Computerized Provider Order Entry (CPOE) Provider Training Manual
CPOE Training Guide: Table of contents

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CPOE: Safer Order Entry

- CPOE brings key safety functionality to the order entry process that is not possible on paper.

- Key safety features include:
  - Legible orders.
  - Clear communication of ordering provider.
  - Drug-Drug Interaction checking.
  - Duplicate Drug checking.
  - Drug-Allergy checking.
  - Clinical Decision Support.
  - Medication triggered lab order entry.
  - Faster results for lab orders.
Scope of CPOE at SVH

In-Scope Units Include:
- 21S
- 22S
- 23S
- 24N
- 32S
- 33S
- 34N
- 35N
- 36N

Because of the complexity of certain medications and therapies, certain orders will remain on paper indefinitely regardless of patient location.

These paper orders include:
- Chemotherapy
- Transfusion reaction
- DNR/DNI/CMO (blue sheet)
- Consult orders will be entered electronically, but consult form will still be placed in chart by ordering provider to allow specialist documentation

Several care areas are out of scope for phase I of CPOE.

The care areas that are OUT of scope include:
- ICU/PCU
- Pre-Admitting Testing, Holding Area, OR, PACU
- CWI, Pediatrics
- Psychiatry
- IR, Cath. Lab, Endoscopy
- ALL outpatient areas
- The ER will continue to use MedHost for CPOE.

Bringing each of these units into electronic order entry is a goal of the organization, and a unit-specific plan will be developed over time to do so.
Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.
Signing into Physician Desktop and CPOE

First enter the physician desktop and by picking option #2 (Workload Management) then click on the CPOE icon
Finding Patients and Creating a Rounding List

Either click “Inpatient” if you have already added patients to your Rounding List -or- “Find Patient” to find any patient.
Finding Patients and Creating a Rounding List

Locate patients by any of the following:

Patients may be added to your “Rounding List” by selecting the patient then clicking “Add To List”
If a patient has been admitted previously, you must choose a visit date. Always pick the most recent visit and click “Selected” then “Order” on the next screen.
Review Patient’s Orders Screen

- Click ALLERGIES button to enter coded allergies that instantly update system.
- Click ORDER SETS button to select an Order Set for order entry.
- The SUBMIT button is activated when you enter new orders that require password to activate.
- Click SIGN button to review and sign any outstanding telephone orders on this pt.
Meditech banner is instantly updated when allergy, code status, and height/weight are entered.

Active Orders provides a snapshot of all of patient’s orders. When an active order is selected, it can then be viewed in more detail and changed as needed.

Click **VIEW/CHANGE** to edit active orders. This is preferred method to change orders rather than writing a new, redundant order.

Click **ORDERS** to enter individual non-med “a la carte” orders. These include nursing, lab and radiology orders.

Click **MEDS/FLUIDS** to enter medications and IV fluids.
Transferring patients in and out of CPOE care areas

Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.
# Transfers In and Out of CPOE areas

<table>
<thead>
<tr>
<th>From</th>
<th>To</th>
<th>Provider Workflow</th>
</tr>
</thead>
<tbody>
<tr>
<td>ER Floor</td>
<td>CPOE Floor</td>
<td>CPOE Admission Orders will be entered by admitting physician, PA/NP using the <strong>TRANSFER</strong> function</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1) Select desired patient in ER location</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2) Update PAML by pushing “Reconcile Meds” button but <strong>do not make actions on them</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>3) Push <strong>“Transfer”</strong> button</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4) Make actions on PAML meds (Cont, Suspend, DC, Cnc)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5) Click <strong>“Order Set”</strong> button</td>
</tr>
<tr>
<td></td>
<td></td>
<td>6) Select desired order set</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7) Add additional orders as necessary using <strong>“Add More”</strong> button</td>
</tr>
<tr>
<td></td>
<td></td>
<td>8) Submit your orders</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9) Orders will be printed by ED RN so that ER staff can review admission orders</td>
</tr>
<tr>
<td>CPOE Floor</td>
<td>ICU/PCU</td>
<td>Use Paper Process</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Use paper order sets to enter new orders on ICU patients.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Re-order medications that must be continued in ICU.</td>
</tr>
<tr>
<td>ICU/PCU</td>
<td>CPOE Floor</td>
<td>CPOE <strong>TRANSFER</strong> Functionality will be used by transferring provider (resident, PA/NP or attending physician)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1) Click <strong>“Transfer”</strong> button</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2) Reconcile current orders by clicking continue or stop for each active order</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3) Use <strong>“Add More”</strong> button on top right-hand corner of screen to add desired <strong>Transfer Order Set</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>4) Add new orders as needed using <strong>“Add More”</strong> button</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5) Submit <strong>Transfer Session</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>6) Print transfer orders for ICU staff</td>
</tr>
</tbody>
</table>
## Transfers In and Out of CPOE areas

