

# VGH Cerner Basics

# Setting Up: My Experience

The screenshot displays a medical software interface with a menu bar at the top containing 'Task', 'Edit', 'View', 'Patient', 'Chart', 'Links', 'Notifications', 'Navigation', and 'Help'. Below the menu bar is a toolbar with various application icons and labels such as 'CareConnect', 'PHSA PACS', 'VCH and PHC PACS', 'FormFast WFI', 'Exit', 'AdHoc', 'PM Conversation', 'Use this Application/Chart Data', 'Suspend Participation', 'Depart', 'Communicate', 'Result Copy', 'Related Records', 'iAware', 'Discern Reporting Portal', 'Anesthesia Record Viewer', 'Desktop Console Launcher', 'Protocol Office Manager', 'Patient Protocol Manager', 'Documents', 'Patient Health Education Materials', 'SHOP Guidelines and DSTs', 'UpToDate', and 'PSSL'. A secondary toolbar includes 'Message Centre', 'Patient Overview', 'Ambulatory Organizer', 'Referral Management', 'Home', 'MyExperience', 'Patient List', 'Dynamic Worklist', 'Tracking List', 'Tracking Shell', 'Perioperative Tracking', 'Time-Critical Procedures', 'Results Callback Worklist', 'Therapeutic Note', 'Reports', 'Auto Text Copy', and 'Requisition Manager'. The 'MyExperience' menu item is circled in red, with a red number '1' below it. The main content area is divided into two panels: 'My Default Organizer View' on the left and 'My MPages Selection' on the right. In the 'My Default Organizer View' panel, the 'Patient Overview' option is selected and circled in red. In the 'My MPages Selection' panel, the 'General Medicine Workflow' option is selected and circled in red. The 'My MPages Selection' panel also shows 'For Tab: Provider View' and 'For Role: Provider'.

**My Default Organizer View**

- Message Centre
- Patient Overview
- Ambulatory Organizer
- Referral Management
- Home
- MyExperience
- Patient List
- Dynamic Worklist
- Tracking List
- Tracking Shell
- Perioperative Tracking
- Time-Critical Procedures
- Results Callback Worklist
- Therapeutic Note
- Reports
- Auto Text Copy
- Requisition Manager
- CST Cerner Help
- AMS Worklist

**My MPages Selection**

For Tab: Provider View  
For Role: Provider

- Adolescent Medicine Workflow
- Allergy/Immunology Workflow
- Anesthesiology Workflow
- BMT Hematology Workflow
- Biochemical Genetics Workflow
- Cardiac Surgery Pediatric Workflow
- Cardiac Surgery Workflow
- Cardiology Pediatric Workflow
- Cardiology Workflow
- Critical Care Workflow
- Dentistry Pediatric Workflow
- Dentistry Workflow
- Dermatology Pediatric Workflow
- Dermatology Workflow
- Developmental Pediatrics Workflow
- Endocrinology Pediatric Workflow
- Endocrinology Workflow
- Gastroenterology Pediatric Workflow
- Gastroenterology Workflow
- General Medicine Workflow
- General Surgery Pediatric Workflow
- General Surgery Workflow
- Genetic Workflow
- Geriatric Medicine
- Hematology Oncology BMT Pediatric Workflow
- Hematology Oncology Workflow
- Hematology Workflow
- Immunology Pediatric Workflow
- Infectious Disease Pediatric Workflow

**IMPORTANT FOR FINDING THE INTERNAL MEDICINE PPOs!!!!!!!!!!!!!!**

# Setting Up: Adding all the Lists

Task Edit View Patient Chart Links Notifications Navigation Help

Genero 0 Critic 0 Abnorz 0

CareConnect PHSA PACS VCH and PHC PACS FormFast WFI

Exit Ad-Hoc PM Conversation Use this Application/Chart Data Suspend Participation Depart Communicate Result Copy Related Records iAware Discern Reporting Portal Anesthesia Record Viewer Desktop Console Launcher Protocol Office Manager Patient Protocol Manager Documents

Patient Health Education Materials SHOP Guidelines and DSTs UpToDate PSL

Message Centre Patient Overview Ambulatory Organizer Referral Management Home MyExperience Patient List Dynamic Worklist Tracking List Tracking Shell Perioperative Tracking Time-Critical Procedures Results Callback Worklist Therapeutic Note Reports Auto Text Copy Requisition Management

Patient Overview

Patient Overview x +

List: Internal Medicine | Internal Medicine CTU ER Triage (2) v

Geriatric Medicine | Geriatric Medicine ACE1  
Geriatric Medicine | Geriatric Medicine ACE2  
Geriatric Medicine | Geriatric Medicine ACE3  
Hematology  
Infectious Disease | Infectious Disease Urban Health  
Internal Medicine | Internal Medicine AIMS  
Internal Medicine | Internal Medicine CTU Blue  
Internal Medicine | Internal Medicine CTU Coral  
Internal Medicine | Internal Medicine CTU ER Triage  
Internal Medicine | Internal Medicine CTU Green  
Internal Medicine | Internal Medicine CTU Orange  
Internal Medicine | Internal Medicine CTU Pink  
Internal Medicine | Internal Medicine CTU Purple  
Internal Medicine | Internal Medicine CTU Yellow  
Internal Medicine | Internal Medicine Perioperative  
Nephrology  
Nephrology | Nephrology Inpatient  
Nephrology | Nephrology Renal Transplant  
Neurology  
Respirology  
Rheumatology  
Manage Care Team Lists

Location

STR-11  
SPH ED Hold  
STR-02  
SPH ED

Care Team Lists

Medical Service

Internal Medicine

VGH

Internal Medicine  
 Internal Medicine  
 Internal Medicine | Internal Medicine AIMS  
 Internal Medicine | Internal Medicine CTU Blue  
 Internal Medicine | Internal Medicine CTU Coral  
 Internal Medicine | Internal Medicine CTU ER Triage  
 Internal Medicine | Internal Medicine CTU Green  
 Internal Medicine | Internal Medicine CTU Orange  
 Internal Medicine | Internal Medicine CTU Pink  
 Internal Medicine | Internal Medicine CTU Purple  
 Internal Medicine | Internal Medicine CTU Yellow  
 Internal Medicine | Internal Medicine Perioperative  
 Internal Medicine | Internal Medicine COVID 1  
 Internal Medicine | Internal Medicine COVID 2  
 Internal Medicine | Internal Medicine COVID 3  
 Internal Medicine | Internal Medicine COVID 4  
 Internal Medicine | Internal Medicine COVID 5  
 Internal Medicine | Internal Medicine Thrombosis Consults

Save Cancel

IM Jrs:

- Add all these IM
- Add all XC subspecialties

MSIs/Off Service:

- Add all CTU teams

Clinical link on: P0783 SFREIMAN Friday, 15-July-2022 08:58

# Printing Lists

The screenshot shows a medical software interface with a menu bar at the top (Task, Edit, View, Patient, Chart, Links, Notifications, Navigation, Help) and a toolbar with various icons. Below the toolbar is a 'Patient Overview' section with a search bar and a list of filters. A dropdown menu is open, showing 'Internal Medicine | Internal Medicine CTU Blue (18)'. A checkbox is checked, indicating that all 18 records are selected. In the top right corner, there are buttons for 'Add Patient', 'Establish Relationships', and a 'Print' button circled in red with a '1' next to it. Below the 'Print' button is a 'Print' dropdown menu with options for 'Simplified' and 'Detailed (16/18)', with the 'Print' option circled in red and a '3' next to it. The main area is a table with columns for Patient Information, Location, New Results, and Diagnoses. The table contains 18 rows of patient data, with some rows having a hatched background. The 'Print' button is located in the top right corner of the table area.

| Patient Information | Location              | New Results                | Diagnoses                                                                |
|---------------------|-----------------------|----------------------------|--------------------------------------------------------------------------|
| [Redacted]          | STR-05<br>SPH ED Hold | New Lab/Diagnostic Results | 1 - Opioid Overdose or Intoxication<br>2 - Aspiration Pneumonia          |
| [Redacted]          | 7034-01<br>SPH 7C     | New Lab/Diagnostic Results | 1 - Abdominal Pain NYD                                                   |
| [Redacted]          | 7009-01<br>SPH 7A     | New Lab/Diagnostic Results | 1 - Dyspnea<br>2 - Congestive Heart Failure (CHF)                        |
| [Redacted]          | STR-04<br>SPH ED Hold | New Lab/Diagnostic Results | 1 - Headache NOS                                                         |
| [Redacted]          | 7026-03<br>SPH 7C     | New Lab/Diagnostic Results | 1 - Respiratory failure<br>2 - Cellulitis of right leg                   |
| [Redacted]          | 7003-01<br>SPH 7A     | New Lab/Diagnostic Results | 1 - Chronic Obstructive Pulmonary Disease (COPD)<br>2 - Delirium (Acute) |
| [Redacted]          | 6021-01<br>SPH 6B     | [Hatched]                  | [Hatched]                                                                |
| [Redacted]          | 7030-02<br>SPH 7C     | New Lab/Diagnostic Results | [Hatched]                                                                |
| [Redacted]          | 7025-04<br>SPH 7B     | [Hatched]                  | [Hatched]                                                                |
| [Redacted]          | 7038-03<br>SPH 7D     | New Lab/Diagnostic Results | 1 - Acute Kidney Injury (AKI)<br>2 - Hyperkalemia                        |
| [Redacted]          | 7042-02<br>SPH 7D     | New Lab/Diagnostic Results | 1 - Anorexia NOS                                                         |
| [Redacted]          | 7002-01<br>SPH 7A     | New Lab/Diagnostic Results | 1 - General Weakness NYD                                                 |

# Printing Lists

The screenshot shows a medical software interface with a 'Patient Overview' window and a 'Printing Preferences' dialog box. The 'Patient Overview' window has a 'Print' button circled in red with a '2' next to it. A callout box points to the printer selection area with the text: 'Generally chooses the closest printer but double check the name!'. The 'Printing Preferences' dialog box has several elements circled in red: the 'Layout' tab (5), the 'Print' button (1), the 'Landscape' orientation option (6), and the 'Preferences' button (4). The 'Printing Preferences' dialog box is titled 'Printing Preferences' and has tabs for 'Client Setting', 'Layout', and 'Paper/Quality'. The 'Layout' tab is selected, showing 'Orientation' options: 'Landscape', 'Portrait', and 'None'. The 'Landscape' option is selected and circled in red. The 'Print' button is circled in red with a '1' next to it. The 'Preferences' button is circled in red with a '4' next to it. The 'Layout' tab is circled in red with a '5' next to it. The 'Landscape' option is circled in red with a '6' next to it. The 'Printing Preferences' dialog box also has 'OK' and 'Cancel' buttons at the bottom.

Generally chooses the closest printer but double check the name!

2 Patient Overview

Print

Printing Preferences

Client Setting | Layout | Paper/Quality

Orientation:

Landscape

Portrait

Landscape

None

6

1

4

5

Print

Cancel

Apply

Advanced...

OK

Cancel

# Printing Lists: Resetting the list

The screenshot shows the PowerChart Organizer interface. At the top, there is a menu bar with options like Task, Edit, View, Patient, Chart, Links, Notifications, Navigation, and Help. Below the menu is a toolbar with various icons and buttons. A callout box with a blue border and white background points to the 'Print' button, which is circled in red. The callout text reads: "Uncheck the checks before you open a patient on the list".

The main area displays a patient list table with the following columns: Patient Information, Location, New Results, and Diagnoses. The list is filtered by "Internal Medicine | Internal Medicine CTU Blue (18)".

| Patient Information | Location              | New Results                | Diagnoses                                                                |
|---------------------|-----------------------|----------------------------|--------------------------------------------------------------------------|
| 122 yrs M           | STR-05<br>SPH ED Hold | New Lab/Diagnostic Results | 1 - Opioid Overdose or Intoxication<br>2 - Aspiration Pneumonia          |
|                     | 7034-01<br>SPH 7C     | New Lab/Diagnostic Results | 1 - Abdominal Pain NYD                                                   |
| yrs M               | 7009-01<br>SPH 7A     | New Lab/Diagnostic Results | 1 - Dyspnea<br>2 - Congestive Heart Failure (CHF)                        |
| 1 yrs F             | STR-04<br>SPH ED Hold | New Lab/Diagnostic Results | 1 - Headache NOS                                                         |
| rs M                | 7026-03<br>SPH 7C     | New Lab/Diagnostic Results | 1 - Respiratory failure<br>2 - Cellulitis of right leg                   |
| 61 yrs M            | 7003-01<br>SPH 7A     | New Lab/Diagnostic Results | 1 - Chronic Obstructive Pulmonary Disease (COPD)<br>2 - Delirium (Acute) |
| F                   | 6021-01<br>SPH 6B     |                            |                                                                          |
| F                   | 7030-02<br>SPH 7C     | New Lab/Diagnostic Results |                                                                          |
|                     | 7025-04<br>SPH 7B     |                            |                                                                          |
| M                   | 7038-03<br>SPH 7D     | New Lab/Diagnostic Results | 1 - Acute Kidney Injury (AKI)<br>2 - Hyperkalemia                        |
| 19 yrs F            | 7043-02<br>SPH 7D     | New Lab/Diagnostic Results | 1 - Anorexia NOS                                                         |
| M                   | 7002-01<br>SPH 7A     | New Lab/Diagnostic Results | 1 - General Weakness NYD                                                 |
| ys M                | 7047-01<br>SPH 7D     | New Lab/Diagnostic Results | 1 - Cachexia NOS<br>COVID-19, virus identified                           |

ADMISSION



# Finding a patient: ED list

Task Edit View Patient Chart Links Notifications Patient Actions Provider List Help

Message Centre Patient Overview Ambulatory Organizer Referral Management Home MyExperience Patient List Dynamic Worklist **Tracking List Tracking Shell** CareConnect Gener.: 0

Exit PM Conversation Communicate Discern Reporting Portal Anesthesia Record Viewer Desktop Console Launcher Protocol Office Manager Use this Application/Chart Data Suspend Participation

