SELF-GUIDED PRACTICE WORKBOOK [N27] CST Transformational Learning

WORKBOOK TITLE: Provider: Oncology (Workbook #1)





Last update: February 13, 2018 (v2)

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SELF-GUIDED PRACTICE WORKBOOK

Duration	3 hours
Before getting started	 Sign the attendance roster (this will ensure you get paid to attend the session) Put your cell phones on silent mode
Session Expectations	 This is a self-paced learning session A 15 min break time will be provided. You can take this break at any time during the session The workbook provides a compilation of different scenarios that are applicable to your work setting Work through different learning activities at your own pace
Key Learning Review	 At the end of the session, you will be required to complete a Key Learning Review This will involve completion of some specific activities that you have had an opportunity to practice through the scenarios.

Using Train Domain

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

Please note:

- Scenarios and their activities demonstrate the CIS functionality not the actual workflow
- 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 following the steps, immediately raise your hand for assistance to use classroom time efficiently
- Ask for assistance whenever needed



PATIENT SCENARIO 1- Navigating the System

Learning Objectives At the end of this Scenario, you will be able to: Navigate Ambulatory Organizer Access a patient's chart Navigate through the Provider View Use the Oncology Tab effectively

SCENARIO

When you arrive to work and login to the system you land on Message Centre (you will remember this functionality from the e-learning module), you go through your messages and then look at the Ambulatory Organizer to see what you have booked for the day.

The Ambulatory Organizer view provides a simple but comprehensive display of scheduled appointments for ambulatory providers. It provides a snapshot of the current day's appointments, including appointment times and details, patient information and status, outstanding items to be completed at each visit, reminders and appointment gaps. Ambulatory Organizer provides ambulatory physicians and other healthcare professionals with a framework to organize workflows at the day, week, or month level; to manage items that need to be completed with each visit; and to view previous visit items that were not completed.

1



Activity 1.1-Working with Appointments in Ambulatory Organizer

To access the Ambulatory Organizer from Message Centre click on **Ambulatory Organizer** from the toolbar available at the top of the screen.

P Po	werCha	rt Orga	nizer for Te	estON, On	cologi	stHematologist-f	Physician, MD			
Task	Edit	View	Patient	Chart	Links	Notifications	Navigation	Help		
<u>i</u> n	lessage	Centre	Patien	t Overview	v 🔛 A	Ambulatory Orga	nizer 👫 MyE	xperience	🛓 Patient List 🙄 🔯 Patient Health Education Materials 🔞 Policies and Guidelines	10

2 The **Ambulatory Organizer** defaults to your personal resource. You can see this from looking at **Patients for**: _____(your name should appear after the colon). To look at another resource:

- 1. Select the down arrow beside your name
- 2. Check the resource you are wanting to see if it appears
- 3. Alternatively search for the resource by name
- 4. Click Apply in order to see the corresponding resources information

Ambulatory Organizer		
Day View (1) Calendar	Open Ite	ems (1)
December 4, 2017	•	Patients for: Smiljanic, Sasha MD
Time	Duration	
9:00 AM	1 hr	Adedi, Nasim MD Avanessian, Ardashes MD Rains, Runget MD
		Chatterson, Kelly MD
		LGH Chemo Chair 02 LGH Chemo Chair 03
		LGH Chemo Chair 04 LGH Chemo Chair 05
		LGH Chemo Chairs Plisvcw, Tyler, MD
		Smiljanic, Sasha MD
		Apply
		Appry 4



3 The Ambulatory Organizer provides a display of scheduled appointments for ambulatory providers, including:

- 1. Appointment times and details
- 2. Patient information and status
- 3. Outstanding items to be completed for each visit
- 4. Patient care related reminders

owerChart Organizer for TestO	N. OncologistHematologist-Physics	an, ND				0 0 0
k Edit View Patient Ch	hart Links Notifications Navig	pation Help				
Message Centre 🍴 Patient Ou	veniew Ambulatory Organizer	MyExperience 👌 Patient List 😳 🔞 Patient Health Education	Materials 😋 Policies and Guidelines 👘 📆 Exit	Communicate • 🖨 Discern Reporting Portal	Propert2 CareConnect @ PHSA PACS @ VCH and Ph	IC FACS @ MUSE @ FormFast WF
						Fecent - Name. •
sbulatory Organizer					[D] Full screen	Print 21 hours 10 minutes a
B B B R A 1995						
nbulatory Organizer						(=-
Day View (3) Calendar	Com Nerry (3)					
Dar View (3) Calendar December 4, 2017	r Open Tierro (3)	essian, Ardaahes MD ; Bains, Punvet MD ; 👹 LGH Chemo Chairs ;	Smiljanic, Sasha MD +			
Dar View (3) Calendar December 4, 2017	r Open Tiens (3) Patients for: Avane Curation	ssian, Ardanhes MD ; Bains, Punnet MD ; 🖤 LGH Chemo Chains ; Patent	Smiljanic, Sashu MD +	30.00.00 (m of 12:38)	Mits.	6
Dar View (3) Calendar December 4, 2017 Time B:30 AM LGH Chan Olar 01	r Open Items (D) 3 Patients for: Avane Curation 2 hrs 50 mins	ssiar, Ardahes MD ; Bains, Runes MD ; 🖤 LGK Chemo Chairs ; Patent CSTIPRODONC, JANYHALDMACY 127 Yana, Malin	Smljanic, Sasha MD - Detasti Qoc Chemo Infusion	tatus (n of 12010) Confirmed LGA Chamo	Nda. Të	¢
Car View (3) Calendar December 4, 2017 Tree B30 AM CH Cheno Char 01 B30 AM CH Cheno Char 03	r Open Jierro (D) → Pabents for: Avane Duration 2 hrs 50 mins 2 hrs 50 mins	Star, Ardahes MD ; Bains, Punet MD ; III GR Chemo Dains ; Patent CSTPP000NC; JAVYHAJMACY 17 Yaan, Male CSTPP000NC; JUNETMARMACY 17 Yaan, Femle	Smiljanic, Sashu MD - Datato Onc Chemo Infusion Onc Chemo Infusion	Datas (and 12.36) Codimad Cikil Cheno Cikil Chemo	Notes Telescolor Telescolor	8