<table>
<thead>
<tr>
<th>From</th>
<th>To</th>
<th>Provider Workflow</th>
</tr>
</thead>
<tbody>
<tr>
<td>PACU (IP)</td>
<td>CPOE Floor</td>
<td>CPOE <strong>TRANSFER</strong> Functionality will be used by surgeon or surgical PA writing post-op orders</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1) Select desired patient</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2) Push “Transfer” button</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3) Reconcile current orders by clicking continue or stop for each active order</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4) Use “Add More” button on top right-hand corner of screen to add desired Transfer Order Set</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5) Add additional orders as necessary using “Add More” button</td>
</tr>
<tr>
<td></td>
<td></td>
<td>6) Submit your orders</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7) Print orders for PACU staff</td>
</tr>
<tr>
<td>PACU (OP)</td>
<td>CPOE Floor</td>
<td>CPOE Admission Orders will be entered by Surgeon or Surgical PA/NP using the <strong>TRANSFER</strong> function</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1) Select desired patient</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2) Update PAML by pushing “Reconcile Meds” button but <strong>do not make actions on them</strong></td>
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<tr>
<td></td>
<td></td>
<td>9) Print orders for PACU staff</td>
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<tr>
<td>PACU</td>
<td>ICU/PCU</td>
<td>Use paper process</td>
</tr>
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<td></td>
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<td>*Use paper order sets to enter new orders on ICU patients</td>
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<tr>
<td></td>
<td></td>
<td>*Re-order medications that must be continued in ICU</td>
</tr>
</tbody>
</table>
Transfers In and Out of CPOE areas

![Image of a patient's electronic medical record showing the 'Transfer' option highlighted.]

<table>
<thead>
<tr>
<th>Category</th>
<th>Orders</th>
<th>Pri</th>
<th>Date/Time</th>
<th>Status</th>
<th>Stop</th>
<th>Mg</th>
</tr>
</thead>
<tbody>
<tr>
<td>TELEMETRY (1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TELEMETRY (WNUR)</td>
<td>06/04</td>
<td>Q2H</td>
<td></td>
<td>Active</td>
<td>06/06</td>
<td></td>
</tr>
<tr>
<td>RENEW (2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>URINARY CATHETER (PAT.CARE)</td>
<td>06/11</td>
<td></td>
<td>Active</td>
<td>06/12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MEDICATIONS (12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bisacodyl Supp (Bisac-Evac Supp)</td>
<td>06/22</td>
<td>0830</td>
<td>UnvPHA</td>
<td>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PR 10 MG DAILYPRN</td>
<td></td>
<td></td>
<td>PRN CONSTIPATION</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Senna Tab (Senokot Tab)</td>
<td>06/22</td>
<td>0830</td>
<td>UnvPHA</td>
<td>*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PO 8.6 MG DAILYPRN</td>
<td></td>
<td></td>
<td>PRN CONSTIPATION</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ciprofloxacin Tab (Cipro Tab)</td>
<td>05/23</td>
<td>2200</td>
<td>Active</td>
<td>Renew</td>
<td></td>
<td></td>
</tr>
<tr>
<td>◾PO 500 MG DAILY10.22</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ciprofloxacin Tab (Cipro Tab)</td>
<td>05/23</td>
<td>2200</td>
<td>Active</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Transfers In and Out of CPOE areas
Transfer Screen

Use the “Add More” button to add more single orders, sets or meds and link to transfer session.

All active orders can be continued or stopped by clicking the appropriate button.

PAML meds appear at the top
Active Meds appear in the bottom
Transfers In and Out of CPOE areas

Once Submitted, Transfer orders will not be active until patient arrives on destination floor
Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.
Allergies

Providers can add allergies directly into the system. This allows instant drug-allergy interaction checking for subsequent meds.

Click the ALLERGY button to begin entering new allergies.
Avoid using Uncoded Allergies whenever possible because the system cannot perform allergy, duplication, or interaction checking.
Entering Allergies

To add a new allergy, click the NEW button, then search for desired allergy. The ones that appear in the list are “Coded.”

Select the drug for the desired allergy.

Click Severity of allergic reaction.