Patient Health Education Materials SHOP Guidelines and DSTs UpToDate PSLs

Tracking Shell Recent Name Full screen Print 0 minutes ago

OB BCW TACC LDR OB BCW Perinatal OB BCW UCC OB BCW Recently Discharged OB BCW Pre-Reg Newborns OB SSH All Beds OB SSH Maternity OB SSH Recently Discharged SPH CDUSE SPH CDUNS SPH CDUV  
 SPH Renal HD Unit SPH East Van CDU OB BCW All Beds OB BCW Arbutus OB BCW Cedar OB BCW Dogwood OB BCW Evergreen OB BCW FIR OB BCW Preop/OR/PACU OB BCW Rabbit  
 OB SGH Recently Discharged OB SPH LDRP OB SPH All Beds OB SPH Recently Discharged OB SPH Pre-Reg Newborns SPH Renal KCC SPH Renal Post Transplant SPH Renal Post Tx- Today  
 UPCC SE Look Up OB LGH L&D OB LGH Postpartum OB LGH All Beds OB LGH Recently Discharged OB LGH Pre-Reg Newborns OB SGH L&D OB SGH All Beds OB SGH Incomplete Discharges  
 UPCC NE Generic View UPCC NE Look Up UPCC NE Available Staff UPCC RMD Available Staff UPCC RMD Generic View UPCC RMD Look Up UPCC SE Available Staff UPCC SE Generic View  
 ED SSH Available Staff ED SSH Generic View ED SSH Look Up ED VGH Available Staff ED VGH Generic View ED VGH Look Up ED WHC Generic View ED WHC Look Up ED WHC Available Staff  
 ED BCH Available Staff ED BCH Generic View ED BCH Look Up ED LGH Generic View ED LGH Look Up ED LGH Available Staff ED MSJ Generic View ED MSJ Look Up ED MSJ Available Staff  
 ED PEM Generic View ED PEM Look Up ED PEM Available Staff ED SGH Generic View ED SGH Look Up ED SGH Available Staff ED SPH Generic View ED SPH Look Up ED SPH Available Staff

Patient: [ ] | WR: 11 Total: 41 Avg LOS: 17:19 | Filter: <None> **2**

| Bed      | Code Orange | Alerts | CT, Name | Age       | Allergy | Reason for Visit         | Diagnosis         | LOS   | Dispositi | Attending Physic | EDMD | MLP | RN      | Events |
|----------|-------------|--------|----------|-----------|---------|--------------------------|-------------------|-------|-----------|------------------|------|-----|---------|--------|
| RESUS_02 |             | 1      | 2        | 34 years  |         | 1:Seizure (2), now pos   | 1:Hyponatremia,   | 3:27  |           |                  |      |     |         |        |
| STR_05   |             | ▲      | 3        | 101 years |         | 1:Abdominal pain (3),    |                   | 2:04  |           |                  |      |     |         |        |
| STR_07   |             | ■ ▲ ▲  | 3        | 44 years  |         | 1:local swelling (3)/red | 1:Anemia microc   | 44:58 | ▲ ●       |                  |      |     | BC, DM  | AM     |
| STR_12   |             | ▲ ▲ 1  | 3        | 19 years  |         | 1:Abdominal pain (3),    | 1:Abdominal Pain  | 24:47 |           |                  |      |     | VS, Til | AM     |
| STR_13   |             | ■      | 2        | 35 years  |         | 1:Bizarre/paranoid beh   |                   | 5:39  |           |                  |      |     | YSP, V  | AM     |
| STR_16   |             | ■ ▲ ▲  | 3        | 58 years  |         | 1:Respiratory distress   | 1:Pulmonary Ede   | 5:56  |           |                  |      |     | YSP     | AM     |
| ACHW_01  |             | ■ ▲ ▲  | 2        | 48 years  |         | 1:Bizarre/paranoid beh   | 1:Mental Health   | 15:34 |           |                  |      |     | jes     | AM     |
| THALL_02 |             | ▲ ▲ ▲  | 3        | 28 years  |         | 1:Substance misuse/i     | 1:Substance Use   | 2:15  |           |                  |      |     | MI      | AM     |
| RCH_02   |             | ▲ ▲ ▲  | 3        | 52 years  |         | 1:Cough (3), looks unv   | 1:Gastroenteritis | 2:56  |           |                  |      |     | +       | AM     |
| BAY_02   |             | ■ ▲    | 4        | 30 years  |         | 1:IV antibiotics (4) MC  |                   | 5:29  |           |                  |      |     | +       | AM     |
| CST_01   |             | ■ ▲ ▲  | 4        | 46 years  |         | 1:IV antibiotics (4) MC  | 1:Cellulitis Leg  | 4:26  |           |                  |      |     | +       | AM     |



# Admission: Medical Reconciliation

## **WHO IS RESPONSIBLE FOR ADMISSION MED REC?**

The Most Responsible Provider (MRP) is responsible.

## **WHEN TO COMPLETE ADMISSION MED REC?**

Upon admission.

It is recommended to have Admission MedRec complete prior to entering admission orders and PowerPlans.

# Admission: Medical Reconciliation

Before midnight each night the pharmacists are able to complete the medication reconciliation.  
Please only consult pharmacy if a patient is taking four or more medications.  
To consult pharmacy. Order the ED Perform Best Possible Medication History.

The screenshot shows a search interface with the following elements:

- Search bar: "best pos"
- Advanced Options dropdown
- Type: Inpatient
- Folder: (empty)
- Search within: All

The search results list includes:

- ED Perform Best Possible Medication History (BPMH)** (highlighted with a red circle)
- Post-Operative Breast Care
- OPHTH Octopus Blepharoplasty / Ptosis
- [OPHTH Octopus Blepharoplasty / Ptosis](#)
- Routine, Schedule as: Outpatient, Scheduling Location: Paper Referral

At the bottom right, there is a user identifier "WOODS, JOHN HAYDEN - 113464810" and a "Done" button.

# Admission: Medical Reconciliation

2

Provider View  
Results Review  
Orders + Add  
Medication List + Add  
Documentation + Add  
Documentation Filter  
Allergies + Add  
Appointments  
Diagnoses and Problems  
Histories  
MAR Summary  
MAR  
Form Browser  
Print to PDF  
Patient Information  
Interactive View and I&O  
Lines/Tubes/Drains Summary  
Newborn Record  
Labour and Birth Summary  
Growth Chart  
Immunizations  
Clinical Media  
Clinical Research  
Calculators  
CareConnect  
Oncology  
Diabetes Management Workflow  
Parenteral Nutrition  
Transplant Flowsheet

+ Add Document Medication by Hx | Reconciliation | Check Interactions | External Rx History

Reconciliation Status  
Meds History Admission Discharge

Orders Medication List

View

Orders for Signature  
Medication List  
Admit/Transfer/Discharge  
Status  
Patient Care  
Activity  
Diet/Nutrition  
Continuous Infusions  
Medications  
Blood Products  
Laboratory  
Diagnostic Tests  
Procedures  
Respiratory  
Allied Health  
Consults/Referrals  
Communication Orders  
Supplies  
Non Categorized  
Medication History  
Medication History Snapshot  
Reconciliation History

Displayed: All Active Orders | All Active Medications

| Order Name                                                                                                                                        | Status     | Dose ...                                                                                                      | Details          |
|---------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------------------------------|------------------|
| <b>Continuous Infusions</b>                                                                                                                       |            |                                                                                                               |                  |
| <input checked="" type="checkbox"/> <input type="checkbox"/> pantoprazole additive 40 mg [8 mg/h] + sodium chloride 0.9% (NS) continuous infusion | Ordered    | order rate: 20 mL/h, IV, order duration: 72 hour, drug form: bag, first dose: NOW, start: 07-Mar-2023 10:1... | Maintenance dose |
| <b>Medications</b>                                                                                                                                |            |                                                                                                               |                  |
| metFORMIN (Act MetFORMIN 500 mg oral tablet)                                                                                                      | Documen... | 2 tab, PO, BID, drug form: tab, refill(s): 0, start: 15-Oct-2021 09:32 PDT                                    |                  |

Related Results

Details

# Admission: Medical Reconciliation

➤ Add | External Rx History | Medication History

Known Home Medications  Unable To Obtain Information  Use Last Compliance

Reconciliation Status  
Meds History Admission Discharge

Document Medication by Hx

| Order Name                                                                                                 | Status | Details                                                                         | Last Dose Date/Time | Information Source | Compliance |
|------------------------------------------------------------------------------------------------------------|--------|---------------------------------------------------------------------------------|---------------------|--------------------|------------|
| Medication history has not yet been documented. Please document the medication history for this admission. |        |                                                                                 |                     |                    |            |
| Home Medications                                                                                           |        |                                                                                 |                     |                    |            |
| metFORMIN (Act MetFORMIN 500 mg oral tablet)                                                               |        | Documen... 2 tab, PO, BID, drug form: tab, refill(s): 0, start: 15-Oct-2021 ... |                     |                    |            |

- 1) External Rx History
- 2) Import


# Admission: Medical Reconciliation

- 1) Click on the “recycle” icon until a green check mark displays

## External Rx History

Display:   Show Individual Instances Disclaimer: 

This Rx history contains prescription records provided by community pharmacies and pharmacy benefits managers (PBM's). Such Rx history may be incomplete and prescriber should not rely solely on this Rx history data to make any clinical decisions. It is the responsibility of the prescriber to validate and verify the information directly with the patient or via other appropriate means.

| Order Name/Details                                                                                                          | Last Fill | Add As |
|-----------------------------------------------------------------------------------------------------------------------------|-----------|--------|
|  Rx history as of: 11-Apr-2023 17:20:21 PDT |           |        |



Recycle icon = list is incomplete

# Admission: Medical Reconciliation



## DO *NOT* USE "CONVERT EXISTING SIG" FUNCTION

When importing from PharmaNet, **DO NOT** select "*Convert Existing Sig*"!  
Select the closest available order sentence or select "*(None)*".  
Dose and frequency may be modified if needed.

Order Sentences

Order sentences for: furosemide (Mint-Furosemid

- (None)
- Convert Existing SIG
- 1 tab, PO, BID, drug form: tab
- 1 tab, PO, qdaily, drug form: tab
- 3 tab, PO, BID, drug form: tab
- 3 tab, PO, qdaily, drug form: tab

Reset OK Cancel

**DO NOT choose "Convert Existing Sig"**

choose an order sentence, or choose "(None)" and modify

Using "Convert existing sig" results in **ERRORS**  
for all future Admission, Transfer, and Discharge MedRec!



# Admission: Medical Reconciliation

## TIP: Show Individual Instances

Rx history display:

Show individual instances of external Rx medication history.

|        | \$ | Drug Name                | Rx Medication                                        |
|--------|----|--------------------------|------------------------------------------------------|
| ✓      |    | 21-Aug-2020 08:48:52 PDT |                                                      |
| ▶ (35) |    | warfarin                 | WARFARIN SODIUM 4 MG TABLET TARO PHARM               |
|        |    | enoxaparin               | (Reversed) ENOXAPARIN SODIUM 100 MG/ML SYRINGE SANOF |
| ▶ (14) |    | HYDRORmorphine           | (Discontinued) HYDROMORPHONE HCL/PF 50 MG/ML VIAL ST |

*Click to show all dosage forms and strengths*



Rx history display:

Show individual instances of external Rx medication history.

|   | \$ | Drug Name                | Rx Medication                          |
|---|----|--------------------------|----------------------------------------|
| ✓ |    | 21-Aug-2020 08:48:52 PDT |                                        |
|   |    | warfarin                 | WARFARIN SODIUM 4 MG TABLET TARO PHARM |
|   |    | warfarin                 | WARFARIN SODIUM 5 MG TABLET TARO PHARM |
|   |    | warfarin                 | WARFARIN SODIUM 1 MG TABLET TARO PHARM |

# Admission: Medical Reconciliation














✓ Rx history as of: 07-Mar-2023 13:55:33 PST

|             |                                                                                      |                                                                                       |
|-------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| 27-Feb-2023 |    |    |
| 17-Feb-2023 |    |    |
| 07-Feb-2023 |    |    |
| 30-Jan-2023 |    |    |
| 25-Jan-2023 |    |    |
| 09-Jan-2023 |    |    |
| 03-Jan-2023 |    |    |
| 23-Dec-2022 |    |    |
| 06-Dec-2022 |    |    |
| 05-Dec-2022 |    |    |
| 28-Nov-2022 |    |    |
| 26-Nov-2022 |    |    |
| 26-Nov-2022 |  |  |

1) To document a medication, press the scroll button.

# Admission: Medical Reconciliation

## Document Medication by Hx

| Order Name                                                                                                                                    | Status     | Details                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------|------------|------------------------------------------|
| <b>Home Medications</b>                                                                                                                       |            |                                          |
|  rosuvastatin (Sandoz Rosuvastatin 40 mg oral tablet)        | Documen... | 1 tab, PO, qdaily, drug form: tab, start |
|  clonazepam (PMS-Clonazepam-R 0.5 mg oral tablet)            | Documen... | 1 tab, PO, BID, drug form: tab           |
|  QUetiapine (Mint-QUetiapine 100 mg oral tablet)             | Documen... | 2 tab, PO, qHS, drug form: tab           |
|  ticagrelor (Brilinta 90 mg oral tablet)                     | Documen... | 1 tab, PO, BID, drug form: tab           |
|  diclofenac-misoprostol (Gd-Diclofenac/Misoprostol 75 mg-... | Documen... | 1 tab, PO, BID, drug form: tab           |
|  gabapentin (Jamp-Gabapentin 300 mg oral capsule)            | Documen... | 4 caps, PO, BID                          |
|  risperidone (PMS-Risperidone 2 mg oral tablet)              | Documen... | 2 tab, PO, BID, drug form: tab           |
|  escitalopram (Teva-Escitalopram 20 mg oral tablet)          | Documen... | 1 tab, PO, BID, drug form: tab           |
|  metoprolol (Apo-Metoprolol tartrate 50 mg oral tablet)      | Documen... | 1 tab, PO, BID                           |
|  ramipril (Apo-Ramipril 2.5 mg oral capsule)                 | Documen... | 1 cap, PO, BID, drug form: cap           |
|  bicitgravir/emtricitabine/tenofovir (Biktarvy oral tablet)  | Documen... | 1 tab, PO, qdaily, drug form: tab        |
|  ASA (ASA 81 mg oral delayed release tablet)                 | Documen... | 1 tab, PO, BID, drug form: tab-EC        |
|  budesonide-formoterol (Symbicort Turbuhaler 200 mcg-6 mc... | Documen... | 2 puff, inhalation, BID, drug form: inh  |

All medications in this section should reflect the medications the patient is actually taking.

If a medication that the patient is not taking is listed here, please select complete.

