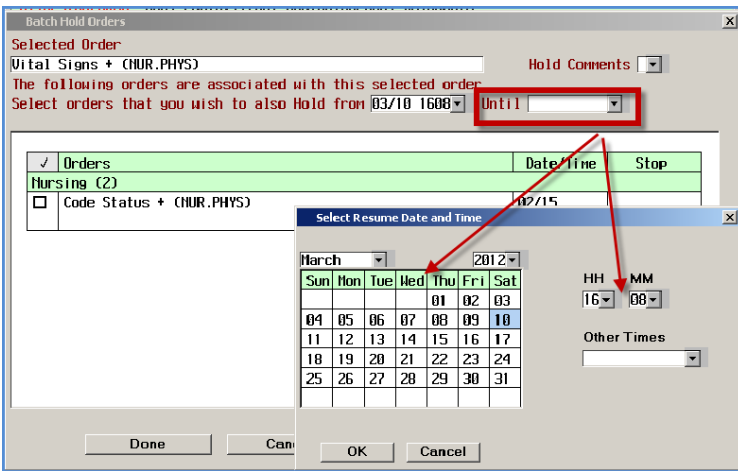
Orders	Pri	Start/Service	Series	Directions	Qty	Details
<input checked="" type="checkbox"/> Metoprolol Tartrate Tab 25...		02/09 1445				Avail

4. Make necessary changes.
5. Click **OK**.
6. Click **Done**.
7. If the order was previously signed and filed, click the **Submit** button to sign the new ordering changes and file the order.

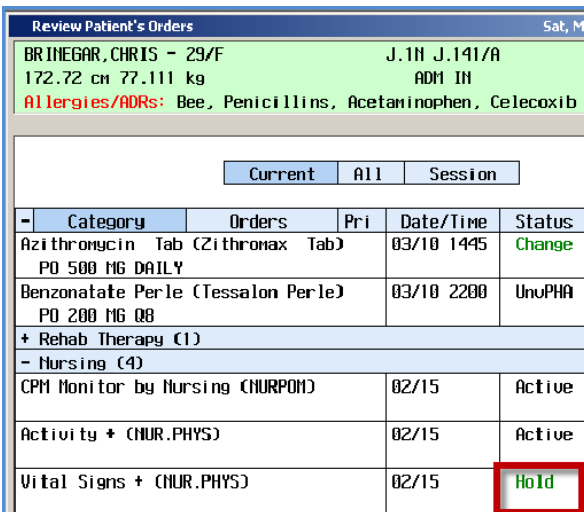
Hold and resume orders

You can place an order on hold and instruct the system when to automatically resume the order from the hold. You can also manually resume an order that is on hold.

1. Select order from **Review Patient's Orders** screen.
2. Click **Hold** button.
3. Specify hold until a specific date.



4. Click **OK**.
5. Click **Done**.



To manually resume an order:

1. Select the order.
2. Click the **Resume** button.
3. Click **Resume Date/Time** and specify the resume date/time.
4. Click **OK**.
5. Click **Submit** to sign and file the order.

Processing an order set

Find and select an order set

The screenshot shows a window titled "Review Patient's Orders" for patient BRINEGAR, JOLIE - 52/F. The patient's vitals and allergies are displayed. Below this, there are tabs for "Current", "All", and "Session". A table lists order categories with expandable rows: Computed Tomography (1), Dietary (1), Laboratory (?), Radiology (4), and Respiratory Therapy (1). On the right side, there is a vertical menu with buttons: "Allergies", "View/Change", "Renew/Repeat", "Hold", "Resume", "DC", "Undo", "Order Sets" (highlighted with a red box), "Orders", and "Meds/Fluids".

Select an order set through:

- Favorites
- Service line categories
- Scroll and find

The screenshot shows a dialog box with a tabbed interface. The "ALL Favorites" tab is selected, and the "GENERAL" category is active. A checkbox is checked next to the order set "*PNEUMONIA CAP ICU [Zynx]". In the center, red text reads: "Once an order is selected, click Process or Done to proceed with the selection". On the right side, there are buttons: "Go to All Sets", "Process" (highlighted with a red box), "Remove Favorite", and "Uncheck All". At the bottom, there are buttons: "Done" (highlighted with a red box), "Cancel", and "Help".

Review Patient's Orders Sun, Mar 11

BRINEGAR, JOLIE - 52/F LIN 113470

172.72 cm 82.1 kg

Allergies/ADRs: Penicillins, Sulfa (Antibiotics)

All Sets 0 Sets Selected

All Sets	ADMIT/DISCHARGE/TRANSFUSION	COMBINATION MED SETS
ED	GENERAL	GENERAL SURGERY
LABS	MEDICATIONS	OB/GYN
ORTHOPEDIC	RENAL	RESPIRATORY

- ABDOMINAL PAIN COMORBID [Zynx]
- ACE INHIBITOR AGENTS [Zynx]
- ACETAMINOPHEN OVERDOSE [Zynx]
- ACS ADMISSION [Zynx]
- ACTH STIMULATION TEST [Zynx]
- ACUTE KIDNEY DISEASE ADM [Zynx]
- ACUTE PYELO ADMISSION [Zynx]
- ACUTE REHABILITATION ADM [Zynx]
- ADULT ACUTE AGITATION [Zynx]
- ADVICOR 20/1000
- ADVICOR 20/500
- ADVICOR 40/1000

Add an order set to favorites list

If the **Go to Favorites** button is grayed out, there are no favorite order sets established. To set up favorite order sets:

1. Select an order set.
2. Click **Add to Favorites** button.
3. Click **OK**.

Navigate around an order set

- **Prev Set / Next Set:** active if more than one order set was selected to be processed.
- **Previous Page / Next page:** active if there is more than one page of information.
- Expand an order set: click the upper most + symbol to view all order set details.






Process Orderset details			
	Previous Set	Next Set	
Previous Page	Page 1 of 1	Next Page	
+	*PNEUMONIA CAP ICU		
+ +	Admission Status	(1/1)	
+ +	Code Status	(1/1)	
+ +	Nursing Care	(2/5)	

Header information

- Available orders
- Preselected orders
- Add button

Available orders
for a section = 5
Preselected orders = 2

Header information

- +	Nursing Care	(2/5)	
<input checked="" type="checkbox"/>	+ Vital Signs	+ 03/11	
<input type="checkbox"/>	+ Blood Glucose Monitoring	+ 03/11	
<input type="checkbox"/>	Intake && Output	03/11	
<input type="checkbox"/>	+ Elevate Head of Bed	+ 03/11	
<input checked="" type="checkbox"/>	+ Notify	+ 03/11	

Add = enter
more orders
under this
section

Reminders (yellow shaded cells)

- Some of the reminders need to be expanded to view all information.

