SELF-GUIDED PRACTICE WORKBOOK [N64] CST Transformational Learning

WORKBOOK TITLE: Provider: Laboratory Pathologist



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F SELF-GUIDED PRACTICE WORKBOOK

Duration	2 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 15 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**
- 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



PATIENT SCENARIO 1 - Access and Navigation

Learning Objectives

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

- Log on to the Clinical Information System (CIS)
- Access patient charts and identify correct encounters
- Navigate the default home page
- Navigate and review chart components
- Document consultation notes and recommendations

SCENARIO

In this scenario, a colleague from hematology has called you with a request to investigate findings on a patient of theirs. The patient is a 38 year old male who was seen with a history of fever, chills, and general fatigue over the past several weeks. Bloodwork has been irregular for the last few months and recent hematology has shown a markedly decreased white blood cell count as well as neutropenia. A bone marrow aspirate and biopsy was also conducted. Your colleague is concerned regarding lymphoma as a new diagnosis.

You agree to examine the results as well as conduct a review of the patient chart to gain any important collateral information that may assist with diagnosis and treatment.

As a lab pathologist you will be completing the following activities:

- Log on to the Clinical Information System (CIS)
- Access patient charts and identify correct encounters
- Familiarize yourself with the CIS layout
- Familiarize yourself with your default home page
- Navigate the chart components
- Navigate the Lab Results Trending view
- Create, edit, and forward a note using Dynamic Documentation



Activity 1.1 – Log In and Access the Patient Chart

Ensure you are logged in with the provided Username and Password.

€ ^{cerner} Cerner Millennium
TEST.MDLAB
Password :
Domain :
prodbe
OK Cancel
PowerChart
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2 Landing Page

1

Your landing page will be Message Centre.



NOTE: Most providers will interact with Message Centre multiple times a day, receiving information like results, order proposals, and patient notifications within this view. As a Laboratory Pathologist, it is not expected that you will need to utilize the Message Centre functions; therefore it will not be explored in this workbook.

If you decide to investigate the Message Centre in depth, you can access the Quick Reference Guide (QRG) that has been created to help you familiarize yourself with its functionality.

Patient Search

3

Your colleague has provided you with both the patient's name and MRN. You can use either piece of information to begin searching for patients.

CLINICAL+SYSTEMS

Q

TRANSFORMATIONAL

LEARNING

1. Navigate up to the patient search box in the upper-right corner of the page.



2. a) Type in [patient]'s name and click the magnifying glass icon to search.

b) If only an MRN is provided, click the drop down arrow beside the name search box and select MRN to change the search criteria to MRN.

👘 Recent 👻 🔤 MRN		<u>ર</u> વ
Ill screen 🖷 Print 🖬	~	MRN
		Name
		FIN

4 Correct Patient and Encounter

Select the correct patient and encounter from the results list

	VIP	Deceased	Alerts BC	PHN	MBN	Name		DOB	Age	Gender	Address	Address (2)	City Postal	Zip Code Home Pha
	6		987	6541063	7000073	77 CST-T	TT. SHEBIE	17-Jan-19	38 79 Years	Female	590 W 8th	Ave	Vancouver	-
	0		987	6541056	7000073	78 CST-T	TT, DEANNE	18-Jan-19	42 75 Years	Female	590 W 8th	Ave	Vancouver	
_	2		987	6541049	7000073	79 CST-T	TT, PASCAL	18-Jan-19	43 74 Years	Male	590 W 8th	Ave	Vancouver	
	Ø		987	6541031	7000073	80 CST-T	TT, GARFIELD	21-Jan-19	37 80 Years	Male	590 W 8th	Ave	Vancouver	
	2		987	6541024	7000073	81 CST-T	TT, JACKLYN	22-Jan-19	44 73 Years	Female	590 W 8th	Ave	Vancouver	
	12		987	6541017	7000073	82 CST-T	TT, LANEY	01-Feb-19	49 68 Years	Female	590 W 8th	Ave	Vancouver	
	2		987	6540996	7000073	83 CST-T	TT, DEEPIKA	02-Feb-19	51 66 Years	Female	590 W 8th	Ave	Vancouver	
	6		987	6540989	7000073	84 CST-T	TT, YANG	01-Jan-19	48 69 Years	Male	590 W 8th	Ave	Vancouver	
_	2		987	6540839	7000073	197 CST-T	TT, BIRGIR	01-Jan-19	40 77 Years	Male	590 W 8th	St	Vancouver	
÷ 🖛	Ø		987	6540821	7000073	98 CST-T	TT, KAPENA	03-Mar-19	50 67 Years	Male	590 W 8th	Ave	Vancouver	
	2		987	6540807	7000073	199 CST-T	TT, THALIA	01-Jan-19	35 82 Years	Female	590 W 8th	Ave	Vancouver	
•	2		987	6540799	7000074	00 CST-T	TT, VALERIE	01-Jan-19	38 79 Years	Female	590 W 8th	Ave	Vancouver	
	5		98/	6540781	7000074	02 CST-1	TT, KIMBEHLY	U1-Jan-15	42 /5 Years	Female	590 W 8th	Ave	Vancouver	•
	•							III						+
	Faci	lity	Encounter #	Visit #		Enc Type	Med Service		Unit/Clinic	Room	Bed	Est Arrival Date	Reg Date	Disch Date
-	 L	GH Lions Gate	700000013481	7000000	013548	Inpatient	Cardiology		LGH 7E	7EL	04	15-Nov-2017 10:0	0 14-Nov-2017 11:0	5
	- - 1	GH Lions Gate	700000012224	7000000	012291	Outpatient	Respirology		LGH PF Lab	Exam Roc	om 3	19-Oct-2017 9:00	19-Oct-2017 15:1	2 19-Oct-2017 21:44
	- - 1	GH Lions Gate	700000011922	7000000	011989	Inpatient	General Interna	l Medicine	LGH MTR	MTR Wai	t 24		13-0ct-2017 10:0	2 19-Oct-2017 22:10
	- - 1 1	GH Lions Gate	700000011836	7000000	011903	Inpatient	Hospitalist Medi	icine	LGH MTR	MTR Wai	t 24		12-0ct-2017 9:47	19-0ct-2017 21:43

- 1. Click on the correct patient from the results list of names. A list of encounters will appear in the field below.
- 2. Examine the details of the encounter to ensure it is correct.
- 3. Click OK.





5

NOTE: Several encounters can be active at the same time. Remember "Right Patient, Right Encounter."

Assign a Relationship

P Assign a Relationship
For Patient: CST-TTT, BLOGGENS
Relationships:
Consulting Provider Covering Provider Education Quality / Utilization Review Referring Provider Research Triage Provider
OK Cancel

When opening a patient chart, the Clinical Information System (CIS) requires you to create a relationship.