# Admission: Medical Reconciliation

The screenshot displays a medical software interface for medication reconciliation. The top navigation bar includes options like 'Full screen', 'Print', and '0 minutes ago'. The main header shows 'Medication List' with a 'Reconciliation' dropdown menu. The 'Reconciliation' menu is open, with 'Admission' highlighted by a red circle. Other options in the menu are 'Transfer' and 'Discharge'. The left sidebar contains a 'Menu' with various clinical categories such as 'Allergies', 'Appointments', and 'Diagnoses and Problems'. The main content area is divided into two panes. The left pane, titled 'View', shows a tree view of 'Orders for Signature' with 'Medications' selected. The right pane, titled 'Medications', displays a table of active medications.

|                                     | Order Name                            | Status  | Dose ... | Details                                                                                                                                 |
|-------------------------------------|---------------------------------------|---------|----------|-----------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> | enoxaparin                            | Ordered |          | 40 mg, subcutaneous, qPM, drug form: syringe-inj, start: 30-Oct-2022 17:00 PDT<br>For weight 41 to 100 kg. Continue until discharge     |
| <input checked="" type="checkbox"/> | acetaminophen                         | Ordered |          | 650 mg, PO, q4h, PRN pain-mild or fever, drug form: tab, start: 30-Oct-2022 13:09 PDT<br>Maximum acetaminophen 4g/24 h from all sources |
| <input checked="" type="checkbox"/> | dimenhydrINATE (dimenhydrINATE PR...) | Ordered |          | dose range: 25 to 50 mg, PO, q4h, PRN nausea or vomiting, drug form: tab, start: 30-Oct-2022 13:09 PDT<br>GRAVOL EQUIV                  |

1) Once all of the medications are documented,

# Admission: Updating an Existing BPMH

Check the Med History status icons to confirm whether BPMH has been documented for the current encounter.



Meds History = BPMH has been documented for the current encounter

Document Medication by Hx

| Order Name       | Status     | Details                                                     | Last Dose Date/Time | Information Source |
|------------------|------------|-------------------------------------------------------------|---------------------|--------------------|
|                  |            | ✓ Last Documented On 10-Nov-2020 09:30 PST                  |                     |                    |
| Home Medications |            |                                                             |                     |                    |
| methadone        | Documen... | 50 mg. PO. adaily. *DWI*. drug form: oral liq. refill(s): 0 |                     |                    |



Meds History = BPMH has NOT been documented on the current encounter

Document Medication by Hx

| Order Name                | Status     | Details                                                                                                              | Last Dose Date/Time | Information Source |
|---------------------------|------------|----------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|
|                           |            | ⓘ Medication history has not yet been documented. Please document the medication history for this patient encounter. |                     |                    |
| Home Medications          |            |                                                                                                                      |                     |                    |
| cyclobenzaprine (level... | Prescribed | 1 tab PO TID PRN spasms order duration: 5 day drug form...                                                           |                     |                    |

# Admission: Updating an Existing BPMH

## Medications appearing in BPMH list may not be the patient's current home medications.

BPMH medications carry over from previous encounters and may be months or years out-of-date.

Please verify the information with the patient.

Outdated entries must be updated/removed if the patient is no longer taking the regimen.

**DO NOT** click "Document History" without verifying the information.

## If the patient is not taking the medication as it appears on the BPMH list:



If it appears as a "scroll":

Select the entry, right click, "Modify", and make the necessary changes in each field.

To remove an entry, right click and select "Complete"



If it appears as a "pill bottle":

Select the entry, right click, and select "Complete" to remove the medication from the list.

Then, re-enter the medication by importing through PharmaNet or adding manually.

## If a patient is no longer taking a medication:

**If on hold temporarily with intention to restart:**

Right click, Modify Compliance, in the "Status" drop down menu select "on hold", and

indicate the date/time of the last dose in the "Last Dose" field.

**If stopped by a provider (with no intention to restart):**

Right click, and select "Complete".

**\*Note:** if the previous medication entry is incomplete (i.e. missing dose/route/frequency fields), you will need to fill in the missing fields before the system will allow you to "Complete" the order



# Admission Order: CTU Admit from ED

1

The screenshot displays a medical software interface with the following components:

- Top Bar:** Includes a toolbar with icons and a tabbed interface with tabs for "Admission", "Rounding", "Transfer/Discharge", "Inpatient Quick Orders", and "Run Quick Orders".
- Left Sidebar:** A vertical navigation menu with categories such as "Orders", "Medication List", "Documentation", "Allergies", "Appointments", "Diagnoses and Problems", "Histories", "MAR Summary", "MAR", "Form Browser", "Print to PDF", "Patient Information", "Interactive View and I&O", "Lines/Tubes/Drains Summary", "Newborn Record", "Labour and Birth Summary", "Growth Chart", "Immunizations", "Clinical Media", "Clinical Research", "Calculators", "CareConnect", "Oncology", "Diabetes Management Workflow", "Parenteral Nutrition", and "Transplant Flowsheet".
- Main Content Area:** Divided into several panels:
  - PowerPlans:** A purple panel with a list of medical conditions and management options.
  - Medications:** A blue panel with a list of various medication classes.
  - Labs:** A blue panel with a list of laboratory tests, including COVID-19 Virus (2019nCoV) NAT and Bloodwork Routine.
  - Imaging and Diagnostics:** A grey panel with a list of imaging and diagnostic procedures.
  - New Order Entry:** A green panel with a "Consults" section and a "Patient Care" section. The "Patient Care" section contains a list of actions, with "Admit to Inpatient" and "Admit to General Internal Medicine" highlighted.

Steps: 1. Provider view, 2. Quick orders and 3. Admit to Inpatient (General Internal Medicine)

# Admission PPO

**Menu**

- Provider View **1**
- Results Review
- Orders + Add
- Medication List + Add
- Documentation + Add
- Allergies + Add
- Appointments
- Diagnoses and Problems
- Histories
- MAR Summary
- MAR
- Form Browser
- Print to PDF
- Patient Information

**Provider View**

Full screen | Print | 2 minutes ago

Rounding | **Inpatient Quick Or...** **2** | Admission | Transfer/Discharge | Rural Quick Orders | **1** **5** Stable

**PowerPlans**

- Additions
- Admission
  - Admit to Inpatient Admit to Family Practice
  - Admit to Inpatient Admit to General Internal Medicine
  - Admit to Inpatient Admit to Hospitalist Medicine **3**
  - MED General Medicine Admission MED**
  - General Medicine Admission
  - GER Frail Elderly Admission GER Frail Elderly Admission
  - MED COVID-19 Admission MED COVID-19 Admission

**Medications**

- Analgesics
- Anticoagulants
- Antiemetics
- Antihypertensives
  - amLODIPine
  - ramipril
  - candesartan
  - hydroCHLORothiazide 25 mg, PO, qdaily, drug form: tab
  - spironolactone 25 mg, PO, qdaily, drug form: tab
  - capTOPRil 12.5 mg, sublingual, q30min, PRN hypertension, drug form: tab

**Imaging and Diagnostics**

- ECG
- Echocardiogram
- IR
  - RESP Thoracentesis (Multiphase)**
  - RESP Thoracentesis (Multiphase)
  - ADULT/PED MI Aspiration (US/RF/CT)

**Labs**

- COVID-19 Virus (2019nCoV) NAT Nasopharyngeal Swab, Routine, Collection: T;N, Hospital, once
- COVID-19 Virus (2019nCoV) NAT Tracheal Aspirate, Routine, Collection: T;N, Hospital, once
- Bloodwork Routine
- Bloodwork AM (1day added if ordered after 23:59)
- Bloodwork AM x 3 Days
- Bloodwork STAT
- Bloodwork Unit Collect
- Bloodwork Urgent

Best place to find the right order for IR procedures!

# Admission Order: CTU Admit from ICU

1

The screenshot displays a medical software interface with the following components:

- Top Bar:** Includes tabs for 'Admission', 'Rounding', 'Transfer/Discharge', 'Inpatient Quick Orders', and 'Run Quick Orders'. A red circle labeled '2' highlights the 'Inpatient Quick Orders' tab.
- Left Sidebar:** A navigation menu with categories like 'Orders', 'Medication List', 'Documentation', 'Allergies', 'Appointments', etc. A red circle labeled '1' highlights the 'Provider View' tab at the top of this sidebar.
- Main Content Area:** Divided into several panels:
  - PowerPlans:** Lists various medical plans such as Addictions, Admission, Allergy/Immunology, etc.
  - Medications:** Lists various drug classes like Analgesics, Anticoagulants, etc.
  - Labs:** Lists COVID-19 Virus (2019nCoV) NAT tests and various bloodwork routines.
  - Imaging and Diagnostics:** Lists ECG, Echocardiogram, XR, CT, US, MR, IR, NM, and Cardiac Diagnostics.
  - New Order Entry:** A panel with a 'Consults' dropdown and a 'Patient Care' section. The 'Patient Care' section lists various actions, with 'Bed Transfer Request' circled in red and labeled '3'. Other actions include 'Discharge Patient', 'Discharge to External Site', 'Patient Deceased', 'Nurse May Pronounce Death', 'Code Status', 'General Communication', 'Activity', 'Diet', 'Vitals', 'Lines/Tubes/Drains', and 'Respiratory Therapy'.

Steps: 1. Provider view, 2. Quick orders and 3. Bed Transfer Request

# Admission Order: CTU Admit from ICU

**Details for Bed Transfer Request**

Details Order Comments

+ [Icons]

\*Requested Start Date/Time: 07-Mar-2023 1047 PST Medical Service: [Dropdown] New Attending Provider: [Text Field]

New Attending Provider Accepted:  Yes  No Bed Type: [Dropdown] Telemetry:  Yes  No

Special Instructions: [Text Field]

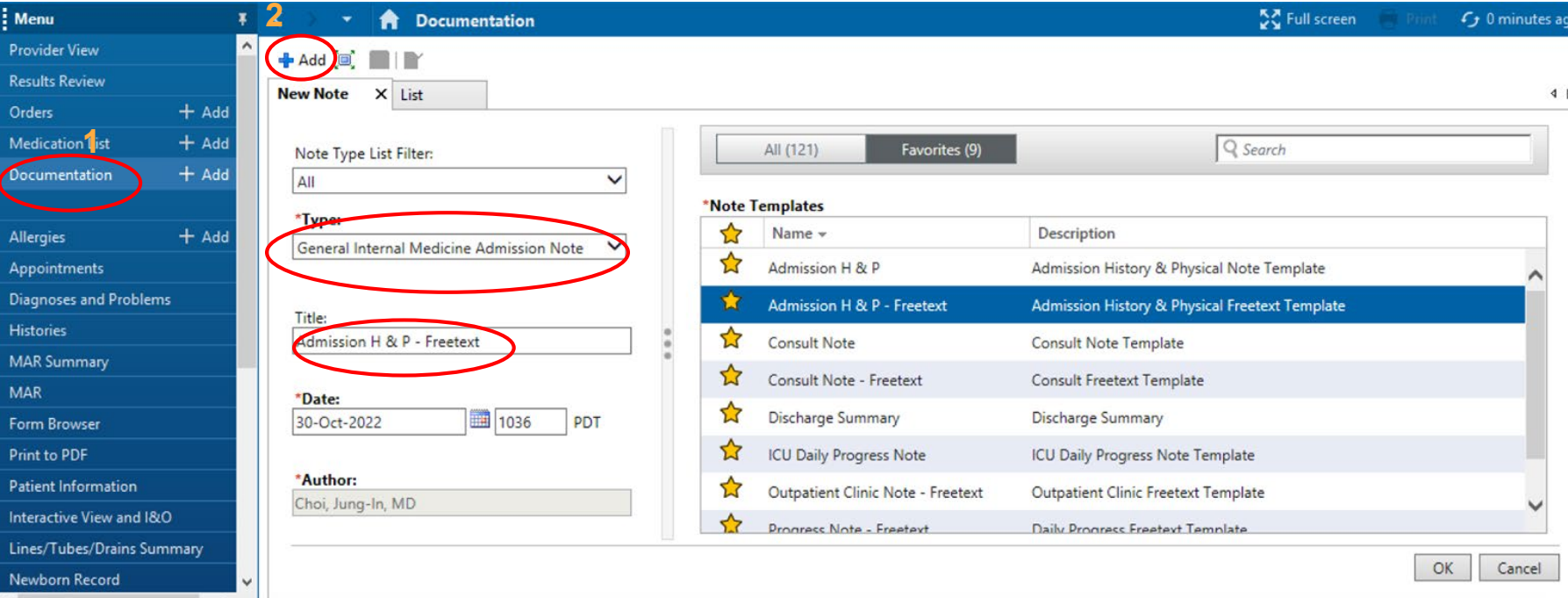
**This order ensures the MRP is not changed until the patient is physically out of ICU!**

# Writing a Note: Admission

There are three note options you can choose from:

- 1) Preformed templates
- 2) Freetext notes (no template)
- 3) Create your own template

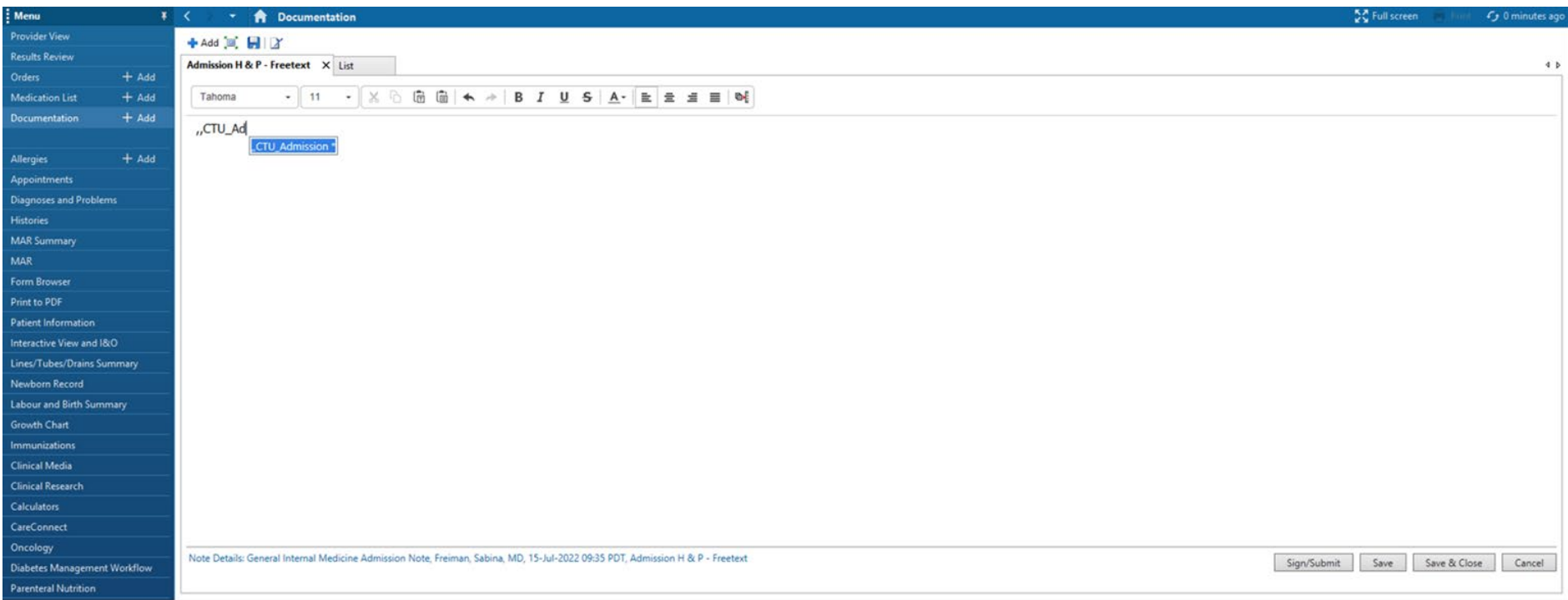
# Writing a Note: Admission



For each of the note options, 1) Go to Documentation, 2) Add a new note. Admission H and P is the most common preformed template used. To write a note from scratch, or create your own template choose the freetext note.



