SELF-GUIDED PRACTICE WORKBOOK [N52-A] CST Transformational Learning

WORKBOOK TITLE: Allied Health: Respiratory Therapy





TABLE OF CONTENTS

•	SELF-GUIDED PRACTICE WORKBOOK	4
•	Using Train Domain	5
•	PATIENT SCENARIO 1 – Patient List	6
	Activity 1.1 – Set Up a Location Patient List	7
	Activity 1.2 – Create a Custom Patient List	11
•	PATIENT SCENARIO 2 – Multi-Patient Task List	14
	Activity 2.1 – Set up your view of the Multi-Patient Task List	15
	Activity 2.2 – Review MPTL functionality	21
	Activity 2.3 – Review Patient Tasks	22
	Activity 2.4 – Document a Patient Task as Complete	24
•	PATIENT SCENARIO 3 – Patient Chart Overview	26
	Activity 3.1 – Review Patient Information	27
	Activity 3.2 – Review Results Using Results Review	30
	Activity 3.3 – Become familiar with the SPTL	33
•	PATIENT SCENARIO 4 – Interactive View and I&O	35
	Activity 4.1 – Navigate to Interactive View and I&O	36
	Activity 4.2 – Documenting in Interactive View and I&O	38
	Activity 4.3 – Change the Time Column	40
	Activity 4.4 – Document a Dynamic Group in iView	42
	Activity 4.5 – Modify, Unchart or Add a Comment in Interactive View	46
•	PATIENT SCENARIO 5 – PowerForms	51
	Activity 5.1 – Document in PowerForms through Tasks	52
	• Activity 5.2 – Opening and Documenting on PowerForms on an As Needed Basis	56
	Activity 5.3 – Viewing an Existing PowerForm	58
	Activity 5.4 – Modify an Existing PowerForm	59
	Activity 5.5 – Uncharting an Existing PowerForm	61
•	PATIENT SCENARIO 6 – Additional Charting	63
	Activity 6.1 – Document a Narrative Note	64
	Activity 6.2 – Unchart a Narrative Note	67
	Activity 6.3 – Review Document	69
•	PATIENT SCENARIO 7 – Medication Administration	70
	Activity 7.1 – Review the Medication Administration Record (MAR)	71
	2	107

Allied Health: Respiratory Therapy



	 Activity 7.2 – Administering Medication using the Medication Administration Wizard (MAW) and the Barcode Scanner 	74
•	PATIENT SCENARIO 8 – Orders	79
	Activity 8.1 – Review Orders Profile	80
	Activity 8.2 – Place an Order	82
	Activity 8.3 – Review Order Statuses and Details	88
	Activity 8.4 – Place a Verbal Order	89
	Activity 8.5 – Complete or Cancel/Discontinue an Order	92
	Activity 8.6 – Review Components of a PowerPlan	96
•	PATIENT SCENARIO 9 – CareCompass and CareAware Critical Care	97
	Activity 9.1 – Introduction to CareCompass	98
	Activity 9.2 – Introduction to CareAware Critical Care (iAware)	100
•	PATIENT SCENARIO 10 – End of Shift Activities	102
	Activity 10.1 – Documenting Informal Team Communication	103
	Activity 10.2 – Handoff Tool	105
	Activity 10.3 – Documenting Handoff in iView	106
	End Book One	107



***** SELF-GUIDED PRACTICE WORKBOOK

Duration	8 hours
Before getting started	 Sign the attendance roster (this will ensure you get paid to attend the session). Put your cell phones on silent mode
Session Expectations	This is a self-paced learning session.
	A 30 min break time will be provided. You can take this break at any time during the session
	The workbook provides a compilation of different scenarios that are applicable to your work setting
	Work through different learning activities at your own pace
Key Learning Review	At the end of the session, you will be required to complete a Key Learning Review
	This will involve completion of some specific activities that you have had an opportunity to practice through the scenarios



Using Train Domain

You will be using the Train domain to complete activities in this workbook. It has been designed to match the actual Clinical Information System (CIS) as closely as possible.

Please note:

- Scenarios and their activities demonstrate the CIS functionality not the actual workflow
- An attempt has been made to ensure scenarios are as clinically accurate as possible
- Some clinical scenario details have been simplified for training purposes
- Some screenshots may not be identical to what is seen on your screen and should be used for reference purposes only
- Follow all steps to be able to complete activities
- If you have trouble to follow the steps, immediately raise your hand for assistance to use classroom time efficiently
- Ask for assistance whenever needed



PATIENT SCENARIO 1 – Patient List

Learning Objectives

At the end of this Scenario, you will be able to:

Create a Location Patient List

- Create a Custom Patient List
- Add a Patient from a Location Patient List to a Custom Patient List

SCENARIO

You arrive on the unit and are eager to see which patients you will be caring for today. You begin by logging in and reviewing patients that are under your care for your shift.

As a Respiratory Therapist (RT) you will be completing the following activities:

Set-up a Location Patient List

Create a Custom Patient List

1



Activity 1.1 – Set Up a Location Patient List

Once you have logged into the system you will see the Multi-Patient Task List (MPTL).

Before you can use the MPTL you will need to set-up a **Patient List**. A **Patient List** is a view of all the patients that meet a common criterion chosen. For example, some of the possible types of lists include a location list, an assignment list, or a custom list.

At the start of your first shift (or when working in a new location), you will create a **Location Patient List** that will consist of all patients assigned to your unit.

- 1. Select the **Patient List** A from the **Toolbar** at the top of the screen.
- 2. The screen will be blank. To create a location list, click the List Maintenance icon
- 3. Within the Modify Patient Lists window, select New in the bottom right corner.



- 4. From the **Patient List Type** window select **Location**.
- 5. Click Next



Pi	Patient List Type Select a patient list type: Assignment Assignment (Ancillary) CareTeam Custom Provider Group Query Relationship Scheduled	6
	Back Net Finish Cancel	el

6. In the **Location Patient List** window, a location tree will be on the right hand side. Expand the list of locations by clicking on the **tiny plus** [+] sign next to **Locations**.

- R	Location Patient List	Image: Construction of the construc	
	Enter a name for the list: (Limited to	50 characters)	
		Back Next Finish Can	cel

- 7. Scroll down until you find the location assigned to you. (You may need to further expand a facility to select your specific unit. To select check the box next to the unit name.
- 8. All patient lists need a name to help identify them. Location lists are automatically named for the location you select.
- 9. Click Finish



Location Patient List		×
*Locations [LGH 2 East]	🗄 🛛 🔀 👘 LGH Laboratory	*
Medical Services	🚊 🖂 🖬 LGH Lions Gate Hospital	
Encounter Types	🖃 🗖 🛄 LGH Lions Gate Hospital 🛛 🚽	-
Care Teams	🗄 🔽 🐼 LGH 2 East	==
Relationships		
Time Criteria	🖶 🗆 🗖 🐼 LGH 3 East	
Discharged Criteria	🖶 🗆 🗖 😓 LGH 3 Pediatric Observation	
Admission Criteria	🖶 🗆 🗖 🐼 LGH 3 West	
	🖶 – 🗖 🐼 LGH 4 East	
	🖶 🗆 🗖 🐼 LGH 4 West	
	⊞ ⊡ LGH 5 East	
	⊞ ⊡ 🐼 LGH 6 East	
	🖶 🖂 🐨 LGH 6 Surgical Close Observation	
	🖶 🗖 🐨 LGH 6 West	
	🗄 🔤 🔂 LGH 7 East	
	🛓 🖂 🐨 LGH 7 Neuro Critical Care	*
Enter a name for the list: (Limited LGH 2 East	to 50 characters)	
	Back Next Finish Ca	ancel
	9	

- 10. In the **Modify Patient Lists** window select the **Location** list you've created.
- 11. Click the **blue arrow** icon icon to move the **Location** to the right, under **Active Lists**.
- 12. Click **OK** to return to **Patient Lists**. Your Location list should now appear.

P Modify Patient Lists			×
Available lists: LGH2 East 10	Active lists:		19
		New OK	Cancel



Key Learning Points

Patient List can be accessed by clicking on the Patient List icon in the Toolbar

You can set up a Patient List based on location

1



Activity 1.2 – Create a Custom Patient List

Next, you need to create a **Custom List** that will contain only the patients that you are covering.

- 1. To create a **Custom List**, click the **List Maintenance** icon ² in the **Patient List**
- 2. Click New in the bottom right corner of the Modify Patient Lists window
- 3. From the Patient List Type window, select Custom
- 4. Select Next

Patie	nt List												
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LGH	East												
AIL DA	tiants - 1 GH 2 Fast					_							
		Modify Patient Lists						83					
	Name								r Visit	Primary Care	Physician		Visitor Status
	CSTLABAUTOMATION, TS	Available lists:			Active lists:				n testing	Plisuca, Roci	to, MD		
	CSTPRODMED, LAB-HEGH				LGH 2 East				bis	TestCST, Ger	neralMedicine-Pt	ysician1 ORD,	MD
	CSTLABAUTOMATION, TS								n testing	Plisvca, Roci	io, MD		
	CSTDEMOALEXANDER, D												
	SEXSMETH-LEARN, NATALI								y Acquired Phuemo	nia Plisvco, Wes	iley, MD		
	CST-TTT, ISLA								pplasty Shoulder	Plistey, Char	ise, NP		
	CST-TTT, TOBIAS								pplasty Shoulder	Plisvey, Char	ise, NP		
	CST-TTT, KIMBERLY			mþ-		-			bplasty Shoulder	Plistoy, Char	ise, NP		
	CSTPRODOS, ORDERSFIN					F	Patient List Type						
	CSTPRODONC, KRISTINE			-44		Г							
U	CSTONCPHARM, STIWO						Select a patient list typ	e:					
	CSIDEVONC, TESTONE						Arrigoment						
	CSTPRODED, EMILY CERN						Assignment (Ancillan	6					
	CSTLABAUTOMATION, TS					Π.	CareTeam	<u> </u>					
	CST-TTL, KUTH						Custom 2						
	CSTPRODREG, OUTPATIEN						Location						
4	CSTADIJAMTHREE, ADTO					1	Medical Service						
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0	CETROODERC CELEDIVIDI					1	Relationship						
1	EDOWN LEADN HENDY				New	1	Scheduled						
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18	CSTSYNGOTEST FRANK		700007388 200000013043 53	ugars 11	-Fab. 1960 02. Nov. 2017 14-27 PDT Diswa	1							
	CSTAMRTEST, JAMIE		700006640 700000012738 21	years 20	Feb.1992 26-Ort-2017 13:56 PDT Pliswa								
	CSTPRODREGHIM, FRANK		700004995 700000008263 33	years 11	-Nov-1980	1							
	CSTPRODREG, OUTPATIENT	CHARGING	700002490 700000004418 27	years 10	-May-1990	ь.							
	CSTPRODREG, OUTTOOUT		700001856 700000004416 27	years 01	-Jan-1990	1							
	CSTONCPHARM, STONE		700001147 7000000001602 38	years 27	-Nov-1979 08-Nov-2016 14:32 PST	1							
1	JONES-LEARN, JULIO		700008148 700000013604 71	years 25	-Aug-1946 16-Nov-2017 09:42 PST Plisvca,	R							
10	MCCOY-LEARN, SHAUNA		700008073 700000013496 59	years 17	-Feb-1958 14-Nov-2017 13:03 PST Plisvca,	e i				Back	Next	Finish	Cancel
	CSTPRODREG, PREWORK		700003725 700000005160 27	years 10	-May-1990							_	
	CSTPRODHIM, STESTSIX		700007350 7000000015682 17	years 01	-Oct-2000 29-Nov-2017 08:25 PST Plisvca,	Roce	co, MD t	est		Plisych, Max	мр 4		
1.00													

5. **The Custom Patient List** window opens. **Custom Lists** need a unique name. Type in a name for the list = *YourName_Custom* (for example Sara_Custom).

x

6. Click Finish Custom Patient List Care Team #1 Care Teams Locations Care Team #2 Medical Services ENT Encounter Types Relationships Admission Criteria Discharged Criteria Use Best Encounter Enter a name for the list: (Limited to 50 characters) 5 JohnDoe_Custom List Finish Back Next



- 7. In the Modify Patient Lists window select your newly created Custom List
- 8. Click the **blue arrow** icon icon to move your **Custom List** to the right, under **Active Lists**
- 9. Click OK

P Modify Patient Lists		EX
Available lists: JohnDee_Custom List. 7	Active lists: LGH 2 East	
		3
	Nev	v ок <mark>9</mark> е

At the beginning of a shift and with any assignment changes, you will need to add patients from your location list to your custom list. To do this:

- 1. First, find your patient on your Location List. Right-click your patient's name.
- 2. Hover your cursor over Add to a Patient List
- 3. Select YourName_Custom List

	Con Robeb, Emiler Cenner		700000144 70000000157 25 years 07-Aug-1554 24-Aug-2010					
	CSTLABAUTOMATION, TSWAY	NE	700004608 700000015122 83 years 18-May-1934 20-Nov-2017					
))]	CST-TTT, RUTH CSTPRODREG, 1 IE	Patient Snapshot	20007367 7000000013478 71 years 10-Jan-1946 14-Nov-2017 2446 7000000004417 27 years 10-May-1990					
	CSTADTIAMTHE C CSTPRODMED, JAMIE	Provider Information Visit List	839 700000015274 61 years 21-Apr-1956 034 700000013404 25 years 28-Sep-1992 10-Nov-2017					
)	CSTPRODREG, SELFPAYT	Inactivate Relationship Add/View Sticky Notes	542 700000001220 57 years 17-mar-1930 07-00-2017 1287 7000000004955 27 years 10-May-1990 1026 7000000012702 50 years 20-Aug-1967 26-Oct-2017 1882 700000000699 36 years 21-Jun-1981					
)) 1	CSTPRODMED, LAB-NOR CSTPRODMI, SITSYNGO CSTCARDDEMO, BOB DC CSTSYNGOTEST, FRANK	Sort Hide Customize Columns	178 7000000006054 21 years 01-Jan 1996 5576 7000000015568 41 years 30-Jan 1976 27-Nov-2017 3100 700000015206 70 years 01-May-1947 20-Nov-2017 738 700000001304 57 years 01-66-1960 02-Nov-2017					
ĺ	CSTAMBTEST, JAMIE CSTPRODREGHIM, FRAN CSTPRODREG, OUTPATIE	Add to a Patient List Copy Cti 2	JohnDoe_Custom List 32 226-Oct-2017					
))	CSTPRODREG, OUTTOOL CSTONCPHARM, STONE JONES-LEARN, JULIO	New Results	.856 7000000004416 27 years 01-Jan-1990 147 700000001602 38 years 27-Nov-1979 08-Nov-2016 148 700000013604 71 years 29-Aug-1946 16-Nov-2017					
	MCCOY-LEARN, SHAUNA CSTPRODREG, PREWORK	Open Patient Chart	 \$073 7000000013496 59 years 17-Feb-1958 14-Nov-2017 700003725 700000005160 27 years 10-May-1990 					

- 4. Navigate to your custom list by clicking on YourName_Custom tab. The tab will be empty.
- 5. Click the **Refresh** icon is to refresh your screen. Now your patient will appear in your **Custom List**. Please ensure the patient you have just added to your custom list is the patient assigned to you today.



Note: you can remove a patient from your custom list by selecting the patient and clicking the Remove Patient icon $\overset{\sim}{}$.

Key Learning Points

You can create a Custom List that will only consist of the patients that you are caring for



PATIENT SCENARIO 2 – Multi-Patient Task List

Learning Objectives

At the end of this Scenario, you will be able to:

- Set up Multi-Patient Task List (MPTL)
- Review and complete patient tasks in MPTL
- Establish a relationship with a patient

SCENARIO

You will use the **Patient List** and **Multi-Patient Task List** (**MPTL**) to identify your patients and help organize your day.

As a Respiratory Therapist, you will complete the following activities:

- Set up your view of the **Multi-Patient Task List**
- Review MPTL functionality
- Review patient tasks
- Document a patient task as complete



Activity 2.1 – Set up your view of the Multi-Patient Task List

As a Respiratory Therapist the first page you will see upon logging into the Clinical Information System (CIS) is the **Multi-Patient Task List (MPTL)**.

The **MPTL** displays specific tasks for multiple patients.Tasks are activities that need to be completed for the patient. Tasks are generated by certain orders or rules in the system and show up in a list format to notify you to complete specific patient care activities. They are meant to supplement your current paper to-do list and highlight activities that are outside of regular care.

Note: Not all orders create tasks. Examples of tasks include orders for consult, ventilator settings, important communications and specific therapies or treatments.

The MPTL for RTs has several tabs. Tasks will fall into one of these task categories (tabs).

Task Edit View Patient Ch	art	Links Task List Option	ns Help							
🖴 Multi-Patient Task List 🖃 Mes	sage	Centre 👫 CareCompass	Clinical Leader Organiz	er 🌃 Ambulatory Org	janizer 🛓 Pa	atient List 🎬 Dise	charge Dasi	nboard 🛄 Schedule 😂 Staff As	signment 🚻 LearningLIVE 🝦 🖸 😋 CareConnect 🔞 PHSA PACS	Q VCH and P
AdHoc IIIMedication	Adm	ninistration 🔒 PM Conver	ation + 🔄 Communicati	e • 🕂 Add • 🛗 Schi	eduling Appo	ointment Book 🖡	Documen	ts 📾 Discern Reporting Portal	Ge iAware	
Patient Health Education Mater	iale	Policies and Guidelines	UnToDate							
	_									
Multi-Patient Task List										<u>(</u> 0)
Departmental View									29-November-2017 06:30 Wedne	esday PST - 29
Scheduled Patient Care Ventilat	tors	Oxygen Therapy Pulmi	onary Procedures Ambu	latory						
Task retrieval completed				-						
All Patients		Name	Medical Record Number	Location/Room/Bed	Task Status	Scheduled Date	and Time	Task Description	Order Details	
CSTCD TESTAD	2.	CSTCD, TESTAD	700001302	LGH 2E / 212 / 02	InProcess	24-Jul-2017 10	0:44 PDT	RT Evaluate and Treat		
	\$°	CSTCD, TESTAD	700001302	LGH 2E / 212 / 02	InProcess	04-Aug-2017	13:38 PDT	RT Evaluate and Treat		
CSTLEARNING, DEMOTHETA	0.	60 CSTLEARNING, DEMO	700008216	LGH 6E / 624 / 04	Pending	29-Nov-2017	16:15 PST	Consult to Respiratory Therapy	29-Nov-2017 16:15 PST, Routine, Reason for Consult: COPD	
CSTPRODAC, HANHAN	2.	CSTPRODAC, HANHA	700005678	LGH 6E / 627 / 01	InProcess	28-Aug-2017	10:20 PD1	Blood Gas Collection		
	~	Corrigons, rinning		COTTOE / GEF / GA		es ring sour		blood day conection		

2

You will use a location based **Patient List** when working on your unit/location. It will be important to reference the steps listed below for when you need to set up a location based **Patient List**.

The first time you log in, you will need to set up the **MPTL**. To do this you need to select the appropriate **Patient List** and **Time Frame** to display. This will need to be done for each tab. You will only have to set up the MPTL once. The next time you sign into the system the **MPTL** will populate with the **Patient List** and **Time Frame** that you have selected.



1. Right-click on Assigned Tasks in the grey information bar.

2. Select Customize Patient View.

P PowerChart Organizer for TestUser, RespiratoryTherapist												
Task Edit View Patient Ch	art Links Task-List Opt	tions Help										
🛤 Multi-Patient Task List 🔄 Message Centre 脳 CareCompass 脳 Clinical Leader Organizer 🕌 Ambulatory Organizer 🛓 Patient List 🐘 Discharge Dashboard 🛅 Schedule 🛤 Staff Assignment 🌇 LearningLIVE 🚽 🕄												
Exit MadHoc IIIIMedication	💃 Exit 🎬 AdHoc 🎟 Medication Administration 🔔 PM Conversation - 🔄 Communicate - 💠 Add - 🛗 Scheduling Appointment Book 同 Documents 📾 Discern Reporting Portal 💽 Wavee											
2 🕄 Patient Health Education Materi	Patient Health Education Materials Delicies and Guidelines DupToDate											
Multi-Patient Task List												
100 m 4 B m 14												
N 40 10 1 1 10 10 10 10 10												
Assigned Tasks	atiant View						29					
Schedule 1 nt Care Ventilat	ors Oxygen 2 / Pul	monary Procedures Ambul	latory									
Task retrieval completed												
No Patients Found	Name	Medical Record Number	Location/Room/Bed T	ask Status	Scheduled Date and Time	Task Description	Order Details					
					The selected patients, tin	me frame and filters	for this view did not return any tasks					

Within the Task List Properties window:

- 3. In the Patient List tab, select Choose a Patient List and select Departmental View
- 4. Ensure View Assigned Tasks is checked as this will ensure tasks display on your MPTL.
- 5. Select the **appropriate location** using the location filter (use the + symbol to expand the location tree until you find the desired unit).

Note: Only choose locations for units you are working on. If you choose an entire hospital or too many locations, the system might not be able process all the tasks in the MPTL. Alternatively, you can set up several separate location based lists.

6. Click OK



After selecting the appropriate Patient List you need to set up the Defined Time Frame.



To select appropriate Time Frame for your MPTL:

- 7. Right-click the date range in the far right hand side of the grey information bar
- 8. Select Change Time Frame Criteria. This will open the Task List Properties window.

P PowerChart Organizer for TestUser, RespiratoryTherapist	
Task Edit View Patient Chart Links TaskList Options Help	
🛿 📾 Multi-Patient, Task List. 🖂 Message Centre. 🎬 CareCompass. 🎬 Clinical Leader Organizer 🐩 Ambulatory Organizer 💃 Patient List. 🞬 Discharge Dashboard 🔤 Schedule. 🗯 Staff Assignment. 🎬 LearningLIVE 🔓 🖗 🔍 areConnect. 🖏 PHSA PACS. 🖏 VCH	and PHC PACS 🜊 MUSE 🜊 FormFast WFI 💡
🛃 Exit 🦉 AdHoc 🞟 Medication Administration 🎍 PM Conversation - 🖕 Communicate - 🕂 Add - 🎆 Scheduling Appointment Book 🗑 Documents 📾 Discern Reporting Portal 🔯 Jaware 💡	
E 🛱 Patient Health Education Materials 🎕 Policies and Guidelines 🎕 UpToDate 💡	
	Recent - Name - (
Multi-Patient Task List	🗇 Full screen 👼 Print 🕹 0 minutes a
	CT - 20 Manual - 2017 10 45 West-set- 862
	Change Time Frame Criteria
Scheduled Patient Care Ventilators Oxygen Therapy Pulmonary Procedures Ambulatory	
Task retrieval completed	0
All Patients Name Medical Record Number Location/Room/Bed Task Status Scheduled Date and Time Task Description Order Details	
CSTCD, TESTAD SCTCD, TESTAD 700001302, LGH 22, 722, 723, LGH 22, 724, 724, 724, 724, 724, 724, 724,	
CSTLEARNING, DEMOTHET 6 CSTLEARNING, DEMOTION008216 LOH 6E / 624 / 04 Performance and reason for Consult Respiratory Therapy/29-Nov-2017 16:15 PST, Routine, Reason for Consult R COPD	
CSTPRODAC, HANHAN C STPRODAC, HANHAN 200005678 LGH 6E / 627 / 01 InProcess 28-Aug-2017 10:20 PDT Blood Gas Collection	
KC CSTPRODAC, HANHA 700005678 LGH 6E / 627 / 01 InProcess 29-Aug-2017 09-01 PDT Blood Gas Collection	

- 9. In the Time Frames tab select Defined Time Frame for your shift.
- 10. Select 12 Hour Day Shift.
- 11. Click **OK**. The **Scheduled Patient Care** tab within the MPTL is now set to the correct patients and their tasks.

Task List Proper	ties	×
Time Frames P	atient List	
Choose one of Offined Tim	the following: e Frame 🔿 9 Iterval 🔘 Generic Time Frame	
Range Previous Current Next	12 Hour Day Shift 12 Hour Night Shift 8 Hour Day Shift 8 Hour Evening Shift 8 Hour Night Shift	
Show me my:	16:00 V PST	
To: 29-Nov-2	ок 1	

Note: You must now repeat the previous steps for the remaining tabs to complete setting up the MPTL.