- Additional step for ensuring patient privacy and correct patient selection.
- Depending on your role, relationships can last for an encounter (ex. consulting providers), a shift (ex. bedside nurse), or even be a lifetime relationship (ex. general practitioner).
- 1. Choose **Consulting Provider** and click **OK** to open the patient chart.

Key Learning Points

- Patients can be searched for using name or MRN and the search box can be changed to accommodate either option.
- Patients can have more than one actively open encounter at a time.



Activity 1.2 – Familiarization with the Patient Chart

This activity will give you a brief overview of the broad elements in a patient chart before exploring more interactively.

Single Patient Chart and Provider View

The chart will open to the **Provider View** page.

ST-TTT, BIRGIR	oberries Pearuts	DOBD1-Jan-1940 Age/77 years GenderMale	MRN:700007307 Enc:700000013481 2HN:9876540109	Code Status: Designs W180 ke	Process: Disease Kolute: Crisolet	Lat Carleer + Vietne + Location:LGH 7E: 7EL: 04 En: Type:Apatient Attendes/Silver Sector MD
Provider View						📜 Full screen 🛛 👘 Print 🛛 🕹 1 haurs 26 minutes
A B & B & A 100%						
Consult/ Referral	II +					
Chief Compliant Visits (4)	Chief Complai	nt				Selected year $ \mathfrak{d} $
Histories Documents (2) Links	Enter Oliver Coar	plaint				
Vital Signs Immunizations	Visits (4)					λā vuuts [₽] ≕-
Labs Pathology Micro Cultures	Date Previous (4) - Li	Type ast 5 Visits	Location		Reson for Vet	
Imaging	Histories					Al Valta $\left \boldsymbol{\mathfrak{T}} \right = \cdot$
Home Medications	Medical History	(4) Surgical Hitte	ry (3) Family Hittor	y (3) Social History	(0)	Q Add protein
Atergies	Name 1		(B)		Classification	
Urber Proteit	a Chronic Problem	ns (4)				
New Order Endy ~	Asthnia				Hedical	
Active boues	COPD (chronic ob	structive pulmonary disease>			Medical	
INDEE MEDICE AVAILABILITY	GERD (gastroeso)	ohapear reflux disease)			Medical	
Create Note	meumonia				Medical	
Laboratory Hedicine Consult (Fre a Text)	 Resolved Proble 	ande (u)				Reconciliation Status: Incomplete Complete Reconciliation
Laboratory Medicine Consult						

This is your default landing page for all patient charts and contains several different components used to both review patient information and actively complete work within the system.

These may be referred to as Summary views and Workflow views depending on their function. Users can use their mouse pointer and "**hover to discover**" details about different icons, headings, or links by holding their pointer over the desired aspect of the element in question.



2 E

1

Banner Bar

The **Banner Bar** is located at the top of the screen. It displays demographic data, alerts, information about patient's location, and current encounter.

CST-TTT, BIRGIR 🛛			te List =	ि ि Recent → Name → Q
CST-TTT, BIRGIR	DOB:01-Jan-1940	MRN:700007397 Code Status:	Process:	Location:LGH 7E; 7EL; 04
	Age:77 years	Enc:700000013	Disease:	Enc Type:Inpatient
Allergies: penicillin, Bee Stings,	. Gender:Male	PHN:9876540839 Dosing Wt:80 kg	Isolation:Droplet	Attending:Plisvca, Rocco, MD

1. Move your mouse pointer over each piece of information contained in the Banner Bar and

note when the pointer changes from an arrow icon \triangleright to a hand $\stackrel{\bullet}{\smile}$ icon.

This means the piece of information is interactive and can be clicked on for a snapshot of convenient information that does not require you to change pages or views to see.



2. Click on Enc Type to open a window containing a summary of all patient encounters.

Location:LO Enc Type:Inp Attending:Ti	5H 6W; 605; 04 Datient rain, GeneralMedicii	ne-Physician.		
Encounter Type	Location	Admit Date		Discharge Date
Inpatient	LGH 7E 7EL 04	14-Nov-2017 11:0	5 PST	
Outpatient	LGH PF Lab Exam Room 3	19-Oct-2017 15:12	2 PDT	19-Oct-2017 21:44 PDT
Inpatient	LGH MTR MTR Wait 24	13-Oct-2017 10:02	2 PDT	19-Oct-2017 22:10 PDT
Inpatient	LGH MTR MTR Wait 24	12-Oct-2017 09:47	7 PDT	19-Oct-2017 21:43 PDT
•	" GENERAL INF	FORMATION		<u> </u>
Full Name:	CST-TTT, BIRGIR	EMC:		
Reg Date/Time:	14-Nov-2017 11:05 PST	EMC Phone:		
D.O.S.:	20.1	Fin Number:	700000013481	
Nurse Unit:	LGH 7E			
Room:	7EL			
				OK Cancel

From here, you can review all other encounter types and verify that you have selected the correct encounter. You can also quickly choose to open a different encounter from this window if desired.

3. Click on **Cancel** to close the window, since you are not changing encounters.

NOTE: Along the **Banner Bar** that there are three **Alert** categories that can be populated with important information.



- **Process** Things of special note to clinical and other staff like violence risk, falls, risk, or difficult airway.
- Disease A coded list of diseases that only ICP can add to or remove. This is a multiselect list and will follow patient charts across encounters.
- Isolation Isolation types that stem from isolation orders. This is single-select list and will not follow a patient across encounters

Below the Banner Bar, note the **Refresh** icon *Refresh* and timer showing how long ago the information on your screen was last updated. Refresh pages regularly and after completing tasks to ensure that your entries are up to date.

List 🚽	Recent	Name	- Q
Location:LGH 7E; 7EL; 04			
Enc Type:Inpatient			
Attending:Plisvca, Rocco, MD			
[ㅁ] Full screen	Print	🔁 1 hours 44 minut	es ago



Components

3

On the left side of the screen is a list of components. These may differ depending on your specialty.

You can scroll through the list of components or click on the name of a specific component to review clinical information documented.