# Writing a Note: Freenote Consult Template



Case Sensitive „CTU\_Admission pulls a template that’s easier to edit and re-organize.

# Writing a Note: Freenote Consult Template

The screenshot shows a medical software interface with a sidebar on the left containing menu items like 'Provider View', 'Results Review', 'Orders', 'Medication List', 'Documentation', 'Allergies', 'Appointments', 'Diagnoses and Problems', 'Histories', 'MAR Summary', 'MAR', 'Form Browser', 'Print to PDF', 'Patient Information', 'Interactive View and I&O', 'Lines/Tubes/Drains Summary', 'Newborn Record', 'Labour and Birth Summary', 'Growth Chart', 'Immunizations', 'Clinical Media', 'Clinical Research', 'Calculators', 'CareConnect', 'Oncology', 'Diabetes Management Workflow', and 'Parenteral Nutrition'. The main window displays a patient note for 'Tahoma' with a date of '11'. The note includes a 'Vitals & Measurements' section with the following data: T: 36.8 °C (Oral), T: 36.8 °C (Temporal Artery), TMIN: 36.2 °C (Temporal Artery), TMAX: 36.8 °C (Temporal Artery), HR: 73 bpm (Peripheral), RR: 18 br/min, BP: 100/65 mmHg, WT: 89.5 kg (Measured), WT: 90.4 kg (Dosing), SpO2: 97 %. Below this is a section titled 'MOST RECENT WITHIN LAST 24 HOURS:' containing two tables. The first table, 'HEMATOLOGY', lists WBC Count (14.6 x10^9/L High), RBC Count (4.03 x10^12/L), Hemoglobin (126 g/L), Hematocrit (0.39), MCV (97 fL), MCH (31 pg), RDW-CV (14.2 %), Platelet Count (338 x10^9/L), MPV (11.2 fL), Eosinophils (<0.1 x10^9/L), Basophils (<0.1 x10^9/L), INR (1.3 High), and APTT (32 second). The second table, 'CHEMISTRY', lists pH Venous (7.36), pCO2 Venous (52 mmHg High), pO2 Venous (Unable to report due to collection tube type. mmHg), HCO3 Venous (29 mmol/L), Base Excess Venous (3 mmol/L), Oxyhemoglobin Fraction Venous (0.72), Sodium (139 mmol/L), Potassium (3.8 mmol/L), Chloride (98 mmol/L Low), Glucose Random (8.9 mmol/L), Lactate (2.2 mmol/L), Urea (21.5 mmol/L High), and Creatinine (183 umol/L High). Below the tables is an 'XR Chest' section with a timestamp of '14/07/22 17:04:14' and 'EXAM TYPE: XR Chest'. At the bottom, there is a 'HISTORY:' section with the note details: 'Abdominal Paracentesis Procedure Note, Freiman, Sabina, MD, 15-Jul-2022 09:39 PDT, Admission H & P - Freetext'. The interface also includes a toolbar with various icons and buttons at the bottom right: 'Sign/Submit', 'Save', 'Save & Close', and 'Cancel'.

Admission H & P - Freetext

Tahoma 11

Vitals & Measurements  
T: 36.8 °C (Oral) T: 36.8 °C (Temporal Artery) **TMIN:** 36.2 °C (Temporal Artery) **TMAX:** 36.8 °C (Temporal Artery) **HR:** 73 bpm (Peripheral) **RR:** 18 br/min **BP:** 100/65 mmHg **WT:** 89.5 kg (Measured) **WT:** 90.4 kg (Dosing) **SpO2:** 97 %

„mh\_vitals24hours

**MOST RECENT WITHIN LAST 24 HOURS:**

| HEMATOLOGY                               | CHEMISTRY                                                      |
|------------------------------------------|----------------------------------------------------------------|
| WBC Count: 14.6 x10 <sup>9</sup> /L High | pH Venous: 7.36                                                |
| RBC Count: 4.03 x10 <sup>12</sup> /L     | pCO2 Venous: 52 mmHg High                                      |
| Hemoglobin: 126 g/L                      | pO2 Venous: Unable to report due to collection tube type. mmHg |
| Hematocrit: 0.39                         | HCO3 Venous: 29 mmol/L                                         |
| MCV: 97 fL                               | Base Excess Venous: 3 mmol/L                                   |
| MCH: 31 pg                               | Oxyhemoglobin Fraction Venous: 0.72                            |
| RDW-CV: 14.2 %                           | Sodium: 139 mmol/L                                             |
| Platelet Count: 338 x10 <sup>9</sup> /L  | Potassium: 3.8 mmol/L                                          |
| MPV: 11.2 fL                             | Chloride: 98 mmol/L Low                                        |
| Eosinophils: <0.1 x10 <sup>9</sup> /L    | Glucose Random: 8.9 mmol/L                                     |
| Basophils: <0.1 x10 <sup>9</sup> /L      | Lactate: 2.2 mmol/L                                            |
| INR: 1.3 High                            | Urea: 21.5 mmol/L High                                         |
| APTT: 32 second                          | Creatinine: 183 umol/L High                                    |

„all\_labs24hours

XR Chest  
14/07/22 17:04:14  
EXAM TYPE:  
XR Chest

„all\_imaging48

HISTORY:  
Note Details: Abdominal Paracentesis Procedure Note, Freiman, Sabina, MD, 15-Jul-2022 09:39 PDT, Admission H & P - Freetext

Sign/Submit Save Save & Close Cancel

Case Sensitive „mh\_vitals24hours „all\_labs24hours and „all\_imaging48 pulls in all the vitals, labs and imaging completed in the last 24-48 hours.

# Writing a Note: Create Your Own Consult Template

The screenshot shows a medical software interface with a blue header and a left-hand menu. The 'Documentation' menu item is circled in red. The main window displays a 'New Note' dialog with the following fields:

- Note Type List Filter: All
- \*Type: General Internal Medicine Admission Note
- Title: Admission H & P - Freetext
- \*Date: 30-Oct-2022 1036 PDT
- \*Author: Choi, Jung-In, MD

On the right side of the dialog, there is a 'Note Templates' table with a search bar and tabs for 'All (121)' and 'Favorites (9)'. The table lists various templates, with 'Admission H & P - Freetext' highlighted in blue.

| ★ | Name                              | Description                                    |
|---|-----------------------------------|------------------------------------------------|
| ★ | Admission H & P                   | Admission History & Physical Note Template     |
| ★ | Admission H & P - Freetext        | Admission History & Physical Freetext Template |
| ★ | Consult Note                      | Consult Note Template                          |
| ★ | Consult Note - Freetext           | Consult Freetext Template                      |
| ★ | Discharge Summary                 | Discharge Summary                              |
| ★ | ICU Daily Progress Note           | ICU Daily Progress Note Template               |
| ★ | Outpatient Clinic Note - Freetext | Outpatient Clinic Freetext Template            |
| ★ | Progress Note - Freetext          | Daily Progress Freetext Template               |

Buttons for 'OK' and 'Cancel' are located at the bottom right of the dialog.

# Writing a Note: Create Your Own Consult Template

Admission H & P - Freetext

Tahoma 11

Step 1. Create a new free text note

Task Edit View Patient Chart Links Notifications **Documentation** Help

Message Centre Patient Overview Ambulatory Organizer Referral Management Home MyExperience Patient List Dynamic Worklist

CareConnect PHSA PACS VCH and PHC PACS FormFast WFI

Tear Off Exit PM Conversation Use this Application/Chart Data Suspend Participation Communicate Discern Reporting Portal Ar


Step 2. Documentation  
Step 3. Manage Auto Text

Note Details: General Internal Medicine Admission Note, Campbell, Christine Marie, MD, 07-Mar-2023 10:58 PST, Admission H & P - Freetext

Sign/Submit Save Save & Close Cancel

# Writing a Note: Create Your Own Consult Template

My Phrases   Public Phrases



| Abbreviation | Description      |
|--------------|------------------|
| .TinaConsult | Consult template |

Previous | 1 | Next

Show Auto Text Notifications

Edit...   Duplicate...   Delete

| Abbreviation | Description      |
|--------------|------------------|
| .TinaConsult | Consult template |

Auto Text Phrase

---

**Date of Consultation**  
☰ [ Current Date and Time ]

**Reason for Referral**

Referred by:  
Triage complaint: ☰ [ Chief Complaint ]

**Past Medical History**  
☰ [ Past Medical History 2012 ]

**Surgical and Procedure History**  
☰ [ Procedure History 2012 ]

**Medications**  
☰ [ \* Medication List ]  
☰ [ Rx - Hx Medications 2012 ]

**Allergies**  
☰ [ Allergies 2012 ]

**Social History**  
☰ [ Social History 2012 ]

# Writing a Note: Create Your Own Consult Template

Pick an abbrev. you won't naturally type often as it will pop up mid-note! Ex. start with ,,

Name is just for your memory, no restrictions

Free type your headings.  
You can auto-pull certain info:

Orders  
Medication List  
Documentation  
Allergies  
Appointments  
Diagnoses and Pro  
Histories  
MAR Summary  
MAR  
Form Browser  
Print to PDF  
Patient Information  
Interactive View an  
Lines/Tubes/Drains  
Newborn Record  
Labour and Birth S  
Growth Chart  
Immunizations  
Clinical Media  
Clinical Research  
Calculators  
CareConnect  
Oncology  
Diabetes Management Workflow  
Parenteral Nutrition

Abbreviation: --ctuadmission  
Description: CTU Admission

Font: 11

**CTU Admission Note**

ID  
CC  
RFR

**Past Medical History**  
1.

**Medications**  
[ Home Medications ]

**Allergies**  
[ Allergies ]

**Code Status**  
[ Code Status Order ST ]

**Social History**

**Family History**

Tip: this tab opens tokens, which will automatically populate in your notes.

|                                   |                |
|-----------------------------------|----------------|
| Diabetes Bundle                   | Smart Template |
| Diabetes Labs                     | Smart Template |
| Diabetes Self-History             | Smart Template |
| Gestational Diabetes Mellitus     | Smart Template |
| Pediatric Pharmacy Diabetes       | Text Template  |
| Pre-Diabetes                      | Smart Template |
| ST - OB Gestational Diabetes S... | Smart Template |



# Writing a Note: Create Your Own Consult Template

My Phrases   Public Phrases

+   endo

| Abbreviation                  | Description                                   |
|-------------------------------|-----------------------------------------------|
| „endo_ddp_conventional        | Endocrinology - Diabetes Day Program - Con... |
| „endo_ddp_mdi                 | Endocrinology - Diabetes Day Program - Mul... |
| „endo_diabetes_mellitus_new   | Endocrinology - Diabetes Mellitus New         |
| „endo_diabetes_progressnote   | Endocrinology - Diabetes Progress Note        |
| „endo_fam_hx                  | Endocrinology - Family History                |
| „endo_pe_f                    | Endocrinology - Female Physical Exam          |
| „endo_pe_m                    | Endocrinology - Male Physical Exam            |
| „endo_progressnote            | Endocrinology - Progress Note                 |
| „endo_ROS                     | Endocrinology - Review of Systems             |
| „gi_endo_us                   | Endoscopic Ultrasound                         |
| „onc_low_risk_endometrial_... | Low Risk Endometrial Letter                   |
| „ps_mtr_tendon_repair         | Plastic Surgery MTR Tendon Repair             |

Previous 1 Next

Edit... Duplicate... Delete

| Abbreviation           | Description                     |
|------------------------|---------------------------------|
| „endo_ddp_conventional | Endocrinology - Diabetes Day Pr |

Auto Text Phrase

Patient Name: [ Patient Full Name ]

Date of admission to DDP: \_\_\_\_\_  
Date of discharge from DDP: \_\_\_\_\_

**History:** [ Patient First Name ] is a [ Patient Age ]  
[ Patient Gender (Male/Female) ] who presents to the Diabetes D  
\_\_\_\_\_

**Physical Examination:**  
[ PE Document Component 2013 ]

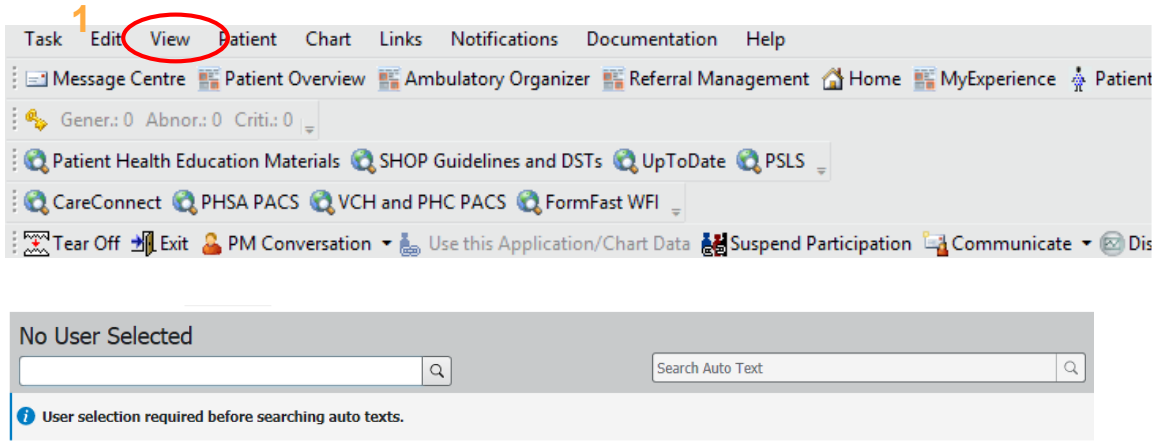
**Labs:**  
[ Labs Categorized Last 7 Days - All Enc ]

**Family History:**  
[ Family History 2012 ]

This patient and their family spent \_ days with the Diabetes Nurse Ec  
Diabetes Dietitian for diabetes teaching. By the time of discharge, the

Tip: there is also a lot of public phrases available, it is worth searching through!

# Writing a Note: Using a Colleagues Template



- 1) View
- 1) Auto Text Copy
- 1) Enter colleagues name that you would like to take the template from
- 1) Search Campbell, Christine to get the medlist token ,,medlist

# Writing a Note: Submitting

Scroll to the bottom of Relationships to find their Family Physician, and relevant subspecialists. CC them on new consults and DC summaries.