3 For the purposes of training, you will practice setting up your view of the Multi-Patient Task List with a different Patient List (**Custom List**) today than the one you will be using outside of this training.

Note: It is recommended for you to use **Departmental View** at Go-Live, however for training purposes, we will use the **Custom List**.

Departmental View: Used when you are looking at an entire department. Discharged patients will stay on this list for a short while allowing you to easily find them if you did not finish your documentation.

Custom List: Used when you have a few patients assigned to you. This is your own personal list and patients will stay on it until you remove them from the list.

The first time you log in, you will need to set up the **MPTL**. To do this you need to select the appropriate **Patient List** and **Time Frame** to display. This will need to be done for each tab.

Follow these steps to set up the appropriate Patient List:

- 1. Right-click on **Assigned Tasks** (right -click on the words) in the grey information bar.
- 2. Select Customize Patient View



Within the Task List Properties window:

- 3. In the Patient List tab, select Choose a Patient List and select YourName_Custom List
- 4. Ensure View Assigned Tasks is checked as this will ensure tasks display on your MPTL.
- 5. Click **OK**



Time Frames Patient List		
Choose a Patient List Departmental View JohnDoe Custom List 10770 East	Location Filters	
View Assigned Tasks	Save	

After selecting the appropriate Patient List you need to set up the **Defined Time Frame**.

To select appropriate Time Frame for your MPTL:

- 6. Right-click the date range on the far right hand side of the grey information bar
- 7. Select Change Time Frame Criteria.

										[D] Full screen	Print	∂ 1 minutes
∕⊗@₫€, ₽ %	200											
epartmental View, Assigned	d Tasks								13-December-2017 06:30 Wednesday	Channel Travel		
cheduled Patient Care Vent	ntilators	Oxygen Therapy	Pulmonary Procedures	Ambulatory					6	Change Time r	rame Criteria	
ask retrieval completed		1							L			
MI Patients		Name	Medic	al Record Numbe	r Location/Room/Bed	Task Status	Scheduled Date and T	me Task Description	Order Details			
CSTCD TESTAD	\$	CSTCD, TESTAD	700001	302	LGH 2E / 212 / 02	InProcess	24-Jul-2017 10:44 PD	T RT Evaluate and Treat				
	- \$ '	CSTCD, TESTAD	700001	302	LGH 2E / 212 / 02	InProcess	04-Aug-2017 13:38 P	DT RT Evaluate and Treat				
CSTPRODAC, HANHAN	- <u>e</u>	CSTPRODAC, H	ANHAN 700005	678	LGH 6E / 627 / 01	InProcess	28-Aug-2017 10:20 F	DT Blood Gas Collection				
	%	CSTPRODAC, H	ANHAN 700005	6/8	LGH 6E / 627 / 01	InProcess	29-Aug-2017 09:01 F	DT Blood Gas Collection				

The Task List Properties window opens.

- 8. In the Time Frames tab select Defined Time Frame for your shift.
- 9. Select 12 Hour Day Shift.
- 10. Click **OK**. The **Scheduled Patient Care** tab within the MPTL is now set with the correct patients and their tasks.



Task List Prope	ties		-X
Choose one of O Defined Times	the following:	💿 Generic Time Frame	
Range Previous Current Next	12 Hour Day Shift 12 Hour Night Shift 8 Hour Day Shift 8 Hour Evening Shift 8 Hour Night Shift	9	
Show me my:	12:00 V PST	▲ DCT	
To: 13-Dec-2	2017 V V 1259	PST	

Note: You must now repeat the previous steps for the remaining tabs to complete setting up the MPTL.

In this Activity, you practiced setting up a **Custom list** in your **MPTL**. Outside of this practice, you will need to set up your **MPTL** using a location based list to appropriately show all the patients on the unit who you are caring for.

Key Learning Points

- The MPTL is the first page you will see upon logging in
 - The MPTL is a tool used to display tasks for multiple patients
- You must select the correct patient list(s) and define the appropriate time frame in order to see assigned tasks for your patients
- Ensure you set up the correct view for each tab in the MPTL so you can see all of your tasks
- Click refresh to ensure you can see the most current tasks



Activity 2.2 – Review MPTL functionality

1

On the MPTL you will see the following:

- 1. Task list toolbar
- 2. Information bar with name of the patient list (far left) and the set time frame (far right)
- 3. Task categories (tabs)
- 4. Navigator window with the patient names with associated tasks
- 5. List of patient tasks

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	CSTLEARNING, DEMOTHETA	60 CSTLEARNING, DE	MO 700008216	LGH 6E / 624 / 04	Pending	29-Nov-2017 1	6:15 PST	Consult to Respiratory Therapy	29-Nov-2017 16:15 PST, Routine, Reason for Consult: COPD	
	CSTPRODAC, HANHAN	CSTPRODAC, HAN	IHA 700005678	LGH 6E / 627 / 01	InProcess	28-Aug-2017 1	0:20 PDT	Blood Gas Collection		
		CSTPRODAC, HAN	HA 700005678	LGH 6E / 627 / 01	InProcess	29-Aug-2017 0	9:01 PDT	Blood Gas Collection		
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1										

Key Learning Points

Components of the MPTL include the Task list toolbar, Information bar, Task categories, Navigator, and List of patient tasks.



Activity 2.3 – Review Patient Tasks

1

After setting up the **MPTL** you can see the patients that are under your care. Let's locate a patient and review one of their tasks.

- 1. Under the **Navigator** window with patient names, locate the correct patient and click on [**Patient Name**].
- 2. Review tasks associated with patient and locate the **Consult to Respiratory Therapy** task.
- 3. Right-click **Consult to Respiratory Therapy**.
- 4. Select Order Info... to learn more about the order.

PowerChart Organizer for TestUser, F	RespiratoryTherapist						
Task Edit View Patient Chart	Links Task List Options	Help					
🛛 🖴 Multi-Patient Task List 🖃 Message	e Centre 🌃 CareCompass 🌃 C	Clinical Leader Organizer 🎬 Ambulato	ry Organizer 🍦 Patient L	ist 🎬 Discharge Dashboard 🚞 S	chedule 📪 Staff Assignment. 🎬	LearningLIVE : CareConnect	PHSA PACS QVCH and PHC P
Exit MAdHoc IIIIMedication Adr	ministration 🔒 PM Conversation	on • 🔩 Communicate • 🕂 Add • 🕴	Scheduling Appointme	nt Book 📆 Documents 🔒 Discer	n Reporting Portal 💽 iAware 💡		
Patient Health Education Materials	Q Policies and Guidelines QL	UpToDate _					
	- 16						
Multi-Patient Task List							
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Departmental View, Assigned Tasks						29-November-2013	/ 96:30 Wednesday PST - 29-Nov
Scheduled Patient Care Ventilators	Oxygen Therapy Pulmonary	ry Procedures Ambulatory					
Task retrieval completed							
All Patients	Name	Medical Record Num	er Location/Room/Bed	Task Status Scheduled Date an	d Time Task Description	Order Details	
CSTCD TESTAD	CSTCD, TESTAD	700001302	LGH 2E / 212 / 02	InProcess 24-Jul-2017 10:44	PDT RT Evaluate and Treat		
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CETERODAC HANNAN	CSTPRODAC, HANHAN	2 Chart Done	H6E/627/01	InProcess 28-Aug-2017 10:2	0 PDT Blood Gar Collection	2	NAMES OF A DESCRIPTION OF
CSTPRODUC, HARPINIE	CSTPRODAC, HANHAN	Chart Done (Date/Time)	16E / 627 / 01	InProcess 29-Aug-2017 09:0	1 PDT Blood Gas Collection		
		Chart Not Done					
		Quick Chart					
		Chart Details / Modify					
		Unchart					
		Ad Hoc Charting					
		Reschedule This Task					
		Print	•				
		Order Info	_				
		Order Comment					
		Create Admin Note					
		Reference Manual					
		Task Info	4				
		Patient Snapshot					
		Select All					
		Deselect All					
		Open Patient Chart	•				
		Sort By					
		541109					

The Order Information window opens.

- 5. Click the **different tabs** to review the order information. The order information will have the reason for a consult which is mandatory for all consults.
- 6. Click the **Exit** icon $\overset{\text{def}}{=}$ when you finish reviewing the information.



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Task Vi	ew Help												
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espira	tory Therapy	v Following											
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Details	Additional Info	History Comment	Validation	Results	Ingredients	Pharmacy	5						
					-		–						
Detail													
Reques	ted Start Date/Tim	ne 08-Nov-2017 15:5	2 PST										
Consta	nt order	Yes											
					PRODBC	TEST.RT The	ursday, 07-Decemi	per-2017 11:04 PST					

Key Learning Points

- You can select specific patients for whom you would like to review tasks in the MPTL
 - Order Information will provide more details about the Consult to Respiratory Therapy order

1



Activity 2.4 – Document a Patient Task as Complete

After you review your patient tasks and perform them, it is important to complete the appropriate documentation within the CIS. Documenting that a task has been done will allow the task to be cleared and will help prevent your **MPTL** from being cluttered with tasks that have already been completed.

Let's document your consult task for your patient as complete in the MPTL.

- 1. On the **list of patient tasks**, locate the correct patient (**[patient's name]**) and right click on **Consult to Respiratory Therapy**.
- 2. Select Chart Done (Date/Time)

Multi-Patient Task List						🕞 Full screen 🛛 👼
✓⊗₫₫⊾µ	<i>1</i> 6					
Departmental View, Assig	ed Tasks				09	December-2017 06:30 Saturday PST - 09-December-2
Scheduled Patient Care	Il Continuous Tasks Ventilators	Oxygen Therapy EEG/EMG Pul	monary Procedures Educat	tion		
Task retrieval completed						
All Patients	Name	Medical Record Nu	mber Location/Room/Bed	Task Status Scheduled Date and Time	Task Description Order D	Chart Done
🔟 CSTLEARNING, DEMO	HET/	EMOTHETA 700008216	LGH 4E / 406 / 01	Pending 09-Dec-2017 16:01 PST Pending PBN	Consult to Respiratory Therapy	Chart Done (Date/Time) 2 th P
CSTPRODORD, PATIE	тв	70001010	201142/422/03	r chung i hiri	The speaking varie that	Chart Not Done
						Quick Chart
						Chart Details / Modify
						Unchart
						Ad Hoc Charting
						Reschedule This Task
						Print >
						Order Info
						Order Comment
						Create Admin Note
						Reference Manual
						Task Info
						Patient Snapshot
						Select All
						Deselect All
						Open Patient Chart

- 3. You will be asked to establish a relationship with the patient before you can open the patient's chart or proceed with completing a task. Select **Respiratory Therapist** in the **Assign a Relationship** window.
- 4. Click OK

P Assign a Relationship
For Patient: CSTLEARNING, DEMOBETA
Relationships:
Quality / Utilization Review
Respiratory Therapist 1

5. Review the Date/Time cells in the Consult to Respiratory Therapy (Chart Done) window



and adjust details as needed.

6. Click OK

Consult to Respiratory Therapy (Chart Done) - CSTLEARNING, D									
Date/Time:	<u>09-Dec-2017</u>								
Performed by:	TestCD, RespiratoryTherapist								
	OK 4 ncel								

- 7. The task now will now have a **Chart Done** icon **r** next to it.
- 8. Click the **Refresh** icon and the task will fall off the task list.

Multi-Patient Task List										(曰) Full screet	n 👼 Print	€ 28 minutes ago
												6
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Scheduled Patient Care All Cont	tinuou	as Tasks Ventilators Oxygen Thera	py EEG/EMG Pulmonar	y Procedure:	Educat	tion						
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Corepanying, Demorriery		CSTPRODORD, PATIENT B	700001818	LGH 4E / 42	2/03	Pending	PRN		Trach Speaking Valve Trial	2017-Jul-04 12:00 PDT, Routine, PRN, no frequency with P	_	
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Key Learning Points

It is important to document completed tasks as done to clear them from your MPTL



PATIENT SCENARIO 3 – Patient Chart Overview

Learning Objectives

At the end of this Scenario, you will be able to:

Access patient chart and review information including Patient Summary, Orders, Results Review, Documentation, and more

SCENARIO

After setting up the MPTL you can access your patient's chart.

As a Respiratory Therapist you will be completing the following activities:

- Review patient information
- Review Results using Results Review
 - Become familiar with the Single Patient Task List (SPTL)

1



Activity 3.1 – Review Patient Information

After reviewing your patient's tasks, you will access the patient's chart directly from the MPTL screen.

- 1. Right click [Patient Name]
- 2. Select Open Patient Chart
- 3. Select Respiratory Therapy View

Multi-Patient Task List									[D] Full screen	Print 🗇
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Task retrieval completed										
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STPRODAC, HANHAN	£.	CSTPRODAC, HANHAN	700005678	LGH 6E / 627 / 01 LGH 6E / 627 / 01	InProcess InProcess	28-Aug-2017 1020 PDT 28-Aug-2017 0901 PDT	Blood Gas Collection 1	Chart Done (Dert Time) Chart Note (Dert Time) Qick Chart Unchart Ad Hoe Charting Reschedict Tis Task Print • • • Order Enfo Order Comment Create Admin Note Reference Manual Task Info Patient Supphot Select All Desicet All Open Patient Chart 2	menuar reality solutions? Orders Single Patient Task List MAR Interactive View and IO Results Review and IO Results Review and IO Results Review and IO Results Review and IO Regisses and Problems CareConnect Clinical Research Form Browser CareConnect Clinical Research Form Browser Growth Chart Lines/Tubes/Drains Summ MAR Summary Medication List Patient Information Reference	sary

- 2 The patient's chart is now open to the **Respiratory Therapy View** page. Before we proceed any further, let's go through an overview of the general screen.
 - 1. The **Toolbar** is located above the patient's chart and it contains buttons that allow you to access various tools within the Clinical Information System.
 - 2. The **Banner Bar** displays patient demographics and important information that is visible to anyone accessing the patient's chart. Information displayed includes:
 - Name
 - Allergies
 - Age, date of birth, etc.
 - Encounter type and number
 - Code status
 - Weight
 - Process, disease and isolation alerts
 - Location of patient



- Attending Physician
- 3. The **Menu** on the left allows access to different sections of the patient chart. This is similar to the coloured dividers within a paper-based patient chart. Examples of sections included are **Orders**, **Medication Administration Record** (**MAR**) and more.
- 4. The **Refresh** icon with the patient chart with the most up to date entries when clicked. It is important to click **Refresh** frequently as other clinicians may be accessing and documenting in the patient chart simultaneously.

Note: The chart does not automatically update. When in doubt, click Refresh

CSTLEARNING, DEMO - 700008357 (Opened by TestCD, RespiratoryTherapist							
lask Edit View Patient Chart	t Links Navigation Help							
: 🔐 Multi-Patient Task List 🔄 Messa	ge Centre 🌃 CareCompass 👫 Clinical	Leader Organizer 👫 Ambulatory	y Organizer	🛉 Patient List 🛄 Schedule 🝔 Staff A	ssignment 🌃 LearningLIVE 💡 : 😋 CareC	onnect 🙀 PHSA PACS 🙀 VCH and PHC PJ	ACS 😋 MUSE 😋 For	mFast WFI 🝦
📰 Tear Off 📲 Exit 🎬 AdHoc 💵	Medication Administration 🤷 PM Conve	ersation + 🕞 Communicate + •	🕇 Add 👻 🖸	🖥 iAware l 🛗 Scheduling Appointment E	Book 🛅 Documents 🥃 Discern Reporting	Portal 🖕		
🕄 Patient Health Education Material	s 🔞 Policies and Guidelines 🔌 UpToDa	ate 🖕						1
CSTLEARNING, DEMO 🛛 🛛						← List →	🖀 Recent 👻 Name	- Q
CSTLEARNING, DEMO		MRN:700008357				Location:LGH	6E; 620; 02	
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Orders 🕂 Add	Card and a			Carda 199	= -			
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MAR	Chief Complaint:	No results found		Selected visit 🔷		Last 24 hours for the selected visit		
Interactive View and I&O	Reason For Visit:	Pneumonia		No results found		No results found		
Results Review	Admitting Physician: Service:	General Internal Medicine		(taba	=- 0	Respiratory Treatments		== 0
Documentation 🕂 Add	Admit Date:	24/11/17		Laus	= . %	Last 24 hours for the selected visit		
Medication Request	Targeted Discharge Date:	No results found		Last 12 hours for the selected visit		Last 24 Hours for the selected visit		
Histories	Mode of Arrival:	No results found		No results found		No results found		
Allerning 📕 Add	Last Visit:	No results found		Diagnostics (0)	=- ^	Documents (0)		≡• ⊘
	Code Status:	No results found		Last 6 months for all visits		Selected visit		
Diagnoses and Problems	 Diet and Activity (0) 						1	
2	 Emergency Contact (0) 			No results found		No results found		
CareConnect 3	Contractor			Microbiology (0)	≡• ∾			
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Form Browser	All Visits			Ale souths found		All Visits		
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Lines/Tubes/Drains Summary	Drivity Drohlem			8 Pathology (0)	≡• ⊗	Outstanding Orders (5)		= 0
MAR Summary	This Visit (0)			Last 10 days for all visits 🔻		Selarted virit		
Medication List 🕂 Add 🔻				Prove astronomy and the		0	atur Orde	red T
4 m b				Error retrieving results				*

- 3 Now that you have been introduced to some key parts of the general screen, let's look more closely at the **Respiratory Therapy View**.
 - There are different tabs available to access information: Respiratory Therapy Summary, Quick Orders, Assessment, and Handoff Tool. Click on the different tabs to see a quick overview of the patient.
 - 2. The Respiratory Therapy Summary, Assessment, and Handoff Tool tabs display a summarized view of patient information organized into various components. Information that displays is populated from other parts of the patient chart and includes nursing documentation, RT documentation, lab results, and medication orders. The Quick Orders tab displays several colour-coded components that represent an aspect of patient care (for example, Noninvasive Ventilation) and is tailored to the user. Within each component is a collection of orders relevant to that particular aspect of patient care.



CSTLEARNING, DEMO	OTHETA - 700008216 Op	ened by TestUser, RespiratoryTherapist									
Task Edit View Pa	stient Chart Links	Navigation Help									
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ocumentation	+ Add	Tuttent internation		- •		23 hrs	23 hrs	6 days	Hotely recharders (6)		_
		Chief Complaint:	No results found		BP	100/60	100/60	140/90	All Visits		
europoin keybest		Reason For Visit:	Pneumonia			23 hrs	23 hrs	6 days	No results found		
		Admitting Physician:	Plisvca, Rocco, MD		HR	* 105	* 105	80			_
	🕈 Add	Service:	General Internal Medicine			23 hrs	23 hrs	6 days	Outstanding Orders (22)		=•
agnoses and Problems		Admit Date: Targeted Discharge Date:	1//11/1/ No results found		Temp	38	38	36.9	Selected visit		
		Made of Ambuly	No results found			23 hrs	23 hrs	6 days		Status	Ordered
		Advance Directive:	No results found						IP Consult to Respiratory Therapy	Ordered	29/11/17 16:15
		Last Visit:	No results found		Labs			=- 0	sodium chloride 0.9% 1,000 mL	Ordered	29/11/17 13:07
		Code Status:	No results found			1.1.0		- •	HYDROmorphone	Ordered	29/11/17 12:22
Dec		Diet and Activity (0)			Last 12 hours for the selecte	d visit			vancomycin	Ordered	29/11/17 12:22
		Emergency Contact (0)			No results found				acetaminophen	Ordered	29/11/17 12:22
owth Chart		· energene) condet (o)							MEWS Alert	Ordered	28/11/17 18:14
		Droblom List		=. 0	Diagnostics (0)			=• 📀	CBC	Ordered	22/11/17 10:55
AR Summany		Problem List		~	Last 6 months for all visits				ID Consult to Pharmacy	Ordered	22/11/17 10:55
		All Visits			No conclusion of				Communication Order	Ordered	22/11/17 10:55
edication List	+ Add	Classification: All			No results round				Differential	Ordered	22/11/17 10:55
					Historiala and (0)			=	Differential	Ordered	22/11/17 10:55
ference		Priority Problem			Microbiology (0)			=• %	INR	Ordered	22/11/17 10:55
		This Visit (0)			Last 6 months for all visits				PTT	Ordered	22/11/17 10:55
					No results found				Insert Peripheral IV Catheter	Ordered	22/11/17 10:55
									Weight	Ordered	22/11/17 10:55
		Active (0)			B Pathology (0)			=- >	Notify Treating Provider	Ordered	22/11/17 10:55
		No results to display						- •	Infectious Disease Screening	Ordered	17/11/17 14:17
		Resolved (0)	2 Show Pre	evious Visits	Last 10 days for all visits 👻				Braden Assessment	Ordered	17/11/17 14:17
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					Line and the	inhte (0)		=. 0	Basic Admission Information Adult	Ordered	17/11/17 14

Key Learning Points

- The Toolbar is used to access various tools within the Clinical Information System
- The Banner Bar displays patient demographics and important information
- The Menu contains sections of the chart similar to a paper-based chart
- The Refresh icon should be used regularly to view the most current information
- The Summary tab in the Respiratory Therapy View provides a summarized view of patient information pulled from other parts of the chart



b Activity 3.2 – Review Results Using Results Review

1

As explained previously, the **Menu** on the left side of your screen contains different sections of the patient's chart. We will explore some of the Menu sections in the following Activities. Let's begin with **Results Review**.

Throughout your shift, you will need to review your patient's results. One way to do this is to navigate to **Results Review**.

Results are presented using flowsheets. Flowsheets display clinical information recorded for a person such as labs, vital signs, cultures, transfusions and diagnostic imaging and more.

Flowsheets are divided into two major sections.

- 1. The left section is the **Navigator**. By selecting a category within the navigator, you can view related results, which are displayed within the grid to the right.
- 2. The grid to the right is known as **Results Display**.

ecent Results Advance Care P	lanning Lab - Recent Lab - Extended Pathology	Micro Cultures Trar	sfusion Diagnostics	Vitals - Recent Vitals -	Extended					
Flowsheet: Lab View										
 Sunday, 05-June-2016 00:00 PDT - Friday, 05-January-2018 22:59 PST (Clinical Range) 										
Navigator 🛛 🔀	Showing results from (23-Oct-2017 - 25-Oct-2017)	Show more results								
👿 General Chemistry	Lab View	25-Oct-2017 00:00 - 23:59 PDT	24-Oct-2017 00:00 - 23:59 PDT	23-Oct-2017 00:00 - 23:59 PDT						
👿 Therapeutic Drug Monitori	Hematocrit	0.40	0.41	0.43 - 0.45 [2]						
📼 Urine Microbiolomy	MCV	92 fL	95 fL	95 fL - 98 fL [2]						
onne wicrobiology	MCH	31 pg	30 pg	32 pg [2]						
🔽 Infection Control/Surveilla	RDW-CV	12.0 %	12.0 %	12.0 % [2]						
Glucosa Pland Point of Cau	Platelet Count	400 x10 9/L	350 x10 9/L	250 x10 9/L - 300 x10 9/L						
Olucose blood Point of Cal	MPV			9.9 fL						
	Neutrophils	4.90 x10 9/L	4.90 x10 9/L	4.90 x10 9/L - 5.60 x10 9/						
1	Lymphocytes	1.40 x10 9/L	1.40 x10 9/L	1.40 x10 9/L - 1.60 x10 9/						
	Monocytes 🛛	0.35 x10 9/L	0.35 x10 9/L	0.40 x10 9/L - 0.63 x10 9/						
	Eosinophils	0.28 x10 9/L	0.28 x10 9/L	0.07 x10 9/L - 0.32 x10 9/						
	Basophils	0.07 x10 9/L	0.07 x10 9/L	0.08 x10 9/L						
	General Chemistry									
	Sodium	142 mmol/L	145 mmol/L	140 mmol/L - 145 mmol/						
	Potassium	3.8 mmol/L	3.9 mmol/L	4.5 mmol/L - 5.0 mmol/L						
	Chloride	100 mmol/L	100 mmol/L	100 mmol/L - 105 mmol/						
	Carbon Dioxide Total	25 mmol/L	26 mmol/L	30 mmol/L - 31 mmol/L						
	Anion Gap	20.8 mmol/L (H)	22.9 mmol/L (H)	13.5 mmol/L - 15						
	Glucose Random			6.0 mmol/L						

Review the most recent results for your patient:

- 1. Navigate to **Results Review** from the **Menu**.
- 2. Review the Recent Results tab.
- 3. Review each individual tab to see related results.
- 4. Select Lab Recent.