Click specific reaction to drug here.
Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.
After selecting a patient, click on Order, then click on Reconcile Meds.

First click on order

Then click on Reconcile Meds
Updating the Pre-Admission Medication List (PAML)

• Providers should make sure Allergies are updated first.
  • This can be done from the Reconcile Meds Screen.
• This screen will appear blank if patient has never had PAML entered electronically.
• If there is already a PAML in the Medication Reconciliation screen the provider can add any additional missing medications by clicking Upd Med List

![Image of Medication Reconciliation Screen]

- Update Allergies first
- Click Upd Med List to begin entering patient’s PAML
- A type ahead lookup allows for Providers to easily find the medication they are looking for (brand or generic).
- Highlight the drug and press select when you find the correct medication.
- Medications with an * inform the provider that the medication is on formulary.
- If the patient has no home meds - click Set Profile to No Meds

![Update Med List](image)
Updating the PAML

• Select a **pre-built order string** or manually type in the information provided by the patient.
  • Note: the string with Qty and Refills should be reserved for prescription printing upon discharge.
  • Required fields for inpatient ordering are **Dose**, **Units**, **Route** and **Frequency**.
  • Instructions and Comments may be entered, but this info will **not** flow to inpatient orders.

Click on the blue string even though it is already highlighted in order for dose, units, etc. to populate.

Do NOT use instructions/comments for **inpatient orders**.
Updating the PAML

Undefined Medications

• If there is a medication that the patient cannot identify click Undefined Med and enter any medication information using free text.
• To change any medications in the PAML, highlight the med then click Change

No conflict checking is provided for [ ] medications.
Updating the PAML
Changing Medications

- Click Replace/Change then enter the replacement medication
Updating the PAML

Notice that all entered meds will now appear under “Pre-Admission medication List”
• The provider can enter any last taken information by clicking on <Last Taken>.
• No fields are required.
The date/time the dose was last taken will appear beside the medication. If the provider clicks “Yes” under Attention Required, the box under last taken will be highlighted in yellow to alert other providers.
Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.
Reconciling Meds

Two places to Reconcile Medications

- **Transfer Function** - If the admission process will utilize the Transfer function (ED admission, OR, etc.)
  1. Update the PAML in Reconcile Meds
  2. Then address whether to continue, suspend, discontinue or cancel meds in the Transfer routine
  3. Then click Add More to add any order sets, orders, or meds/fluids for admission orders

- **Reconcile Meds** - If the admission process will **bypass** the Transfer function (direct admissions)
  1. Update the PAML in Reconcile Meds
  2. Stay in the Reconcile Meds routine to continue, suspend, discontinue or cancel meds
  3. Order additional order sets, orders, or meds/fluids from the main CPOE screen

Most of the time you will use **Transfer to Reconcile Meds**

This will be less likely
Reconciling Meds from “Transfer”

• After all meds in the PAML have been entered, go to the Transfer routine to continue, suspend, discontinue or cancel medications.

After done updating the PAML, click on Return, then proceed with the Transfer process.
Reconciling Meds from “Transfer”

• Click Transfer
Reconciling Meds from “Transfer”

• Continued medications will appear under Inpatient Orders.
• After addressing all meds under PAML, click on Add More and then order any additional orders necessary for the admission.
• When finished, click Done then Submit.
## Reconciling Meds

<table>
<thead>
<tr>
<th>Button</th>
<th>Admission/Inpatient Result</th>
<th>Discharge Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cont</td>
<td>Continues home medication by placing an <strong>inpatient order</strong> for the same medication.</td>
<td>The same medication will show up in the PAML and the inpatient med list.</td>
</tr>
<tr>
<td>Suspend</td>
<td>The medication is <strong>held</strong> for a defined period of time</td>
<td>The medication will show up in the PAML again to be continued or stopped.</td>
</tr>
<tr>
<td>DC</td>
<td>Use if the patient was taking but is no longer taking the medication</td>
<td>This will show up as <strong>“Stop taking”</strong> on the discharge paperwork.</td>
</tr>
<tr>
<td>Cnc</td>
<td>Use ONLY if a medication was entered in <strong>error</strong> (e.g. wrong patient, wrong med) or if the patient states they have never taken this medication.</td>
<td>This will <strong>not</strong> appear at all on the discharge screen or the discharge <strong>paperwork</strong>.</td>
</tr>
</tbody>
</table>
Reconciling Meds

• Click the gray “Cont” to select which medications you wish to continue.
  • Notice the system will tell you which meds are formulary vs. non-formulary.
• If you choose to continue a Non Formulary med, the system will launch you into Meds/Fluids to order an alternative or a patient’s own med.

