SELF-GUIDED PRACTICE WORKBOOK [N2] CST Transformational Learning

WORKBOOK TITLE: Pharmacist (Workbook #2)







# TABLE OF CONTENTS

SE	LF-GUIDED PRACTICE WORKBOOK	3
•	Using Train Domain	4
•	PATIENT SCENARIO 1 – PowerChart – Order Entry	5
	Activity 1.1 – Ad Hoc Order Entry	7
	Activity 1.2 – PowerPlan Orders (Order Sets)	.20
	Activity 1.3 – Lab Test – Vancomycin Trough Draw Instructions	.26
•	PATIENT SCENARIO 2 – Managing Pharmacy Consult Orders	.29
	• Activity 2.1 – How to address a Pharmacy Consult Order and Mark as Complete	.30
•	PATIENT SCENARIO 3 – Clinical Documentation in PowerChart	.36
	Activity 3.1 – Entering Pharmacist Note	.37
•	PATIENT SCENARIO 4 – Message Center - Communicating in PowerChart	.41
	Activity 4.1 – Creating a Reminder Message	.43
	Activity 4.2 – Setting up a Proxy to your Message Centre	.46
	<ul> <li>Activity 4.3 – Adding self to Pharmacy Pool and sending a Message to the Pharmacy Pool</li> </ul>	49
	Activity 4.4 – Retrieving Saved Pharmacy Progress Note	.53
•	PATIENT SCENARIO 5– Reports	.56
	Activity 5.1 – Accessing reports for Recall on a specific medication	.57
•	Pharmacist Supervisor: PATIENT SCENARIO 6 – Additional Reports	.60
	Activity 6.1 - Accessing reports for Dispense Category Workload by location	.61
	End Book Two	.64



# SELF-GUIDED PRACTICE WORKBOOK

Duration	4 hours
Before getting started	<ul> <li>Sign the attendance roster (this will ensure you get paid to attend the session).</li> <li>Put your cell phones on silent mode.</li> </ul>
Session Expectations	<ul> <li>This is a self-paced learning session.</li> <li>A 15 min break time will be provided. You can take this break at any time during the session.</li> <li>The workbook provides a compilation of different scenarios that are applicable to your work setting.</li> <li>Each scenario will allow you to work through different learning activities at your own pace to ensure you are able to practice and consolidate the skills and competencies required throughout the session.</li> </ul>
Key Learning Review	<ul> <li>At the end of the session, you will be required to complete a Key Learning Review.</li> <li>This will involve completion of some specific activities that you have had an opportunity to practice through the scenarios.</li> <li>Your instructor will review and assess these with you.</li> <li>Upon completion of the Key Learning Review, both you and your instructor will complete your Competency Assessment Checklist.</li> </ul>



# **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 – PowerChart – Order Entry**

Duration	Learning Objectives
35 minutes	At the end of this Scenario, you will be able to:
	Perform Order Entry for patients in PowerChart
	Learn different Order Entry formats (Ad Hoc and PowerPlans)
	Ordering non-medication orders – Laboratory test

## **SCENARIO**

After BPMH and Admission Medication Reconciliation are complete, Clinical Pharmacists working on the units may have to enter orders.

In the following activities, you will practice entering medications, PowerPlans and a lab test in PowerChart.

Or Na	der me/PowerPlan	Dose	Route	Frequency	PRN	PRN Reason	Comments
1.	Tylenol #3	1 tab	РО	q4h	X	Pain- breakthrough	
2.	TNF – Ezetimibe	10 mg	РО	qdaily			
3.	Dopamine titratable infusion	1.6 mg/mL	IV	Continuous			0-20 mcg/kg/min starting rate 5mcg/kg/min
4.	Estradiol patch	50 mcg/day	Topical	qweek			Patient's Own medication Patient removes and applies new patch every Saturday
5.	Milrinone	200					
	continuous	mcg/ml					
	infusion	standard					
6.	Enoxaparin 1mg	1mg/kg	SC	q12h			
7.	VTE Prophylaxis PowerPlan						Only order <i>Ambulate</i>
8.	Vancomycin – Pharmacy to Dose PowerPlan	25 mg/kg	IV	Once			This PowerPlan also contains a communication order
9.	Vancomycin Trough Draw Instructions						



Manager

For Inpatient settings, it is highly recommended that Physicians place orders for their patients; however there may be some situations in which a Pharmacist has to enter orders in PowerChart for a patient.

**Pharmacist Medication Order Entry** Pharmacist order entry for Physicians is highly discouraged. PowerChart VS. Pharmacy **Medication Manager** Orders entered in PowerChart require verification in Pharmacy Medication Manager. PowerChart Pharmacy Order Medication Manager Order REQUIRES NO VERIFICATION in VERIFICATION Pharm Med NEEDED



# Activity 1.1 – Ad Hoc Order Entry

Estimated Completion Time: 20 min

- 1. Login to PowerChart and open your assigned patient's chart
- 2. Click directly on the + Add found on the Orders line in the Menu to access the Add Order Scratch Pad

Menu 🔒	<b>₽</b>	🔹 🔉 🝷 者 Pharmacist Workflow	
Pharmacist Workflow			
Results Review		Pharmacist Summary St Pharmacy Workflow	
Allergies	Add -		
Orders	🕈 Add	Allergies (2)	
Medication List	🖡 Add 📏	Problem List	
Documentation •	🕈 Add	Aborits	
Diagnoses and Problems		Classifier at All	
MAR			
Immunizations		Priority Problem	
		This Visit (1)	
		Pharmarist Dianne - Add Order	
		Pharmacist. Di., DOB:197MRN:760Code Status: Process:	Loca
		Age:46 y Enc:7600 Disease:	
		Allergies: penicilli Gender:F PHN:107 Dosing Wt:80 kg Isolation:	Atter
		Search: 📃 🔍 Advanced Options 👻 Type: 👘 Inpai	tient
		🔉 🚮 🚖 👻 🖿 🐚 🗔 Folder: Diabetes Educat Search within: 🗍	•
		Diabetes Educator Orders	
		< [	

Note: Alternate access can be found under the **Pharmacist Workflow** Menu. In the **Pharmacist Summary** tab for your patient, locate the **New Order Entry** Component and click the **+** icon





### **Reference: Allergy Review Alert**

If Allergy Information has NOT been documented at this point, Allergy Review message will appear.

Refer to Workbook 1 for Entering Allergies.

Discern: (1 of 1)
Cerner Allergy Review
The patient has not had allergies reviewed on this admission.
Please review allergies with the patient or patient's caregiver and:
- Enter any new allergies (if applicable)
<ul> <li>Click the IMark All as ReviewedI button to indicate existing allergies have been reviewed</li> </ul>
OK

### Tylenol #3 Volume Medication Order

1

 In the Add Order Scratch pad screen, type *Tylenol #3* in the Search field, select *TYLENOL #3 EQUIV tab (1 tab, PO, q4h, PRN pain, drug form: tab)* from the drop down field or click the magnifying glass icon 
 to the right of the field and select the above medication.

Search: tylenol #3	Advanced Options	▼ Type: 👘 I	npatient	HINT: Adding do
TYLENOL #3	QUIV tab QUIV tab (tab, PO, q4h, drug form: tal	b)		will truncate the and make select
Dial TYLENOL #31 TYLENOL #31	2017 tab (tab, PO, q4n, PRN pain, dru 2017 tab (tab, PO, q6h, drug form: tal 2017 tab (tab, PO, q6h, PRN pain, dru	g form: tab) b) ug form: tab)		easier
TYLENOL #31	UTV tab (1 tab, P C, q01, P RN pain, and UTV tab (1 tab, P C, q11, drug format UTV tab (1 tab, P C, q41, drug format	ab) rug form: tab)		
TYLENUL #3				

- 2. Order will appear behind the Add Order Scratch Pad
- 3. Click the Done button to the Add Order Scratch Pad to close the window
- 4. In the **Orders Tab**, select your *acetaminophen/caffeine/codeine (TYLENOL #3 EQUIV tab)* order to confirm details.
- 5. In the Details tab check the dose.
  - 1 in the \*Dose field
  - Resize the Details tab or scroll to see all info

NOTE: The Order Scratch Pad allows for multiple orders to be entered at one time.



multiple orders, sign at the end to reduce number of steps.

Orders Medication List Document In Plan

A 2 B V Order Name	Status	Start	Details			
LGH 2F: 212: 02 Enc:7000000010837 Admit: 25-Sep-201	7 12:44 PDT	oture	o ctano			
Continuous Infusions						
DOPamine additive 400 mg + dextrose 55	% Order	10-Nov-2017 09:53	titrate, IV, 0 mcq/kq/min minimur	n rate, 20 mcg/kg/min maxim	ium rate, s	tart: 10-Nov-2017 09:53 PST, bag volume (mL): 2
acetaminophen/caffeine/codeine (TYLEN #3 EQUIV tab)	IOL Order	10-Nov-2017 09:53 PST	1 tab, PO, q4h, PRN pain, drug for Each tablet contains up to 325 mg	m: tab, start: 10-Nov-2017 09:5 acetaminophen, caffeine 15 r	53 PST, sto ng and co	pp: 17-Nov-2017 09:52 PST deine 15 mg. Maximum acetaminophen 4 g/24 h
estradioi (estradioi 50 mcg/day patch)	Urder	11-NOV-2017 08:00	1 patch, topical, gweek, drug form	: patch, start: 11-NOV-2017-08	00 PST	
Details for acetaminophen/caffeine/cod	leine (TY	(LENOL #3 E	QUIV tab)			
				Remaining /	Administr	ations: (PRN) Stop: 17-Nov-2017 09:52:00 PS
*Dos:: 1			*Dose Unit:	tab	~	
*Route of Administration: PO	*		*Frequency:	q4h	*	
PRN: 💽 Yes 🜔 No			*PRN Reason:	pain	*	
Administer even			Administer over Unit:		*	
Administer over.						
Duration:			Duration Unit:		~	
Duration: Drug Form: tab	•		Duration Unit: First Dose Priority:		•	
Duration: Drug Form: tab "Start Date/Time: 10-Nov-2017 09:53 PST	× ×		Duration Unit: First Dose Priority: Stop Date/Time:	17-Nov-2017	<ul><li>✓</li><li>952</li></ul>	≜ pst
Duration: Drug Form: tab *Start Date/Time: 10-Nov-2017 09:53 PST Use Patient Supply: Yes No	× ×		Duration Unit: First Dose Priority: Stop Date/Time: BCCA Protocol Code:	17-Nov-2017	952	PST
Duration: Duration: Drug Form: tab  *Start Date/Time: 10-Nov-2017 09:53 PST Use Patient Supply: Yes  No  Missing Required Details Orders For Cosignature Orders For	▼ ▼ Vurse Review		Duration Unit: First Dose Priority: Stop Date/Time: BCCA Protocol Code:	17-Nov-2017 🖉 🖉 0	952	PST

6. Continue to enter the next medication. \*Do not Sign.

### **REFERENCE: Basic Medication Order Entry Format**

The above medication uses a basic medication order entry format with the following fields:

- 1) \*Dose
- 2) \*Dose Unit
- 3) \*Route of Administration
- 4) \*Frequency
- 5) PRN Yes/No (If Yes, PRN Reason becomes mandatory)
- 6) \*PRN Reason
- 7) \*Start Date/Time

∎	Details for	acetamin	ophen/caffe	ine/codeine (	(TYLENOL #3 E	QUIV tab)	
Ľ	😵 Details	🗊 Order Com	ments				
	🛨 🔓 lh.	₽ ×					Remaining Adm
		*Dose:				*Dose Unit:	tab
	*Route of A	dministration:	РО	~		*Frequency:	q4h
		PRN:	💽 Yes 🔿 No			*PRN Reason:	pain

All required fields will have a yellow background. All mandatory fields will have an asterisk preceding the field. Fields may be pre-populated based on the selected order sentence.





### 2 Template Non Formulary (TNF) Medication Order- Ezetimibe

1. Click the +Add button



2. After not being able to find Ezetimibe in the catalogue, in the **Add Order** Scratch pad screen type *non-formulary* in the Search field, select *non-formulary medication* from the

drop down field or click the magnifying glass icon to the right of the field and select non formulary medication.

P CSTPRODMED, TEST-JANELLE - Add Order	
CSTPRODMED, TEST-JA DOB:1979-Mar MRN:700002107 Code Status:	Pr
Age:38 years Enc:700000000	Di
Allergies: No Known Allergies Gender:Female PHN:98781886 Dosing Wt:45 kg	Isc
Search: non-formulary medi	•
◆ non-formulary medication           non-formulary medication	

- 3. Select the non-formulary medication template
- 4. Click the Done button to close the Add Order Scratch Pad.
- 5. In the Details tab that appears at the bottom of the screen, fill out the mandatory fields:
  - a. \*Drug Name: Ezetimibe
  - b. \*Drug Dose: 10 mg (This will update the Strength Dose and Strength Dose Unit fields)
  - c. \*Route of Administration: PO
  - d. \*Frequency: qdaily
  - e. \*Justification: Recommended by consult service

**NOTE:** For a volume dosed nonformulary medication the Volume Dose and the Volume Dose Unit fields will update



✓ Details for non-formulary medication (Ezetimibe)	2
Details Order Comments	
🕂 📽 hi. 🕴 🎽	Review Schedule Remaining Administrations: (Unknown) Stop: (Unknown)
*Drug Name: Ezetimibe	Drug Dose:
Strength Dose: 10	Strength Dose Unit: mg
Volume Dose:	Volume Dose Unit:
'Route of Administration: PO 🔹	*Frequency: qdsily
PRN: C Yes C No	PRN Reason:
Number of Doses Needed:	*Justification: commended by consult service 👻
Indication:	Administer over Contraindication to formulary medication
Administer over Unit:	Duration: Adverse reaction to formulary medication
Duration Unit	Therapeutic failure of formulary drug
0 Missing Required Details Orders For Cosignature Orders For Nurse Review	Recommended by consult service Sign

### 6. Continue to enter the next medication.

### \* Reference: Non-Formulary Order Entry Format

The above medication uses a non-formulary medication order entry format with the following fields:

- 1. \*Drug Name
- 2. \*Drug Dose
- 3. \*Route of Administration
- 4. \*Frequency
- 5. \*Justification

Details for non-formulary medication		
S Details		
🗭 🔓 lhi. 🛛 🕹 😒	Remaining Administrations: (Unknown) Stop	p: (Un
*Drug Name:	*Drug Dose:	
Strength Dose:	Strength Dose Unit:	
Volume Dose:	Volume Dose Unit:	
Route of Administration:	*Frequency:	
PRN: Yes No	PRN Reason:	
Number of Doses Needed:	*Justification:	
Indication:	Administer over:	
Administer over Unit:	Duration:	
Duration Unit:	Drug Form:	
First Dose Priority:	*Start Date/Time: 05-Dec-2017 11:21 PST 🗸	
Stop Date/Time: 🗘 💌 🔹 PST	Use Patient Supply: 🔿 Yes 🔿 No	

All required fields will have a yellow background.