4

5

Day View is the first tab and it displays your appointments for the day:

- 1. Select a different date by using the calendar icon, then return to today's date.
- 2. Indicates your name and what facilities are included in your appointment list for the date.



You can also sort the appointment list by selecting one of the following column headings:

- Time
- Patient or
- Status

Day View (3) Calendar	Open Items (3)					
December 4, 2017	Patients for: Avanessian, Ard:	ishes MD ; Bains, Puneet MD ; II	🛙 LGH Chemo Chairs ; Smiljanic, Sasha	a MD ~		
Time	Duration	Futient	2	Details	Status (as of 12:38)	Notes

Note: Sorting with a single criterion removes facility headings and sorting chronologically by appointment time restores facility headings.



The colour status on the left side of the **Day View** and on the **Calendar View** assists you to understand the flow of the clinic.

	Light blue – a confirmed appointment
	Medium blue – checked appointment
	Green – patient seen by nurse, medical student or other custom status
	Orange – seen by a provider or a resident
1	Dark gray – appointment has been checked out

- 6 You can add a temporary comment to an appointment to share information between health care professionals.
 - 1. Click the \square icon to open the Comments box.
 - 2. Type the comment.
 - 3. Click Save.

Ambulatory Organizer					
Day View (3) Calendar	Open Items (3)				
4 December 4, 2017	Patients for: Avan	essian, Ardashes MD ; Bains, Puneet MD ; 🍿 LGH Chemo Chairs ;	Smiljanic, Sasha MD =	Comments	1
Time	Duration	Patient	Details	Patient using cane to Ambulate, needs help into the room.	Notes
8:00 AM LGH Chemo Chair 01	2 hrs 50 mins	CSTPRODONC, JAYPHARMACY 37 Years, Male	Onc Chemo Infusion		14
8:30 AM LGH Chemo Chair 03	2 hrs 50 mins	CSTPRODONC, JUHIPHARMACY 37 Years, Female	Onc Chemo Infusion	(57 / 255) Save Cancel	14
				Checked In	



The next tab is the Calendar View.

- Click the **Calendar** tab to display your schedule for a day or a week interval.
- Rescheduled, cancelled, hold, or no-show appointments are not displayed in the **Calendar View**.

mbulatory Org	anizer							
Day View (3)	Calendar	Open Items (2)	1					
Day Week	4 Decem	iber 4, 2017	Patients for	r: Abedi, Nasim MD ;	Avanessian, Ardasl	hes MD ; Bains, Puneet MD	; Chatterson, Kelly MD ; LGH Chemo Chair 01	; LGH Chemo Chair 02 ; Smiljanic, Sasha MD =
Abedi, Nasim	Avanessian,	Bains, Punee	Chatterson,	LGH Chemo	LGH Chemo	Smiljanic, Sa		
	Sun 12/3		Mon	12/4		Tue 12/5	Wed 12/6	Thu 12/7
5 am								
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0 am				Powled In				
1 am								
11 am								



8 The **Open Items View** will display a list of appointments with any uncompleted actions for the patient, for example a missing consult note.

- 1. Click on the **Open Items** tab, in brackets you can see how many items are outstanding.
- 2. If you have more than one resource open, the dark grey shading is the resource which is reflected in the view.
- 3. List displays next seven days from the date displayed. To display tasks for more than seven days, click **View 7 More Days.** Observe how with each click the date will adjust and display a time frame that is 7 days longer.
- 4. Under the **Outstanding Actions** columns you are reminded the note for the visit has not been started.