If you click on the Cont button, a box will appear. The system will tell you which medications are formulary and which are non-formulary.
Reconciling Meds
Non Formulary

If you choose to continue a Non Formulary medication, you will be brought to the Meds/Fluids lookup.
The non formulary med will appear in the blue header.

Begin typing the medication to check if there is a hospital approved therapeutic substitution.

If there is no therapeutic substitution, either

- Order an alternative medication
- OR
- Click on Non-Formulary to order a patient’s own medication (refer to section on Non-formulary and Patient Own Med orders).
You must enter each medication separately.
Type the first medication in the combo product.
Reconciling Meds
Combination Products

• After entering the first medication in the combo product click **Add More** then click Meds/Fluids

• Then order the second medication in the combo product
Reconciling Meds
Changing Dose, Frequency, etc.

• After choosing to continue the medication, click on Avail

• Make any necessary changes to the dose/freq
Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.
Ordering Medications

To order a medication, select the Meds/Fluids button to the right of the profile. Note: Do NOT select Orders.
Ordering Medications

1. Begin to type the medication either by generic name or trade name and select the appropriate option by clicking on the (+)

2. Select the appropriate route of administration.
Ordering Medications
Pick the String!

1. Select the dose

2. Look for order strings located in the lower portion of the screen.

3. Select the order string that is the closest match to what you would like to order. The criteria for dose, directions, prn and start will automatically populate.

Always pick the String first!!
If the medication is PRN, click on PRN and select an option. You can free text PRN reasons. When finished, click Done.
Ordering Medications
Changing directions

If you wish to change the Directions, click on the box and either scroll or begin to type the new directions you would like.
When ordering scheduled medications, ALWAYS look at the Directions, Start, and Stop fields. The start date and time will always default to the NEXT scheduled time.

**Admin Time**: In this example, the 09, 21 after Q12H indicates that the medication is to be given at 0900 and 2100 every day.

**Start Date/Time**: In this example, if it is after 0900 when you place the order, the start date will default to tonight at 2100.
Ordering Medications
Changing Start Date & Time to Today/Now

1. If you wish to begin the medication now, click on the Start field and select Today/Now then push Done.

2. A query will appear regarding the first and next dose. Select the option that best fits what you wish to do with the first and next dose then press OK.
Ordering Medications

Changing Start Date & Time to a future time

1. If you wish to start at a different date/time, choose one of the times or click on the Calendar button.

2. You can select the date by the clicking on the calendar and the time by clicking on HH (hour) and MM (minute).
To order an IV medication that is NOT an IV fluid, search under the Medication section. If there is an option for a Premix bag that matches the dose you wish to order, select that option instead of Inj. Otherwise, select Inj and order the dose.
Ordering Medications
Changing an order

1. Select the medication
2. Click View/Change
3. Click Avail
Ordering Medications
Admin Criteria and Special Instructions (Inst)

Always look for the * within the **Inst and Admin Criteria** fields. This means that there is information that either needs to be reviewed or is required to be provided. Note: if you do not click on these fields, they will open after you click Done.

Admin Criteria will pop-up at the RN during Medication Administration.
Ordering Medications
Admin Criteria

To access the information, click on the field with the *
It is very important to thoroughly review this information, as you can make any changes you need.
This example shows the actual protocol for the insulin sliding scale, and there is a place for the provider to indicate the dosages based on blood glucose level.
Ordering Medications
Different Types of Admin Criteria

Other Admin Criteria:
• Titrateable medications
• Warfarin
• Hold Parameters
Ordering Medications
Choosing a Different Admin Criteria

Note: there may be other admin criteria available for the medication to select. Click the down arrow next to the Admin Criteria title to view other available options. In this example, if you wanted to change the sliding scale orders, you can do that within this order without having to re-order the medication.
Ordering Medications
Special Instructions

Special Instructions can be used to provide additional information to nursing or pharmacy re: the order.
Some medications already have special instructions and you will see a * in the box.
If there is no * in the box, you can always add information by clicking on the field then a box will appear where you can free text any information you feel is necessary.
Ordering Medications
Non-formulary and Patient Own Medications

1. Click on Non-Formulary

2. Click on Non-Formulary Med
Ordering Medications
Non-formulary and Patient Own Medications

No Allergy, Duplication, or Interaction Checking occurs
Ordering Medications
Non-formulary and Patient Own Medications

You will have to enter info in all of the blank fields indicated below. The system cannot prompt you for specific information.
Ordering IV Fluids

Click on the Fluids button (the color will change from light blue to dark blue), then begin to type the desired IV fluid.
Ordering IV Fluids
Pick the String!