All mandatory fields will have an asterisk preceding the field. These fields are not associated with an order sentence and will need manual input.



## 3

### **DOPamine titratable infusion**

### **IV Titrate Order**

- 1. Click the +Add button
- 2. In the **Add Order** Scratch pad screen type *dopamine titratable* in the Search field, select *dopamine titratable infusion (1.6 mg/mL) standard* from the drop down field or click the magnifying glass icon to the right of the field and select *dopamine titratable infusion (1.6 mg/mL) standard*

CSTPRODMED, TEST-JANELLE - Add Order		
CSTPRODMED, TEDOB:1979 MRN:7000 Code Status: Age:38 yeaEnc:70000 Allergies: No Known Gender:Fe PHN:98781Dosing Wt:48 kg	Process: Disease: g Isolation:	Location:LGH 4E; 418; Enc Type:Inpatient Attending:Plisvcc, Trevo
Search: dopamine titratable Advanced Options Type: DOPamine titratable infusion (1.6 mg/mL) standard DOPamine titratable infusion (3.2 mg/mL) DOPamine PED titratable infusion (3.2 mg/mL) DOPamine NEO/PED titratable infusion (1.6 mg/mL) standard "Enter" to Search	r All τ	•

- 3. Order will appear behind the Add Order Scratch Pad
- 4. Click the Done button to close the Add Order Scratch Pad.
- 5. Select the *DOPamine additive 400 mg* + *dextrose 5% premix 250 mL* order and fill out the **Details tab** below with the following for the mandatory fields for this titratable infusion:
  - a. Starting Rate: 5 mcg/kg/min
  - b. \*Minimum Rate: 0 mcg/kg/min (will pre-populate)
  - c. \*Maximum Rate: 20 mcg/kg/min (will pre-populate)
  - d. \*Titrate Instructions: type to desired MAP

≖ <sub>Details for</sub> DOPamine additive 400 mg + dextrose 5% premix 250 mL								
😭 Details 🎁	🚰 Continuous	Details						
+ 5 h.	∎×							
*Route of A	dministration:	IV	~		Starting Rate:	5 mcg/kg/min		
*N	Ainimum Rate:	0 mcg/kg/min			*Maximum Rate:	20 mcg/kg/min		
*Titrat	e Instructions:	to desired MAP			Duration:			
	Duration Unit:		~		Drug Form:		~	
Firs	st Dose Priority:		~		*Start Date/Time:	12-Jan-2018 🚔 💌 1352	P:	ST
s	top Date/Time:	NN NNN NNNN	•	PST				



6. Click the **Continuous Details** tab

T Details for DOPamine additive 400 mg + dextrose 5% premix 250 mL					
😭 Details 🞁 📴 Continuou	s Details				
Base Solution	bag volume	Rate	Infuse Over		
[ dextrose 5% premix	250 mL	冠 titrate			
Additive	Additive Dose	Normalized Rate	Delivers	Occurrence	
X DOPamine additive	400 mg	8		Every Bag	
<b>*</b>		8			
Total Bag Volume	250 mL				

**NOTE:** fields will pre-populate. **No action** is needed on this tab.

7. Continue to enter the next medication.



### \*Reference: Titratable Order Entry Format

The above medication uses the titratable medication order entry format with the following fields:

All fields requiring manual input will have a yellow background.

1. Titrate Instructions:

▼ D	etails for DOPamir	e additive 400 mg + dextrose 5% premix 250 mL
r 🖓 🖸	Details 🛗 📴 Continuous	Details
+	• • In. • ·	
*R	oute of Administration:	N v
	*Minimum Rate:	A mca/ka/min
	*Titrate Instructions:	to desired MAP
	Duration Unit:	•
	First Dose Priority:	~
	Stop Date/Time:	xx, xxx, xxxx

All mandatory fields will have an asterisk preceding the field. These are pre-populated based on the order sentence selected.

- 2. \*Route of Administration
- 3. \*Minimum Rate
- 4. \*Maximum Rate
- 5. \*Titrate Instructions
- 6. \*Start Date/Time



### Estradiol patch

4

### Patient's Own Medication Order

You will be entering a medication the patient has brought from home that will be used during their hospital stay.

Their estradiol 50 mcg/day patch is removed every Saturday and a new one is applied that same day

- 1. Click the +Add button
- 2. In the Add Order Scratch pad screen type *estradiol 50* in the Search field, select *estradiol 50 mcg/day patch (1 patch , topical qweek, drug form: patch)* from the drop down field or

click the magnifying glass icon  $\mathbb{R}$  to the right of the field.

estrdiol	- <u> </u>	Folder		▼ Type >h within:	ali 🕄	Inpatient	•	•
- 🚖	- 🚞 🗈	Folder:	Searc	h within:	All		•	

- 3. Order will appear behind the Add Order Scratch Pad.
- 4. Click the Done button to close the Add Order Scratch Pad.
- 5. Select the *estradiol 50 mcg/day patch qweek* order and fill out the Details tab below with the following for the mandatory fields
  - a. In the mandatory Justification field select **Recommended by consult service** from the drop down menu.
  - b. For Frequency: change qweek to qSat

### 6. Select the Yes radio dot for Use Patient Supply.

Details for estradiol	포 Details for estradiol (estradiol 50 mcg/day patch)					
😭 Details 🔠 Order Comme	ints					
+ 💊 h. 🕸			Remaining Administrations: (Unknown)			
*Dose:	1	*Dose Unit:	patch Y			
*Route of Administration:	topical 🗸	*Frequency:	2531 V			
PRN:	🔿 Yes 🔘 No	PRN Reason:	×			
Number of Doses Needed:		Justification:	Recommended by consult se			
Indication:		Administer over:				
Administer over Unit:	×	Duration:				
Duration Unit:	~	Drug Form:	patch ¥			
First Dose Priority:	· ·	*Start Date/Time:	2017-Sep-30 08:00 PDT 🔹			
Stop Date/Time: BCCA Protocol Code:	ma'na'n	Lise Patient Supply:	Ves No			



Click the Order Comments tab and type
 Patient removes old patch and applies a new one every Saturday.

✓ Details for estradiol (estradiol 50 mcg/day patch)	
Order comments Patient removes old patch and applies a new one every Saturday	•
	-
0 Missing Required Details 0 rders For Cosignature	Sign

### 8. Continue to enter the next medication.

Reference: The above medication uses the basic medication OEF (Order Entry Format) as shown above.

## 5 Milrinone continuous infusion

### **IV Continuous Order**

- 1. Click the +Add button
- 2. In the Add Order Scratch pad screen type *Milrinone continuous* in the Search field, select *milrinone continuous infusion (200 mcg/mL) standard* from the drop down field or click the magnifying glass icon to the right of the field.
- 3. Order will appear behind the Add Order Scratch Pad.
- 4. Click the Done button to close the Add Order Scratch Pad.
- 5. Select the *milrinone additive 200 mg* [*mcg/kg/min*] + *dextrose 5%* (*D5W*) *continuous infusion 100 mL* order and fill out the Continuous tab below with the following in the mandatory fields.
  - a. For Normalized Rate, type **0.5** before the 'mcg/kg/min' in the field and click outside the field to save.

■ Details for milrinone ad	ditive 20 mg	[mcg,	/kg/min] + de	xtrose 5%	(D5W) continuo	us infusi
🚰 Details 🞁 ᡍ 🛠 Continuous De	ails					
Base Solution	Bag Volume		Rate	Infuse Over		
懂 dextrose 5% (D5W) continuous inf	usion 100 mL	94				
Additive	Additive Dose		Normalized Rate	Delivers	Occurrence	
🗙 milrinone additive	20 mg		0.5 mcg/kg/min	40 mcg/mii	n Every Bag	
Total Bag Volume	100 mL					
Weight: Weight	Vpe:	Resu	t dt/tm:			
Weight: Weight 80 kg 🗸 Clinical	ype: Weight	Resul	lt dt/tm: -Jan-26 08:08:00 PST			



b. Note the Patient's Dosing Weight pulls into this OEF.

∠ Continuous Infusions								
📃 🚯 😣 milrine	one additive 20	Order 2018	Jan-2	6 14:06 IV, start: 2018	8-Jan-26 14:0	6 PST, baq volu	me (mL): 100	
▼ Details for <b>milrino</b>	ne additi	ve 20 ma lm	ica	/ka/min] + de	xtrose f	5% (D5W)	) continuous	infusio
	ne uddia	· · · · · · · · · · · · · · · · · · ·		nami - ao			,	
🚰 Details 🎁 🎚 🐼 Conti	nuous Details							
Base Solution		Bag Volume		Rate	Infuse (	Dver		
[ dextrose 5% (D5W) cont	inuous infusior	100 mL	00					
Additive		Additive Dose		Normalized Rate	Deliver:	;	Occurrence	
🗙 milrinone additive 👘 👘		20 mg		0.5 mcg/kg/min	40 mcg	/min	Every Bag	
				(				
Total Bag Volume		100 mL	_					
Weight:	Weight Type:		Resul	lt dt/tm:				
80 kg 👻	Clinical Weig	ht	2018-	-Jan-26 08:08:00 PST				

c. The system will calculate the rate and infusion.

▪ Details for milrinone additi	ve 20 mg [(	).5 mcg/kg/min] +	dextrose 5%	(D5W) continuous
Petails 🛗 📴 Continuous Details				
Base Solution	Bag Volume	Rate	Infuse Over	
🔚 dextrose 5% (D5W) continuous infusior	100 mL	🔚 12 mL/h	8.3 hour	
Additive	Additive Dose	Normalized Rate	Delivers	Occurrence
× milrinone additive	20 mg	🔚 0.5 mcg/kg/min	40 mcg/min	Every Bag
		8		
Total Bag Volume	100 mL			
Weight: Weight Type:		Result dt/tm:		
80 kg 👻 Clinical Weig	ht	2018-Jan-26 08:08:00 PST		

- 6. No action required for the Details tab
- 7. Continue to enter the next medication.

### \*Reference: Continuous IV Order Entry Format

All required fields will have a yellow background.

For order details this format will default to the Continuous Details tab

- 1. Normalized Rate is required
- 2. Weight will pre-populate

#### ▼ Details for milrinone additive 20 mg [mcg/kg/min] + dextrose 5% (D5W) continuous infusion 100 mL

Details 🛗 🔢 🛠 Continuous Details					
Base Solution	Bag Volume		Rate	Infuse Over	
🔚 dextrose 5% (D5W) continuous infusio	100 mL	6			
Additive	Additive Dose		Normalized Rate	Delivers	Occurrence
× milrinone additive	20 mg	8	mcg/kg/min		Every Bag
		100			
Total Bag Volume	100 mL				
Weight: Weight Type	R	lesult	: dt/tm:		
60 kg 👻 Clinical Weig	ht 0	5-De	ec-2017 12:51:00 PST		



### Enoxaparin 1mg/kg subcutaneous

6

- 1. Click the +Add button
- 2. In the Add Order Scratch pad screen, type *enox 1* in the Search field, select *enoxaparin 1 mg/kg*, *subcutaneous*, *q12h*, *drug form: inj* from the drop down field or click the

magnifying glass icon 🔍 to the right of the field



- 3. Order will appear behind the Add Order Scratch Pad.
- 4. Click the Done button to close the Add Order Scratch Pad.

Reference: the dosage calculator will run in the background and will appear very briefly

- 5. Select the *enoxaparin 1 mg/kg, subcutaneous, q12h, drug form: inj* order and ensure the Details tab below populate with the following for the mandatory fields:
  - a. \*Dose: 80
  - b. \*Dose Unit: mg
  - c. \*Route of Administration: subcutaneous
  - d. \*Frequency: q12

🚰 Details 뒍 Order Comments							
+ % h. U	Review Schedule Remaining Administrations: (Unknown) Stop: (Unknown)						
*Dose: 80	*Dose Unit: mg 🔹						
*Route of Administration: subcutaneous	'Frequency: q12h 🗸						
PRN: 🔿 Yes 💿 No	PRN Reason:						
Administer over:	Administer over Units						
Duration:	Duration Unit:						
Drug Form: inj	First Dose Priority:						
*Start Date/Time: 12-Jan-2018 15:02 PST 🗸	Stop Date/Time: 🔍 💌 💭 PST						
Use Patient Supply: 🜔 Yes 💿 No	BC Cancer Protocol Code:						

 Click on the dosage calculator icon 
 NOTE: This Enoxaparin medication order will use Standardized dosing The Dosage Calculator screen will appear

Z Details for <b>enoxapa</b>	rin
Details 🗊 Order Comme	ents
• 船 I. 🛛 🔍	
*Dose:	60
*Route of Administration:	subcutaneous

7. Click Apply Standard Dose to close the window.



### \*Note: Standardized Dosing Order Entry Format

The above medication uses the Standardized Dosing order entry format with the following fields:

All mandatory fields will have an asterisk preceding the field. These are pre-populated based on the order sentence selected.

This medication uses the existing documented weight to calculate the dose.