Ambulatory Organizer				(C) Full screen
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Ambulatory Organizer				
Day View Calenda	Dpen Items (2)			
Patients for: Bains, Puneet MD ;	Smiljanic, Sasha MD +			
Bains, Punee (1) Smilt	anic, Sa (1)			
From: November 27, 2017 View	7 More Days			
Apportment.	Patant	Details	Robert	Outstanding Actions
A More Than 2 Days Ago (1)	1			
01 December, 2017 3:00 PM	CSTRENALDEMO, PATIENTFOUR. 53 Years, Female	Onc Med Onc F/Up	Reason for Visit : follow up Chief Complaint: fatigue and shortness of breath	Note Not Started ✓ Task List Complete

To complete the action, click the reminder.

Note: Creating Notes will be covered later in documentation.

9 Place the cursor over the patient's name to display patient demographic information. This action is called 'Hover to discover'.

Ambulatory Organizer					
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Ambulatory Organizer					
Day View Calend	Open Items (3)				
Patients for: Bains, Puneet MD	Smiljanic, Sasha MD -				
Bains, Punee (1) Smil	ianic, Sa (2)				
From: November 30, 2017 View	7 More Days				
Appointment	Patient	Details		Notes	Outstanding Actions
4 More Than 2 Days Ago (2	0				
01 December, 2017 3:00 PM	CSTRENALDEMO, PATIENTFOI 53 Years, Female	Name: CSTRENALDEMO, PATIENTE	OUR TO F/Up	Reason for Visit : follow up Chief Complaint: fatigue and shortness of breath	Note Not Started Task List Not Complete
04 December, 2017 9:00 AM	PITSIXTEENMILLER, MARC 63 Years, Male	MRN : 700007287 FIN : 700000015925 DOB : 14/11/1964	ic F/Up	Reason for Visit : Follow-Up Visit Chief Complaint: SOB, fatigue	Note Not Started Task List Not Complete
		gender : female Home : (778)985-6251			

Note: Hover to discover' is a standard technique across the Clinical Information System (CIS) – it displays more details or useful tips without leaving the current view.



Key Learning Points

- Ambulatory Organizer allows you to see your scheduled appointments and offers three different displays to help you prioritize your day:
- Day View tab lists your appointments scheduled for a selected date and facility and informs about appointment status and details
- Calendar tab displays your appointments for a selected day or week

Open Items tab display unfinished tasks for a single provider.



Activity 1.2- Accessing a Patient's Chart

For the Following activities, open the first patient provided to you in the classroom, last name: Oncology-PhyA, [*enter first name provided on card*].



You can open a patient chart from any view in Ambulatory Organizer.

- 1. Click on the patient's name. When accessing the chart for the first time you must assign a relationship (similar to current day signature record in the patient chart).
- 2. Select your relationship
- 3. Click OK

Assign a Relationship For Patient: PITSIXTEEN. 1.ER, MARC	
Relationships: Consulting Provider Covering Provider Education Quality / Utilization Review Referring Provider Research Triage Provider	
	3 OK Cancel

Appointment	Patient	
⊿ More Than 2 Days Ago (1)		Appointment View
4 More Than 2 Days Ago (1) 01 December, 2017 3:00 PM	CSTRENALDEP 53 Yéars, Femal	Appointment View Appointment History View Provider View Oncology Results Review Orders Medication List Documentation Allergies Diagnoses and Problems Histories MaR Summary MAR Form Browser Patient Information Interactive View and I&O Lines/Tubes/Drains Summary
		Growth Chart Immunizations
		Clinical Research
		CareConnect

Note: You can also Right-Click the patient's name and select the chart section you want to view from the drop-down menu and then assign a relationship.

2 The patient's chart displays. If the patient already has encounters in the CIS, you will have access to patient information such as allergies, histories, past visits and documents. However, some important and relevant information might still be on paper. Be sure to review the paper chart as well.

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Provider View		ABLERISSINS	1000								
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3 At the top of every screen of the patient's record, there is a **Banner Bar** allowing for proper patient identification. It displays demographic data, alerts, information about patient's location, and current encounter. (Encounters were covered in your E-Learning Module).



? Take a look at your current screen,

Note the **Refresh** icon *icon* and the timer showing how long ago the information on your screen has been updated.

? How long ago the information display was refreshed? _____

Click Refresh frequently to ensure that your entries are saved and the information is up-to-date.

🔦 Key Learning Points

- You can access your patients chart from any view in Ambulatory Organizer.
- You must assign a relationship with the patient prior to viewing any chart content.
- Review the Banner Bar information to ensure you have selected the right patient and the right encounter.
- Remember to refresh your screen frequently.



Activity 1.3 – Provider View

1 The patient's chart opens in your current default view – the **Provider View**.

Provider View is organized with tabs – each designed to support the specific workflow. Tabs provide quick and convenient access to the sections of the patients' record relevant to this workflow.

- 1. Provider View-default view for Ambulatory Oncology Providers
- 2. Workflow sections:
 - a) Outpatient Chart MPage
 - b) Summary MPage
 - c) Chemotherapy Dosing MPage
 - d) Orders MPage
 - e) Oncology Triage MPage
 - f) Rounding MPage
- 3. Click the Pushpin icon to minimize the **Menu** and increase screen display size for relevant information.

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Orders Medication List	+ Add + