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Computerized Provider Order Entry (CPOE) Provider Training Manual

Updated 6/26/12

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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 ► 33S
- ▶ 22S ▶ 34N
- ▶ 23S ▶ 35N
- ▶ 24N ▶ 36N
- ► 32S
- 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 unitspecific 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

Signing into Physician Desktop and CPOE

(NEMEDTECHA/TEST.5.64.MIS/1444) - Bagchi,Sam Application Database Lookup Select User: Bagchi,Sam **Last Sign On: Thu 09/08/11 7:35PM** Appl DB Title 1 PCI.SUH Saint Vincents Patient Care Inquiry **TEST** 2 PWM.UNE Vanguard NE Provider Workload Management **TEST**	First enter the physician desktop and by picking option #2 (Workload Management) then click on the CPOE icon
<end list="" of=""></end>	PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/449) - TEST.POM Provider Workload Management Main Menu Provider Workload Management Main Menu Sign Orders Classic Meditech (PCI) Reconciliation Medication List Discharge Report
6	

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

PWM.VNE (N	EMEDT	ECHB/TEST.5.64.MIS/449) - TEST,POM				
Physician De	esktop	- Test,Pom	Thu,.	Jun 21	X	1
Physicia	n Ca	are Manager		h		× ? M
					Inpatient (
		Prev Page Next Page	Reset	C	Outpatient	
			10501	E	mergency	*
Saint Vi	incer	ıt Hospital		\ \	Workload	ALL
Date/Ti		Patient Name	Туре			+
06/21 15		test,update	Discharge Notice		overing List	∣→
06/18 15		Test,Michele12	Current Inpatient Results	Cou	My List	1
06/08 09		Test,Michele12	Admission Notice		er Selection	
06/06 08		Test,Rule	Admission Notice			
05/31 17		Pontest,Lindsey	Current Inpatient Results			1
05/31 17	727	Test,Codez	Current Inpatient Results			Ŧ
					Detail	
				Pr	references	
?		Review C	rder Document Sig	in	Log Off	

Finding Patients and Creating a Rounding List

Locate patients by any of the following:

Identify A Medic	al Record	
Name	[
Social Security	Number	
Medical Record	1 Number	ř
Account Numb	er	
Date Of Birth	Γ	
Location		
Sex	° Male	⊂ Female
Search	C Active Inpatient	s 🧿 All Patients
	Search	Cancel

Patients may be added to your "Rounding List" by selecting the patient then clicking "Add To List"

112	PWM.VNE (NEMEDTECHB/TEST.)	5.64.MIS/324) - TEST,POM		
	Select Active Inpatient With Lo	ocation W1NR		🛛 🗸
				X
				- ?
		Prev Page Next Page		
	PSYCH UNIT SVH: Sain	t Vincent Hospital		ید س
	WTRAIN,A 14 F		S103 01	*
			Unit #:W800000690	
	Blanchard,Gary P	06/21/2012	Acct #:W61000022113	
	WTRAIN,DD 80 M		5104 01	+
			Unit #:W800000720	
	Blanchard,Gary P	06/21/2012	Acct #:W61000022410	1
	WTRAIN,EE 88 M		5104 02	
			Unit #:W800000721	•
	Blanchard,Gary P	06/21/2012	Acct #:W61000022428	
	WTRAIN,N 21 M		S105 01	
			Unit #:W800000704	
	Blanchard,Gary P	06/21/2012	Acct #:W61000022253	
	WTRAIN,FF 24 M		S105 02	
			Unit #:W800000722	
	Blanchard,Gary P	06/21/2012	Acct #:W61000022436	
	WTRAIN,0 21 F		S106 01	
			Unit #:W800000705	
	Blanchard,Gary P	06/21/2012	Acct #:W61000022261	•
		- 1		
	Add To Lis	tOK	Cancel	

Finding Patients and Creating a Rounding List Patients with multiple admissions

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

E PW	M.VNE (NEMEDTECH	B/TEST.5.64	.MIS/324) - TEST,POM							
Cli	inical Review						×			
5 f	GT,MICHELE12 - Ft 10 in 72.57 <mark>lergies/ADRs:</mark>	5 Kg	Allergies			Unit	No : W800000544			
	Select Visit									
	Time Frame Visits View L Horm Du Disconcio 011 Calented									
	1 Year By Diagnosis All Selected Inpatient Emergence List						Order History			
	InpatientEnergenerListOutpatientOfficeAll						Vital Signs			
			υστρατισπι	UTTILC	пп		I + O			
		Pr	evious Page	Next Page			LAB			
			Microbiology							
	Visit Date	Туре	Location	Doctor	<u>م</u>	1	Blood Bank			
	Jun 08, 12	IN	W22S	TEST, PI		-	Pathology			
	Jan 18, 12	IN	W215	TESTRXM, T			Medications			
			•	•			Imaging			
							Other Reports			
							Notes History			
							Assessments			
							Other Menu			
							More Less			
I							Other Visits			
?	🛇 🖬 📈		PCI	Order Docu	mant Ci	gn	Return			

Review Patient's Orders Screen

PWM.VNE (NEMEDTECHB/TEST. 5. 64. MIS/181) - B	agchi,Sam			-		
Review Patient's Orders				Fri, Sep 9	× 🛛	1
CPOE,TUESDAY - 52/M DO NOT RESUSCITATE Allergies/ADRs: Aspirin	ADM IN		U/A W80000		1409/01 × 2002172 ?	
				▲ * AI	lergies 4 📇	-9
Current	All Session			Renew	Change //Repeat	
	Pri Date/Time	Status	Stop My		Resume	-
+ LABORATORY (5)					DC 🔶	
+ DIAGNOSTIC IMAGING (1)						
	Orde	r Sets				
+ CONSULTATIONS (1) - MEDICATIONS (13)		ders I				
Ceftriaxone 1 GM Premix (Rocep	1 GM 09708 1200	Active		Meds	;/Fluids 🗛	
Premixed at 1 GM/50 ML		110 1 1 4 0		Save	as Set 🏮	
IV DAILY@1200 100 ML/HR				Notifi	cations 🛛 🎽	
Metoprolol Succinate XL Tab (Topro	09/08 0900	Active		Cont fr	om AMB	
오PO 100 MG DAILY					ile Meds	
Morphine Inj	09/07 1500	Active			nsfer	
IV 2 MG Q6HPRN					harge	
PRN SEVERE PAIN 7-10				Prefe	rences	
Hydrocodone Bit/Acetaminophen (Hyd	09/07 1500	Active				
PO 1 EACH Q6HPRN					bmit	
PRN MODERATE PAIN 4-6						
? 🛇 🕼 Review	Order	Documer	nt Sign	Paue	nt List	-

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.

	5	- - P			,	/
🖼 PWM.VNE (NEMELTECHB/TEST.5.64.MIS/181) - Bagchi	,Sam					
Review Patient's Urders				Fri,	Sep 9 🛛 🔀	~
CPOE, TUESDAY 🗸 52/M	ADM IN				W1 11 1409/01	X
DO NOT RESUSCITATE			U/A W80000	016	6/W61000002172	?
Allergies/ADRs: Aspirin						84
				•	* Allergies	
Current All	Session				View/Chang 	100
	5055101				Renew/Repeat	*
- Category Orders Pri	Date/Time	Status	Stop My		Hold Resume	K alu
+ LABORATORY (5)					DC	+
+ DIAGNOSTIC IMAGING (1)				-	Undo	∣→
				╢	Order Sets	t
+ CONSULTATIONS (1) - MEDICATIONS (13)	K			-	Orders	I I
Ceftriaxone 1 GM Premix (Rocep 1 GM	09/08 1200	Active			Med /Fluids	
Premixed at 1 GM/50 ML	03/00 1200	netive			Save as Set	Q
IV DAILY@1200 100 ML/HR					Notifications	
Metoprolol Succinate XL Tab (Topro	09/08 0900	Active			Cont from AMB	
₽ PO 100 MG DAILY					Reconcile Meds Transfer	
Morphine Inj	09/07 1500	Active			Discharge	
IV 2 MG Q6HPRN PRN SEVERE PAIN 7-10					Preferences	
Hydrocodone Bit/Acetaminophen (Hyd	09/07 1500	Active		-		1
PO 1 EACH Q6HPRN	03/01 1300				Submit	
PRN MODERATE PAIN 4-6				-	Sublinit	
? 🖸 🔹 Review	Order	Documer	nt Sign		Patient List	

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**.



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.

Transferring patients in and out of CPOE care areas

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

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

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📧 OE.SVH (NEMEDTECHB/T	EST.5.64.MIS/401/SVH) - TEST	,РОМ					
Review Patient's Orders						Tue,	Jun 26 🛛 🔀	~
VIG,SAM - 35/M DNR- DO NOT RESUS Allergies/ADRs: N	<mark>CITATE</mark> 5 ft 0 ir			nda	I IN U/A W81	0000045	W33S 3316/01 51/W61000016255	× ? M
Allergies								
	Current	A11	Session				View/Change Renew/Repeat	*
- Category	Orders	Pri	Date/Time	Status	Stop	My	Hold Resume	ALI
- TELEMETRY (1)					1		DC	←
TELEMETRY (WNUR)			06/04	Active	06706		Undo	→
		Q2H					Order Sets	1
- RENEW (2)			00.411	0-1:	00.012		Orders	ļ
URINARY CATHETER			06/11	Active	06/12		Meds/Fluids	-
URINARY CATHETER - MEDICATIONS (12)			06/04	Active	06/08		Save as Set	
Bisacodyl Supp (B			06/22 0830	linvPHA		*	Notifications	Ť
PR 10 MG DAILYP			00722 0030	UNVERN			Cont from AMB	
PRN CONSTIPATIO							P	
Senna Tab (Senoko)			06/22 0830	UnvPHA		*	Transfer	
PO 8.6 MG DAILY							Discharge	
PRN CONSTIPATION							Preferences	
Ciprofloxacin Tab (Cipro Tab)			05/23 2200	Active		*		
♀PO 500 MG DAILY	10.22			Renew			Submit	
Ciprofloxacin Tab	(Cipro Tab)		05/23 2200	Active		* 🗸		
? 🛇 🖻	Review	•	Order	Docume	ent Sig	gn 🔤	Return	

Transfers In and Out of CPOE areas Transfer Screen

PAML meds appear at the	Image: Description of the description	itton ore lers, eds	
top	ASPIRIN SUPP* 600 MG SUPP 600 MG PR RESTART IN 3 DAYS IF NO BLEEDING SESSION.		
	RESIDE Continued I O O WARFARIN* (COUMADIN*) 5 MG TAB Continued I O O 5 MG PO DAILY17 Reported I O O ASPIRIN CHEW* 81 MG TAB.CHEW II O O O 81 MG PO DAILY Reported I O O		
Active	Inpatient Orders - + TELEMETRY (1) Howe Med Who Cont Stop		
Meds	+ TELEMETRY 06/04 Q2H O O O - + MEDICATIONS (12) Howe Med Who Cont Stor Oxycodone Immediate-Rel Tab (RoxICODONE Tab) O3/19 1330 O O	orders	
appear in the	PO 5 MG Q4HPRN PRN MODERATE PAIN 4-6 Last Admin: 04/17/12 0929 HYDROMorphone Tab (Dilaudid Tab) 03/19 1630		
bottom	P0 2 MG Q4HPRN PRN BREAKTHROUGH PAIN Or stoppe Last Adwin: 04/17/12 0929 Or stoppe Morphine Inj 03/19 1630 O O IV 2 MG 02HPRN PRN MODERATE PAIN 4-6 O O		
	IV 2 MG Q2HPRN PRH MODERATE PAIN 4-6 Chicking the		
	PO 325 MG DAILY Done Cancel Help		-

Once Submitted, Transfer orders will not be active until patient arrives on destination floor

I			
OE.SVH (NEMEDTECHB/TEST. 5. 64.MIS/181/SVH) - Bagchi,Sam			
Review Patient's Orders		Fri, Sep 9	× *
CPOEPARALLEL,BEVERLY - 61/F DOB 01/23/50	ADM IN	W23S 2316/	
FULL CODE	U/A W8000	00192/W610000024	38 ?
Allergies/ADRs: Penicillins			99
Session Summary			
36381011 Sullimital Y			<u> </u>
	\frown		<u>^ *</u>
Order Changes (12)	Effective	Status	
1. VITAL SIGNS (WNUR)	x-fer	Stop	- RLL
2. CARDIAC DIET (WDIET)	x-fer	Stop	
3. Heparin 5000 UNIT/0.5ML Inj	x-fer	Stop	_ →
SQ 5000 UNIT Q8H			
4. Nitroglycerin SL Tab (Nitroquick S	x-fer	Stop	
SL 0.4 MG Q5MPRN			+
PRN CHEST PAIN/ ANGINA			
5. Aspirin Tab	x-fer	Stop	
PO 325 MG DAILY			
6. Acetaminophen Tab (Tylenol Tab)	x-fer	Stop	
PO 650 MG Q4HPRN			
PRN HEADACHE			
7. Alum HO/Mag HO/Simeth Liquid (Maal	x-fer	Stop	-
			_
Password			
OK Cancel He	elp		



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

Allergies

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

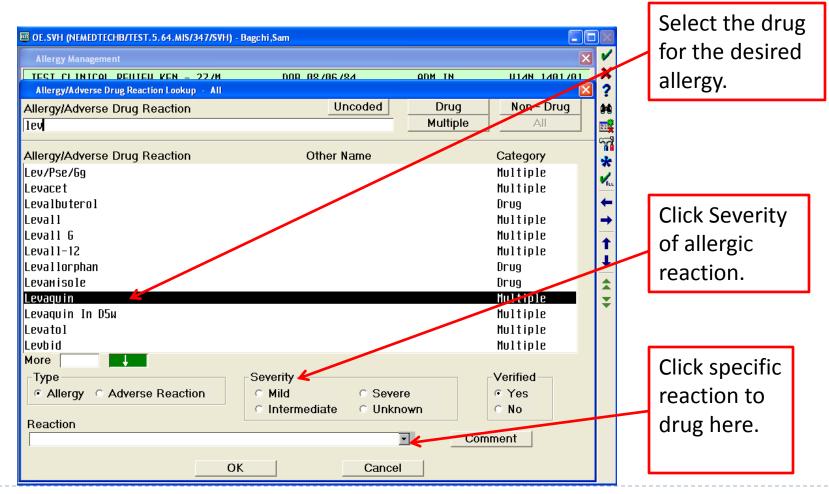
PWM.VNE (NEMEDTECHB/TEST. 5. 64.MIS/181) - Bagchi	,Sam			וא	
Review Patient's Orders			Fri, Sep 9 🛛 🔀	~	
CPOE,TUESDAY - 52/M DO NOT RESUSCITATE Allergies/ADRs: Aspirin	ADM IN	U/A W800000	W14N 1409/01 166/W6100002172	× ? #	
Current All	Session		Allergies View/Change Renew/Repeat		Click the ALLERGY
- Category Orders Pri + LABORATORY (5)	Date/Time St	tatus Stop My	Hold Resume DC Undo	✓ALL	button to begin
+ DIAGNOSTIC INAGING (1) + DIETARY (1) + CONSULTATIONS (1)			Order Sets	1	entering new
- MEDICATIONS (13) Ceftriaxone 1 GM Premix (Rocep 1 GM	09/08 1200 Ac	ctive	Orders Meds/Fluids	↓	allergies
Premixed at 1 GM/50 ML IV DAILY01200 100 ML/HR	09/08 0900 Ac	ctive	Save as Set Notifications Cont from AMB	÷	
Metoprolol Succinate XL Tab (Topro シPO 100 MG DAILY Morphine Inj			Reconcile Meds Transfer		
IV 2 MG Q6HPRN PRN SEVERE PAIN 7-10			Discharge Preferences		
Hydrocodone Bit/Acetaminophen (Hyd PO 1 EACH Q6HPRN PRN MODERATE PAIN 4-6	09/07 1500 Ac	ctive	▼Submit		
? 🖸 🖻 Review	Order Do	ocument Sign	Patient List		

Allergy Management Screen

OE.SVH (NEMEDTECHB/TEST.5.64.MIS/347/SVH) - Bagchi,	Sam							Click DELETE to
Allergy Management							~	remove erroneous
TEST,CLINICAL REVIEW KEN - 27/M FULL CODE 187.96 cm 122.47 kg	DOB 08/	'06/84		I IN 1 W700	30010	W14N 1401/01 14/W00000000182	× ?/	allergies.
	_					View Details	20	
- Allergies for Interaction Checks (2) Penicillins	Type Allergy	Severity	Date 09/07/11	Ver	Cmt		5 77	
(PENICILLINS)	1110199		01/01/11	165		New		Click EDIT to
HIVES						Delete 📕	*	change coding of
Latex (LATEX)	Allergy	Mild	09/01/11	Yes		Edit	HLL	allergy as needed.
						Confirm	→	
- Uncoded Allergies (0)						Verify NKA Unobtn	t	Click CONFIRM to
	A 11	•				Audit Trail		certify that the
Avoid using Uncoded	•						Ē	allergies listed are
whenever possible be	cause	the				Select All	Ŧ	U U
system cannot perfor	m alle	rgy,				Deselect All		accurate.
duplication, or interac	tion	•				Undo All		
checking								Click FILE when
Checking								allergy entry is
								complete. This
						File 🗲		finalizes the allergy
						Return		and updates
20								system.

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"





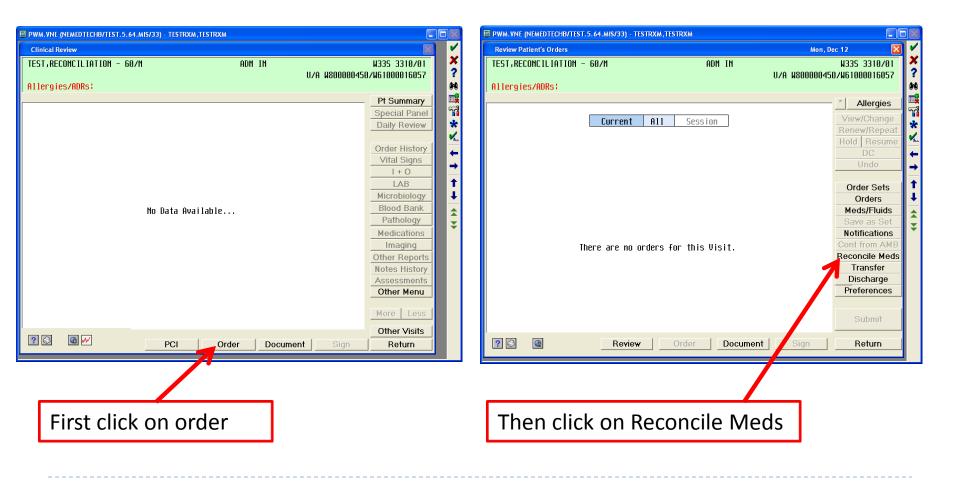
Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.