- 1. \*Dose
- 2. \*Dose Unit
- 3. \*Route of Administration
- 4. \*Frequency
- 5. \*Start Date/Time

### 7 Submit above Medication Orders

1. Click Sign button to commit the above medication orders.



#### **NOTE**: Mortar and Pestle icon appears beside orders.

С	Orders Medication List Document In Plan												
	۱,				I ARA PERGINA								
		Jispia	iyea: All A	cave orac	rs. FAILACtive medications:								
				10									
		8	۵ B	7	Order Name	Status	Dose	Details					
		△ Continuou Infusions											
	-		🕀 🖻	66	DOPamine additive 4	Ordered		titrate, IV, 0 mcg/kg/min minimum rate, 20 mcg/kg/min maximum rate, titrate instructions: as per analgesia, start: 10-1					
			🔁 🖻	2	metFORMIN	Ordered		500 mg, PO, TID with food, drug form: tab, start: 23-Oct-2017 17:00 PDT					
			A V	-	raminril	Ordered		GUICODHAGE FOUR/ 5 mg. PO. eduity. drug form: can start: 10-New 2017 09:52 PST					
					Tampin	Oldered		Sing, PO, quany, and rom, cap, start, 10-Nov-2017 (5-22 FS)					
			_ 🕐 🖻	. <u>00</u> 00	estradiol (estradiol 50	. Ordered		1 patch, topical, gweek, drug form: patch, start: 11-Nov-2017 08:00 PST, Use Patient Supply					
		👘 🗹 ာတ် non-formulary medic Ordered			1 cap, PO, q4h, start: 10-Nov-2017 10:00 PST								
					1 tab, PO, q4h, PRN pain, drug form: tab, start: 10-Nov-2017 09:53 PST								
			_		e/codeine (TYLENOL			Each tablet contains up to 325 mg acetaminophen, caffeine 15 mg and codeine 15 mg. Maximum acetaminophen 4					

**NOTE**: Pharmacist medication orders in PowerChart will still need to be verified in Pharmacy Medication Manager.

### NOTE: Click the Refresh button for orders to appear on your patient's profile



# Activity 1.2 – PowerPlan Orders (Order Sets)

### Estimated Completion Time: 10 min

PowerPlans can be initiated or planned by a pharmacist. PowerPlans that are <u>initiated</u> have orders that become active and available for action immediately. PowerPlans that are **not** initiated are in a planned stage. Planning allows the provider to review the orders ahead of time in preparation for a future activation or initiation.

A PowerPlan opens in a separate window with toolbar icons offering several tools to manage orders efficiently. Remember to use 'hover to discover' over icons to display a description of what the icon indicates.

In this activity you will learn how to place and adapt a PowerPlan. This functionality offers tools and icons for on-screen support.

Check the **Foundational - Medication Icons** QRG (Quick Reference Guide) and remember to use 'hover to discover'. Below are the most commonly seen icons in PowerPlans:

₫.	<b>Merge View</b> - Displays the plan components with those already ordered for the patient and active on the patient profile.
<b>V</b>	Show Only Selected Items – Displays only the orders with checkmark boxes pre-checked.
<i>₩</i>	<b>Initiate Plan or Phase</b> - Initiates the selected plan or phase. Orders do not become active or route to ancillary departments until you initiate.
<b>%</b>	View Excluded - Displays components of the predefined plan that were not included in the initiated plan.
0	<b>Discontinue</b> - Opens the Discontinue dialog box so that you can discontinue the plan or phase (individual components can be kept).
0	<b>Plan Comment</b> - Adds a note to a PowerPlan phase. Plan comments allow you to communicate decisions made regarding the phase to other clinicians who can view or take action on the phase. You can add a comment to a phase in any status.
A Check Alerts	<b>Check Alerts</b> – Allows you to check for Quality Measure Alerts.
Maintenance Fluids          Maintenance Fluids         sodium chloride 0.9% (so         plasmalyte (plasmalyte co	<b>Pre-checked</b> – Some orders will be pre-checked when the PowerPlan is chosen. These checkmark boxes can be unchecked or checked.



In addition to the above medications, you will now order the VTE Prophylaxis PowerPlan

#### VTE Prophylaxis PowerPlan

1

- 1. Click +Add
- 2. In the Add Order Scratch pad screen, start typing VTE prophylaxis in the Search field, and select Venous Thromboembolism (VTE) Prophylaxis (Module) (Validated) from

the drop down field or click the magnifying glass icon <a href="https://www.com/select.c

Search: vte proph	e: 👘 Inpatient	•	
VIE Urophylaus Education     VIE Prophylaxis (Module) (     VTE Prophylaxis (Module) (	Validated)		
🔚 Venous Thromboembolism (VTE) Prophylaxis (Module		HINT: PowerPlans are	
		denoted by the Yellow	
		CSTPRODMED, TEST-JANEL	LE - 70000210 Done

3. Click the **Done** button to close the Add Order window.



### **Reference: PowerPlans**

rders	59 67 SPG	D Normal view D Port 241
mt Medication by He   Reconciliation + ] 🚴 Check Interactions		Meds History
List   Document In Plan		· maining · random ·
Add to Phase Comments Start New Duration None		
Commentant Date	J Daraite	
Component Status Dose	e Denais	
Consideration (1.1.1.) Lobustonia (Lancascan) (Lancascan) (Lancascan)		
For obstetrical patients, refer to OB Postpartum VTE Thromboprophylaxis (Mod	de)	
Refer to VTE Risk Assessment and Thromboprophylaxis Recommendation		
Epidural catheter should not be removed within 12 hours after a dose of daltepa	rin or 10 hours after a dose of heparin	
Anter epidural catheter removel, dartepann or nepann should not be given for at	1999) & repres Within 12 hours where daltamatin / 10 hours after henorin. After Enidoral systematical, daltamatic or henorin should not be obtain for 2 hours	
Heparin 5000 units subcutaneous g12h should be used if patient is awaiting urg	ent surgery and is a candidate for neuraxial blockade	
VTE RISK IS LOW		
No anticoagulant or mechanical prophylaxis required. Encourage early ambulat	ion for patient	
Ambulate	No anticoaquíant or no mechanical prophylaxis required	
VIERSKIS MODERATE OR PROFIVITIPOUT CONTRANUCATION TO ANTICOM	NUCLANES C	
Anticoaculants contraindicated in	c anocoaguedon	
- Active bleeding of clinical significance requiring intervention		
High risk of serious bleeding or bleeding into a critical site (e.g. intracranial, in	traginal, pericardial, intraocular, retroperitoneal, intra-anticular)	
<ul> <li>Platelet count less than 50 x 10°9/L (consider Hematology consult)</li> </ul>	gy consult,	
- History of heparin induced thrombocytopenia (HIT) (fondeparinux allowed)		
For surgical patients, please mark the time and date of the first post-op dose on	the respective medication order	
Communication Order	For surgical patients, give first post-op dalteparin dose at h (time) on (date)	
Dateparin for eXPR10 mL/min or above 3 a/XER is 10 to 30 mL (min AMD separated LCR is feature than 10 days, consider a	sing benefit initial of defension	
a eark is to to so murman who expected LCs is longer than to days, consider a Daltepartin greater than 5000 units gdaily is contraindicated if epidural to be play	ung negarin intesad or daitepanin ad or in stu	
dalteparin	Select an order sentence	
Heparin for #GFR less than 10 mL/min		
Heparin greater than 10000 units gdaily is contraindicated if epidural to be place	id or in seu	
Communication Order	For surgical patients, give first post-op heparin dose ath (time) on(date)	
hepann Increanain for nations, with birk rick networks unsul skalatal trauma, contrainds	Jonest an order sentence     instruction to be developed as in the for sourceal blockede	
Communication Order	For summal patients, one first post-on encounter does ath (time) on(data)	
enciaparin	30 mg, subcutaneous, q12h, drug form: syringe-inj	
	Unoil discharge. Contraindicated if epidural to be placed or in situ	
Fondaparinux for patients with heparin-induced thrombocytopenia; contraindic	ated if epidurel to be placed or in situ:	
Communication Order	For surgical patients, give first post-op fondapannuk dose at h (time) on (date)	
tondapannus	2.3 mg, subsutaneous, quany, drug termi symge my Uebi discharos Contrandiczated il epideural to be claced or in situ	
Rivarovaban for post-hip or knee arthroplasty: contraindicated if epidural to be	placed or in situ or e-GFR is less than 30 mL/min. Please specify number of days within medication order	
Communication Order	For surgical patients, give first post-op rivaroxaban dose at h (time) on (date)	
rivaroxaban	10 mg, PO, qdaily, order duration: 14 day, drug form: tab	(1) 11 (2) (2) (2) (2) (2) (2) (2) (2) (2) (2)
	Total Knee Replacement. Commence first doue at 100th post-op day 1 and at least 12 hours post-surgery. Contraindicated if epidural to be placed or in site 10 million 200 million	a or #-GFR is LESS than 30 mL/min
hvaroxadan	at mg, Puy, quary, crose ourstion; as any, oring torm: tao Total Hin Rentizement. Commence first does at 100th nort-on day 1 and at least 12 hours nost-surgery. Contraindicated if evidual to be placed or in shu	or e-GER is LESS than 30 ml /min
VTE RISK IS MODERATE OR HIGH WITH CONTRAINDICATION TO ANTICOAGUE	ANTS	
Mechanical prophylaxis contraindicated in:		
Peripheral vaccular disease with absent pedal pulses     Counter peripheral representative		
<ul> <li>Skin breakdown, u/cers, gangrene, cellulitis, or dermatitis</li> </ul>		
Skin grafting within last 3 months		
<ul> <li>Allergy to stocking or compression cuff materials</li> <li>Upable to size or annly momenty due to deformity, recent sumery or trauma.</li> </ul>		
· Only graduated compression stocking is contraindicated for acute stroke with	immobility (unable to walk independently to the toilet)	
Apply Full Leg Sequential Compression Devices	Apply to lower limb(s) continuously until anticoagulant prophylaxis starts or discharge. Interrupt for skin care, assessments, toileting, and ambulation only	/
Apply Below the Knee Sequential Compression Devices	Apply to lower limb(s) continuously until anticoagulant prophylaxic stratus or discharge. Interrupt for skin care, assessments, toileting, and ambulation only of the discrete strategies and an anticipation of the second strategies and an anticipation of the second strategies and an anticipation only discrete strategies and an anticipation of the second strategies and an antici	•
Farmer alsolation Andre	Contrainancene oro stroke patients, use full leg sequential compression device No excention of the sector data device of excention of extended and excention of excention of excention of extended and excention of e	
ASA chewable for post his or knee summy if on mechanical prophylics only	no micrience propriosis secores de constituição (Constituição	
ASA (ASA chewable)	\$60 mg, PO, gdaily with food, drug form: tab-chew	
Communication Orde ASA chewable for post ASA (ASA chewable)	r hip or Xnee surgery if on mechanical prophylaxis only	No mechanical prophylasis edition     No mechanical prophylasis edition     100 ms, PO, qdality with food, drug form tale-chew

You are presented with a list of orderables to choose from within the PowerPlan.

In some PowerPlans, certain orders may be pre-checked; this PowerPlan has no pre-selected checkmark boxes.

Select orders for initiation and/or signing by clicking the checkmark box next to the desired order.

A drop-down box denotes there are alternate order sentences available.

🤣 Dalteparin greater than 5000 units gdaily is contraindicated if epidural to be placed estimate								
	dalteparin	-	Select an order sentence					
3	Heparin for eGFR less than 10 mL/min		✓ Filtered Order Sentences					
3	Heparin greater than 10000 units gdaily is contraindicated if epidural to be place	or in		10, 100 1				
17	Communication Order	•	5,000 unit, subcutaneous, qdaily, drug form: syringe-inj	40 - 100 kg				
	heparin	▼	5,000 unit, subcutaneous, qdaily before supper, drug form: syringe-inj	40 - 100 kg				

Each section or category of the PowerPlan is denoted with a green background color

l e		2 Henarin 5000 units subcutaneous of /h should be used it natient is await	iting urgent surgenziand is a candidate for neuraxial blockade
		🐣 VTE RISK IS LOW	
P	-	Two anticoaquiant or mechanical prophylaxis required. Encourage early a	ampulation for patient
L	П	🕅 Ambulate	No anticoagulant or no mechanical prophylaxis required
I	_	💮 🐣 VTE RISK IS MODERATE OR HIGH WITHOUT CONTRAINDICATION TO A	ANTICOAGULANTS
Р	_	Prophylactic anticoagulation not required if patient already receiving the	nerapeutic anticoaquiation
Г		Anticoagulants contraindicated in:	

Clinical Notes to help guide you in ordering are denoted with a yellow background color.

	VTE RISK IS MODERATE OR HIGH WITHOUT CONTRAINDICATION TO ANTICOAGULANTS
()	Prophylactic anticoagulation not required if patient already receiving therapeutic anticoagulation
<b></b>	Anticoagulants contraindicated in:
	- Active bleeding of clinical significance requiring intervention
	- High risk of serious bleeding or bleeding into a critical site (e.g. intracranial, intraspinal, pericardial, intraocular, retroperitoneal, int
	- Known major bleeding disorder or acquired coagulopathy (consider Hematology consult)
	- Platelet count less than 50 x 10^9/L (consider Hematology consult)
	- History of heparin induced thrombocytopenia (HIT) (fondaparinux allowed)
<u></u>	For surgical patients, please mark the time and date of the first post-op dose on the respective medication order



1. Click the checkmark box for Ambulate.

Menu	Ą	< 🗦 ᠇ 🛉 Orders
, Pharmacist Workflow		+ Add 💷 Document Medication by Hy 🛛 Reconciliation 🖬 🚴 Check Interactions
Results Review		
Allergies	🕈 Add	Orders Medication List Document In Plan
Orders	🛉 Add	📕 di 😪 🛇 + Add to Phase - 💷 Comments Start: Now 📃 Duration:
Medication List	🕈 Add	View
Documentation	+ Add	Orders for Signature Venous Thromboembolism (VTE) Prophylaxis (Module) (Validated) (Planned Pen
Diagnoses and Problem		Document In Plan     A Medications
мар		Medical     Medical     Sefer to VE Rick Assessment and Thrombourophysics Recomment     Refer to VE Rick Assessment and Thrombourophysics Recomment
T		Venous Thromboembolism (VTE) Prophylaxis (Module) (Validated) (Plan Epidural catheter should not be removed within 12 hours after a dr
Immunizations		- varicomy on - rhar maty to Dose prototype) (antiated) Augusted Plans (III)
		Conders
CareConnect		Admit/Transfer/Discharge
Clinical Research		Status No anticoaquiant or mechanical prophylaxis required. Encourage (
Form Browser		Amount     Amount
Histories		Diet/Nutrition Prophylactic anticoaqulation not required if patient already receivi
Interactive View and I&O	)	Continuous Infusions
		t 🚦 😪 🛇 🕂 Add to Phase - 🛕 Check Alerts 🎍 Comments Start: Now 🔐 Duration: None 📖
		A Medications     A Medic
		After epidual catheter should not be removed within 22 hours are a dose of unexpanie of 20 hours are a dose of ineparin
	Г	🛛 🖉 Do not Remove Epidural Catheter Within 12 hours after dalteparin / 10 hours after heparin. After
		Heparin 5000 units subcutaneous q12h should be used if patient is awaiting urgent surgery and is a candidate for neuraxial blockade VTE RISKIS LOW
	T	No anticoaquiant or mechanical prophylaxis required. Encourage early ambulation for patient No anticoaquiant or no mechanical prophylaxis required No anticoaquiant or no mechanical prophylaxis required
	L	

2. Click the **Initiate** 

😿 Initiate button.