- + Medications: Antibacterial Agents: Reminders (0/0) 3 reminders
Administer antimicrobial therapy within 6 hours of presentation
+ Consider discharging patients from the hospital on the day of conversion f...
+ Select appropriate empiric antimicrobial therapy consistent with current

Core measures indicator

- Core measures indicator (ribbon): is a clickable icon that directs you to the core measures information screen. You can scroll down to read all the information provided, including references for the core measures.

Evidence-based indicator

- Evidence-based indicator (i): is a clickable icon that directs you to the Zynx literature for the evidence based information.

- + Medications: Antibacterial Agents: Reminders (0/0) 3 reminders
Administer antimicrobial therapy within 6 hours of presentation
+ Consider discharging patients from the hospital on the day of conversion f..
+ Select appropriate empiric antimicrobial therapy consistent with current

Blue/Red Pencils

- Edit an order (Blue pencil)
- Add or view required data (Red pencil)
 - Required fields (*)

Blue / Red Pencils

- + Nursing Care (2/5)
<input checked="" type="checkbox"/> + Vital Signs + 03/11
<input type="checkbox"/> + Blood Glucose Monitoring + 03/11
<input type="checkbox"/> Intake && Output 03/11
<input type="checkbox"/> + Elevate Head of Bed + 03/11
<input checked="" type="checkbox"/> + Notify + 03/11

Process Orderset details

Previous Set Next Set

Previous Page Page 1 of 2 Next Page

- *PNEUMONIA CAP ICU

- - Medications: CAP Admission to ICU Regimens: Choo... (1/4) 2 reminders

Buttons: Add More, Clear Unchecked, Edit Multiple, Save As Set

Add More button

- Allows you to add orders, order sets, or meds/fluids.
- New orders are placed under **Additional Orders** section at end of an order set.

- + Additional Orders (1/1)

+ Azelastine Nasal Spray (Astellin Nasal Spray) 03/11 2100 Stop: 04/10 2059

NASAL 1 SPRAY BID

Edit Multiple button

- Simplified view of all orders.
- Quick way to view selected orders and orders that require viewing of information or require additional information.

Orders	Pri	Start/Service	Series	Directions	Qty	Details
<input checked="" type="checkbox"/> Admit Patient (CPOE) (ADT)	R	03/11 Now				Req
<input checked="" type="checkbox"/> Code Status + (NUR.PHYS)		03/11				Avail
<input type="checkbox"/> Blood Glucose Monitoring + ...		03/11				
<input type="checkbox"/> Intake && Output (NUR.PHYS)		03/11				
<input type="checkbox"/> Elevate Head of Bed + (NUR...		03/11				
<input checked="" type="checkbox"/> Notify + (NUR.PHYS)		03/11				Avail
<input type="checkbox"/> Nothing by Mouth (NPO) (DIET)		03/11 Dinner				
<input type="checkbox"/> Regular Diet (DIET)		03/11 Dinner				
<input type="checkbox"/> 1800 Calorie Diabetic (DIET)		03/11 Dinner				
<input type="checkbox"/> Low Cholesterol/Saturated F...		03/11 Dinner				
<input type="checkbox"/> Low Sodium (2gr) (DIET)		03/11 Dinner				
<input type="checkbox"/> Low Fat (DIET)		03/11 Dinner				
<input type="checkbox"/> Tube Feeding (DIET)		03/11 Dinner				
<input type="checkbox"/> Activity + (NUR.PHYS)		03/11				
<input type="checkbox"/> Sodium Chloride 0.9% 10 ML ...		03/11 1720				
<input type="checkbox"/> 0.9% NACL 100...		03/11 1720				
<input type="checkbox"/> D5-0.45% NACL 100...		03/11 1720				
<input type="checkbox"/> Azithromycin Inj 250 ML 250...		03/11 1720				

Clear Unchecked

- Remove all unchecked orders
- Use to view only the orders you have selected for the order set. However, it is strongly recommended that you limit the use of this functionality. You should only use it, if you are 100% certain that you do not want to view orders from the order set that you have not selected.
- Cannot undo this action.
- Use with caution!

Submit and Electronically Sign Orders

1. From **Review Patient's Orders** screen, click **Submit**.
2. Use the **Session Summary** screen to review all orders before signing and filing them. If there is a discrepancy, click the F11 key or the red X icon. to return to the **Review Patient's Orders** screen to make additions or modifications.

Review Patient's Orders Sun, Mar 11

BRINEGAR, JOLIE - 52/F J.IN J.134/A Unit No: N000004526
 172.72 cm 82.1 kg ADM IN Acct No: N00000103140
Allergies/ADRs: Penicillins, Sulfa (Sulfonamide Antibiotics)

Session Summary

New Orders (13)

1.	Admit Patient (CPOE) (ADT)	03/11 1749	New
2.	Code Status + (NUR.PHYS)	03/11	New
3.	Intake && Output (NUR.PHYS)	03/11	New
4.	Notify + (NUR.PHYS)	03/11	New
5.	Regular Diet (DIET)	03/11 Dinner	New
6.	Levofloxacin Inj (Levaquin Inj) 500 MG Premixed at 500 MG/100 ML IV Q24H 150 MLS/HR	03/11 1720	New
7.	Educate/Teach Patient + (NUR.PHYS)	03/11	New
8.	BASIC METABOLIC PANEL (LAB)	03/11 1749	New
9.	CULTURE RESPIRATORY (MIC)	03/11 1749	New
10.	CHEST PA AND 1 LAT (RAD)	03/11	New
11.	RT: Oxygen Therapy + (NUR.PHYS)	03/11	New

PIN

OK Cancel Hold Help

3. After reviewing orders, enter the unique four digit PIN provided to you by your facility.
4. Click **OK**.

Electronic Medication Reconciliation (eMed Rec)

Admissions and Med Rec

Admissions and eMed Rec is a process to be completed by admitting nursing staff and providers. It is feasible that more than one provider is reviewing the home meds list and taking action on them.

To access medication reconciliation:

- Select a patient from the rounding list.
- Click **Order** button at the bottom of the rounding list.
- Click **Reconcile Meds** button.