Admission Process Updating the Pre-Admission Med List

Admission Process

Updating the Pre-Admission Medication List (PAML)

After selecting a patient, 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

PWM.VNE (NEMEDTECHB/TEST. 5. 64. MIS/33) - TESTR	XM, TESTRXM		
Medication Reconciliation		X X	
TEST, RECONCILIATION - 60/M		W33S X Unit No:W800000450 ?	
Allergies/ADRs:		* Allergies	
Medication Reconciliation	Last updated by: [Profile not yet reviewed]	50	
		View Detail Renew Change	Update Allergies
		Prescriptions Inpatient Meds	first
		Upd Med List	
		Remove Assoc.	
		Print ? Check	Click Upd Med List
		Remove	to begin entering
	Patient's Profile has no eligible orders		patient's PAML
			patient's PAIVIL

•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			×
Se	et Profile to No M	eds 🧾	Go to Favorites Undefined Med
asp i			Lookup by type Medical Equip
			Monograph Add to Favorites
Name	Strength	Dispense Form	n Trade Name
ASPIRIN BUFFERED*	325 MG	TAB	Bufferin*
ASPIRIN*	81 MG	TAB.CHEW	BABY ASPIRIN*
ASPIRIN*	81 MG	TABEC	Ecotr in*
ASPIRIN*	325 MG	TABLET	BAYER ASPIRIN*
ASPIRIN*	325 MG	TABEC	Ecotr in*
ASPIRIN*	800 MG	TABER	Zorprin*
ASPIRIN/ACETAMINOPHEN/CAFFEINE	1 EACH	TABLET	EXCEDRIN EXTRA STRENGTH GELCAP
ASPIRIN/ACETAMINOPHEN/CAFFEINE	1 EACH	TABLET	EXCEDRIN MIGRAINE TABLET
ASPIRIN/CAFFEINE/BUTALBITAL*	1 EA	CAP	Fiorinal*
ASPIRIN/DIPYRIDAMOLE*	25 MG/200 MG	CAPCR	AGGRENOX*
ASP IR IN/MEPROBAMATE	1 EACH	TABLET	EQUAGESIC TABLET
More	Select	Done	

•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 <u>Dose, Units, Route and Frequency</u>.

•Instructions and Comments may be entered, but this info will not flow to inpatient

orders	PWM.VNE (NEMEDTECHB/TES	T.5.64.MIS/33) - TEST	RXM,TESTRXM									
	Medication Reconciliation										×	<
	TEST, RECONCILIATION	- 60/M									W335	X ?
	Allergies/ADRs: No K	nown Allergies								Unit No:W	800000450	: #
										*	Allergies	
Click on the blue string	Medication Reconciliat	tion			Last upda	ited by: [Profile	e not yet revie	wed]			ew Detail	ria de la comoción de Comoción de la comoción
Click of the blue string		Update Med List							×		ew Change	*
even though it is		ASPIRIN* (BAYE		325 MG TAB	LET			Add to Favo			scriptions	RLL
U U		0 Refil	ls					Monogra Replace/Ch			tient Meds	1
already highlighted in								Daily Dos			d Med List	-
order for dose, units,	((Dose	Units	Route	Frequency	Qty	Days Disp U	nit Dofillo	NS		ssociate	L
		Dose		- Roule	Frequency					Rem	iove Assoc.	
etc. to populate.											Print	* *
		Instructions Comments				iagnosis ate	 Source 	•	-		? Check	
		325	MG	PO	DAILY				N		Remove	
		325	MG	PO	DAILY	30	TAB	0	М			
Do NOT use												
instructions /commonts												
instructions/comments												
for inpatient orders												
20		1										
26				Done		Cancel						

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

ровнот с с с на	1 180		- I Z I d	ST TURKETTS	.	· · ·		
Update Med List		Set Profile	ta Na Made	G	to to Favorite		lefined Med	
]		Set Prome	IO NO MEUS		ookup by typ			
							dical Equip to Favorites	
					Monograph			_
Name		Strength	Dispe	ense Form	Trade Name	e		
	Update Med List							
							Rom	ove Favorite
	Elittle blue p		nflict Check	5				onograph
	0 Refil	15						ace/Change
								ily Dosing
								ny bosing
		Undefin	ed Med will no	ot be evalu	ated for inte	raction che	eckina.	
	Medication 🐣	Stren			Form			
	little blue pi		<i>.</i>			•		
	Dose	Units	Route	Frequer	icy Qty	Days	Disp Unit Re	efills NS
			•	BID	•	-		• •
More								
	Instructions			▼	Diagnosis			•
	Comments			•	Date	•	Source	•
			Done		Car	ncel		

Updating the PAML Changing Medications

•To change any medications in the PAML, highlight the med then click Change

WTRAIN2,INDIA - 53/F	DOB 03/04/58								linit	WTRA IN2 No : W800000204
Allergies/ADRs: No Knowr	Allergies							-	UITI	101000000201
										* Allergies
Multination Reconciliation									STRXM on 01/24/12 0 0926	
	- Pre-Admission Medication List (7)				Review		Suspend	DC Cnc		View Detail
	[little blue pill] No Conflict Check			Taken>		0	0	0 0		Rep. Chang
	BID ROSUVASTATIN (Crestor) 40 MG TAB	Repor ted		Talian		0	0	0 0		Prescriptions
	40 MG PO DAILY	Repor ted		Taken>		0	0			Inpatient Med
	ST. JOHN'S WORT 300 MG TABLET	KEPUI LEU		Taken>		0	0	00		Upd Med List
	300 MG PO	Repor ted				Ŭ	Ŭ			
	ATENOLOL* (Tenormin*) 25 MG TAB			Taken>		0	0	00		Associate
	25 MG PO DAILY	Repor ted		Tunen/		-	-			Remove Assoc
	LISINOPRIL/HYDROCHLOROTHIAZIDE (ZESTORETIC)	nop of tou		Taken>		0	0	00		
	1 EA PO DAILY	Repor ted								Print
	METFORMIN HCL (GLUMETZA) 500 MG TABERGR24H		<last< td=""><td>Taken></td><td></td><td>0</td><td>0</td><td>0 0</td><td></td><td>? Check</td></last<>	Taken>		0	0	0 0		? Check
	500 MG PO DAILY	Repor ted								Remove
	ASPIRIN* (Ecotrin*) 81 MG TABEC			Taken>		0	0	00		-
	81 MG PO DAILY	Repor ted								
	+ Cancelled Home Meds (7)]	
										Dana
										Done
	No conflict checking is prov	vided for [] r	nedicati	UIIS.						

Changing Medications

•Click Replace/Change then enter the replacement medication

OE.SVH (NEMEDTECHB/TEST.5.64.MIS/48/S	/H) - TESTRXM,TESTRXM	A CONTRACTOR OF A CONTRACT OF		×
Medication Reconciliation			8	
WTRAIN2, INDIA - 53/F	DOB 03/04/	58	WTRAIN2 Unit No:W800000204	X ?
Allergies/ADRs: No Known A	llergies			9-6
Medication Reconciliation		Last updated by: TESTRXM,TEST	TRXM on 01/24/12 @ 0926 * Allergies	
	- Pre-Admission Medication List (7)	Last Taken Review Cont Suspend DC Cnc	View Detail	*
	[little blue pill] No Conflict Check	<pre></pre>	Renew Change	
	BID ROSUVASTATIN (Crestor) 40 MG TAB	Reported O<	Prescriptions	
	40 MG PO DALLY	Remnand	Inpatient Meds	→ I
	ST. JOHN'S WOF 300 MG PO	Check Remove Favorite	Upd Med List	†
	ATENOLOL* (Ter BID 0 Refills	Monograph	Associate Remove Assoc.	1 I
	25 MG PO DA	Replace/Change	Remove Assoc.	
	LISINOPRIL/HYI 1 EA PO DAI	Daily Dosing	Print	↓ ₹
	METFORMIN HCL		? Check	
	500 MG PO C 🔥 Undefined Med	will not be evaluated for interaction checking.	Remove	
	ASPIRIN* (Ecol Medication Strength 81 MG P0 DF little blue pill			
	+ Cancelled Hd	- Pre-Admission Medication List (7)		eview Cont Suspend DC Cnc
	Dose Units Rou	•	<last taken=""></last>	
		BID Update Med List	Set Profile to No Meds Go to	Favorites Undefined Med
	Instructions			
	Comments	40 MG PO Df risperidone		Sup by type Medical Equip mograph Add to Favorites
		ST. JOHN'S WOF 300 Mg Po	MO	Add to Fayontes
	Renew as Rx	ATENOLOL* (Ter Name	Strength Dispense Form Tra	ade Name
		25 MG PO DA RISPERIDONE MICROSPHERES		SPERDAL CONSTA
		LISINOPRIL/HYC RISPERIDONE*		sperdal*
		1 EA PO DAI RISPERIDONE∗	0.5 MG TAB Ri	sperdal*
		METFORMIN HCL RISPERIDONE*	0.5 MG TAB Ri	sperdal M-Tab∗
		500 MG PO (RISPERIDONE*	1 MG TAB Ri	sperdal*
	No conflict checking is p		1 MG TAB Ris	sperdal M-Tab∗
		81 MG PO DA RISPERIDONE*		sperdal Oral Soln∗
		+ Cancelled Hd RISPERIDONE*		sperdal M-Tab∗
		R ISPER IDONE*		SPERDAL*
		RISPERIDONE*		sperdal*
		RISPERIDONE*		SPERDAL M-TAB*
		RISPERIDONE*		SPERDAL M-TAB*
		R I SPER I DONE * R I SPER I DONE *		SPERDAL* sperdal Consta*
				3PCI UG1 CUIISEd*
29			Select Done	

Notice that all entered meds will now appear under "Pre-Admission medication List"

ED;REC - 56/F							W335
							Unit No:W800000498
llergies/ADRs: No Known Allergies							
le ication Reconciliation	Laetu	pdated by: TEST		₽⊻M op 01	101112	ര 16	Allergies
- Pre-Admission Medication List (5)	Last u	Last Taken	Review Co	_		Cnc	View Detail
CARVEDILOL* (Coreg*) 3.125 MG TAB		<last taken=""></last>					Renew Chance
3.125 MG PO Q12H	Reported						
LISINOPRIL* (Zestril*) 10 MG TAB	-	<last taken=""></last>	C) 0	0	0	Prescriptions
10 MG PO DAILY	Reported						Inpatient Med
ROSUVASTATIN (CRESTOR) 5 MG TABLET		<last taken=""></last>	C) 0	0	0	Upd Med List
5 MG PO DAILY	Reported						Associate
TAMSULOSIN HCL* (Flomax*) 0.4 MG CAP		<last taken=""></last>	c) 0	0	0	Remove Asso
0.4 MG PO DAILY	Repor ted						
ASPIRIN* (BAYER ASPIRIN*) 325 MG TABLET		<last taken=""></last>	c) 0	0	0	Drint
325 MG PO DAILY	Repor ted						Print

Last Taken Information (optional)

The provider can enter any last taken information by clicking on <Last Taken>.No fields are required.

lication Reconciliation								unst u	odated	by: TES	FRXM,TE	STR)	<m 12="" 1:<="" on="" th=""><th>2/11</th><th>@ 0930</th><th>0 Allergie</th><th>5</th></m>	2/11	@ 0930	0 Allergie	5
- Home Meds (7)									Last	Taken	Review	Cont	Suspend	DC	Cnc	View Deta	il
TAMSULOSIN HCL* (F	lonax*)	0.4	MG CAP							Taken>		0	0	0	0	Renew Cha	nge
0.4 MG PO DAILY							Re	por te s								Prescriptio	าร
ROSUVASTATIN (CRES	TORD 5 M	IG TA	BLET						₹Last	Taken>		0	0	0	0	Inpatient Me	
5 MG PO DAILY			AD				Re	ported		.		-		-			
LISINOPRIL* (Zestr	11×) 10	MG 1	AB				D		<last< td=""><td>Taken≻</td><td></td><td>0</td><td>0</td><td>0</td><td>0</td><td>Upd Med L</td><td></td></last<>	Taken≻		0	0	0	0	Upd Med L	
10 MG PO DAILY CLOPIDOGREL* (Pla							RE	ported	-	_				-		Associate	
	Last Take	m													\mathbf{X}	Remove Ass	0C.
CARVEDILOL* (Core	ARVED I L				125	MG T	AB								H		
3.125 MG PO Q1	3.125	MG F	PO Q12	H												Print	
ZOLPIDEM TARTRATE																? Check	
5 MG PO BEDTIM	Date									Time						Remove	
ASPIRIN∗ (BAYER A	Date									Time							
325 MG PO DAIL	Decer	ther			201	1				Dose							
			ue Wed	l Thu													
				1	2	3		Today		Informat	ion Sou	се					
	4	5	6 7	8	9	10	<	Month	>					•			
	11	12 1	3 14	15	16	17	<	Year	>	Medicati	on Purpo	ose		_			
	18	9 2	0 21	22	23	24											
	25 7	26 2	7 28	29	30	31				Commer				_			
										patient	has not	take	n this	-			
										Attentio	Boquir	.40					
			/n Date /n Dose		e						n Requir s 🗆 No	eur					
	E UN	кпоч	n Dos	9						re ⊻	5 1 10						

Last Taken Information (optional)

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.

Aedication Reconciliation							
EST,RECONCILIATION - 60/M							W33S
llergies/ADRs: No Known Allergies							Unit No:W800000450
edication Reconciliation	Leatur	a data di kur TECI		XM an 10/1	0.11.1	@ <u>000</u> /	* Allergies
	Lasiu	pdated by: TEST	Review Con		_		View Detail
- Home Meds (7) TAMSULOSIN HCL* (Flomax*) 0.4 MG CAP		Last Taken ≺Last Taken≻		t Suspend O		Cnc O	Renew Change
0.4 MG PO DAILY	Repor ted			l .	Ŭ	Ŭ	
ROSUVASTATIN (CRESTOR) 5 MG TABLET	•	<last taken=""></last>	0	0	0	0	Prescriptions
5 MG PO DAILY	Repor ted						Inpatient Mede
LISINOPRIL* (Zestril*) 10 MG TAB		<last taken=""></last>	0	0	0	0	Upd Med List
10 MG PO DAILY	Repor ted						Associate
CLOPIDOGREL* (Plavix*) 75 MG TAB		i	0	0	0	0	Remove Assoc
75 MG PO DAILY	Repor ted	12/04/11 0900					
CARVEDILOL* (Coreg*) 3.125 MG TAB		∇	0	0	0	0	Print
3.125 MG PO Q12H	Reprinted						
ZOLPIDEM TARTRATE* (Ambien*) 5 MG TABLET		ĺ	0	0	0	0	? Check
5 MG PO BEDTIMEPRN	Reported			+		_	Remove
ASPIRIN* (BAYER ASPIRIN*) 325 MG TABLET 325 MG PO DAILY	Reported	<last taken=""></last>	0	0	0	0	



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.

Admission Process Reconciling Medications

Reconciling Meds Two places to Reconcile Medications

- Transfer Function- If the admission process will utilize the Transfer function (ED admission, OR, etc.) Most of the time you will
 - 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)
 This will be less likely
 - 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**

Reconciling Meds from "Transfer"

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

Medication Reconciliation								~	
MED,REC - 56/F Allergies/ADRs: No Known Allergies						Un	W33S it No:W800000498	× ?	
							* Allergies		
Medication Reconciliation	Last u	pdated by: TES			_			7	
- Pre-Admission Medication List (5)			Review Cont		DC		View Detail	*	
CARVEDILOL* (Coreg*) 3.125 MG TAB	D	<last taken=""></last>	0	0	0	5	Renew Change	1	
3.125 MG PO Q12H LISINOPRIL* (Zestril*) 10 MG TAB	Reported	<last taken=""></last>	0	0	0	_	Prescriptions		
10 MG PO DAILY	Repor ted	ALDST TOKEN					Inpatient Meds		
ROSUVASTATIN (CRESTOR) 5 MG TABLET	nepor LEU	<last taken=""></last>	0	0	0	5	Upd Med List	-	
5 MG PO DAILY	Repor ted			-	-		Associate	Ť	
TAMSULOSIN HCL* (Flomax*) 0.4 MG CAP		<last taken=""></last>	0	0	0	2	Remove Assoc.	Ŧ	
0.4 MG PO DAILY	Repor ted								
ASPIRIN* (BAYER ASPIRIN*) 325 MG TABLET		<last taken=""></last>	0	0	0	5	Print	Ŧ	
325 MG PO DAILY	Repor ted								
							? Check Remove		
							Done		After done updating the PAM click on Return, then proceed with the Transfer process.
No conflict checking is	provided for [] me	edications. Review	Order	Documen	- [Sign	Return		p. cocce.

Reconciling Meds from "Transfer"

•Click Transfer

OE.SVH (NEMEDTECHB/TEST.5.	.64.MIS/293/SVH) - TESTRXM,TESTRXM		
Review Patient's Orders		Wed, Jan 4 🛛 🛛 🗸	1
MED,REC - 56/F	ADM IN	W335 3306/02 × U/A W800000498/W61000016842 ?	
Allergies/ADRs: No Kn	own Allergies	U/A W800000498/W61000016842	
,		* Allergies	
	Current All Session		
		Renew/Repeat	
		Hold Resume	L
		Undo	
			-
		Order Sets Orders	
		Meds/Fluids	-
		Save as Set	
		Notifications Cont from AMB	
11	here are no orders for this Visit.	Reconcile Meds	
		Transfer	
	Discharge Preferences		
		Submit	
? 🛇 🔞	Review Order Docume	nt Sign Return	

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.

Continue Orders Upon Transfer								
MED,REC - 56/F Allergies/ADRs: No Known Allergies	ADM IN			U/A I	W80000049	W339 8/W610		
	Previous Page Page 1 of	Next Page			-	Add	Mor	Э
- Pre-Admission Medication List			R	<mark>eview</mark> Cor	it Susper	nd I	DC	Cnc
LOSARTAN/HYDROCHLOROTHIAZIDE (HYZAAR) 1 TAB PO DAILY	100 MG/12.5 MG	C Reported	1	0	0		0	0
CARVEDILOL* (Coreg*) 3.125 MG TAB 3.125 MG PO 012H		Continued C Reported	1					
LISINOPRIL* (Zestril*) 10 MG TAB 10 MG PO DAILY			1	0	0		0	0
ROSUVASTATIN (CRESTOR) 5 MG TABLET 5 MG PO DAILY		Converted C	1					
TAMSULOSIN HCL* (Flomax*) 0.4 MG CAP 0.4 MG PO DAILY			i	0	0		•	0
ASPIRIN* (BAYER ASPIRIN*) 325 MG TABLE 325 MG PO DAILY	T	Reported (Reported	D	0	۲		0	0
		KEPUI LEU						_
<mark> Inpatient Orders</mark> - + Νew Orders added for Transfer (2)					Home Med		ont Rемо	_
Carvedilol Tab (Coreg Tab) 01/04 2100 P0 6.25 MG 012H					i	MIIU	O	76
Sinvastatin Tab (ZoCOR Tab) 01/05 1700 PO 20 MG DAILY17]				i		0	

Reconciling Meds

Button	Admission/Inpatient Result	Discharge Result
Cont	Continues home medication by placing an inpatient order for the same medication.	The same medication will show up in the PAML and the inpatient med list
Suspend	The medication is held for a defined period of time	The medication will show up in the PAML again to be continued or stopped
DC	Use if the patient was taking but is no longer taking the medication	This will show up as "Stop taking" on the discharge paperwork
Cnc	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.	This will not appear at all on the discharge screen or the discharge paperwork

🖼 OE.SVH (NEMEDTECHB/TEST.5.64.MIS/24/SVH) - TESTRXM,TESTRXM	Ŵ					. 6	
Continue Orders Upon Transfer						×	~
TEST, RECONCILIATION - 60/M	ADM IN			WB	335 3310/01		X
· · · · · · · · · · · · · · · · · · ·		U	/A W8	00000450/WC	61000016057		?
Allergies/ADRs: No Known Allergies							96
				A	dd More		
Previous Page	Page 1 of 1 Nex	t Page					3
		_					*
– Home Meds		Review	Cont	Suspend	DC Cnc		- Ruu
TAMSULOSIN HCL* (Flomax*) 0.4 MG CAP	(1	0	0	0 0		* ALL
0.4 MG PO DAILY	Repor ted						+

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.