1. Select the rate.

2. Look for order strings located in the lower portion of the screen.

总是选字符串！！

3. Select the order string that is the closest match to what you would like to order. IV Fluids usually only have one string option.
Ordering IV Fluids
Changing the Rate

If you wish to order a rate that is not listed, first select the string, then go back to Rate and select <Other>
Ordering IV Fluids
Changing the Rate

Type in the rate and ensure that Rate Units is ML/HR. The default stop will always be 24 hrs from the time of ordering. If you wish to change the total volume to infuse or the number of bags you can do so then click OK at the bottom of the box.
The default stop date/time on all IV fluid order strings is a 24 hours per hospital policy. If you wish to change this, you can do so by: 1.) total volume, 2.) number of bags to be given or 3.) stop date/time.
Antimicrobial Orders
Renewals (Clinical Indication)

You will be prompted to designate a clinical indication. Your selection will affect the renewal period of the medication.
Antimicrobial Orders Renewals

You will be prompted to renew medications in the Review Orders Screen. If you do not renew the medication, the patient will continue to receive the antimicrobial until you place an order to discontinue. If you wish to renew the antimicrobial, can simply click Renew/Repeat and the status of the order will change.

There is no hard stop on antimicrobials unless you designate one.
Some antimicrobials have ID restrictions associated. Depending on the restrictions, you will see one of two different types of admin criteria appear.

This is an example of a medication that always needs ID approval.

This is an example of a medication that may not need ID approval depending on the indication.
When placing initial antimicrobial orders that require a trough, look in the Special Instructions field to review and/or place the trough instructions. Note: all subsequent trough orders will have to be ordered in the lab section.

Ex. All vancomycin order strings already have a trough order in the Special Instructions. You can always change or remove this order.
Using Order Sets

Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.
Click the “ORDER SETS” button to look for desired order set.
Order Sets

Order sets are organized in categories. Either click the category to quickly get to the set you need or search through all order sets using the scroll bar.

- Click category to drill down into specific groups of sets.
- Then check the box for specific desired order set.
Order Sets

Once selected, order set presents in collapsed format.

Click first “+” sign to expand ALL categories of the set.

Click “+” sign at the category level to only open the orders in a specific category.
Some orders are pre-checked, and others are available for provider to add by checking the box.

When pencil turns RED it means addition information is needed for the order to be completed.

Unchecked boxes can be checked if order is desired.
Order Sets

Additional order sets, orders or meds/fluids can be added easily by clicking ADD MORE button.

Many order sets have “Associated Sets” attached to them. Click ADD MORE and then ORDER SETS to find associated sets.

When you use the ADD MORE button to add sets, do not click the DONE button until you have scrolled through each set.
Order Sets

Provider must click NEXT SET button when a set has been added.

Click NEXT SET when done with current set.

Click DONE only when all sets have been completed.
Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.
Ordering Lab Tests

Click the "ORDERS" button to look for desired lab test.
Ordering Lab Tests

Enter lab test in search window and click desired lab test (or click SELECT button.)
Click PRI field to change order to STAT if needed. User will then be prompted to enter STAT reason.

Choose a time or click on Other times

If you click on Other times, you will see the pre-set Phlebotomy rounding times.
Ordering Lab Tests
Type of Line and Stat Reason

Provider must designate whether or not patient has a Central Line/PICC. This routes the order to RN if lab should be collected by RN or to the phlebotomist if needs to be collected by the lab team.

This field must be checked on first lab order but then auto-populates for subsequent orders.

STAT REASON becomes required field only if STAT designated for lab.
Use the “Next Morning Labs” short order set to order labs for tomorrow morning.

Click the box for the desired “Next Day” lab and the lab will automatically be ordered for the next calendar day at 7AM.
Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.
Click the "ORDERS" button to look for radiology orders.
Enter desired modality for radiology study.

Click Select when desired study is highlighted. Or simply click the desired study.
Radiology Orders

Provider must enter BOTH “signs/symptoms” and “clinical information” so that radiologist receives accurate clinical picture.

Click OK when Signs/Symptoms and Clinical Information completed.
Use “Common Diagnostic Img Exams” short order set to more easily find radiology exams.
Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.

Diet Orders
Diet Orders

Search for diet. Choose the primary diet.