	No anticoaqulant or mechanical prophylaxis required. Enco	urage early ambulation for patient						
	🖄 Ambulate	No anticoaqulant or no mechanical prophylaxis required						
	VTE RISK IS MODERATE OR HIGH WITHOUT CONTRAINDIC	ATION TO ANTICOAGULANTS						
	🏈 Prophylactic anticoagulation not required if patient already receiving therapeutic anticoagulation 🚽							
	In the second se							
	<ul> <li>Active bleeding of clinical significance requiring intervent</li> </ul>	on						
	<ul> <li>High risk of serious bleeding or bleeding into a critical site</li> </ul>	(e.g. intracrania), intraspina), percardial, intraocular, retroperitoneal, intra-articular) (e.g. intracrania), intraspina), percardial, intraocular, retroperitoneal, intra-articular)						
	<ul> <li>- Known major bleeding disorder or acquired coagulopathy</li> <li>- Distalat count lass than 50 x 1009/L (consider Warmstolog)</li> </ul>	(consider Hematology consult)						
	<ul> <li>History of heparin induced thrombocytopenia (HIT) (fond</li> </ul>	consulty apprint allowed)						
	For surgical patients, please mark the time and date of the f	st post-op dose on the respective medication order						
	🖄 Communication Order	For surgical patients, give first post-op dalteparin dose at h (time) on (date)						
	🏈 Dalteparin for eGFR 10 mL/min or above							
	If eGFR is 10 to 30 mL/min AND expected LOS is longer than	10 days, consider using heparin instead of dalteparin						
	🌕 🐣 Dalteparin greater than 5000 units gdaily is contraindicated	f epidural to be placed or in situ						
	🗭 dalteparin	▼ Select an order sentence						
	A Heparin for eGFR less than 10 mL/min							
	—	epidural to be placed or in situ						
	📝 Communication Order	For surgical patients, give first post-op heparin dose ath (time) on(date)						
	📝 heparin	Select an order sentence						
_		trauma; contraindicated if epidural to be placed or in situ for neuraxial blockade:						
The Det	The Details							
Urders	For Losignature Urders For Nurse Review Save as My Favorite	3gt Initiate Sign						

### 3. PowerPlan will be marked as **Initiated.**

Orders	Medication List	Document In Plan									
		View	<b>I</b>	< % ⊘	+	Add to Phase 🕶	🛄 Comments	Start:	2018-J	an-29 08:50 PST	Durati
Orde	rs for Signature			9 6		Component				Status	Dosi
Plans	15			Venous Thr	omb	oembolism (V)	TE) Prophylaxis (I	Module)	(Validat	ed) (Initiated Pe	ending)
Doc	cument In Plan	ent In Plan		⊿ Medicat	ions	;					
i i Mee	lical			2	For obstetrical	patients, refer to	OB Postp	artum \	TE Thrombopro	phylaxis (Mc	
	Venous Thrombo	nboembolism (VTE) Prophylaxis [Module]		2	Refer to VIE Ri	sk Assessment an	d I hrom	boprop	hylaxis Recommi	endation	
v.	ancomycin - Pharmacy to Dose (prototype) (Initiated		totype) (Initiated)		X	After epidural cathet	er should not be	daltanar	i within . in ar bai	12 nours after a c	tose of dalte
- Sugg	ested Plans (0)				Ř	Do not Remov	e Enidural Cathet	er er	in or ne	pann snoulu not	be given for

4. Continue to enter the next PowerPlan Order.

## 2 Vancomycin Pharmacy To Dose PowerPlan

Note: Your patient may have a Vancomycin PowerPlan already on profile—despite this continue with the exercise below

- 1. In the Orders Tab, click the +Add button
- 2. In the Add Order Scratch pad screen, type *Vancomycin* in the Search field, select *Vancomycin Pharmacy to Dose* from the drop down field or click the magnifying glass

CSTPF	ODMED, PHARMTECH	-ONE - Add Order			
CSTPR	ODMED, PHAR	DOB:22-Mar MRN:70000 Age:38 years Enc:700000	080Code Status: 000	Process: Disease:	Location:LGH 7W; 719; 01 Enc Type:Inpatient
Allergie	s: Kiwi, penicillin	Gender:Male PHN:98764	82 Dosing Wt:80 kg	Isolation:	Attending:Plisvcb, Stuart, MD
Search:	vancomycin	🔍 Advanced Options 👻	Type: 👔 Inpatient	•	
	vancomycin vancomycin (mg, intra	peritoneal, once, drug form: inj	) h within: All	•	
Dia	vancomycin (mg, IV) vancomycin (mg, IV, qi	(12h)			
	vancomycin (25 mg/kg vancomycin (125 mg, F	g, IV, once) PO, QID, drug form: cap)			
	vancomycin (125 mg, F vancomycin (250 mg, F	PO, QID, drug form: oral liq) PO, QID, drug form: cap)			
	vancomycin (500 mg, F vancomycin (500 mg, r	PO, QID, drug form: cap) rectal, q6h, drug form: inj)			
E.	Vancomycin (1999 mg,	N, d2H) harmacy to Dose (prototype)			
	vancomycin (mg, IV, p vancomycin (mg, IV, g	ne-op) 8h)			
	vancomycin (250 mg, F	PO, QID, drug form: oral liq)			
				CSTPRODMED, PHAR	MTECH-ONE - 700008064

icon 🔍 to the right of the field

- 3. Order will appear behind the Add Order Scratch Pad.
- 4. Click the **Done** button to close the **Add Order** Scratch Pad.
- 5. Select the Vancomycin Pharmacy to Dose order



												·····, •···		· · · · · · · · · · · · · · · · · · ·
Orde	ers	Medicatio	n Lis	t Document	t In Plan									
M	4	80	- Ac	dd to Phase <del>•</del>	A Check Alerts	; 🛄 Comment	s Start:	Now	Duration:	None				
		8 7		Component				Status	Dose	Deta	ails			
	瀫	Vancomyo	:in - I	Pharmacy to	Dose (prototype	e) (Planned Pen	ding)							
	⊿	Medicatio	ns											
	•		Ø	vancomycin	1					25 n Loa	ng/kg, IV, once ding Dose			
	$\overline{}$			vancomycin	(pharmacy to d	ose - vancomyo	in)			as d	lirected			
		Details												
	0	ders For Co	signal	ture Orders	s For Nurse Review	Save as My	Favorite					₩. Initi	ate S	ign

**NOTE**: The second Vancomycin (pharmacy to dose – vancomycin) order is a **communication** order.

- 6. Click the Initiate <sup>[]</sup> Initiate button
- 7. The order will update with the calculated dose

Orde	ers	Medication	n List   Documen	t In Plan					
Þ	<b>∢</b>	804	Add to Phase <del>-</del>	🛄 Comments	Start:	15-Dec-2017 1	1:16 PST	Duration:	None
		8 7	Component				Status	Dose	Details
	1	Vancomyci	n - Pharmacy to	Dose (prototype	) (Initia	ted Pending)			
	⊿	Medication	15						
	: <b>Q</b> :	🖗 😭 vancomycin 🛛 🖓					Order		2,000 mg, IV, once, start: 15-Dec-2017 12:00 PST, stop: 15-Dec-2017 12:00 PST Loading Dose Target Dose: vancomycin 25 mg/kg 15-Dec-2017 11:16:44*Standardized*
	:Q:	2	vancomycin (p	harmacy to dose	- vanco	mycin)	Order		IV, as directed, statt: 10-Dec-2017 12:00 PST, stop: 22-Dec-2017 11:09 PST

 Optional: Click on the dosage calculator icon 
 NOTE: This medication order will use Standardized dosing The Dosage Calculator screen will appear Click the Apply Standard Dose button – This will close the Dose calculator window

### 3 Submit above Medication Orders

1. Click the Orders for Signature button to commit the above PowerPlan orders.



Sign	
Jign	

NOTE: Click the Refresh button for orders to appear on your patient's profile



# Activity 1.3 – Lab Test – Vancomycin Trough Draw Instructions

### Estimated Completion Time: 5 min

It is within the Pharmacist's scope of practice to order lab tests. Your patient has an order for Vancomycin pending verification.

As the Ministry requires lab tests to be ordered by Physicians, extra steps are needed to capture this in Cerner.

When searching for vancomycin trough order, two orders will appear.

- Vancomycin Trough Draw Instructions
- Vancomycin Trough Level

Providers, including Pharmacists will order the Vancomycin Trough Draw Instructions order. This will create a task for the Nursing staff and they will be responsible to order the Vancomycin Trough Level at an appropriate time as instructed by pharmacy.

1

2

- 1. Click the Orders menu and click +Add
- 2. In the Add Order Scratch pad screen type Vancomycin Trough in the Search field, select Vancomycin Trough Draw Instructions from the drop down field.



### Changing the Ordering Provider. This step is <u>necessary</u> for billing purposes.

1. Right click on the Vancomycin Trough Draw Instructions and click Ordering Physician





- 2. Select the Order radio dot
- 3. Enter your patient's Attending Physician's name (Last Name, First Name)
- 4. For Communication type, select **No Cosignature Required**

P Ordering Physician
Order     Proposal
*Physician name Plisvcc, Trevor, MD
*Order Date/Time 10-Nov-2017
*Communication type
Phone Verbal Proposed
No Cosignature Required
Cosignatore Required Paper/Fax Electronic
OK Cancel

### View Order Comments

3

- 1. Click the Order Comments tab
- 2. Note the pre-populated Order Comments: Nurse to place individual lab trough order at appropriate time. Edit the comment to give more detailed instructions
- 3. Click the Orders for Signature button.



- 4. Orders tab will appear with vancomycin trough draw instructions order listed.
- 5. Click the Sign button



<	>	- 🔒 Ord	ers				[🗆] Full screen	Print	€ 53 minutes ago	
+	F Add   🖑 Document Medication by Hx   Reconciliation *   🐎 Check Interactions 🔹 🕹 Discharge									
Ore	lers	Medication Lis	t Document In Plan							
Þ		2 ? B ?	Order Name	Status	Start	Details				
		LGH 2E; 212; (	02 Enc:7000000010837	Admit: 25-	Sep-2017 12:44 PDT					
			vancomycin Trough Draw Instructions	Order	01-Dec-2017 15:00 PST	01-Dec-2017 15:00 PST Nurse to place individual lab trough order at appropriate tin	ne.			
		Details								
	0	Missing Required	Details Orders For Cosig	gnature 0	Irders For Nurse Review	]			Sign	

### Key Learning Points

- Understand how to enter different types of Medication Orders in PowerChart.
- Understand PowerPlans and how to enter, initiate, and sign.
- Understand how to enter lab tests and the important of changing the Ordering Physician to the Attending Physician for billing purposes.



## **FATIENT SCENARIO 2 – Managing Pharmacy Consult Orders**

Duration	Learning Objectives
10 minutes	At the end of this Scenario, you will be able to:
	Manage Pharmacy Consult Orders
	Enter a Pharmacy Consult Order
	Mark a Pharmacy Consult Order as Complete

### SCENARIO

You are covering 1 unit at your facility.

You have been approached in the hall by a Physician to see their patient for a renal dosing consult.

To expedite the activity in Cerner, you have agreed with the Physician that you will enter the consult in Cerner.

After you see your patient, you will mark the consult you entered as completed.



## Activity 2.1 – How to address a Pharmacy Consult Order and Mark as Complete

### Estimated Completion Time: 10 min

1

Finding your patient on your unit to place the Pharmacy Consult Order.

 Click on Pharmacy Care Organizer icon from the toolbar <sup>Pharmacy Care Organizer</sup> For Patient List: select your designated area from the drop down menu.

The Patient Care Organizer utilizes existing Patient Lists. Use List Maintenance to create a new list.