No home meds to report

1. Select patient from rounding list.
2. Click **Order** button.
3. Click **Reconcile Meds**.
4. Click **Upd Med List**.
5. Click **Set Profile to No Meds**.

Identify updated home meds

1. Select patient from rounding list.
2. Click **Order** button.
3. Click **Reconcile Meds**.
4. Notice the **Last Taken** column. If admitting nurse has not reviewed the list with the patient, there is no information in the last taken column.

- Home Meds (10)	Drug Class	Last Taken	Review	DC	Cont	Hold
Macrolides			Review	DC	Cont	Hold
Azithromycin (Zithromax) 500 MG TABLET 500 MG PO DAILY #3 TAB	Reported	<Last Taken>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Iron Preparations			Review	DC	Cont	Hold
Ferrous Sulfate (Fesul) 325 MG TABLET 325 MG PO C/BK/DIN	Reported	<Last Taken>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hmg-Coa Reductase Inhibitors			Review	DC	Cont	Hold
Simvastatin (Zocor) 40 MG TABLET 40 MG PO BEDTIME	Reported	<Last Taken>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Beta-Adrenergic Blocking Agent			Review	DC	Cont	Hold
Metoprolol Tartrate (Lopressor) 50 MG TABLET 50 MG PO BID	Reported	<Last Taken>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dihydropyridines			Review	DC	Cont	Hold
Amlodipine Besylate/Benazepril (Lotrel 10-20 Mg) 1 C 1 CAP PO DAILY	Reported	<Last Taken>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Anxiolytics, Sedatives & Hypno			Review	DC	Cont	Hold
Zolpiden Tartrate (Ambien) 10 MG TABLET 10 MG PO BEDTIME/PAN	Reported	<Last Taken>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Addressing home meds marked for further information

There will be times that admitting nurse staff marks a home medication with attention required for further follow up. The visual cue to identifying these meds is the yellow shaded cell under **Last Taken** column. Click on the yellow shaded cell to view the medication information and gather more information as needed.

- Home Meds (3)	Drug Class	Last Taken	Review	DC	Cont	Hold
Hmg-Coa Reductase Inhibitors			Review	DC	Cont	Hold
Rosuvastatin Calc (Crestor 10 Mg Tablet) 10 MG TABLET 20 MG PO HS	Reported	10/05/11 @ 2000	10/06/11 1729	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Proton-Pump Inhibitors			Review	DC	Cont	Hold
Pantoprazole (Protonix) 40 MG TABLET,OR 40 MG PO DAILY	Reported	10/06/11 @ 1000	10/06/11 1730	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bone Resorption Inhibitors			Review	DC	Cont	Hold
Risedronate Sodium (Actonel) 5 MG TABLET 5 MG PO DAILY #1 TAB	Reported	10/05/11 1800NBA1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
+ Discontinued Home Meds (5)						

DC home meds

If the provider decides to discontinue a medication, the **DC** option is selected. Another screen may display prompting provider to choose a discontinue reason. This varies by facility.

Home Meds (3)	Drug Class	Last Taken	Review	DC	Cont	Hold
Hmg-Coa Reductase Inhibitors			Review	DC	Cont	Hold
Rosuvastatin Calc (Crestor 10 Mg Tablet) 10 MG TABLET 20 MG PO HS	Reported	10/05/11 @ 2000	a	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Proton-Pump Inhibitors			Review	DC	Cont	Hold
Pantoprazole (Protonix) 40 MG TABLET.DR 40 MG PO DAILY			10/06 1720	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bone Resorption Inhibitors			Review	DC	Cont	Hold
Risedronate Sodium (Actonel) 5 MG TABLET 5 MG PO DAILY W/ TAB				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
+ Discontinued Home Meds (5)						

Discontinue Reason
Data Entry Correction
DC by doctor post disch
Med changed post disch
Patient allergy/ADR
Patient stopped taking
Therapy completed
Complete

Convert home meds to inpatient meds (Cont button)

To continue a medication as an inpatient medication, the **Last Taken** information needs to be reviewed by the provider to determine next dose for the patient in the event the provider decides to continue the home medication. The **Cont** option is selected. MEDITECH will review the medication and perform all appropriate interaction and rule checks. The provider will receive all appropriate pop-ups (e.g. first dose warning, drug/drug or drug/allergy interactions).

- If the provider chooses **Cont**, and a match is not automatically available in the inpatient medication dictionary, the provider will be given the type-ahead look-up screen to locate the inpatient medication or the appropriate equivalent. Using the type-ahead functionality, select appropriate medication and route.
- Select appropriate string (or closest string and edit).
- Select **Done**.

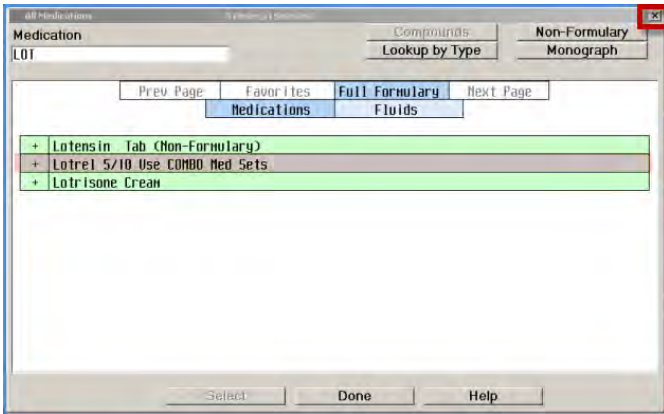
Talking Points: If the medication is an undefined medication (in brackets), MEDITECH will not perform interaction and rule checks.