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5. Review your patient's recent lab results

Blood Gases					
pH Capillary	7.29 (L)				
pCO2 Capillary	37 mmHg				
pO2 Capillary	70 mmHg (L)				
HCO3 Capillary	15 mmol/L (L)				
Base Excess Capillary	3 mmol/L *				
Ventilation Capillary	Nasal Prongs				
Oxygen Administered Capillary	0.50				
General Chemistry					
Glucose Random	5.5 mmol/L				
Lactate	3.7 mmol/L (H)				
Bilirubin Direct	2 umol/L				
Urine Microbiology					
Urine Culture					
Infection Control/Surveillance					
MRSA Culture					
VRE Culture					

Note: Specific lab results may populate in different colours. Indications of the colours are listed below:

- Blue values indicate results lower than normal range
- Black values indicate normal range
- Orange values indicate higher than normal range
- Red values indicate critical levels

To view additional details about any result, for example, a Normal Low or Normal High value, double-click the **result**.



Key Learning Points

- Flowsheets in Results Review display clinical information recorded for a patient such as labs, cultures, transfusions, medical imaging, and vital signs
- The Navigator allows you to filter certain results in the Results Display
 - Bloodwork is coloured to represent low, normal, high and critical values
- View additional details of a result by double-clicking the value



Activity 3.3 – Become familiar with the SPTL

1

The **Single Patient Task List (SPTL)** is accessible via the **Menu**. It displays all tasks available for the specific patient whose chart you are viewing. The tools and functionalities of the **SPTL** are similar to the **MPTL**.

Click on the Single Patient Task List in the Menu. You will see:

- 1. Task List toolbar
- 2. Time Frame for the tasks to be displayed
- 3. Task Categories (Tabs)
- 4. List of Tasks

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2

As with the MPTL, the **Time Frame** can be changed to the appropriate date.

- 1. Right-click the grey information bar with the time frame.
- 2. Select Change Time Frame Criteria.

The Task List Properties window opens.

- 3. Under the Time Frames tab, select Defined Time Frame for your shift.
- 4. Under Range, ensure Current is selected. Click 12 Hour Day Shift.
- 5. Click **OK**. The Task Categories (Tabs) within the **SPTL** are now correctly set for your day shift.



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Note: Similar to the steps outlined in the MPTL, patient tasks can be documented as complete through the SPTL. When using the SPTL however, you can only complete tasks for the patient whose chart you have open.

Key Learning Points

- The SPTL has similar tools and functionalities as the MPTL
- The SPTL displays tasks for the patient's chart that you have open



PATIENT SCENARIO 4 – Interactive View and I&O

Learning Objectives

At the end of this Scenario, you will be able to:

- Review the Layout of Interactive View and I&O (iView)
- Document within Interactive View and I&O
- Modify, unchart or add a comment to your documentation

SCENARIO

As your shift continues, you will need to document various assessments and patient care. The following activities will introduce you Interactive View and I&O charting.

As a Respiratory Therapist you will be completing the following activities:

- Navigate to Interactive View and I&O (iView)
- Document in iView
- Change the time column
- Document a dynamic group in iView
- Modify, unchart or add a comment in iView



Activity 4.1 – Navigate to Interactive View and I&O

Respiratory therapists will complete most of their documentation in **Interactive View and I&O** (iView). iView is the electronic equivalent of paper flowsheets. For example, vital signs and pain assessment will be charted in iView.

From the Menu, select the Interactive View and I&O section.

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Now that the iView page is displayed, let's view the layout.

- A band is a heading that has a collection of flowsheets (sections) organized beneath it. In the image below, the Respiratory Therapy band is expanded displaying the sections within it.
- 2. The set of bands below **Respiratory Therapy** are collapsed. Bands can be expanded or collapsed by clicking on their name.
- 3. A **section** is an individual flowsheet that contains related assessment and intervention documentation.
- 4. Cells are fields where data is documented.

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- Interactive View and I & O allows you to access a variety of flowsheets for documentation
- Respiratory Therapists will complete most of their documentation in iView



Activity 4.2 – Documenting in Interactive View and I&O

1

With the Respiratory Therapy band expanded you will see the Breath Sounds Assessment section. Let's practice documenting in iView. Remember to review the contents of the section before documenting.

- Double-click the **blue box** next to the name of the section to document in several cells. You will see this check mark icon appear after double clicking. You can move through the cells by pressing the **Enter** key.
- 2. Document the following data:
 - Breath Sounds Auscultated: Anterior and Posterior
 - All Lobes Breath Sounds: Clear

Notice that the text is purple upon entering. This means that the documentation has not been signed and is not part of the chart yet.

3. To sign your documentation, click the green check mark icon V



4. Once the documentation is signed the text becomes black. Notice that a new blank column also appears after you sign your documentation, in preparation for the next set of charting. The columns are displayed in actual time. You can now document a new result for the patient in this column. The newest documentation is to the left.





Note: You do not have to document in every cell. Only document to what is appropriate for your assessment and follow appropriate documentation policies and guidelines at your site.

- Remember to review the contents of the section before documenting.
- Documentation will appear in purple until signed. Once signed, the documentation will become black.
- The newest documentation displays in the left most column
- Double-click the blue box next to the name of the section to document in several cells; the section will then be activated for charting
- You do not have to document in every cell. Only document to what is appropriate to your assessment.



Activity 4.3 – Change the Time Column

1 You can create a new time column and document under a specific time. For example, let's pretend it is now 12:00 pm and you still need to document your patient's 10:00 am respirations.

- 1. Click on the RESPIRATORY section to display documentation under this section
- 2. Click the Insert Date/Time icon in.
- 3. A new column and Change Column Date/Time window appear. Choose the appropriate date and time you wish to document under. In this example,
 - Date: today's date
 - **Time** = *09:00*
- 4. Click the Enter key



5. In the new column, enter Respirations: **Unlaboured**, **Regular** and click **green check mark** icon ✓ to sign your documentation.





The documentation is now black and saved into the chart.

Key Learning Points

If required, you can create a new time column and document under a specific time

1



Activity 4.4 – Document a Dynamic Group in iView

Dynamic Groups allow the documentation and display of multiple instances of the same grouping of data elements. Examples of Dynamic Groups include Wound Assessments, IV Sites, chest tubes and more.

You are aware that your patient requires an arterial line to be inserted. After inserting the arterial line successfully, you are now ready to document the details of the arterial line insertion.

- 1. Click on the Arterial Line section to display documentation under this section
- 2. Now that the band is expanded, click on the **Dynamic Group** icon **to** the right of the Arterial Line heading in the flowsheet.

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The **Dynamic Group** window appears. A dynamic group allows you to label a line, wound, or drain with unique identifying details. You can add as many dynamic groups as you need for your patient. For example, if a patient has two arterial lines, you can add a dynamic group for each arterial line.

- 3. Select the following to create a label:
 - Arterial Line Site: Radial artery
 - Arterial Line Laterality: Left
 - Arterial Line Catheter Size = 18 French
- 4. Click OK



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- 5. The label created will display at the top, under the Arterial Line section heading.
- Double-click the **blue box** next to the name of the section to document in several cells. You will see this check mark icon appear after double clicking. You can move through the cells by pressing the **Enter** key.

Now document the activities related to this arterial line:

- Activity: Insert
- Patient Identified: Identification band
- Sterile Field: Maintained
- Number of Attempts: 1
- Indication: Frequent arterial blood gas sampling
- Status: Flushes easily, Good blood return, Satisfactory
- Dressing: Transparent securement dressing
- 7. Click **green check mark** icon ✓ to sign your documentation. Once signed the label will be accessible for other clinicians to complete further documentation within the same dynamic group.





2 You can inactivate a **Dynamic Group** when it is no longer in use, such as when a drain or tube is removed.

To inactivate your arterial line dynamic group section:

1. Right-click the dynamic group label Radial arterial Left 18 Fr, select Inactivate.



Note: The inactivated dynamic group remains in the view, but is unavailable, meaning clinicians cannot document on it. If there are no results for the time frame displayed, the inactive dynamic

group is automatically removed from the display.

Now let's say you accidentally inactivated the wrong dynamic group. Don't worry! You can reactivate a dynamic group!

2. Right-click the dynamic group label for the Radial arterial Left 18 Fr, select Activate.



You and other users can now access this Dynamic Group for documentation.

- Examples of Dynamic Groups include wound assessments, IV sites, chest tubes, and other lines or drains
- Once documentation within a dynamic group is signed, the label will be accessible for other clinicians to complete further documentation within the same dynamic group
- When a dynamic group is no longer in use, such as when a drain or tube is removed, you can inactivate it



Activity 4.5 – Modify, Unchart or Add a Comment in Interactive View

1 You just realized that you made an error when documenting Breath Sounds Auscultated and you want to modify the entry.

Modify a Comment:

- 1. In the **Breath Sounds Assessment** section in the **Respiratory Therapy** band, right-click on **Anterior and Posterior** (your documented finding for **Breath Sounds Auscultated**).
- 2. Select Modify...

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- 3. Select Breath Sounds Auscultated: Anterior only
- 4. Click the green check mark icon \checkmark to sign your documentation.



5. Anterior only now appears in the cell and the corrected icon <u>will automatically appear in</u> the bottom right corner to denote a modification has been made.

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Orders	🛨 Add	4	Respiratory Therapy		Image: A state of the state	Last 24 Hours				
Single Patient Task List			 Breath Sounds Assessm RESPIRATORY 	en 🖌	Find Item	n Low Abnormal	Unauth 🔲 FI	aq	C And	Or
MAR			Respiratory Description/	Assessment						
Interactive View and I8	kO		Airway Intubation Asses	sment	m a -		06-Dec-2017			
Results Review			Airway Management Complex Weaping Trial		Breath Sounds Assessment	14:26 PST 13:56 PS	r 12:33 PST	11:39 PST	10:00 PST	
Documentation	🖶 Add		Ventilation		Breath Sounds Auscultated			Anterio 🔺	5	
			 Ventilation Assessment 	_	All Lobes Breath Sounds		-	Clear	-	
Medication Request		=	VAP Bundle	-	Left Upper Lobe Breath Sounds					
Histories			CO2 Monitoring		Right Upper Lobe Breath Sounds		_			
Allergies	▲ Add		Aerosol/MDI/DPI Thera	ру	Left Lower Lobe Breath Sounds					
Anorgios	Aug		Mobilization of Secretion		Right Lower Lobe Breath Sounds		_			
Diagnoses and Problems			Response To Therapy		Apex Breath Sounds					
			Respiratory Evaluation S	icores	Base Breath Sounds					
			 Arterial Line 		Upper Airway Breath Sounds					

2 The unchart function will be used when information has been charted in error and needs to be removed. For example, respirations were charted in the wrong patient's chart.

Let's pretend that the respirations documented earlier were meant to be documented on one of your other patient's charts. It needs to be uncharted.

Unchart a Comment:

- 1. Right-click on the documented cell of **Unlaboured** for Respirations
- 2. Select Unchart



CSTLEARNING, DEMOTHETA - 700008216 Op	ened by TestUser, RespiratoryTher	apist				- 6 -		
Task Edit View Patient Chart Links Options Documentation Orders Help								
😂 Multi-Patient Task List 🔄 Message Centre 🎇 CareCompass 🎬 Clinical Leader Organizer 🐩 Ambulatory Organizer 🔶 Patient List 🔤 Schedule 🚔 Staff Assignment 🎬 LearningLIVE 🚽 😋 CareConnect 🍓 PHSA PACS 🕲 VCH and PHC PACS 🕲 MUSE								
🕱 Tear Off 📲 Exit 🎽 AdHoc 💷 Medication Administration 🔮 PM Conversation - 🔓 Communicate - 🕂 Add - 👼 Scheduling Appointment Book 🕞 Documents 📾 Discent Reporting Portal 💽 Havare								
🔅 😋 Patient Health Education Materials 😋 Polici	ies and Guidelines 🙀 UpToDate	÷						
CSTLEARNING, DEMOTHETA R								
CSTLEARNING, DEMOTHETA	DOB:01-Jan-1937 Age:80 years	MRN:700008216	Code Status:Attempt CPR, Full Code	Process:Falls Risk Disease	Lo	Add Result		
Allergies: penicillin, Tape	Gender:Male	PHN:9876469824	Dosing Wt:	Isolation:	At	ten View Result Details an,		
Menu 7	< 🖂 🛪 🏠 Interactio	ve View and I&O				View Comments		
Description Theorem Minus						View Flag Comments		
Respiratory Therapy View		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				View Reference Material		
Mental Health Summary	av Dessiratory Theremy					View Order Info		
Orders 🕂 Add	Rearth Sounds Assessme	unt .	•	Last 24 Hours		View History		
Single Patient Task List	RESPIRATORY	an î	Find Item - Critical High	Low Abnormal Ur	auth 🔄 Flag 🖉	A		
MAR	Respiratory Description//	Assessment				Modify		
Interactive View and I&O	Airway Intubation Assess	ment	<u>in</u> w _		06-Dec-2017	Change Date/Time		
Results Review	Airway Management		I aft Lower Lobe Breath Soundr	14:34 PST 13:56 PST	12:33 PST 11:39 PST 10:00 P	Add Comment		
Description Add	Complex Weaning Inal Ventilation		Right Lower Lobe Breath Sounds			Add Comment		
	 Ventilation Assessment 		Apex Breath Sounds			Duplicate Results		
Medication Request	VAP Bundle	=	Base Breath Sounds			Clear		
Histories	CO2 Monitoring		Upper Airway Breath Sounds			View Defaulted Info		
Allergier 📥 Add	Aerosol/MDI/DPI Therap	by land	A RESPIRATORY			View Calculation		
	Mobilization of Secretions		Shortness of Breath Indicator			Paralaulata		
Diagnoses and Problems	Response To Therapy		Respirations		Unlabou	ire 1		
	Respiratory Evaluation S	cores	Indrawing Severity			View Interpretation		
CareConnect	Arterial Line		Indrawing Location			Reinterpret		
Children D. San L	Specialty Gas Manageme Machanical Inst History F	ent iver#lation MIE	Chest Motion Owgen Activity			Create Admin Note		
Clinical Research	Bronchoscopy	Ascinduori Mile	Oxygen Therapy			Chart Details		
Form Browser	Provider Notification	*	Mask/Delivery Type			Not Done		
Growth Chart	Adult Education		Humidification Temperature De	gC				
Lines/Tubes/Drains Summary	Pediatric Education		Respiratory Rate br/n	nin		Flag		
MAR Summan	Tintake And Output		SpO2	%	89 🗤	Flag with Comment		
	Control Sedation		Oxygen Flow Rate	nin		Unflag		

The Unchart window opens.

3. Select Charted on Incorrect Patient from the reason drop-down.

Note: The yellow field under Reason denotes a required field. You will not be able to click the Sign button until the reason is selected.

4. Click Sign

P Unch	art - CSTLEARNING, DEM	OTHETA - 700008216				- • •
Unchart	Date/Time	Item	Result	Reason	Comment	
$\overline{\mathbf{A}}$	06-Dec-2017 10:00 PST	Respirations	Unlaboured,			
Reason						
Charted Other	on Incorrect Patient		-	3		
					S	ign <mark>4</mark> Cancel

5. You will see **In Error** displayed in the uncharted cell. The result comment or annotation icon icon will also appear in the cell.



CSTLEARNING, DEMC	CSTLEARNING. DEMOTHETA - 700008216 Opened by TestUser. RespiratoryTherapist							
Task Edit View Patient Chart Links Options Documentation Orders Help								
; as Multi-Patient Task Li	st imiessage Centre	The Carecompass The Clinical C	eader Organizer 📷 Ambula		stan Assignment meter	anningerve _{\\[} : V	Careconnect (FIDA PACS
🗄 🔛 Tear Off 📲 Exit 🍟	AdHoc IIII Medication	n Administration 🎍 PM Conver	sation 👻 🕞 Communicate	 Add - B Scheduling Appointment Book 	🕞 Documents 📾 Disc	ern Reporting Po	ortal 💽 iAware 🝦	
🗄 😋 Patient Health Educa	tion Materials 🜊 Polic	cies and Guidelines 🔞 UpToDat	ie _z					
CSTLEARNING, DE	MOTHETA 🛛							← L
CSTLEARNING, DE	мотнета	DOB:01-Jan-1937	MRN:700008216	Code Status:Attempt CPR, Full Code	Process:Fal	ls Risk		Locatio
		Age:80 years	Enc:7000000015058		Disease:			Enc Tyj
Allergies: penicillin, T	ape	Gender:Male	PHN:9876469824	Dosing Wt:	Isolation:			Attendi
Menu	Ф	🖌 🔺 🖌 🚹 Interac	tive View and I&O					
Respiratory Therapy View	·	1 🐂 🖃 💷 🐼 🖌 😥 🗑						
Mental Health Summary								
Orders	+ Add	Respiratory Therapy		4	Last	24 Hours		
Could Defend Tech Link		Breath Sounds Assess	sment 🔺					
Single Patient Task List		RESPIRATORY Respiratory Description	n/Assessment	Find Item - Critical	igh 🔄 Low 🔄 Abno	rmal 🔄 Unaut	th 🔄 Flag) And
MAR		Apnea/Bradycardia E	pisodes					
Interactive View and I8	kO	Airway Intubation Asse	essment	<u></u>	\$18 · · · · · · · · · · · · ·	06-D	Dec-2017	
Results Review		Airway Management		Laft Lower Lobe Breath Coundr	ሳርሮ 14:40 PST	13:56 PST 12	2:33 PST 11:39 PS	T 10:00 PST
Decumentation	▲ Add	Ventilation	3	Right Lower Lobe Breath Sounds				
Documentation	T Add	 Ventilation Assessment 	t	Apex Breath Sounds				
Medication Request		VAP Bundle	-	Base Breath Sounds				
Histories		CO2 Monitoring		Upper Airway Breath Sounds				
Allergies	▲ Add	Aerosol/MDI/DPI The	erapy	⊿ RESPIRATORY Respiratory Symptoms Reported				
Allergies		Mobilization of Secreti	ope	Shortness of Breath Indicator				
Diagnoses and Problems		Response To Therapy	/	Respirations				In Error 📻
		Respiratory Evaluation	n Scores	Indrawing Severity				5
CareConnect		 Arterial Line 		Indrawing Location				
		Specialty Gas Manage	ement	Oxygen Activity				
Clinical Research		Bronchoscopy	n-exsumation MIE	Oxygen Therapy				
Form Browser		Provider Notification	-	Mask/Delivery Type				
Growth Chart		Adult Education		Humidification Temperature	DegC			
		Pediatric Education		Humidifier Water Level				

3 A comment can be added to any cell to provide additional information. For example, you want to clarify that the Breath Sounds Auscultated that you documented with the patient sitting upright. Let's add this comment.

Add a Comment:

- 1. Right click on the documented value for Breath Sounds Asucultated, Anterior only
- 2. Select Add Comment

CSTLEARNING, DEMOTHETA - 700008216 O	pened by TestUser, RespiratoryTherapist						
Task Edit View Patient Chart Links Options Documentation Orders Help							
🗄 🚨 Multi-Patient Task List 🖃 Message Centre	👫 CareCompass 👫 Clinical Leader Organizer 👫 Ambu	latory Organizer 🛔 Patient List 🏢 Schedule 😹 Staff	Assignment 🎬 LearningLIVE 📮 🤅 😋 CareConnect 🦿	PHSA PACS 🕄 VCH and PHC PACS 🕄 MUSE			
🗄 🔀 Tear Off 📲 Exit 🎬 AdHoc 💵 Medicatio	n Administration 🔒 PM Conversation 👻 🕞 Communicat	🔹 🛨 Add 👻 🕮 Scheduling Appointment Book 📻 🛙	Documents 📾 Discern Reporting Portal 🚱 iAware 🝦				
🗄 🔇 Patient Health Education Materials 🔇 Poli	cies and Guidelines 🔇 UpToDate 🦕						
CSTLEARNING, DEMOTHETA				🔶 List 🔶 🎢 Recent 🗸 Name			
CSTLEARNING, DEMOTHETA	DOB:01-Jan-1937 MRN:700008216	Code Status:Attempt CPR, Full Code	Process:Falls Risk Disease	Add Result			
Allergies: penicillin, Tape	Gender:Male PHN:9876469824	Dosing Wt:	Isolation:	View Result Details dicine-Ph			
Menu	🖌 🔪 🔹 🏦 Interactive View and I&O			View Comments 25			
Respiratory Therapy View				View Flag Comments			
Mental Health Summary				View Reference Material			
Ordarr Add	🗙 Respiratory Therapy	<	Last 24 Hours	View Order Info			
	Breath Sounds Assessment			View History			
Single Patient Task List	 RESPIRATORY Bespiratory Description/Assessment 	Find Item 👻 🔤 Critical 🔛 High	🔲 Low 🔄 Abnormal 🔄 Unauth 🔄 Flag	Modify			
MAR	Apnea/Bradycardia Episodes			Unchart			
Interactive View and I&O	Airway Intubation Assessment		06-Dec-2017	Change Date/Time			
Results Review	Complex Weaning Trial	⊿ Breath Sounds Assessment	S 14.51751 15.50751 12.55751 11.5975	Add Comment 2			
Documentation 🕂 Add	Ventilation	Breath Sounds Auscultated	Anterio	1 Duplicate Results			
Medication Request	Ventilation Assessment	All Lobes Breath Sounds	Clear	Clear			
LEste des	CO2 Monitoring	Right Upper Lobe Breath Sounds					
	Aerosol/MDI/DPI Therapy	Right Middle Lobe Breath Sounds		View Defaulted Info			
Allergies 🖬 Add	Hemodynamic Measures	Left Lower Lobe Breath Sounds		View Calculation			
Diagnoses and Problems	Response To Therapy	Apex Breath Sounds		Recalculate			
	Respiratory Evaluation Scores	Base Breath Sounds		View Interpretation			
CareConnect	🖌 Arterial Line	Upper Airway Breath Sounds		Reinterpret			
	Specialty Gas Management	A RESPIRATORY		Create Admin Note			
Clinical Research	Bronchoscopy	Shortness of Breath Indicator		Chart Details			
Form Browser	Provider Natification	Respirations		Not Done			
Growth Chart	Adult Education	Indrawing Severity		0			
Lines/Tubes/Drains Summary	Pediatric Education	Chest Motion		Flag			
MAR Summan/	Intake And Output	Oxygen Activity		Flag with Comment			
-	V Procedural Sedation	Oxygen Therapy		Unflag			
				Unflag with Comment ember-20:			

3. The comment window opens, type = Patient sitting upright and click **OK**.



Comment - CSTLEARNING, DEMOTHETA - 700008216	×
Breath Sounds Auscultated: Anterior only	
Comment	
Patient sitting upright	
OK	Cancel 3

4. An icon indicating the documentation has been modified \uparrow will display and another icon indicating comments can be found \Box will display in the cell. Right-click on the cell and select **View Comments...** to view a comment.