2. Click on the hyperlink for your patient's name to open their chart.

Pharmacy Care Organizer							, D, Full	screen	( Print	<b>~</b> * 10	minutes ago
A	<b>a</b>										
Patient Organizer Worklist											_ ≡•
Patient List: LGH 4 East	✓ List Mair	tenance Establish Relation	onships								≡-
Patient	Ht/Wt/SCr	Location	Visit	P.,	D.	Α.	м.	U*	м	C.,	
*CSTPRODORD, PATIENT A 32 vs F DOB: Jan 1, 1985 MRN: 700001815 FIN: 700000009506	80 kg  CrCl: Missing IBW: 61.44 kg	LGH 4E 410 - 02	Length of Stay: 11 days Admit Date: Aug 25, 2017 Anticipated Discharge Date:	2	1	0	0 0 0	11	1 🔺		E
*CSTPRODORD, PATIENT B 71 yrs M DOB: Dec 25, 1945 MRN: 700001818 FIN: 70000009435	50 kg  CrCl: Missing IBW: Missing	LGH 4E 410 - 04	Length of Stay: 12 days Admit Date: Aug 24, 2017 Anticipated Discharge Date:	1		0	000	8 🔺	1 🔺	-	
*CSTPRODORD, STTESTAAE 6 yrs U DOB: Oct 10, 2010 MRN: 700000873 FIN: 700000009771	23 kg  CrCl: Missing IBW: Missing	LGH 4E 4EL - 03	Length of Stay: 4 days Admit Date: Sep 1, 2017 Anticipated Discharge Date:			0	000	2 🔺		-	
CSTPRODOSFUNG, SOLOMON 28 yrs M DOB: Nov 30, 1988 MRN: 700001445 FIN: 7000000002085	65 kg  CrCl: Missing IBW: Missing	LGH 4E 418 - 02	Length of Stay: 9 months 1 week Admit Date: Nov 30, 2016 Anticipated Discharge Date:			0	8	1 🔺		-	
*CSTPRODREG, HLSIXTYTWO 26 yrs F DOB: Dec 1, 1990 MRN: 700000141 FIN: 700000000150	 CrCl: Missing IBW: Missing	LGH 4E 	Length of Stay: 12 months 1 week Admit Date: Aug 23, 2016 Anticipated Discharge Date:	-		વ	0 0 0			-	

### 3. Click +Add to the right of Orders from the Menu.

Menu	<b>4</b>	< 🖂 🕈 🛉 Pharmacist Workflow		
Pharmacist Workflow		A		
Results Review		Pharmacist Summary 33 Pharmace Workflow 33	+	
Allergies	🕇 Add			
Orders	🖶 Add	Allergies (1) 🚽	••	Home Medications
Medication List	Add Orde	rs Problem List	≣• 🔊	Medications
Documentation	🕇 Add	All Visits		Selected visit
Diagnoses and Problems		Classification: All		⊿ Scheduled (32)
MAR		Add new as: Chronic		Next Dose
Immunizations		Q		penicillin G sodium 2
				salbutamol 2.5 mg,
CareConnect		Priority Problem		ampicillin 1,000 mg
		Provide Provide		ipratropium (ipratroc

- 4. In the Add Order Scratch Pad that opens, type **Pharmacy Consult** in the Search field and click the Magnifying glass
- 5. Click to select the appropriate IP Consult to Pharmacy with order sentence IP Consult Pharmacy Renal Dosing of any Applicable Drug

Order will appear behind the Add Order Scratch Pad





CSTP	CSTPRODMED, TEST-JANELLE - Add Order							
CSTPR	ODMED, TEST-JANELLE	DOB:1979-Mar-22	MRN:700002107					
Allergi	es: No Known Allergies	Enc:7000000007153 PHN:9878188633						
Search	Pharmacy Consult Advanced 0	Dptions 👻 Type: 👘	Inpatient 🗸					
A	IP Consult to Pharmacy IP Consult to Pharmacy (Star bescoring Tre	atment per Details)	<b>•</b>					
Dia	IP Consult to Pharmacy (Assume Dosing of	Drug per Details)						
	IP Consult to Pharmacy (Renal Dosing of an	y Applicable Drug)						
	IP Consult to Pharmacy (Drug-Induced Con	dition? per Details)						
	IP Consult to Pharmacy (Medication Recond	ciliation on Discharge)						
	IP Consult to Pharmacy (Any Drug Interaction	on - Drug per Details)						
	IP Consult to Pharmacy (Assume Responsib	ility for TPN Ordering)						
	IP Consult to Pharmacy (Change Medicatio	n Route/Form per Details	;)					
	IP Consult to Pharmacy (Coordinate Use of	Patient's Own Med)						
	IP Consult to Pharmacy (Determine Allergy	History)						
	IP Consult to Pharmacy (Med Teaching of D	)rug per Details)						
	IP Consult to Pharmacy (Medication Recon	ciliation on Admission)						
	IP Consult to Pharmacy (Medication Recon	ciliation on Transfer)						
	IP Consult to Pharmacy (Obtain Non-Formu	ulary Med per Details)						
	"Enter" to Search							

P CSTPRODMED, TEST-JANELLE - Add Order			- • •
CSTPRODMED, T DOB:1979MRN:7000. Age:38 ye Enc:70000. Allergies: No Known Gender:Fe PHN:9878	Code Status:  Dosing Wt:45 kg	Process: Disease: Isolation:	Location:LGH 4E; 404 Enc Type:Inpatient Attending:Plisvca, Rocc
Search: Advanced  Advanced  Consult to Pharmacy  P Consult to Pharmacy  Start Best Drug Treatment per Details  P Consult to Pharmacy  Assume Dosing of Drug per Details  P Consult to Pharmacy  Renal Dosing of any Applicable Drug  P Consult to Pharmacy  Drug-Induced Condition? per Details  P Consult to Pharmacy  Medication Reconciliation on Discharge  P Consult to Pharmacy  Any Drug Interaction - Drug per Details  P Consult to Pharmacy  Any Drug Interaction - Drug per Details  P Consult to Pharmacy  Any Drug Interaction - Drug per Details  P Consult to Pharmacy  Any Drug Interaction - Drug per Details  P Consult to Pharmacy  Assume Responsibility for TPN Ordering  P Consult to Pharmacy  Assume Responsibility for TPN Ordering	Options  Type:  Search within:  IP Consult to Phar Coordinate Use of IP Consult to Phar IP Consult to Phar Medication Recor IP Consult to Phar Medication Recor IP Consult to Phar Medication Recor IP Consult to Phar Obtain Non-Form IP Consult to Phar	Inpatient all Tracy f Patient's Own Med macy Determine Allergy His macy Drug per Details macy nciliation on Admission macy nciliation on Transfer macy nulary Med per Details macy Other – per Details	tory
Change Medication Route/Form per Details	1		
•	III		•
	CSTPRO	DMED, TEST-JANELLE -	700002107 Done

- 6. Click Done
- 7. Order will appear on the right side of the screen. Select the order to bring up Details tab
  - a. \*Requested Start Date/Time: Defaults to current date and time
  - b. \*Reason for Consult: Defaults to Order Sentence selected



Set > - ↓ ↑ Orders	[🗆] Full screen	🛑 Print	€ 0 minutes ago
🕇 Add   💣 Document Medication by Hx   Reconciliation ~   🚴 Check Interactions	Reconciliation Stat	tus 🔅 Admissio	n 🤤 Discharge
Orders Medication List Document In Plan			
Orders for Signature			
Details Status Start Details			
△ LGH 4E; 404; 02 Enc:700000007153 Admit: 2017-Jul-05 13:05 PDT			
🔤 👘 IP Consult to Pharmacy: Order 2017-Sep-06 09:55 PDT 2017-Sep-06 09:55 PDT, Reason for Consult: Renal Do	sing of any Applicable	e Drug	
■ Details for IP Consult to Pharmacy			
😭 Details 🗊 Order Comments			
*Requested Start Date/Time: 2017-Sep-06 💭 v 0955 🚔 PDT *Reason for Consult: Renal Dosing of any	Applicable 👻		
Details:			

8. For additional notes to capture regarding this order, click Order Comments

Type: Entering Order on behalf of patient's attending.

9. Click Sign when complete

Tetails for IP Consult to Pharmacy  Details I I Order Comments	
Entering Order on behalf of patient's Attending	
0 Missing Required Details         Orders For Cosignature         Orders For Nurse Review         Sign	

10. Click Refresh button for Status of order to change from Processing to Ordered

<			<b>f</b>	Ord	ers				[0] Full screen	🖨 Print	na 14 minutes ago			
+	+ Add   🖓 Document Medication by Hx   Reconciliation 🔹 🚴 Check Interactions													
Ore	Orders Medication List Document In Plan													
Displayed All Active Orders [All Inactive Orders [test] Show									ihow More Orders					
		S		8	Order Name	Status	Dose	Details			~			
	4	1 Cor	nsult	s/Refe	rrals									
					IP Consult to Pharmac	Processing		2017-Sep-06 09:55 PDT, Reason for Consult: Renal Dosing of any Applicable Drug Entering Order on behalf of patient's Attending						
	4	1 Cor	nmu	nicati	on Orders									
			$\checkmark$		Communication Orders	Ordered		2017-Jul-06 10:38 PDT, If uterine activity has not returned to normal after 10 more m	ninutes, discontinue	oxytocin un	til tachysyst			
			$\checkmark$	2	Communication Orders	Ordered		2017-Jul-06 10:38 PDT, Decrease oxytocin dose until fetal heart rate pattern become	s normal (initially de	crease by h	alf of the cur			
			$\checkmark$		Communication Orders	Ordered		2017-Jul-06 10:38 PDT, Stop oxytocin if fetal heart assessment is abnormal						
			$\checkmark$	2	Communication Orders	Ordered		2017-Jul-06 10:38 PDT, Decrease oxytocin rate by at least half of the current dose						
	4	1 No	n Cat	egoria	red									
			$\checkmark$		Refused Order Action	Ordered		2017-Jul-28 18:02 PDT Please take action on the order that has been refused: XR Chest was refused on CS	TPRODMED, TEST-J	ANELLE (LG	H 4E / 404)			



11. The Active Pharmacy Consult Order can now be seen in several areas:

Clinical Worklist											
A D A A I A A A A A A A A A A A A A A A											
Clinical Pharmacist Worklist	Clinical Pharmacist Worklist										
Patient List: LGH 2E	Facilities: Select a Facility V Nurse Units Submit Clear										
My Populations Views: Test 1*	$\checkmark$										
Remove Reset Save											
Patient Information	Consults										
[+] CSTPRODMED, LAB-LOW 18 years F 🛱	IP Consult to Pharmacy: 2017-Oct-10 12:59 PDT, Reason for Consult: Renal Dosing of any Applicable Drug, MED General Medicine Admission (Validated)										

- Clinical Worklist
- Pharmacy Care Organizer
- Pharmacy Summary Page High Risk Category section
- Patient's Order Profile under consults/referrals in their chart

Mena		Conders				(C) Full screen 🛛 🛱 Print	R 3 minutes ag
		+ Add   2 Document Medication by Hx   Recenc	Ration • 💦 Check Interaction	ns		Reconciliation Status	
		Orders Medication List Document In Plan				<ul> <li>Meds History</li> <li>Admissi</li> </ul>	on 👽 Discharge
Orders	+ Add						
	+ Add	N					
Documentation	+ Add	Creating of a receive creater that mactive creater the	nve orders				
		Order Name *	Status	Sat	Dose Details	9	Ordering Pre-
		✓ LGH 7W; 719; 02 Enc:7000000005151 A	dmit: 2017-May-23 14:27 PD	Г			
Allages	<b>T</b> App	Patient Care					
<b>Diagnoses and Problem</b>		<ul> <li>Activity</li> </ul>					
Histories		<ul> <li>Continuous Infusions</li> </ul>					
		<ul> <li>Medications</li> </ul>					
MAR Summary		<ul> <li>Blood Products</li> </ul>					
		Laboratory					
		<ul> <li>Respiratory</li> </ul>					
Form browser		2 ConsultyReterrais	1000000	MARK - MARKED BAT	NAMES OF A DECK		and surger sold
Patient Information		III ID Concert to Printinger	Consisted	2017-8424 \$4.21 DDT	2017-March 2414-21 DDT Parage for Canad	Read Device of any Applicable Days of Linearities of	Test Med
Interactive View and 15		Communication Orders	Compress	ever may or stat por	and may be read to 1, reason for contra	ic route board of any approace brog scratchesing p	TES, WES
Lines/Tubes/Drains Su	mmary						
Growth Chart							
Immunizations							
Clinical Research							
carecornect							

 Single Patient Task List (refer to Workbook 1 to setup your grey Change Time Frame Criteria)



• Multi Patient Task List

Nuiti-Patient Task List							A	Full screen 🙃 Print 🛛	ð 0 minute
harmacist					201	7-September-06 06:3	0 Wednesday PDT - 201	7-September -06 19:29 W	lednesday i
ctive Consults Discharge Consults	ALL Acti	ve Consults Completed							
asa remevar completed		1.1			1				
SCSTPRODMED, LGH-TEST		Name	Location/Room/Bed	Financial Number	Scheduled Date and Time	Task Description	Mnemonic	Order Details	
CSTPRODMED, TATIANA		CSTPRODMED, LGH-TEST	LGH 7W / 719 / 02	700000005151	2017-Sep-06 09:11 PDT	Consult to Pharmacy	IP Consult to Pharmacy	2017-Sep-06 09:11 PDT, Rei	ason for C
CSTPROOMED, TEST-CPRENAL		did CSTPRODMED, TEST-JANELU	E LGH 4E / 404 / 02	700000007153	2017-Sep-06 09:55 PD1	Consult to Pharmacy	IP Consult to Pharmacy	Entering Order on behalf	of patient
CSTPRODMED, TEST-F									
CSTPRODMED, TESTICUOMNE-B									
CSTPRODMED, TEST-JANELLE									
CSTPROOMED, TEST-THIRTYTHREE									
CSTPRODML JAMES L									
	100								





### Marking the Consult as complete.

This can be done from 3 places

- From Patient's Chart in Orders Tab
- Single Patient Task List
- Multi Patient Task List

### For this exercise we will complete from the Single Patient Task List

Click on Single Patient Task List from the Menu.

1. Right-click on the Consult and select Chart Done (Date/Time)

Orders	🕂 Add	Clini	cal Pharmacy	Active Consults	Completed				
Medication List	🕂 Add	Tas	k retrieval cor	 npleted					
Documentation	🕂 Add		Financia	il Number Schedu	led Date and Tim	e Task Description	MNEMONIC	Order Details	
Diagnoses and Proble	ms		<b>ଟଟ</b> 7600000	000047 2018-Ja	n-29 09:05 PST	Chart Done	in a in ai	nacy 2018-Jan-29 09:05 PST, Reason for Consult: Re	nal Do
MAR						Chart Done (Date	/Time)		
Immunizations						Chârc Noc Done			
						Quick Chart			
CareConnect						Chart Details / Me	odify		
Clinical Research						Unchart			
Form Browser						Ad Hoc Charting			
Histories						Reschedule This	Fask		
Interactive View and I	8.0					Print	+		
MAR Summary						Order Info			
Medication Request						Order Comment.			
Oncology						Create Admin No	te		
Patient Information						Reference Manua	l		
Perioperative Summa						Task Info			
Reference						Patient Snapshot			
Since Lasc Visic						Select All			
Single Patient Task L	.ist					Deselect All			

- 2. Consult to Pharmacy (Chart Done) screen will appear.
- 3. Ensure the correct date and time is captured. Click the OK button.