OE.SVH (NEMEDTECHB/TEST.5.64.MIS/293/	VH) - TESTRXM,TESTRXM				BX
				×	•
MED,REC - 56/F Allergies/ADRs: No Known Aller		W 1800000498/W	335-331 610000		× ?
	Previous Page Page of Next Page	A	dd Mor	e	1 1 1 1 1
 Pre-Admission Medication L LOSARTAN/HYDROCHLOROTHIAZI 1 TAB PO DAILY 	DE (HYZAAR) 100 MG/12.5 MG	t Signat	0	0	√ _{ku}
CARVEDILOL* (Coreg*) 3.125 3.125 MG PO Q12H	Continue Ambulatory Orders for Visit	0	0	0	→
LISINOPRIL* (Zestril*) 10 10 MG PO DAILY	 ✓ - Formulary (4) ✓ CARVEDILOL* (Coreg*) 3.125 MG TAB 3.125 MG PO Q12H Reported 	0	0	0	1
ROSUVASTATIN (CRESTOR) 5 N 5 Mg Po Daily	v LISINOPRIL* (Zestril*) 10 M6 TAB 10 M6 P0 DAILY Reported v TAMSULOSIN HCL* (Flomax*) 0.4 M6 CAP 0.4 M6 P0 DAILY Reported	0	0	0	*
TAMSULOSIN HCL* (Flomax*) 0.4 Mg Po Daily	ASPIRIN* (BAYER ASPIRIN*) 325 MG TABLET 325 MG PO DAILY Reported Ann Formulary (2)	0	0	0	
ASPIRIN* (BAYER ASPIRIN*) 325 Mg Po Daily	v LOSARTAM/HYDROCHLOROTHIAZIDE (HYZAAR) 100 MG/12.5 MG 1 TAB PReported v ROSUVASTATIN (CRESTOR) 5 MG TAB PReported	0	0	0	
	OK Cancel				

If you click on the Cont button, a box will appear. The system will tell you which medications are formulary and which are nonformulary.

Reconciling Meds Non Formulary

If you choose to continue a Non Formulary medication, you will be brought to the Meds/Fluids lookup.

👜 OE.SVH (NEMEDTECHB/TEST.5.	64.MIS/293/SVH) - TESTRXM,TESTRXM					ð
Continue Orders Upon Transf					×	
MED,REC - 56/F Allergies/ADRs: No Kn		W800	W3 000498/W6		06/02 16842	× ?
			A	dd Mo	re	i T
	All Medications ROSUVASTATIN (CRESTOR) 5 MG TABLET 5 MG PO DAILY Reported Medication Compounds Non-Formulary					ĥ
- Pre-Admission Med			Suspend	DC	Cnc	*
LOSARTAN/HYDROCHL			0	0	0	1
1 TAB PO DAILY					-	+
CARVEDILOL* (Core	Medications Fluids		0	0	0	-
3.125 MG PO Q1						1
LISINOPRIL* (Zest			0	0	0	ļ
10 MG PO DAILY				<u> </u>		
ROSUVASTATIN (CRE			0	0	0	
<u>5 MG PO DAILY</u> TAMSULOSIN HCL* (+ Abacavir Tab		0	0	0	¥
0.4 MG PO DAIL	+ Abatacept Inj + ABC Tab		0	0		
ASPIRIN* (BAYER A	+ Abelcet Inj		0	0	0	
325 MG PO DAIL			Ŭ	ľ	Ŭ	
	+ Abilify Tab					
	+ Acamprosate Tab					
	+ Acarbose Tab					
	+ Accolate Tab					
	+ Accupril Tab	-				
	Select Done Help					

Reconciling Meds Non Formulary

•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).

OE.SVH (NEMEDTECHB/TEST.5.64	I.MIS/293/SVH) - TESTRXM,TESTRXM				ð×	
Continue Orders Upon Transfer				×	-	
MED,REC - 56/F	ADM IN	W	335 330	36702	× ?	
	U/A W8000					
Allergies/ADRs: No Know	n Allergies				24	
	All Medicatic is ROSUVASTATIN (CRESTOR) 5 MG TABLET 5 MG PO DAILY Reported		dd Mor	<u>e</u>		
I I	Addication Compounds Non-Formulary	1			3	
- Pre-Admission Med R	Lookup by Type Monograph	Suspend	DC	Cnc	*	
LOSARTAN/HYDROCHL		0	0	0	ALI	
1 TAB PO DAILY	Prev Page Favorites Full Formulary Next Page				- →	
CARVEDILOL* (Core	Medications Fluids	0	0	0	→	
3.125 MG PO Q1						
LISINOPRIL* (Zest	+ Rosuvastatin 10mg = Zocor 40mg	0	0	0		
10 MG PO DAIL	+ Rosuvastatin 20mg = Zocor 80mg				+	
ROSUVASTATIN (CRE	+ Rosuvastatin 40mg=Lipitor 80mg	0	0	0		
5 MG PO DAILY	+ Rosuvastatin 5mg = Zocor 20mg					

Reconciling Meds Combination Products

You must enter each medication <u>separately</u>.Type the first medication in the combo product.

OE.SVH (NEMEDTECHB/TEST.5.	64.MIS/293/SVH) - TESTRXM,TESTRXM				. ð ×
Continue Orders Upon Transfo				×	₃ ✓ ×
MED,REC - 56/F Allergies/ADRs: No Kni	W33S_3306/02 W800000498/W61000016842				
	All Medications LOSARTAN/HYDROCHLOROTHIAZIDE (HYZAAR) 100 MG/12.5 MG 1 T B PReported Non-Formulary		dd Moi	re	14 17 17 17 17 17 17 17 17 17 17 17 17 17
- Pre-Admission Med Losartan/Hydrochl 1 tab Po daily	LOSAR Lookup by Type Monograph	Suspend O	DC O	Cnc O	✓ ₩ ₩
CARVEDILOL* (Core 3.125 MG PO QI	Medications Fluids	0	0	0	→ t
LISINOPRIL* (Zest 10 Mg po daily Rosuvastatin (Cre	- Losartan Tab O PO O GI TUBE	0	0	0	↓ ★
<u> </u>		0	0	0	÷
0.4 MG PO DAIL Aspirin* (bayer f 325 Mg Po Dail		0	0	0	L
			1		L
	Select Done Help				

Reconciling Meds Combination Products

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

OE.SVH (NEMEDTECHB/TEST.5.64.MI	S/293/SVH) - TESTRXM TESTRXM				
Continue Orders Upon Transfer				~	
MED,REC - 56/F	ADM IN		W335 3306/02	×	
HEDJNEC 30/1		U/A W800000498/W		?	
Allergies/ADRs: No Known	Allergies			96	
			Add More		
	Previous Page Page of Next	Page		- The second	
- Pre-Admission Medica		× 1d	DC Cnc	*	
LOSARTAN/HYDROCHLORO	Preview/Edit		0 0	- And	
1 TAB PO DAILY	Add I	Add to Favorites		• •Then order the coce	nd modication
CARVEDILOL* (Coreg*)	Orders	Save as Set	0 0	•Then order the second seco	nd medication
3.125 MG PO Q12H	Order Se	ets —	0 0	t	
LISINOPRIL* (Zestril 10 MG PO DAILY	Orders Pri Start/Se Meds/Fit	ids rections Qty Details		in the combo produc	<u>.</u> †
ROSUVASTATIN (CRESTO	Aspirin Tab 325 MG PO DAILY 01/05 090 Cancel	Avail	0 0		
5 MG PO DAILY	☑ Carvedilol Tab 3.125 MG PO 01/04 2100	Avail		-	
TAMSULOSIN HCL* (Flo	☑ Lisinopril Tab 10 MG PO DAILY 01/05 0900 ☑ Tamsulosin Cap 0.4 MG PO DAILY 01/05 0900	OE.SVH (NEMEDTECHB/TEST. 5. 64.MIS	5/293/SVH) - TEST	RXM, IES IRXM	
0.4 MG PO DAILY ASPIRIN* (BAYER ASPI	☑ Losartan Tab 100 MG PO DAILY 01/05 0900	Continue Orders Upon Transfer			
325 MG PO DAILY		MED,REC - 56/F		ADM IN	
		1120/1120 30/1			U/A W80000049
		Allergies/ADRs: No Known A	llergies		0/11 000000013
		HILE GIESTIDIAST IIO KIIOWII H	11161 9165		
				Previous Page 1 of 1 Nex	t Page
				PLEVIOUS PAUE Page Uf Hex	L Paye
		- Pre-Admission Medica	Preview/Edit		\mathbf{X}
	Done Cancel He	LOSARTAN/HYDROCHLORO			Id More Add to Favorites
		I THE PU DHILY			
		CARVEDILOL* (Coreg*)		Clear	Unchecked Save as Set
		<u>3.125 MG PO Q12H</u>			
		LISINOPRIL* (Zestril	All Medicatio	ns 0 Order(s) Selected	
		10 MG PO DAILY	Medication		npounds Non-Formulary
		ROSUVASTATIN (CRESTO			ip by Type Monograph
		5 MG PO DAILY	HYDROCH		in of the second
		TAMSULOSIN HCL* (Flor			
		0.4 MG PO DAILY		Prev Page Favorites Full Formul	
		ASPIRIN∗ (BAYER ASPI		Medications Fluids	
		325 MG PO DAILY			
				chlorothiazide Tab	
			O P0		
10			O GI TU	BE	
43					
•					

Reconciling Meds Changing Dose, Frequency, etc.

•After choosing to continue the medication, click on Avail

OE.SVH (NEMEDTECHB/TEST.5.	.64.MIS/293/SVH) - TESTRXM,TESTRXM											
					💌 🖌							
MED,REC - 56/F	IDA	I IN	11/A 11	W33S_330 800000498/W610000								
Allergies/ADRs: No Kr	nun Allerniec		6711 HC	_								
ſ	Preview/Edit			Add Mor								
		Add More	Add to Favorites		1							
- Pre-Admission Me		Clear Unchecked	Save as Set	iuspend DC	Cnc 🕺							
LOSARTAN/HYDROCH				0	0							
1 TAB PO DAIL		tart/Service <mark>Series Dire</mark>			←	- N / -	I		I		.	
CARVEDILOL* (Cor 3.125 Mg Po (☑ Carvedilol Tab 3.125 MG PO 01	/04 2100	Avail 🖊		○ •	•ivia	ke anv no	ecessary c	nan	ges	το	
LISINOPRIL* (Zes				0 0	0		•	•		9		
10 MG PO DAIL					Ŭ 🖡	the	dose/fre	n				
ROSUVASTATIN (CF				0 0	•	the		Ч				
5 MG PO DAILY TAMSULOSIN HCL*					¥						_	
0.4 MG PO DAI		OE.SVH (NEMEDTECHB/TEST.5	. 64.MIS/293/SVH) - TE	STRXM, TESTRXM								<u>P</u>
ASPIRIN* (BAYER											×	
<u>325 MG PO DAI</u>		MED,REC - 56/F				ADM IN			W	1335 330	36702	×
								U/A W80	10000498/W	1610000	16842	?
		Allergies/ADRs: No K	nun Allerniec									24
			Preview/Edit					×	<u>ا</u>	Add Mor	e	1
							Add More	Add to Favorites				5
	Done Canc											*
-		 Pre-Admission Me 						×	iuspend		Cnc	✓ _{Ru}
		LOSARTAN/HYDROCH						Add to Favorites	0	0	0	
		1 TAB PO DAIL		2H				Show This Location		\square		←
		CARVEDILOL* (Cor						Monograph	0	0	0	- →
		3.125 MG PO (ose/Units		ections	PRN Start	Stop		+		1
		LISINOPRIL* (Zes		125 MG	↓ 01	^{24 A} 9, 21	■ N ■ 01/04		0	0	0	l i
		10 MG PO DAIL		(Neme)			Pendir	ig		+	-	
		ROSUVASTATIN (CF		<none> 3.125 MG</none>			N-		0	0	0	±
		5 MG PO DAILY		6.25 MG		Close	Help	1	0	0	0	Ŧ
		TAMSULOSIN HCL* 0.4 Mg Po Dai		12.5 MG							0	
		ASPIRIN* (BAYER		25 MG					0	0	0	
		325 MG PO DAI		:0 ther>					Ŭ		0	
		323 110 FU DHI		(Clear>								
				(Cancel>								
			1									
				D		0	11-1-					
				Done		Cancel	Help					
44												
F 44												



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 and IV Fluids

Ordering Medications

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

PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/210) - TEST,P	ом						
Review Patient's Orders				Tł	ıu,	Sep 8 🛛 🔀	~
ADMIN, TEST - 56/F DOB 05.	/05/55	A	DM IN			W14N 1412/01	X
DO NOT INTUBATE 5 ft 6 in 70.307 kg			U/A W800	1000	05	8/W6100000903	?
Allergies/ADRs: Penicillins							8
					•	* Allergies	
Current All	Session					View/Change	ហ៍
	JC331011					Renew/Repeat	*
- Category Orders Pri	Date/Time	Status	Stop	My		Hold Resume	K
+ LABORATORY (13)	-		· · · ·			DC	+
+ DIETARY (4)						Undo	→
+ CONSULTATIONS (3)							↑
- MEDICATIONS (20)	1		1			Order Sets	
Acetylcysteine Inj (Acetadote Inj)	09/07 1700	UnvPHA	1 bag			Orders	2
7030.681 MG (100 MG/KG)			09/08 0859			Meds/Fluids Save as Set	
in NS 1000 ML						Notifications	Ŧ
IV Q16H 64.697 MLS/HR (6.25 MG/KG/HR		0-11				Cont from AMB	
Lisinopril Tab (ZeSTRIL Tab) タPO 10 MG DAILY	09/02 0900	Active		*		Reconcile Meds	
Prasugrel Tab (Effient Tab)	09/02 0900	Active		×		Transfer	
PO 10 MG DAILY	03/02 0300					Discharge	
D50W Ini	09/01 1630	Active		×		Preferences	
SOUNTING							
PRN HYPOGLYCEMIA						Submit	
Insulin Aspart Inj (NovoLOG Inj)	09/01 1630	Active		×	-	Capillit	
? 🖸 🕼 Review	Order	Docume	ent Sigr	1	1	Patient List	

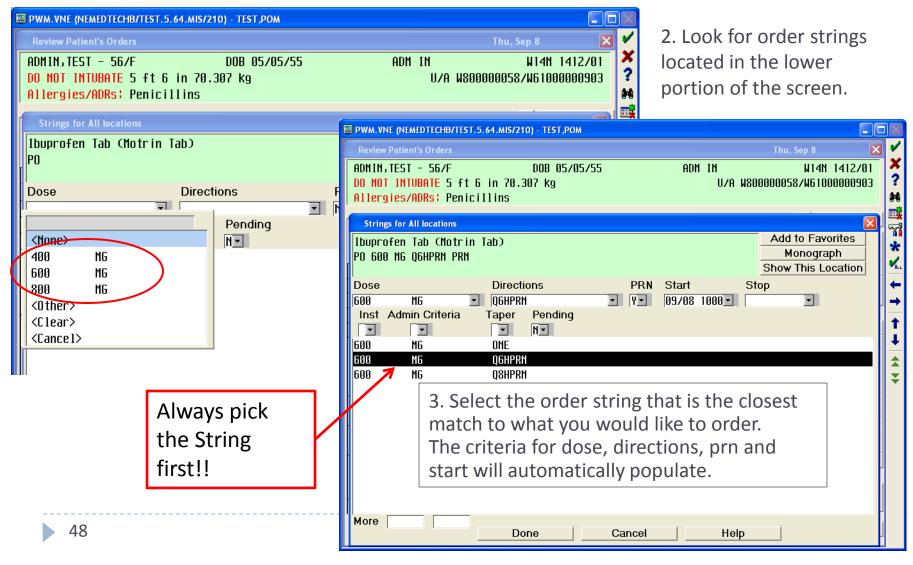
Ordering Medications

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

PWM.VNE (NEMEDTECHB/TEST. 5.64.MIS/210) - TEST, POM		
Review Patient's Orders	Thu, Sep 8 🔀 🎽	
ADMIN, TEST - 56/F DOB 05/05/55	ADM IN W14N 1412/01	
DO NOT INTUBATE 5 ft 6 in 70.307 kg Allergies/ADRs: Penicillins	PWM. VNE (NEMEDTECHB/TEST. 5. 64. MIS/210) - TEST, POM	
	Review Patient's Orders	Thu, Sep 8 🛛 🗙 🗸
All Medications 0 Order(s) Select		W14N 1412/01 🎽
Medication IBUPR	DO NOT INTUBATE 5 ft 6 in 70.307 kg U/A W& Allergies/ADRs: Penicillins	300000058/W6100000903 ?
Prev Page Favorites Ful	All Medications 0 Order(s) Selected	🔼 📩
Medications	Medication Compounds IBUPRO Lookup by Type	Monograph
+ Ibuprofen 100MG/5ML Susp		
+ Ibuprofen Tab	Prev Page Favorites Full Formulary Next	
	. Medications Fluids	→
	+ Ibuprofen 100MG/5ML Susp	! !
	- Ibuprofen Tab	+
		*
		`
	2. Select the appropriate	-
	route of administration.	
Select Dor		- I
		1
47	Select Done Help	

Ordering Medications Pick the String!

1. Select the dose



Ordering Medications PRN reasons

If the medication is PRN, click on PRN and select an option. You can free text PRN reasons. When finished, click Done.

E	B PWM. VNE (NEMEDTECHB/TEST. 5.64. MIS/210) - TEST, POM									
	Review Patient's Orders Thu, Sep 8	~								
	ADMIN,TEST - 56/F DOB 05/05/55 ADM IN W14N 1412/01 DO NOT INTUBATE 5 ft 6 in 70.307 kg U/A W800000058/W61000000903 Allergies/ADRs: Penicillins	× ?								
	Strings for All locations	1 77								
	Ibuprofen Tab (Motrin Tab) Add to Favorites P0 600 MG Q6HPRN PRN Monograph Show This Location Show This Location	*								
	Dose Directions PRN Start Stop	+								
	600 MG 🖸 Q6HPRN 💽 VV 189782 1888 V	→								
	Inst Admin Criteria Taper Pending Administer as PRN?	1								
	600 MG ONE	•								
	600 MG QGHPRN 600 MG 03HPRN <none></none>									
	600 MG Q8HPRN <none> Breakthrough Pain</none>	¥								
	Fever									
	Mild Pain 1-3									
	Moderate Pain 4-6									
	Severe Pain 7-10									
	<clear></clear>									
	<pre></pre> <pre></pre>									
Ľ	More Done Cancel Help									

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.

PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/210) - TEST,POM	
Review Patient's Orders	Thu, Sep 8 🛛 🗹
ADMIN, TEST - 56/F DOB 05/05/55	ADM IN 🛛 🛛 🕺 🕺
DO NOT INTUBATE 5 ft 6 in 70.307 kg	U/A W80000058/W6100000903 ?
Allergies/ADRs: Penicillins	
Strings for All locations	
	Add to Eavorites
Ibuprofen Tab (Motrin Tab) PO 600 MG Q6HPRN PRN (Mild Pain 1-3)	Monograph
	Show This Location
Dose Directions I	PRN Start Stop
я парияна в общана в обра	•
Inst Admin Criteria	
Q6HPRN	
	1500, 1300, 2100
600 MG Q8HPRN	
1000 110 1000 -)900
	1900, 1300, 1700, 2100
QIDPRN	
	1800, 2000
	0000, 0200, 0400, 0600, 0800, 1000
RTQ2HPRN	
More	ri -
Done Can	cel Help

Ordering Medications Admin Time, Start/Stop Date & Time

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.

	PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/395) - TEST,POM	x	
	Review Patient's Orders Thu, Sep 8	3	
	ADMIN, TEST - 56/F DOB 05/05/55 ADM IN W14N 1412/0		
	DO NOT INTUBATE 5 ft 6 in 70.307 kg U/A W800000058/W6100000903 Allergies/ADRs; Penicillins V/A W800000058/W6100000903	} ?	
	Strings for All locations		
	Metoprolol Tartrate Tab (Lopressor Tab) Add to Favorites P0 25 M6 Q12H Monograph	*	
	Show This Location	- ALL	Start
Admin Time:	Dose Directions PRN Start Stop	-	Date/Time:
n this	25 MG ILL 09, 21 IL 09/08 2100 I Inst Admin Criteria Taper Pending		In this
example, the		1	
· ·	25 MG Q12H		example, if it is
09, 21 after			after 0900
Q12H indicates		₹	when you
hat the		-	
nedication is		-	place the
		F	order, the start
o be given at			date will
)900 and 2100		1	default to
every day.			
	More	F	tonight at
	Done Cancel Help	ľ	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.