P CSTLEARNING, DEMOTHETA - 700008216 Opened by TestUser, RespiratoryTherapist							
Task Edit View Patient Chart Links Options Documentation Orders Help							
22 Multi-Patient Task List 🔄 Message Centre 👫 CareCompass 👫 Clinical Leader Organizer 🙀 Ambulatory Organizer 🖕 Patient List 🎆 Schedule 🍇 Staff Assignment 👫 LearningLIVE 🚽 📆 CareConnect 📆 PHSA PACS 📆 VCH and PHC PAC							
inistration 🔒 PM Conversation 👻 급 Communicat	e 👻 🕂 Add 👻 🕮 Scheduling Appointment Book 📻 [Documents 📾 Discern Reporting Portal 🕞 iAware 💷					
d Guidelines 😭 UpToDate 🚊							
			🗲 List 🔿 🎢 Recent -				
DOB:01-Jan-1937 MRN:700008216 Age:80 years Enc:700000015058	Code Status:Attempt CPR, Full Code	Process:Falls Risk Disease:	Location:LGH 4E; 406; 01 Enc Type:Inpatient				
Gender:Male PHN:9876469824	Dosing Wt:	Isolation:	Attending:TestUser, Gener				
🔹 🔹 👘 Interactive View and I&O			🗇 Full screen 🛛 🛱				
Respiratory Therapy		Last 24 Hours					
Breath Sounds Assessment BESPIRATORY		Disc. Different Discuth Disc	0 A-1 0 A				
Respiratory Description/Assessment	- Critical High	Low Abhormal Onauth Flag	And Or				
Apnea/Bradycardia Episodes	×. 54	05 Dec 2017					
Airway Intubation Assessment Airway Management		14:55 PST 13:56 PST 12:33 PST 11:39 PST	10:00 PST				
Complex Weaning Trial	⊿ Breath Sounds Assessment						
Ventilation	Breath Sounds Auscultated	Ante 🔺	4				
Ventilation Assessment	All Lobes Breath Sounds	Clear					
CO2 Monitorion	Right Upper Lobe Breath Sounds						
Aerosol/MDI/DPI Therapy	Right Middle Lobe Breath Sounds						
Hemodynamic Measures	Left Lower Lobe Breath Sounds						
	y restuer, respiratory interprist ins: Documentation: Orders: Help recompass: Clinical Lader Organizer & Ambk nistration @ PM Conversation ~ @ Communicat I Guidelines @ UpToDate DOB:01-Jan-1937 MRN-700008216 Age:80 years Enc/700000015058 Gender:Male PHN-9876469824	y entruiser, keepinatory interaptor ins: Documentation Orders Help recompass Clinical Leader Organizer Ambulatory Organizer Add Patient List Schedule Scheduling Appointment Book Guidelines Physion Scheduling Appointment Book Code Status:Attempt CPR, Full Code Ages 80 years Enc:P000000015058 Code Status:Attempt CPR, Full Code Ages 80 years Enc:P000000015058 Code Status:Attempt CPR, Full Code Dosing Wt: Code Status:Attempt CPR, Full Code Ages 80 years Enc:P000000015058 Code Status:Attempt CPR, Full Code Ages 80 years Enc:P000000015058 Code Status:Attempt CPR, Full Code Ages 80 years Enc:P000000015058 Code Status:Attempt CPR, Full Code Find Item Code Status:Attempt CPR, Full Code Code Status:Attempt CPR, Full Code Find Item Code Status:Attempt CPR, Full Code Code Status:Attempt CPR, Full Code Find	y lexture, respiratory interapts ns: Documentation Orders Help Compass II Clinical Leader Organizer II Ambulatory Organizer II Patient List III Schedule III Staff Assignment III LearningLIVE III Concerning Portal III Clauser IIII DOB01-Jan-1937 MRN-700008216 Code StatusAttempt CPR, Full Code ProcessFalls Risk Disease: CendersMale PHN-9876469824 Dosing Wt Isolation:				

- Results can be modified and uncharted within iView
- A comment can be added to any cell in iView



PATIENT SCENARIO 5 – PowerForms

Learning Objectives

At the end of this Scenario, you will be able to:

- Document in PowerForms through tasks or on an as needed (AdHoc) basis
- View, modify and unchart existing PowerForms

SCENARIO

In this scenario, another method of charting called PowerForms will be covered.

As a Respiratory Therapist you will be completing the following activities:

- Documenting on a new PowerForm through a task
- Opening and documenting on a new PowerForm on an as needed or AdHoc basis
- Viewing an existing PowerForm
- Modifying an existing PowerForm
- Uncharting an existing PowerForm

1



Activity 5.1 – Document in PowerForms through Tasks

PowerForms are the electronic equivalent of paper forms currently used to chart patient information.

Data entered in **PowerForms** can flow between iView flowsheets, Clinical Notes, the Problem List, Allergy Profile, and Medication Profile.

Note: Do not attempt the next 4 steps in the system and instead review the screenshot below.

Review the screenshot below for a general overview of **PowerForm** features:

- 1. Title of the current **PowerForm** you are documenting on
- 2. List of sections within the **PowerForm** for documentation
- 3. A red asterisk denotes sections that have required field(s)
- 4. Required field(s) within the **PowerForm** will be highlighted in yellow. You will be unable to sign a **PowerForm** unless all required fields are completed.

Admission Histony Adult CSTLE				
*Performed on: 27-Nov-2017	▼ 1422 ▲ PST			By: TestUser, Nurse
General Information				
Barriers to Communication	Violence and Aggressi	on Screening		
Nolence and Aggression Screening	Violence and Aggression Screening	Additional Information		
Review Violence Risk Alert	No risk assessed at this time		- -	
* Advance Care Planning	Previous history of violent behaviour			E
3 Delirium Screen	Current physical aggression or violence			
CSSRS Quick Screen	Other:			
CAGE-AID Assessment	4			
Nicotine Dependence Assessment	If patient has a provious history of or curr	ant indication of violence	or aggression, complete the remainder of the form as applicable	
Psychosocial	If patient has a previous history of or curre		or aggression, complete the remainder of the form as applicable.	
Nutrition	Current Patient Presentation		Current Presentation Additional Information	
Social History	Attack on object		E	
Procedure History	Instrument of harm/weapon			
Family History	Physical harm (e.g. strikes, grabs) Physical threat			
	Unwanted sexual touch			
	Verbal aggression with another behaviour or history	of violence		
	Verbal or written threat of physical violence			
2				
	Perceived Staff Approach Stressors		Perceived Staff Stressors Additional Information	_
	Enforcing or authoritative			
	Bushed or fast pace			
	Sudden or unanticipated approach			
	Task focus			
	Unwelcome touch			

2



One way to access certain **PowerForms** will be through a task that appears on the **SPTL/MPTL**.

Now let's practice how to chart in a **PowerForm** that shows up as a task in the **SPTL** and **MPTL**. A 6 Minute Walk test has been ordered by the Physician.

- 1. Click on SPTL from the Menu. Once the SPTL displays, you should see the Six Minute Walk task.
- 2. Double click on the Six Minute Walk Task to open the associated PowerForm.

CSTLEARINING, DEMOTHETA - 700008210 Opt	ened by TestOser, Respiratory	inerapist			
Task Edit View Patient Chart Links	Task List Options Help				
🗄 🔐 Multi-Patient Task List 🖃 Message Centre	🎬 CareCompass 🛛 🌃 Clinical	Leader Organizer i Ambula	tory Organizer 🛔 Patient List 🏢 Schedule 😂 S	taff Assignment 🎬 LearningLIVE 🝦 🔅 😋 CareCo	onnect 🔇 PHSA PACS 🔇 VCH and PHC PACS 🔇 MUSE
🗄 📰 Tear Off 🏨 Exit ष AdHoc 💵 Medication	Administration 🔒 PM Conv	ersation 👻 🕞 Communicate	🔹 🕂 Add 👻 🖺 Scheduling Appointment Book 🛛	🗐 Documents 📾 Discern Reporting Portal 💽 i	Aware 🝦
🕴 🕄 Patient Health Education Materials 🕄 Polici	ies and Guidelines 馢 UpToD	ate 🖕			
CSTLEARNING, DEMOTHETA 🛛 🛛					← List → 🎢 Recent - Name
CSTLEARNING, DEMOTHETA	DOB:01-Jan-1937 Age:80 years	MRN:700008216 Enc:7000000015058	Code Status:Attempt CPR, Full Code	Process:Falls Risk Disease:	Location:LGH 4E; 406; 01 Enc Type:Inpatient
Allergies: penicillin, Tape	Gender:Male	PHN:9876469824	Dosing Wt:	Isolation:	Attending:TestUser, GeneralMedicine-
Menu 7	< > 🕘 者 Singl	e Patient Task List			(🗆) Full screen 🛛 👼 Print 🛛 🥹
Respiratory Therapy View)			
Mental Health Summary	· · · · ·				CT.
Orders 🕂 Add		`	07-December-2017 06:30 Thurs	day PST - 07-December-2017 19:45 Thursday P	51
Single Patient Task List	Scheduled Patient Care	Ventilators Oxygen Therap	Pulmonary Procedures Ambulatory		
MAR	Task retrieval completed				
Interactive View and I&O	Task Status Sc	heduled Date and Time Task	Description Order Details		
Results Review	60 Pending 07	-Dec-2017 10:24 PST Six N	Ainute Walk 07-Dec-2017 10:24 PST,	Adjunct: Room Air, Routine	2
Documentation 🕂 Add					
Medication Request					
Histories					
Allergies 🕂 Add					
Diagnoses and Problems					
CareConnect					
Clinical Research					
Form Browser					
Growth Chart					
Lines/Tubes/Drains Summary					
MAR Summary					

- 3. After you review the contents of the form, fill in the following fields:
 - Peripheral Pulse Rate = 70 bpm
 - **SpO2** = 94%
- 4. To complete the **PowerForm**, click the **green check mark** icon ✓ to sign the documentation.



🛇 🕅 🐔 🔹 🛛							
med on: 07-Dec-2017	÷ 🔹 1027	PST				By: Testl	Jser, RespiratoryThera
nute Walk Six M	linute Wa	alk Test					
Heart Ra	te Monitored	Peripheral Pulse	Rate Sp02	* 3			
Start Tim	e	Stop	Time	Tota	al Time]	
Height	cm	Weight	Age	Prec	dicted Distance]	
SpO2	Min Walk SpD2	6 Min Walk Sp02	6 Min Walk Sp02	6 Min Walk Sp02 6	Min Walk SpD2 6	Min Walk Sp02	
SpO2	Min Walk SpO2 n 1	6 Min Walk SpO2 Min 2	6 Min ₩alk SpO2 Min 3	6 Min Walk Sp02 6 Min 4 M	i Min Walk SpO2 6 Iin 5 M	Min Walk SpO2 lin 6	
Sp02 6 H Min 5p02	Min Walk SpO2 n 1 6 Min Walk O2 Min 1	6 Min Walk SpD2 Min 2 Flow 6 Min Walk 0: Min 2	6 Min Walk Sp02 Min 3 2 Flow 6 Min Walk 02 Min 3	6 Min Walk Sp02 6 Min 4 M Store (6 Min Walk 02 Fl Min 4	i Min Walk Sp02 6 Iin 5 M Iow 6 Min Walk 02 FI Min 5	Min Walk Sp02 lin 6 ow 6 Min Walk 02 Min 6	Flow
Sp02 Sp02 Sp02 O2 Flow Heart Rat	Min Walk Sp02 n 1 6 Min Walk 02 Min 1 te	6 Min Walk Sp02 Min 2 Flow 6 Min Walk 0; Min 2	6 Min Walk Sp02 Min 3 2 Flow 6 Min Walk 02 Min 3	6 Min Walk Sp02 6 Min 4 M Flow 6 Min Walk 02 Fl Min 4	Min Walk Sp02 6 Iin 5 M Min 5 Min 5	Min Walk Sp02 in 6 ow 6 Min Walk 02 Min 6	Flow
Sp02	Min Walk Sp02 n 1 6 Min Walk 02 Min 1 te 6 Min Walk Rate Min 1 e	6 Min Walk Sp02 Min 2 Flow 6 Min Walk 0: Min 2 Heart 6 Min Walk Rate Min 2	6 Min Walk Sp02 Min 3 2 Flow 6 Min Walk 02 Min 3 k Heart 6 Min Walk Rate Min 3	6 Min Walk Sp02 6 Min 4 M Plow 6 Min Walk 02 Flow 6 Min 4 Heart 6 Min Walk H Rate Min 4	i Min Walk SpD2 6 Iin 5 Min Win 5 Min Walk 02 FI Min 5 eart 6 Min Walk H Rate Min 5	Min Walk Sp02 in 6 ow 6 Min Walk 02 Min 6 eart 6 Min Walk Rate Min 6	Flow

- After signing it, the **PowerForm** will close and your screen will display the **SPTL** again. The **Chart Done** icon is now next to the task.
- 6. Click the **Refresh** icon and the task will fall off both the **SPTL** (and **MPTL**).

CSTLEARNING, DEMOTHETA - 700008216 Ope	ned by TestUser, RespiratoryTherapist	
Task Edit View Patient Chart Links	Task List Options Help	
🖁 🔐 Multi-Patient Task List 🖃 Message Centre	🖫 CareCompass 🎬 Clinical Leader Organizer 🎬 Ambulatory Organizer 🎍 Patient List 🎬 Schedule 🧟 Staff Assignment 🎬 LearningLIVE 🍦 🗄 🖏 CareConnect 🖏 F	HSA PACS 🕄 VCH and PHC PACS 🕄 MUSE
🗄 🎛 Tear Off 拍 Exit 🎬 AdHoc 🎟 Medication /	Administration 🔒 PM Conversation 🔹 🚰 Communicate 🔹 💠 Add 🔹 🕮 Scheduling Appointment Book 🗑 Documents 🍙 Discern Reporting Portal 💽 iAware 🝦	
🗄 😋 Patient Health Education Materials 🔞 Policie	s and Guidelines 🔃 UpToDate 🝦	
CSTLEARNING, DEMOTHETA 🛛 🗷		🔶 List 🔿 🖓 Recent 🔹 Name 🔷 🗸
CSTLEARNING, DEMOTHETA	DOB:01-Jan-1937 MRN:700008216 Code Status:Attempt CPR, Full Code Process:Falls Risk	Location:LGH 4E: 406; 01
Allergies: penicillin, Tape	Ageisu years Enc./00000015058 Disease: Gender:Male PHN:9876469824 Dosing Wt: Isolation:	Enc Type:inpatient Attending:TestUser, GeneralMedicine-Physician,
Menu 7	< 🖂 🛉 Single Patient Task List	🗇 Full screen 🖷 Print 🗈 11 minutes ago
Respiratory Therapy View		0
Mental Health Summary		
Orders 🕂 Add	07-December-2017 06:30 Thursday PST - 07-December-2017 19:45 Thursday PST	
Single Patient Task List	Scheduled Patient Care Ventilators Oxygen Therapy Pulmonary Procedures Ambulatory	
MAR	Task retrieval completed	
Interactive View and I&O	Task Status Scheduled Date and Time Task Description Order Details	
Results Review	🖌 🕼 Complete 07-Dec-2017 10:24 PST Six Minute Walk 07-Dec-2017 10:24 PST, Adjunct: Room Air, Routine 5	
Documentation 🕂 Add		
Medication Request		
Histories		
Allergies 🕂 Add		
Diagnoses and Problems		



Key Learning Points PowerForms are electronic forms used to chart patient information PowerForms may be broken up into several sections. Section headings are displayed to the left side of PowerForm

Certain PowerForms can be accessed through a task on SPTL and MPTL



Activity 5.2 – Opening and Documenting on PowerForms on an As Needed Basis

Throughout your shift, you may also need to document in **PowerForms** that are not tasked from your **SPTL** or **MPTL**. The **AdHoc** folder MAdHoc is an electronic filing cabinet that allows you to find any **PowerForm** on an as needed basis.

In this example, we are going to document on the **Blood Gas Collection** PowerForm.

To open and document on a new PowerForm:

1. Click the **AdHoc** button MadHoc from the **Toolbar**.

CSTLEARNING, DEMOTHETA - 700008216 Opened by TestUser, RespiratoryTherapist	-
Task Edit View Patient Chart Links TaskList Options Help	
🙀 Multi-Patient Task List 🔤 Message Centre 👔 CareCompass 🐒 Clinical Leader Organizer 🐩 Ambulatory Organizer 🐐 Patient List 📰 Schedule 📾 Staff Assignment 🎬 LearningLIVE 🚽 🛱 CareConnect 🛱 PHSA PACS 🛱 VCH and PHC PACS 🦓 N	IUSE
🗄 🖫 Tear Off 📲 Eah 📷 AdHoc 🚺 Medication Administration 🔮 PM Conversation = 🕞 Communicate = 💠 Add = 🍏 Scheduling Appointment Book, 📆 Documents 📾 Discern Reporting Portal 💽 Havare	
E 🗘 Patient Health Education Materials 🛱 Policies and Guidelines 🛱 UpToDate 💡	

- 2. Select the **Blood Gas Collection** PowerForm by clicking on the **box** beside the form name.
- 3. Click Chart.

Note: The **Ad Hoc Charting** window contains two panes. The left side displays folders that group similar forms together. The right side displays a list of **PowerForms** within the selected folder.

P Ad Hoc Charting - CSTLEARNING, D	IEMOTHETA	
 ➢ Respiratory ➢ All Items 	 B 6 Minute Walk B Brain Death/Aprea Assessment ♥ 9 Blood Gas Collection ■ Electrical Device Safety Checklist ■ Pre-Transfer/Transport Checklist ■ Spirometry Assessment ■ Surfactant Administration Charting ■ Transport Ticket 	
	Chart	3 Close

- 4. Fill in the following fields:
 - Draw Date/Time = T for Today's Date and N for Now/current time
 - **Draw Type** = Arterial



Note: Additional documentation that was previously greyed out turns white for additional charting.

- **Arterial Sites** = *Radial artery*
- Site Modifiers = Left
- 5. To complete **PowerForm**, click the **green check mark** icon \checkmark to sign the documentation.

P RT Blood Gas C	ollection - CSTLEARNING, DEMOTHETA			
✓ 5 ⊗ [∞]	⊼ + + ■ 🖾 🗎			
*Performed on:	07-Dec-2017 🐳 1052 📮 PST			
V RT Blood Gas Co	Blood Gas Collection			
	Draw Date/Time	Draw Type		
	07-Dec-2017 🖈 💌 1063 🌲	Arterial Cord Arterial Venous Cord Venous Mixed Venous Pleural Iluid Capillary Body Fluid		
	Arterial Sites	Venous & Mixed Sites	Capillary Sites	
	Brachial attery Darsalis Pedis Femoral attery Posterial tibial attery Redul attery Ulhar attery Uhar attery Umbilical attery catheter	Antecubital Brachial vein Femoral vein Umbilical vein catheter	C Arm C Earlobe Finger Foot Hand Heel Toe	
	Site Modifiers	Redraw	Comments	
		Redraw Reason	4	

Note: using the Save Form \blacksquare icon is discouraged because no other user will be able to view your documentation until it is signed using the green check mark icon \checkmark .

- The AdHoc button ^{MAdHoc} in the Toolbar allows you to locate a new Powerform on an as needed basis.
- Always Sign the PowerForm using green check mark 🖌 so that other users can see it on the chart.



Activity 5.3 – Viewing an Existing PowerForm

- Throughout your shift, you may need to view previously documented **PowerForms**. To view a **PowerForm**:
 - 1. Select Form Browser in the Menu
 - 2. For a **PowerForm** that has been modified, (**Modified**) appears next to the title of the document
 - 3. For a **PowerForm** that has been entered incorrectly and has been uncharted, (**In Error**) appears next to the title of the document
 - 4. For a **PowerForm** that has been completed and signed, (**Auth (Verified)**) appears next to the title of the document
 - 5. When a **PowerForm** is saved, it is not complete and cannot be viewed by another user. (**In Progress**) appears next to the title of the document.

CSTLEARNING, DEMOTHETA · 700002071 O	pened by TestUser, Nurse					
Task Edit View Patient Chart Links	Options Help					
🗄 🎬 CareCompass 📲 Clinical Leader Organizer	r 🎍 Patient List 🚨 Multi-Patie	nt Task List 📲 Discharge Das	shboard 🔉 Staff Assignment 👫 Le	arningLIVE _		
CareConnect 🕄 PHSA PACS 🕄 VCH and	PHC PACS 🐧 MUSE 🐧 Form	Fast WFI 💡 🔀 Tear Off 🗐	Exit Medication Ad	ninistration 🔒 PM Conversation 👻 🗟 Medical Record Request 🕂 A	dd 👻 📻 Documents 🛗 Scheduling Appointment	Book "
🕄 😋 Patient Health Education Materials 😋 Poli	cies and Guidelines 🔞 UpToDa	te c				
CSTLEARNING, DEMOTHETA					🔶 List 🔿 🖀 Recent 👻 Name	- Q
CSTLEARNING, DEMOTHETA	DOB:17-Oct-1977	MRN:700002071	Code Status:	Process:Violence Risk,Falls Risk	Location:	
Allernien Henreter Descute Suider W	Age:40 years	Enc:700000015536	Desine 10047 he	Disease:	Enc Type:Inpatient	
Menu	Form	Provisor	Dosing WL47 Kg	isolation.	Ti Full screen	0 minutes ano
Patient Summary		DIOWSEI				o minutes ago
Orders Add			Wednesday, November	22, 2017 PST- Tuesday, November 28, 2017 PST(Clinical Kange)		
Single Patient Task List	Sort by: Form	-				
MAR						
Interactive View and I&O	Admission History	Adult				
Results Review	- E 22-Nov-2017 10:	07 PST (Modified) - Multi Con	tributors 2			
Documentation 🕂 Add	Basic Admission Int	ormation 44 PST (In Error) - Multi Contri	ibutors 3			
Medication Request	22-Nov-2017 08:	44 PST (Auth (Verified)) - Test	CST, Nurse3 CD 4			
Histories	Nursing Discharge	Checklist 52 DST (In Progress) - Testi ise	r Nurse 6			
Allergies 🕂 Add		····				
Diagnoses and Problems						
CareConnect						
Clinical Research						
Form Browser 1						
Growth Chart						
Immunizations						
Lines/Tubes/Drains Summary						
MAR Summary	•					
					PRODBC TEST.NURSE Monday, 27-November-2	2017 16:02 PST

- Existing PowerForms can be accessed through the Form Browser.
- A PowerForm can have different statuses (e.g. Modified, In Error, Auth Verified and In Progress).



Activity 5.4 – Modify an Existing PowerForm

It may be necessary to modify **PowerForms** if the information was entered incorrectly.

Note: If new or updated information needs to be documented, it is recommended to start a new **PowerForm** and not to modify an already existing **PowerForm**.

Let's modify the 6 Minute Walk Test form.

- 1. Right-click on the most recently completed 6 Minute Walk Test form within Form Browser
- 2. Select Modify



3. Change the Peripheral Pulse Rate from 70 to 90.

P 6 Minute Walk - CSTLEARN	ING, DEMOTHETA			
🗸 🖃 🛇 🕅 🛧 🕈				
*Performed on: 10-Dec-2017	🔹 🔹 1728 🌲 PST			By: TestCD, RespiratoryTherapist
Six Minute Wal	Minute Walk Te	st		n in the second s
Heart R	ate Monitored Periphe	ral Pulse Rate Sp02		
	bpm 90	bpm 3	X	
Start Ti	me	Stop Time	Total Time	
жуляция				
Height	Weight	Age	Predicted Distar	ice
	cm	kg		

- 4. Click green check mark \checkmark to sign the documentation.
- 5. When you return to this document in the form browser, it will show the document has been modified.





Key Learning Points

A document can be modified if needed.

A modified document will show up as (Modified) in the Form Browser.



Activity 5.5 – Uncharting an Existing PowerForm

2

It may be necessary to unchart an existing **PowerForm** if, for example, the **PowerForm** was completed on the wrong patient or it was the wrong **PowerForm**. Let's say the **RT Blood Gas Collection** form was documented in error.

To unchart the **PowerForm**, within **Form Browser**:

- 1. Right-click **RT Blood Gas Collection**
- 2. Select Unchart



- 3. Enter a reason for uncharting in the comment box of the new window = Wrong PowerForm
- 4. Click green check mark < to sign the documentation.



5. Uncharting the form will change the status of all the results associated with the form to **In Error**. A **red-strike** through will also show up across the title of the **PowerForm**.





- A document can be uncharted if needed
- An uncharted document will show up as In Error in the Form Browser



PATIENT SCENARIO 6 – Additional Charting

Learning Objectives

At the end of this Scenario, you will be able to:

- Document and unchart a narrative note
- Review documentation done in a note or text format of a Powerform

SCENARIO

In the previous scenarios, you completed charting in iView and PowerForms. Now you will learn about documenting in narrative notes, as well as reviewing notes completed by other disciplines.