Continue a home combo med to an inpatient med

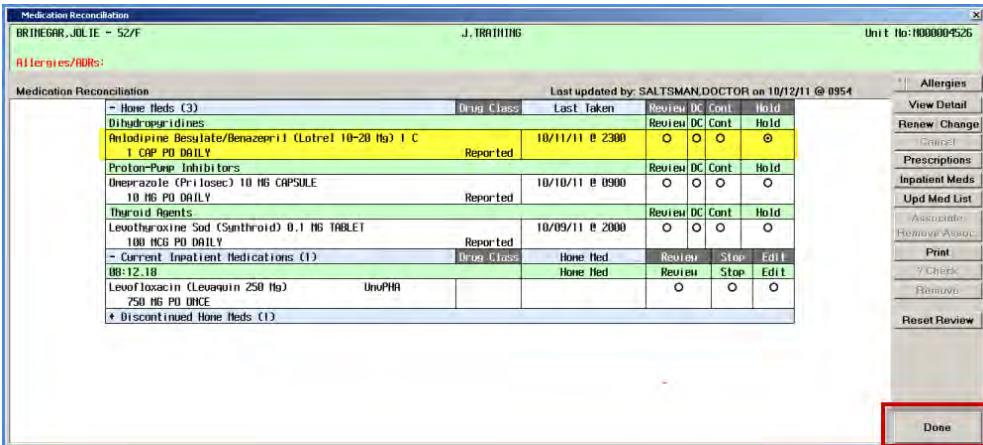
If combination medication is on formulary, the provider will be able to order as per the usual procedure. If the combination med is not on formulary, follow these steps:

1. The provider is presented with a screen as an indicator that the combo med needs to be entered from the inpatient drug dictionary as a

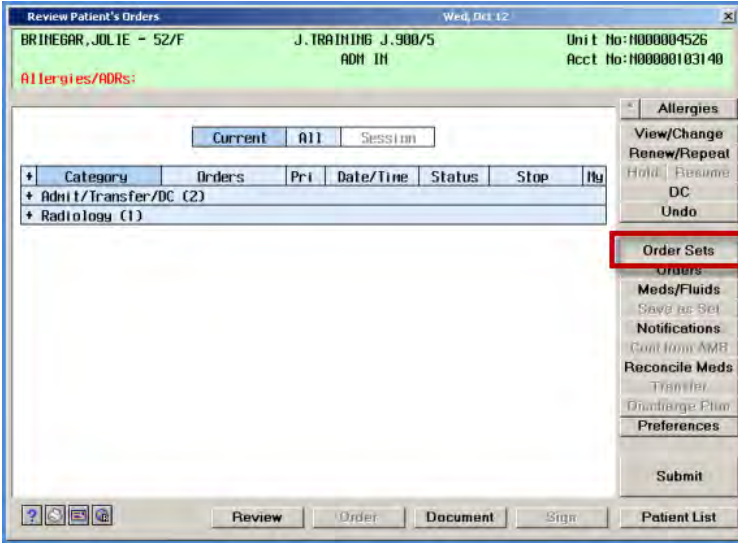
combo med. Click **X** to exit this screen.



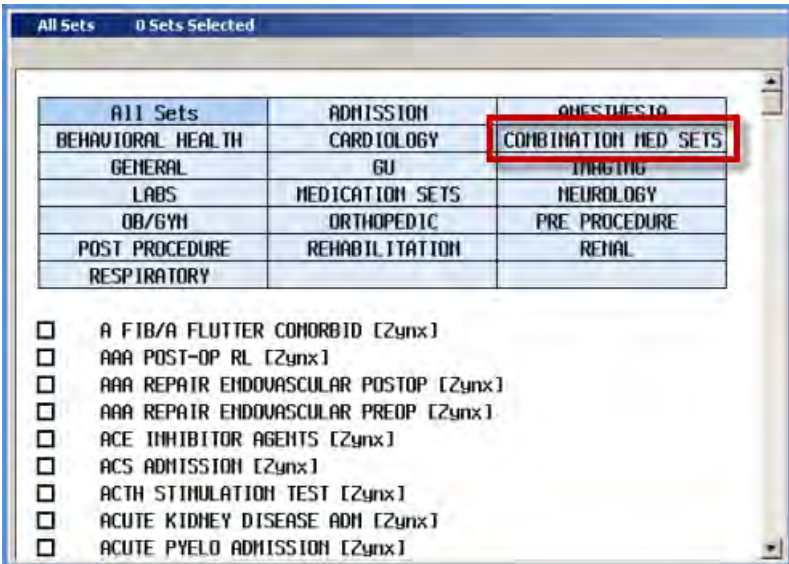
2. Click **Hold** option for the combo med (Lotrel in the example below).
3. Click **Done**. This exits out of the med rec routine. Remember the provider can go in and out of this routine as needed.



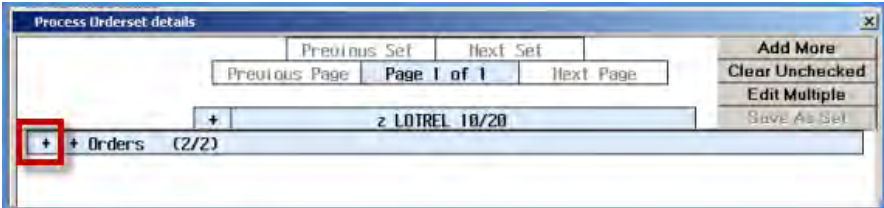
4. Click **Order Sets** button.



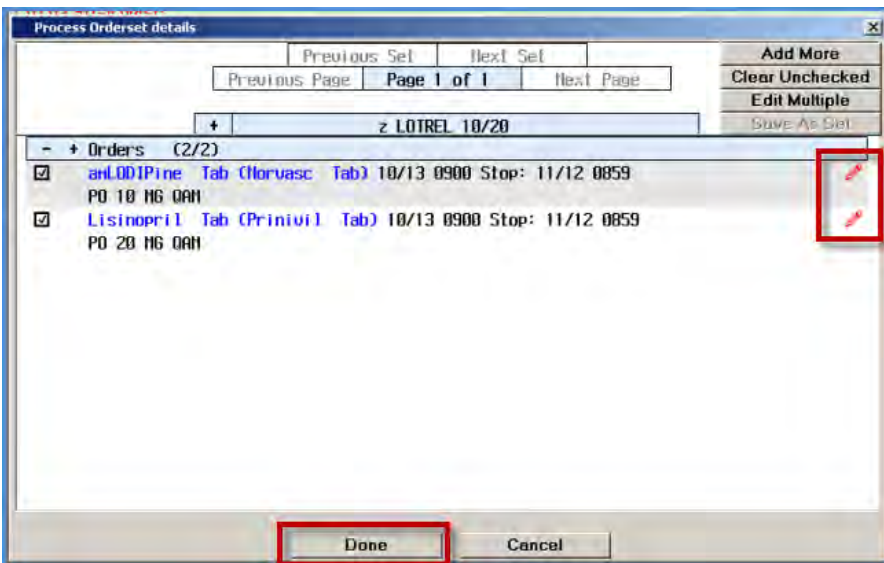
5. The provider can either scroll down through the list to find the combo med or click the **Combination Med Sets** cell to filter the list for combo meds only. In this example, use the second option.