Thu, Sep 8

PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/395) - TEST, POM

Review Patient's Orders

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.

ADMIN,TEST - 56/F DOB 05/05/55 ADM IN DO NOT INTUBATE 5 ft 6 in 70.307 kg U/A W Allergies/ADRs: Penicillins	и 1411 1412/01 800000058/иб1000000903 next dose then press OK.	
	PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/395) - TEST,POM	
Strings for All locations	Review Patient's Orders Thu, Sep 8	x V
Metoprolol Tartrate Tab (Lopressor Tab) PO 25 MG 012H	ADMIN, TEST - 56/F DOB 05/05/55 ADM IN	W14N 1412/01 🗙
<pre>see Admin Crit></pre>		58/W6100000903
Dose Directions PRN Start	Allergies/ADRs: Penicillins	*
25 MG 🔍 Q12H 09, 21 💌 NV 09/08 2100V		
Inst Admin Criteria Taper Pending <u>Calendar</u>	Strings for All locations	d to Favorites
		Monograph
		This Location
	Dose Directions PRN Start Stop	
09/09 2100	25	
09/10 0900	Inst Adm The interval between the first dose and the next routinely schedu	led
	dose is 6 hours and 30 minutes.	
<pre></pre>	25 First Dose 09/08 1430	
	Next Scheduled Dose 09/08 2100	
	O Discard first dose, start at scheduled doses	₹
	C Keep first dose and next scheduled dose	
More	C Skip next scheduled dose	
Done Cancel Help	C Adjust time of next scheduled dose 09/08 2100	
		-
	OK Cancel	
		1
	More	
52	Done Cancel Help	

- -

X 🗸

Ordering Medications

Changing Start Date & Time to a future time

- -

W14N 1412/01

U/A W800000058/W6100000903

23

×

?

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

DOB 05/05/55

Thu, Sep 8

ADM IN

PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/395) - TEST, POM

NOT INTUBATE 5 ft 6 in 70.307 kg

Allergies/ADRs: Penicillins

Review Patient's Orders

ADMIN, TEST - 56/F

2. You can select the date by the clicking on the calendar and the time by clicking on HH (hour) and MM (minute).

Strings for All locations		
Metoprolol Tartrate Tab (Lopressor Tab)	Id to Favorites	
PO 25 MG Q12H	PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/395) - TEST,POM	
<pre>see Admin Crit></pre>	Review Patient's Orders Thu, S	iep 8 🛛 🔀 🗸
Dose Directions PRN Start Stop		I IN W14N 1412/01 🗙
25 MG I Q12H 09, 21 I NI 19778 2180 I	DO NOT INTUBATE 5 ft 6 in 70.307 kg Allergies/ADRs: Penicillins	U/A W80000058/W6100000903 ?
Inst Admin Criteria Taper Pending		96
V × V N× 25 M6 Q12H Today/Now	Strings for All locations	Add to Favorites
25 MG Q12H Today/Now 09/08 2100	Metoprolol Tartrate Tab (Lopressor Tab)	Add to F drontes
09/09 0900	PO 25 MG Q12H <see admin="" crit=""></see>	Monograph Show This Location
09/09 2100	Dose Directions PRN Start	Stop
09/10 0900	25 MG V Q12H 09, 21 V NV 09/88	
09/10 2100	Inst Admin Criteria Taper Penc Edit Rx Start	
<cance 1=""></cance>		
	25 MG Q12H September → 20 Sun Mon Tue Wed Thu Fri	III▼ Sat HH MM ▲
		Sat HH MM 03 21 v 00 v
		10
		17 Other Times
More	18 19 20 21 22 23 25 26 27 28 29 30	24
Done Cancel Help		
	OK Cancel	
	More	-
	Done Cancel	Help
53		

Ordering Medications Premix medication options

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.

PWM.VNE (NEMEDTECHB/TEST.5.6	4.MIS/64) - TEST,POM			
Review Patient's Orders			Fri, Sep 9	
ADMIN,TEST - 56/F DO NOT INTUBATE 5 ft 6 i Allergies/ADRs: Penicill		ADM IN U/A W80	W14N 1412/0 10000058/W610000090	13 ?
All Medications	0 Order(s) Sele	cted		3
Medication CEFAZOL I		Compounds Lookup by Type	Non-Formulary Monograph	*
Preu P	age Favorites Fu Medications	I <mark>ll Formulary N</mark> ext P Fluids	age	
+ ceFAZolin 1 GM Pre + ceFAZolin Inj	11X			
	Select Do	one Help		1

Ordering Medications Changing an order

Review Patient's Orders Fri, Sep 9 Y TEST, Ventrapragada - 34/F ADM IN W34N 3411/01 U/A W800000086/W61000001307 Y Allergies Y Allergies Y
U/A W80000086/W61000001307
Allergies/ADRs:
Allergies Z. CIICK VIEW/Change
Current All Session Renew/Repeat
- Category Orders Pri Date/Time Status Stop Mu Hold Resume 🍢
+ LABORATORY (1)
- MEDICATIONS (2) Review Patient's Orders Fri, Sep 9
Metoprolol Tartrate Tab (Lopressor 07/27 1530 Active TEST, Ventrapragada - 34/F ADM IN W34N 3411/01 U/A W800000086/W61000001307
Acetawinophen/Cod 300/30M6 Tab (Tu) 07/27 1500 Active
PRN MILD PAIN 1-3 Add to Favorites Clear Unchecked Save as Set
- New Orders (1) Lisinopril Tab (ZeSTRIL Tab) 09/10 0900 New Orders Pri Start/Service Series Directions Xty Details
PO 10 MG DAILY B3710 8300 HLW Image: Content of the second seco
1. Coloct the medication
1. Select the medication 3. Click Avail
? S G Review Order Document
55 Done Cancel Help

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.

OE.SVH (NEMEDTECHB/TEST.5.64	.MIS/27/SVH) - TEST,POM				
Review Patient's Orders			Fri, Sep 9 🛛 🗙		
VI65,BIG - 49/M	DOB 12/06/61	ADM IN U/A W8000	W1NR S109/02 000163/W61000002149	× ?	Admin Crite
Ollornice /ODDe ' Process Orderset details			X		will non un
	Previous Set Ne	ext Set	Add More	~	will pop-up
Р	revious Page Page 1 of 1	Next Page	Clear Unchecked	*	the RN duri
	Hopprin DHT/DE (Ui	ab Doco)	Edit Multiple	-	
Modify/View Medication				+	Medication
This order is ready to	file.			→ ↑	Administrat
 Heparin 25,000 UNIT/500	I MI 25000 IINTT TU	*Per Bao*	Add to Favorites	1	
Premixed at 25000 UNI			how This Locatior		
<see admin="" crit=""> PRN (</see>			Monograph	Ŧ	
Route Rate/Dose	Directions	PRN Start V 09/09 05	Stop		
		Alt IV Pending			
		▼ N▼			
	OK Close	Help			
	IT/KG) Q6HPRN <mark>Prn</mark> Per proto	ICOL			
· ·	T/ML Inj 09/09 0530	1000	Ø		
10 Y UNIT (37.5	UNIT/KG) Q6HPRN <mark>PRN</mark> PER PRO	ITULUL			
	Done	Cancel			

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.

PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/307) - TEST,POM	
Review Patient's Orders	Fri, Jun 22 🛛 🗙
VIG,SAM - 35/M DOB 09/08/76 ADM DNR- DO NOT RESUSCITATE 5 ft 0 in 90.718 kg Allergies/ADRs: No Known Allergies	1 IN W335 3316/01 U/A W800000451/W61000016255
Strings for All locations	
Inculin Accort Ini (Nouol OG Ini)	Add to Favorites
Enter/Edit Rx's Administration Criteria	<u> </u>
Administration Criteria CUSTOM SLIDING SCALE	
Condition Dose/Route/Rate 2 BLOOD GLUCOSE 200-249 UNITS 3 BLOOD GLUCOSE 250-299 UNITS 4 BLOOD GLUCOSE 300-349 UNITS 5 BLOOD GLUCOSE 350-399 UNITS	Instruction
6 More	
nore <u>Treatment Text</u> Novolog MUST be given 0-15 minutes before eating	Erase This Rx's Admin Crit Save Admin Crit as Favorite OK Cancel

Ordering Medications Different Types of Admin Criteria

Initial Rate: 5 *MG/HR		Save * Target INR Range Prophylaxis of VTE 2 to 3 (e Admin Crit as Favorite	dmin Criteria: •Titrateable medications •Warfarin •Hold Parameters
	Other: Target INR: Ok	Enter/Edit Rx's Administration Criteria Administration Criteria (SBP AND HR H Hold for SBP < [100 Hold for HR < [60]		Erase Admin Crit Save as Favorite

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.

OE.SVH (NEMEDTECHB/TEST.5.64	4.MIS/162/SVH) - TEST,POM	
Review Patient's Orders		Fri, Sep 9 🛛 🗙 💆
TEST,Ventrapragada - 34	1/F ADM IN	W34N 3411/01
Ollernies/ODDs'		U/A W80000086/W61000001307
Process Orderset details		
	Previous Set Next Set	Add More
		Novt Doog Clear Unchecked
Enter/Edit Rx's Administration C		
Administration Criteria	PT DEN S RA LINTTS DED NOV 🗐 My Favorites All	'r
Condition	C @	Instruction
1 BLOOD GLUCOSE 150-19		
2 BLOOD GLUCOSE 200-24	<none></none>	
3 BLOOD GLUCOSE 250-29		
4 BLOOD GLUCOSE 300-34	PT REQ 41 TO 80 UNITS PER DAY PT REO > 80 UNITS PER DAY	
5 BLOOD GLUCOSE 350-39 More	CUSTOM SLIDING SCALE	
	<0ther>	
Treatment Text	<cancel></cancel>	Erase This Rx's Admin Crit
Novolog must be given 0-	-15 minutes before eating	Save Admin Crit as Favorite
		Save Aumin Citt as Favorite
		OK Cancel
	Dana	
	Done Cance	

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.

🔟 OE.SVH (NEMEDTECHB/TE	ST.5.64.MIS/38/SVH) - TEST,POM			
Review Patient's Orders			Fri, Sep 9	× ×
SECONDTRY,ADMIN - 6 ft 2 in 80.739 H Allergies/ADRs: No	(g	ADM	IN W22: U/A W800000059/W6	96
Strings for All locations				
Sodium Phosphate E PR 133 ML DAILYPRI	nena (Fleet Enena) I PRN		Add to Fa Monog Show This	iraph
Dose	Directions	PRN Start	Stop	→
133 ML Inst Admin Criteri	Edit Special Instructions			→
133 ML 133 ML	Special	Instructions	_	
	Free text			Ĭ
	information h	nere		-
	<u> </u>	ancel	Delete All	
More	Done Ca	ancel	Help	1

Ordering Medications Non-formulary and Patient Own Medications

1. Click on Non-Formulary

PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/211) - TEST,POM		
Review Patient's OrdersThu, SADMIN, TEST - 56/FDOB 05/05/55DO NOT INTUBATE 5 ft 6 in 70.307 kgAllergies/ADRs: Penicillins	ep 8 23 V IN W14N 1412/01 U/A W800000058/W61000000903	2. Click on Non-Formulary
All Medications 0 Order(s) Selected Medication Compo Lookup b		Med
Prev Page Favorites Full Formulary Medications Fluids	Next Page Image: PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/211) - TEST,POM	
	Review Patient's Orders	Thu, Sep 8
+ 3TC Cap + 3TC Soln + A+D Oint + Abacavir Tab	ADMIN,TEST - 56/F DOB 05/05/55 DO NOT INTUBATE 5 ft 6 in 70.307 kg Allergies/ADRs: Penicillins	ADM IN W14N 1412/01 X U/A W800000058/W6100000903 ?
+ Abatacept Inj + ABC Tab + Abelcet Inj + Abilify Inj	All Medications 0 Order(s) Selected Medication	Compounds Non-Formulary Med
+ Abilify Tab + Absorbable Collagen Hemostatic + Acamprosate Tab	Prev Page Favorites Medications	Full Formulary Next Pc Fluids ↓
+ Acarbose Tab + Accolate Tab Select Done	+ 3TC Cap + 3TC Soln + A+D Oint + Abacavir Tab + Abatacept Inj + ABC Tab + Abelcet Inj + Abilify Inj + Abilify Tab	

Ordering Medications Non-formulary and Patient Own Medications

No Allergy, Duplication, or Interaction Checking occurs

Ξ	PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/307) - TEST,POM				
	Review Pa	tient's Orders	Fr	i, Jun 22 🛛 🗙	~	
		- 35/M DOB 09/08/76 NOT RESUSCITATE 5 ft 0 in 90.718 kg s/ODRs' No Known Alleroies	ADM IN U/A W800004	W335 3316/01 51/W61000016255	X ? H	
	1	Enter/Edit Justifi Warning: Non-Formulary Rx's will not be eva interactions, food/disease contraindications Please enter the following information for J	aluated for allergies,duplicates s, rules, or dose warnings.		→ <mark>~ * %</mark>	
	(Patier	Will patient be using their own t's own medications must be identified b		to the patient)	→ + +	Patient's Own Med Section
	Answer	following questions ONLY for nonformular	y medications NOT provided	by the patient	*	
	Exp	for use of Non-Formulary medication ected length of patient stay (days)	will initiate a phone call	from pharmacy.	+	Non Formulary Med Section
		Ok Cancel		Prev Next		

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.

PWM.VNE (NEMEDTECHB/TI	EST.5.64.MIS/4) -	теят,ром					
Review Patient's Orders						Fri, Sep 9	×
TEST,RABIN - 35/M		DOB 09/24/75		ADM 1		WINR SI10	
					U/A W800	0000161/W61000002	115
Allergies/ADRs: Asp	DILLIN]
All Medications		0 Order(s)	Selected				X
Medication				Compoun		Non-Formulary	
			L	ookup by	Гуре	Monograph	_
				_			
<u>Pr</u>	ev Page	Favorites I	Full Form		Next Pag	16	-
Enter/Edit Non-Formulary							×
						Justification	
Mediastian							
Medication							
Route Dose	Units	Directions		PR	N Start	Stop	
		•		• •			•
Inst Admin Criteria	Taper				Pending	g	
	_				•		
	ОК	Clos	e	He	elp		

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.

PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/211)	- TEST,POM		
Review Patient's Orders		Thu, Sep 8	× 🛛
ADMIN, TEST - 56/F	DOB 05/05/55	ADM IN	W14N 1412/01 🗙
DO NOT INTUBATE 5 ft 6 in 70	1.307 kg	U/A W8000	100058/W6100000903 ?
Allergies/ADRs: Penicillins			*
1			i 📫
	0 Order(s) Selected	Compounds	Non-Formulary
Fluid		Lookup by Type	Monograph *
Prev Page	Favorites Fu	H Formulary Next Page	[]
	Medications	Fluids	
	licarcarrons	1 Ionus	
+ **TESTING**			▲ ▲
+ D10W			↓ ↓
+ D5W			
+ D5W + 20 mEq KCL			
+ D5W + 40 mEq KCL			
+ D5W 1/2 NS			
+ D5W 1/2 NS + 10 MEq KCL			
+ D5W 1/2 NS + 20 mEq KCL + D5W 1/2 NS + 30 mEq KCL			
+ D5W 1/2 NS + 30 MEq KCL			F
+ D5W 1/2 NS + 40 mEq KCL			¹
+ D5W 1/4 NS			1
+ D5W 1/4 NS + 10 mEq KCL			-
		one Help	
· · · · · · · · · · · · · · · · · · ·			ř

Ordering IV Fluids Pick the String!

1. Select the rate.

PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/211) - T	TEST, POM			
Review Patient's Orders ADMIN, TEST - 56/F DO NOT INTUBATE 5 ft 6 in 70. Allergies/ADRs: Penicillins Strings for All locations		↓ ↓ ↓ ↓	 Look for order strin located in the lower portion of the screen 	0
NS ML IV Rate Start Rate ML/HR 100 ML/HR 125 ML/HR 125 ML/HR 250 ML/HR 137 MLS/HR (Uther> (Clear> (Cance1>	×Per Stop 1500▼ ▼ Fluid Alt IV Pending *▼ ▼ N▼	Bag*XUU TO F GIOINGS PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/21 Review Patient's Orders ADMIN, TEST - 56/F DO NOT INTUBATE 5 ft 6 in Allergies/ADRs: Penicillin: Strings for All locations NS 1000 ML IV 100 ML/HR Stop 09/09 1459 Rate Sta	Thu, Sep 8 DOB 05/05/55 ADH IN 70.307 kg U/A W80 s *Per Bage art Stop /08 1500 09/09 1459 ves Fluid Alt IV Pending	Add to Favorites Monograph Show This Location
More D	Always pick the String!!	match to	the order string that is the order what you would like to order ually only have one string op	er. IV

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

ther>	PHA.SVH (NEMEDTECHG/TEST.5.64.MIS/154/SVH) - TEST,POM	
	Review Patient's Orders Thu, Sep 8	
	ADMIN,TEST - 56/F DOB 05/05/55 ADM IN W14N 141 DO NOT INTUBATE 5 ft 6 in 70.307 kg U/A W800000058/W6100000 Allergies/ADRs: Penicillins	0903
	Strings for All locations	X 5
	NS 1000 ML IV *Per Bag* Add to Favorite Monograph	5
	100 ML/HR Stop 09/09 2259 Show This Locati	on
	Rate Start Stop	
		<u> </u> -
	Fluid Alt IV Pending <none> ** *</none>	1
	<none> ★▼ ▼ N▼ 75 ML/HR (1000 ML bag) (1000 ML bag)</none>	
	100 ML/HR	
	125 ML/HR	
	250 ML/HR	
	137 MLS/HR	Į
	<0 ther>	_
	(Clear)	-
	<pre><cancel></cancel></pre>	-
		L L
	More	Ľ
	Done Cancel Help	

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.

PHA.SVH (NEMEDTECHG/TEST.5.64.MIS/154/SVH) - TEST,POM	
Review Patient's Orders Thu, Sep	
	14N 1412/01 🎽
DO NOT INTUBATE 5 ft 6 in 70.307 kg U/A W800000058/W	
Allergies/ADRs: Penicillins	14
Strings for All locations	
1 11 1000 HL 1V	ravontes
	ograph s Location
Rate Start Stop	
Etit vosing	
NS	
Rate 85 Rate Units ML/HR Dose or Volume (per bag) 1000 Units ML	
Define Limit for IV:	
Stop is applied from Rx Start of 09/08 2300	-
Total Volume to Infuse (mls) -or-	-
# Bags/Doses	-
-or-	Į.
Stop Date/Time 09/09 2300	[]
OK	
	P
Done Cancel Help	L

Ordering IV Fluids Changing the Stop Date/Time

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.