**SAVE** = no one can see the note but you.

**SUBMIT** = note is published. \*\*Admission notes and consults can still be edited after being submitted (Until your staff signs off on the note).

Submit new consults overnight so other staff are aware what is going on with the patient. PROGRESS NOTES will be final for Residents so I suggest SAVEing those.

# ROUNDING

# Writing a Note

2

The screenshot shows the 'Documentation' section of a medical software interface. On the left sidebar, the 'Documentation' menu item is highlighted with a red circle and labeled with a '1'. In the 'New Note' form, the '+ Add' button is circled in red and labeled with a '2'. The 'Note Type List Filter' is set to 'All'. The 'Types' dropdown menu is set to 'Internal Medicine Progress Note', which is circled in red. The 'Title' field contains 'CTU Purple Progress Note', circled in purple. The 'Date' is '15-Jul-2022' and the 'Author' is 'Freiman, Sabina, MD'. On the right, the 'Note Templates' table lists various templates, with 'SOAP Note' highlighted in blue.

| Name                       | Description                                    |
|----------------------------|------------------------------------------------|
| Admission H & P            | Admission History & Physical Note Template     |
| Admission H & P - Freetext | Admission History & Physical Freetext Template |
| Discharge Summary          | Discharge Summary                              |
| Patient Discharge Handout  | Patient Discharge Handout                      |
| Progress Note - Freetext   | Daily Progress Freetext Template               |
| SOAP Note                  | SOAP Note Template                             |

Freetext = blank note, you can use your own template.  
Preformed templates are generally hard to edit.

# Results Review



Labs

Biopsy

Bacterial  
Cultures

Viral/Misc  
Micro

Imaging

Vitals

# Results Review: viewing imaging

Allows you to pull up the image itself

**\* Final Report \***

**Reason For Exam**  
dyspnea

**Report**  
EXAM TYPE:  
XR Chest

**HISTORY:**  
dyspnea.

**COMPARISON:**  
December 2nd, 2019

**FINDINGS:**  
There is mild hyperinflation. There is chronic basal change and blunting of the right costophrenic angle. No new focal airspace disease is evident.  
Cardiac size is stable.  
No acute osseous abnormality is seen.

**Signature Line**  
\*\*\*\*\* Final \*\*\*\*\*

Dictated DT/TM: 14-JUL-2022 17:19

Signed by: Dr Quiney, Brendan, MD  
Signed (Electronic Signature): 14-JUL-2022 17:19

**Image available for viewing - Accession:102-XR-22-0035354**  
This document has an image

Result type: XR Chest  
Result date: Thursday, 14-July-2022 17:04 PDT  
Result status: Auth (Verified)  
Result title: XR Chest

# MAR: Medication Administration

The screenshot displays a 'MAR Summary' window with a sidebar on the left containing navigation options like 'Provider View', 'Orders', 'Medication List', and 'MAR Summary' (which is circled in red). The main area shows a table of medication orders with columns for dates from 15-Jul-2022 to 10-Jul-2022. A 'Details' pop-up window is open over the 12-Jul-2022 entry for 'insulin lispro: 2 unit subcutaneous', showing 'Documented Date/Time: 12-Jul-2022 1235 PDT' and 'Performed By: Serias, Ailene Rose, RN'. The table uses color coding: grey for discontinued, and red/orange boxes for scheduled medications that were not administered.

| Medication                                                                                                               | 15-Jul-2022<br>0000 - 2359 | 14-Jul-2022<br>0000 - 2359            | 13-Jul-2022<br>0000 - 2359                    | 12-Jul-2022<br>0000 - 2359     | 11-Jul-2022<br>0000 - 2359                    | 10-Jul-2022<br>0000 - 2359    |
|--------------------------------------------------------------------------------------------------------------------------|----------------------------|---------------------------------------|-----------------------------------------------|--------------------------------|-----------------------------------------------|-------------------------------|
| food, drug form: inj, start: 13-Jun-2022 12:00 PDT<br>GLU Result POC: 5.6 mmol/L                                         | 4 unit @1255               | (a) GLU Result POC: 9.3 mmol/L ...    | 2 unit @1235                                  | (a) GLU Result POC: 6.6 mmol/L | GLU Result POC Value: Numeric                 | 1 unit @1307                  |
|                                                                                                                          | @1200                      | GLU Result POC Value: Numeric         | Not Given: Not appropriate at this time @1144 | GLU Result POC Value: Numeric  | Not Given: Not appropriate at this time @1243 | GLU Result POC Value: Numeric |
|                                                                                                                          | @1700                      | ↑ (a) GLU Result POC: 12.8 mmol/L ... | GLU Result POC Value: Numeric                 | 2 unit @1745                   | GLU Result POC: 7.8 mmol/L                    | 2 unit @1855                  |
|                                                                                                                          |                            | Not Given: Other @1709                | (a) GLU Result POC: 8 mmol/L ...              | GLU Result POC Value: Numeric  | GLU Result POC Value: Numeric                 | GLU Result POC Value: Numeric |
| lanthanum carbonate (lanthanum chewable)<br>500 mg, PO, TID with food, drug form: tab-chew, start: 08-Jun-2022 12:00 PDT | 500 mg @0758               | 500 mg @0824                          | 500 mg @0808                                  | 500 mg @0848                   | 500 mg @0841                                  | 500 mg @0858                  |
|                                                                                                                          | @1200                      | 500 mg @1153                          | 500 mg @1215                                  | 500 mg @1235                   | 500 mg @1231                                  | 500 mg @1251                  |
| linagliptin<br>5 mg, PO, qdaily, drug form: tab, start: 12-Jun-2022 12:43 PDT                                            | 5 mg @0758                 | 5 mg @0824                            | 5 mg @0808                                    | 5 mg @0848                     | 5 mg @0841                                    | 5 mg @0858                    |
|                                                                                                                          | @1700                      | 500 mg @1707                          | 500 mg @1800                                  | 500 mg @1745                   | 500 mg @1736                                  | 500 mg @1706                  |
| loxapine<br>2.5 mg, PO, qdaily with supper, drug form: tab, start: 27-Jun-2022 17:55 PDT                                 |                            | 2.5 mg @1707                          | 2.5 mg @1800                                  | 2.5 mg @1745                   | 2.5 mg @1736                                  | 2.5 mg @1706                  |
|                                                                                                                          |                            |                                       |                                               |                                |                                               | 2.5 mg @1855                  |
| loxapine<br>7.5 mg, PO, qHS, drug form: tab, start: 04-Jul-2022 21:00 PDT                                                |                            |                                       | 7.5 mg @2128                                  | 7.5 mg @2157                   | 7.5 mg @2114                                  | 7.5 mg @2247                  |
|                                                                                                                          |                            |                                       |                                               |                                |                                               | 7.5 mg @2043                  |

Allows you to view scheduled, PRN, discontinued meds, and fluids that have been given.  
 Grey = discontinued. Red/orange box = scheduled med not given.



# Orders: Medications

Search: hydromorphone

Advanced Options Type: Inpatient

Filtered Order Sentences

HYDRomorphine  
HYDRomorphine (mg, IV, q1h, PRN pain, drug form: inj)  
HYDRomorphine (mg, IV, q4h, drug form: inj)  
HYDRomorphine (mg, IV, q4h, PRN pain, drug form: inj)  
HYDRomorphine (mg, PO, q1h, PRN pain, drug form: tab)  
HYDRomorphine (mg, PO, q4h, drug form: tab)  
HYDRomorphine (mg, PO, q4h, PRN pain, drug form: tab)  
HYDRomorphine (mg, PO, q4h, PRN pain-breakthrough, drug form: tab)  
HYDRomorphine (mg, rectal, drug form: supp)  
HYDRomorphine (mg, rectal, q4h, PRN pain-severe, drug form: supp)  
HYDRomorphine (mg, subcutaneous, q15min, PRN other, drug form: inj)  
HYDRomorphine (mg, subcutaneous, q1h, PRN pain, drug form: inj)  
HYDRomorphine (mg, subcutaneous, q4h, drug form: inj)  
HYDRomorphine (mg, subcutaneous, q4h, PRN pain-breakthrough, drug form: inj)  
HYDRomorphine (0.1 mg, IV, PRN pain-breakthrough, drug form: inj)  
HYDRomorphine continuous infusion (10 mg/ml) in NS  
HYDRomorphine continuous infusion (2 mg/ml) in NS standard  
HYDRomorphine continuous infusion (10 mg/ml) in NS  
HYDRomorphine long acting  
HYDRomorphine long acting (3 mg, PO, BID, drug form: cap-long acting [Greater Than or Equal To 17 year])  
HYDRomorphine long acting (4.5 mg, PO, BID, drug form: cap-long acting [Greater Than or Equal To 17 year])  
HYDRomorphine long acting (6 mg, PO, BID, drug form: cap-long acting [Greater Than or Equal To 17 year])  
HYDRomorphine long acting (9 mg, PO, BID, drug form: cap-long acting [Greater Than or Equal To 17 year])  
HYDRomorphine long acting (12 mg, PO, BID, drug form: cap-long acting [Greater Than or Equal To 17 year])  
HYDRomorphine long acting (18 mg, PO, BID, drug form: cap-long acting [Greater Than or Equal To 17 year])  
HYDRomorphine long acting (24 mg, PO, BID, drug form: cap-long acting [Greater Than or Equal To 17 year])  
HYDRomorphine long acting (30 mg, PO, BID, drug form: cap-long acting [Greater Than or Equal To 17 year])  
HYDRomorphine PED continuous infusion (40 mcg/mL) below 6 kg in NS  
HYDRomorphine PED continuous infusion (80 mcg/mL) 6 to 30 kg in NS  
HYDRomorphine PED continuous infusion (200 mcg/mL) 30 kg and above  
HYDRomorphine PED titratable infusion (40 mcg/mL) below 6 kg in NS  
HYDRomorphine PED titratable infusion (80 mcg/mL) 6 to 30 kg and above  
HYDRomorphine PRN range dose (dose range: 0.1 to 0.5 mg, IV, q1h, PRN pain, drug form: inj [Greater Than or Equal To 17 year])  
HYDRomorphine PRN range dose (dose range: 0.1 to 0.5 mg, IV, q4h, PRN pain, drug form: inj [Greater Than or Equal To 17 year])  
HYDRomorphine PRN range dose (dose range: 0.5 to 1 mg, IV, q1h, PRN pain, drug form: inj [Greater Than or Equal To 17 year])  
HYDRomorphine PRN range dose (dose range: 0.5 to 1 mg, IV, q4h, PRN pain, drug form: inj [Greater Than or Equal To 17 year])  
HYDRomorphine PRN range dose (dose range: 0.5 to 1 mg, PO, q1h, PRN pain, drug form: tab [Greater Than or Equal To 17 year])  
HYDRomorphine PRN range dose (dose range: 0.5 to 1 mg, PO, q4h, PRN pain, drug form: tab [Greater Than or Equal To 17 year])  
HYDRomorphine PRN range dose (dose range: 0.5 to 1 mg, subcutaneous, q1h, PRN pain, drug form: inj [Greater Than or Equal To 17 year])  
HYDRomorphine PRN range dose (dose range: 0.5 to 1 mg, subcutaneous, q4h, PRN pain, drug form: inj [Greater Than or Equal To 17 year])  
HYDRomorphine PRN range dose (dose range: 1 to 2 mg, PO, q4h, PRN pain, drug form: oral liq [Greater Than or Equal To 17 year])  
HYDRomorphine PRN range dose (dose range: 1 to 2 mg, PO, q4h, PRN pain, drug form: oral liq [Greater Than or Equal To 17 year])  
HYDRomorphine subcutaneous continuous infusion (2 mg/mL) in NS  
HYDRomorphine subcutaneous continuous infusion (50 mcg/mL) in NS  
HYDRomorphine subcutaneous titratable infusion (2 mg/mL) in NS  
HYDRomorphine subcutaneous titratable infusion (50 mcg/mL) in NS  
SUS Injectable Opioid Agonist Treatment  
SUS Perinatal Injectable Opioid Agonist Treatment

Press enter to get more options for doses/routes, including ranges!

1 + Add

Document Medication

Orders Medication List

Orders for Signature

Plans

Medical

NEPH Hemodialysis Vaccin

Influenza and Pneumoco

Hepatitis B Vaccine (Plan

ANES/SURG Transfer Pain

ANES Respiratory Depre

ORTHO Elderly Post Oper

Surgeon Immediate Pos

Surgeon Post Operative

Bowel Protocol (Modu

Bowel Protocol - Renal (M

Insulin Subcutaneous for f

Acute Coronary Syndrome

Heparin Infusion Low PT

Suggested Plans (0)

Orders

Admit/Transfer/Discharge

Status

Patient Care

Activity

Diet/Nutrition

Continuous Infusions

Medications

Blood Products

Laboratory

Diagnostic Tests

Procedures

Related Results

Formulary Details

Orders For Cosignature

Orders For Nurse Review

Orders For Signature

Done

MSI orders will appear on nursing MAR  
> ONLY order if discussed with staff/resident

# Orders: Labs

The screenshot displays a medical orders system interface. On the left is a navigation menu with categories like 'Provider Vis', 'Results Rev', 'Orders', 'Medication', 'Documents', 'Allergies', 'Appointment', 'Diagnoses', 'Histories', 'MAR Summary', 'MAR', 'Form Browser', 'Print to PDF', 'Patient Info', 'Interactive', 'Lines/Tube', 'Newborn R', 'Labour and', 'Growth Chart', 'Immunizations', 'Clinical Media', 'Clinical Research', 'Calculators', 'CareConnect', 'Oncology', 'Diabetes Management Workflow', and 'Parenteral Nutrition'. The main area is divided into a search and order list section, and a detailed order entry section.

**Search and Order List Section:**

- Search bar: **liver panel** (circled in red)
- Advanced Options: Inpatient
- Order list: Includes 'Liver Panel (Bilirubin, ALP, Alb, ALT, GGT)' and 'CBC and Differential' (circled in red).
- 'Done' button: (circled in red)

**Order Details Section: CBC and Differential**

- Order Name: CBC and Differential (circled in red)
- Specimen Type: Blood
- Collection Date/Time: 16-Jul-2022 0330 (circled in red)
- Duration: 3 (circled in red)
- Collection Priority: AM Draw (circled in red)
- Frequency: qdaily (circled in red)
- Duration unit: day (circled in red)

Other fields include Unit collect (Yes/No), CC Provider 1 (Robinson, Lisa Joanne, MD), and Order for future visit (Yes/No).