As a Respiratory Therapist you will be completing the following activities:

- Document a narrative note
- Unchart a narrative note
- Review documentation done in a note or text format of a Powerform



Activity 6.1 – Document a Narrative Note

1

There may be instances where **iView** and **Powerforms** do not capture all the information during a patient event and you may want to supplement with a narrative note.

To start this documentation, click + Add + Add next to **Documentation** on the **Menu**

- 1. Under Note Type List Filter, select Position
- 2. Under Type, select Respiratory Therapy Note
- 3. Under Title, type = Respiratory Therapy Note
- 4. Under Note Templates, select Free Text Note

Note: It is recommended that Free Text Notes are given specific titles (step #3) to help identify them rather than using the generic title of Free Text Note.

5. Click OK

CSTLEARNING, DEMOTHETA - 700008216 Ope	ned by TestUser, RespiratoryThera	pist				- 6 💌
Task Edit View Patient Chart Links	Documentation Help					
🏭 Multi-Patient Task List 🖃 Message Centre 🛔	🌃 CareCompass 👫 Clinical Leade	er Organizer i Ambulatory Or	ganizer 🛔 Patient List 🧰 Schedule 🔉 Staff Assign	ment 🎬 LearningLIVE 🖕 🤅 😋 CareConnect 😋 PHSA PACS 😋	VCH and PHC PACS 😋 MUSE 🜊 FormFast \	wfi 🖕
🔀 Tear Off 🗐 Exit 🎬 AdHoc 🎟 Medication /	Administration 🔒 PM Conversatio	on 👻 🚰 Communicate 👻 🕂 A	dd 🔹 👹 Scheduling Appointment Book 👩 Docume	ents 🗃 Discern Reporting Portal 💽 iAware 🖕		
🕄 🕄 Patient Health Education Materials 🔍 Policie	es and Guidelines 🕄 UpToDate 🖕					
CSTLEARNING, DEMOTHETA					← List → 🎢 Recent - Name	e ب کر
CSTLEARNING, DEMOTHETA	DOB:01-Jan-1937	MRN:700008216		Process:Falls Risk	Location:LGH 4E; 406; 01	
Allergies: penicillin, Tape	Gender:Male	PHN:9876469824	Dosing Wt:	Isolation:	Attending:SYSTEM, SYSTEM Cerner	
Menu 🕈	< > - 者 Document	tation			(D) Full screen 🛛 🗐 Print	€ 0 minutes ago
Respiratory Therapy View	💠 Add 🛄					
Mental Health Summary	New Note X List					4 1
Orders 🕂 Add						
Single Patient Task List	Note Type List Filter:	_	All (63) Favorites (0)		Q Search	
MAR	Position	✓ 1				
Interactive View and I&O	*Type:		*Note Templates	Description		
Results Review	Respiratory Therapy Note	✓ 2				*
Documentation 🕂 Add			Discharge - ONC Transfer of Care	Discharge - UNC Transfer of Care		
Medication Request	Title:		Discharge Summary	Discharge Summary		
Histories	Respiratory Therapy Note	3	🚖 ED Handoff Note	ED Handoff Note		=
Disgnasses and Broklams	*Date:		👾 ED Note	ED Note		
	11-Dec-2017	1210 PST	👘 ED Note – WorksafeBC	ED Note – WorksafeBC		
CareConnect			😭 ED Note Simple	ED Note Simple Template		
Clinical Research	*Author: TestUser. RespiratoryTherap	ist	🚖 ED Supervision/Handoff Note	ED Supervision/Handoff Note		
Form Browser			Family Conference Note	Family Conference Note Template		
Growth Chart			👚 Free Text Note	Free Text Note Template		4
Lines/Tubes/Drains Summary			General Surgery Progress/SOAP Note	General Surgery Program / SOAP Note Template		
MAR Summary			A rest of the rest of the rest of the	deneral surgery Frogress/SOAP Note Template		
Medication List + Add			ICU Admission/Consultation Note	ICU Admission/Consultation Note Template		
Patient Information					ОК	5 ancel

6. A blank Free Text Note will open. Within this note, document patient assessments or care which are not readily captured within **iView** or **PowerForms**.

Type = Patient desaturates immediately whenever nasal cannula is removed. Attempts to wean oxygen have been unsuccessful over the afternoon.

Note: Ensure documentation is accurate as there is no ability to edit this information once you have clicked the sign/submit button. You are only able to modify this charting by inserting an addendum.



7. Click Sign/Submit

< > 🔸 Documentation	[II] Full screen	Print	⋧ 2 minutes ago
+ Add (m) Add (m) X List			4 Þ
Patient desaturates immediately whenever nasal cannula is removed. Attempts to wean oxygen have been unsuccessful over the afternoon.			
Note Details: Respiratory Therapy Note, TestUser, RespiratoryTherapist, 11-Dec-2017 14:41 PST, Respiratory Therapy Note	7 we s	Save & Close	Cancel

8. Verify the information in the Sign/Submit Note window is correct.

9. Click Sign

Sign/Submit Note			
*Type: Respiratory Therapy Note *Author: TestUser, RespiratoryTherapist @ Forward Options Create provider letter	Note Type List Filter: Position Title: Respiratory Therapy Note	*Date: 11-Dec-2017	1324 PST 8
Favorites Recent Relationships Q Pro	rovider Name		
Contacts Image: Contact of the second seco	Recipients	Comment	Sign Review/CC
			Sign 9 iancel

10. Click **Refresh C** . The **Respiratory Therapy Note** that you just charted can now be viewed within the Documentation section.



< 🖂 - 🛔 Documer	ntation					[🗆] Full screen	Print .	€ 13 minutes a
🕂 Add 🛛 🔳 Submit 🚚 🏔	Forward 🔳 Provider Letter 💕 Mod	dify 🐂 🕊 🌪 📰 🖿 In Error 🔢 Prev	view 🛛 🐚				_	
List								۱ ۵
Display : All	v					👚 Pre	evious Note	🐥 Next Note
Service Date/Time V Service Date/Time V	ubject	Туре	Facility	Author; Contributor(s)				*
11-Dec-2017 13:24:00 P Re	espiratory Therapy Note	Respiratory Therapy Note	Pending Refresh	TestUser, RespiratoryTh				
11-Dec-2017 12:18:00 P M	fedication Administration Follow Up	Medication Administration Follow Up-Text	LGH Lions Gate	TestUser, ICU-Nurse				
10-Dec-2017 17:28:00 P 6	Minute Walk	6 Minute Walk - Text	LGH Lions Gate	TestCD, RespiratoryThe				
07-Dec-2017 11:55:00 P Re	espiratory Therapy Note	Respiratory Therapy Note	LGH Lions Gate	TestUser, RespiratoryTh				
07-Dec-2017 10:52:00 P RT	T Blood Gas Collection	RT Blood Gas Collection - Text	LGH Lions Gate	TestUser, RespiratoryTh				
07-Dec-2017 10:27:00 P 6	Minute Walk	6 Minute Walk - Text	LGH Lions Gate	TestUser, RespiratoryTh				
04-Dec-2017 17:09:00 P Fr	ree Text Note	Nursing Shift Summary	LGH Lions Gate	TestUser, Nurse				
								Ξ
								-
•	III			÷.	·			+
<< Previous Next >>								

- In circumstances where iView and Powerforms do not capture all the information that needs to be documented, you may want to supplement with a narrative note.
- To initiate a narrative note, click +Add +Add next to Documentation
- It is recommended that Free Text Notes be given specific titles to help identify the note
- Click Sign to complete a new narrative note



Activity 6.2 – Unchart a Narrative Note

- It may be necessary to unchart a document if the information was entered on the wrong patient. Let's unchart the **Respiratory Therapy Note** that you previously documented. Under the **List** tab on the **Documentation** page:
 - 1. Click on **Respiratory Therapy Note**
 - 2. Click In Error



- 3. Enter a reason for uncharting in the comment box of the new window = Wrong patient
- 4. Click OK

P Result Uncharting - CSTLEARNING, DEMOTHETA - 700008216	x
In Error Comment - Optional	
Comments:	
Wrong patient	
3	
OK 4 Cance	el

5. The document will still appear in the Document tab but will now be under the status of IN



ERROR.

PVNOTES	8	ן
	The document you are about to view has been marked as IN ERROR. Do you want to continue viewing the result?	
	Yes No	

If you click yes, you can view the original document but it will have a header with *In Error Report* as well as the reason on the top of the document.

< 🔌 👻 者 Documentation			(D) Full screen 👘 Print 🛛							
🕂 Add 📄 Sign 🐊 🛋 Forward 🔳 Provider Letter 📘 Modify	🐚 🛛 🗣 🖬 🖬 In Error 🔢 Preview 🦤									
List										
Display: [Al v]										
Service Date/Time Subject	Type Facility	Author; Contributor(s)	* In Error Deport *							
11-Dec-2017 16:52:00 P Respiratory Therapy Note	Respiratory Therapy Note LGH Lions	Gate TestUser, RespiratoryThe								
11-Dec-2017 13:24:00 P Respiratory Therapy Note	Respiratory Therapy Note LGH Lions	Gate TestUser, RespiratoryThe	Result Comment by TestUser, RespiratoryTheranist on Monday, 11-December-2017, 16:53 PST							
11-Dec-2017 12:18:00 P Medication Administration Follow Up	Medication Administration Follow Up-Text LGH Lions	Gate TestUser, ICU-Nurse	Wrong patient							
10-Dec-2017 17:28:00 P 6 Minute Walk	6 Minute Walk - Text LGH Lions	Sate TestCD, RespiratoryThere								
07-Dec-2017 11:55:00 P Respiratory Therapy Note	Respiratory Therapy Note LGH Lions	Gate TestUser, RespiratoryThe								
07-Dec-2017 10:52:00 P RT Blood Gas Collection	RT Blood Gas Collection - Text LGH Lions	Gate TestUser, RespiratoryThe	Patient desaturates immediately whenever nasal cannula is removed. Attemnts to weap ovvicen have been							
07-Dec-2017 10:27:00 P 6 Minute Walk	6 Minute Walk - Text LGH Lions	Gate TestUser, RespiratoryThe	unsuccessful over the afternoon.							
04-Dec-2017 17:09:00 P Free Text Note	Nursing Shift Summary LGH Lions	Gate TestUser, Nurse								
			Signature Line Electronically Signed on 11-Occ-2017 16:52 TestUser, RespiratoryTherapist Result type: Respiratory Therapy Note Result tatus: In Error Result status: In Error Performed by: TestUser, Respiratory Therapy Note Performed by: TestUser, RespiratoryTherapist on Monday, 11-December-2017 16:52 PST Encounter info: 7000000015058, LGH Lions Gate, Inpatient, 17-Nov-2017 -							



Activity 6.3 – Review Document

1

Documents completed by other disciplines can also be found under the Documentation section on the Menu. Additionally, documentation such as dictated diagnostic imaging reports, and **PowerForms** displayed in text format can be found here.

- 1. Select the document that you want to review under the List tab.
- 2. The document will open in the window to the right and you are able to review what was documented about the patient. In the example below, it is an ED Screening PowerForm that was documented on by a nurse.

Menu	4	< 🗦 👻 🛖 Documentation					(D) Full screen 👼 Print 🔹	🕈 0 minutes ag
Respiratory Therapy View	N	💠 Add 📲 Sign 🔎 😝 Forward 🔝 Provider Letter 😭 Modif	y h 8 9 III Min Error Previe	1 D				
Mental Health Summary	6	lit						4.0
Orders	+ Add							
Single Patient Task List		Display: All					🔮 Previous Note ا 🦊	Next Note
MAR								
Interaction View and DDC		Service Date/Time / Subject	Туре	Facility	Author; Contributor(s)	1	* Final Report *	
anteractive view and acco		17-Nov-2017 14:48:00 P Allergy Rule	Allergy Rule - Text	LGH Lions Gate	TestORD, GeneralMedicine-Phy			
Results Review		20-Nov-2017 16:37:00 P Free Text Note	Nursing Shift Summary	LGH Lions Gate	TestORD, Nurse	This is a test sum	mary.	
Documentation	+ Add	21-Nov-2017 15:11:00 P Advance Care Planning	Advance Care Planning - Text	LGH Lions Gate	TestUser, Nurse	10,000,000,000,000,000		
Medication Request		21-Nov-2017 15:29:00 P Advance Care Planning	Advance Care Planning - Text	LGH Lions Gate	TestUser, Nurse; TestORD, Nurs	Result type:	Nursing Shift Summary	
Histories		21-Nov-2017 1509500 P Advance Care Planning	Advance Care Planning - Text	LGH Lions Gate	TestOPD Nurse	Result date:	Monday, 20-November-2017 16:37 PST	
		20-New 2017 15/6/00 P. Medication Administration Follow Up	Medication Administration Follow Un-Text	LGH Lions Gate	Testilizer ICII-Nurre	Result title:	Free Text Note	
Allergies	T Add	30-New-2017 14:21:00 P. Medication Administration Follow Up	Medication Administration Follow Up-Text	LGH Lions Gate	Testilizer ICIL Nurre	Performed by:	TestORD, Nurse on Monday, 20-November-2017 16:38 PST	
Diagnoses and Problems	5	30-Nov-2017 14:23:00 P Medication Administration Follow Up	Medication Administration Follow Up-Text	LGH Lions Gate	Testilser ICII-Nurse	Verified by:	TestORD, Nurse on Monday, 20-November-2017 16:38 PST	
		30-Nov-2017 15:58:00 P., Valuables/Belongings	Valuables/Belongings - Text	LGH Lions Gate	TestORD, Nurse	Encounter info:	700000015055, LGH Lions Gate, Inpatient, 17-Nov-2017 -	
CareConnect		01-Dec-2017 09:25:00 PST Patient Summary	Discharge Summary	LGH Lions Gate	TestUser, GeneralMedicine-Phy	1		
Citation Burnet	-	10-Dec-2017 18:42:00 PST RT Blood Gas Collection	RT Blood Gas Collection - Text	LGH Lions Gate	TestCD, RespiratoryTherapist	1		
Clinical Research		10-Dec-2017 18:47:00 PST 6 Minute Walk	6 Minute Walk - Text	LGH Lions Gate	TestCD, RespiratoryTherapist	1		
Form Browser		10-Dec-2017 19:14:00 PST Free Text Note	Respiratory Therapy Note	LGH Lions Gate	TestCD, RespiratoryTherapist	1		
Growth Chart						1		
Lines/Tubes/Drains Sum	imary					1		
MAR Summary						1		
Medication List	+ Add					1		
Patient Information						1		
Reference						1		
					1		2	
		() () () () () () () () () ()	N					

- Documents that have been completed by other disciplines can be found in Documentation
- Dictated diagnostic imaging reports and PowerForms displayed in text format are found in Documentation



FATIENT SCENARIO 7 – Medication Administration

Learning Objectives

At the end of this Scenario, you will be able to:

- Navigate through the layout of the Medication Administration Record (MAR)
- Administer Medication Using the Medication Administration Wizard (MAW)

SCENARIO

In this scenario, you will be reviewing the scheduled and PRN medications for your patient today prior to administering a nebulizer medication. You will be using a Barcode Scanner to administer the medication. The scanner will scan both the patient's wristband and medication barcode to correctly populate into the MAR.

As a Respiratory Therapist you will be completing the following activities:

Review and learn the layout of the MAR

Administer medication using the Medication Administration Wizard (MAW) and the barcode scanner



Activity 7.1 – Review the Medication Administration Record (MAR)

1

The **MAR** is a record of medications administered to the patient by clinicians. The **MAR** displays medication orders, tasks, and documented administrations for the selected time frame.

You will be locating and reviewing your patient's scheduled, unscheduled and PRN medications.

- 1. Go to the Menu and click MAR
- 2. Under **Time View** locate and ensure the **Scheduled** category is selected and is displaying at the top of the MAR list.

Menu	4	< > - 🛉 MAR
Patient Summary		*** 60* 📄
Orders	🕂 Add	
Single Patient Task List		All Active Medications (System)
MAR	1	Show All Rate Change Docu Medications
Interactive View and I&O		Time View Scheduled
Results Review		Scheduled 2
Documentation	+ Add	Unscheduled 650 mg, PO, q4h, drug form: oral liq, 64trt 17. Nov. 2017 14:51 PST
Medication Request		PRN Maximum acetaminophen 4 g/24 h from
Histories		Continuous Infusions
		Temperature Oral
Allergies	+ Add	Numeric Pain Score (0-10)
Diagnoses and Problems		Discontinued Scheduled
		Discontinued Unscheduled CefTRIAXone 2,000 mg, IM, q12h, drug form: inj, start:
CareConnect		Discontinued PRN 17-Nov-2017 14:55 PST cetTRIAYone
Clinical Research		Discontinued Continuous Infus
Chinear Negearen		ramipril
Form Browser		2.5 mg, PO, q12h, drug form: cap, start: 17-Nov-2017 15:22 PST
Growth Chart		ramipril
Immunizations		Systolic Blood Pressure
Lines/Tubes/Drains Sumr	nary	Table Diode Pressure
MAR Summary		50 mg, IV, q8h, start: 17-Nov-2017 15:35
Medication List	🕂 Add	ranitidine

3. Next, select in order, **Unscheduled**, **PRN** and **Continuous Infusions**, bringing each section to the top of the list for your review.

Review the medications on the **MAR** e.g. acetaminophen 650 mg PO Q4H. Be sure to review all medication information.

- 4. A Reference Manual is accessible if you right-click on a medication's name Acetaminophen 650 mg PO Q4H.
- 5. Select the **Reference Manual**. Reference material specific to the medication chosen will display.

All Active Medications (Syster	n) 👻 📖 🔹 🕨			T		
Show All Rate Change Docu	Medications	23-Nov-2017 14:00 PST	23-Nov-2017 10:00 PST	23-Nov-2017 06:00 PST		
Time View	Scheduled		A contraction of	A		
Scheduled		650 mg	650 mg	650 mg		
Unscheduled	650 mg, PO, q4h, drug form: tab, star	0-Nov-2017	20-Nov-2017	20-Nov-2017		
DA PRN	20-Nov-2017 14:04 PST Maximum acetaminophen 4 g/24 t	4 der Info	14 YOR POIL	1610 121		
Continuous Infusions 3	acetaminophen Temperature Axillary	Event/Task Sumr				
🖉 Future	Temperature Oral	Link Info				
Discontinued Scheduled	Numeric Pain Score (0-10)	Reference Manua	5			
Discontinued Unscheduled	cefTRIAXone	Med Request	Med Request			
Discontinued DPM	1,000 mg, IV, q12h, start: 20-Nov-2 14-18 PST	Reschedule Adm				
	cefTRIAXone	Additional Dose.				
Discontinued Continuous Infus	77	View MAR Note.	3 mg			
	3 mg, NG-tube, q4h, start: 20-Nov-	Create Admin No	Create Admin Note			
	15:54 PST	Alert History		J7 PST		
	Perpiraton Pate	Infusion Rilling				

6. Note the icons that may appear on the MAR. Examples include:

Indicates the medication order has not been verified by pharmacy

- Indicates the order needs to be reviewed by the nurse

Indicates the medication is part of an electronic equivalent of a preprinted order, known as a PowerPlan in the CIS

Upon further review of the MAR you will note the following:

- 7. The Clinical Range is defaulted to display 24 hours in the past and 24 hours into the future. The total range is a period of **48 hours**. If you prefer to only see your 12 hour shift, you can right click on the **Clinical Range** bar to adjust the time frame that is displayed.
- 8. The dates and times are displayed in **reverse chronological order**, which is contrary to the order found on most paper based MARs.

_																	
	*首 607 目																
	All Medications (System)	→				Monday, 1	1-December-20	17 07:31 PST -	Wednesday, 13	-December-20	17 07:31 PST (C	linical Range)			7	4	Þ
þ	Show All Rate Change Docu	Medications	13-Dec-2017 06:00 PST	13-Dec-2017 02:00 PST	12-Dec-2017 22:00 PST	12-Dec-2017 18:00 PST	12-Dec-2017 14:00 PST	12-Dec-2017 10:11 PST	12-Dec-2017 10:00 PST	12-Dec-2017 06:00 PST	12-Dec-2017 02:00 PST	11-Dec-2017 22:00 PST	11-Dec-2017 18:00 PST	11-Dec-2017 14:30 PST	11-Dec-2017 14:00 PST	11-Dec 8	^
Ш	Time View	Scheduled															
	Scheduled	acetaminophen	650 mg Last given:		650 mg Last given:		650 mg Last given:		Е								
Ш	Unscheduled	650 mg, NG-tube, q4h, drug	11-Dec-2017				11-Dec-2017		11-Dec-2017	11-Dec-2017	11-Dec-2017	11-Dec-2017	11-Dec-2017		11-Dec-2017		l U
	PRN	form: tab, start: 11-Dec-2017 10:42 PST Maximum acetaminophen 4	11:10 P31				11:10 PSI		11:10 P31		11:10 P31						
Ш	💟 Continuous Infusions	acetaminophen														650 mg Auth	
	V Future	Temperature Axillary Temperature Oral															
Ш	Discontinued Scheduled	Numeric Pain Score (0-10)															
	Discontinued Unscheduled	vancomycin			1,000 mg Last given:				1,000 mg Last given:			1,000 mg Last given:					
Π	Discontinued PRN	1,000 mg, IV, q12h, start: 11-Dec-2017 10:43 PST			11-Dec-2017 11:18 PST				11-Dec-2017 11:18 PST			11-Dec-2017 11:18 PST					
Ш	👿 Discontinued Continuous Infus	vancomycin														1,000 mg Aut	ti
Ш		PRN							_						(
Ш		PRI PRI	•					1 mg									
Ш		HYDROmorphone (DILAUDL						11-Dec-2017									
Ш		NG-tube, q4h, PRN pain, drug						11:18 PST									
Π		form: tab, start: 11-Dec-2017 10:43 PST															
Ш		HYDROmorphone														* 0.5 mg Aut	h
Π	Therapeutic Class View	Respiratory Rate														12 Auth (Veri	đ
Ш	Route View							Pending									1
Т	Plan View	insulin regular (human) addi.						Not previously									
Ш	Taper View	sodium chloride 0.9% (NS) ti						given									
11																	100

Note: Different sections of the MAR and statuses of medication administration are identified using colour coding:

• Scheduled medications- blue


- PRN medications-green
- Future medications grey
- Discontinued medications- grey
- Overdue- red

- The MAR is a record of the medication administered to the patient by clinicians
- The MAR lists medication in reverse chronological order
- The MAR displays all medications, medication orders, tasks, and documented administrations for the selected time frame

2



Activity 7.2 – Administering Medication using the Medication Administration Wizard (MAW) and the Barcode Scanner

Medications will be administered and recorded electronically by scanning the patient's wristband and the medication barcode. Scanning of the patient's wristband helps to ensure the correct patient is identified. Scanning the medication helps to ensure the correct medication is being administered. Once a medication is scanned, applicable allergy and drug interaction alerts may be triggered which will further enhance your patient's safety. This process is known as **closed loop medication administration**.

Tips for using the barcode scanner:

- Point the barcode scanner toward the barcode on the patient's wristband and/or the medication (Automated Unit Dose- AUD) package and pull the trigger button located on the barcode scanner handle
- To determine if the scan is successful, there will be a vibration in the handle of the barcode scanner and/or, simultaneously, a beep sound
- When the barcode scanner is not in use, wipe down the device and place it back in the charging station

It is time to administer the following medication to your patient.

Occasionally a dose requires scanning the medications twice to make up the full dose. At other times, the dose requires only part of a medication.

For your practice, you will be administering the following medication: **salbutamol 5mg nebulized,** PRN for shortness of breath or wheezing, the drug form is nebulizer (salbutamol 2.5mg x 2)

Let's begin the medication administration following the steps below:

1. Review medication information in the MAR and identify medications that are due. Click

Medication Administration Wizard (MAW)



2. The **Medication Administration** pop-up window will appear.



3. Scan the patient's wristband, a window will pop-up display the medications that you can administer.

Note: this list populates with medications that are scheduled for 1 hour ahead and any overdue medications from up to 7 days in the past.