< 🖂 🕣 者 Provider View					[🗆] Full screen	🗃 Print	2 1 hours 50 minut	tes ago						
🗚 📄 📥 🔍 🔍 100%	- • • 🗳													
Consult/ Referral	≍ +					F		≡•						
Chief Complaint	Chief Compl	aint				Se	elected visit $ \mathfrak{E} \equiv -$,						
Histories	Fever, chills, a	Fever, chills, and general malaise												
Documents (2)	TestUser, Lab-P	TestUser, Lab-Physician, MD 29/11/17 11:35												
Links														
Vital Signs	10.11													
Immunizations	VISITS (4)						All Visits 🥵 = 🕻	-						
Labs E	Date	Type	Location	Reason for Visit										
Pathology	⊿ Previous (4)	Last 5 Visits												
Micro Cultures	14/11/17 11:05	Inpatient	LGH Lions Gate LGH 7E 7EL 04	Hemiarthroplasty shoulder										
Imaging	(Currently Viewing)													
Home Medications	19/10/17 15:12	Outpatient	LGH Lions Gate LGH PF Lab Exam Room 3	SOB										
Current Medications	13/10/17 10:02	Inpatient	LGH Lions Gate LGH MTR MTR Wait 24	Shortness of breath										
Allergies	12/10/17 09:47	Inpatient	LGH Lions Gate LGH MTR MTR Wait 24	Shortness of breath										
Order Profile														
New Order Entry														
Active Issues	Histories						All Visits 🤁 = -	-						

Key Learning Points

- Almost all aspects of your workflow that take place in the Clinical Information System (CIS) can be completed within Provider View
- Use the Refresh function regularly and after completing actions to update your view of the chart
- Components can either be scrolled through in order or can be clicked on from the components list to jump to the desired selection



Activity 1.3 – Review of Collateral Information

As you have been asked by your colleague to review the patient's chart, you will now begin by accessing several components of the chart to search for information relevant to the consult note you intend to write.

You may choose to scroll through all components, but functionality of many different components is the same; therefore you will not be tasked with exploring all components listed in the left hand column.

Review Histories

1

1. Click on the **Histories** band within the components list to bring the Histories component to the top of the page.

Admission	23	Rounding	83 1	Fransfer/Discharge	23	Quick Orders	23	Outpatient Chart	× +	- 🖓	
Microbiology C & S Links	^	Histories								All V	isits æ ≡
Labs Intake and Output		Medical History	(0)	Surgical History	(0)	Family History	(0)	Social History	(0)	Obs/Gynocology	(0)
Home Medications History of Present Illness			blems docur	mented. Document No Ch	ronic Prof	lems or add a problem					
Histories Functional History (0)	1	Name		A			Classification				
Documents (0) Diagnostics (0)		No results found	ms (0)								
Current Medications Chief Complaint			.,					Reconciliation	Status: Incon	nplete Complete Re	conciliation

Histories is divided into four sections: medical, surgical, family, and social history.

2. Click on each of the tabs to review any previously recorded patient history within that section.

Histories								
Medical History	(4)	Surgical History	(3)	Family History	(3)	Social History	(0)	
Name			*					Classification
△ Chronic Problems	(3)							
Asthma								Medical
COPD (chronic obstru	ctive pulmo	onary disease)						Medical
GERD (gastroesopha	geal reflux d	disease)						Medical
Resolved Problems	(1)							

3. Subsections of Histories that are collapsed can be expanded clicking on the subsection title.





NOTE: You have the functionality to add to, remove from, or modify Histories. However, as a Laboratory Pathologist, this will not be a function expected of you, so it has not been shown.

If you happen to practice as any other type of provider other than Laboratory Pathologist and wish to alter patient histories, diagnoses, or place orders, you will have to do so under your other provider profile using the provider's My Experience function. This function will be further explained prior to the CIS go-live date.

Review Active Issues

2

1. Click on the **Active Issues** band within the components list to bring the Active Issues component to the top of the page.

Allergies
Order Profile (13)
New Order Entry
Active Issues
Blood Product Availability

The Active Issues component allows you to view both current diagnoses as well as chronic problems. It pulls relevant information from patient histories as well as from problems and diagnoses.

Active Issues		Classification: Medical and	Patient Stated 👻 All Visits 🏾 🏖
	Add new as: This Visit 💌 🔍 P	roblem name	
Name	Classification	Actions	
1 🔻 Pneumonia	Medical	This Visit Chronic	Resolve
2 🔻 Asthma	Medical	This Visit Chronic	
⊿Historical			Show Previous Visits 🔽
COPD (chronic obstructive pulmonary disease)	Medical	This Visit Chronic	

The **This Visit** and **Chronic** buttons denote if the issue is strictly for the current encounter, a chronic problem, or both. Clicking these buttons can add or remove the issue from both active and chronic lists.

2. Click on the Active Issues heading to open the Diagnoses and Problems page.



< 🔹 ᠇ 🛔 Diagnoses and Proble	ms			[🗆] Full screen	Terint 🕻	🍹 1 hours 9 minutes ago
Mark all as Reviewed Diagnosis (Problem) being Addressed this Visit Add S Modify	Display: All			▼) IMO		
Priority Annotated Display	Condition Name A	Date 25-Oct-201	Code 17 150.0	Clinical Dx Acute CHF	Dx Type Admitting	Classificatio
СОРИ Туре А	СОРО туре А	25-Uct-20	17]43.9	СОРО туре /	A (Admitting	Medical
•	III					4
Problems						
🕂 Add 🗹 Modify 笃 Convert	🚯 No Chronic	Problems Dis	splay: All		•	🔎 IMO
Annotated Display Condition N	ame C	Onset Date Co	de Name of F	Problem 🔺	Life Cycle St	🛄 Classification
🚯 🔤 Acute CHF 🛛 Acute CHF		70	2340 Acute CH	IF	Resolved	Medical
🚯 🔤 COPD type A 🛛 COPD type	A	29	77031 COPD ty	pe A	Active	Medical

Active diagnoses that are being addressed this visit are listed in the top field, while chronic problems are listed in the bottom field.

If a diagnosis has been treated and resolved, all information associated with it will contain a strikethrough.

- 3. Click on the Home icon to navigate back to the Provider View.
- 4. Arrow icons will take you back and forth between the previous view and current view.



3

Review Documents in Provider View

1. Click on the **Documents** component within the list of components to bring the Documents component to the top of the page.



2. Click on a **Note**. A slide-out window will open, displaying the content of the document without leaving the page.



Documents (3) 💠					Last 50 Notes ALVisits Last	24 hours More - 2
				My notes only	Group by encounter Displa	y: Provider Documentation
Time of Service	Subject	Note Type.	Aultyan	Last Updated	Last Updated By	
29/11/17 12:50	Admission H & P	Laboratory Medicine Consult	TestUser, Lab-Physician, MD	29/11/17 12:51	TestUser, Lab-Physician, MD	
28/11/17 11:33	Lab Interpretation Note	Laboratory Medicine Consult	TestUser, Lab-Physician, MD	29/11/17 12:52	TestUser, Lab-Physician, MD	
28/11/17 11:13	patho consult	Laboratory Medicine Consult	TestUser, Lab-Physician, MD	28/11/17 11:15	TestUser, Lab-Physician, MD	
* Displaying up to the fast !	R) record notes for all wells	Constant Products Constant	Texcole, Las Tripacais, Par	10/12/17 11-10	reading the register re-	

Click the tab to close the split screen. Double-click or select Open Document to open a new window.