OE.SVH (NEMEDTECHB/TEST.5.64.MIS/211/SVH) - TEST,POM	
Review Patient's Orders	Thu, Sep 8 🛛 🔀 🗸
ADMIN, TEST - 56/F DOB 05/05/55	ADM IN W14N 1412/01 🗙
DO NOT INTUBATE 5 ft 6 in 70.307 kg	U/A W80000058/W6100000903 ?
Allergies/ADRs: Penicillins Preview/Edit	
	Add More Add to Favorites
	Add More Add to Favorites
Modify/View Medication	
NS 1000 ML IV	*Per Bag* Add to Favorites
100 ML/HR Stop 09/09 1529	Monograph
Route Rate/Dose Directions	PRN Start Stop
IV 100 ML/HR	▼ N▼ 09/08 1530▼ 09/09 1529▼ 1
Inst Admin Criteria Taper Additives Fluid	A Edit Rx Stop
	Define a Limit for this Rx:
OK Close	-
	Total Volume to Infuse (mls)
	-0 r -
	# Bags/Doses
	-01- Stop Date/Time 90/90 1520-
	Stop Date/Time 09/09 1529
	OK Cancel
Done Cancel	Help

Antimicrobial Orders Renewals (Clinical Indication)

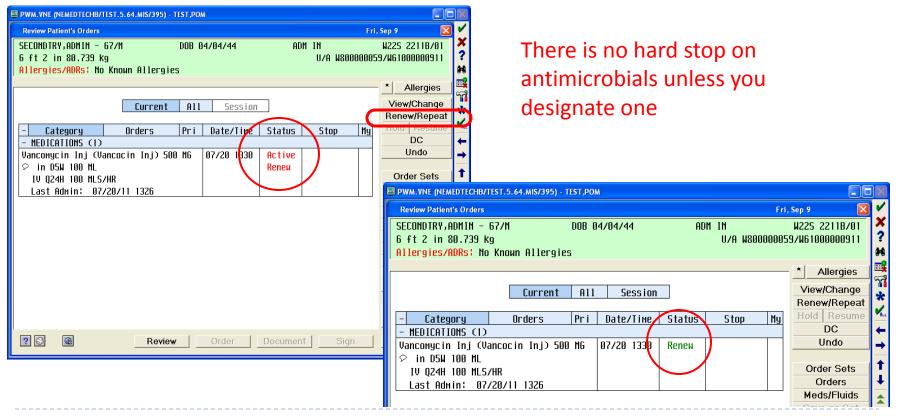
You will be prompted to designate a clinical indication.

Your selection will affect the **renewal** period of the medication.

PWM.VNE	PWM.VNE (NEMEDTECHB/TEST. 5. 64. MIS/395) - TEST, POM					
Review Pa	tient's Orders	Fri, Sep 9	× ×			
SECONDT	Y,ADMIN - 67/M DOB 04/04/44	ADM IN W22S 22				
	n 80.739 kg	U/A W80000059/W61000				
HITEL	s/ADRs: No Known Allergies		44			
Strings	Enter/Edit Rx's Clinical Indication					
ceFAZol	Medication Ordered		rites			
	ceFAZolin 1 GM Premix 50 ML 100 ML/HR		n li j			
Q8H 10			ation 4			
Rate/Do 100 ML/	<pre></pre>		11			
Inst A	DOCUMENTED INFECTION (7 DAY)					
	NO STOP- ONLY FOR PO					
1	SURGICAL PROPHYLAXIS (1 DAY)		· · ·			
100	SUSPECTED INFECTION (3 DAY)		- 🌲			
	<clear> <cancel></cancel></clear>		Ŧ			
			Ī			
			_			
			-			
			-			
			P			

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.



Antimicrobial Orders ID Restrictions

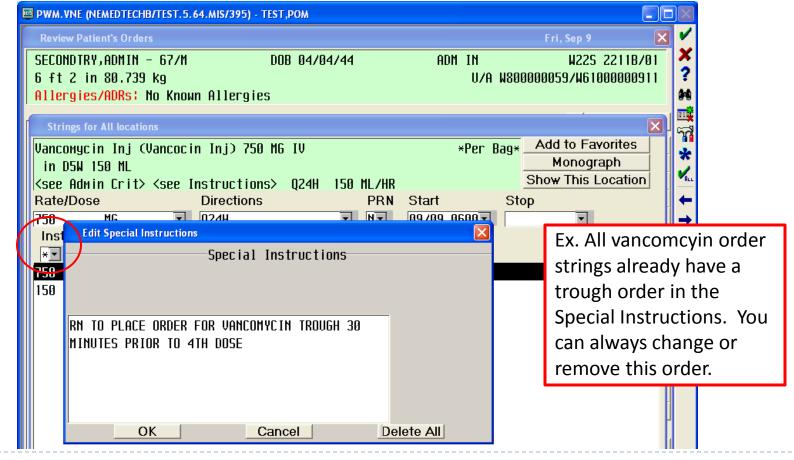
Some antimicrobials have ID restrictions associated. Depending on the restrictions, you will see one of two different types of admin criteria appear.

Enter/Edit Rx's Administration Criteria Administration Criteria [MEDICATIONS RES]	RICTED TO ID Save as Favorite This is an example of a med
*** Use Restric Approving ID Physician (F ID Resident/Fellow (f Indication (f Other indication (f	9 lookup)
his is an example of a nedication that may not eed ID approval epending on the ndication.	Enter/Edit Rx's Administration Criteria Image: Criteria ID APPROVAL FOR ERIAPENEM Erase Admin Criteria Administration Criteria ID APPROVAL FOR ERIAPENEM Erase Admin Criteria Indications that do NOT require ID approval (F9 lookup) ** If indication not listed above, complete section below ** Approving ID Physician (F9 lookup) ID Resident/Fellow (free text) Indication (free text) Other indication (free text)
▶ 71	Ok Cancel Help Prev Next

Antimicrobial Orders Trough Orders

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.



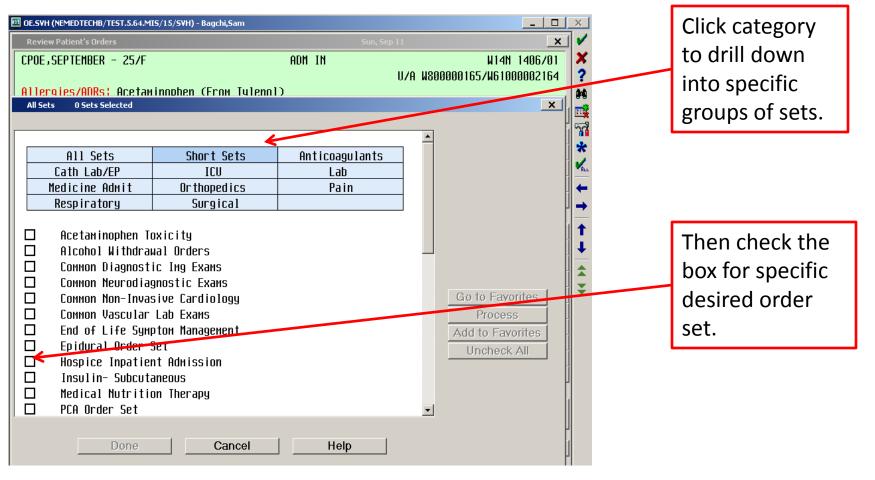


Use the F9 Key to access drop down menus on open entries. Not sure if there is a drop down menu, just click F9 to check.

Using Order Sets

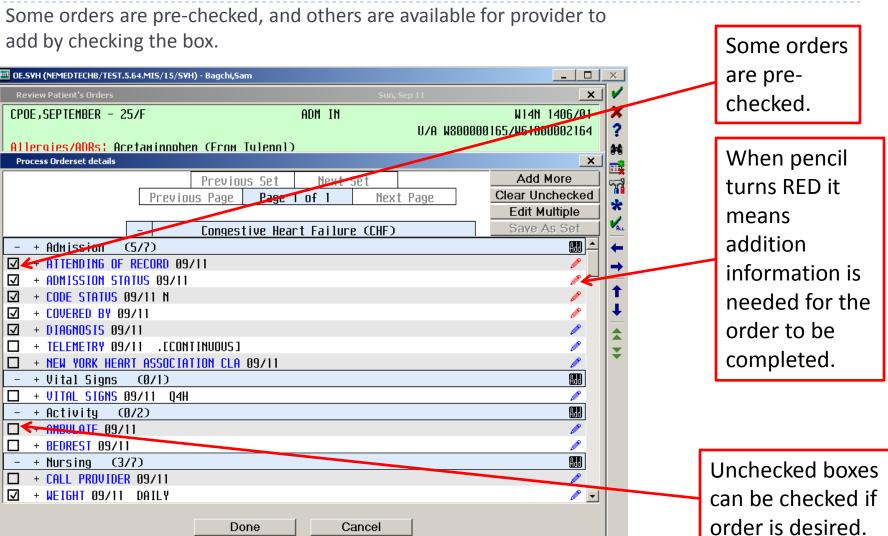
PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/181) - Bagchi	Sam			\leq	
Review Patient's Orders		Fr	i, Sep 9 🛛 🔀	~	
CPOE, TUESDAY - 52/M	ADM IN		W14N 1409/01	×	
DO NOT RESUSCITATE		U/A W8000001	66/W61000002172	?	
Allergies/ADRs: Aspirin				99	
			* Allergies		
Current All	Session		View/Change	2	
	38351011		Renew/Repeat	*	Click the "ORDER
- Category Orders Pri	Date/Time Status	Stop My	Hold Resume	V ALL	
+ LABORATORY (5)			DC	←	SETS" button to
+ DIAGNOSTIC IMAGING (1)			Undo	→	look for desired
+ DIETARY (1)				•	
+ CONSULTATIONS (1)			Order Sets		order set.
- MEDICATIONS (13)			Orders Meds/Fluids	-	
Ceftriaxone 1 GM Premix (Rocep 1 GM	09/08 1200 Active		Save as Set	*	
Premixed at 1 GM/50 ML			Notifications	Ŧ	
IV DAILY@1200 100 ML/HR Metoprolol Succinate XL Tab (Topro	09/08 0900 Active	+	Cont from AMB		
\wp PO 100 MG DAILY	05700 0500 HLLIVE		Reconcile Meds		
Morphine Inj	09/07 1500 Active		Transfer		
IV 2 MG Q6HPRN			Discharge		
PRN SEVERE PAIN 7-10			Preferences		
Hydrocodone Bit/Acetaminophen (Hyd	09/07 1500 Active				
PO 1 EACH Q6HPRN			Submit		
PRN MODERATE PAIN 4-6			·		
? 🖸 🕼 Review	Order Docum	nent Sign	Patient List		

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.



Once selected, order set presents in collapsed format.

🔤 OE.SVH (NEMEDTECHB/TEST.5.64.MIS/15/SVH) - E	agchi,Sam		_ 0	×	
Review Patient's Orders CPOE, SEPTEMBER - 25/F Allergies/ADRs: Acetaminophen (ADM IN	5ep 11 U/A W800000	¥ W14N 1406/01 D165/W61000002164	✓ × ?	Click first "+" sign to
Previous + C + + Admission (5/7) + + Vital Signs (0/1) + + Activity (0/2)	revious Set Next Set Page Page 1 of 1 Hext ongestive Heart Failure (CHF)	. Page	X Add More Clear Unchecked Edit Multiple Save As Set M M M		expand ALL categories of the set.
<pre>+ + Nursing (3/7) + + Dietary (1/2) + + IV_Fluids (0/1) + + DVT Prophylaxis- High Ris + + DVT Prophylaxis- Moderate + + DVT Prophylaxis- Low Risk + + ACE Inhibitors (for EF < + + Angiotensin Receptor Bloc</pre>	Risk (0/5) 1 reminder (0/3) 40%) (0/2) 1 reminder	(0/1) 1 гем	Add Add Add Add Add Add Add Add Add Add	↓ ★ ★ ₹	Click "+" sign at the category level to only open the orders
 + + Reasons for not ordering + + Beta Blockers (0/3) 1 + + Reasons for Not Ordering + + Diuretics (0/6) 1 rem 	ACE-I or ARB (1/1) reminder Betablocker (1/1)		Add Add Add Add Add Add		in a specific category.



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

MORE button.				Many order
🔟 OE.SVH (NEMEDTECHB/TEST.5.64.MIS/15/SVH) - Bag	gchi,Sam		×	sets have
Review Patient's Orders	Sun, S	iep 11 X	l 🖌	"Associated
CPOE, SEPTEMBER - 25/F	ADM IN	W14N 1406/01	×	
		U/A W800000165/W61000002164	?	Sets" attached
Allergies/ADRs: Acetaminnohen (F Process Orderset details	rom lulenol)	×	949	to them. Click
	evious Set Next Set	Add More		
Previous Pa		Page Clear Unchecked	1	ADD MORE and
		Edit Multiple	*	then ORDER
	ngestive Heart Failure (CHF)	Save As Set	ALL	SETS to find
<u>-</u> + Admission (5/7)			-	SETS LO IIITU
+ ATTENDING OF RECORD 09/11			→	associated sets
 ✓ + ADMISSION STATUS 09/11 ✓ + CODE STATUS 09/11 N 			1	
 ✓ + CODE STATUS 09/11 N ✓ + COVERED BY 09/11 			I I	
\square + DIAGNOSIS 09/11				
□ + TELEMETRY 09/11 .CCONTINUC	JUS 1			
+ NEW YORK HEART ASSOCIATION	CLA 09/11	<i>•</i>	*	When you use the
- + Vital Signs (0/1)		Add J		ADD MORE
+ VITAL SIGNS 09/11 Q4H				
- + Activity (0/2)		AUD		button to add
				sets, do not click
+ BEDREST 09/11 - + Nursing (3/7)				,
\square + CALL PROVIDER 09/11				the DONE button
\square + WEIGHT 09/11 DAILY		<i>•</i>		until you have
				,
	Done Cancel			scrolled through
78				each set.

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

🔟 OE.SVH (NEMEDTECHB/TEST.5.64.MIS/15/SVH) - Bagchi,Sam	_ D ×	
Review Patient's Orders Sun, Sep 11	× V	
CPOE,SEPTEMBER - 25/F ADM IN	W14N 1406/01 🗙	
	00165/W61000002164 ?	
Allergies/ADRs: Acetaminnohen (From Tylenol) Process Orderset details	× +	Click NEXT SET
Previous Set Next Set	Add More	when done
Previous Page Page of 1 Next Page	Clear Unchecken	when done
	Edit Multiple	with current
- Congestive Heart Failure (CHF)	Save As Set	
- + Admission (5/7)	─	set.
	✓ →	
☑ + ADMISSION STATUS 09/11 ☑ + CODE STATUS 09/11 N	1	
$\square = + COVERED BY 09/11$		
\square + DIAGNOSIS 09/11		
□ + TELEMETRY 09/11 .CCONTINUOUS]		
+ NEW YORK HEART ASSOCIATION CLA 09/11		
- + Vital Signs (0/1)	ALL	
+ VITAL SIGNS 09/11 Q4H		Click DONE
- + Activity (0/2)		only when all
		Only when an
□ + BEDREST 09/11 - + Nursing (3/7)		sets have been
$\Box + CALL PROVIDER 09/11$		
\square + WEIGHT 09/11 DAILY		completed.
Dana di Craati		
Done Cancel		



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 Labs in CPOE

Ordering Lab Tests

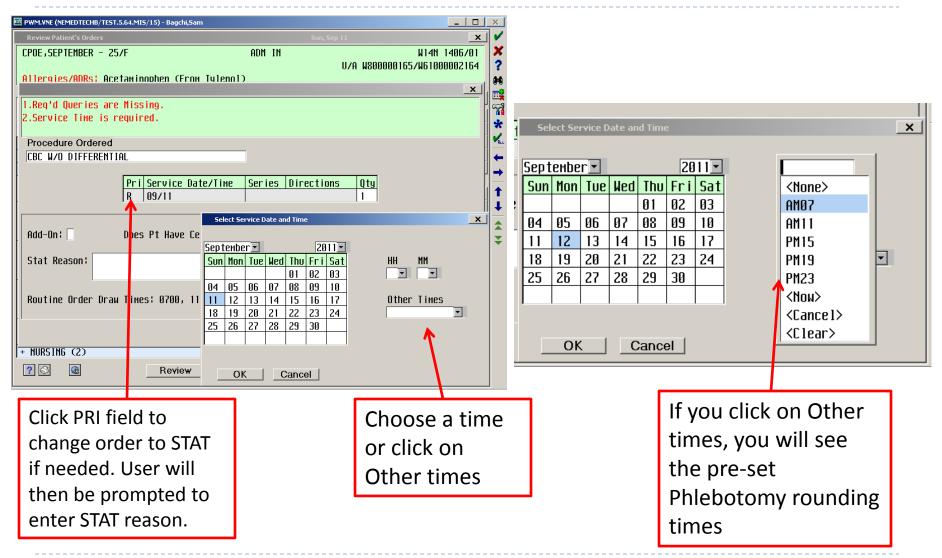
PWM.VNE (NEMEDTECHB/TEST. 5. 64. MIS/181) - Bagchi	,Sam							
Review Patient's Orders				Fri	, Sep 9 🛛 🔀	~		
CPOE, TUESDAY - 52/M	ADM IN				W14N 1409/01	×		
DO NOT RESUSCITATE			U/A W8000	0016	6/W61000002172	?		
Allergies/ADRs: Aspirin						94 0		
					* Allergies	27 27		
Current All	Session	7			View/Change	*		
				_	Renew/Repeat			
- Category Orders Pri	Date/Time	Status	Stop	1y	Hold Resume	ALL		Click the
+ LABORATORY (5)				_	Undo	•		"ORDERS" button
+ DIAGNOSTIC IMAGING (1) + DIETARY (1)				_		-		to look for
+ CONSULTATIONS (1)				- _	Order Sets	1		
- MEDICATIONS (13)					Orders	Ŧ		desired lab test.
Ceftriaxone 1 GM Premix (Rocep 1 GM	09/08 1200	Active			Meds/Fluids		l	
Premixed at 1 GM/50 ML					Save as Set	Ŧ		
IV DAILY@1200 100 ML/HR					Notifications			
Metoprolol Succinate XL Tab (Topro	09/08 0900	Active			Cont from AMB Reconcile Meds			
	00/07 1500	0-11		_	Transfer			
Morphine Inj IV 2 MG Q6HPRN	09/07 1500	Active			Discharge			
PRN SEVERE PAIN 7-10					Preferences			
Hydrocodone Bit/Acetaminophen (Hyd	09/07 1500	Active						
PO 1 EACH Q6HPRN					Submit			
PRN MODERATE PAIN 4-6				-				
? S Review	Order	Docume	nt Sign		Patient List			

Ordering Lab Tests

Enter lab test in search window and click desired lab test (or click SELECT button.)

🔤 PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/15) - Bagchi,Sam			×
Review Patient's Orders		ep 11 X	1
CPOE, SEPTEMBER - 25/F	ADM IN	W14N 1406/01	×
		U/A W800000165/W61000002164	?
Allergies/ADRs: Acetaminnohen (From To Any Order Lookup	ulenn1)	×	Ħ
Search on:			Ш¥
	Preview/Edit	Go to Favorites	ĥ
լու		Add to Favorites	*
			V ALL
Order Description	Category		+
CBC W/O DIFFERENTIAL	LABORATO	RY - SUH	→
CBC WITH 5 MANUAL DIFFERENTIAL	LABORATO		
CBC WITH 5 PART DIFFERENTIAL	LABORATO	EI	T
DIALYSIS CBC WITH 5 PART DIFF	LABORATO	RY - SVH	+
		-	
		H	¥
	/		
		μ	
More			
		Ļ	
Select 🖌	Done He	Ip I	

Ordering Lab Tests Priority and Date/Time



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

PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/183) - TEST,POM Review Patient's Orders Mon, Jun 25 TEST,MICHELE12 - 23/F ADM IN W22S 2210/02 5 ft 10 in 72.575 kg U/A W800000544/W61000021347 Allergies/ADRs: No Known Allergies X	✓ X ? H 課業	checked on first lab order but then auto-populates for subsequent orders.
Procedure Ordered CBC W/O DIFFERENTIAL Pri Service Date/Time Series Directions Oty R 06/26 AM07 1 *Lab Draw Round Times: 0700,1100,1500,1900,and 2300. Orders for next round placed <30 MINUTES prior to round time will be drawn next following round.*	+ + + + + +	STAT REASON becomes required field only if STAT designated for lab.

Ordering Lab Tests Next Morning Labs Short Set

Use the "Next Morning Labs" short order set to order labs for tomorrow morning.