<table>
<thead>
<tr>
<th>Order Description</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADA DIABETIC DIET</td>
<td>DIETARY SUH</td>
</tr>
<tr>
<td>BRAT DIET</td>
<td>DIETARY SUH</td>
</tr>
<tr>
<td>CARDIAC DIABETIC DIET</td>
<td>DIETARY SUH</td>
</tr>
<tr>
<td>CARDIAC DIET</td>
<td>DIETARY SUH</td>
</tr>
<tr>
<td>CLEAR LIQUID DIET</td>
<td>DIETARY SUH</td>
</tr>
<tr>
<td>FULL LIQUIDS DIET</td>
<td>DIETARY SUH</td>
</tr>
<tr>
<td>GI SOFT/BLAND DIET</td>
<td>DIETARY SUH</td>
</tr>
<tr>
<td>GLUTEN FREE DIET</td>
<td>DIETARY SUH</td>
</tr>
<tr>
<td>HIGH FIBER DIET</td>
<td>DIETARY SUH</td>
</tr>
<tr>
<td>HIGH POTASSIUM DIET</td>
<td>DIETARY SUH</td>
</tr>
<tr>
<td>HIGH PROTEIN/HIGH CALORIE DIET</td>
<td>DIETARY SUH</td>
</tr>
<tr>
<td>KOSHER DIET</td>
<td>DIETARY SUH</td>
</tr>
<tr>
<td>LACTOSE FREE DIET</td>
<td>DIETARY SUH</td>
</tr>
</tbody>
</table>

More
Diet Orders

Click on **Req** to add details to the diet.
Click F9 for the drop-down list for all additional diets. Providers can add appropriate diet types to original diet as needed.

Add diet supplements, such as Ensure, using this field.

Meal times will auto-populate, just click this field to display. All Meals are Required.
Diet Orders
Additional Diets

Additional diets: Choose from the list of diets to add another or multiple diets.

- Two Combination Diets Available in List
  - Cardiac Diabetic Diet
  - Renal Diabetic Diet

- Order these together so you do not have to add an additional diet
Choose from the list of supplements

- Always free text a frequency such as...
  - With meals
  - BID with lunch and dinner
  - One/day with lunch
Diet Orders
Supplements

To order only a supplement--Search nutritional supplements; follow the supplement ordering instructions
Choose the meal for the patient to start eating—REQUIRED

Add Solid Texture and Liquid Consistency—per SLP or if recommended prior to admission
Add any additional comments you have about the diet such as....
- Advance as tolerated (for nursing to advance diet)
- Speech recommendations

**NOT** for nutrition consults. They need to be ordered separately

Any new diet order overrides old diet orders
- Always use the additional diet area for multiple diets

You can just add a supplement
- You do not have to re-order the whole diet to add a supplement
Diet Orders

NPO

- **Always** include date/start time
- NPO for a test or surgery...
  - Add to additional diet
  - Include a stop time
  - Do **not** add a stop time if unsure how long the test will be
Diet Orders
Tube Feeding/NPO -or- Plus PO

Order Tube-feedings
- Two types of tube-feeding diets
  - Tube-feeding/NPO
    - Patient is not eating with TF
  - Tube-feeding Plus PO
    - Patient is eating with TF
Diet Orders
Tube Feeding/NPO

Free text: Start Rate, Advance Rate, Goal Rate and Route. Important information for nutrition and nursing.
Add to Primary Diet defaults to “Y”
Follow the same directions as TF/NPO
Diet Orders
How Dieticians Communicate Recommendations

- Use Medical Nutrition Therapy Order Set
- Call physician for telephone order
  - Diet changes
  - Supplements
  - TF
  - Additional lab or vitamin recommendations
- Order implemented
- Order placed in queue for physician signature
Co-signing Orders

Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.
Co-Signing Orders

Telephone and Verbal Orders

- Telephone and verbal orders are allowed based on SVH hospital policy.
- Verbal orders are restricted to rapid response and CODE BLUE scenarios. Please do not attempt to use verbal orders to avoid using CPOE.
- Telephone and verbal orders will trigger an electronic co-signature requirement.
  - Co-signature expectations are within 24 hours of order per hospital policy.
Co-Signing Orders

Telephone and Verbal Orders Workflow

- RN will need to sign-in from provider perspective and enter orders.
  - This allows RN to get decision support and alerts that provider would typically see.
  - The ordering provider will need to stay on the phone during a telephone order while RN encounters each alert and query.
  - The ordering provider will give answers to queries and, potentially, change order based on decision support.
  - In some cases, the ordering provider may find it more convenient to enter an order directly in CPOE due to nature of telephone orders.