Documents (3) 🕂			Last 50 Notes 🛛 Al Volts Last 24 hours More 👻 🥏
			My notes only Group by encounter Display: Provider Documentation *
Time of Service	Subject		
29/11/17 12:50	Admission H B. P	No second cardene	open bocument hink
28/11/17 11:33	Lab Interpretation Note	Admission H & P	Laboratory Medicine Consult (Auth (Verified))
28/11/17 11:13	patho consult	TestUser, Lab-Physician, MD	Last Updated: 29/11/17 12:51
* Displaying up to live last	50 recent notes for all stats	Chief.Complaint Feer, chills, and general malaise	Problem List/Past Medical History GERD (gastroesophageal reflux disease) Historical
Links		History of Present Illness General: Alert and oriented x 3, no acute distress.	Pneumonia
d PharmaNet (1)		Cardiac: Normal S1 &S2, no gallops, no murmurs, no rubs, normal JVP, no pedal edema. Respiratory: Good air entry bilaterally, no adventitious sounds.	Procedure/Surgical History Total colectomy (1999), Omphalocele repair (Week of
PharmaNet		Abdomen: Normal bowel sounds, non-distended, soft, non-tender, no hepatosplenomegaly.	01/15/1940), Ankle fracture - lateral malleolus.
A CareConnect (1)		Physical Exam	Medications
CareConnect		Vitals & Measurements WT: 80 kg (Dosing)	melatonin, 3 mg, 1 cap, PO, gHS

In the workflow view, you can filter documents in many ways.

For example, you can display documents associated will **All Visists**, **Last 24 hours**, or **My notes only.**

	Last 50 Notes All Visits Last 24 hours More 💌 🥹 🚍
My notes only	Group by encounter Display: Provider Documentation -
	Last Updated By
2:51	TestUser, Lab-Physician, MD
2:52	TestUser, Lab-Physician, MD
::15	TestUser, Lab-Physician, MD

4. After adjusting filters, you can click on the **Refresh** icon $\stackrel{\textcircled{}}{\sim}$ associated with the Documents

component instead of the **Refresh** icon will only update the specific component and apply the changes you have made to the filters. It will avoid resetting your screen back to the top of the Provider View page.



Review All Documents

One important filter is **Display.** As a provider, the CIS is configured to filter documents that are created by other providers only. This helps limit excessive results within the Documents component.





As a Laboartory Pathologist, you will potentially want to review additional documentation created by other designations as well as scanned lab results. These can be easily viewed by following the steps:

1. Click the component heading **Documents** to display the **Documentation** view.

Documents (3)	
Time of Service	Subject
29/11/17 12:50	Admission H & P
28/11/17 11:33	Lab Interpretation Note
28/11/17 11:13	patho consult
* Displaying up to the last 50	recent notes for all visits

This view provides a comprehensive list of documents with more options. Here you will also be able to find any lab results that have been scanned in from other systems.

2. Filter results in the Documentation page by clicking on the Elipsis button bring up the **Advanced Filters** window.

+	Add	Submit 🚚 🛋 Forward 🔳 Provider Letter
Lis	st	
D	isplay :	

3. Under Select the Document Types you want to see, scroll down to Labs and click on the check box for Referred out Test Results. This is the title associated with all scanned lab result documents.

Advanced Filters	
File:	Set As Default Shared
Select the Status you want to see	Select the Encounter Types you want to see
Active Unauth Active 2 Unauth Anticipated ? Unknown Auth (Verified) Transcribed (corrected) Canceled REJECTED Dictated In Error In Lab In Progress Modified Not Done Superseded Transcribed	zzhnstitution Wait List zzPediatrics Blod donation Case Management zzSeries Outpatient mergency Skilled Nursing zzEmergency Room Physician Re Home Health Inbox Message zzPsychiatric Doservation zzClinic Outpatient zzTest Patient Outpatient zzInstacre zzholiday Instacre Phone Msg zzRehabilitation zzSurgicenter Private Duty zzMapping Not Found zzSeriesShortStay Research zzCancel Registration zzGeriesShortStay
Select the Document Types you want to see	Select How Far Back to get Documents
Respirology Procedures Refabilitation Notes Resuscitation Documentation Surgical Documentation Therapeutic Notes Difference Notes	Select the Document author
	Restrict the Documents displayed by
Interdisciplinary Documentation Consent Forms	Physician Notes Only
Filter selections for exact date range and encounter restriction will be applied to the current session only. They will not	be saved with a user-defined advanced filter.
Restrict the Documents displayed by the specified dates	
Restrict the Documents displayed by the specified Encounters	
12-Oct-2017 - Unknown - LGH MTR - Inpatient - Shortness of breath 13-Oct-2017 - Unknown - LGH MTR - Inpatient - Shortness of breath 19-Oct-2017 - Unknown - LGH PF Lab - Outpatient - SOB 14-Nov-2017 - Unknown - LGH 7E - Inpatient - Hemiarthroplasty shoulder	Save Save As Apply New Remove Close

4. Click on **Apply**.



- 5. When prompted to save the filter, choose Yes.
- 6. Name your new filter "Referred out Test Results" and click Save.

Save Filter As
Save current filter as:
Referred Out Test Results
Save

This **Personal Filter** will now be available in the Documentation page for quick filtering of scanned lab documents.

Display : Re	erred Out Test F 💌 📖	
All Service (All	y Physician Notes	
All	^o owerNotes Personal Filters	

Use the navigation buttons

Arrow icons will take you back and forth between the previous view and current view.



Home icon will take you back to your default home page, Provider View.



Drop down arrow icon will open a short list of the most recently viewed components or pages to select from.





Key Learning Points

- Component headings can be clicked on to open up pages with more functions
- Components can be individually refreshed by clicking the **Refresh** icon localized to the component.
- Scanned lab documents can be viewed by clicking on the **Documents** heading to open the full **Documentation** page and searching for the **Referred Out Test Results** filter.



Activity 1.4 – Labs and Diagnostics

Relevant labs, pathology, and microbiology can quickly be viewed directly within the Provider View, which may be enough for some providers however, as a Laboratory Pathologist you may wish to use a more in-depth page available to review results.