🔤 OE.SVH (NEMEDTECHB/TEST.5.64.MIS/15/SVH) - Bagchi,Sam	_ _ ×	
Review Patient's Orders Sun, Sep 1	1 🗙 🖌	
CPOE, SEPTEMBER - 25/F ADM IN	W14N 1406701 🗙	
	J/A W800000165/W61000002164 ?	
Allergies/ADRs: Acetaminophen (From Tylenol)	94	
Process Orderset details Previous Set Next Set	Add More	Click the box for
Previous Page Page 1 of 1 Next Page		the desired "Next
	Edit Multiple	the desired "Next
- Next Morning Labs	Saye As Set	Day" lab and the
- + Hematology/Coagulation (0/5)		lab will
HEMOGLOBIN 09/12 AM07		
+ HEMATOCRIT 09/12 AM07		automatically be
+ CBC WITH 5 PART DIFFERENTIAL 09/12 AM07		,
+ PROTHROMBIN TIME 09/12 AM07		ordered for the
+ PARTIAL THROMBOPLASTIN TIME 09/12 AM07		next calendar day
- + Chemistry (877) BASIC METABOLIC PANEL 09/12 0700		hext calendar day
+ COMPREHENSIVE METABOLIC PANEL 09/12 0700		at 7AM.
+ HEPATIC FUNCTION PANEL 09/12 0700		
\square + MAGNESIUM 09/12 0700		
\square + AMYLASE 09/12 0700		
□ + LIPASE 09/12 0700		
$\square + CPK 09/12 0700$		
Done Cancel		



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.

Radiology Orders

Radiology Orders

PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/181) - Bagchi	,Sam				
Review Patient's Orders		Fri,	Sep 9 🛛 🔀	~	
CPOE, TUESDAY - 52/M	ADM IN		W14N 1409/01	×	
DO NOT RESUSCITATE		U/A W80000016	6/W61000002172	2	
Allergies/ADRs: Aspirin				#1	
		•	* Allergies	1	
Current All	Session		View/Change	*	
			Renew/Repeat		
- Category Orders Pri	Date/Time Status	Stop My	Hold Resume	ALL	Click the
+ LABORATORY (5)			DC Undo	+	"ORDERS" button
+ DIAGNOSTIC IMAGING (1)				-	to look for
+ DIETARY (1) + Consultations (1)			Order Sets	1	
- MEDICATIONS (13)			Orders 🖌	+	radiology orders
Ceftriaxone 1 GM Premix (Rocep 1 GM	09/08 1200 Active		Meds/Fluids		
Premixed at 1 GM/50 ML			Save as Set	Ŧ	
IV DAILY@1200 100 ML/HR			Notifications	Ť	
Metoprolol Succinate XL Tab (Topro	09/08 0900 Active		Cont from AMB Reconcile Meds		
	09/07 1500 Active		Transfer		
Morphine Inj IV 2 MG Q6HPRN	09/07 1500 Active		Discharge		
PRN SEVERE PAIN 7-10			Preferences		
Hydrocodone Bit/Acetaminophen (Hyd	09/07 1500 Active				
PO 1 EACH Q6HPRN			Submit		
PRN MODERATE PAIN 4-6		_			
? 🛇 🕜 Review	Order Document	t Sign	Patient List		

Radiology Orders

Enter desired modality for radiology study.

🔤 OE.SVH (NEMEDTECHB/TEST.5.64.MIS/15/SVH) - Bagchi,Sam				×	
Review Patient's Orders	Sun, Se	:p 11	×	✓	
CPOE, SEPTEMBER - 25/F	ADM IN		W14N 1406/01	×	
Allergies/ADRs: Acetaminophen (From Tu	lennl)	U/A W800000165/	W61000002164	?	Click Calact
Any Order Lookup			×	88 81	Click Select
Search on:	Preview/Edit	Go to Favori	(UI	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	when desired
		Add to Favori	tes	*	ctudy ic
				V.	study is
Order Description	Category			5	highlighted. Or
CT ABD & PEL W IV CONTRAST		tomography SVH		→	simply click
CT ABD & PELVIS W CONTRAST		Tomography SVH		•	. ,
CT ABD & PELVIS W/O & W CON		Tomography SVH	-	2.1	the desired
CT ABD & PELVIS W/O CONTRAST		Tomography SVH	-	+	
CT ABDOMEN W CONTRAST			-	*	study.
CT ABDOMEN W/O & W CONTRAST		TOMOGRAPHY SVH	-	₹	
CT ABDOMEN W/O CONTRST		TOMOGRAPHY SVH	-		
CT ANGIOGRAPHY ABD & PELVIS		TOMOGRAPHY SVH	-		
CT ANGIOGRAPHY ABDOMEN			-		
CT ANGIOGRAPHY CH, ABD, & PEL		TOMOGRAPHY SVH	-		
CT ANGIOGRAPHY CHEST		TOMOGRAPHY SVH	-		
CT ANGIOGRAPHY HEAD & NECK		TOMOGRAPHY SVH	H		
CT ANGIOGRAPHY HEAD	LUNPUTED	TOMOGRAPHY SVH			
Select	Done He	lp	Ļ		

Radiology Orders

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

🔟 OE.SYH (NEMEDTECHB/TEST.5.64.MIS/15/SYH) - Bagchi,Sam			×	
Review Patient's Orders	Sun, Sep 11	×	_ ∕	
CPOE, SEPTEMBER - 25/F	ADM IN	W14N 1406/01	×	
		A W800000165/W61000002164	?	
Allergies/ADRs: Acetaminnohen (From Tyleno))	×		
1.Req'd Queries are Missing.				
			*	Click OK when
Procedure Ordered	_		- ALL	
CT ABD & PEL W IV CONTRAST			+	Signs/Symptoms
Pri Service Date/Time	Series Directions	Qty		and Clinical
R 09/11		1	1	
			l∥ ↓	Information
				completed.
Signs/Symptoms:		*	╢╶╴	compretedi
Clinical Information:		*	-	
			Ť.	
NPO 3 Hours Prior to Exam				
			-	
	ncel Help	Prev Next	μ	
Ok Ca	ncel Help		h	
+ NURSING (2)		Submit		
	der Document	Sign Patient List		

Radiology Orders Common Diagnostic Img Exams Short Set

Use "Common Diagnostic Img Exams" short order set to more easily find radiology exams.

🔟 OE.SYH (NEMEDTECHB/TEST.5.64.MIS/15/SYH) - Bagchi,Sam	_ <u> </u>
Review Patient's Orders Sun, Sep 11	× 🗸
CPOE, SEPTEMBER - 25/F ADM IN	W14N 1406/01 🗙
	165/W61000002164 ?
Allergies/ADRs: Acetaminophen (From Tylenol)	
Process Orderset details	
Previous Set Next Set	Add More
Previous Page Page of Next Page	
	Edit Multiple Save As Set
- Common Diagnostic Ing Exams	
- + Radiology (0/13)	₩_
□ + XR ABDOMEN 1 VIEW 09/11 □ + XR ABDOMEN 2 VIEWS 09/11	
\square + XR ANKLE 3 VIEWS 09/11	1
\square + XR CHEST PORTABLE 09/11	
\square + XR CHEST 1 VIEW 09/11	
\square + XR CHEST 2 VIEWS 09/11	
+ XR CHEST POST PROCEDURE 1 VIEW 09/11	
□ + XR CHEST POST PROCEDURE 2 VIEW 09/11	
□ + XR FOOT 3 VIEWS 09/11	0
□ + XR HIP 2 VIEWS 09/11	
□ + XR KNEE 2 VIEWS 09/11	
□ + XR PELVIS 09/11	
+ XR SHOULDER 2 VIEWS 09/11	
- + Fluoroscopy (0/5)	
□ + FLU ERCP 09/11	/ ·
Done Cancel	



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.

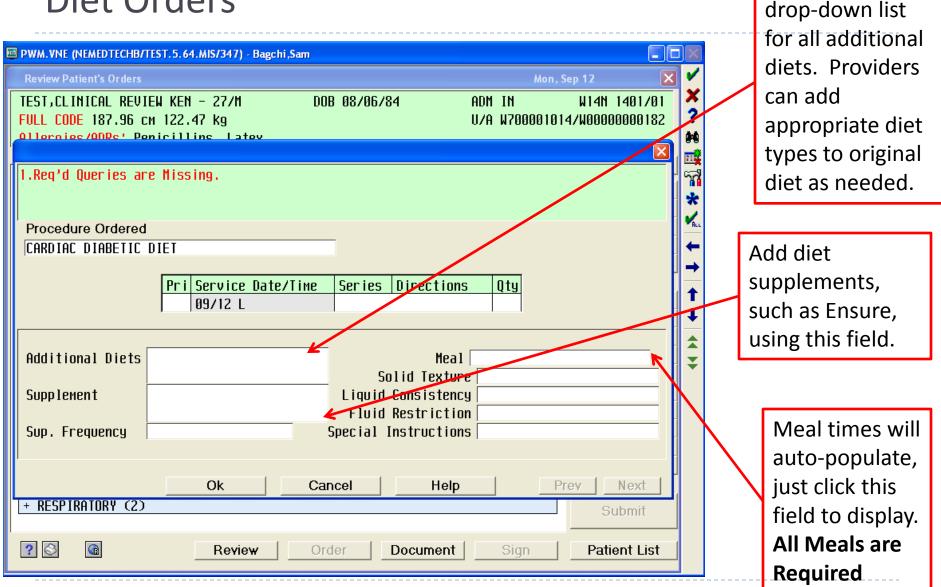
Diet Orders

Search for diet. Choose the primary diet.

Review Patient's Orders		Fri, Sep 9
TEST,TYPEAND SCREEN - 53/M 157.48 cm 61.235 kg Allernies/ADRs: No Known Allernies	ADM IN U/A	W235_2309/01 W800000105/W61000001513
Any Order Lookup		
Search on: DIET		Go to Favorites Add to Favorites
Order Description	Category	
ADA DIABETIC DIET	DIETARY SUH	
BRAT DIET CARDIAC DIABETIC DIET	DIETARY SVH Dietary Svh	
CARDIAC DIET	DIETHRY SVH DIETARY SVH	
CLEAR LIQUID DIET	DIETARY SVH	
FULL LIQUIDS DIET	DIETARY SVH	
GI SOFT/BLAND DIET	DIETARY SVH	
GLUTEN FREE DIET	DIETARY SVH	
HIGH FIBER DIET	DIETARY SVH	
HIGH POTASSIUM DIET	DIETARY SVH	
HIGH PROTEIN/HIGH CALORIE DIET	DIETARY SVH	
	DIETARY SVH	
	DIETARY SVH	
More		
Select	Done Help	1

Click on Req to add details to the diet

🕮 OE.SVH (NEMEDTECHB/TEST.5.64.MIS/44/SVH) - Lotte	rhand,Emily M	
Review Patient's Orders		Fri, Sep 9 🛛 🗙 🖌
TEST,TYPEAND SCREEN - 53/M 157.48 cm 61.235 kg 011ergies/00Ps: No Known 011ergies	ADM IN U/A I	W235 2309/01 W800000105/W61000001513
Preview/Edit		
1.Req'd Queries are Missing.	Add More Clear Unchecked	Add to Favorites 3
Orders ☑ ADA DIABETIC DIET (WDIET)	Pri Start/Service Series D 09/09 Dinner	lirections Qty Details Req →
		↑ ↓
		**
Done	Cancel Help	



Click F9 for the

Diet Orders Additional Diets

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

I OE.SVH (NEMEDTECHB/TES	.5.64.MIS/44/SVH) - Lotterhand,E	nily M	
Review Patient's Orders			Fri, Sep 9 🛛 🗙
TEST, TYPEAND SCREEN 157.48 cm 61.235 kg 0110ccies /000c ' No		ADM IN U/A	W235_2309/01 W800000105/W61000001513
Preview/Edit			X
1.Req'd Queries are	1is Diets List Lookup		Add to Favorites
	Select		Save as Set
	Mnemonic Res	ponses	
Procedure Ordered ADA DIABETIC DIET Additional Diets Supplement	2 CD Card 3 GF G lur 4 HCAL H igi 5 HF H igi 6 HIK H igi 7 K Kosi 8 LAC Lac	liac Diet liac Diabetic Diet en Free Diet Protein/High Calorie Fiber Potassium Diet er Diet cose Free Diet Cholesterol(300mg)	*
Sup. Frequency	10 LOFAT LOW 11 LOFIB LOW 12 LOK LOW 13 LOPH LOW 14 LOPR LOW	Fat Diet Fiber Diet Potassium Diet Phosphorus Diet Protein Diet Tyramine Diet	Prev Next

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

Diet Orders Supplements

Choose from the list of supplements

OE.SVH (NEMEDTECHB/TEST.5.6	4.MIS/44/SVH) - Lotter	hand,Emily M		
Review Patient's Orders TEST, TYPEAND SCREEN - 157.48 CM 61.235 Kg 011ecolog (ODRs' No Kno		ADM IN U/A	Fri, Sep 9 X W235 2309/01 W800000105/W61000001513	× ?
Preview/Edit	Nutritional Supple	ments Lookup 🛛 🗙	Add to Favorites	1 1 1
	Select Mnemonic	Responses	Save as Set	* /* +
Procedure Ordered ADA DIABETIC DIET	2 EN 3 ENC 4 ENP 5 G	Ensure Ensure Clinical Strength Ensure Pudding Glucerna		↑ ↓ ★
Additional Diets Supplement Sup. Frequency	6 J 7 M 8 MNS 9 N 10 P	Juven Mighty Shakes Mighty Shakes No Sugar Nepro Promod Liquid Protein	* 	₹
			Prev Next	
	<end list<="" of="" td=""><td>·</td><td></td><td></td></end>	·		

- 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

🖼 OE.SVH (NEMEDTECHB/TEST.5.64.MIS/243/SVH) - Lotterhand,Emily M		
Review Patient's Orders	Wed, Sep 14 🛛 🗙 🗸	
TEST,CPOE KEN - 27/M ADM I	N W24N 2403/01 🎽	
DO NOT RESUSCITATE 302.26 cm 145.603 kg	U/A W700001024/W0000000281 ?	
011ornios/ONDs: No Known Ollornios Preview/Edit		
1.Req'd Queries are Missing.	<u> </u>	
	Add MoreAdd to Favorites%Clear UncheckedSave as Set*	
Enter/Edit Responses : NUTRIT	IONAL SUPPLEMENTS	
Procedure Ordered		
NUTRITIONAL SUPPLEMENTS	1	
_	A	
Add to the Primary Diet 🀅		
Supplement	* Special Instructions	
Diet Frequency	× .	
Ok Cancel	Help Prev Next	
Done Cancel	Help	

Diet Orders Meals, Solid Texture, Liquid Consistency and Fluid Restriction

C OE.SVH (NEMEDTECHB/TEST.5.64.MIS/44/SVH) - Lotterhand,Emily M	Add Solid Texture and Liquid Consistency—per SLP or if recommended prior to admission
Item Int Item Int <td< td=""><td>Solid Texture Lookup Select Mnemonic Responses 1 DG 2 DP Dysphag ia Ground/Ground 2 DP Dysphag ia Select Select Select Mnemonic Responses 1 H Honey 2 N Nectar 3 I</td></td<>	Solid Texture Lookup Select Mnemonic Responses 1 DG 2 DP Dysphag ia Ground/Ground 2 DP Dysphag ia Select Select Select Mnemonic Responses 1 H Honey 2 N Nectar 3 I
Ok Cancel Help Prev Next Choose the meal for the patient to start eatingREQUIRED	Fluid Restriction Lookup X Select

Diet Orders Additional Info and Hints

- 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 order 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

OE.SVH (NEMEDTECHB/TEST.5.64.MIS/243/SVH) - Lotterhand,Emily M				
Review Patient's Orders	Wed, Sep 14 🛛 🗙			
TEST, CPOE KEN - 27/M ADM DO NOT RESUSCITATE 302.26 cm 145.603 kg Ollernies /ODR: No Known Allernies Preview/Edit	IN W24N 2403/01 U/A W700001024/W0000000281 ×			
1.Req'd Queries are Missing.	Add More Add to Favorites Clear Unchecked Save as Set			
Enter/Edit Responses : NOTH Procedure Ordered NOTHING BY MOUTH DIET	IING BY MOUTH DIET			
Add to the Primary Diet * Special Instructions NPO Start Date * * Start Time * NPO Stop Date Stop Time *				
Ok Cancel	Help Prev Next			

- Always include date/start time
- NPO for a test or surgery...
 - Add to additional diet
 - Include a stop time
- Do <u>not</u> add a stop time if unsure how long the test will be

Diet Orders Tube Feeding/NPO -or- Plus PO

OE.SVH (NEMEDTECHB/TEST.5.64.MIS Review Patient's Orders TEST,CPDE KEN - 27/H DO NOT RESUSCITATE 302.26 Ollocoles /ODBe' No Known O Preview/Edit I.Req'd Queries are Missing	Wed, Sep 14 X ADM IN W24N 2403/01 IM 145.603 kg U/A W700001024/W00000000281 Uprojes X	0
Procedure Ordered TUBE FEEDINGS/NPD	Image: Contract of the second seco	1
Type Start Rate *Hl Q Advance Rate Hl Q Goal Rate Hl Q Route	TEST, CPOE KEN - 27/M ADM IN W24N 2403/01 D0 NOT RESUSCITATE 302.26 cn 145.603 kg U/A W700001024/W00000000281 011ergies /00Dec' Ng W11ergies W W700001024/W00000000281 011ergies /00Dec' Ng W11ergies W Preview/Edit X X Add More Add to Favorites Clear Unchecked Save as Set X	×?****
Done	Enter/Edit Responses : TUBE FEEDING PLUS PO Procedure Ordered TUBE FEEDING PLUS PO Add to the Prinary Diet * Route Type * Additives Start Rate **1 Q hrs Frequency	
	Goal Rate H1 Q hrs Special Instructions Ok Cancel Help Prev Done Cancel Help	

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

Of.SVH (NEMEDTECHD/TEST.5.64.MIS/243/SVH) - Lotterhand,Emily M Review Patient's Orders Wed, Sep 14 TEST, CPDE KEN - 27/M ADM IN Wed, Sep 14 VIA W7000001024/W00000000281 OLlernics /ODDe + No Known Ollornice Preview/Edit I.Req'd Queries are Missing. Add More Add to Favorites Save as Set Y<	Mnemonic Responses formula u 1 6 Glucerna 1.2 Can/Hl Query 2 J1.2 Jevity 1.2 Cal/Hl Query 3 J1.5 Jevity 1.5 Cal/Hl Choco 4 N Additives Lookup Choco 5 0 Select Choco 6 01.2 Mnemonic Responses 8 P Mnemonic Responses	ne correct inder Type ose the ect additive eded Choose the
Ok Cancel Help Prev Next Done Cancel Help	1BBolus2C12Continuous 12h3C24Continuous 24h	correct frequency
Free text: Start Rate, Advance Rate, Goal Rate and Route. Important information for nutrition and nursing.	End of lis	L
102	<end list="" of=""></end>	

Diet Orders Tube Feeding Plus PO

Add to Primary Diet defaults to "Y" Follow the same directions as TF/NPO

OE.SVH (NEMEDTECHB/TEST. 5. 64. MIS/243/SVH) - Lotterhand, Emily M	
Review Patient's Orders Wed, Sep 14	3 🗸
TEST,CPOE KEN 27/M ADM IN W24N 2403/01 D0 NOT RESUSCITATE 302.26 cm 145.603 kg U/A W700001024/W00000000281 011ergies M0Rs1 Ng Known 011ergies V/A V/A	2 2 14
Preview/Edit	3 式
1.Req'd Queries are Missing. Add More Add to Favorites Clear Unchecked Save as Set	*
	ALL
Enter/Edit Responses : TUBE FEEDING PLUS PO	- ←
	→
Procedure Ordered	I I↑
TUBE FEEDING PLUS PO	lli
Add to the Primary Diet 🕪 Route	
Type * Additives	I
Start Rate*m1 Q*hrs	1
Advance Rate M1 Q hrs Frequency	1
Goal Rate MIQ hrs Special Instructions	
Ok Cancel Help Prev Next	
	4
Done Cancel Help	