6. Scroll down and click the check box next to the appropriate medication, then click **Done**.
7. Click the outer left plus sign (+) to expand the list.



8. Click each red pencil to complete required information. Once the required information is completed, the red pencils turn blue.
9. Click **Done**.



Hold home meds

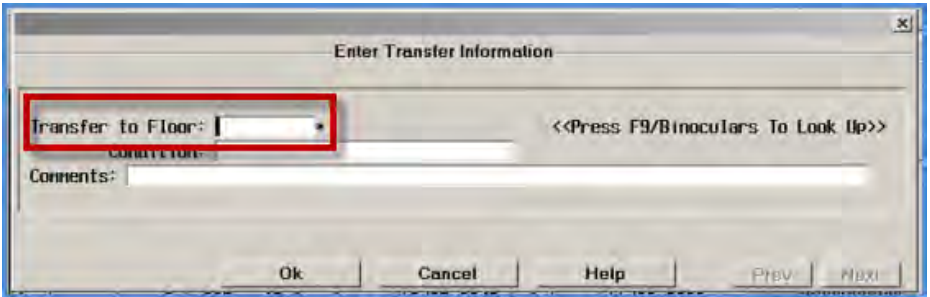
Use this option to keep a medication on the home list. This will allow the medication to be converted to an inpatient medication later if needed, or to be discontinued. It will also keep the medication on the home list to continue the medication upon discharge.

From the medication reconciliation routine, select **Hold** for the medication you want to hold.

Level of care transfer and medication reconciliation

If a patient needs to be transferred to a new level of care, medication reconciliation must be performed by the provider. Unlike the admission process where more than one provider can complete med rec, this process is to be completed only by one provider. Also, all orders are reconciled, not just medications.

1. From **Review Patient's Orders** screen, click **Transfer** button.
2. The **Enter Transfer Information** screen appears. Please note this screen is not reflective of what your facility may display. In this example, it is required to enter **Transfer to Floor** (the * next to the field indicates a required field). Use the **F9** key to look up a list of options.



3. Select the new location from the list provided. Enter all required information for your facility.
4. Click **OK**.
5. The **Continue Orders Upon Transfer** screen displays the **Home Meds** section (usually collapsed), and the **Inpatient Orders** section (usually expanded). By default all inpatient orders display with **Stop** option selected. Provider must review each order and determine an appropriate action of **Cont** or **Stop**.



Since all orders default to **Stop**, if you click **Done**, **Submit**, and **PIN** the order, you will discontinue all these orders. Please exercise caution during the transfer process.

-- Inpatient Orders				Cont	Stop
- + Consultations (1)	Home Med	Who	Cont	Stop	
+ PHARMACY CONSULTS 03/21		i	<input type="radio"/>	<input type="radio"/>	
- + Computed Tomography (1)	Home Med	Who	Cont	Stop	
+ CT ANGIO ABD RUNOFF W-NO CONT 03/21		i	<input type="radio"/>	<input type="radio"/>	
- + Dietary (1)	Home Med	Who	Cont	Stop	
+ Regular Diet 04/10 L			<input type="radio"/>	<input type="radio"/>	
- + Radiology (1)	Home Med	Who	Cont	Stop	
+ CHEST PA AND 1 LAT 03/21		i	<input type="radio"/>	<input type="radio"/>	
- + Medications (15)	Home Med	Who	Cont	Stop	
Lansinoh Cream 04/10 1040 Stop: 05/10 1039 TOPICAL 1 APPLIC PRN PRN Sore Nipples			<input type="radio"/>	<input type="radio"/>	
PITOCIN 30 UNITS/500ML D5LR (Oxytocin 30 Units/500ML D51r) 500 ML 125 MLS/HR 04/10 1040 Stop: 05/10 1039			<input type="radio"/>	<input type="radio"/>	
Acetaminophen Tab (Tylenol Tab) 04/10 1040 Stop: 05/10 1039 PO 650 MG Q4H/PRN PRN MILD PAIN PER PROTOCOL			<input type="radio"/>	<input type="radio"/>	
- + Nursing (31)	Home Med	Who	Cont	Stop	
+ Collect Specimen 03/18		i	<input type="radio"/>	<input type="radio"/>	
+ H&H Post Trasnsfusion 02/19		i	<input type="radio"/>	<input type="radio"/>	
+ Code Status + 03/06		i	<input type="radio"/>	<input type="radio"/>	
+ Vital Signs + 03/06		i	<input type="radio"/>	<input type="radio"/>	
+ Notify MD - Vitals 03/06		i	<input type="radio"/>	<input type="radio"/>	
+ Blood Glucose Monitoring + 03/20		i	<input type="radio"/>	<input type="radio"/>	
+ Notify MD - Vitals 03/20		i	<input type="radio"/>	<input type="radio"/>	

To continue all orders (Consultations, Computed Tomography, Dietary, etc...), click the upper **Cont** column header (see screenshot below).

-- Inpatient Orders				Cont	Stop
- + Consultations (1)	Home Med	Who	Cont	Stop	
+ PHARMACY CONSULTS 03/21		i	<input type="radio"/>	<input type="radio"/>	
- + Computed Tomography (1)	Home Med	Who	Cont	Stop	
+ CT ANGIO ABD RUNOFF W-NO CONT 03/21		i	<input type="radio"/>	<input type="radio"/>	
- + Dietary (1)	Home Med	Who	Cont	Stop	
+ Regular Diet 04/10 L			<input type="radio"/>	<input type="radio"/>	
- + Radiology (1)	Home Med	Who	Cont	Stop	
+ CHEST PA AND 1 LAT 03/21		i	<input type="radio"/>	<input type="radio"/>	
- + Medications (15)	Home Med	Who	Cont	Stop	
Lansinoh Cream 04/10 1040 Stop: 05/10 1039 TOPICAL 1 APPLIC PRN PRN Sore Nipples			<input type="radio"/>	<input type="radio"/>	
PITOCIN 30 UNITS/500ML D5LR (Oxytocin 30 Units/500ML D51r) 500 ML 125 MLS/HR 04/10 1040 Stop: 05/10 1039			<input type="radio"/>	<input type="radio"/>	
Acetaminophen Tab (Tylenol Tab) 04/10 1040 Stop: 05/10 1039 PO 650 MG Q4H/PRN PRN MILD PAIN PER PROTOCOL			<input type="radio"/>	<input type="radio"/>	
- + Nursing (31)	Home Med	Who	Cont	Stop	
+ Collect Specimen 03/18		i	<input type="radio"/>	<input type="radio"/>	
+ H&H Post Trasnsfusion 02/19		i	<input type="radio"/>	<input type="radio"/>	
+ Code Status + 03/06		i	<input type="radio"/>	<input type="radio"/>	
+ Vital Signs + 03/06		i	<input type="radio"/>	<input type="radio"/>	
+ Notify MD - Vitals 03/06		i	<input type="radio"/>	<input type="radio"/>	
+ Blood Glucose Monitoring + 03/20		i	<input type="radio"/>	<input type="radio"/>	
+ Notify MD - Vitals 03/20		i	<input type="radio"/>	<input type="radio"/>	

To continue only all medications and/or only all nursing orders, click the **Cont** column heading in the appropriate location.