Results Review provides you with more detailed information regarding:

- Labs
- Pathology
- Microbiology
- Transfusion
- Diagnostics
- Vital Signs and key clinical documentation



Results Review Page

1. Navigate to the Labs component within Provider View.

Labs						Latest* All	/oita Last 24 houra More 👻 🗐	■ S = -
	Latest				Previous			
⊿ Chemistry								1
Sodium mmo(/).	199 7 whs	×.	. 	(, ,)	(m))		×	
Chloride	110 30 Hem	102 10 reas	4 99 11 mos	4 98 11 mos	4 91* 11 mos	₹ 110 11 mos	102 11 mm	
Pathology (0)						Last 12 months	Last 6 months Last 18 months Hon	
No results found						The second second		total 1 C 1
Micro Cultures (0)						Last 50 Reports	Last 12 months Last 6 months Hor	
No results found								

2. Click on the Labs header to open up the Results Review page.



Results Advance Care P	lanning Lab - Recent Lab	o - Extended	Pathology	Micro Cultures	Transfusion	Diagnostics	Vitals - Recent	Vitals - E	Extended	
heet: Lab View	Le	vel: Lab View	1		 Table 	Group) List			
						Wednesday	, 01-November-2	2017 16:3	2 PDT - Thursday, 30)-November-2017 15:32 F
vigator 🛛 🔀	Showing results from (02-N	lov-2017 - 24-N	lov-2017)	Show more result	ts					
In the second se	Lab Vie	w	2	4-Nov-2017 08:47	PST 23-Nov-2	017 15:33 PST	23-Nov-2017 06:0	0 PST 14	4-Nov-2017 08:00 PST	02-Nov-2017 06:00 PDT
viral Serology and Molecula	Respiratory Microbiology		2		25 1151-2	20.20.001.01				12
Bacterial Serology and Mole	Respiratory (lower) Culture							Re	spiratory (lower) Cultu	
	Viral Serology and Molecula	r								
	Respiratory NAT Specimen BO	CDC	Na	sopharyngeal wa	shin Bronchial	aspirate				
	Influenza A NAT		Te	st findings cannot	be i Positive *	0				
	Influenza B NAT		Te	st findings cannot	be i Negative *					
	Respiratory Syncytial Virus N	AT	Te	st findings cannot	be i Negative *					
	Molecular NAT Comment		Th	is is a validated la	bora This is a va	alidated labora				
	Respiratory Multiplex NAT				Negative *					
	Influenza A Typing Specimen				Bronchial	aspirate				
	Influenza A Typing NAT				Influenza	A Virus Type H				
	Bacterial Serology and Mole	cular								
	Atypical Pneumoniae NAT						Atypical Pneumon	iae NA		
	Leptospira Serology Referral	Info								Specimen sent to Nation
	Leptospira Serology Report									Results received on 02/N
	Leptospira Serology Specime	n								Blood
	Leptospira Antibody									Reactive, * (!)
	Leptospira Applutination Ref	ferral Info								Specimen sent to Nation
	Leptospira Applutination Rel	port								Results received on 02/N
	Leptospira australis Titre									Nonreactive.
	Leptospira ballum Titre									Nonreactive.
	Leptospira pomona Titre									Nonreactive.
	Leptospira seiroe Titre									Nonreactive.
	Leptospira canicola Titre									Nonreactive.
	Leptospira tarassovi Titre									Nonreactive.
	Lentospira autumpalis Titre									Nonreactive
	Leptospira automnans fitte	Te								Nonreactive
	Leptospira grippotypriosa na	iae Titre								Reactive. * (I)
	reprospira interonaemormag	pac nue								Reactives (i)

 Lab - Recent
 Lab - Extended
 Pathology
 Micro Cultures
 Transfus

3. Navigate through each results tab to familiarize yourself with potential content that could be under each category.

2 Adjusting Date Ranges



Date ranges for each result tab are set to default time spans. Click on the arrow icons to the left of the date header to adjust the range of results appearing on your screen.
 The arrows will only adjust the start date of the range, while the end date will stay constant.



2. To create custom date ranges for viewing, right-click on the date bar and select **Change Search Criteria**.

Change Search Criteria	ae)
Change Search Chechan	3-1
Set to Today	

3. In the Search Criteria window, choose **Result Count** for **Results Lookup** and set the **Number of Results** to *50*. Click **OK**.

P Search Criteria	•					
Result Lookup	From: 29-May-2015 V V 0000 PDT					
 Posting range Result count 	Number of results: 50					
Admission date to current date	Year Result Limit: 1					

Results Details

3

Additional results details can be explored including comments associated with the result (ex. specimen criteria) and actions (ex. who performed the testing).

1. Choose the result you wish to see the details of and double-click the cell within the results table.

Showing results from (17-Feb-2017 - 30-Nov-2017) Sh	ow more results
Lab View	23-Jun-2017 00:00 - 23:59 PDT
Respiratory NAT Specimen VCH	Bronchoalveolar lavage *
Influenza A Virus NAT VHC	Positive * (!)
Influenza B Virus NAT VHC	Negative *
	-
Respiratory Syncytial Virus NAT VCH	Indeterminate (A)



2. Within the **Results Details** window, navigate through the tabs to review the **Comments** and **Actions List**.

P Result Details - CSTPRODL	AB, TESTSUNQUEST - Inf	fluenza A/B 👝 💷 💌
Result History		
Value \	/alid From	Valid Until
Bronchoalveolar lavage	23-Jun-2017 08:12 PDT	Current
Result Comments Act	ion List	
1.) (Medium Import	ance) Result Com	ment by SYSTEM,
Right Lower Lobe	1day, 23-June-20	JI7 08:02 PDT
105520901		Forward Close

3. Click **Close** to return to Results Review.

Lab results may have additional characters or colours added to them to denote extra information:

- Critical values are in bright red and have an exclamation point (!) 32.4 mmol/L (!)
- High values are in orange and have an (H) or up arrow 18.5 mmol/L (H) / 7 56.2
- Low values are in blue and have an (L) or down arrow 3.1 mmol/L (L) / 10
- Positive results are in bright red and have an exclamation point (!) Preliminary Positive * (!)
- Abnormal results are in dark red and have an (A) Indeterminate (A)
- Results with a comment in the Details window have an asterisk (*) Bronchoalveolar lavage *
- Results that have been corrected have a (C) Negative * (C)
- If a column contains more than one results that occurred within the timeframe represented, a number will be visible noting how many results are available to view (2) 30 mmol/L [2]



NOTE: Critical high and critical low results are based on Sunquest flagging values. Results will appear in bright red with exclamation points 32.4 mmol/L (!) but the critical ranges will not actually be stated within the CIS.



Sodium * >100 mmol/L	
Date/Time	Status
18/11/2017 14:00	Auth (Verified)
Normal Low	Normal High
135	145
Critical Low	Critical High

Lab Results Trending View

4

Lab Results Trending view is used for displaying lab results in an easy to read, visual graph for the purpose of viewing trends.