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



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

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 cosignature 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

PWM. VNE (NEMEDTECHB/TEST. 5. 64. MIS/449) - TEST, POM		
Provider Workload Management Main Menu	🛛 🖌 2. Click	"Sign" button
	×	0
	PWM.VNE (NEMEDTECHB/TEST. 5. 64. MIS/244) - Bagchi,Sam	
	Process Workload Tasks - Bagchi,Sam	Tue, Jun 26 🛛 🗸 🗸
CPOE Sign Orders Classic Meditech		×
(PCI)	Physician Care Manager	?
		H
	Priority 1 My Tasks All Tasks	<u> </u>
Reconciliation Discharge Report Medication List	CONSULTS RESULTS ADT	
		/
	Prev Page Next Page Reset	←
		Covering List
	Saint Vincent Hospital	
	Date/Time Patient Name Categor 06/25 1403 Test, Jon ED Departure	
	06/25 1402 Test, Jon ED Admission	
	06/25 1149 Test, New Nebs Resp Admission Not	
	06/21 1539 Svh,Psych Discharge Not	ice 1
	06/21 1539 Svh,Psych Discharge Not	
	06/21 1538 Psych,Svh Discharge Not	
	06/21 1538 Psych,Svh1 Discharge Not 06/21 1538 Psych,Svh1 Discharge Not	
	06/21 1538 Psych, Svh Discharge Not	
	06/21 1538 Psych,Ot Discharge Not	
	06/21 1533 Rxm,Readmit Discharge Not	
	06/21 1520 Vig,Ali4 Discharge Not	ice Preferences
	? 🖸 🖨 🏹 Review Order Do	ocume <u>n</u> t <u>Sign</u>

Co-Signing Orders Signing Telephone and Verbal Orders

3. Click "Orders" at the top of the screen to view telephone/verbal orders only4. Check off order(s) you wish to sign then push Submit 5. The order detail is displayed6. Push Sign to co-sign the order

PWM. VNE (NEMEDTECHB/TEST. 5.64. MIS/244) - Bagchi,Sam		🖻 PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/244) - Bagchi,Sam
Unsigned Items List - Bagchi,Sam 1 Marked (of 197)	Tue, Jun 26 🛛 🔀 🖌	Item Detail - MEDICATIONS (WPHA) Active
Physician Care Manager		TEST,BILLION1 28/М DOB 09/06/83 ADM N W14N 1408/01 X FC- FULL CODE 187.96 CM 95.254 Kg U/A W800000387/W61000015059 ? Allergies/ADRs: Heparin Agents, Peanut, Acetaminophen (From Tylenol), Fentanyl #
All Orders Reports Forms	7	Recent Edits 😭
Prev Page Next Page	Tasks *	05/31/12 1038 - ADMIN CRITERION ENTERED by TESTPOM MNEMONIC: ABXINDIC ANTIMICROBIAL INDICATIONS
Date/Time Patient Name Category	(÷	DISPLAY NAME:
05/31 1038 Test,Billion1 MEDICATIONS (WPHA) Active Colace 100 MG PO BID Ordering Provider - TESTPOM	7	TYPE: CDS FROM:
✓ 05/31 1037 Test,Billion1 MEDICATIONS (WPHA) Active	1	CDS: PHA.ABXINDIC
Cipro 500 MG PO BID Ordering Provider - TESTPOM	Find Patient	↓ ↓
05/30 1700 Test, Michele12 MEDICATIONS (WPHA) D/C	View Detail	
Effexor 37.5 MG PO BID Stop Date: 06/08 05/12 0700 Test,Prai CBC AND 5 PART DIFFERENTIAL (WLAB)	Submit	Indication (F9 lookup or free text)
Active Ordering Provider - TESTPOM		TO:
05/11 Duany,Test PACEMAKER CARE (PAT.CARE) Active 🦊	Other Provider	CDS: PHA.ABXINDIC
05/10 Duany,Test ACE BANDAGE (WNUR) Active	Reject	
Ordering Provider - TESTPOM 05/10 Test,Prai ACE BANDAGE (WNUR) Active		Indication (F9 lookup or free text) Bact Meningitis-Listeria
05/03 1730 Test, Myra MEDICATIONS (WPHA) Active		05/31/12 1038 - POM ORDER by TESTPOM
MSIR 15 MG PO Q3HPRN PRN	Desferre	Order Dr: TEST,POM Order Source: POM SOURCE
	Preferences	More
Review Order Document Sign		Unqueue Previous Next Edit Image Sign
<u>Keview</u> <u>Uraer</u> <u>Document</u> <u>Sign</u>		Unqueue Previous Next Edit Image Sign

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

🔟 OE.SVH (NEMEDTECHB/TEST.5.64.MIS/517/SVH) - T	TEST,POM					×
Review Patient's Orders				Tue	, Jun 26 🛛 🛛 🔀	1
TEST,MICHELE12 - 23/F	ADM I	N			W22S 2210/02	×
5 ft 10 in 72.575 kg			U/A W800	00005	44/W61000021347	?
Allergies/ADRs: No Known Allergies						8
					Allergies	
Current	All Session					ฑ
	36331011				Renew/Reneat I	*
- Category Orders Pi	ri Date/Time	Status	Stop	My	Hold Resume	ALL
- WAITING ON APPROVAL (1)					DC	5
Docusate Cap (Colace Cap)	06/26 1700	unvNew				-
PO 50 MG BID					Approve	1
- MEDICATIONS (7)					Order Sets	2
LORAzepam Tab (AtiVAN Tab)	06/26 1100	Active		*	Orders	+
タPO *PROTOCOL* Q2HPRN					Meds/Fluids	*
PRN PER MODIFIED CIWA PROTOCOL					Save as Set	Ŧ
Aspirin Supp	06/20 0900	Active		*	Notifications	
PR 300 MG DAILY					Cont from AMB	
ALPRAzolam Tab (XaNAX Tab)	06/19 1300	Active		×	Reconcile Meds	
PO 0.25 MG Q8H					Transfer	
Last Admin: 06/19/12 1159					Discharge Preferences	
KCL Packet (Klor-Con Packet)	06/12 0830	UnvPHA	06/12 0831	*	Preferences	
PO 20 MEQ ONE				\square		
Nadolol Tab (Corgard Tab)	06/10 0900	Active		*	Submit	
∽PO 40 MG DAILY					•	
? 🛇 🕜 Review	Order	Docume	ent Sigr	ı	Patient List	

- 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.

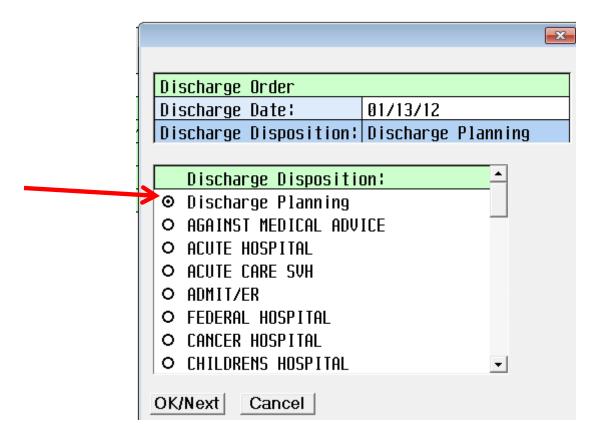
Discharge Process

PWM.VNE (NEMEDTECHB/TEST. 5. 64. MIS/189) - TESTRXM, TESTRXM		
Clinical Review		
MED,REC - 56/F ADM IN FC- FULL CODE U/A W800000 Allergies/ADRs: No Known Allergies	W335-330 0498/W6100001	
	Pt Sum	PWM. VNE (NEMEDTECHB/TEST. 5.64.MIS/189) - TESTRXM, TESTRXM
Active Discontinued All	Special Daily R	Review Patient's Orders Thu, Jan 5
Previous Page Next Page	Order H	MED,REC - 56/F ADM IN W33S 3306/02 FC- FULL CODE U/A W800000498/W61000016842 Allergies/ADRs: No Known Allergies
Medication Dose Sig/Sch Start Date Status Last Admin/ Generic Crade) Route Stop Date Dose Admin	Vital S	▲ ▲ Allergies
Sodium Chloride 1000 м1 .Q10H Jan 05,12 10:00 (NS) IV Jan 06,12 09:59	LAI Microbi	Current All Session View/Change Renew/Repeat
Azithronycin 250 м1 Q24H Jan 05,12 10:00 CKD (Zithronax) IV IV </td <td>Blood I Patho</td> <td>- <u>Category</u> <u>Orders</u> Pri <u>Date/Time</u> <u>Status</u> <u>Stop</u> <u>My</u> <u>Hold</u> <u>Resume</u> - MEDICATIONS (8)</td>	Blood I Patho	- <u>Category</u> <u>Orders</u> Pri <u>Date/Time</u> <u>Status</u> <u>Stop</u> <u>My</u> <u>Hold</u> <u>Resume</u> - MEDICATIONS (8)
Сагvedilo1 6.25 мg Q12H Jan 05,12 21:00 СКD (Согед) РО РО	Medica Imag	Аzithronycin Inj (Zithronax 500 MG 01/05 1000 Аctive * Undo
Siнvastatin 20 мg DAILY17 Jan 05,12 17:00 СКD (Zocor) PO РО	Other Ro Notes H	IV Q24H 250 MLS/HR Order Sets Heparin 5000 UNIT/0.5ML Inj 01/05 1300 Active *
Метосторгані 10 мд Q6HPR Jan 05,12 10:00 СКD (Reglan) РО РО	Assess Other I	SQ 5000 UNIT Q8H Meds/Fluids Aluminum H0/Mag H0 (MOM) Susp (Mil 01/05 1000 Active *
Magnesium Hy 30 м1 BIDPR Jan 05,12 10:00 СКD (Мом) РО РО	More	PO 30 ML BIDPRN PRN CONSTIPATION
	✓ Other \	Metoclopravide Tab 01/05 1000 Active * Reconcile Meds PO 10 MG 06HPRN 01/05 1000 Active * Transfer
PCI Order Document Sign	Retu	PRN NAUSEA/VONITING Discharge Acetaminophen Tab (Tylenol Tab) 01/05 1000 Active * P0 650 MG Q4HPRN * *
		PRN TEMPERATURE Submit NS 1000 ML 01/05 1000 Active 01/05/959 ★ ✓
First slick on order		Review Order Document Sign Return
First click on order	L	
		Then click on Discharge

Select the expected Discharge Date then click OK/Next

PWM.VNE (NEMEDTECHB/TEST.	5.64.MIS/189) - TESTRXM,TESTRXM			
Review Patient's Orders		Thi	u, Jan 5 🛛 🗙	~
MED,REC - 56/F FC- FULL CODE Allergies/ADRs: No Kno		3000004	W33S_3306702 1987W61000016842	
	X		Allergies View/Change Renew/Repeat	۱ ۳
- Category - MEDICATIONS (8)	Discharge Order Discharge Date:	My	Hold Resume DC Undo	
Azithromycin Inj (Zit ターPremixed at 500 f IV Q24H 250 MLS/HR	Discharge Disposition: 01/05/12	*	Order Sets	
Heparin 5000 UNIT/0.5 SQ 5000 UNIT Q8H	January 2012 Sun Mon Tue Wed Thu Fri Sat	*	Orders Meds/Fluids Saye as Set	-
Aluminum HO/Mag HO C PO 30 ML BIDPRN PRN CONSTIPATION	1 2 3 4 5 6 7 Today 8 9 10 11 12 13 14 < Month > 15 16 17 18 19 20 21 < Year	-	Notifications Cont from AMB	
Metoclopramide Tab (F 오PO 10 MG Q6HPRN	13 16 11 16 13 26 21 22 23 24 25 26 27 28 29 30 31 - - -	*	Reconcile Meds Transfer Discharge	
PRN NAUSEA/VOMITING Acetaminophen Tab (Ty PU 650 NG yanrki	OK/Next Cancel	*	Preferences	
PRN TEMPERATURE	01/05 1000 Active 01/06 095	9 *	Submit	
? 🛇 🕼	Review Order Document S	ign	Return	

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 Reconciling Medications

Medications

Click on the gray box with a pencil adjacent to Prescriptions

PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/48) - TESTRXM,T	TESTRXM	
Review Patient's Orders	Tue, Jan 24	
MED,REC - 56/F	ADM IN	W335 3306/02
FC- FULL CODE)498/W61000016842
Allergies/ADRs: No Known Allergies		
		Allergies
Discharge Date: 01/13/12		View/Change
Discharge Disposition: [Renew/Repea
		Hold Resum
Di	ischarge Plan	DC
Prescriptions (5)	Origin: Plan	Undo
Orders	Origin: Plan	
Referrals		Order Sets
+ 🖉 Reports (2)	Author Status	
		Meds/Fluids
		Save as Set
		Notifications Cont from AM
		Reconcile Me
		Transfer
		Discharge
		Preferences
		Outra 1
		Submit
2 🖸 🕜 Done	Cancel	Return

Discharge Process PAML Medications

 Pre-Admission Medication List displays all <u>continued</u> and <u>suspended</u> medications.
 <u>Discontinued</u> PAML medications will automatically appear under Discharge Plan as "Stopped".

•Cancelled medications will not appear anywhere on this screen.

PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/119) - TESTRXM,TESTRXM		
Process Discharge Prescriptions		Thu, Jan 5 🛛 🖌
MED,REC - 56/F FC- FULL CODE Allergies/ADRs: No Known Allergies		W335 Unit No:W800000498
No conflict checking is provided for [] medications.		Order <u>S</u> ets
		≜ *
- 🖉 Pre-Admission Medication List (4)		itop Renew Details
CARVEDILOL* (Coreg*) 3.125 MG TAB		
3.125 MG PO Q12H	01/04/12	
LISINOPRIL* (Zestril*) 10 MG TAB	Reported 🔲 🔲	□ □ Avail →
10 MG PO DAILY	01/04/12	
ROSUVASTATIN (CRESTOR) 5 MG TABLET	Reported 🗖 🛛 🗖	🗆 🗆 🛛 Avail 🔤
5 MG PO DAILY	01/04/12	•
ASPIRIN* (BAYER ASPIRIN*) 325 MG TABLET	Reported 🗖 🛛 🗖	🗖 🗖 Avail 🔺
325 MG PO DAILY	01/04/12	
- Discharge Plan (1)	Cont Sto	p Renew Details 🚽
TAMSULOSIN HCL* (Flomax*) 0.4 MG CAP	Reported 🔲	🔲 Avail
0.4 MG PO DAILY	Stopped	
- Current Inpatient Medications (8)		s Ref NS Details
ACETAMINOPHEN*(TYLENOL*) 325 MG TAB		0 Req'd
ССО МС ОЛ ЛИООН ООН		

PAML Medications

Button	Discharge Result
Can	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
Cont	This will show up as "Continue Taking" in the discharge paperwork
Stop	This will show up as "Stop taking" in the discharge paperwork
Renew	This will show up as "Continue Taking" in the discharge paperwork and a prescription will be generated

PWM.VNE (NEMEDTECHB/TEST. 5. 64.MIS/119) - TESTRXM, TESTRXM		
Process Discharge Prescriptions	Thu, Jan 5 🔀	~
MED,REC - 56/F	W33S	X
FC- FULL CODE	Unit No:W800000498	?
Allergies/ADRs: No Known Allergies		Ħ
No conflict checking is provided for [] medications.	Order <u>S</u> ets	
		ର୍ଦ୍ଧ
	_	*
– 🖉 Pre-Admission Medication List (4)	Can Cont Stop Renew Details	
CARVEDILOL* (Coreg*) 3.125 MG TAB	Reported 🛄 🛄 🛄 🔲 Avail	- ALI
3.125 MG PO Q12H	01/04/12	+

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"

PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/119) - TESTRXM,TESTRXM		\times
Process Discharge Prescriptions	Thu, Jan 5 🔀	1
MED,REC - 56/F	W33S	×
FC- FULL CODE	Unit No:W800000498	?
Allergies/ADRs: No Known Allergies		M
No conflict checking is provided for L1 medications Modify Prescription		
LISINOPRIL* (Zestril*) 10 MG TAB	Remove Eavorite I	7
10 MG PO DAILY #30 0 Refills	Monograph	*
for high blood pressure	Replace/Change	ALL
	Daily Dosing	+
	MAR	+
	Urit Refills NS	+
10 MG Y PO Y DAILY 30 Y Y		i
Instructions for high blood pressure Diagnosis		-
Instructions for high blood pressure Diagnosis Comments Date T		1
		Ŧ
Ordering Provider TESTRXM Ordering Location W33S		
Done Cancel		

Inpatient Medications

- Click on the <u>Conv</u> box adjacent to any Current Inpatient Medications that the patient should take upon discharge <u>that did not appear in the PAML</u>
 - This will generate a prescription
 - Choose a Qty and Refills
 - Click on NS if you want "no substitution"

Pre-Admission Medication List (0)	C	an Co	nt Sta	ip Re	nei	I Details
+ Discharge Plan (5)		Sont	Stop	Ren	Iew	Details
- Current Inpatient Medications (7)	Conv	l ty	Days	Ref	NS	Details
ACETAMINOPHEN*(TYLENOL*) 325 MG TAB				0		Req'd
650 MG PO Q4HPRN PRN						
PRN						
AZITHROMYCIN 500 MG in NS (Zithromax) 250 ML						View
Dose: 500 MG						
Preмixed at 500 MG/250 ML						
Q24H 250 MLS/HR						
CARVEDILOL*(Coreg*) 6.25 MG TAB				0		Req'd
6.25 MG PO Q12H						
HEPARIN SODIUM, PORCINE/PF(HEPARIN SOD 5,000 UNIT/0.5 ML)				0		Req'd
5000 UNIT SQ Q8H						

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.

PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/439) - TESTRXM,TESTRXM			x		
Process Discharge Prescriptions T	ĥu, Jan 5	X	Ì 🗸 🛛		
MED,REC - 56/F FC- FULL CODE Allergies/ADRs: No Known Allergies	Unit No	W33S) : W800000498	× ?	1.	Click to stop the PAML
No conflict checking is provided for [] medications.		Order <u>S</u> ets			med.
		_	77 *	2.	Choose Dose/Frequency
		u Details	2		Changed
CARVEDILOL* (Coreg*)		Avail	ALL		U
3.125 MG PO Q12H		0		3.	Choose to Conv a
LISINOPRIL* (Zestril*) Adverse Effect/Intoleranc		Ava11	→		Current Innations Mad
10 MG PO DAILY Alternate Med Chosen		Avail	1		Current Inpatient Med
ROSUVASTATIN (CRESTOR: Dose/Frequency Changed 5 MG PO DAILY Duplicate		HVAII	i	Δ	Or enter a New
ASPIRIN* (BAYER ASPIRI Med No Longer Indicated		Avail		т.	
325 MG PO DAILY Other Reason to DC		nvuri			Prescription
+ Discharge Plar Per Med Rec Form	op Renew	Details	∓		[
- Current Inpati Pt Preference to Stop Med	iys Ref NS				
ACETAMINOPHEN*(TYLENOL <cancel></cancel>	0	Req'd			
650 MG PO Q4HPRN PRN					

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.