- - Inpatient Orders				Cont	Stop
- + Consultations (1)	Home Med	Who	Cont	Stop	
+ PHARMACY CONSULTS 03/21		i	<input type="radio"/>	<input type="radio"/>	
- + Computed Tomography (1)	Home Med	Who	Cont	Stop	
+ CT ANGIO ABD RUNOFF W-WO CONT 03/21		i	<input type="radio"/>	<input type="radio"/>	
- + Dietary (1)	Home Med	Who	Cont	Stop	
+ Regular Diet 04/10 L			<input type="radio"/>	<input type="radio"/>	
- + Radiology (1)	Home Med	Who	Cont	Stop	
+ CHEST PA AND 1 LAT 03/21		i	<input type="radio"/>	<input type="radio"/>	
- + Medications (15)	Home Med	Who	Cont	Stop	
Lansinoh Cream 04/10 1040 Stop: 05/10 1039 TOPICAL 1 APPLIC PRN PRN Sore Nipples			<input type="radio"/>	<input type="radio"/>	
PITOCIN 30 UNITS/500ML D5LR (Oxytocin 30 Units/500ML D51r) 500 ML 125 MLS/HR 04/10 1040 Stop: 05/10 1039			<input type="radio"/>	<input type="radio"/>	
Acetaminophen Tab (Tylenol Tab) 04/10 1040 Stop: 05/10 1039 PO 650 MG Q4H/PRN PRN MILD PAIN PER PROTOCOL			<input type="radio"/>	<input type="radio"/>	
- + Nursing (31)	Home Med	Who	Cont	Stop	
+ Collect Specimen 03/18		i	<input type="radio"/>	<input type="radio"/>	
+ H&H Post Transfusion 02/19		i	<input type="radio"/>	<input type="radio"/>	
+ Code Status + 03/06		i	<input type="radio"/>	<input type="radio"/>	
+ Vital Signs + 03/06		i	<input type="radio"/>	<input type="radio"/>	
+ Notify MD - Vitals 03/06		i	<input type="radio"/>	<input type="radio"/>	
+ Blood Glucose Monitoring + 03/20		i	<input type="radio"/>	<input type="radio"/>	
+ Notify MD - Vitals 03/20		i	<input type="radio"/>	<input type="radio"/>	

Once the provider makes all appropriate options, click **Done**. The medication status will display as **Cont-Xfr** or **Stop-Xfr**, depending on the provider actions.

Note: The transfer orders will not go to their respective department until nursing has received the orders.



Discharge Medication Reconciliation Process

When a provider performs the discharge med rec process, he/she is essentially determining which inpatient medications, as well as home medications the patient should take after being discharged from the facility. Multiple providers can collaborate on this process. All home medications need to be reconciled at discharge. Part of this process entails the provider completing a brief discharge note with med rec. Completion of this report is the trigger for nursing staff to know when the provider has completed this process.

Discharge Plan

The Discharge Plan process can begin prior to discharging the patient.

1. From the Review Patient's Order screen, click **Discharge Plan** button.
2. Document the anticipated **Discharge Date**. Keep in mind that this is not a discharge order, and this does not have to be the actual discharge date, it is a way to communicate to the rest of the team what the anticipated discharge date is.
3. Select an anticipated **Discharge Disposition**. Use the scroll bars to view all available options. Again, this is not an order.
4. Click **OK/Next** button.
5. From **Review Patient's Orders** screen, click the **pencil icon** next to Prescriptions.

Discharge Date: 10/10/11			
Discharge Disposition: ROUTINE HOME/SELF CARE 01			
+ Discharge Plan			
+ 	Prescriptions (3)		Origin: Plan
	Orders		
	Referrals		
	Reports	Author	Status

Some meds appear in blue and others in black. This is to help the provider differentiate between inpatient (blue and Active status) and home medications (black and Reported status).

Process Discharge Prescriptions
 BRINEGAR, CHRIS - 29/F J. TRAINING Unit No: N000004522

Allergies/ADRs: BEE
 No conflict checking is provided for [] medications.

Medication	Inp Status	Conv	Cont	Stop	Renew	Cnc
Albuterol(Proventil 90MG/Act) 17 GH INHALER 2 PUFF INH Q6H/PRN PRN	Active	<input type="radio"/>				
Analgesics And Antipyretics, M						
Acetaminophen(Apap) 325 MG TABLET 2 TAB PO Q4H/PRN PRN	Active	<input type="radio"/>				
Anxiolytics, Sedatives & Hypno						
Zolpidem Tartrate(Ambien) 5 MG TABLET 5 MG PO HS/PRN PRN	Active	<input type="radio"/>				
Proton-Pump Inhibitors						
Pantoprazole (Protonix) 40 MG TABLET.DR 40 MG PO DAILY	Reported	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Anti-Inflammatory Agents CSkin						
Hydrocortisone(Hydrocortisone 1% Cream) 1 ... 1 APPLIC TOPICAL DAILY	Active	<input type="radio"/>				
Bone Resorption Inhibitors						
Risedronate Sodium (Actonel) 5 MG TABLET 5 MG PO DAILY #1 TAB	Held Reported		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

View Done Cancel Help

6. To convert an inpatient active medication to a home medication, click the **Conv** option.

Analgesics And Antipyretics, M	Inp Status	Conv	Cont	Stop	Renew	Cnc
Acetaminophen(Apap) 325 MG TABLET 2 TAB PO Q4H/PRN PRN	Active	<input type="radio"/>				

7. Notice that the dosing information populates from the inpatient order. From here, the provider can make any necessary changes such as dose and frequency. It is required to enter **QTY** or **Days** to fill the prescription. If instructions are needed on the prescription, they can be entered into the Instructions field.