P N	/ledio	ation	Administration				
							Last Refresh at 16:04 PST
C: Ma	STL Ile	.EAI	RNING, DEMOTH	HETA MRN: 700008216 FIN#: 700000015058	DOB: 01-Jan-1 Age: 80 years	937	Loc: 406; 01 ** Allergies **
				08-Dec-2017 14:	49 PST - 08-Dec-2	017 17:19 PST	
			Scheduled	Mnemonic		Details	*
	ď	ন্য	08-Dec-2017 06:00 PST	acetaminophen		120 mg, rectal, drug form: supp, start: 0 Maximum acetaminophen 4 g/24 h from	8-Dec-2017 06:00 PST all sources
		ভ	PRN	hydromorphone HYDROmorphone (DILAUDID PRN rang	e dose)	dose range: 0.5 to 1 mg, PO, q1h, PRN p	oain, drug form: oral liq, start: :
		'ভ	PRN	lidocaine lidocaine (lidocaine 1% inj)		20 mL, topical, as directed, PRN pain, dr Instill into dressing 5 - 10 minutes in adv	ug form: inj, start: 30-Nov-201. /ance of dressing change
		ল	PRN	salbutamol		5 mg, nebulized, q4h, PRN shortness of	breath or wheezing, drug form
			Continuous	sodium chloride 0.9% (NS) continuous	infusion 1,000 mL	order rate: 75 mL/h, 1V, drug form: bag,	start: 29-NOV-2017 1337/ PS1,
•							- F
Rea	dy to	o Scan	1		2 of 2		Back Sign

4. Scan the medication barcode for salbutamol 2.5 mg nebulizer.

Note: Underdose appears in the qualifications column for the medication. This is because you have only scanned 2.5mg of the total 5mg of salbutamol required

P Filtered Tasks			×
CSTLEARNING, DEMOTHETA Male	MRN: 700008216 FIN#: 7000000015058	DOB: 01-Jan-1937 Age: 80 years	Loc: 406; 01 ** Allergies **
Scanned:			
Medication Strength Volume salbutamol 2.5 mg 2.5 mL			
Qualified Tasks: Scheduled Mnemonic Details PRN salbutamol 5 mg, nebulized, q4	h, PRN shortness of breath	Qualifications or <mark>. Underdose</mark>	
Scan additional incredients or choose a task to	o continue.		OK Cancel

5. Now scan the **salbutamol 2.5 mg** nebulizer barcode again to administer the full 5 mg dose of the medication. After the second scan, the system finds an exact match for the prescribed dose.

P Medication Administration			
			Last Refresh at 16:17 PST
CSTLEARNING, DEMOTHETA Male	MRN: 700008216 FIN#: 700000001505	DOB: 01-Jan-1937 8 Age: 80 years	Loc: 406; 01 ** Allergies **
	08-Dec-201	7 15:02 PST - 08-Dec-2017 17:32 PST	
Scheduled	Mnemonic	Details	Result
🗖 🛱 词 08-Dec-2017 06:00 PST	acetaminophen	120 mg, rectal, drug form: supp, start: 08. Maximum acetaminophen 4 g/24 h from	
PRN	hydromorphone HYDROmorphone (DILA	dose range: 0.5 to 1 mg, PO, q1h, PRN p	
	lidocaine lidocaine (lidocaine 1%	20 mL, topical, as directed, PRN pain, dr Instill into dressing 5 - 10 minutes in adv	
🗹 🖌 🗑 PRN	salbutamol	5 mg, nebulized, q4h, PRN shortness	salbutamol 5 mg, nebulized, shortness of breat
Continuous	Sodium Chloride 0.9% sodium chloride 0.9% (order rate: 75 mL/h, IV, drug form: bag,	E
•			•
Ready to Scan		2 of 2	Back Sign



6. Click **Sign** after you have administered the medication to the patient.

Once you click Sign, the **Medication Administration** window will close and the MAR will display. The medication will now appear as **Complete** on the MAR.

Medications	08-Dec-2017 22:00 PST	08-Dec-2017 18:00 PST	08-Dec-2017 16:24 PST	08-Dec-2017 16:23 PST	08-Dec-2017 16:22 PST	08-De 16:04
PRN HYDROmorphone (DILAUDI dose range: 0.5 to 1 mg, PO, q1h, PRN pain, drug form: oral liq, start: 29-Nov-2017 12:24 PST			1 mg Not previously given			
HYDROmorphone						
Respiratory Rate						
PRN lidocaine (lidocaine 1% inj) 20 mL, topical, as directed, PRN pain, drug form: inj, start: 30-Nov-2017 09:26 PST Instill into dressing 5 - 10 mi			20 mL Not previously given			
lidocaine						
PRN salbutamol 5 mg, nebulized, q4h, PRN shortness of breath or wheezing, drug form: neb, start: 30-Nov-2017 10:10 PST			✓ Complete			
salbutamol						

7. Click the **Refresh** icon and you will be able to see more details including the time the last dose was given.

< > - 者 MAR									[🗆] Full screen	Print	₽ 0 minutes ag
*≦ 60' 旨										1	7
MI Medications (System)	▼ ◀ ▶		Wednesda	y, 06-Decembe	er-2017 14:37 P	ST - Friday, 08-D	ecember-2017	' 14:37 PST (Clin	ical Range)		Image: 1 minipage of the second se
Show All Rate Change Docu	Medications	08-Dec-2017 00:00 PST	07-Dec-2017 22:00 PST	07-Dec-2017 18:00 PST	07-Dec-2017 15:02 PST	07-Dec-2017 14:59 PST	07-Dec-2017 14:00 PST	07-Dec-2017 13:59 PST	07-Dec-2017 12:09 PST	07-Dec-2017 12:06 PST	07-Dec-201 ^ 11:59 PST
Time View	vancomycin										
Scheduled	PRN										
Unscheduled	HYDROmorphone (DILAUDI				1 mg Not previously given						
PRN	q1h, PRN pain, drug form: oral										
Continuous Infusions	liq, start: 29-Nov-2017 12:24 PST										
V Future	HYDROmorphone										
Discontinued Scheduled	Respiratory Rate				20 ml						
Discontinued Unscheduled Discontinued PRN	lidocaine (lidocaine 1% inj) 20 mL, topical, as directed, PRN pain, drug form: inj, start:				Not previously given						Π
Discontinued Continuous Infus	30-Nov-2017 09:26 PST Instill into dressing 5 - 10 mi										_
	PRN salbutamol				5 mg Last given: 07-Dec-2017			1			
Therapeutic Class View	shortness of breath or wheezing, drug form: neb,				14:59 PST						
Route View	salbutamol					* 5 mg Auth (Ver					
Plan View	Continuous Infusions						-				-



- Scanning of the patient's wristband helps to ensure the correct patient is identified
- Scanning the medication helps to ensure the correct medication is being administered
- Review the MAR first to identify medications that are due
- Use the Medication Administration Wizard (MAW) and barcode scanner to document medications administered



PATIENT SCENARIO 8 – Orders

Learning Objectives

At the end of this Scenario, you will be able to:

- Review the Orders Profile and place Orders
- Complete an Order
- Review the components of a PowerPlan

SCENARIO

As a respiratory therapist, you will need to be able to review orders for your patient. You will also need to place orders for your patient in certain situations.

As a Respiratory Therapist you will complete the following activities:

- Review the Orders Profile
- Place a No Cosignature Required order
- Review order statuses and details
- Place a verbal order
- Complete an order
- Review components of a PowerPlan



Activity 8.1 – Review Orders Profile

1

Throughout your shift, you will review your patient's orders. The **Orders Profile** is where you will access a full list of the patient's orders.

To navigate to the Orders Profile and review the orders:

- 1. Select Orders from the Menu
- 2. On the left side of the screen is the navigator (**View**) which includes several categories including:
 - Plans
 - Categories of Orders
 - Medication History
 - Reconciliation History
- 3. On the right side is the **Orders Profile** where you can:
 - Review the list of All Active Orders

Moving the mouse over order icons allows you to hover to discover additional information.

Some examples of icons are:

- 66 Order for nurse to review
- Additional reference text available
- Order is part of a PowerPlan (preprinted order)
- Order requires Pharmacy verification
- 4. Notice the display filter default setting is set to display **All Active Orders**. This can be modified to display other order statuses by clicking on the blue hyperlink.



CSTLEARNING, DEMOTHETA - 700008216 Op	oened by TestUser, RespiratoryTherapist				- 3 💌
Task Edit View Patient Chart Links	Options Current Add Help				
🕴 😂 Multi-Patient Task List 🖃 Message Centre	🎬 CareCompass 👫 Clinical Leader O	rganizer 📲 Ambulaton	/ Organizer 🛓 Patient List 🏢 Schedule 😂 S	itaff Assignment 🌃 LearningLIVE 🚽 👯	🕽 CareConnect 🕄 PHSA PACS 🕄 VCH and PHC PACS 🕄 MUSE
🗄 🎞 Tear Off 📲 Exit 幡 AdHoc 🎟 Medication	Administration 🔒 PM Conversation 🔹	- 🔄 Communicate 🚽	🕇 Add 👻 🖀 Scheduling Appointment Book 🛛	E Documents 🗃 Discern Reporting Po	rtal 🕞 iAware 🚊
🕴 💐 Patient Health Education Materials 💐 Polic	cies and Guidelines 🔞 UpToDate 🝦				
CSTLEARNING, DEMOTHETA 🛛 🛛					← List → Mare + 🖓
CSTLEARNING, DEMOTHETA	DOB:01-Jan-1937 MF Age:80 years End	N:700008216 ::700000015058	Code Status:Attempt CPR, Full Code	Process:Falls Risk Disease:	Location:LGH 4E; 406; 01
Allergies: penicillin, Tape	Gender:Male PH	N:9876469824	Dosing Wt:	Isolation:	Attending:TestUser, GeneralMedicine-Physician,
Menu 4	< > - 者 Orders				🗇 Full screen 🛛 👼 Print 🛛 🗞 1 minutes ago
Respiratory Therapy View	🔸 Add 🖓 Document Medicatio	n by Hx Reconciliation	Check Interactions		Reconciliation Status
Mental Health Summary					Heds History 4 Admission 4 Discharge
Orders 🕂 Add 1	Orders Medication List Docum	ent In Plan			
Single Patient Task List		Diselance All Astron (ladere LAU la cative Ordere LAU Active Ordere 🚺		
MAR	View Orders for Signature	Displayed, All Active C	Index (An Inactive Orders (An Active Orders 4		
Interactive View and I&O	Plans	00 17	Order Name 🔺	Status Dose	Details
Results Review	- Document In Plan	ef 🖻	acetaminophen (TYLENOL)	Ordered	640 mg, PO, q4h, drug form: oral liq, start: 29-Nov-2017 14:00 PST Maximum acetaminophen 4 g/24 h from all sources
Documentation 🕂 Add	Medical Revisible and Cent #	🗹 河 🗵	HYDROmorphone (DILAUDID PRN range	Ordered	dose range: 0.5 to 1 mg, PO, q1h, PRN pain, drug form: oral lig, start: 29-N
Medication Request	MED General Medicine A	M /9 🗗	lidocaine (lidocaine 1% inj)	Ordered	20 mL, topical, as directed, PRN pain, drug form: inj, start: 30-Nov-2017 09 Instill into dressing 5 - 10 minutes in advance of dressing change
Histories	Negative Pressure Wour	🗹 🗹	piperacillin-tazobactam	Ordered	3.375 q, IV, q6h, start: 07-Dec-2017 12:08 PST
Allergies 📥 Add	- Suggested Plans (0)		salbutamol	Ordered	5 mg, nebulized, q4h, PRN shortness of breath or wheezing, drug form: ne
	Admit/Transfor/Dischar		vancomycin	Ordered	1,000 mg, IV, g12h, start: 29-Nov-2017 12:22 PST
Diagnoses and Problems		△ Laboratory	CBC	Pending Complete (Ordered)	Blood AM Draw Collection: 24-Nov-2017 03:30 PST, d2day for 7 day
	Patient Care	⊿ Respiratory		renaing complete (ordered)	blood, All blow, concellon. 24 Nov 2027 05:501 51, q2dby for 7 dby
CareConnect	Activity	🗹 🗈	Oxygen Therapy	Ordered	30-Nov-2017 09:41 PST, Routine, Titrate O2 to keep SpO2 92% or greater
Clinical Research	Diet/Nutrition		Six Minute Walk (6 Minute Walk)	Ordered	07-Dec-2017 10:24 PST, Adjunct: Room Air, Routine
Form Provinger	Continuous Infusions	Communication	Orders		3
Count Chart	Medications 2				
Lines (Tuber (Desine Summers)	Related Results	▲ Details			
MAD Comment	Variance Viewer	Orders For Cosignatu	re Orders For Nurse Review		Orders For Signature

- The Orders Page consists of the orders view (Navigator) and the order profile
- The Orders View displays the lists of PowerPlans (preprinted orders) and clinical categories of orders
- The Orders Profile page displays All Active Orders for a patient



Activity 8.2 – Place an Order

1

Throughout your shift, you will review your patient's orders. Respiratory therapists can place the following types of orders:

- Orders that do not require a cosignature e.g. order within respiratory therapy scope
- Orders that require a cosignature from the provider e.g. telephone and verbal orders

To place an order that does **not** require a cosignature (within your scope of practice):



The Add Order window will open.

- 1. Type in **Search** = *abg* into the search window and a list of choices will display.
- 2. Select **ABG**.

Note: You will see similar orders, select the most appropriate order.



CSTLEARNING, DEMOTHETA - Add Order					
CSTLEARNING, DEMOTHETA DOB:01-	-Jan-1937 MRN:700	008216 Code Status:Attempt	CPR, Full Code Process	Falls Risk	Location:LGH 4E; 406; 01
Allergies: penicillin, Tape Gender:	:Male PHN:9876	5469824 Dosing Wt:	Disease Isolation	r. n:	enc Type:inpatient Attending:TestUser, GeneralMedicine-Physician, N
Altergies: penicillin, Tape Gender Search: abg Also Colect Also Pr Clinic Collect Also Pr Clinic Collect Cord ASG Aborginal Health Following Aborginal Spiritual and Cultural Support Following IP Consult to Aborginal Health IP Consult to Aborginal Spiritual and Cultural Support Enter' to Search	Male PHINS877 Type: C Incolert ch within: All	44992/4 Dosing Wt:	Isolation		Attending-TestUser, GeneralMedicine-Physician, N
				CSTLEAR	NING, DEMOTHETA - 700008216 Done

The Ordering Physician window opens.

- 3. Type in the name of the patient's Attending Physician [Lastname, Firstname]
- 4. Select No Cosignature Required
- 5. Click OK

P Ordering Physician
 Order Proposal
*Physician name
Plisvca, Rocco, MD
3 der Date/Time U/-Dec-2017 ↓ 1055 ↓ PST
Communication type Phone
Verhal
No Cosignature Required
per/Fax Electronic
OK Cancel

6. Click **Done** and you will be returned to the **Orders Profile** to see the order details.



· •	
	CSTLEARNING, DEMOALPHA - 700008 6 Done

7. Review the order details and modify as needed. Click Sign.

Orders for Clausters					
Order Name	Statue Sta	#	Details		
4 LGH 4F: 406: 01 Epc:700000001505	8 Admit: 17-Nov-	2017 14-14 PST	octans		
△ Laboratory	0 /10/11/11/11/11/01				
🔲 👘 🖪 Arterial Blood Gas	Order 12	Dec-2017 11:31	Whole Blood, STAT, Unit collect, Collection: 1	2-Dec-2017 11:31 PST, once	
(ABG)	PS	Г	SPECIAL COLLECTION REQUIREMENTS: Pleas	se refer to specific site Laboratory Test Manual	
■ Details for Arterial Blood C	Gas (ABG)				
🚰 Details 🗊 Order Comments					
# 6 k. # 2					
*Specimen Type: Whole Blood		~	*Collection Priority:	STAT	
			,		
Unit collect: (Yes () No		Collected:	🔿 Yes 🔘 No	
*Collection Date/Time: 12-Dec-2017	🌲 💌 1131	🌻 PST	*Frequency:	once 🗸	
Duration:			Duration unit:	~	
Order for future visit: 🔿 Yes 🎇	No				
0 Missing Required Details Orders For Co	signature Orders	For Nurse Review			Sian -
					7

8. Click the **Refresh** icon

< 🖂 - 者 Orders					[□] Full screen 🖷	Print 🤃 1 minutes ago			
+ Add 🖑 Document Medication by Hx Reconciliation • 🚴 Check Interactions									
Orders Medication List Document	t In Plan								
View	Displayed: All Active Or	rders All Inactive Orders All Active Orders				Show More Orders			
Orders for Signature	9 8	Order Name 🔺	Status	Dose	Details	*			
- Document In Plan	⊿ Laboratory ☑ 6° ₪	Arterial Blood Gas (ABG)	Ordered (Pending Collection)	Whole Blood, STAT, Unit collect, Collection: 07-Dec-201	17 16:05 PST, once			
Peripherally Inserted Cent	► 🔲	CBC	Pending Complete (Ordered)		SPECIAL COLLECTION REQUIREMENTS: Please refer to Blood, AM Draw, Collection: 24-Nov-2017 03:30 PST, q2	specific site Labor day for 7 day			
Negative Pressure Woun	⊿ Respiratory	Oxygen Therapy	Ordered		30-Nov-2017 09:41 PST, Routine, Titrate O2 to keep SpC	02 92% or greater			
- Suggested Plans (0)		Six Minute Walk (6 Minute Walk)	Ordered		07-Dec-2017 10:24 PST, Adjunct: Room Air, Routine				
Admit/Transfer/Dischar	Communication	orders							
Patient Care									
C Activity						E			
Continuous Infusions						-			
Related Results	▲ Details								
Formulary Details	Orders For Cosignature	Orders For Nurse Review				Orders For Signature			
vanance viewer									

Note: The status of the ABG order will change from Processing to Ordered (Pending Collection)



2 There may be certain circumstances where you may find yourself needing to follow up on specific patients or follow up on specific results. In these cases, you can place an order called Respiratory Therapy Following as a reminder to continue to check up on that patient.

Let's place a **Following** order for your patient.

- 1. Click Add ^{+ Add} within the Orders page
- 2. Type **Respiratory Following** into the search window and then hit the **Enter** key
- 3. Select Respiratory Therapy Following from the search results
- 4. Click **Done** to close the Add Order window

Note: This order will not prompt you to add in an ordering physician name, unlike other types of orders.

CSTLEARNING, DEMOTHETA - 700008216 Opened by TextUser, RespiratoryTherapist											
Task Edit View Patient Chart Links Options Current Add Help											
🔐 Multi-Patient Task List 🖃 Message Centre 🐒 CareCompass 🐩 Clinical Leader Organizer 🐩 Ambulatory Organizer 🛊 Patient List 🔤 Schedule 🚑 Staf Assignment 🎬 LearningLINE 😓 🗒 CareConnect 🛱 PHSA PACS 🖏 VCH and PHC PACS 🖏 MUSE 🕲 FormFast WFI 😓											
🏽 Tear Off 📲 bitt 🏙 AdHoc 💷 Medication Administration 🔒 PM Conversation + 🔩 Communicate + 💠 Add + 🍏 Scheduling Appointment Book 🛞 Documents 🔒 Discem Reporting Portal 💽 Haware 🖕											
C Patient Health Education Materials 🔃 Policies and Guidelines 🛱 UpToDate											
← List → 1 @ Recent ~ Name											
CSTLEARNING, DEMOTHETA	DOB:01-Jan-1937	MRN:700008216	Code Status:Atte	empt CPR, Full Code	Process:Falls Risk	Location:LGH 6E; 624; 04					
Allergies: penicillin, Tape	Age:80 years Gender:Male	Enc:/00000015058 PHN:9876469824	Dosing Wt:		Disease: Isolation:	Enc Type:Inpatient Attending:TestUser, GeneralM	Aedicine-Physici				
Menu	<					(D) Full screen	Print 2				
Respiratory Therapy View											
Mental Health Summary	CSTLEARNING, DEMOTHETA - Add Ord	er	MRN/70000316	Code Status Attempt CDD, Full Code	Deesees Falls Dick	Leastianul GM 65, 624, 04	• • • • •				
Orders + Add 1	CSTLEARNING, DEMOTHETA	Age:80 years	Enc:70000001505	B	Disease:	Enc Type:Inpatient					
Single Patient Task List	Allergies: penicillin, Tape	Gender:Male	PHN:9876469824	Dosing Wt:	Isolation:	Attending:TestUser, GeneralMedici	ne-Physi				
MAR	Searchy Respiratory Followind 2	Advanced Options 👻 Turner	A Inpatient	-							
Interactive View and I&O											
Results Review		Search with	in: MI	•			📙				
Documentation 🕂 Add	Respiratory Therapy Following 3										
Medication Request	Respiratory Nurse Clinician Following										
Histories											
Allergies 🕂 Add											
Diagnoses and Problems											
CareConnect											
Clinical Research											
Form Browser											
Growth Chart											
Lines/Tubes/Drains Summary											
MAR Summary											
Medication List 🕂 Add			1								
Patient Information						CSTI FABNING DEMOTHETA - 700008216	0				
Reference							Done				
	Supplies						_ 4				

- 5. Review the order detail fields and modify as needed. In this example, document **Reason for Follow- Up** = *Decompensating respiratory status*
- 6. Click the **Sign** button.



P CSTLEARNING, DEMOTHETA - 700008216 Ope	ned by TestUser, RespiratoryTherapist			- 9 X
Task Edit View Patient Chart Links	Options Current Add Help			
🚰 Multi-Patient Task List 🖃 Message Centre 👔	🕻 CareCompass 🛛 🙀 Clinical Leader Organiz	er 🔛 Ambulatory Organizer 🍦 Patient List 🛅 Schedule 🙇 Staff Assignment 🎬 L	earningLIVE 💡 🤅 😋 CareConnect 🝳 PHSA PACS 🔇 VCH.	and PHC PACS 🔍 MUSE 🔍 FormFast WFI 💡
🔀 Tear Off 🗐 Exit 🎬 AdHoc 💵 Medication A	Administration 🚨 PM Conversation - 🖓	ommunicate - 🕂 Add - 👼 Scheduling Appointment Book 🔚 Documents 🔗 Di	scern Reporting Portal 💽 iAware	
Q Patient Health Education Materials Q Policie	s and Guidelines 📿 UpToDate			
CSTLEARNING, DEMOTHETA				+ List + ParRecent + Name + Q
CSTLEARNING DEMOTHETA	DO8:01-Jan-1937	MRN:700008216 Code Status:Attempt CPR, Full Code	Process:Falls Risk	Location:LGH 6E; 624; 04
	Age:80 years	Enc:700000015058		Enc Typednpatient
Allergies: penicillin, Tape	Gender:Male	PHN9876469824 Dosing Wt:	Isolation:	Attending:TestUser, GeneralMedicine-Physician, MD
Menu *	Crders			,O, Full screen m Print 💽 7 minutes ago
Respiratory Therapy View	🕂 Add 📲 Document Medication by H	x Reconciliation -] 🚴 Check Interactions		Reconciliation Status
Mental Health Summary	Orders Medication List Document In	Plan		· · · · · · · · · · · · · · · · · · ·
Orders Add	Intertonen int Pertonon in	1993		
Single Patient Task List	Minur	Orders for Signature	-1	
MAR	Orders for Signature	2 LGH 6E: 624: 04 Enc:700000015058 Admit: 17-Nov-2017 14:14 PST	405	
Interactive View and I&O	⊜ Plans	4 Allied Health		
Results Review	- Document In Plan	Respiratory Therapy F.,. Order 01-Dec-2017 09:27 01-	Dec-2017 09:27 PST	
Documentation 🕂 Add	Peripherally Inserted Central Ca			
Medication Request	MED General Medicine Admis			
Histories	Negative Pressure Wound The Henarin Infusion Standard (Mo			
Allergies 🕂 Add	Suggested Plans (0)			
Diagnoses and Problems	Orders			
	Admit/Transfer/Discharge			
CareConnect	Patient Care			
Clinical Research	Z Activity			
Form Browser	Continuous Infusions			
Growth Chart	Medications	Details for Respiratory Therapy Following		
Lines/Tubes/Drains Summary	-Blood Products	1777 Details IIII Order Comments		
MAR Summary	Diagnostic Tests			
Medication List 🕂 Add	Procedures	+ n. + ×		
Patient Information	C Respiratory	18	T Processing for Follow Has Decomposi	string respiratory
Reference	Consults/Referrals	Requested start bate/ time: 01000 0017	status	and respectory
	Communication Orders			
	Non Categorized		<no item<="" td=""><td>5</td></no>	5
	Hedication History			
	Medication History Snapshot			
	Formulary Details			
	Variance Viewer	0 Missing Required Details 0 orders For Cosignature 0 orders For Nuise Review		6 Sign
	L			

The Respiratory Therapy Following order will display in the status of Processing.