1. Navigate back to the Labs Component within Provider View.



To view lab test values in a graph format:

2. Click on the desired test name. This will open the **Lab Results Trending** window, displaying a graph of all results data points for that test within the timeframe specified by the filter.

Latest*	Last 6 months	Last 3 months	Last 1 weeks 💌	l ⊇ -





3. Use hover to discover with data points on the graph to view the result value and reference range associated with it.



Lab results may occasionally be produced on different analyzers/test kits, or may have come from a different Health Organization. This may result in lab work having different references ranges.

If the results you are viewing have several different reference ranges, the **Lab Results Trending** view will provide multiple graphs on the same page, complete with visible reference ranges.





WARNING: DIFFERENT METHODS DETECTED. INTERPRET TEST RELATIVE TO THE REFERENCE INTERVAL

To isolate individual series of results, you can click on the desired results in the legend along the right-hand side of the graph.



Values will not be graphed if:

- Only one data point
- Textual values
- Contain other non-numeric characters (such as < > ?)

The results grid below the graph will display a message that a result was not graphed in this instance.

* List of	results not trended on the graph :- Low	Fibtem A10 suggests fibrinogen deficiency.Low F	Fibtem A10 suggests fibrir	nogen deficiency. on	07-Sep-2017 (
	RESULT DATE/TIME	RESULT VALUE	NORMAL LOW	NORMAL HIGH	NOT GRAPHED
	20-Sep-2017 09:17:00	143 mmol/L	135	145	
	12-Sep-2017 09:00:00	135 mmol/L	135	145	
	07-Sep-2017 10:55:00	140 mmol/L	135	145	
	07-Sep-2017 10:40:00	142 mmol/L	135	145	
	07-Sep-2017 06:00:00	Low Fibtem A10 suggests fibrinogen deficiency. Low Fibtem A10 suggests fibrinogen deficiency.	135	145	YES



Transfusion History

5

The Transfusion History component is used to review any blood-related information.

1. Click on **Transfusion History** within the components list to take you to the Blood Product Availability component.

Microbiology Other
Pathology
Microbiology C & S
Labs
Tranfusion History
Diagnostics (0)

- 2. Within this section, you will find information broken down to three categories
 - Group and Screen Status displays the most current Group and Screen specimen and its expiry date.
 - **Blood Product Availability** displays past transfusions, blood products that have been allocated to the patient for use, and blood products that have actually been issued.

These sections can be expanded or collapsed by clicking on the arrow beside the section title.

 Transfusion Reaction History displays any recorded issues or reactions to blood products previously administered.



Tranfusion History
Group and Screen Status
Group And Screen Expiry : No current specimen available.
Blood Product Availability
► A llocated (0)
⊿Iasued (0)
No results found
ightarrow Presumed transfused (Issued,Final) within last 90 days (0)
No results found
Transfusion Reaction History
No results found

Key Learning Points

- Results Review can be accessed by clicking on any of the component headings for: Labs, Pathology, Microbiology C&S, or Microbiology Other.
- Double-clicking a result will open the Details window with more information about the test and result.
- Lab Results Trending window displays results for the selected test only within the timeframe specified by your filtering preferences.

Hover to discover result values and reference ranges when viewing labs in Lab Results Trending view.



Activity 1.5 – Infection Prevention Summary

As a Laboratory Pathologist, in addition to the Provider View page which contains clinically relevant patient details to review, you also have access to the **Infection Prevention Summary** (or **ICP Summary**) page.

This view provides several similar pieces of information already contained in the Provider View, but they are arranged and grouped in a more succinct manner. This means they are also more abbreviated and less interactive.

Accessing ICP Summary Page

Similar to the **Lab Results Trending** page, the **ICP Summary** page is not placed within the Provider View page. It also must be accessed via the **Menu** tab:

1. Navigate up to the small Menu tab below the Banner Bar.



2. Select ICP Summary from the Menu when the window slides out.



- 3. The ICP Summary page contains numerous summary components in compact, collapsed views.
- 4. Each component can be expanded individually by clicking the Expand arrow icon Sol or all



components can be expanded at once by clicking the Expand All button. Expand All

< 🔹 🝷 👫 ICP Summary				[🗆] Full screen	P rint	æ²1 hours 5 n	ninutes ago
🏔 🐚 📥 📄 🔍 🔍 100%	- 😋 🛑 🗳						
Infection Preventionist S	ummary				Expand	i All Help 🎯 🦯	≣ • _
CST-TTT, BIRGIR Male 77 yea	rs DOB: 01-Jan-1940 MRN: 700	0007397 FIN	:700000013481 Isolation:	Visit Reason : Hemi	arthroplast	ty shoulder	
This page is not a complete source or visit info	rmation.	_					_
Patient Information		≣• ⊘	Devices (0)			=	- 🖸
Isolation:	Droplet		Clinical Resources			≡	- ~
MDRO:			Nerret		-		=
HAI Risk:			Name 🚔		17	/pe	
Admit Date:	14/11/2017 11:05		BC Centre for Disease Con	trol Url			
Length of Stay:	16 Days		BC Public Health Lab Manua	al Url			
Readmission within 30 days:	Yes		CDC	Url			

- 5. Take time to explore each component and consider the content available in the **ICP Summary** page compared to what is available in **Provider View**.
- 6. Use the navigation buttons to return to the Provider View when done viewing the **ICP Summary**.



Key Learning Points

The ICP Summary page is accessed through the Menu tab just below the Banner Bar.

ICP Summary contains similar information found within other components, but is grouped in a more condensed fashion for quick reference.



Activity 1.6 – Creating a Document

After reviewing the patient's chart, as well as external sources such as CareConnect or SunQuest/SunSet, you have decided to write a consult note to convey your recommendations and findings to the other members fo the care team.

The CIS uses a function called **Dynamic Documentation** to pull all existing and relevant information into a comprehensive document, using standard templates of your choosing.

Dynamic Documentation can save you time by allowing you to populate your documentation with items you have reviewed and that have previosuly been entered into the patient chart.



Create Note

1. Navigate to the Create Note section under the components list.

Consult/ Referral	
Chief Complaint	
Visits (1)	
Histories	
Documents (0)	
Links	
Vital Signs	
Immunizations	
Labs	
Pathology	
Micro Cultures	
Imaging	
Home Medications	
Current Medications	
Allergies	
Order Profile	
New Order Entry	
Active Issues	
Blood Product Availability	
Create Note	
Laboratory Medicine Consult (Fre e Text)	
Laboratory Medicine Consult	
Select Other Note	
	-

This section displays a short list of note types that are commonly used for Laboratory Pathologist consultations.