4. A green checkmark will appear in the first column for the order





5. Click the **Refresh** button.

Multi-Patient Task List				(O) Full screen	Print	2 0 minutes a
/ © 🛛 🕯 🔍 💷 🌾						
LGH 2 Fast			01-June-2016 1	2:52 Wednesday PDT - 02-Octo	ber 2018 12	253 Tuesday PD
Active Consults Completed						
Task retrieval completed						
All Patients	Name	Location/Room/Bed Financial Number Scheduled Date and Tim	e Task Description	Mnemonic	0	rder Details
BROWN-LEARN, HENRY						
CRUZ-LEARN, MARIA						
W CSTADTIAMTHREE, ADTONE E						
(#) CSTADTJAMTWO, PATIENTSX						

6. The consult order for your patient will be removed from the list.

	۵۵	7	Order Name	Last Updated	Status	Dose
⊿	Consult					
		66^	IP Consult to Pharmacy	01-Dec-2017 13:26 PS	Completed	
•	Commu					

## Key Learning Points

- Understand how to enter Pharmacy Consults in PowerChart
- Understand how to mark the Pharmacy Consults task as complete



## **PATIENT SCENARIO 3 – Clinical Documentation in PowerChart**

Duration	Learning Objectives
10 minutes	At the end of this Scenario, you will be able to:
	Create a Pharmacy Progress Note for your patient.

## SCENARIO

As a clinical pharmacist, you will be entering a Pharmacist Note in your patient's chart. Unfortunately, you will not be able to complete the note in one sitting and will need to save your work on an on-going basis.

In a later exercise in the Message Centre scenario, you will retrieve your note and complete it.



# Activity 3.1 – Entering Pharmacist Note

### Estimated Completion Time: 10 min

You have seen and assessed your patient and would like to record your findings in a note in their chart.

NOTE: The patient's chart can be assessed in many ways.

- Patient list.
- Pharmacy Care Organizer
- Clinical Worklist
- Perform Patient search



From the patient's chart, click Documentation from the Menu

Menu	<b>џ</b>
Pharmacist Workflow	
Results Review	
Allergies	🕇 Add
Orders	🕇 Add
Medication List	🕇 Add
Documentation	🕇 Add
Diagnoses and Problem	15
MAR	
Immunizations	

**NOTE**: A listing of previously entered notes may be displayed. There will be no other notes in the training environment.



Click the +Add button under the Documentation header

🔹 🔹 🚹 Docum	entation			🗇 Full screen 🖷 Print 💸 1 mir	iutes a
Add Sign 🗾 🖂 F	orward 🔛 Provider Letter   🔤 Me	odrfy   🐂   🦉 🎔   📰 📑 in Error   📗	P	review    🧇	٩
Display : All Physician Notes	•			🎓 Previous Note   🐥 Next Not	e
Service Date/Time 🔻	Subject	Туре	H	t Final Banant	^
2017-Jul-05 13:43:00 PDT	Allergy Rule	Allergy Rule - Text	1	* Final Report *	
2017-Jul-05 13:19:00 PDT	Height Weight Rule	Height Weight Rule - Text	1		
2017-May-15 16:45:00 P	Pharmacist Note	Pharmacist Progress Note	1		
2017-Apr-12 16:38:00 PDT	Ambulatory Vitals Height Weight	Ambulatory Vitals, Ht, Wt - Text	1	Mod Test	=
2017-Mar-23 11:25:00 PDT	test 3	Pharmacist Progress Note	1	1067 CST St	
2017-Mar-23 10:32:00 PDT	Pharmacist Interventions	Pharmacy Clinical Interventions - Text	1	Vancouver, British Columbia	
2017-Mar-23 09:34:00 PDT	#2 clinical note - save/ sign	Pharmacist Progress Note	1	Vancouver, Bhash Columbia	
2017-Mar-23 09:30:00 PDT	Testing Clinical Note 1	Pharmacist Progress Note	1	Re: TEST-JANELLE CSTPRODMED	
2017-Mar-23 08:07:26 PDT	Provider Letter	Letter Provider			
2017-Mar-23 07:58:00 PDT	Pharmacist Note	Pharmacist Progress Note	1	Date of Visit 2017-Feb-28	
2017-Mar-23 07:39:00 PDT	Pharmacist Note	Pharmacist Progress Note	1		
2017-Feb-28 11:10:00 PST	Height Weight Rule	Height Weight Rule - Text	1	Dear Med Test.	
2017-Feb-28 11:10:00 PST	Height Weight Rule	Height Weight Rule - Text	1	'	
				Let me know if you have any questions or concerns.	+
	III	4			



## 4 The tab **New Note** will appear



Ensure the following fields are filled out as follows:

- 1. Note Type List Filter: Position
- 2. \*Type: Select Pharmacist Progress Note
- 3. Title: Change to '**YOUR NAME' Pharmacist Note** (Note: Your name is only needed for this training activity). In practice, you will choose a title that reflects the note
- 4. Date: Today's Date
- 5. Author: will capture your username

Note Templates HINT: Save Pharmacist Note as Description Name -Favorite \* Oncology Consultation Note Oncology Consultation Note Template Click the Star icon to the left of the Oncology Consultation- Televisit Note Oncology Consultation- Televisit Note Template note \* Oncology Outpatient Clinic Note Oncology Outpatient Clinic Note Template \*Note Templates Oncology S&P Note Oncology S&P Note Template Name - Oncology Transfer Summary **Oncology Transfer Summary Template** Pharmacist Note Operative Note **Operative Note Template** 余 Palliative Medicine Sedation Note Palliative Medicine Sedation Note Template Click Favorites (1) Patient Discharge Summary Patient Discharge Summary All (65) Pharmacist Note Pharmacist Note Templat Favorites (1) Note Templates Pre Anesthesia Assessment Pre Anesthesia Assessment Template Name -

For \*Note Templates, scroll down list or search and select Pharmacist Note and click OK

5

## 6

Click in the blank space (Body of the note) to active the cursor and start typing your note. **NOTE**: Pharmacy has many optional auto-templates available; please see the Pharmacy – Pharmacy Note Types Categories QRG for a listing of available auto-templates.

In the body of the note, look at the enterprise-wide auto-templates for Pharmacy by typing ",,pharm"

Menu	< 🔹 🕂 🔒 Documentation								
Pharmacist Workflow	💠 Add 间 🖳 🛛								
Résults Review	Pharmacist Note × List								
Orders + Add	Tahoma 🔹 11 🔹 🕼 🐘 🛸 🔿 🖪 I								
Medication List 🛛 🕂 Add	nharm								
Documentation 🛛 🕂 Add	pharm adverseDrugReaction *								
Diagnoses and Problems	"pharm_consult_Note *								
MAR	"pharm_discharge_med_review *								
Immunizations	"pharm_discharge_medrec_list * pharm_medDosageAssessmentRenalEunction *								
	", pharm_med_counseling/education *								
CareConnect	"pharm_pharmacokineticAssessment * "pharm_reviewOfMedTherapy *								



7

Click **Save & Close** because you were interrupted and not completed your note. If you had completed your note, you would have clicked Sign/Submit.

< 🗸 🕆 🛉 Documentation	[D] Full screen	(and print)	€ 10 minutes ago
+ Add 📜 🛃 🏹 Pharmacist Note X List			4 Þ
Tahoma - Size - Are is a test note for class.		∎ <b>n</b> [	
<u> </u>			
Note Detailer Dynamoviet Dennaer Note Tart Med 2017. San 12 1604.0			
Note Details, Filaminaus, Frogress Note, Test, Meo, 2017/36p*12 1004 F Sign/Submit	Save	Save & Clos	Cancel

8

9

Confirm details of your note in the Save Note pop up box and click OK.

P Save Note			×
* <b>Type:</b> Pharmacist Progress Note	Note Type List Filt	ier:	
*Author:	Title:	*Date:	
Test, Med	Markus Smith - Ph	harmacist Note 2017-Sep-12 III 160	4 PDT
		OK	Cancel

Your newly created progress note will close and return to list of documentation.

<ul> <li>• A Documentation</li> </ul>		ر م preliminary status canı
▶ Add 🛛 Ƴ Sign 🐊 🙈 Forward 🔲 Provider Letter   🛃 Mo	odify   🐂   🥊 🎔   📰 🔐 In Error   🏢	Preview be seen by anyone else except the Author.
risplay : All Physician Notes 🔻 📖		Trevious note 🔷 Next Note
Service Date/Time Subject 2017-Sep-12 16:04:00 PDT Markus Smith - Pharmacist Note	Type Pharmacist Progress Note	* Preliminary Report *
2017-Jul-05 13:19:00 PDT Height Weight Rule 2017-May-15 16:45:00 P Pharmacist Note	Height Weight Rule - Text Pharmacist Progress Note	This is a test note for class. Continuing note.
2017-Apr-12 16:38:00 PDT Ambulatory Vitals Height Weight 2017-Mar-23 11:25:00 PDT test 3	Ambulatory Vitals, Ht, Wt - Text Pharmacist Progress Note =	Signature Line
2017-Mar-23 10:32:00 PDT Pharmacist Interventions	Pharmacy Clinical Interventions - Tex	Test, Med
2017-Mar-23 09:34:00 PD 1 #2 clinical note - save/ sign 2017-Mar-23 09:30:00 PDT Testing Clinical Note 1	Pharmacist Progress Note Pharmacist Progress Note	
2017-Mar-23 08:07:26 PDT Provider Letter	Letter Provider	
	Pharmacist Progress Note	Result type: Pharmacist Progress Note
2017-Mar-23 07:58:00 PDT Pharmacist Note	Discourse list Discourse Market	Result date: Tuesday, 2017-September-12 10:04 PDT
2017-Mar-23 07:58:00 PDT Pharmacist Note 2017-Mar-23 07:39:00 PDT Pharmacist Note	Pharmacist Progress Note	Result status: In Progress
2017-Mar-23 07:58:00 PDT Pharmacist Note 2017-Mar-23 07:39:00 PDT Pharmacist Note 2017-Feb-28 11:10:00 PST Height Weight Rule	Height Weight Rule - Text	Result status: In Progress Result title: Markus Smith - Pharmacist Note



10 You can also access your saved note in Message Centre. (We will be learning about Message Centre in the next scenario)

The organizer bar will also update the Notification Bar to state that you have a saved note



12 You will finish and sign your progress note in a later activity for Message Centre.

## Key Learning Points

- After assessing your patient you will document in their chart using the pharmacy clinical note.
  - If you cannot complete your note at one time, you will use the save function and retrieve your note in Message Centre.



## PATIENT SCENARIO 4 – Message Center - Communicating in PowerChart

Duration	Learning Objectives			
35 minutes	At the end of this Scenario, you will be able to:			
	Manage your Message Centre Inbox			
	Review pending inbox or work items			
	Assign Proxy to colleague(s) when away			
	Complete inbox and/or work items			
	Create messages			
	Create and complete reminders			

## **SCENARIO**

You are leaving on holidays tomorrow and will need to complete the following 4 activities in Message Center before the end of your day.

- 1. Create a New Reminder for the end of day today
- 2. Open saved clinical pharmacist note to be completed (from previous activity for clinical documentation)
- 3. Create a handover note and send to the Pharmacy Pool in Message Centre
- 4. Assign Proxy to a colleague to manage your inbox while away for 2 weeks



# **Inbox Summary**

The Inbox Summary provides a quick view of all items in your inbox

PowerChart Organizer for Test, Med											0-0-0	
Task Edit View Patient Chart L	inks Notifications	s Inbox Help										
🕴 PPM 🚨 Multi-Patient Task List 🛔 Patie	nt List Perioperativ	e Tracking 🔢 Cli	inical Worklist Treck	ing Shell 🙀 Dis	charge Dashboard 🔚	Message Cent	re 👫 MyExperience 🕇	LearningLIVE	11 1 Q. P.	ACS 🖕 👯 Sma	id:0 Mig:0 Rer	min.: 0   🗸
🗱 Suspend 📲 Exit 🖨 Message Sender	AdHoc IIII Mer	dication Administ	ration 🔒 PM Conve	rsation + 🛁 Co	mmunicate + 📺 Pat	ient Education	+ Add + M Medicat	ion Manager 📚 🕻	harge/Credit Entry	Discern Report	ting Portal	
										🏙 Recent 🔹	Name	· Q
Message Centre										Full screen	Polist 20 mini	utes ago
Inbox Summary R	Results X											
Inbox Proxies Pools	Communica	te - Bic Onin 1	SI Message Journal	Y Forward Only	E. Select Patient	III) Salart All 18	Result Journal					
	Abnormal	Assigned	Create Da.	Details	Encounter Type	From	Notification C-	Originator Na	Outstanding O	Patient Name	Result Status	Re
Display: Last 90 Days -									y			
<ul> <li>Inbox Items (0)</li> </ul>												
Results												
Documents												
- Work Items (0)												
Saved Documents												
Reminders												
Notifications												
Sent Items												
Trash Natife Descipto												
Houry Recepts												
	191											

Messages can be viewed according to their sources, are organized by tabs:

- 1. Inbox Personal Inbox
- 2. Proxies: Inboxes where proxy has been given to you
- 3. Pool Inboxes

The Inbox Summary allows you to view all notifications from each tab.

Numbers next to each category or folder in the category indicate the number of unread and total notifications in that category or folder. If the folder is not shown, no notifications are present.

- Inbox Items: Includes such items as Documents, Results, Messages, and Orders.
- Work Items: Includes Reminders and Saved Documents.
- Notifications: Includes notification receipts for messaging, as well as the Trash and Sent Items folders.



## Activity 4.1 – Creating a Reminder Message

Estimated Completion Time: 10 min

As you will be leaving on holidays for 3 weeks, you want to set a reminder to yourself in Cerner for TO-DO tasks before the end of your day.

Click Message Centre icon Message Centre from the toolbar

2

1

In the **Messages** Tab, select **Reminder** from the **Communicate** drop down menu.