If you choose “qdaily” frequency while multiple labs are selected, you will have to open each lab individually to enter “3” and “day”

# Orders: What the timing means

| PRIORITY | WHEN WILL IT BE COLLECTED?                                                                                    | NOTES                                                                                                                                                                                     |
|----------|---------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| STAT     | Within <b>15 minutes</b>                                                                                      | Can only be ordered ONCE                                                                                                                                                                  |
| TIMED    | Within <b>15 minutes</b> of requested time                                                                    | For <b>time critical</b> tests only. Orders must be placed at least <b>1 hour prior</b> to desired collection time.                                                                       |
| URGENT   | <b>Wards:</b> Within <b>60 minutes</b> of requested time<br><b>ED:</b> Collected ASAP                         | For inpatients, Urgent orders can be placed for “later” (ex. 2pm) and will be collected within one hour of the requested time. Should also be used for repeating hourly orders (ex. q4h). |
| ROUTINE  | Order placed <b>before 1pm</b> : Collected same day<br>Order placed <b>after 1pm</b> : On next morning rounds | <b>After 1pm</b> : If an order <b>cannot wait</b> until the next morning, use Urgent.                                                                                                     |
| AMDRAW   | Morning rounds of <b>next day</b> .                                                                           | Check date if ordering past midnight!                                                                                                                                                     |

# Orders: Other important orders

| ORDER                               | MEANING                                                          | NOTES                                                                                           |
|-------------------------------------|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| Discharge Patient                   | Patient can be discharged.                                       | Can order the night before with Special Instructions (ex. "If potassium <4.5", "if OT clears"). |
| LAB - Next AM Early Discharge Alert | Lab will collect labs priority in the am to get them discharged. | Don't use this on the same patient daily, they'll catch on to you...                            |
| MED General Medicine Admission      | The CTU admission PowerPlan.                                     | Includes all generic things you need to order a patient!                                        |
| IR Procedures                       | IR _____<br>MI Biopsy                                            | Can be VERY confusing - low threshold to call rads and ask what they want us to enter.          |

# Orders: Cytology

The screenshot displays a medical orders management system interface. At the top, there are fields for "Code Status:" and "Dosing Wt:63 kg". Below this is a section for "External Rx History". A navigation bar indicates "Displayed: All Active Orders | All Inactive Orders | All Orders (All Statuses)".

The main area contains a table of orders with columns for Order Name, Status, Dose, and Details. The "Laboratory" section is expanded, showing various tests such as CBC, Differential, INR, and Pathology. The "Pathology Surg..." row is selected and highlighted in blue.

A context menu is open over the selected row, listing actions like Renew, Modify, Copy, Suspend, Activate, Complete, Cancel/Discontinue, Void, Reschedule Task Times..., Add/Modify Compliance, Order Information..., Comments..., Results..., Reference Information..., Print, Advanced Filters..., Customize View..., and Disable Order Information Hyperlink (which is checked).

A secondary menu is open over the "Print" option, listing "Reprint Order Sheet...", "Reprint Requisition...", and "Reprint Consent Form...".

On the right side of the interface, there are fields for "Location", "Enc Type: Attending", and "Ordering Physician: Apperley, Scott, MD".

| Order Name                                    | Status               | Dose ... | Details                                                                                |
|-----------------------------------------------|----------------------|----------|----------------------------------------------------------------------------------------|
| <b>Laboratory</b>                             |                      |          |                                                                                        |
| CBC (CBC - Or...                              | Completed            |          | Blood, S                                                                               |
| Differential (CBC Completed and Differential) | Completed            |          | Blood, S Within 7                                                                      |
| INR and PTT Pa...                             | Completed            |          | Blood, S                                                                               |
| Path, Hem, Cyt...                             | InProcess (Received) |          | Request                                                                                |
| Path, Hem, Cyt...                             | InProcess (Received) |          | Request                                                                                |
| Path, Hem, Cyt...                             | InProcess (Received) |          | Request                                                                                |
| Path, Hem, Cyt...                             | InProcess (Received) |          | Request                                                                                |
| Pathology Non...                              | Order                |          | Routine,                                                                               |
| Pathology Non...                              | Completed            |          | Routine,                                                                               |
| Pathology Surg...                             | Completed            |          | Routine, Collected, AP Specimen, Requested: 07-Jul-2020 10:49 ...                      |
| <b>Diagnostic Tests</b>                       |                      |          |                                                                                        |
| CT Abdomen P...                               | Future (On Hold)     |          | 06-Jul-2020, Routine, Reason: presumed lung ca staging investig... Apperley, Scott, MD |
| CT Head w/ Co...                              | Future (On Hold)     |          | 06-Jul-2020, Routine, Reason: presumed lung ca staging investig... Apperley, Scott, MD |

# Order Albumin

+ Add to Phase Check Alerts Comments Start:  ... Duration:  ...

| Component | Status | Dose ... | Details |
|-----------|--------|----------|---------|
|-----------|--------|----------|---------|

**TM Albumin Transfusion (Module) (Initiated Pending)**

| Medications                                                                                                                                                                                                                                                                                                                                        |                                                        |  |                                                                                                                                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                | sodium chloride 0.9% (sodium chloride 0.9% (NS) bolus) |  | 50 mL, IV, as directed, PRN other (see comment), order duration: 1 doses or times, drug form: bag<br>PRN Reason: routine line flush following the completion of blood product transfusion |
| Blood Products                                                                                                                                                                                                                                                                                                                                     |                                                        |  |                                                                                                                                                                                           |
| <b>CONTRAINDICATIONS:</b><br>1. Consider crystalloids and/or non-protein colloids (i.e. starch volume expanders) initially for hypovolemia, non-hemorrhagic shock and cerebral ischemia<br>2. 5% albumin should be used rather than 25% albumin except in circumstances where the avoidance of vascular volume overload is of paramount importance |                                                        |  |                                                                                                                                                                                           |
| <b>ORDERING INSTRUCTIONS:</b><br>1. ORDER IN BOTTLES PER DOSE, not mL<br>2. Quantity of Bottles per dose field indicates number of bottles administered at one time, not total number of bottles                                                                                                                                                   |                                                        |  |                                                                                                                                                                                           |
| 5% Albumin: 50 and 500 mL bottle not available at all sites                                                                                                                                                                                                                                                                                        |                                                        |  |                                                                                                                                                                                           |
| Blood Product Fact Sheet 5% Albumin                                                                                                                                                                                                                                                                                                                |                                                        |  |                                                                                                                                                                                           |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                | Administer - Albumin Transfusion                       |  | Routine, 5% - 250 mL, Qty of Bottles Per Dose: 1, IV, once, T;N<br>Informed consent must be present on patient record                                                                     |
| 25% Albumin: 50 mL bottle not available at all sites                                                                                                                                                                                                                                                                                               |                                                        |  |                                                                                                                                                                                           |
| Blood Product Fact Sheet 25% Albumin                                                                                                                                                                                                                                                                                                               |                                                        |  |                                                                                                                                                                                           |
| <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                           | Administer - Albumin Transfusion                       |  | 25% - 100 mL, Qty of Bottles Per Dose: 1, IV, once, T;N<br>Informed consent must be present on patient record                                                                             |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                | Communication Order                                    |  | If the patient exhibits signs or symptoms of a Transfusion Reaction, Print Transfusion Reaction Form from FormFast and follow you...                                                      |

# Order Albumin

☰ ☰ ☰ + Add to Phase ⚠ Check Alerts 🗨 Comments Start: Now ... Duration: None ...

| Component                                                                                                                                                                                                                                                                                                                                     | Status                             | Dose ... | Details                                                                                                                                                                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Blood Products                                                                                                                                                                                                                                                                                                                                |                                    |          |                                                                                                                                                                                   |
| ⚠ CONTRAINDICATIONS:<br>1. Consider crystalloids and/or non-protein colloids (i.e. starch volume expanders) initially for hypovolemia, non-hemorrhagic shock and cerebral ischemia<br>2. 5% albumin should be used rather than 25% albumin except in circumstances where the avoidance of vascular volume overload is of paramount importance |                                    |          |                                                                                                                                                                                   |
| ⚠ ORDERING INSTRUCTIONS:<br>1. ORDER IN BOTTLES PER DOSE, not mL<br>2. Quantity of Bottles per dose field indicates number of bottles administered at one time, not total number of bottles                                                                                                                                                   |                                    |          |                                                                                                                                                                                   |
| ⚠ 5% Albumin: 50 and 500 mL bottle not available at all sites                                                                                                                                                                                                                                                                                 |                                    |          |                                                                                                                                                                                   |
| 📄 Blood Product Fact Sheet 5% Albumin                                                                                                                                                                                                                                                                                                         |                                    |          |                                                                                                                                                                                   |
| ☑                                                                                                                                                                                                                                                                                                                                             | ☑ Administer - Albumin Transfusion |          | Routine, 5% - 250 mL, Qty of Bottles Per Dose: 1, IV, Administer each over: 90 - 120 Minutes, q8h interval, for 3, doses...<br>Informed consent must be present on patient record |
| ⚠ 25% Albumin: 50 mL bottle not available at all sites                                                                                                                                                                                                                                                                                        |                                    |          |                                                                                                                                                                                   |

## Details for Administer - Albumin Transfusion

📄 Details 🗨 Order Comments ⌚ Offset Details

+ 🗨 📊 ⬇ ⬇

|                                |                             |           |                           |                                                               |   |
|--------------------------------|-----------------------------|-----------|---------------------------|---------------------------------------------------------------|---|
| *Priority:                     | Routine                     | ▼         | *Product Type:            | 5% - 250 mL                                                   | ▼ |
| *Quantity of Bottles Per Dose: | 1                           |           | *Route of Administration: | IV                                                            | ▼ |
| *Administer each over:         | 90 - 120 Minutes            | ▼         | *Frequency:               | q8h interval                                                  | ▼ |
| Duration:                      | 3                           |           | Duration Unit:            | doses or times                                                | ▼ |
| *Indications:                  | Hypotension on Hemodialysis | ▼         | Indication Comments:      |                                                               |   |
| Start Date/Time:               | 19-Nov-2022                 | ⬆ ⬇ ⬆     | Instructions to Nurse:    |                                                               |   |
|                                | 1800                        | ⬆ ⬇ ⬆ PST | Order for future visit:   | <input type="radio"/> Yes <input checked="" type="radio"/> No |   |
| Instructions to Lab:           |                             |           |                           |                                                               |   |

**ALWAYS** order as doses. Do NOT order for hours.  
\*Indicate when to give first dose

2

1



# CareConnect: Access to province-wide data

The screenshot shows the CareConnect web application interface. On the left is a blue navigation menu with items like 'Provider View', 'Results Review', 'Orders', 'Medication List', 'Documentation', 'Allergies', 'Appointments', 'Diagnoses and Problems', 'Histories', 'MAR Summary', 'MAR', 'Form Browser', 'Print to PDF', 'Patient Information', 'Interactive View and I&O', 'Lines/Tubes/Drains Summary', 'Newborn Record', 'Labour and Birth Summary', 'Growth Chart', 'Immunizations', 'Clinical Media', 'Clinical Research', 'Calculators', 'CareConnect', 'Oncology', 'Diabetes Management Workflow', and 'Parenteral Nutrition'. The 'CareConnect' item is circled in red with a '1' next to it.

The main content area has a top navigation bar with 'ENCOUNTERS', 'LABS', 'IMAGING', 'DOCUMENTS', 'COMMUNITY', 'IMMUNIZATIONS', 'REG. INFO', and 'ALERTS & ALLERGIES'. The 'LABS' tab is selected and circled in red with a '2' next to it.

Below the navigation bar, there are display options: 'Display: Standard Filter: By Date Range / # of Records', 'With Secondary Filters (based on PLIS results as of 2022 JUL 15 10:24)', and 'Cumulative' (which is selected). A red bracket groups these options with a '4' next to it.

There is a 'Filter By:' dropdown menu set to 'All', circled in red with a '3' next to it. Below this is a 'Then By: Most Common Labs' section with a list of lab tests and checkboxes. Some tests are checked, including Hemoglobin, Creatinine, Hemoglobin A1C, and Urea.

At the bottom, there is an 'Apply Filters' button and a 'Results for all dates, selected most common labs' section with a 'Grouped' checkbox. Below this is a table with columns: 'COLLECTION DATE', 'TEST NAME', 'TEST RESULT', 'RESULTS FLAG', and 'REFERENCE RANGE'.

**Standard Filter** = chronological.  
**Secondary Filter** = search all by test type, have to open each test individually for result.  
**Cumulative** = clearly shows trend of every result of a lab type; only available for these ones.



# ICU TRANSFER

# ICU Transfer

Once you assess the patient and feel they are suitable for transfer:

ORDER: Bed Transfer Request

Also let the bedside nurse know that the patient is appropriate for CTU

# Transfer Reconciliation

+ Add | Document Medication by Hx | **Reconciliation** | Check Interactions | External Rx History

Reconciliation Status  
✓ Meds History ✓ Admission ⚙ Discharge

Orders Medication List

View

Orders for Signature

Plans

- Medical
  - MED General Medicine Admission (Initiated)
  - ICU HAU Admission (Initiated)
    - Venous Thromboembolism (VTE) Prophylaxis - Medicine (Module)
    - ICU/HAU Electrolyte Replacement (Module) (Completed)
    - ICU Standard Bowel Protocol (Module) (Completed)
  - GYN Gynecology Admission (Initiated)
- Laboratory
  - Hepatitis Suspected Chronic BCCDC (Initiated)
- Suggested Plans (0)
- Orders
  - Admit/Transfer/Discharge
  - Status
  - Patient Care
  - Activity
  - Diet/Nutrition
  - Continuous Infusions
  - Medications
  - Blood Products
  - Laboratory
  - Diagnostic Tests
  - Procedures
  - Respiratory
  - Allied Health
  - Consults/Referrals
  - Communication Orders
  - Supplies
  - Non Categorized
- Medication History