2. Click on Laboratory Medicine Consult to open the consult note template.

The draft note displays in edit mode ready for your review. Review the different sections of this note. Many of the sections will automatically populate with the information captured by you and other clinicians. This is Dynamic Documentation in action.



< 👌 🕆 📩 Documentation	🔁 Full screen 👘 Print 📌 0	minutes ago
🕂 Add 🔟 🙀 📝		
Admission H & P X List		4 Þ
Chief Complaint Cough, shortness of breath for last three days, fever. Pain in her right chest that intensifies with inspiration. History of Present Illness Patient developed a harsh, productive cough four days prior to being seen by a physician. She developed a fever, shaking, chills and malaise along with the cough. One day ago she developed pain in his right chest that intensifies with inspiration. The patient lost 15 lbs. over the past few months but claims she did not lose his appetite.]	Problem List/Past Medical History Acd reflux disease Back pain Migraine Mid hypertension <u>Historical</u> Back fracture Procedure/Surgical History	*
Notice Example Physical Exam	Appendectomy; (1966). Medications Instalant accentioningohen, 225 mg, 1 tab, PO, q4h, PRN whydroxyster, 5 mg, 0.5 cap, PO, q24h pericilian V, 500 mg, PO, 60 min pre-op Home multivitamins-minerals tab (CENTRUM FORTE) tab, 1 tab, PO, qdaily TVLENOL #3 EQUIV tab, 1 tab, PO, q4h, PRN, Not taking Xalatan 0.005% ophthalmic solution, 1 drop, eye-both, qPM Allercies	ш
Gentournary: [No hematuna] Assessment/Plan 1. Pneumonia	Bee Stings (Swelling) penicillin (Diarrhea) Social History <u>Alcohol</u>	
Preumonia Migraine Seck ache	Curren Loer, Vere, Yme Curren Loer, Reer, Occasional Use <u>Reercise</u> Minutes per day: 30. Days per week: 2. Physical Activity Intensity: Moderate. <u>Toksercise</u> type: Running.	
Lab Results Note Details: History and Physical, Test, Order Sets Physician - Hospitalist, 2017-Mar-17 10:03 PDT, Admission H & P	Former smoker, Type: Cigarettes, per day 15. 10 year(s). Family: History S C Cancer: Mother (Dx at 54). Sign/Submit Save Save & Close	Cancel
	Sure conse	

2 Editing Documents

If any information is missing, you can add it directly in the note. You can also delete any unwanted information.

1. Position your cursor over the heading **History of Present Illness** to modify. The small toolbar activates:

refreshes the dynamic information in the box

calactivates the box for edits or new entries

removes all content associated with that line or box



- 2. Activate the **History of Present Illness** box to edit by pressing the arrow icon beside the header.
- 3. Once you click the content box, it becomes active. Edit the note as necessary.
- 4. Add to the content: Bone marrow aspirate and biopsy completed last week.



Add 🗐 📙	🖌 🗙 List					
lahoma 🛛	• 9	•) 🛍 🕤 🤟 E	B I ∐ ⇒⇒	A !* E	≞ ⊒ ■ ••€
Chief Compla	<u>iint</u>					
History of Pro	esent Illne	ss e e x				
1						
Physical Exa	m					
Physical Exa	<u>m</u>					

5. Navigate to the Assessment/Plan box and click the content box to activate.

Add the content: Bone Marrow biopsy is consistent with classical Hodgkin's Lymphoma.



Navigate to the **Imaging (Last 24 Hours)** box. Since there is no data, you will choose to delete this unnecessary header from your consult note.

6. Click the X icon 📧 to remove the section from your note.

naging (Last 24 Hours) 💿 📼 💌 o qualifying data available.	

7. This note is now ready for the decision to be Signed or Saved.



Signing or Saving a Document

Once your consult for the patient is finished, you can choose between four options:

- Sign/Submit will begin the process of posting your document to the patient chart.
- Save will save your progress and let you continue to edit within the consult note.
- Save & Close will save the document and return you to the Provider view. Until you choose to sign and submit it, the note will only be viewable by you and will appear in your **Documents** component with the status (In Progress) beside the note title.

P	Note Type
ι	Laboratory Medicine Consult (In Progress)

• Cancel will delete the document if it was created in error.



1. Click Sign/Submit.

Sign/Submit Save	Save & Close	Cancel
------------------	--------------	--------

This will bring up the Sign/Submit Note window.

2. Click on the **Title** box and create an appropriate title. Type in: *Consult Note Pathology*.

Sign/Submit Note						
Type: Laboratory Medicine Consult	~	Note Type List Filter: Position	_			
Author:		Title:	*Date:			
TestUser, Lab-Physician, MD Forward Options Create provider letter		Consult Note Pathology	30-Nov-2017	1106	PST	
Favorites Recent Relationships	Q Pr	vider Name				
Contacts		Recipients Provide Provide	ment		Sign	Review/CC
				ſ		
				l	Sign	Cancel

If you want to simply complete your consult note and place it in the patient chart, you can now click **Sign**. This will not send any additional alert or notification to individual providers that a new document is added to the chart.

However, since you have been consulted by a specific colleague, you would like to send them this note. In the CIS you can electronically forward the note.



4 Forwarding a Note

1. Click the arrow to display Forward Options if not already displayed.

Sign/Submit Note					- • •
*Type:	Note Type List Filter:				
Laboratory Medicine Consult	Position	\sim			
*Author:	Title:		*Date:		
TestUser, Lab-Physician, MD	Consult Note Pathology		30-Nov-2017	1106 ps	ST
᠃ Forward Options □ Create provider letter					
				Sign	Cancel

- 2. There are several options to use when choosing others to cc on your note:
 - **Favorites** folder is where you add frequently cc'd providers. You will learn how to manage favorites during a more personalized learning session.
 - **Recent** folder lists all providers who recently accessed patient's chart
 - **Relationships** folder contains care team members that are part of the patient's record and include care providers for this visit and those that have lifetime relationships. Remember that specific notes such as an admission or discharge are automatically sent to patient's GP and lifetime relationships physicians so there is no need to add them manually.
 - **Search** box- here you can also search for any provider registered with the College of Physicians and Surgeons that also have registered with Excelleris.

ign/Submit Note			
Type: Laboratory Medicine Consult Author: TestUser, Lab-Physician, MD	Note Type List Filter: Position Title: Consult Note Pathology	*Date: 30-Nov-2017	1106 PST
Favorites Recent Relationships	Q Provider Name		
Contacts	Recipients	Comment	Sign Review/CC
 Plisvca, Rocco, MD Attending Provider, Admitt TestMM, PharmacyTechnic PharmacyTechnician - Pha TestUser, GeneralMedicin Consulting Provider - Phys TestUser, InfectionControl Infection Control - Infectio TestUser, MedicalStudent Medical Student - Direct eLearn, ANESTHESIOLOGL Anesthesiologist - Physicia eLearn, Physician-General Covering Provider - Physic Lifetime 			
			Sign Cancel



3. For your example, select [provider] from the **Relationships** list and double-click to add the name under Recipients.