7. Click **Refresh** rear the top right corner of the screen. Once the page refreshes, the order status will display as **Ordered**.

CSTLEARNING, DEMOTHETA - 700008216 Oper	ed by TestUser, RespiratoryTherapist					
Task Edit View Patient Chart Links O	Options Current Add Help					
🚦 🔐 Multi-Patient Task List 🖃 Message Centre 📱	🕻 CareCompass iii Clinical Leader Organize	r 👫 Ambulatory Orga	nizer 🞍 Patient List 🏢 Schedule	😂 Staff Assignment 📲 Lear	ningLIVE 🝦 🤅 😋 CareConnect 🔞 PHSA PACS 🔇 V	CH and PHC PACS 🔞 MUSE 🚳 FormFast WFI 🛫
🗄 🧱 Tear Off 📲 Exit 🎬 AdHoc 🎟 Medication A	dministration 🏭 PM Conversation 👻 🚘 C	ommunicate 👻 🕂 Ad	d 👻 🖺 Scheduling Appointment Bo	ook 🖪 Documents 🗃 Disce	m Reporting Portal 💽 iAware 🝦	
🔅 😋 Patient Health Education Materials 🔞 Policies	s and Guidelines 🔞 UpToDate 🖕					
CSTLEARNING, DEMOTHETA 🛛 🛛						← List → @ Recent - Name - Q
CSTLEARNING, DEMOTHETA	DOB:01-Jan-1937 Age:80 years	MRN:700008216 Enc:7000000015058			Process:Falls Risk Disease:	Location:LGH 6E; 624; 04 Enc Type:Inpatient
Allergies: penicillin, Tape	Gender:Male	PHN:9876469824	Dosing Wt:		Isolation:	Attending:TestUser, GeneralMedicine-Physician, MD
Menu 🕂	< 🔹 🔹 🛉 Orders					🗇 Full screen 🛛 📾 Print 🎤 12 minutes ago
Respiratory Therapy View	+ Add Pocument Medication by H	Reconciliation •	Check Interactions			Reconciliation Status
Mental Health Summary						😌 Meds History 😌 Admission 😌 Disc
Orders 🕂 Add	Orders Medication List Document In F	lan				
Single Patient Task List	н	Diselance All Association	den latter stir Orden Lataries Or			Ohen Marc Orden
MAR	View	Displayed All Active C	Idels FAILINGCIVE OTDELS FAILACTIVE OTC	1613		Show more choese
Interactive View and I&O	Plans	8 8	Order Name	Status	Dose Details 👻	^ _
Results Review	Document In Plan	⊿ Allied Health	Respiratory Therapy Following	Processing	01-Dec-2017 09:27 PST Reason	for follow-up: Decompressing respiratory status
Documentation 🕂 Add	Peripherally Inserted Central Ca	⊿ Communication	Orders			
Medication Request	MED General Medicine Admis		Communication Order	Ordered	30-Nov-2017 09:26 PST, Turn ti 30-Nov-2017 09:26 PST, If unal	herapy off prior to dressing change le to maintain Negative Pressure Wound Therapy (NPWT) for a minimu
Histories	Negative Pressure Wound The		contraction or de	oracica	50 1101 2021 051201 01, 2 0100	
Allergies 🕂 Add	- Suggested Plans (0)					
Diagnoses and Problems	Orders					
	Mart/Transfer/Discharge					
CareConnect	Patient Care					

A task associated with your newly placed patient following order can now be found on the **Single Patient Task List (SPTL)** and **Multi Patient Task List (MPTL)**. For now, navigate to the **SPTL** to view this task.

- 8. Click on Single Patient Task List in the Menu
- 9. Within the SPTL, under the Scheduled Patient Care tab you should see the Respiratory



Therapy Following task.

CSTLEARNING, DEMOTHETA - 700008216 Oper	ned by TestUser, RespiratoryTherapist			
Task Edit View Patient Chart Links	Task List Options Help			
😫 Multi-Patient Task List 🖃 Message Centre 🖠	👫 CareCompass 🎬 Clinical Leader Organi	zer 📲 Ambulatory Organize	🛉 Patient List 🏢 Schedule 🔉 Staff Assignment 🕌	🖁 LearningLIVE 🍦 🤅 🕄 CareConnect 🔇 PH
🗄 🏧 Tear Off 📲 Exit 🎬 AdHoc 🎟 Medication A	Administration 🔏 PM Conversation 👻 🛀	Communicate 👻 🕂 Add 👻	🖺 Scheduling Appointment Book 🔳 Documents 🧉	Discern Reporting Portal 💽 iAware 🖕
🕄 🔍 Patient Health Education Materials 🔍 Policie	es and Guidelines 🕄 UpToDate 🝦			
CSTLEARNING, DEMOTHETA				
CSTLEARNING, DEMOTHETA	DOB:01-Jan-1937	MRN:700008216	Code Status:Attempt CPR, Full Code	Process:Falls Risk
	Age:80 years	Enc:700000015058		Disease:
Allergies: penicillin, Tape	Gender:Male	PHN:9876469824	Dosing Wt:	Isolation:
Menu 7	< 🔹 🔹 👫 Single Patient Ta	sk List		
Respiratory Therapy View				
Mental Health Summary				
Orders 🕂 Add			01-December-2017 06:30 Friday	y PST - 01-December-2017 19:45 Friday PS
Single Patient Task List	Scheduled Patient Care 2 tors	Oxygen Therapy Pulmon	ary Procedures Ambulatory	
MAR	Task retrieval completed			
Interactive View and I&O	Task Status Scheduled Date a	nd Time Task Description	Order Details	
Results Review	60 Pending 01-Dec-2017 09	23 PST Consult to Respire	tory Therapy 01-Dec-2017 09:23 PST, Routine, Reason fo	or Consult: COPD
	Pending Continuous	Respiratory Thera	py Following 01-Dec-2017 09:27 PST, Reason for follow-	up: Decompressing respiratory sta
Documentation Add				
Medication Request				
Histories				

- Respiratory therapists can place orders that do not require a cosignature (e.g. order within respiratory therapy scope) and orders that require a cosignature from the provider (e.g. verbal orders)
- A Respiratory Therapy Following order can be placed for further follow up on the patient
- Once a Respiratory Therapy Following order is placed, a task will be placed on the SPTL and MPTL



b Activity 8.3 – Review Order Statuses and Details

To see examples of different order statuses, review the image below:

- Processing- order has been placed but the page needs to be refreshed to view updated status
- N B 7 Order Name Status Dose ... Details Proposal <u>Ð</u>. Insert Peripheral IV... Processing 20-Nov-2017 11:46 PST ∄⊻ Insert Urinary Cath... Ordered 20-Nov-2017 11:31 PST, Indwelling Morse Fall Risk Ordered 17-Nov-2017 14:05 PST, Stop: 17-Nov-2017 14:05 PST Assessment Order entered secondary to inpatient admission. 🕀 🔲 Vital Signs 20-Nov-2017 11:25 PST, q4h while awake ⊿ Medications 🔁 🗹 🍗 🗗 furosemide Ordered 20 mg, IV, as directed, order duration: 5 day, drug form: inj, start: 17-Nov-Administer pre red blood cell transfusion
- Ordered- active order that can be acted upon

To see examples of order details review the image below:

- Focus on the Details column of the Orders Profile
- Hover your cursor over certain order details to see the complete order information
- Note the start date and that orders are organized by clinical category

	S	8	Order Name	Status	•	Dose	Details
⊿	Patient	Car	e				
•	\checkmark		Vital Signs	Ordered			28-Nov-2017 10:42 PST, q4h
⊿	Blood P	rod	ucts				
		•	Red Blood Cell Transfusion	Ordered			Routine, Administer: 1 unit, IV, once, Administer each over: 120 - 180 Minutes, Irradiated, Please call Informed consent must be present on patient record
							Red Blood Cell Transfusion Details: Routine, Administer: 1 unit, IV, once, Administer each over: 120 - 180 Minutes, Irradiated, Please callwhen ready for pick up, 28-Nov-2017 11:04 PST Order Comment: Informed consent must be present on patient record

When new orders are placed in the chart, a nurse must acknowledge reviewing these new

orders. If you see a **Nurse Review** icon appear to the left of the order, this means the order still needs to be reviewed by a nurse. Once the order has been reviewed by a nurse, the icon will no longer display.

- Remember to review and verify the status of orders
- Hover over items in the chart to view additional order information.



Activity 8.4 – Place a Verbal Order

Similar to current practice, respiratory therapists can place verbal and telephone orders. In this activity, we are going to practice placing a verbal order. **Verbal Orders** are only encouraged when there is no reasonable alternative for the provider to place the order in the CIS themselves. For example, in emergency situations, a verbal order may need to be placed by a respiratory therapist.

Note: Verbal and phone orders that respiratory therapists enter in the CIS will be automatically routed to the ordering provider for co-signature.

To place a verbal order:

- 1. Select Orders from the Menu
- 2. Click the Add button + Add on the Orders Profile
- 3. Type = *CXR* in the search field of the pop-up window and press **Enter** on the keyboard to view search results.
- 4. Select CXR

CSTLEARNING, DEMOTHETA - Add Order					
CSTLEARNING, DEMOTHETA	DOB:01-Jan-1937	MRN:700008216			Location:LGH 4E; 406; 01
Allergies: penicillin Tane	Age:80 years Gender:Male	Enc:7000000015058 PHN:0876460824	Dosing Wt	Disease: Isolation:	Enc Type:Inpatient Attending:Testi Iser, GeneralMedicine-Physician
Anergies, pencinin, rape	Gendernviale	PTII4.5670405024	bosing we	130/8001.	Attenuing, restoser, Generaliweutune Physician,
Search: cxr 3 🔍 Advanc	ced Options 👻 Type: 🎒 In	patient 👻			
CXR 4	tes Search within Al	-			
Arterial Blood Gas and Cooximetry	tes seatch within.	•			
Total Hemoglobin Cooximeter					
Enter to search					
		1			
					CSTLEARNING, DEMOTHETA - 700008216 Done

The Ordering Physician window opens.

- 5. Fill out required fields highlighted in yellow with details below and click OK
 - **Physician name** = type name of Attending Physician (last name, first name)
 - Communication type = Verbal



P Ordering Physician	P Ordering Physician
*Physician name	*Physician name Plisvca, Rocco, MD 5
*Order Date/Time 08-Dec-2017	*Order Date/Time 08-Dec-2017 ↓ 1202 ↓ PST
*Communication type	*Communication type
Phone Verbal No Cosignature Required Cosignature Required Paper/Fax Electronic	Phone Verbal 5 No Cosignature Required Cosignature Required Paper/Fax Electronic
OK Cancel	OK 5 Cancel

Note: If this were a telephone order, the communication type of Phone would be selected.

6. Click **Done** to close the **Add Order** window

Orders for Signature window opens and order details are displayed.

- 7. Fill out required fields highlighted in yellow (and other fields as needed).
 - **Reason for Exam** = Rule out pneumonia

Add	< > - 🔶 Orders	[🗆] Full screen	👼 Print 🛛 🎅 3 minutes a
View Orders for Signature View Orders for Signature Plans I GH 4E; 406; 01 Enc:700000015058 Admit: 17-Nov-2017 14:14 PST Decoment In Plan I GH 4E; 406; 01 Enc:7000000015058 Admit: 17-Nov-2017 14:14 PST Decoment In Plan I GH 4E; 406; 01 Enc:7000000015058 Admit: 17-Nov-2017 14:14 PST Diagnostic Tests I GH 4E; 406; 01 Enc:7000000015058 Admit: 17-Nov-2017 14:14 PST Diagnostic Tests I GH 4E; 406; 01 Enc:700000015058 Admit: 17-Nov-2017 12:02 PST, Routine WED General Medicine A I GH 4E; 406; 01 Enc:700000015058 Admit: 17-Nov-2017 12:02 PST, Routine Image: Partial for XR Chest (CXR) Image: Partial for XR Chest (CXR) Image: Partial for XR Chest (CXR) Image: Promulary Details Image: Promulary Details Image: Priority: Routine Image: Priority: Requested Data Inters for Scheduler: Image: Vewer Image: Priority: Company	Add	Reconciliation Statu Meds History	s Admission Discharg
View Orders for Signature Orders for Signature Identify 4 Get 1 Inc; 7000000015058 Admit; 12-Nov-2017 14:14 PST Dentify Inserted Centre Desponsite Tests Occurrent In Plan Identify 4 Get 1 Inc; 7000000015058 Admit; 12-Nov-2017 12:02 PST, Routine Medical Peripherally Inserted Centre Negative Pressure Wours Signature Suggested Plans (0) Order for Signature Order for Signature Image Details for XR Chest (CXR) Order for Signature Image Details for XR Chest (CXR) Negative Pressure Wours Image Details for XR Chest (CXR) Suggested Plans (0) Order Comments Image Details for XR Chest (CXR) Image Details (0) Image Details for XR Chest (CXR) Image Details (0) Image Details for XR Chest (CXR) Image Details (0) Image Details for XR Chest (CXR) Image Details (0) Image Details for XR Chest (CXR) Image Details (0) Image Details for XR Chest (CXR) Image Details (0) Image Details for XR Chest (CXR) Image Details (0) Image Details for XR Chest (CXR) Image Details (0) Image Details for XR Chest (CXR) Image Details (0) Image Details (0)	Medication List Document in Plan		
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Orders for Signature	View @ P V Order Name Status Start Details		
I Diagnostic Tests Document In Plan Medical Peripherally Inserted Cent MED General Medicine Suggested Plans (0) Orders Admit/Transfer/Dischar- (Status) Patient Care (Activity) Det/Nutrition Related Results Formulary Details Variance Viewer Variance Viewer Using Required Details Orders For Nurse Review Special Instructions / Notes to Scheduler: Texted Results Formulary Details Using Required Details Orders For Nurse Review	Orders for Signature 4 LGH 4E; 406; 01 Enc:700000015058 Admit: 17-Nov-2017 14:14 PST		
Image: Second Status Order 08-Dec-2017 12:02 PST, Routime Image: Suggested Plans (0) Image: Second Status Image: Second Status Image: Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status Image: Second Status I	Plans △ Diaqnostic Tests		
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Peripherally Inserted Cent MED General Medicine A Negative Pressure Wour Suggested Plans (0) Orders Comments Orders Status Patient Care Patient Care Priority: Requested Start Date/Time: 08-Dec-2017 Priority: Routine Priority: Reson for Exam: Secial Instructions / Notes to Scheduler Techals Building Details Orders For Nutre Review Sign	≜Medical		
Negative Presure Wour Suggested Plans (0) Sorders Orders Admit/Transfer/Dischar Status Patient Care Activity Det/Nutrition Continuous Infusions Related Results Formulary Details Variance Viewer Missing Required Details Orders For Nutre Review	Peripherally Inserted Cent = MED General Medicine A		
Conders Image: Status Image: St	Negative Pressure Wour -Suggested Plans (0) Details III Order Comments		
Status *Requested Start Date/Time: 08-0e-2017 * 1202 * PST Patient Care *Requested Start Date/Time: 08-0e-2017 * 1202 * PST Oter/Nutrition *Priority: Routine * Continuous Infusions *Reason for Exam: Related Results Special Instructions / Notes to Scheduler Formulary Details Orders For Cosignature Variance Viewer 1 Missing Required Details: Orders For Nutre Review	🖸 Orders 🕂 🗭 Ma. 🕹 😵		
Image: Continuous Infusions Image: Continuous Infusions Image: Continuous In	Status Requested Start Date/Time: 00-Dec-2017 ▼ 1202 PST		A
Continuous Infusions *Reason for Exam: Related Results * Formulary Details Special Instructions / Notes to Scheduler: Variance Viewer 1 Missing Required Details: Orders For Cosignature Orders For Nurse Review	CActivity *Priority: Routine v		
Related Results Special Instructions / Notes to Scheduler. 7 Formulary Details Variance Viewer 1 Missing Required Details. Orders For Cosignature Orders For Nurse Review. Sign	Continuous Infusions *Reason for Exam:		
Related Results	Generations Special Instructions / Notes to Scheduler:		7
Formulary Details Imissing Required Details Orders For Cosignature Orders For Nume Review Sign	Related Results		<u> </u>
Variance Viewer 1 Missing Required Details Orders For Cosignature Orders For Nurse Review Sign	Formulary Details		
	Variance Viewer 1 Missing Required Details Orders For Cosignature Orders For Nurse Review		Sign

- 8. Click **Sign** and then click **Refresh** ².
- 9. The Order Profile now displays the CXR with a status of Ordered.

Section 2015 Section 2015	Ordered (Exam Ordered) 9	08-Dec-2017 12:02 PST. Routine, Reason: Rule out pneumonia
Biggs OV Fill Chest (Criti)		to bee 2027 22/02 For, noutline, neuson nate out predmona



- Verbal orders are only encouraged to be entered when a physician cannot enter the order directly into the CIS themselves. For example, a verbal order might be needed in an emergency situation.
- Required fields are always highlighted yellow
- Verbal and phone orders that are entered into the CIS automatically get routed to the ordering provider for co-signature



Activity 8.5 – Complete or Cancel/Discontinue an Order

1

When a one-time order has been carried out, the order needs to be removed from the patient's Orders Profile. This is done by completing the order.

Let's complete an order.

- 1. Review the Orders Profile
- 2. Right-click the order RT to Insert an Arterial Line
- 3. Select Complete



Notice that the order is now crossed out.

4. Click Orders for Signature

2 0 1	Order Name 🔺	Status	Dose	Details
🗹 🐚	piperacillin-tazobactam	Ordered		3.375 g, IV, q6h, start: 07-Dec-2017 12:08 PST
🗹 🐚	salbutamol	Ordered		5 mg, nebulized, q4h, PRN shortness of breath or wheezing, drug form: neb, s
🗹 🍗 🗷	vancomycin	Ordered		1,000 mg, IV, q12h, start: 29-Nov-2017 12:22 PST
aboratory				
🗹 🚧 🛛	Arterial Blood Gas (ABG)	Ordered (Pending Collection)		Whole Blood, STAT, Unit collect, Collection: 07-Dec-2017 16:05 PST, once SPECIAL COLLECTION REQUIREMENTS: Please refer to specific site Laborator
	CBC	Pending Complete (Ordered)		Blood, AM Draw, Collection: 24-Nov-2017 03:30 PST, q2day for 7 day
Diagnostic Te	sts			
🗹 🌋 66	' XR Chest (CXR)	Ordered (Exam Ordered)		08-Dec-2017 12:02 PST, Routine, Reason: Rule out pneumonia
Respiratory				
🗹 📴	Oxygen Therapy	Ordered		30-Nov-2017 09:41 PST, Routine, Titrate O2 to keep SpO2 92% or greater
L 60°	RT to Insert Arterial Line	Complete		
\checkmark	Six Minute Walk (6 Minute Walk)	Ordered		07-Dec-2017 10:24 PST, Adjunct: Room Air, Routine
Communicati	on Orders			

5. Review the order for signature details and click Sign. You will return to the Orders Profile



where the order will show as processing.

Orders for Signature				
🔊 😨 🖳 🕅 Order Name	Status	Start	Details	
△ LGH 4E; 406; 01 Enc:7000000015058	Admit: 17-N	lov-2017 14:14 PST		
⊿ Respiratory				
🔲 🥐 😚 RT to Insert Arterial Li	Complete	08-Dec-2017 12:18		
Totails				
0 Missing Required Details 0rders For Cosig	nature] [Or	ders For Nurse Review		Sign

6. Click the **Refresh** icon and the order will no longer be visible in the **Orders Profile**.

2 Now let's **Cancel/Discontinue** an order.

Certain orders such as **Respiratory Following Orders** are not a one-time order and cannot be completed. These tasks will remain on your SPTL or MPTL until the order is cancelled or discontinued.

- 1. Within the **Orders Profile**, locate the **Respiratory Therapy Following** order and right click on the order
- 2. Select Cancel/ Discontinue

< 👻 🛧 Orders							nenew	2	1 minutes ago
							Modify		
🕂 Add 🍶 Document Medication by	Hx Reconciliatio	n 🕶 🛛 🔊 Check Interactions					Сору		Discharge
							Cancel and Reorder		Discharge
Orders Medication List Document Ir	n Plan						Suspend		
14							Activate		
View	Displayed: All Acti	ve Orders All Inactive Orders All Active Order	\$				Complete	M	fore Orders
ICU Insulin Infusion - Critical Care (🔺						- F	Cancel/Discontinue		
ICU Electrolyte Replacement (Modu	00 P	Order Name 🔺	Status	Dose	Details	- L			^
U Insulin Infusion - Critical Care (!	<u>₽</u> .	Differential (CBC and Differential)	Ordered		Blood, Urgent, Collection: 10-D		Void		
ested Plans (0)	M 🖬 (Group and Screen	Ordered		Blood, Urgent, Collection: 10-D If not already completed		Reschedule Task Times		
's \dmit/Transfer/Discharge	الله الله الله الله الله الله الله الله	MRSA Culture	Ordered		Perineum, Routine, Unit Collect		Add/Modify Compliance	¢ A	anual
itatus	Image: Market Ma Market Market Ma Market Market Mar Market Market Market Market Market Market Market Mar	MRSA Culture	Ordered		Nares (S. aureus only). Routine.		Order Information	ek	for 5
Patient Care					SPECIAL COLLECTION REQUIRE		Comments	м	anual.
lctivity) 🕨 💌 🗈	VRE Culture	Ordered		Perineum, Routine, Unit Collect		Results	¢	
Diet/Nutrition					SPECIAL COLLECTION REQUIRE		Deferre en le ferre et ine	M	anual.
Continuous Infusions	⊿ Diagnostic T	ests					Reference information		
Nedications		Electrocardiogram 12 Lead STAT	Ordered		09-Dec-2017 17:15 PST, STAT, F		Print		
llood Products	⊻ .Σ	XR Chest (CXR)	Ordered (Exam Ordered)		08-Dec-2017 12:02 PST, Routine		Advanced Filters		
aboratory	⊿ Respiratory						Advanced Filters		
Diagnostic Tests		Six Minute Walk (6 Minute Walk)	Ordered		10-Dec-2017 15:38 PST, Adjunc		Customize View		
Procedures	A Allied Health				12.0	✓	Disable Order Information Hyperlink	_	
Respiratory		Respiratory Therapy Following	Ordered		12-Dec-2017 15:14 PS1				E
Allied Health	Communication	tion Orders							
Consults/Referrals									-
۲ III ا									
Related Results	▲ Details								
Formulary Details									

Note: There are orders that may require you to input the ordering physician after you click on Cancel/Discontinue. You will need to complete the required fields and then click OK for such orders. See image below to review the required fields.