Modify Prescription

Acetaminophen (Apap) 325 MG TABLET
 1 TAB PO Q6H/PRN PRN #21 0 Refills

Remove Favorite
 Monograph
 Replace/Change
 Daily Dosing
 MAR

Dose	Units	Route	Frequency	Qty	Days	Disp Unit	Refills	NS
1	TAB	PO	Q6H/PRN PRN	15			0	

Instructions: Diagnosis:

Comments: Date:

Ordering Provider: DR. CPOE Ordering Location: J. TRAINING

Done Cancel

One of these fields is required!

8. Click **Done** button. Notice that the new dosing information is displayed for the converted medication.

Analgesics And Antipyretics, M	Inp Status	Conv	Cont	Stop	Renew	Cnc
Acetaminophen(Apap) 325 MG TABLET 1 TAB PO Q8H/PRN PRN #15 PRN	Active	<input checked="" type="radio"/>				

Continuing an IV medication at discharge

If there is an IV medication to continue for the patient at discharge, there is no convert option (see first screenshot below). Scroll down to the **New Prescriptions** section and click on the **pencil icon** to enter this as a new prescription.

08:12.18	Inp Status	Conv	Cont	Stop	Renew	Cnc
LEVOFLOXACIN 250MG/50ML D5W (LEVAQUIN 250M... Dose: 250 MG Premixed at 250 MG/50 ML DAILY 100 MLS/HR	Active	<input type="checkbox"/>				

Rosuvastatin Calc (Crestor 10 Mg Tablet) 10 MG TABLET 20 MG PO HS		<input type="radio"/>		<input type="radio"/>		
Opiate Agonists						
Morphine Sulfate (Ms Contin) 30 MG TABLET.SA 30 MG PO Q8H 30 Days		<input type="radio"/>		<input type="radio"/>		
- Past Inpatient Medications (3)						
IN Visit 10/06/11 J.TRAINING, COUGH						
Proton-Pump Inhibitors					Conv	
Pantoprazole(Protonix) 40 MG TABLET.DR 40 MG PO DAILY				<input checked="" type="checkbox"/>	<input type="radio"/>	
IN Visit 09/30/11 J.ZE, UNABLE TO BREATHE						
Analgesics And Antipyretics, M					Conv	
Acetaminophen(Apap) 325 MG TABLET 1 TAB PO Q8H/PRN PRN PRN				<input type="radio"/>		
Loop Diuretics					Conv	
Furosemide(Lasix) 20 MG TAB 20 MG PO DAILY				<input type="radio"/>		
New Prescriptions (0)						Details

What if a medication is both a home med and an inpatient medication

If a medication is both a home med and an inpatient medication you can choose to have the patient continue the home medication, and not the inpatient active medication. Notice the **Cont, Stop, Renew** options for the

home med. Notice that there is no **Conv** option for the home med (only for the inpatient med). To continue the home med, click **Cont**. This will not prompt for a discharge prescription.

Beta-Adrenergic Blocking Agent	Inp Status	Conv	Cont	Stop	Renew	Cnc
Metoprolol Succinate(Toprol XL) 50 MG TAB.... 50 MG PO DAILY	Active II	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Metoprolol Succinate (Toprol XL) 50 MG TAB.SR. 50 MG PO DAILY	Continued Reported		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Renewing a home medication

If the provider wants a patient to continue a home medication, but needs to write a new prescription for it because the patient ran out of the home supply, click **Renew**.

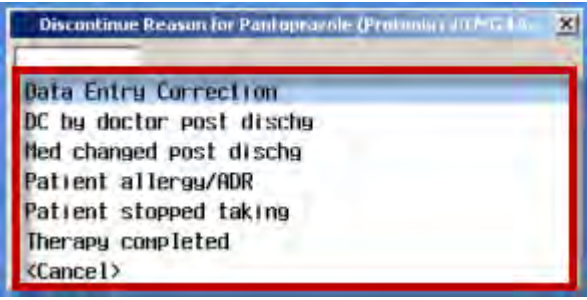
Dihydropyridines	Inp Status	Conv	Cont	Stop	Renew	Cnc
Amlodipine Besylate(Norvasc) 5 MG TABLET 10 MG PO QAM	Active	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amlodipine Besylate/Benazepril (Lotrel 10-20 M 1 CAP PO DAILY #30 CAP	Held		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

Discontinuing a medication

1. If the provider wants the patient to discontinue taking a medication, click the **Stop** option.

Proton-Pump Inhibitors	Inp Status	Conv	Cont	Stop	Renew	Cnc
Pantoprazole (Protonix) 40 MG TABLET.DR 40 MG PO DAILY	Continued Reported		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

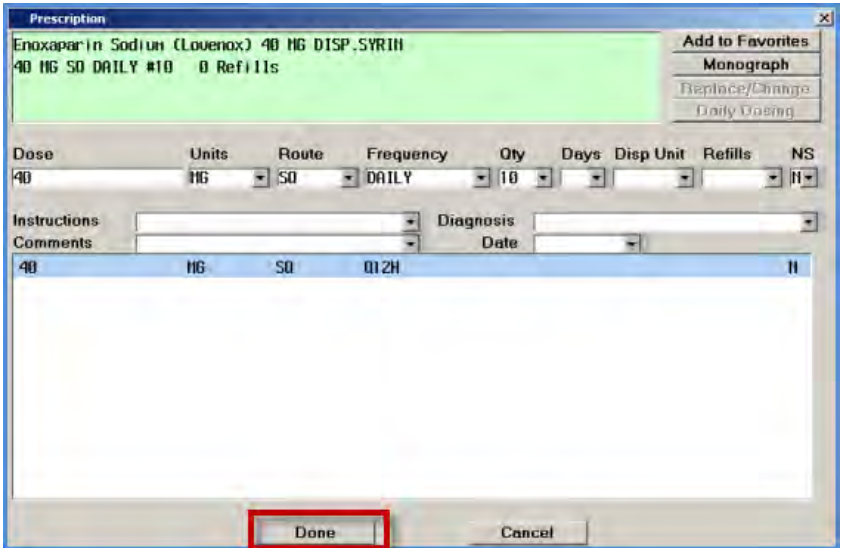
2. Select a discontinue reason if prompted to do so.



Placing new orders at discharge

If you want to order a new discharge medication, scroll down to the **New Prescriptions** section and click the **pencil icon**. This is the same functionality as adding a new medication in the inpatient functionality.