4. Ensure that the appropriate action is checked off: either **Sign** or **Review** to indicate the action required.

5. Click **Sign.** The consult note will now be placed in the patient's chart under the Documents component as well as sent to the provider's **Message Centre.**

Type:		Note Ty	ype List F	ilter:					
	•	Positio	n		•	*D-4			
Author:		Title:				^Date:		_	
estUser, Lab-Physician, MD		Consul	t Note Pa	ithology		30-Nov-2017	1106	PST	
Forward Options Create provider letter Favorites Recent Relationships	R Pr	rovider Na	me						
Contacts		Recipie	nts						
🚖 Default Name	_		Default	Name	Comn	ient		Sign	Review/CO
 This Visit 	<u> </u>	*	~	Plisvca, Rocco, MD				\bigcirc	۲
Plisvca, Rocco, MD				Attending Provider, Admittin					
 Attending Provider, Admitt Torth th 4, Dharmaga Tachnic 									
Pharmacy Technician - Pha									
TestUser, GeneralMedicin									
Consulting Provider - Phys									
TestUser, InfectionControl	=								
TestUser MedicalStudent									
Medical Student - Direct									
👍 🚽 eLearn, ANESTHESIOLOGI									
Anesthesiologist - Physicia									
eLearn, Physician-General									
▲ Lifetime									
	-								
Disvov Charise ND									

After signing the note, you are transferred back to the Provider view. Remember to click the

Refresh button $\stackrel{\textcircled{\label{eq:Refresh}}}{\longrightarrow}$ located within the **Document** component. The admission note is now listed under Documents and is visible to the entire care team.

Documents (4) 🕂					Last 50 Notes All Visits	Last 24 hours More 🔻 🔍 = -
				II My notes only	Group by encounter	Display: Provider Documentation •
Time of Service	Subject	Nule Type	Author	Last Upslated	Last Updated By	
30/11/17 11:06	Consult Note Pathology	Laboratory Medicine Consult	TestUser, Lab-Physician, MD	30/11/17 13:58	Testüser, Lab-Physician, M	D
29/11/17 12:50	Admission H & P	Laboratory Medicine Consult	TestUser, Lab-Physician, MD	29/11/17 12:51	TestUser, Lab-Physician, M	D
28/11/17 11:33	Lab Interpretation Note	Laboratory Medicine Consult	TestUser, Lab-Physician, MD	29/11/17 12:52	TestUser, Lab-Physician, M	D
28/11/17 11:13	patho consult	Laboratory Medicine Consult	TestUser, Lab-Physician, MD	28/11/17 11:15	TestUser, Lab-Physician, M	D
* Deplaying up to the last !	50 recent notes for all visits					



5

Adding an Addendum

After documents have been finalized, the body of their content cannot be edited. Instead, addendums can be created to reflect any changes that were needed after document submission.

- 1. Double-click on the consult note you just created under the **Documents** component.
- 2. Once the document opens in a new window, click on the **Modify** icon located in the tool bar.



3. The **Final Report** displays in edit mode with the added section **Insert Addendum Here** at the bottom. Type a comment of your choice.

P Modify Document: LEARNTEST, PHYS - 700005366	
Tahoma → Sze → Sze → 	
* Final Report *	
Admission Day	
History of Present Illness	
Medications ACT Amilodipine 10 mg oral tablet, 10 mg, 1 tab, PO, qdaily amcoUhme, 10 mg, 1 tab, PO, qdaily amoxidilin, 500 mg, 1 cap, PO, TID ATTVAN, 05 mg, 0, 13 mL, M, q1h, PRN Centrum 9400 oral tablet, 1 tab, PO, qdaily with food glyBURIDE, 10 mg, 2 tab, PO, qdaily with food glyBURIDE, 10 mg, 1 tab, PO, Qtaily metFORMIN 850 mg, 1 tablet, 850 mg, 1 tab, PO, BID prefmtSWL 850 mg oral tablet, 850 mg, 1 tab, PO, BID prefmtSWL 850 mg oral tablet, 850 mg, 1 tab, PO, BID	
Alleraies Peanuts	
Physical Exam	
Vitals & Measurements	
<u>Intake and Output</u> No qualifying data available.	
Lab Results	
Imaging (Last 24 Hours) XR Chest - Ordered - 2017-Sep-13 14:01 PDT, Routine, Reason: shortness of breath, Print to Paper	
Assessment/Plan 1. Severe pneumonia	
*Insert Addendum Here:	
Note Details: General Medicine Progress Note, Test User, Physician - General Medicine, 2017-Sep-13 15:25 PDT, Auth (Verified), Progress Note Save & Cl	Cancel

4. Add information and click **Sign/Submit** to complete the note. The updated note will be automatically distributed to all previously selected recipients. The addendum is stamped by the electronic signature.



	* Final Report * Document Contains Addenda	
Chief Complaint Shortness of Freidh. Hid-or of Present Illness One week hittory of shortness of breach progressively worsening. Mid-sternal chest pain that is worse with o to 28 hours. Prixela & Mouscements Tr. 38.2 °C (Ord) HHE 70 (Peripheral) RF: 20 BP: 120(80 WT: 80 kg (Dosing) This is a practice tier for objective/physical exam. Assessment/Plan I. Severe pneumonia	oughing and deep breathing. Greenish sputum has been present f	Problem List/Pact Modical History No drame; problems Microid Microid The biodincia problems Status Microid Microid
ignature Line iectronically Signed on 13-Sep-2017 14:07 Learn, MDGENMED, MD ddendum twy Test, Pet, MD on 2017-September-14 09:28 PDT (Verified) dignature Line lectronically Signed on 14-Sep-2017 09:47 est, Pet, MD		

Key Learning Points
Dynamic Documentation will "pull forward" content into predefined sections of note templates for more accurate and easier note writing.
Note template sections can be edited or removed if unwanted when writing a note.
Save and Close instead of Sign/Submit will send a note to your Documents component, but will not be finalized or visible to other users until signed and submitted.
Notes can be forwarded to individual providers in addition to adding the note to the patient chart.
If you create an addendum to a note, these are also distributed to any recipient who received the original note.



End of Workbook

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