Message Centre	
Inbox Summary 7	Messages ×
Inbox Proxies Pools	📴 Communicate 🗸 👕 Open   🛱 Reply 🍘 Reply All 🚔 Forward 🦉 De
Displays 1 + 00 D	Message iant Name From Subject
Display: Last 90 Days -	Reminder SALLYSISE Test, Amb1, MD RE: General M
Inbox Items (1)	Consult
Results	

### New Reminder / Task screen will appear

New Reminder/Task	
Task Edit	
📍 High 🐧 Notify 💥 Message Journal	
Patient: Show in: Reci	pient's Inbox v
To:	🛗 🔲 Include me
CC: M Provider: Test User,	PharmNet - Pharmacist 🗙 🕅 🗂 To consumer
Subject: Reminder Message	▼ Save to Chart As: Reminders ▼
Attachments	
Browse Documents Other Attachments	
M	
	▫ਾਙੑਙੑਙੑਙ
	A
	E
	<b>v</b>
Actions	
Due for Labs	Show up: 1 minute - 2017-Sep-14 - 1325
Due for Exam See Note	Due on:
Confirm Follow-up	
Call Patient See Note	Send Cancel



- 3
- 1. In the **New Reminder/Task** window, fill out the following details:
- 2. In the To: field, enter your name (Last name, First name) and click the binoculars icon to search for your name (tick the *Include me* tick box to autofill your information)

Note: in Cerner you can find your username by looking at the top left corner

🕝 Puł	olishe	d Des	ktop – 1	Frain1	- Citrix	x Receiver		
P Pov	werCha	rt Orgar	hizer fo <mark>r</mark> T	estMM, P	harmaci	ist-PharmNet5, I	RPh	
Task	Edit	View	Patient	Chart	Links	Notifications	Inbox	Help
PPM	🏭 Clir	nical Wo	orklist 🖃	Message	: Centre	🏭 Pharmacy C	are Organ	nizer 👫

- 3. In the Subject: field, enter the title of your reminder Tasks to Do by the end of TODAY
- 4. In the body of your message: Type a list of items you need to accomplish by the end of the day.
  - a. Set Proxy to a colleague, (Refer to classroom instructions)
  - b. Send message to Pharmacy Pool regarding absence
  - c. Send a message regarding our patient requiring follow-up to Pharmacy Pool inbox
- 5. Set the **Show up:** time to 1 minute from now.
- 6. Click the Send button.

💿 New Rem	ninder/Task				
Task Edit	it				
! High 🐧	Notify 💹 Message Journal				
Patient:		Show in: Recipient's Inbox 👻			
то: Т	FestMM, Pharmacist-PharmNet5, RPh 🗙				🚮 🔍 Include me
		Provider:		To consumer	
Subject	Reminder Message		<b>•</b> □ •••	unter Charter Ann Berninders	
Attac	ante		34v	Setu Chart As.	
Brow	wse Documents Other Attachments				
Message			<b>— • • • • •</b>		
Arial	- 12 - 🧐 🔍 (		≣ ≛ № ₩		
				7	Â
Task to	do				
Task to 1. Set Pr	do roxy to colleague				
Task to 1. Set Pr 2. Send	do roxy to colleague message to Pharmacy Pool rega	ding absence			
Task to 1. Set Pr 2. Send 3. Send	do roxy to colleague message to Pharmacy Pool rega any messages regarding patients	ding absence requiring follow-up to Pharmacy Poo	ol Inbox		
Task to 1. Set Pr 2. Send 3. Send	do roxy to colleague message to Pharmacy Pool regai any messages regarding patients	ding absence requiring follow-up to Pharmacy Po	el Inbox		
Task to 1. Set Pr 2. Send 3. Send	do roxy to colleague message to Pharmacy Pool rega any messages regarding patients	ding absence requiring follow-up to Pharmacy Po	ol Inbox		
Task to 1. Set Pr 2. Send 3. Send	do roxy to colleague message to Pharmacy Pool rega any messages regarding patients	ding absence requiring follow-up to Pharmacy Po	ol Inbox		E
Task to 1. Set Pr 2. Send 3. Send	do roxy to colleague message to Pharmacy Pool rega any messages regarding patients	ding absence requiring follow-up to Pharmacy Po	ıl Inbox		E
Task to ( 1. Set Pr 2. Send 3. Send	do roxy to colleague message to Pharmacy Pool rega any messages regarding patients	ding absence requiring follow-up to Pharmacy Po	il Inbox		E
Task to 1. Set Pr 2. Send 3. Send	do roxy to colleague message to Pharmacy Pool regal any messages regarding patients	ding absence : requiring follow-up to Pharmacy Po	ol Inbox		F
Task to 1. Set Pr 2. Send 3. Send	do roxy to colleague message to Pharmacy Pool rega any messages regarding patients	ding absence requiring follow-up to Pharmacy Po	ol Inbox		E
Task to 1. Set Pr 2. Send 3. Send	do roxy to colleague message to Pharmacy Pool rega any messages regarding patients	ding absence requiring follow-up to Pharmacy Po	i inbox		E
Task to 1. Set Pr 2. Send 3. Send	do roxy to colleague message to Pharmacy Pool rega any messages regarding patients	ding absence requiring follow-up to Pharmacy Po	ol Inbox		E
Task to 1. Set Pr 2. Send 3. Send	do roxy to colleague message to Pharmacy Pool regai any messages regarding patients	ding absence requiring follow-up to Pharmacy Po	ol Inbox		8
Task to 1. Set Pr 2. Send 3. Send	do roxy to colleague message to Pharmacy Pool rega any messages regarding patients	ding absence requiring follow-up to Pharmacy Po	ol Inbox		5
Task to 1. Set Pr 2. Send 3. Send	do roxy to colleague message to Pharmacy Pool rega any messages regarding patients	ding absence requiring follow-up to Pharmacy Po	ol Inbox	Show up: 1 minute V 15Jan2018	E • •
Task to 1. Set Pr 2. Send 3. Send Actions	do roxy to colleague message to Pharmacy Pool rega any messages regarding patients	ding absence requiring follow-up to Pharmacy Po	ol Inbox	Show up: 1 minute 15Jan-2018	E • •
Actions	do roxy to colleague message to Pharmacy Pool rega any messages regarding patients entry of the second second Rox Renewal Labs Appointment Form Ser Note	ding absence requiring follow-up to Pharmacy Po	ol Inbox	Show up: 1 minute v 15Jan-2018 Due on: v · ·	₽ • • • • • • • • • • • • • • • • • •
Actions Due for F Due for F Due for L Due for	do roxy to colleague message to Pharmacy Pool regai any messages regarding patients R: Renewal labs Appointment Exam See Note Follow-up	ding absence requiring follow-up to Pharmacy Po	ol Inbox	Show up: 1 minute v 15Jan-2018 Due on: v · ·	F 1031



### Click refresh

4

At the time set for **Show up:** notifications will appear in

- 1. Message Centre under Work Items
- 2. Notifications in the toolbar



- 1. Click on either notification to open Reminder list.
  - 2. Double-click on the previously created Reminder

ľ	Reminder	rs X	1								
1	Comn	nunicate	🗸 🚔 Open   🚑 Reply	Reply All 📲 Redirect	Reschedule 🖌 Complet	e 🏾 🍯 Message Journal	Select Patient	Select All			
	Assigned		Create Date 💎	Due Date	From	Patient Name	Priority	Provider	Show Up Date	Status	Subj
I	(		2017-Sep-14 13:42:47	PDT	Test User, PharmNet - Pha	r		Test User, Pha	2017-Sep-14	Pending	To d
ľ	-										

### 6

5

1. When reminder is no longer needed, mark reminder as **Complete** 

Reminders × Reminders: ×		
🚓 Reply 🙈 Reply All 🐮 Redirect 🏢 Reschedu z 🗸 Complete 冯 Print 😭 🐥 🍓 Mark Unread	Inbox View Su	immary View
From: Test User, PharmNet - Pharmacist, RPh	Show up date	: 2017-Sep-14 14:09:00 PDT
Sent: 2017-Sen-14 14:14:28 PDT	Action:	
Subject: Tasks to do by the end of the day	Due:	
To: Test User,PharmNet - Pharmacist, RPh	Provider:	Test User, PharmNet - Pharmacist, RPh
Cc:	Document:	Reminders
Tasks To Do         1. Set Proxy to colleague, Jane Walker         2. Send message to Pharmacy Pool regarding absence         3. Send any messages regarding patients requiring follow-up to Pharmacy P	ool inbox	
		Save Save to Chart 🗟 Save to Chart/Complete

2. Reminder will be removed from the Reminders tab/list



# Activity 4.2 – Setting up a Proxy to your Message Centre

### Estimated Completion Time: 10 min

As you will be leaving on holidays for 3 weeks, you want to assign a Proxy to your colleague while you are away.



From the Message Centre inbox,, click the Proxies tab

### Click Manage

Message Centre	
Inbox Summary	<del>Ţ</del>
Inbox Proxies Pools	
Proxy: Manage	
Display:	

The Setup for LastName, First Name screen will appear

### 2

### Click Add

onfiguration Behavior Prefs Manage Pools Manage Proxy FYI Result Subscriptions					
raxies Given by Me	Proxies Taken fro				
Dave Degin Date End Date	New User Br				

3

### In the Manage Proxy tab, click Add button

Seturn for Test, Med	
configuration Behavior Prefs Manage Pole Manage Proxy VI Result Subscriptions	
Given	
Proxies Given by Me	)r(
User Begin Date End Date	Ν
Details Add Remove	-



4 Under the New Given Proxy header, search for colleague's name (check with class facilitator or send to your neighbor)

Click Magnifying glass to bring up provider Selection search box

User A Jest «Multiple Matches» X Additional Users	valable Rems Inbox Rems - Messages	Granted Items
Begin Date 2017-5ep-15 2 0046 2 End Date 2017-Oct-15 2 2 2017 0046 2 2017-Oct-15 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Order Second Secon	nt All >>> Recide Recide Al
		Accept 8 Next Cancel
		OK Cancel



6

Click the appropriate colleague taking over your inbox and click OK.

🗟 Provider Selection				
Last name:	First name:	Suffix:		Carat
test	pharm		-	search
Title:	Alias:	Alias type:	Ne	w Provider
<b>•</b>			-	Preview
Lisemame:				
				Clear
Limit by group		No data filtering		
Limit by organization		No data filtering		
Limit by position		No data filtering		
Limit by relationship		No data filtering		
View physicians only				
Name	Aliases	Username	Services	Positior 🔺
TestCST, Pharmacist-Pha	ar MSP #=208	PSCCSTTEST.C		PharmN
TestCST, Pharmacist-Pha	ar MSP #=223	ONCSTTEST.PH1		PharmN
TestCST, Pharmacist-Pha	ar MSP #=238	MMCSTTEST.RX1		PharmN
TestUST, Pharmacist-Pha	ar MSP #=134	URDUST TEST.P		PharmN
TestCST, Pharmacist-Pha	ar MSP #=203	PSULSTIEST.L.		Pharmis
TestCCT Desmacist Phy	MSP #-220	MMCSTTEST PH2		PharmA =
TestCST Pharmacist.Ph:	MSP #=235	OBDOSTTEST P		Pharmh
TestCST Pharmacist-Pha	MSP #=100	PSCCSTTEST		PharmA
TestCST Pharmacist-Pha	MSP #-275	ONCSTTEST PH3		PharmA
TestCST Pharmacist Phy	MSP #=240	MMCSTTEST PV2		Pharmh
TestCST Pharmaoist.Ph	MSP #=240	OBDOSTTEST P		Pharmh
TestCST, Fidilidus(Fid	MSP #=130	PSCCSTTEST C		Pharmh
TestCST Pharmacist Pha	MSP #=211	INCSTEST PUA		Pharmh +
In date of the final independent of the final interview of the f	a   Hor #-220	Jones Treat and		4
More matches exist		<ul> <li>Image: A state of the state of</li></ul>		
			ок	Cancel

Your colleague will appear in the User field.

New Given Proxy	
User	
TestCST, Pharmacist-PharmNet5 MM, RPh	🔍 🧶 🔊
Additional Osers	



7 Set the dates to grant for duration to grant Proxy to your colleague. *Choose todays date until tomorrow.* 

8 To the right of the Available Items box, click the Grant All button and click OK In practice, you may choose to limit access. You can choose to grant items individually.

New Greet Prory 1		
Oter	Available berns	Granted Items
TestCST, Pharmacist-PharmNetS MM, RPh	🔌 👃 🔀 Inbox berns	
Addisonal Users		Gent All ->> Gent ->-
Res Res	Reminders Saved Documents	- Revolut
2012-Cent-15	Notifications	* <- Revolte All
End Date	- Notify Receipts	
2017-Oct-15	Set hows	
		Accept & Hent
		OK Cancel

9

Settings will be saved and your colleague can now view your inbox.





## Activity 4.3 – Adding self to Pharmacy Pool and sending a Message to the Pharmacy Pool

Estimated Completion Time: 5 min

As you will be leaving on holidays for 3 weeks and you want to send a message to the Pharmacy pool.

1

From the Message Centre inbox, click the Pools tab



2

In the **Manage Pools** tab, select the appropriate pool for your facility.

LGH Pharmacy Pool and click the Opt In button and click OK.

Setup for Test, Med		
Configuration Behavior Prefs Manage Pools Manage Proxy FVI Result Subscriptions		
Available Pools	Member Pools	
10H Ansthesis Peol     10H Ansthesis Peol     10H Resht Piger Koncel Root     10H ReshtPiger Root     10H ReshtPiger Root     10H ReshtPiger Root     10H	CGH Pharmacy Peel	
	Add Details Remove	
		OK Cancel



### 3

### LGH Pharmacy Pool will move over to the Member Pools column Click OK

Member Pools LGH Pharmacy Pool Remove		
	ОК	Cancel

#### 4

Commit Progress screen will appear to confirm.

Click the <b>OK</b> button	
Commit Progress	×
Settings saved successfully.	
ОК	

5

You will now have access to the LGH Pharmacy Pool. Click the drop-down menu for Pool: and select LGH Pharmacy Pool



6

Click the Communicate button and select Message





### To the right of the To: field, click the binoculars icon

🔍 New M	essage	
Task E	dit	
🕴 High	🕻 Notify 🔚 Message Journal 💁 Portal Options	쒭 Laund
Patient:	Caller:	Caller #:
To:		🕅 🗆 Inclu
CC:	Provider:	🛗 🗌 To consumer 🗌 Disable further repl
Subject:	General Message 👻	Save to Chart As: Phone Message/Call
Attachr	ments	

8

7

### a) Select the Pool radio button

- b) In the Type a name to select from list: field, start typing LGH Pharm
- c) Select the name below
- d) Click the Add button

Click the OK button

Address Book	
Internal	
Type a name or select fror <b>b</b>	Show names from
LGH Phar	Global Address Book 🗸
Personnel Pool Distribution List	
Right click to add/remove an a personal address book	Send to
Name	Name
LGH Pharmacy Pool	LGH Pharmacy Pool
	с
	Add
	d
More	
	OK Cancel

Screen returns to the New Message window



9

In the body of the message beside General Message, type **Leaving on holidays for 2 weeks** and click the **Send** button.