Related Results  
Formulary Details

Orders For Cosignature | Orders For Nurse Review | Orders For Signature

Displayed: All Active Orders | All Inactive Orders | All Active Orders

| Order Name                                                                            | Status  | Dose ... | Details                                                                                                                                                                 |
|---------------------------------------------------------------------------------------|---------|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Admit/Transfer/Discharge</b>                                                       |         |          |                                                                                                                                                                         |
| <input checked="" type="checkbox"/> Admit to Inpatient                                | Ordered |          | 11-Nov-2022 13:39 PST, Admit to Gynecology, Admitting provider: Tigert, Melissa Susan, MD                                                                               |
| <b>Status</b>                                                                         |         |          |                                                                                                                                                                         |
| <input checked="" type="checkbox"/> Code Status                                       | Ordered |          | 11-Nov-2022 13:44 PST, Attempt CPR, Full Code, Perioperative status: Attempt CPR, Full Code, During chemotherapy: Attempt CPR, Full Code                                |
| <b>Patient Care</b>                                                                   |         |          |                                                                                                                                                                         |
| <input checked="" type="checkbox"/> Vital Signs                                       | Ordered |          | 15-Nov-2022 02:44 PST, q12h                                                                                                                                             |
| <input checked="" type="checkbox"/> IPAC ICU ARO Swab Protocol                        | Ordered |          | 12-Nov-2022 01:40 PST<br>This order is part of a powerplan and will trigger automatic ARO swab culture orders as per site specific guidelines.                          |
| <b>Activity</b>                                                                       |         |          |                                                                                                                                                                         |
| <input checked="" type="checkbox"/> Activity as Tolerated                             | Ordered |          | 11-Nov-2022 13:44 PST                                                                                                                                                   |
| <b>Diet/Nutrition</b>                                                                 |         |          |                                                                                                                                                                         |
| <input checked="" type="checkbox"/> Adjust Diet as Toler...                           | Ordered |          | 20-Nov-2022 08:30 PST, Start: General Diet, RN to place starting diet order. RN/RD to place subsequent diet order to communicate with kitchen., 20-Nov-2022 08:30 P...  |
| <input checked="" type="checkbox"/> Additional Diet Infor...                          | Ordered |          | 19-Nov-2022 09:57 PST, please send late breakfast tray with no oatmeal, pt request fruit shake (boost fruit beverage?) pt requesting NO oatmeal with breakfast pls. ... |
| <input checked="" type="checkbox"/> Additional Diet Infor...                          | Ordered |          | 17-Nov-2022 09:24 PST, No coffee, tea TID, No OJ.cranberry juice. ONLY apple juice.                                                                                     |
| <input checked="" type="checkbox"/> Oral Nutrition Supple...                          | Ordered |          | 16-Nov-2022 10:05 PST, Boost Fruit Beverage, Breakfast   Lunch   Dinner, 120 mL                                                                                         |
| <input checked="" type="checkbox"/> Additional Diet Infor...                          | Ordered |          | 16-Nov-2022 10:03 PST, - Low lactose - lactaid milk TID - vanilla yogurt TID - dislike: cream soups                                                                     |
| <input checked="" type="checkbox"/> Full Fluid Diet                                   | Ordered |          | 16-Nov-2022 10:03 PST, Other (please specify), Low Lactose                                                                                                              |
| <b>Medications</b>                                                                    |         |          |                                                                                                                                                                         |
| <input checked="" type="checkbox"/> potassium chloride                                | Ordered |          | 40 mmol, PO, BID, drug form: tab, start: 19-Nov-2022 09:01 PST, stop: 21-Nov-2022 08:30 PST<br>20 mmol = 1500 mg                                                        |
| <input checked="" type="checkbox"/> enoxaparin                                        | Ordered |          | 40 mg, subcutaneous, BID, drug form: syringe-inj, start: 18-Nov-2022 21:00 PST                                                                                          |
| <input checked="" type="checkbox"/> ondansetron                                       | Ordered |          | 4 mg, IV, q6h, PRN nausea or vomiting, drug form: inj, start: 18-Nov-2022 15:10 PST                                                                                     |
| <input checked="" type="checkbox"/> HYDRomorphone (HYDRomorphone P...                 | Ordered |          | dose range: 2.5 to 5 mg, subcutaneous, q4h, PRN pain, drug form: inj, start: 18-Nov-2022 13:38 PST<br>DILAUDID EQUIV                                                    |
| <input checked="" type="checkbox"/> amoxicillin-clavulanate (amoxicillin-clavulana... | Ordered |          | 875 mg, PO, BID, drug form: tab, start: 17-Nov-2022 14:53 PST, stop: 21-Nov-2022 07:59 PST<br>Dose based on amoxicillin                                                 |
| <input checked="" type="checkbox"/> HYDRomorphone (HYDRomorphone P...                 | Ordered |          | dose range: 4 to 6 mg, PO, q4h, PRN pain, drug form: tab, start: 17-Nov-2022 14:51 PST<br>DILAUDID EQUIV                                                                |
| <input checked="" type="checkbox"/> methotrimeprazine                                 | Ordered |          | 25 mg, PO, qHS, PRN insomnia, drug form: tab, start: 17-Nov-2022 12:02 PST                                                                                              |

# Transfer Reconciliation

+ Add | Manage Plans | Transfer To: (None)

Reconciliation Status  
 Meds History  Admission  Discharge

## Orders Prior to Reconciliation

## Orders After Reconciliation

| Order Name/Details                                                                                                                                                | Status  |                                         |                              | Order Name/Details                                                                                                                                                | Status  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|-----------------------------------------|------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| <b>Medications</b>                                                                                                                                                |         |                                         |                              |                                                                                                                                                                   |         |
| <b>acetaminophen</b><br>650 mg, PO, q4h, PRN: pain-mild or fever                                                                                                  | Ordered | <input checked="" type="radio"/>        | <input type="radio"/>        | <b>acetaminophen</b><br>650 mg, PO, q4h, PRN: pain-mild or fever                                                                                                  | Ordered |
| <b>amoxicillin-clavulanate (amoxicillin-clavulanate 875 mg-125 mg tab (dosed as amoxicillin))</b><br>875 mg = 1 tab, PO, BID                                      | Ordered | <input checked="" type="radio"/>        | <input type="radio"/>        | <b>amoxicillin-clavulanate (amoxicillin-clavulanate 875 mg-125 mg tab (dosed as amoxicillin))</b><br>875 mg = 1 tab, PO, BID                                      | Ordered |
| <b>capsaicin topical (capsaicin 0.025% cream)</b><br>1 application, topical, TID                                                                                  | Ordered | <input checked="" type="radio"/>        | <input type="radio"/>        | <b>capsaicin topical (capsaicin 0.025% cream)</b><br>1 application, topical, TID                                                                                  | Ordered |
| <b>enoxaparin</b><br>40 mg, subcutaneous, BID                                                                                                                     | Ordered | <input checked="" type="radio"/>        | <input type="radio"/>        | <b>enoxaparin</b><br>40 mg, subcutaneous, BID                                                                                                                     | Ordered |
| <b>HYDRomorphone (HYDRomorphone PRN range dose)</b><br>5 mg, subcutaneous, q4h, PRN: pain                                                                         | Ordered | <input checked="" type="radio"/>        | <input type="radio"/>        | <b>HYDRomorphone (HYDRomorphone PRN range dose)</b><br>5 mg, subcutaneous, q4h, PRN: pain                                                                         | Ordered |
| <b>HYDRomorphone (HYDRomorphone PRN range dose)</b><br>6 mg, PO, q4h, PRN: pain                                                                                   | Ordered | <input checked="" type="radio"/>        | <input type="radio"/>        | <b>HYDRomorphone (HYDRomorphone PRN range dose)</b><br>6 mg, PO, q4h, PRN: pain                                                                                   | Ordered |
| <b>hyoscine (scopolamine) (hyoscine BUTYLBromide (BUSCOPAN EQUIV))</b><br>20 mg, IV, QID, PRN: spasm                                                              | Ordered | <input checked="" type="radio"/>        | <input type="radio"/>        | <b>hyoscine (scopolamine) (hyoscine BUTYLBromide (BUSCOPAN EQUIV))</b><br>20 mg, IV, QID, PRN: spasm                                                              | Ordered |
| <b>methotrimeprazine</b><br>25 mg, PO, qHS, PRN: insomnia                                                                                                         | Ordered | <input checked="" type="radio"/>        | <input type="radio"/>        | <b>methotrimeprazine</b><br>25 mg, PO, qHS, PRN: insomnia                                                                                                         | Ordered |
| <b>ondansetron</b><br>4 mg, IV, q6h, PRN: nausea or vomiting                                                                                                      | Ordered | <input checked="" type="radio"/>        | <input type="radio"/>        | <b>ondansetron</b><br>4 mg, IV, q6h, PRN: nausea or vomiting                                                                                                      | Ordered |
| <b>polyethylene glycol 3350 (PEG 3350 powder)</b><br>17 g = 1 package, PO, qdaily, PRN: congestion                                                                | Ordered | <input checked="" type="radio"/>        | <input type="radio"/>        | <b>polyethylene glycol 3350 (PEG 3350 powder)</b><br>17 g = 1 package, PO, qdaily, PRN: congestion                                                                | Ordered |
| <b>potassium chloride</b><br>40 mmol, PO, BID                                                                                                                     | Ordered | <input checked="" type="radio"/>        | <input type="radio"/>        | <b>potassium chloride</b><br>40 mmol, PO, BID                                                                                                                     | Ordered |
| <b>Status</b>                                                                                                                                                     |         | <input checked="" type="checkbox"/> ALL | <input type="checkbox"/> ALL |                                                                                                                                                                   |         |
| <b>Code Status</b><br>11-Nov-2022 13:44 PST, Attempt CPR, Full Code, Perioperative status:<br>Attempt CPR, Full Code, During chemotherapy: Attempt CPR, Full Code | Ordered | <input checked="" type="radio"/>        | <input type="radio"/>        | <b>Code Status</b><br>11-Nov-2022 13:44 PST, Attempt CPR, Full Code, Perioperative status:<br>Attempt CPR, Full Code, During chemotherapy: Attempt CPR, Full Code | Ordered |
| <b>Patient Care</b>                                                                                                                                               |         | <input checked="" type="checkbox"/> ALL | <input type="checkbox"/> ALL |                                                                                                                                                                   |         |
| <b>Vital Signs</b><br>15-Nov-2022 02:44 PST, q12h                                                                                                                 | Ordered | <input checked="" type="radio"/>        | <input type="radio"/>        | <b>Vital Signs</b><br>15-Nov-2022 02:44 PST, q12h                                                                                                                 | Ordered |

Details

0 Missing Required Details | All Required Orders Reconciled

Reconcile and | Plan | **Sign** | Cancel

ICU should plan the transfer order  
 > Review if correct  
 > Sign if accepting transfer

# Creating Medicine Powerplan

+ Add | Document Medication by Hx | Reconciliation \* | Check Interactions | External Rx Hi

Orders Medication List

- Orders for Signature
- Plans
  - Medical
    - MED General Medicine Admission (Initiated)**
    - ICU HAU Admission (Initiated)**
      - Venous Thromboembolism (VTE) Prophylaxis - Medicine (Module)
      - ICU/HAU Electrolyte Replacement (Module) (Completed)
      - ICU Standard Bowel Protocol (Module) (Completed)
    - GYN Gynecology Admission (Initiated)**
  - Laboratory
    - Hepatitis Suspected Chronic BCCDC (Initiated)**
  - Suggested Plans (0)
- Orders
  - Admit/Transfer/Discharge
  - Status
  - Patient Care
  - Activity
  - Diet/Nutrition
    - Continuous Infusions
  - Medications
    - Blood Products
  - Laboratory
  - Diagnostic Tests
    - Procedures
  - Respiratory
  - Allied Health
  - Consults/Referrals
  - Communication Orders
    - Supplies
    - Non Categorized
- Medication History



Merge view: merge existing/duplicated orders from previous ICU powerplan

Reconciliation Status  
✓ Meds History ✓ Admission + Discharge

| Order                                                                                                                                                       | Status       | Start Date            | End Date | Notes                                                                                                                                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------|----------|-----------------------------------------------------------------------------------------------------------------------------------------|
| <b>Verify that an 'Admit to' Order has been entered prior to completing the powerplan (NOT required for direct admit patients)</b>                          |              |                       |          |                                                                                                                                         |
| <b>Patient Care</b>                                                                                                                                         |              |                       |          |                                                                                                                                         |
| Consider Allergy Form                                                                                                                                       |              |                       |          |                                                                                                                                         |
| Consider Medication Reconciliation                                                                                                                          |              |                       |          |                                                                                                                                         |
| Weight                                                                                                                                                      | Discontinued | 15-Nov-2022 02:44 PST |          | qweek, standing weight is preferred                                                                                                     |
| Vital Signs                                                                                                                                                 | Ordered      | 15-Nov-2022 02:44 PST |          | q12h                                                                                                                                    |
| Pulse Oximetry                                                                                                                                              | Discontinued | 15-Nov-2022 02:44 PST |          | q12h                                                                                                                                    |
| <b>Lines/Tubes/Drains</b>                                                                                                                                   |              |                       |          |                                                                                                                                         |
| Urinary Catheter: Document indication. Refer to organization's CAUTI guidelines                                                                             |              |                       |          |                                                                                                                                         |
| <b>Activity</b>                                                                                                                                             |              |                       |          |                                                                                                                                         |
| Activity as Tolerated                                                                                                                                       | Discontinued | 15-Nov-2022 02:44 PST |          |                                                                                                                                         |
| <b>Diet/Nutrition</b>                                                                                                                                       |              |                       |          |                                                                                                                                         |
| Review the most current diet order for therapeutic requirements, food texture and fluid thickness. Add anything to be carried forward to the new Diet Order |              |                       |          |                                                                                                                                         |
| Dietitian Adult Consult                                                                                                                                     | Completed    | 15-Nov-2022 02:44 PST |          | Reason for Consult: Diet Order (Therapeutic), Review diet, diet as per dietitian. May advance or ...                                    |
| <b>Continuous Infusions</b>                                                                                                                                 |              |                       |          |                                                                                                                                         |
| <b>Maintenance Fluids</b>                                                                                                                                   |              |                       |          |                                                                                                                                         |
| Continuous fluids should only be for 24 hours and reassess in AM                                                                                            |              |                       |          |                                                                                                                                         |
| <b>Medications</b>                                                                                                                                          |              |                       |          |                                                                                                                                         |
| <b>Analgesics</b>                                                                                                                                           |              |                       |          |                                                                                                                                         |
| acetaminophen                                                                                                                                               | Ordered      | 15-Nov-2022 02:44 PST |          | 650 mg, PO, q4h, PRN pain-mild or fever, drug form: tab, start: 15-Nov-2022 02:44 PST<br>Maximum acetaminophen 4g/24 h from all sources |
| <b>Antiemetics</b>                                                                                                                                          |              |                       |          |                                                                                                                                         |
| dimenhyDRINATE - Use with caution in patients with delirium and dementia                                                                                    |              |                       |          |                                                                                                                                         |
| dimenhyDRINATE (dimenhyDRINATE PRN range dose)                                                                                                              | Discontinued | 15-Nov-2022 02:44 PST |          | dose range: 25 to 50 mg, PO, q4h, PRN nausea or vomiting, drug form: tab, start: 15-Nov-2022 02:44 PST<br>GRAVOL EQUIV                  |
| dimenhyDRINATE (dimenhyDRINATE PRN range dose)                                                                                                              | Discontinued | 15-Nov-2022 02:44 PST |          | dose range: 25 to 50 mg, IV, q4h, PRN nausea or vomiting, drug form: inj, start: 15-Nov-2022 02:44 PST<br>GRAVOL EQUIV                  |