Ordering Physician
Order
 Proposal
*Physician name
*Order Date/Time
12-Dec-2017 📄 🔽 1538 🚔 PST
*Communication type
Phone Verbal
No Cosignature Required Cosignature Required Paper/Fax Electronic

- 3. Select the appropriate **Discontinue Reason** from the drop-down
- 4. Click Orders for Signature

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Orders Medication List Document In	n Plan						
View View ICU Insulin Infusion - Critical Care (ICU Electrolyte Replacement (Modu ICU Insulin Infusion - Critical Care () Education () S ddmit/Transfer/Discharge itatus atiant Care cctivity Niet/Nutrition iontinuous Infusions Aedications Ilood Products aboratory Niagnostic Tests rocedures Lespiratory Ulied Health ionsulta Referrals Related Results	Displayed. All Active Orders All Inactive Orders All Active Orders Six Minute Walk (6 Minute Walk) △ Allied Health ■ Details for Respiratory Therapy Following ■ Details ign Order Comments + ■ In. ■ Discontinue Date/Time 12-Dec-2017 • 15	s Status Ordered Discontinue owing 21 PST	Dose Details 10-Dec-2017 15:38 12-Dec-2017-15:21 Discontinue Reason:	(Vone) Other Drug-Allergy Interaction Drug-Drug Interaction Duplicate Order Exam Replaced No Longer Medically Indicated Nurse Request Order Error Patient Discharged Patient Expired	3	Sho	w More Orders
Formulary Details Variance Viewer	Orders For Cosignature Orders For Nurse Review					Orde	rs For Signature

5. Click Sign



< > - 🛉 Orders	 Full screen 	🖶 Print	🗈 8 minutes ago
💠 Add 🖑 Document Medication by Hx Reconciliation * 🚴 Check Interactions	Reconciliation Star	tus 🕒 Admissio	n Discharge
Orders Medication List Document In Plan			
Orders for Signature			
View 🔊 🗇 🖓 🕅 V Order Name Status Start Details			
rs for Signature 🛆 🔺 LGH 4E; 406; 01 Enc:700000015058 Admit: 17-Nov-2017 14:14 PST			
△ Allied Health			
rument In Plan			
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to insulin infusion - critical care (w			
en priedry in sector central carried =			
Venus Thrandbergholism (JTE) P			
ICU Propofol (Module) (Validated)			
ICU Insulin Infusion - Critical Care (
ICU Electrolyte Replacement (Modu			
U Insulin Infusion - Critical Care (I			
ested Plans (0)			
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kctivity			
Diet/Nutrition T			
	-		
Formular Details			
Variance Viewer 0 Missing Required Details Orders For Cosignature 0 Orders For Nurse Review			Sign
			5

- 6. You will see that the order status is now processing.
- 7. Click the **Refresh** icon and the order will no longer be visible on the Orders Profile.

< 🖂 - 🛉 Orders							[🗆] Full screen	Print	₽ 7 minutes ago
🕂 Add 🎝 Document Medication I	by Hx Reconciliation	n 🕶 🕭 Check Interactions					Reconciliation Stat Meds History	us 🕒 Admissic	on 🕒 Discharge
Orders Medication List Documen	nt In Plan								
View	Displayed: All Active (Orders All Inactive Orders All Active Orders						Sho	ow More Orders
Orders for Signature	Ø 17	Order Name 🔺	Status	Do	se	Details			~
Document In Plan	△ Allied Health								
□ Medical		Respiratory Therapy Following	Processing			07-Dec-2017 09:27 PST, No Long	er Medically Indica	ated	
Peripherally Inserted Cent ⊨	Communication	o Orders							
- MED General Medicine A									
-Negative Pressure Wour									
- Suggested Plans (0)									
- Orders									
V Patient Care									
- Z Activity									=
- Diet/Nutrition									
Continuous Infusions									
Medications									7
Related Results	▲ Details								
Formulary Details									
Variance Viewer	Orders For Cosignatu	re Orders For Nurse Review						Orde	ers For Signature
L									

Key Learning Points

Right-click to mark an order as completed or cancel/discontinued.

Once an order is cancelled or discontinued the order will be removed from the patient's Orders Profile 1



Activity 8.6 – Review Components of a PowerPlan

A **PowerPlan** in the CIS is the equivalent of preprinted paper orders. **PowerPlans** help to coordinate patient care by defining sets of orders that are often used together. At times it may be useful to review a **PowerPlan** to distinguish its associated orders from orders placed in an individual manner.

Let's review a PowerPlan. From the Orders Profile:

- 1. Locate the Plans category to the left side of the screen under the Navigator (View)
- 2. Select the Bowel Protocol PowerPlan
- 3. Review orders within the PowerPlan (Sennosides 12mg, PO, qHS, PRN)

🕂 Add 🦨 Document Medication by Hx Reconcil	iliation • 🚴 Check Interactions	Reconciliation Status Meds History Admission Discharge
Orders Medication List Document In Plan		
<u> </u>	4 😥 🚫 + Add to Phase - 📓 Comments Start: 04-Dec-2017 11:11 PST Stop: None 📖	
View	Status Doce Details	
Orders for Signature	Bowel Protocol (Module) (Validated) (Initiated)	
Plans	Last updated on: 04-Dec-2017 11:11 PST by: TestORD, GeneralMedicine-Physician, MD	
Document in Plan	⊿ Medications	
MED General Medicine Admission (Validated) (P	If patient has GFR less than 30 mL/min use Bowel Protocol Renal	
Revel Protocol (Module) (Validated) (P	This is a general bowel protocol (General Medicine). It does not include specialized bowel protocols such as elderly care, labour and delivery, palliative care, and spine patient	
induced (module) (Finduced) (finduced)	CONTRAINDICATIONS Complete bowel obstruction, diarrhea, colostomy, ileostomy, short bowel syndrome	
Suggested Plans (0)	Do NOT give SUPPOSITORIES or ENEMA If Leukemia / BMT patient or if pancytopenic or neutropenic	
Orders	Vey 1 Setet nobestiviles obsci 250 (oreferred) 0P lactulors	
Admit/Transfer/Discharge	See 2 Continue Day 11 retainent	
V Status	Select sennosides (preferred) OR magnesium hydroxide with cascara	
Z Patient Care	🗹 🔞 🕫 sennosides Ordered 12 mg, PO, qHS, PRN constipation, drug form: tab, start: 04-Dec-2017 11:11 PST	
C Activity	If no bowel movement after 48 hours. Please continue day 1 treatment (Bowel Protocol Day 2)	
2 Diet/Nutrition	👰 Select magnesium hydroxide AND cascara liquid	3
Continuous Infusions	A Dav 3 (continue Dav1 and Dav2 treatment)	
Medications		
Blood Products		
Laboratory		
Diagnostic Tests		
Procedures		
Respiratory		
Allied Health		
Consulty Referrals		
Communication Orders		
Non Categorized		
Medication History		
Medication History Snapshot		
Reconciliation History		
· ·		
e +		
Related Results	The Details	
Formulary Details		
Variance Viewer	Orders For Cosignature Save as My Favorite	Orders For Signature
L		
	PRODBC OF	DTEST.PR Monday, 04-December-2017 11:11 PS

- The Navigator (View) displays the lists of PowerPlans and clinical categories of orders
- At times it may be useful to review a PowerPlan to distinguish its associated orders from orders placed in an individual manner



PATIENT SCENARIO 9 – CareCompass and CareAware Critical Care

Learning Objectives

At the end of this Scenario, you will be able to:

- Access and utilize CareCompass
- Access and utilize CareAware Critical Care

SCENARIO

For respiratory therapists that work in the intensive care unit or high acuity unit where there is a designated assignment, you can use additional functionality such as CareCompass and CareAware Critical Care to see an overview of your patient(s).

As a Respiratory Therapist you will be completing the following activities:

- Introduction to CareCompass
- Introduction to CareAware Critical Care (iAware)

Patient

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Activity 9.1 – Introduction to CareCompass

CareCompass displays information you need about your patients directly, including important 1 details such as allergies, resuscitation status, reason for visit, activities (tasks), ABG results, ventilator modes and type of oxygen therapy.

- 1. Navigate to **CareCompass** by clicking on the **CareCompass** icon in the Toolbar.
- 2. Select YourName_Custom from the Patient List drop-down.

PowerChart Organizer for Elearn, Karin Demo-Olson			
Task Edit View Patient Chart Links Navigation Help			
🎬 CareCompass 👖 nical Leader Organizer Patient List 🚨 Multi-Patient Ta	ask List 🎬 Discharge Dashboard 🎎 Staff	Assignment 📲 LearningLIVE 🖕 🕄 😋 CareConnect 🔍 PHSA PACS	🕄 V
🔇 Patient Health Education Materials 🔇 Policies and Guidelines 🔇 UpToDate 🤤	;		
CareCompass			
👫 🗎 🖶 🖿 🔍 🔩 100% 🔹 🌑 🖓			
Patient List: LL's custom	ent 🥵 Establish Relationships		
Location Patient	Visit	Care Team	
IC06 - 01 CSTDEMO, ZEUS 38yrs M No Relationship Exists	-	-	
Arthity Timalaa			
Click Defrech		aible an usur sustan list	
5. CIICK RETRESN . YOUR SELECTED	patients are now vi	sible on your custom list.	
Task Edit View Patient Chart Links Navigation Help			
🟗 CareCompass 🎬 Clinical Leader Organizer 🖕 Patient List 🔐 Multi-Patient Task List 🎬 Discharge Dashboard 😂 🌒 Patient Health Education Materials 🌒 Policies and Guidelines 🕲 UpToDate	Staff Assignment 🌇 LearningLIVE 🝦 🔅 😋 CareConnect 🌘	CPHSA PACS CVCH and PHC PACS CMUSE CFormFast WFI	
		/@ Recent + Nam	
CareCompass		D Full screen	2
AA		_	2 2 4 minu

Care Team

Activitie

Plan of Care





Let's review the CareCompass page.

- 1. The **Toolbar** is located above the patient's chart. It contains buttons to navigate other parts or functions of the Clinical Information System (CIS)
- 2. The **Patient List** drop-down menu enables you to select the appropriate patient list you would like to view
- 3. The only information visible about a patient is their location, name, and basic demographics until you establish a relationship. You can establish the relationship with the patient's chart using the **Establish Relationships** button
- 4. After the relationship is selected, it will open up additional information pertaining to your patient.
- 5. After reviewing additional information, click on **[patient's name]** and the patient's chart will open. CareCompass allows you to access a patient's chart directly as well as providing an overview of patient information.



- CareCompass provides a quick overview of patient information
- Prior to establishing a relationship with the patient, the only information visible about a patient is location, name and basic demographics

1



Activity 9.2 – Introduction to CareAware Critical Care (iAware)

CareAware Critical Care (iAware) provides an interactive dashboard that aggregates critical patient information from multiple sources (such as vital signs, IV drips, intake and output), allowing providers and clinicians to gain an understanding of the complete picture of the patient at a glance.

 With your patient's chart open, you can access CareAware Critical Care by clicking the iAware button on the Toolbar.



2. The **CareAware Critical Care** dashboard consisting of various sources of clinical information opens.

💭 Young, Jim - CareAware Critical Care					EN Engl	ish (Canada) 🕐 Help 🤤 🗖 🚱
iAware Help						
MyList Patient Search [ICU Summary] Meds Review Vitals/Infusions (24hr) I/O Blood Glucose						Reset Perspective 🔅 🎯 minutes a
Young, Jim 62 years M DOB: 3/25/1955 MRN: 01022014 FIN: 0000	00077	75 Admit	: 11/26/2017	Unit LOS	: 2 days	Location: ICU/01 🤇 🖲
Dose Weight: 86kg (11/27/2017 09:35) Actual Weight: 85.8kg (11/27/2017 09:35) Al	lergie	s: Latex				
Vitals, CV, Neuro, Infusions (12 hr)	1/	/O (3 day)				
Reset Graphs Display: 🔲 Zoom Tool			11/26	11/27	11/208	Panas tat
Vital Signs (11/28/2017 00:55> Current) (11/28/2017 00:55> Current)		Net (mL)	-120	695	885	1.460
Image: Space of the s	× =	4,000 - 3,000 - 2,000 - 1,000 - -1,000 - -2,000 - -3,000 - -4,000 -	07:00-06:59	07:00-06:59 easurement period	07:00-06:53	Continuous Infusion Medication J Tube Feeding Vinin NG Tube Output Drain Stool Chest Tube
	L	_abs			Respirator	у
♥ → PAS [20:30] 25 ♥ → PAD [5:14] 25	8	Blood Gases (Last 2 in	24 hours)	* *	Respiratory	\$
Date Description (2) (2017) (0):55	_ L	Lab	11/28 08:35	11/27 20:05		08:53
Biodo Pressules (11/26/2011 0055 **** Current)	° P	эH	7.4	7.38	RR	13 bpm
© A-line	F	PO2	79↓ 30	79↓ 37	SpO2	90 35%
✓ SBP [110-120]	E F	-002	23	22	Ventilator	33%
MAP [71-88]	E	BE	1	1	(Change of the second s	08-53
75	0	Chemistry		\$	Mode	SIMV
	L	Lab	Latest	Previous	TV Set	700
		Va.	138	149 1	TV Inhalod	690 mL

3. Hover over the actual time dot and detailed clinical information will display.



MyList Patient Search ICU Summary Meds Review Vitabs/Infusions (24hr) 1/0 Elood Glucose Young, Jim 62 years M DOB: 3/25/1955 Mail Dose Weight: 86kg (11/27/2017 09:35) Actual Weight: 87 Vital Signs	iAware Help			
Young, Jim 62 years M DOB: 3/25/1955 M Dose Weight: 86kg (11/27/2017 09:35) Actual Weight: 8 image: 11/28/2017 05:33 - 11/28/2017 06:03 5 Vitals, CV, Neuro, Infusions (12 hr) Actual Weight: 8 image: 11/28/2017 05:33 - 11/28/2017 06:03 5 Vitals, CV, Neuro, Infusions (12 hr) Bigligy: 2 dom Tool image: 11/28/2017 06:03 5 5 Vitals, CV, Neuro, Infusions (12 hr) image: 11/28/2017 06:05 image: 11/28/2017 06:05 5 5 Vitals, CV, Neuro, Infusions (12/28/2017 00:55> Current) image: 100 image: 100 image: 11/28/2017 00:55 0 0 Vasoactive Infusions (11/28/2017 00:55> Current) image: 11/28/2017 00:55> Current) image: 100 image: 1	MyList Patient Search ICU Summary Meds Review	Vitals/Infusions (24hr) I/O Blood Glucose		
Dose Weight: 86kg (11/27/2017 09:35) Actual Weight: 84 Vitals, CV, Neuro, Infusions (12 hr) Reset Graphs Display: Zoom Tool • MAP [71-88] • Graphs Display: Temp(DegC): 39 • Mar Science Temp(DegC): 39 • Mar Sc	Young, Jim 62 years	S M DOB: 3/25/1955 I	Hover Range: 11/28/2017 05:33 - 11/28/2017 06:03	5.
Vitals, CV, Neuro, Infusions (12 hr) Rest Graphs Display: Zoom Tool • MAP (71-88) • DBP (48-69) • Currents 100 75 50 100 75 50 100 75 50 Temp(DegC): 39 Net (mill • SpO2(%): 86 • MAP (71-88) • DBP (48-69) • Currents 70 70 70 70 • Furosemide (mg/kg/hour) • FAS: 21 • SwO2: 71 Vasoactive Infusions (11/28/2017 00:55> Current) 0.4 10 0.2 0.1	Dose Weight: 86kg (11/27/2017 0	9:35) Actual Weight:	Vital Signs 	s: Lat
~ DBP [48-69] 75 ○ Current 50 Yasoactive Infusions (11/28/2017 00:55> Current) 0.4 ○ + 0.4 ○ + 0.4 0.4 0.3 0.4 0.3 0.4 0.4 0.4 0.4 0.4 0.5 0.4 0.5 0.4 0.5 0.4 0.5 0.4 0.5 0.4 0.5 0.4 0.5 0.4 0.5 0.4 0.5 0.5 0.1 0.1 0.5 0.1 0.5 0.1 0.5 0.1 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5	Vitals, CV, Neuro, Infusions (1) Reset Graphs Display: 200m Tool MAP [71-88]	2 hr)	→ HR(bpm): 92 → RR(bpm): 19 → Sp02(%): 86 - → Temp(DegC): 39	O (3 d
Image: Sedation, and Paralytics (11/28/2017 00:55> Current) 02:00 04:	DBP [48-69] Cutf Cutf Carrolate Vacactive Infusions (11/28/2017 00:55) Current)	75 50	Hemodynamics 	
Antiarrhythmics (11/28/2017 00:55> Current) 3	 ✓ Furosemide (mg/kg/hour) ✓ Phenylephrine (mcg/min) ✓ Terbutaline (mcg/kg/min) 	$\begin{array}{c} 0.4 \\ 0.3 \\ 0.2 \\ 0.1 \\ 0 \\ 0 \\ 0 \\ 0 \\ 0 \\ 0 \\ 0 \\ 0 \\ 0 \\ $	Biod Pressures A-line: 120/63, 81 Vasoactive Infusions Furosemide (mg/kg/hour): 0.3 Phenylephrine (mcg/min): 50	Indicates
Pain, Sedation, and Paralytics (11/28/2017 00:55> Current) Pain, Sedation, and Paralytics (11/28/2017 00:55> Current) Propofol (mcg/kg/min) O2:00 04:00 O3:00 H correction (CO3) Co2 • Propofol (mcg/kg/min) 02:00 04:00 06:00 Image: Correction (CO3) Image: Co	Antiarrhythmics (11/28/2017 00:55> Current)		Terbutaline (mcg/kg/min): 2.2 Antiarrhythmics Amiodarone (mg/min): 1	. abs lood Gases ab
Pain, Sedation, and Paralytics (11/28/2017 00:55> Current) Propofol (mcg/kg/min) 25 25 25 25 25 25 25 25 25 25 25 25 25		1 0.75 0.5	Propofol (mcg/kg/min): 15	H 102 1C02 IC03
Propofol (mcg/kg/min) 02:00 04:00 06: -** - Chest Tube Output(mL): 20 hemistry 25 20 4:00 06: -** - UOP(mL/hr): 37 ab 15 4:00 4:00 06: -** - UOP(mL/hr): 37 ab	Pain, Sedation, and Paralytics (11/28/2017 00:55> C	urrent)	Hemodynamics	E
	–●– Propofol (mcg/kg/min)	02:00 04:00 25 15	16: UOP(mL/hr): 37	hemistry ab a

Note: Besides being able to view patient's clinical data during shift report and handoff, CareAware Critical Care can also be utilized in rounds for clinical decision-making and care planning.

To exit out of CareAware Critical Care,

- 4. Click on the iAware button in the top left corner of the screen.
- 5. In the **iAware** drop-down, select **Exit** and the window will close and you will see the patient's chart display again.

🦉 Care Aware Critical Car	•
CareAware Chucar Car	t
iAware lization	Help
Prefe 4	CU Summary Meds Review Vitals/Infusions (24hr) I/O Blood Glucose
Exit 5	
Enter a location or tag n	ame. (Enter ONLY alphanumeric characters, spaces, or underscores.)
[Second Se

Key Learning Points

CareAware Critical Care provides critical patient information from multiple sources in the chart that allows providers and clinicians to understand the complete picture of the patient. This helps to make clinical decisions for patient care and treatment plans.



PATIENT SCENARIO 10 – End of Shift Activities

Learning Objectives

At the end of this Scenario, you will be able to:

Perform End of Shift Activities

SCENARIO

In this scenario, you will practice activities associated with giving report and documenting handover.

As a respiratory therapist, you will be completing the following activities:

- Documenting Informal Team Communication
- Handoff Tool
- Documenting Handoff in iView



Activity 10.1 – Documenting Informal Team Communication

1

Within the **Handoff Tool**, there is an **Informal Team Communication** component that can be used for documentation of informal communication between all interdisciplinary care team members.

- Use the Add new action section to create a list of to-do action items
- Use the Add new comment section to leave a comment for the oncoming respiratory therapist or other team members

Note: Items documented within the Informal Team Communication component are **NOT** part of the patient's legal chart

Select **Respiratory Therapy View** from the Menu:

- 1. Click on Handoff Tool
- 2. Select the Informal Team Communication component
- 3. Under Add new action type = Administer PRN nebulizer at bedtime per patient request
- 4. Click Save.

Menu	₽	< 🕞 🔹 者 Respiratory Tl	herapy	v View						
Respiratory Therapy Vie	ew 🔶	A 100%	•	• • 4						
Mental Health Summary		Handoff Tool		X Quick Orders	23	Assessment	22			
Orders	🕂 Add									
Single Patient Task List		Informal Team	T	nformal Team Commu	inication					
MAR		Communication 2	1 -		inication					
Interactive View and I&O		Active Issues		Administer PRN nebulizer at bedtime per patient request 3						
Results Review		Allergies (0)								
Documentation	🕂 Add	Vital Signs and Measurements					199 characters left			
Medication Request		Assessments			\checkmark	Available to All	Save 4 incel			
Histories		Documents		No actions documented						
Allergies	🖶 Add 🗧	Transfer/Transport/Accompan								
Diagnoses and Problems		Iment Lines/Tubes/Drains		An reams						

- 5. To **Add new comment,** type = *Tracheostomy dressing changed and noted a large amount of drainage. Please assess during the shift.*
- 6. Click Save



Handoff Tool	≍ +	- • =
		∂ ≡-
Tracheostomy dressing change during shift.	ed and noted large amount of dr	ainage. Please assess
	🖌 Available to	906 characters left O All Save 6 ncel
No comments documented All Teams		

It is important to remove/delete Informal Team Communication when they no longer apply.

To remove/delete Informal Team Communication:

7. Hover over action or comment text and then click the **small circle with the X** icon to the right of the action/comment.

Informal Team Communication	
Add new action	
Administer PRN nebulizer at bedtime per patient request TestUser, RespiratoryTherapist 13/12/17 14:12	1 🖲 7

The note will now have disappeared from under the Informal Team Communication component.





Activity 10.2 – Handoff Tool

1

When performing shift handover, respiratory therapists will use the Handoff Tool to review patient information between the oncoming and off going clinicians.

From the **Menu** select **Respiratory Therapy View**. From the **Handoff Tool Tab**, scroll down the page or access each component by clicking within the Handoff components on the left.

Handoff Tool	Summary Summary	23 Assessmen	nt 🕄 Disc	harge	²³ +				🖃 — 🖻 🍕 🔳 🔳
Informal Team Communication	Active Issues						đ	assification: Medical and Patie	nt Stated 👻 All Visits 🤁 💷 🔺
Active Issues					Add new as: This Visit	- Q			
Allergies (2)									
Vital Signs and Measurements	Name				Classification	Action			
Documents (1)	Pneumonia				Medical	Th	is Visit Chronic		
Transfer/Transport/Accompanim	Diabetes				Medical	Th	is Visit Chronic	:	
ent (u)	Peripheral vascula	ar disease			Medical	Th	is Visit Chronic		T
Assessments (U)									
Lines/Tubes/Urains									AT Mater 2 = -
Labs	Allergies (2)								
Imaging (0)									Scroll to view
Medications	Substance	Reactions	Category	Status	Severity	Reaction Type	Source	Comments	more
Home Medications (n)	Bees/Stinging Insects	-	Environment	Active		Allergy			
Order (10)	diphenhydrAMINE	-	Drug	Active		Allergy			
Organization and Vantilation (0)							Reco	onciliation Status: Incomplet	e Complete Reconciliation
Dathology (0)									
Histories	Vital Signs and Me	asurements 🕂					Selected visit:	Latest ^a Selected visit Las	t 12 hours 🔠 🔟 🥺 💷
1000102		NOV 20, 2017 15:57							
Create Note	Respiratory Rate	br/min 122							
Interdisciplinary Care Plan	* Displaying recent result	s up to 16 columns of information for	the selected visit						
Interdisciplinary Rounding Summ ary Note									
Nursing Shift Summary	Documents (1)						Selected visit: La	st 50 Notes Selected visit	Last 12 hours More V 2 =-
Select Other Note							🔲 My notes only	Group by encounter	Display: Multiple note types -
	Time of Service	Subject	Note Type		Author	Last Up	dated	Last Updated By	
	20/11/17 16:37	Free Text Note	Nursing Shift Sum	mary	TestORD, Nurse	20/11/	17 16:38	TestORD, Nurse	

Key Learning Points

Use the Handoff Tool to review patient information between respiratory therapists



Activity 10.3 – Documenting Handoff in iView



As the off going respiratory therapist, you will document that you have given handoff in iView by completing the following steps:

- 1. Select Interactive View and I&O from the Menu
- 2. Select Shift Report/Handoff section from Respiratory Therapy band
- 3. Document using the following data:
 - Clinician Receiving Report = Respiratory Therapist 1
 - Clinician Giving Report = Respiratory Therapist 2
 - Orders Reviewed = Yes
- 4. Sign your documentation by clicking the green check mark icon \checkmark



Key Learning Points

Document that you have given report in the Shift Report/Handoff section in iView



🔹 End Book One

You are ready for your Key Learning Review. Please contact your instructor for your Key Learning Review