1. Use type-ahead to enter a look up a med.
2. Select a medication.
3. Choose a string (make edits as needed).
4. Choose **Qty** or **Days**.
5. Click **Done**.



6. Newly added prescriptions display under **New Prescriptions** section. Click **Done**.

Med Rec Discharge Report

When the provider is ready to document that he/she has completed the discharge med rec process, click the **pencil icon** next to **Reports**.

Discharge Date: 10/10/11	
Discharge Disposition: ROUTINE HOME/SELF CARE 01	
Discharge Plan	
5 MG PO HS/PRII PRII 7 Days	
Hydrocortisone (Hydrocortisone 1% Cream) 1 APPLIC 1 APPLIC TOPICAL DAILY #1	Inpatient: Convert
Enoxaparin Sodium (Lovenox) 40 MG DISP.SYRIN 40 MG SQ DAILY #10	New
Penicillin U Potassium (Penicillin Vk) 250 MG TAB 250 MG PO Q12H	None: Stop
Rosuvastatin Calc (Crestor 10 Mg Tablet) 10 MG TA 20 MG PO HS	None: Stop
Morphine Sulfate (Ms Contin) 30 MG TABLET.SA 30 MG PO Q6H 30 Days	None: Stop
Orders	
Referrals	
Reports	Author Status

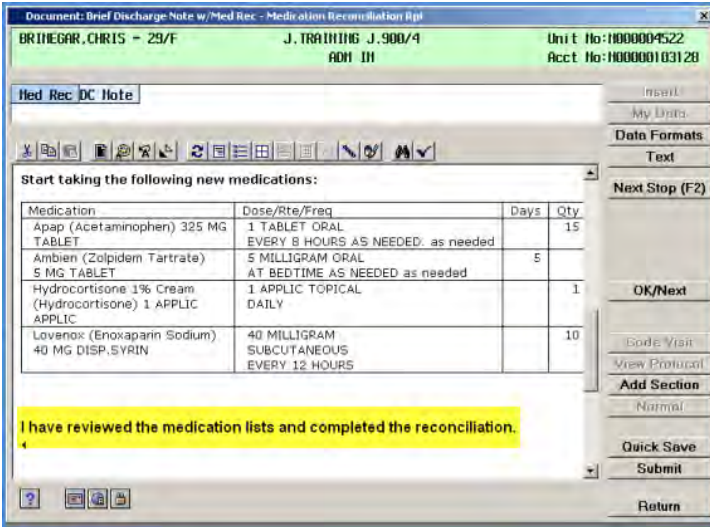
Brief Discharge Note w/ Med Rec

1. Select **Brief Discharge Note w/Med Rec**.

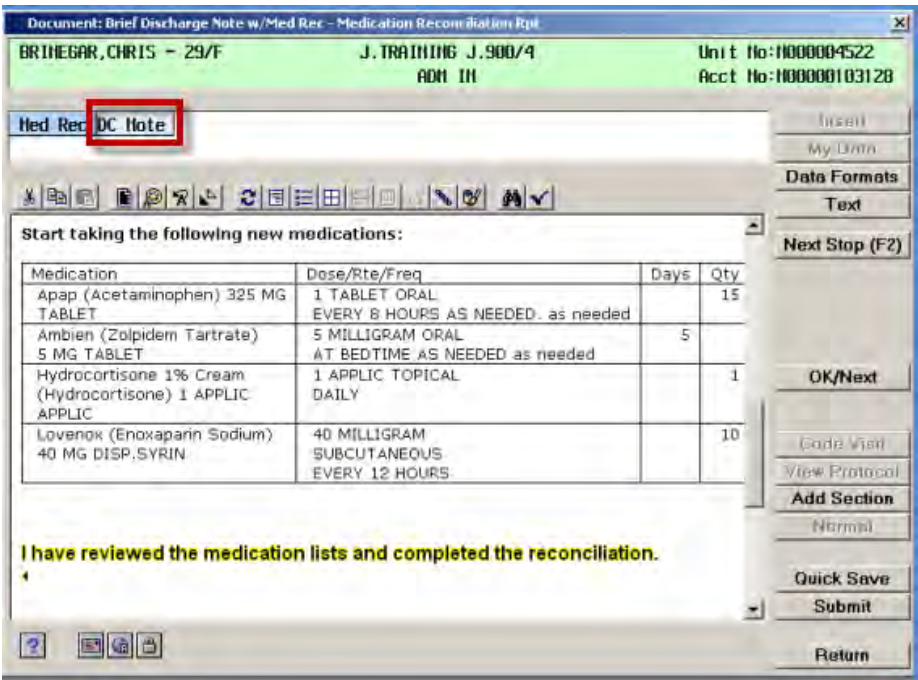
The screenshot shows a 'Templates' dialog box with a search bar at the top and two tabs: 'Favorites' and 'All'. The 'Favorites' tab is active, and a single template entry, 'Brief Discharge Note w/Med Rec', is listed and highlighted with a red rectangular box. At the bottom of the dialog, there are 'OK' and 'Cancel' buttons.

2. Click **OK**.
3. The report automatically populates all the home medication information, as well as a provider statement, "I have reviewed the

medication lists and completed the reconciliation.”



- Click **Submit**, or the **DC Note** tab and complete the brief discharge note at this time.



5. Enter the desired information in the **Brief Discharge Note** using the **OK/Next** button to navigate through each note section as you normally would in when documenting a progress note.
6. Click **Submit**.
7. Click **Done**.
8. Click **Signed**.

THE KYZ NETWORK

Brief Discharge Note w/Med Rec

Patient Name: CHRIS BRINEGAR **Unit Number:** N000004522
Date of Birth: 05/27/82 **Patient Status:** ADM IN
Attending Doctor: Sartain, Teresa MD **Account Number:** N000001031

Medication Reconciliation Rpt

Home Medications:

Active Scripts

Medication	Dose/Rta/Freq	Days	Qty	Entered	Last Reconciled
Protonix (Pantoprazole) Strength: 40 MG TABLET DR	40 MG PO DAILY			10/06/11 1528	10/06/11 1720
Actonel (Risedronate Sodium) Strength: 5 MG TABLET	5 MG PO DAILY		1	10/07/11 0611	

Stop taking the following medications:

Medication	Dose/Rta/Freq
Protonix (Pantoprazole) 40 MG TABLET DR	40 ORAL DAILY

Buttons: **Pending** **Draft** **Signed** **Cancelled** **CoSigner** **Required Data** **Return**

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