Related Results  
Formulary Details

Orders For Cosignature | Orders For Nurse Review | Save as My Favorite

Orders For Signature

# Removing ICU Powerplan

+ Add | Document Medication by Hx | Reconciliation | Check Interactions | External Rx History

Reconciliation Status  
✓ Meds History ✓ Admission Discharge

Orders Medication List

**View**

- Orders for Signature
- Plans
  - Medical
    - MED General Medicine Admission (Initiated)** 1
      - ICU HAU Admission (Initiated)**
        - Discontinue
        - Plan Information...
        - Add Comment
        - Save as My Favorite
      - Venous Thromboembolism
      - ICU/HAU Electrolyte Replacement
      - ICU Standard Bowel Protocol
    - GYN Gynecology Admission (Initiated)
    - Laboratory
      - Hepatitis Suspected Chronic
    - Suggested Plans (0)
  - Orders
    - Admit/Transfer/Discharge
    - Status
    - Patient Care
    - Activity
    - Diet/Nutrition
    - Continuous Infusions
    - Medications
    - Blood Products
    - Laboratory
    - Diagnostic Tests
    - Procedures
    - Respiratory
    - Allied Health
    - Consults/Referrals
    - Communication Orders
    - Supplies
    - Non Categorized
  - Medication History

Component Status Dose ... Details

ICU HAU Admission (Initiated)  
Last updated on: 12-Nov-2022 01:41 PST by: Black, Anna, MD

- Admit/Transfer/Discharge
  - Verify that an 'Admit to' Order has been entered prior to completing the powerplan (NOT required for direct admit patients)
- Patient Care
  - Ensure Allergies Documented
  - Ensure Medication Reconciliation Completed
  - Critical Care Goals Discontinued 12-Nov-2022 01:40 PST, MAP greater than 60, SpO2 goal: greater than 92%
  - Weight Completed 12-Nov-2022 01:40 PST, once, Stop: 12-Nov-2022 01:40 PST, On admission
  - Height/Length Discontinued 12-Nov-2022 01:40 PST, once, Stop: 12-Nov-2022 01:40 PST, On admission
  - Vital Signs Discontinued 12-Nov-2022 01:40 PST, q1h, for 12 hours, then q2h
  - Temperature Discontinued 12-Nov-2022 01:40 PST, q4h
  - Conditional Order - Ongoing Discontinued 12-Nov-2022 01:40 PST, if/when temperature greater than 38.5 DegC and not completed in past 24 hours, then RN to ord...
  - Oximetry - Continuous Discontinued 12-Nov-2022 01:40 PST
  - Cardiorespiratory Monitoring Discontinued 12-Nov-2022 01:40 PST, Monitor at all times
  - Monitor Urine Output Discontinued 12-Nov-2022 01:40 PST, Stop: 12-Nov-2022 01:40 PST, q1h, for 12 hour, then q2h
  - Monitor Intake and Output (Fluid Balance) Discontinued 12-Nov-2022 01:40 PST, q12h
  - Pain Assessment Discontinued 12-Nov-2022 01:40 PST, q4h, if patient expresses pain, use Numeric Rating Scale (goal less than 4). If patient exhibits sign...
  - IPAC ICU ARO Swab Protocol Ordered 12-Nov-2022 01:40 PST  
This order is part of a powerplan and will trigger automatic ARO swab culture orders as per site specific guidelines.
- Lines/Tubes/Drains
  - Insert Peripheral IV (Intravenous) Catheter Completed 12-Nov-2022 01:40 PST, Insert 2 large bore IV's unless already in place
  - Contraindications to nasal insertion include facial, basal skull, or neck trauma. Order X-ray post tube placement to confirm position, if required
  - Insert Urinary Catheter Completed 12-Nov-2022 01:40 PST, Indwelling, Daily assessment for need of catheter
- Activity
  - ICU Early Mobilization Goal Discontinued 12-Nov-2022 01:40 PST, Stages 3 to 6
- Diet/Nutrition
  - Review the most current diet order for therapeutic requirements, food texture and fluid thickness. Add anything to be carried forward to the new Diet Order
  - NPO Discontinued 12-Nov-2022 01:40 PST, Except for Medications
  - Refer to your organization's enteral nutritional guidelines and policies

Details

Orders For Cosignature Orders For Nurse Review Save as My Favorite Orders For Signature



# Removing ICU Powerplan

Document Medication by Hx | Reconciliation | Check Interactions | External Rx History

Reconciliation Status: ✓ Meds History ✓ Admission ⓘ Discharge

Orders Medication List

View

- Orders for Signature
- Plans
  - Medical
    - MED General Medicine Admission (Initiated) **1**
      - ICU HAU Admission (Initiated) **2**
        - Discontinue **3**
        - Plan Information...
        - Add Comment
        - Save as My Favorite
      - VENOUS THROMBOEMBOLISM
      - ICU/HAU Electrolyte Replacement
      - ICU Standard Bowel Protocol
    - GYN Gynecology Admission (Initiated)
    - Laboratory
      - Hepatitis Suspected Chronic
  - Suggested Plans (0)
  - Orders
    - Admit/Transfer/Discharge
    - Status
    - Patient Care
    - Activity
    - Diet/Nutrition
    - Continuous Infusions
    - Medications
    - Blood Products
    - Laboratory
    - Diagnostic Tests
    - Procedures
    - Respiratory
    - Allied Health
    - Consults/Referrals
    - Communication Orders
    - Supplies
    - Non-Categorized
  - Medication History

Related Results | Formulary Details

Orders For Cosignature | Orders For Nurse Review | Save as My Favorite | Orders For Signature

**Discontinue - ICU HAU Admission**

| Key...                   | Component                 | Status  | Order Details                                                                                                                                  |
|--------------------------|---------------------------|---------|------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | PAC ICU ARO Swab Protocol | Ordered | 12-Nov-2022 01:40 PST<br>This order is part of a powerplan and will trigger automatic ARO swab culture orders as per site specific guidelines. |

OK Cancel

DISCHARGE



# Discharge: Med Reconciliation

1

2

Reconciliation

- Admission
- Transfer
- Discharge

| Order Name                            | Status  | Dose ...                                                                                               | Details                                           |
|---------------------------------------|---------|--------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| enoxaparin                            | Ordered | 40 mg, subcutaneous, qPM, drug form: syringe-inj, start: 30-Oct-2022 17:00 PDT                         | For weight 41 to 100 kg. Continue until discharge |
| acetaminophen                         | Ordered | 650 mg, PO, q4h, PRN pain-mild or fever, drug form: tab, start: 30-Oct-2022 13:09 PDT                  | Maximum acetaminophen 4g/24 h from all sources    |
| dimenhydrinate (dimenhydrinate PR...) | Ordered | dose range: 25 to 50 mg, PO, q4h, PRN nausea or vomiting, drug form: tab, start: 30-Oct-2022 13:09 PDT | GRAVOL EQUIV                                      |

# Discharge: Med Reconciliation

| Order Name/Details                |                                                                                                                    | Status     |                       |                       |                       |
|-----------------------------------|--------------------------------------------------------------------------------------------------------------------|------------|-----------------------|-----------------------|-----------------------|
| <b>Home Medications</b>           |                                                                                                                    |            |                       |                       |                       |
|                                   | <b>bictegravir/emtricitabine/tenofovir (Biktarvy oral tablet)</b><br>1 tab, PO, qdaily                             | Documented | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|                                   | <b>diclofenac-miSOPROstol (Gd-Diclofenac/Misoprostol 75 mg-200 mcg oral tablet)</b><br>1 tab, PO, BID              | Documented | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|                                   | <b>gabapentin (Jamp-Gabapentin 300 mg oral capsule)</b><br>4 caps, PO, BID                                         | Documented | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|                                   | <b>ramipril (Apo-Ramipril 2.5 mg oral capsule)</b><br>1 cap, PO, BID                                               | Documented | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|                                   | <b>rosuvastatin (Sandoz Rosuvastatin 40 mg oral tablet)</b><br>1 tab, PO, qdaily -Unable to obtain information     | Documented | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <b>Continued Home Medications</b> |                                                                                                                    |            |                       |                       |                       |
|                                   | <b>ASA (ASA 81 mg oral delayed release tablet)</b><br>1 tab, PO, BID -Taking, not as prescribed                    | Documented | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|                                   | <b>ASA</b><br>81 mg, PO, qHS                                                                                       | Ordered    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|                                   | <b>budesonide-formoterol (Symbicort Turbuhaler 200 mcg-6 mcg/inh inhalation powder)</b><br>2 puff, inhalation, BID | Documented | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|                                   | <b>budesonide-formoterol (SYMBICORT Turbuhaler 200 mcg-6 mcg/puff inhaler)</b><br>1 puff, inhalation, BID          | Ordered    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|                                   | <b>clonazepam (PMS-Clonazepam-R 0.5 mg oral tablet)</b><br>1 tab, PO, BID                                          | Documented | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|                                   | <b>clonazepam</b><br>0.375 mg, PO, qHS, PRN: sleep                                                                 | Ordered    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|                                   | <b>escitalopram (Teva-Escitalopram 20 mg oral tablet)</b><br>1 tab, PO, BID                                        | Documented | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|                                   | <b>escitalopram</b><br>20 mg, PO, qdaily                                                                           | Ordered    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|                                   | <b>metoprolol (Apo-Metoprolol tartrate 50 mg oral tablet)</b><br>1 tab, PO, BID                                    | Documented | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|                                   | <b>metoprolol</b><br>50 mg, PO, BID                                                                                | Ordered    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|                                   | <b>QUetiapine (Mint-QUetiapine 100 mg oral tablet)</b><br>2 tab, PO, qHS                                           | Documented | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|                                   | <b>QUetiapine</b><br>6.25 mg, PO, qHS                                                                              | Ordered    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |



**Continue:** used for medications the patient was taking before they came into hospital. Note if you select this option the medication will not show up on the patients discharge prescription. You must hand write on the prescription to continue this medication.



**Prescribe:** if you select this option the medication will show up on the discharge prescription.



**Stop:** if you select this option the medication will not show up on the discharge prescription. If you want the patient to stop a home medication, you must hand write stop on their discharge prescription.

# Discharge: Patient Handout

**Menu**

- Provider View
- Results Review
- Orders + Add
- Medication List + Add
- Documentation + Add**
- Allergies 1 + Add
- Appointments
- Diagnoses and Problems
- Histories
- MAR Summary
- MAR
- Form Browser
- Print to PDF
- Patient Information
- Interactive View and I&O
- Lines/Tubes/Drains Summary
- Newborn Record

**Documentation** Full screen Print 1 minutes ago

**+ Add** 2

**New Note** × New Note × List

Note Type List Filter:  
All

**\*Type:**  
Discharge Instructions

Title:  
Patient Discharge Handout

**\*Date:**  
30-Oct-2022 1055 PDT

**\*Author:**  
Choi, Jung-In, MD

All (121) Favorites (7) Search

**\*Note Templates**

| ★ | Name                                   | Description                                |
|---|----------------------------------------|--------------------------------------------|
| ☆ | Outpatient Visit Summary Note          | Outpatient Visit Summary Note Template     |
| ☆ | Pain Service Consult Note              | Pain Service Consult Note Template         |
| ☆ | Pain Service Progress Note             | Pain Service Progress Note Template        |
| ☆ | Palliative Medicine Sedation Note      | Palliative Medicine Sedation Note Template |
| ★ | <b>Patient Discharge Handout</b>       | Patient Discharge Handout                  |
| ☆ | Patient Discharge Medication List Note | Patient Discharge Medication List Template |
| ☆ | Pediatric Transplant Clinic Note       | Pediatric Transplant Clinic Note Template  |
| ☆ | Pediatric Transplant Note              | Pediatric Transplant Note Template         |

OK Cancel

# Discharge: Patient Handout

Documentation

Font Size [Icons] B I U S A- [Icons]

**Visit Information**  
Location: SPH St Pauls Hospital  
Visit Date and Time: 06/19/2021 14:11 PDT  
Primary Care Physician: Loyal Medical Clinic, Vancouver - West Georgia St, 604-428-8313  
Attending Physician: Greene, Michael Robert, MD, (604)806-9090

Discharge Date and Time  
20-Jun-2021 00:04:01

**Primary Health Care Provider was notified in the first 24 hours post admission**  
 Yes  
 No

**Copy of this form provided to:**  
 Patient  
 Primary Health Care Provider / Family Physician

**Instructions for Primary Health Care Provider**

**Notes for Specialist Provider**

**Triggers for Re-Referral or Telephone Advice**

**Other consulting providers involved in patient's hospital care**  
ED Consult to General Internal Medicine - Completed  
-- 19-Jun-2021 19:01 PDT, Urgent, Reason for Consult: ED Consult

**Other supports consulted during development of the discharge plan**  
No qualifying data available.  
 Long Term Care  
 Other

Note Details: Discharge Instructions, Choi, Jung-In, MD, 30-Oct-2022 10:55 PDT, Patient Discharge Handout

Sign/Submit Save Save & Close Cancel

# Discharge: Patient Order

Search:  Advanced Options Type:

Search within:

- Discharge Activity Restrictions
- Discharge Bathing Education
- Discharge Drain Care Education
- Discharge Ice Therapy Education
- Discharge Patient**
- Discharge Patient Instructions
- Discharge Planning Education
- Discharge Positioning Education
- Discharge Support and Compress Education
- Discharge Surgical Wound Education
- Discharge to External Site
- Newborn Discharge Checklist
- PED Newborn Discharge
- Home Oxygen on Discharge - Bedside
- Notify Treating Provider Discharge Ready
- \*Enter\* to Search

- Hematology Orders
- Infectious Disease Orders
- Long Term Care Orders
- Mental Health Orders
- MFM Orders
- Nephrology Orders
- Neurology Orders
- Neurosurgery Orders
- NICU Orders
- OB/GYN Orders
- OMFS Orders
- Oncology Orders
- Ophthalmology Orders
- Orthopedic Orders
- Pediatric Nephrology Orders
- Pediatric Neurology Orders
- Pediatric Neurosurgery Orders
- Pediatric OMFS Orders
- Pediatric Orthopedic Orders
- Pediatric Otolaryngology Orders
- Pediatric Palliative Care Orders
- Pediatric Plastic Surgery Orders
- Pediatric Respiriology Orders
- Pediatric Rheumatology Orders
- Pediatric Surgery Orders
- Pediatric Urology Orders
- Physical Medicine Rehab Orders
- Plastic Surgery Orders
- Podiatry Orders
- Radiation Oncology Orders
- Respirology Orders
- Rheumatology Orders
- Rural Medicine Orders
- Trauma Adults Orders
- Trauma Peds Orders
- Urology Orders

**Write in "specific instructions"**

- RN to give Rx in chartlet and print patient handout