- Expectation that at least 95% of all orders will be entered directly by provider into CPOE will help ensure that safety functionality of CPOE is realized.
Co-Signing Orders
Signing Telephone and Verbal Orders

1. Click “Sign Orders” button

2. Click “Sign” button
Co-Signing Orders
Signing Telephone and Verbal Orders

3. Click “Orders” at the top of the screen to view telephone/verbal orders only
4. Check off order(s) you wish to sign then push Submit
5. The order detail is displayed
6. Push Sign to co-sign the order
Co-Signing Orders
Med Student and Dietary Orders Workflow

- Med Students and Dieticians can place orders via CPOE
  - Orders will not be active until Approved by a Resident or Attending Physician
  - Once approved, orders will be viewable by Nursing and Pharmacy
Approving Med Student/Dietary Orders

Orders awaiting approval will have the Status unvNEW

- Select the order
- Push the “Approve” button
- Review the order
- Submit the order
Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.
Discharge Process

First click on order

Then click on Discharge
Discharge Process

Select the expected Discharge Date then click OK/Next
Discharge Process

Select “Discharge Planning” then click OK/Next
Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.
Discharge Process

Medications

Click on the gray box with a pencil adjacent to Prescriptions
Discharge Process
PAML Medications

• Pre-Admission Medication List displays all **continued** and **suspended** medications.
• Discontinued PAML medications will automatically appear under Discharge Plan as “Stopped”.
• Cancelled medications will **not appear** anywhere on this screen.
Discharge Process
PAML Medications

<table>
<thead>
<tr>
<th>Button</th>
<th>Discharge Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can</td>
<td>Use ONLY if a medication was entered in error (e.g. wrong patient, wrong med) or if the patient states they have never taken this medication. The medication will not appear at all in the discharge paperwork.</td>
</tr>
<tr>
<td>Cont</td>
<td>This will show up as “Continue Taking” in the discharge paperwork.</td>
</tr>
<tr>
<td>Stop</td>
<td>This will show up as “Stop taking” in the discharge paperwork.</td>
</tr>
<tr>
<td>Renew</td>
<td>This will show up as “Continue Taking” in the discharge paperwork and a prescription will be generated.</td>
</tr>
</tbody>
</table>
Discharge Process

PAML Medications-Renew

- When you click Renew (continue and generate a prescription) a box may appear
  - Enter Qty and Refills for the prescription
  - Enter the indication in the instructions box
  - Can click Y in the NS field to specify “No Substitution”
Click on the **Conv** box adjacent to any Current Inpatient Medications that the patient should take upon discharge that did not appear in the PAML.

- This will generate a prescription.
- Choose a Qty and Refills.
- Click on NS if you want “no substitution”.

---

### Discharge Process

### Inpatient Medications

<table>
<thead>
<tr>
<th>Medication</th>
<th>Qty</th>
<th>Days</th>
<th>Refills</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acetaminophen (Tylenol) 325 mg tab 650 mg po q4hr prn prn</td>
<td></td>
<td>0</td>
<td>Req’d</td>
<td></td>
</tr>
<tr>
<td>Azithromycin 500 mg in ns (Zithromax) 250 ml Dose: 500 mg Premixed at 500 mg/250 ml Q24h 250 mL/hr</td>
<td></td>
<td>View</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carvedilol (Coreg) 6.25 mg tab 6.25 mg po q12h</td>
<td></td>
<td>0</td>
<td>Req’d</td>
<td></td>
</tr>
<tr>
<td>Heparin sodium, porcine/pf (heparin sod 5,000 unit/0.5 ml) 5,000 unit sq q8h</td>
<td></td>
<td>0</td>
<td>Req’d</td>
<td></td>
</tr>
</tbody>
</table>
Discharge Process
Change in PAML Med dose/freq

- If the patient is to go home on the same medication from the PAML but with a different dose/freq
  - Click to stop the medication in the PAML
  - If the medication with correct dose/freq is listed under Current Inpatient Medications, click Conv
  - Otherwise, click on New Prescriptions and order from here.