Process Discharge Prescriptions		Thu, Jan 5			×
MED,REC - 56/F FC- FULL CODE			Unit	W33 No : W8000004	
Allergies/ADRs; No Known Allergies No conflict checking is provided for [] medications.				Order <u>S</u> ets	6
Dose: 500 MG Premixed at 500 MG/250 ML 024H 250 MLS/HR					-
CARVEDILOL*(Coreg*) 6.25 MG TAB 6.25 MG PO Q12H			Ø	Req'd	
Heparin Sodium,Porcine(Heparin) 5000 UNIT/0.5 ML SOLN 5000 UNIT SQ Q8H			0	Req'd	
METOCLOPRAMIDE HCL*(Reglan*) 10 MG TAB 10 MG PO Q6HPRN PRN PRN			0	Req'd	
MILK OF MAGNESIA×(Mom*) 30 ML SUSP 30 ML PO BIDPRN PRN PRN			0	Req'd	
SODIUM CHLORIDE 0.9% (NS) 1000 ML .q10h 100 MLS/HR PRN				View	
Sinvastatin(Zocor) 20 MG TAB 20 MG PO DAILY17			0	Req'd	
New Prescriptions (0)				Details	- -
View Done Ca	ncel		Help		



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

Discharge Instructions

•Click on the gray box with a pencil adjacent to Reports

MED,REC FC- FULL	. CODE	ADM IN		'A W8000004'	₩335_3306/02 ₩335_3306/02 98/₩61000016842
Allergie	<mark>s/ADRs:</mark> No Known Allerg	ies			
					* Allergies
	Discharge Date: 01/05	5/12			View/Change
	Discharge Disposition		וחווח		Renew/Repeat
		IT HONE WITH HITH	JVIIL		Hold Resume
+		Discharge Plan			DC
+ 🖉	Prescriptions (1)		Origin: Plan		Undo
	Orders		Origin: Plan		
Ø	Referrals				Order Sets
	Reports		Author	Status	Orders
	-				Meds/Fluids
					Save as Set
					Notifications
					Cont from AMB
					Reconcile Meds
					Transfer
					Discharge
					Preferences
					Submit
? 🛇	G Dor	ne Cancel	-1		Return

Discharge Process Discharge Instructions

Select a discharge template then click OK

Review Patient's Orders		Thu,	Jan 5 🛛 🔁
MED DEC - 56/E	ODM IN	•	W335 3306/02
Templates		U/A W80000049	18/W61000016842
	Add to Favorites		
	Remove from Favorites		* Allergies
Cardio/Cerebrovascular Dischar			View/Change
Discharge Instructions			Renew/Repeat
			Hold Resume
			DC
		lan	Undo
		lan	
			Order Sets
		Status	Orders
			Meds/Fluids
			Save as Set
			Notifications
			Cont from AME
			Reconcile Med
			Transfer
			Discharge
			Preferences
			Submit
			Data
? ОК	Cancel		Return

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

👜 OE.SVH (NEMEDTECHB/TEST.	5.64.MIS/189/SVH) - TESTRXM,TESTRXM					
Document: Discharge Instru	Document: Discharge Instructions - MD DISCHARGE INSTRUCTIONS					
MED,REC - 56/F	ADM IN	W335 3306/02	X			
FC- FULL CODE	U/A W8000049	8/W61000016842	?			
		_	84			
Physician Med List	-	•				
			M			
	1) Discharge Progress Note		*			
-	PLEASE BRING THIS FORM TO YOUR NEXT DOCTOR APPOINTMENT		V.			
*Final Discharge			HLL			
Secondary Diagno			←			
*Final Progress N			 →			
*Condition on Dis						
Services						
∗Code Status			-			
Comfort Care For						
*Diet			Ŧ			
Activity Instruc						
Ambulation		Code Visit				

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

PWM.VNE (NEMEDTECHB/TEST.5	.64.MIS/439) - TESTRXM,TESTRXM				3
Document: Discharge Instructior	ns - MD DISCHARGE INSTRUCTIONS				1
MED,REC - 56/F		ADM	IN		×
FC- FULL CODE				U/A W800000498/W61000016842	?
					84
Physician Med List		-	ļļ	Final Discharge Diagnosis	пĝ
		_	Ι.	, M	าใ
	1) Discharge Progres.				*
-	PLEASE BRING THIS FO.				ALL
*Final Discharge					ALL
Secondary Diagno				· · · · · · · · · · · · · · · · · · ·	+
*Final Progress N				OK/Next OK Cancel	→
*Condition on Dis			*		
Services					Ţ
*Code Status					ŧ
Comfort Care For				OK/Next will bring you to the	•
*Diet				next query	Ĵ
Activity Instruc					•
Ambulation					
Ather Actvity In					

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

PWM.VNE (NEMEDTECHB/TEST.5	.64.MIS/439) - TESTRXM,TESTRXM						х
Document: Discharge Instructior	ns - MD DISCHARGE INSTRUCTIONS					x	~
MED,REC - 56/F	ADM	I١			W33S 33	806/02	×
FC- FULL CODE				U/A W800000	498/W610000	16842	?
		_					8
Physician Med List	-		_	Discharge Diagnosis			
			Commu	unity Acquired Pneumonia		*	5
	1) Discharge Progres						*
-	PLEASE BRING THIS FO						1 Rus
*Final Discharge							- ALL
Secondary Diagno						Ψ.	+
*Final Progress N			OK/Ne	ext OK Cancel			→
*Condition on Dis	condition						
Services							
*Code Status	FC- FULL CODE						•
Comfort Care For				Click OK when finis			
*Diet	Cardiac, Diabetic			Discharge Instruction	ons		Ŧ

Discharge Instructions

Click Submit

PWM.VNE (NEMEDTECHB/TEST.	5.64.MIS/439) - TESTRXM,TESTRXM		X
Document: Discharge Instructio	ns - MD DISCHARGE INSTRUCTIONS	×	
MED,REC - 56/F	ADM IN	W33S 3306/02	×
FC- FULL CODE	U/A W80000498	3/W61000016842	?
		_	64
Physician Med List	<u> </u>]	ПĻ
			~
*Final Discharge	Community Acquired	1	*
	DM Type II Poorly Control, GI Bleed->		
	testing progress note		K LL
*Condition on Dis	condition		←
Services			→
*Code Status	FC- FULL CODE		
Comfort Care For			1
*Diet	Cardiac, Diabetic		+
Activity Instruc			
Ambulation			.
Other Actvity In			
+	2) Wound & Line Care/Treatment	Code Visit	
_	3) Follow up Instructions	View Protocol	
Lab Tests		Add Section	
To have this (th		Normal	
*For Appointments	-Please Call Doctor Bagchi,Sam to make an appointme		
Other Appointments		Quick Save	
Test results pen		Submit	
	<u> </u>		
?		Deturn	
		Return	

Discharge Process Discharge Instructions

Click Draft or Signed

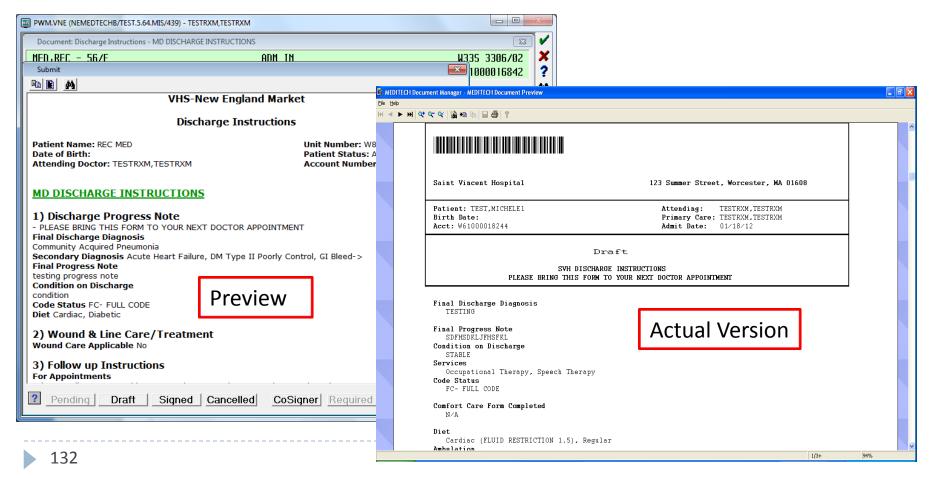
•Signed button will only be available if all *required** fields are populated

•Choose Signed if the Discharge Instructions are final

]	PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/439) - TESTRXM,TESTRXM		x
	Document: Discharge Instructions - MD DISCHARGE INSTRUCTIONS	X	~
		1335 3306/02	×
		1000016842	?
	VHS-New England Market		H
	Discharge Instructions		M
Draft should be	Patient Name: REC MED Unit Number: W800000498		*
Dialt should be	Date of Birth: Patient Status: ADM IN Attending Doctor: TESTRXM, TESTRXM Account Number: W61000016842		ALL
selected if:			 ←
•The report is	MD DISCHARGE INSTRUCTIONS		
•The report is	1) Discharge Progress Note		1
incomplete	- PLEASE BRING THIS FORM TO YOUR NEXT DOCTOR APPOINTMENT		Ŧ
•Edits are expected	Final Discharge Diagnosis Community Acquired Pneumonia		
[•] Eults are expected	Secondary Diagnosis Acute Heart Failure, DM Type II Poorly Control, GI Bleed-> Final Progress Note		 \$
•Final signature is	testing progress note	Code Visit	
expected by resident	Condition on Discharge condition	ew Protocol	
· · ·	Code Status FC- FULL CODE Diet Cardiac, Diabetic	dd Section	
or attending		Normal	
J	2) Wound & Line Care/Treatment Wound Care Applicable No		
	3) Follow up Instructions	Quick Save	
	For Appointments	Submit	
131	Pending Draft Signed Cancelled CoSigner Required Data Return	Return	

Discharge Instructions

•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 Instructions

Click Done if complete (even if in Draft status)

B PWM.VNE (NEMEDTECHB/TEST.5.64.MIS/439) - TESTRXM,TESTRXM	
Review Patient's Orders Thu, Jan 5	💌 🗸
MED,REC - 56/F ADM IN	W335 3306/02 🗙
FC- FULL CODE U/A W80000049	18/W61000016842 🛛 ?
Allergies/ADRs: No Known Allergies	24
	- * Allergies 📑
	View/Change
Discharge Date: 01/05/12	Renew/Repeat *
Discharge Disposition: HOME WITH APPROVAL	Hold Resume
- Discharge Plan	DC /
+ Prescriptions (1) Origin: Plan	Undo
Ørders Origin: Plan	
Referrals	Order Sets 🕇
- Reports (1) Author Status	Orders 🖡
Discharge Instructions TESTRXM, TESTRXM Signed	Meds/Fluids
	Save as Set 🏮
	Notifications
	Cont from AMB
	Reconcile Meds
	Transfer
	Discharge Preferences
	Preferences
	1
	Submit
Image: Second se	Return

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

	OE.SVH (NEMEDTECHB/TEST.5.64.MIS/444/SVH) - TESTRXM,TESTRXM	
	Review Patient's Orders Fri, Jan 13	× 🛛
	MED,REC - 56/F ADM IN W33 FC- FULL CODE U/A W800000498/W61 Allergies/ADRs: No Known Allergies	35 3306/02 × 1000016842 ?
		Allergies 📫
	Print Options	- michear
	Cat 🗆 Order	Resume 🖌
	- HEDICE 🗆 Prescription	
	Az i throf 🗖 Monograph	ndo 🗕 🔿
	🛛 🛇 Pret 🗆 Detail	
Unclick 🗖	<u> </u>	er Sets
Chenen	Hepar in 🗖 Patient Instructions	ders 🗸
	SQ 50 Continuity of Care Document Path:	s/Fluids
		as Set 🚽
	PO 30 F Print Printer	cations
	PRN CO 🗖 Print 🛛 Rx Printer 🔄	rom AMB
	Metocloc Pharmacy	cile Meds
	S PD 10	nsfer
	PRN NF OK Cancel	harge
		ererences

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

BOE.SVH (NEMEDTECHB/T	EST. 5. 64.MIS/386/SVH) - T	ESTRXM,TESTRXM	
Provider Workload Man	agement Main Menu		N N N N N N N N N N N N N N N N N N N
			× ? ?
CPOE	Sign Orders	Classic Meditech (PCI)	2010 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 101 - 10 77
<u>e</u> .			*
Reconciliation Medication List	Discharge Reports		← →
			† ↓
			*

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

OE.SVH (NEMEDTECHB/TEST.5.64.MIS/80/SVH) - TEST,POM	C.SVH (NEMEDTECHB/TEST.5.64.MIS/80/SVH) - TEST	T DOM		
	Patient Lookup By Name			
	Select 🗌			
	Name Accour	nt#Status	Date Location	Unit#
Print Discharge Instructions from RXM and NUR Patient TEST,MICHELE12	2 TEST, MICHELE 12 M61000 3 TEST, MICHELE 12 M61000 4 TEST, MICHELE .1. DONOTUSE M61000 5 TEST, MICHELE .1. DONOTUSE M61000 6 TEST, MICHELE .1. DONOTUSE M61000 7 TEST, MICHELE .1. DONOTUSE M61000 8 TEST, MICHELE .1. DONOTUSE M61000 9 TEST, MICHELE .2. DONOTUSE M61000	0018244 DIS IN 0021347 AOM IN 0018251 DIS IN 0018044 DIS IN 0017543 DIS IN 0016214 DIS IN 0016131 DIS IN 0016107 DIS IN 0016222 DIS IN 0015521 DIS IN	06/08/12 2116-01 06/08/12 2210-02 06/08/12 2116-02 06/08/12 2317-02 01/16/12 3619-01 01/12/12 21048-01 12/13/11 3502-02 12/12/11 35018-01 06/08/12 2199-97 12/29/11 1503-01	W800000543 W800000544 W80000544 W80000454 W80000454 W80000454 W800000454 W800000454 W800000454 W800000460 W800000460
	<end list="" of=""></end>			

Discharge Process Discharge Instructions – View Patient's Copy

Either Choose a printer to print the report or type "PREVIEW"

OE.SVH (NEMEDTECHB/TEST. 5.64. MIS/80/SVH) - TEST,POM	
	Saint Vincent Hospital 123 Summer Street, Worcester, MA 01608
Print Discharge Instructions from RXM and NUR Patient W1000002626	Saint Vincent Hospital 123 Summer Street, Worcester, MA UIBUS Patient: TEST.MICHELE12 Attending: TEST.POM Birth Date: Primary Care: TESTRXM.TESTRXM Acct: W61000021347 Admit Date: 06/08/12
Print on:	PLEASE BRING THIS FORM TO YOUR NEXT DOCTOR APPOINTMENT 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 have weight gain of more than 2 pounds in 2 days. Activity: Unless otherwise advised 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 Washance or fortune

Discharge Process Discharge Order

Once patient is ready to be discharged, click on the Orders button to place a Discharge Order

PWM.VNE (NEMEDTECHB/TEST	r.5.64.mis/444) - Testrxm,tes	STRXM				
Review Patient's Orders			Fri, Ja	an 13		
MED,REC - 56/F		ADM IN				W33S 3306/02
FC- FULL CODE				U/A W80	0000	498/W61000016842
Allergies/ADRs: No	Known Hilergies					
						Allergies
	Current A	LI Session				View/Change
		00001011]			Renew/Repeat
- Category	Orders Pr	i Date/Time	Status	Stop	My	Hold Resume
- MEDICATIONS (7)						DC
Azithromycin Inj (Z	ithromax 500 N	16 01/05 1000	Active		*	Undo
Premixed at 500			Renew			
IV Q24H 250 MLS/H						Order Sets
Heparin 5000 UNIT/O	.5ML Inj	01/05 1300	Active		*	Orders 4
SQ 5000 UNIT Q8H						Meds/Fluids
Aluminum HO/Mag HO	(MOM) Susp (Mil	. 01/05 1000	Active		*	Save as Set
PO 30 ML BIDPRN						Notifications
PRN CONSTIPATION						Cont from AMB
Metoclopramide Tab	(Reglan Tab)	01/05 1000	Active		×	Reconcile Meds
오PO 10 MG Q6HPRN						Transfer
PRN NAUSEA/VOMITI	NG					Discharge
Acetaminophen Tab (Tylenol Tab)	01/05 1000	Active		×	Preferences
PN 650 MG 04HPRN						

Discharge Process 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.

WM.VNE (NEMEDTECHB/TEST.5.64.MIS/444) - TESTRXM,TESTRXM	1			
Review Patient's Orders	Fri, Jan 13	PWM.VNE (NEMEDTECHB/TEST.5.64.MIS	/444) - TESTRXM.TESTRXM	
MED,REC - 56/F FC- FULL CODE	ADM IN U/A W80	Review Patient's Orders	Fri, Ja	
Allergies/ADRs: No Known Allergies Any Order Lookup		MED,REC - 56/F FC- FULL CODE	ADM IN	W33S 3306/02 × U/A W800000498/W61000016842 ?
Search on: discharge –	Preview/Edit Go Add	Allergies/ADRs: No Known 1.Reg'd Queries are Miss		●●● ● ● ● ●
Order Description	Category			*
Discharge Fax discharge paperwork Pre-discharge	DISCHARGE PATIENT CARE Laboratory		Service Date/Time Series Direction 01/13 *	ons Qty ↓ ↓
More Select	Done Help	+ ADMIT (4)	Ok Cancel He Review Order Documen	Submit



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

Go back into Discharge Routine and click on gray pencil beside Reports

		ient's Orders 1HOTEL – 59/M	DOB 03/05/52		Tue, Ja ADM	IN		TRAIN2 WT204/02 03/W61000017113
Alle	engie	es/ADRs: No Known f	Illergies					
								Allergies
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		•	sition: Discharge F	lanni	ng			Renew/Repeat
		. <u> </u>			-			Hold Resume
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?	~		Done Cano					Return

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

If you were NOT the author of the Draft, click Enter New

Date/Time Type Author Status Discharge Instructions Edit/Amend 01/24/12 0822 Discharge Instructions TESTRXM, TESTRXM Draft Prior Next Note Summary Code Visit Mine Mine	PWM.VNE (NEMEDTECH	IB/TEST.5.64.MIS/48) - TESTRXM,TESTRXM				x
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Choose a Template

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? OK			
ОК	Cancel		Return

Edit any necessary fields then click Submit and place order Draft or Signed Status

PWM.VNE (NEMEDTECHB/TEST.5	.64.MIS/48) - TESTRXM,TESTRXM		x			
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Wound #1 Type						
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Product/Treatmen		Submit				
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Cancelling Previous Discharge Instructions

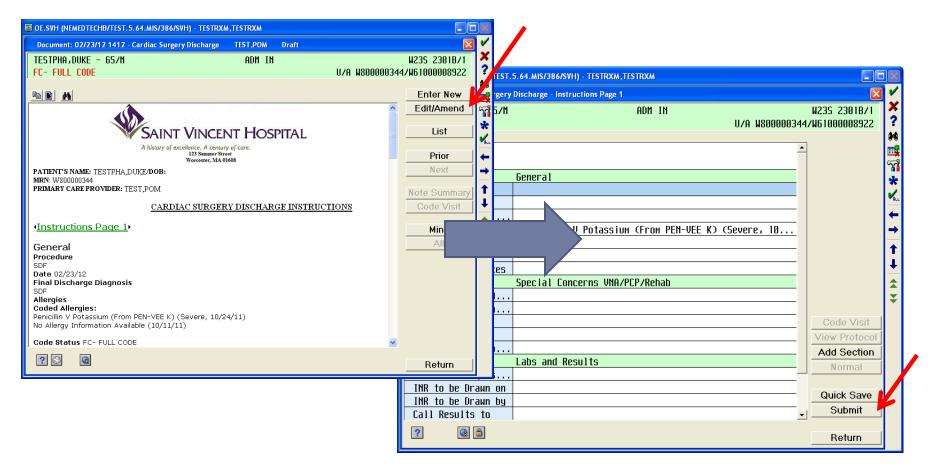
If you made an edit to another author's discharge instruction, you should cancel that person's draft version.

- 1. Go back into Discharge Routine and click on gray pencil beside Reports
- 2. Choose the Draft

(Image: Construction of the second							
ľ	Review Patient's Orders		OE.SVH (NEMEDTECHB/TI	EST. 5. 64.MIS/386/SVH) - TESTRXM,TE	STRXM			
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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