# Activity 4.4 – Retrieving Saved Pharmacy Progress Note

### Estimated Completion Time: 10 min

It is time to retrieve the progress note you created above in Activity 3.1 to complete it.

### **Access from Message Centre**

- 1. Click on Message Centre from the toolbar.
- 2. In the Work Items box, click on Saved Documents and document



Double click on document to open.
 Document will appear as a \*Preliminary Report\* as it is only saved.
 Click 'Modify' button to continue note.

Forward Only	Print 🔮 👼 Mark Unread Inbox TEST-J., DOB:1979-Mar-22 Age:38 years	View Summary View	Code Status:	Process: Disease:	Location:LGH 4E; 404; 02
lergies: No Knov	n Allergies Genderstemale	PHN:9878188633	Dosing Wt:45 kg	Isolation:	Attending:Plisvca, Rocco, Mi
-		* Preli	minary Report *		
This is a test note f	or class.				
ilonature Line					
est, Med					
tesuit type: tesuit date: tesuit status: tesuit title: reformed by: incounter info:	Pharmacist Progress Note Tuesday, 2017-September-12 16: In Progress Markus Smith - Pharmacist Note Test, Med on Tuesday, 2017-Sept 7000000007153, LGH Lions Gate,	04 PDT ember-12 16:20 PDT Inpatient, 2017-Jul-05 -			
ction Pane					
	and the second	-			
Sign	Reason:				

- 4. **Modify Document** screen will appear. Click in the body of the document and continue typing your progress note.
- 5. Select Sign/Submit when done.



P Modify Document: CSTPRODMED, TEST-JANELLE - 700002107	- • •
Tahoma     ▼     Size ▼     Image: Size ▼     Im	
This is a test progress note.	
Continuing the progress note so that it is now complete. Select Sign/Submit when done.	
Note Details: Pharmacist Progress Note, Test, Med, 2017-Sep-19 16:06 PDT, In Progress, Pharmacist 1 Sign/Submit Save & Clo	ose Cancel

6. Sign/Submit Note box will appear.

Ensure Type is set to **Pharmacist Progress Note** and **Title** is unique to the pharmacist note

* <b>Type:</b> Pharmacist Progress Note	Note Type List Filter:	~			
Author: Test, Med	Title: Markus Smith's Consult	<b>]</b>	* <b>Date:</b> 2017-Sep-19	1606 p	TDT
Forward Options        Create provider le     Favorites Recent Relationships	R Provider Name				
Contacts	Recipients	Comme	nt	Sign	Review/CC
				Sign	Cancel

 Note will now update to a \*Final Report\* status.

STPRODMED, TEST-JANEL	LE DOB:1979-Mar-22 Age:38 years Gender:Female	Enc/7000002107 Enc/7000000007153 PHN/9878188633	Code Status: Dosing Wb48 kg	Process: Disease: Isolation:	Location:LGH 4E: 404: 02 Enc Typedapatient Attending:Pisyca, Rocco, MD
			* Final Report *		
This is a test progress note.					
Continuing the progress note so that Select Sign/Submit when done.	it is now complete.				
Signature Line					
Electronically Sizeed on 10-Sec3	117 16-14	G			
Crectoricary signed on 19-Sep-2	AF 10.14		NOTE Progress	notes with a	
Test, Med					
Result type: Pharmacist Pro	gress Note		FINAL REPORT st	tatus will	
Result date: Tuesday, 2017 Result status: Auth (Verified)	September 19 10:00 PDT		now he seen hy	any other	
Performed by: Test, Med on ' Varified by: Test, Med on '	Luesday, 2017-September-19 16:06 PDT		non be seen by	any other	
Encounter info: 70000000715	3, LGH Lions Gate, Inpatient, 2017-Jul-05 -		user.		
		L			
Action Pane					
l) Sign Rea	ere [4				
Additional Te: Forward Action:	5)	M			
omments: Limit 2551					
					Net Of & China Of

8. Saved document is removed from the Saved Documents folder in Message Centre.



## **Key Learning Points**

- Use your Message Centre Inbox to review pending inbox or work items
- Assign Proxy to colleague(s) when away
- Complete inbox and/or work items
- Create messages to send to colleagues or pools
- Create and complete reminders



# **PATIENT SCENARIO 5– Reports**

Duration	Learning Objectives
20 minutes	At the end of this Scenario, you will be able to:
	Use Discern Reporting Portal to find any reports needed.
	Understand the classifications of reports for
	Drug Inquiry Report

## SCENARIO

In your Pharmacist role, you have been asked to generate a report as there has been a recall for all Ramipril products. You want to access a report that lists all patients in your facility who are or were on Ramipril within the last 60 days.



# Activity 5.1 – Accessing reports for Recall on a specific medication

#### Estimated Completion Time: 10 min

Click Discern Reporting Portal Scern Reporting Portal from the Action Toolbar

This will take a few minutes to load

### 2

1

### Click Drug Inquiry Report

Reporting Portal				
Reporting Portal				
⊖ Cerner			We	elcome: Test, Med   Settings   Help
Reporting Portal		Q Se	arch for Report Title	
Filters	All Reports (22) My Favorites (0)			1 2 > Last >>  O
	Report Name	<ul> <li>Categories</li> </ul>	+ Source	🗢 Favorite 🗢 🔶
Source	ABC Item Purchases	Pharmacy Supply Chain – Pharmacist	Public	
Categories	ADTS-01 Summary Adm./Disch./Transf. Rpt	Pharmacist	Public	
	Antibiotic Use Report	Pharmacist	Public	$\Delta$
	Buyer Activity	Pharmacy Supply Chain – Pharmacist	Public	*
	Daily Receiving Activity Report	Pharmacy Supply Chain – Pharmacist	Public	\$
	Daily Summary	Pharmacy Supply Chain – Pharmacist	Public	
	Drug Inquiry Report	Pharmacist	Public	$\overleftrightarrow$
	Fast Moving Non Stock	Pharmacy Supply Chain – Pharmacist	Public	$\overleftrightarrow$

#### 3

4

### Click Run Report

Drug Inquiry Report	Pharmacist		Public	\$
Description: Drug Inquiry Report	Suggested Report User:	Reporting Application: CCL	[	Run Report
	Suggested Report Frequency:	Alternate Name: RX_RPT_DI:DBA	-	Run Report in Background
	Support Reference Number: 5c6827b9-1e31-49cd-8d5e-f5fe3c4430b9			View Previous Run

## Discern Prompt screen, fill out the following boxes

- a) Search by Drug or Therapeutic Class: Drug
- b) Enter the search string (\* for all): Ramipril
- c) Enter the facility (\* for all): select checkmark box for LGH LIONS GATE HOSPITAL
- d) Enter the START date range (mmddyyyy hhmm) FROM: 60 days ago
- e) Select status(es) for report: Select checkmark box for ALL

### Click Exe

5

6

ί	Execute.	

Discern Prompt: RX_RPT_DI:DBA	
Enter MINE/CRT/printer/file:	Mine 🗸 🖻 📩
Search by Drug or Therapeutic Class:	Drug -
Enter the search string (* for all):	RAMIPRIL
Enter the facility (* for all):	LGH LAB NORTHMOUNT
Enter the START date range (mmddyyyy hhmm) FROM :	2017-Jul-19 🚔 💌 16:46 🚔
(mmddyyyy hhmm) TO:	2017-Sep-19 🚔 💌 16:46 🚔
Select status(s) for report:	Active/Suspend Discontinue/Completed
٠ ( III	•
Return to prompts on close of output	Cancel

## Drug Inquiry Report will appear.

Reporting Portal								
Reporting Portal	Drug Inquiry Report 🗙							
🛃 🍊 🖪 🗛	3 🔒 🕒 🗢 🍣 🏄	🔍 🔍 100% 🔹 📲						
RX_RPT_DI		DRU	G INQU	IRY REPORT		Run Date: 19/0	9/17 16:47	
Formulary It	tem: ALL				Facility: LGH L	ions Gate	Pag	e: 1
Date Range Drug Status.	: 19/07/17 16: : ALL	46 PDT 19/09/17 16	:46 PD	г	Location: LGH 2	East		
Room-Bed/Pat	tient: Medi	cation			Status	Start Dt/Tm	Stop Dt/Tm	Order#
230-01	CSTPRODE	PHYS, DEMOONE	FIN#	700000007	674			
	ramipril 1.25 mg ca	ap			Discontinued	09/08/17 11:46	06/09/17 18:01	
	ramipril	1.25 mg / 1 cap	PO	PRN BID				
	ramipril 1.25 mg ca	ap			Discontinued	09/08/17 11:52	06/09/17 18:01	
	ramipril	1.25 mg / 1 cap	PO	PRN BID				
210-02	CSTDEMO,	CARDIACDONTUSE	FIN#	7000000009	292			
	ramipril 5 mg cap				Active	23/08/17 08:04		
1	ramipril	5 mg / 1 cap	PO	BID				



## PATIENT SCENARIO 5- Reports





## **Reporting Portal Icons**

Reporting Portal	Drug Inquiry Report 🗙	
😖 🍯 R. 🗛	8 8 8 0 0 0	👍 🔍 🔍 100% 🔹 🐐

	Save Icon
3	Print Icon
	Go To Page: Icon
۵	Previous Page
	Next Page
2	Refresh
٩	Zoom In
æ,	Zoom Out
*	Close out of Reporting Portal



# Pharmacist Supervisor: PATIENT SCENARIO 6 – Additional Reports

Duration	Learning Objectives
10 minutes	At the end of this Scenario, you will be able to:
	Run reports from Reporting Portal for Supervisor level related business (you will need to log in with a Supervisor training account)
	Understand the classifications of reports for
	Dispense category workload by location



## Activity 6.1 - Accessing reports for Dispense Category Workload by location

### **SCENARIO**

In a Pharmacy Supervisor position, you may be asked to pull reports from Cerner for various types of activities for your facility.

Please see the Pharmacy Reports QRG for a comprehensive list of available reports as a Pharmacy Supervisor.

1

Click Discern Reporting Portal Click Discern Reporting Portal from the Action Toolbar

2

Scroll to search for the Dispense Category Workload by Location

Reporting Portal					- • •
Reporting Portal					
😂 Cerner			Welcome: TestUser	r, PharmacistSupervisor-PharmNet,	RPh   Settings   Help
Reporting Portal			Q dispen		Х
Filters	All Reports (8)	My Favorites (0)			1  0
	Report Name		Categories		♦ Favorite ♦
Source	Dispense Category V	Norkload by Location	Pharmacy Supervisor	Public	*
Categories	Dose Workload by D Category/Location	)ispense	Pharmacy Supervisor	Public	
Recent Reports	Dose Workload by D	)ispense Category/User	Pharmacy Supervisor	Public	$\overline{\lambda}$
Antibiotic Use Report Dose Workload by Dispense Category/Loc	Dose Workload Rep Category/User	ort by Dispense	Pharmacy Supervisor	Public	
Discharge Medication Orders Report Plan B Patient Medication Order Extract	Location Dispense C	ategory Analysis	Pharmacy Supply Chain – Pharmacy Supervisor	Public	×.

Click Run Report

3

4



### **Discern Prompt** screen, fill out the following boxes

You will run this report for the last month.

- a) Enter the starting date (mmddyyyy hhmm): Enter the first day of the month
- b) Enter the ending date (mmddyyyy hhmm): Enter the last day of the month
- c) Enter the facility (\* for all): select checkmark box for LGH LIONS GATE HOSPITAL
- d) Click Execute

Discern Prompt: RX_RPT_DISPENSE_	CAT:DBA									
Enter MINE/CRT/printer/file:	Mine 🗸 🖻									
Enter the starting date (mmddyyyy hhmm):	01-nov-2017 🔿 🔻 08:00 🚔									
Enter the ending date (mmddyyyy hhmm) :	30-nov-2017 🛫 💌 23:59									
Enter the facility (* for all):										
Run for Detail or Summary:	▼]									
Choose the following dispense categories:										
Execute Cancel										
Ready										





Dispense Category Workload by Location report will appear.

5

Reporting Portal																									
Reporting Portal Dispense Cater	ory Workload by	Location	×																						
3 3 R A 3 2 6 0	• 2 4 *	15	0% •	4																					
																							_		
RX_RPI_DISPENSE	_CAT		00.00			NEW/	(17 0	PIED V	DERS	5 BI I	DISPLA	ISE C	TEGOR	(1/100	ATIO	A (SUP	MARI )	1		10/10	10017	16.5	Page		
Date Range	: 11/0	/1/1/	08:00	PST		11/30/	/17 2:	3:59 )	PST									Run Da	tte: J	12/12)	/201/	16:50	5		
Total Orders:	GH Lion	Gate			_																				
1	000/	J 0100	0200	0300	0400	0500	0600	0700	0800	0900	1000	1100	1200	1300	1400	1500	1600	1700	1800	1900	2000	2100	2200	2300	Total
1	005	9 0159	0259	0359	0459	0559	0659	0759	0859	0959	1059	1159	1259	1359	1459	1559	1659	1759	1859	1959	2059	2159	2259	2359	
AUD							2	1	41	135	102	87	38	53	85	68	28	6	12	13	2	2	3	3	681
AUD-N							1	1	5	12	17	16	10	16	17	7	8	3		4					117
BULK							4	1	12	36	56	42	18	31	38	22	15	2	3			1			281
COMPOUND												1		5	2										8
INJ CONTINUOUS									21	75	82	61	23	73	66	83	20	3	2	1			1		511
INJ INTERMITTER	лт								8	22	51	39	21	27	44	25	6	1		1		2	1	1	249
RUD										1	2			1	4	- 4									12
TPN												1				3									4
υD								3	18	51	49	46	23	33	40	24	10			2	1		1		301
UD-FLEX FULL CF	IARGE									7	17	4	1	3	15	8	3		1	1					60
UD-FLEX INJECT/	ABLE													2											2
UD-FULL CHARGE						1	2	1	58	200	173	133	66	154	163	124	44	3	5	7	1	1	7		1143



# 🔹 End Book Two

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