1. Click to stop the PAML med.
2. Choose Dose/Frequency Changed
3. Choose to Conv a Current Inpatient Med
4. Or enter a New Prescription
Discharge Process

Additional medications

• To order any additional medications that are not under the “PAML” or “Current Inpatient Medications,” click on the gray box with a pencil adjacent to “New Prescriptions”
• When finished reconciling all medications in the discharge routine, click Done.
Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.
Discharge Process

Discharge Instructions

• Click on the gray box with a pencil adjacent to Reports
Select a discharge template then click OK
Discharge Process

Discharge Instructions

• Notice there are two tabs: Physician and Med List
  • Physician is for the Discharge Instructions
  • Med List will pull in all orders created under “Prescriptions”
• Every item with an * is a required field
• Click on the blank box adjacent to each item in order to populate the field
Discharge Process

Discharge Instructions

• Enter all required and appropriate fields
• Click OK/Next to get to the next field.
• After you address all required/appropriate fields under the Physician tab, you will be brought to the Med List tab.

OK/Next will bring you to the next query.
Discharge Process

Discharge Instructions

• After addressing every required field under Med List, you will be brought back to the Physician tab
• Click OK when finished with both Physician and Med List tabs
Discharge Process

Discharge Instructions

Click Submit
Discharge Process

Discharge Instructions

• Click Draft or Signed
  • Signed button will only be available if all *required* fields are populated
  • Choose Signed if the Discharge Instructions are final

Draft should be selected if:
• The report is incomplete
• Edits are expected
• Final signature is expected by resident or attending
• **NOTE:** The discharge instructions that you see in the preview screen are NOT what the patient will be receiving. The patient will receive a modified version that will include the nurse’s discharge instructions.
Discharge Process
Discharge Instructions

Click Done if complete (even if in Draft status)
Discharge Process
Discharge Instructions

- You will be prompted for Print Options
  - **Unclick** the Discharge Instructions Report (you cannot print them from here)
  - You can choose to print Prescriptions
    - The Printer should default to the local printer
  - If you do not wish to print right now, you can uncheck the options or push Cancel
- Sign any printed prescriptions
Discharge Process

Discharge Instructions – View Patient’s Copy

To print the version of the discharge instructions that the patient will be receiving, go back out to the main menu and click on the “Discharge Reports” icon
Discharge Process

Discharge Instructions – View Patient’s Copy

Type your patient’s name and then push Enter

If your patient’s name doesn’t appear in Blue immediately, push the Esc button on your keyboard.
Discharge Process

Discharge Instructions – View Patient’s Copy

Either Choose a printer to print the report or type “PREVIEW”

HEART FAILURE EDUCATION

- Diet: Eat a healthy diet. Limit the amount of salt in your diet and follow any additional instructions listed. Follow your doctor’s directions about how much liquid to drink.
- Weight: Weigh yourself at the same time every day. Call your physician if you know weight gains of more than 2 pounds in 2 days.
- Activity: Unless otherwise directed by your doctor, match your activity to the amount of energy you have. Get plenty of rest.
- Medications: Take medications as directed by your doctor. Do not take over-the-counter medications or stop taking medications without talking to your doctor first. Keep a written list of all medications you are taking. Be sure you understand why you take each medication.

Worsening Symptoms: Seek emergency assistance if you experience unrelieved chest pain or shortness of breath.

Call your doctor immediately if you have any of the following:
- Increasing shortness of breath
- Wheezing or cough
- Unable to sleep or rest because of breathing problems
- Feeling light-headed, dizzy or sweaty
- Trouble breathing
Once patient is ready to be discharged, click on the Orders button to place a Discharge Order.
The nurse will acknowledge this Discharge Order and electronically process “Page 3” of the discharge paperwork.

Once completed, the nurse will print all pages of the discharge instructions, including pages 1&2 completed by the provider.
Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.

Discharge process
Editing Discharge Instructions in Draft Status
Discharge Process

Editing Discharge Instructions in Draft Status

Go back into Discharge Routine and click on gray pencil beside Reports
Discharge Process
Editing Discharge Instructions in Draft Status

If you were the author of the Draft, click Edit/Amend

If you were NOT the author of the Draft, click Enter New
Choose a Template
Discharge Process

Editing Discharge Instructions in Draft Status

Edit any necessary fields then click Submit and place order Draft or Signed Status
Discharge Process
Cancelling Previous Discharge Instructions

If you made an edit to another author’s discharge instruction, you should cancel that person’s draft version.
1. Go back into Discharge Routine and click on gray pencil beside Reports
2. Choose the Draft
Discharge Process
Cancelling Previous Discharge Instructions (cont)

3. After you select the Draft, click Edit/Amend
4. Then click Submit
Discharge Process
Cancelling Previous Discharge Instructions (cont)

5. Click on the “Cancelled” button then indicate your reason
6. Click OK, then Done, then Submit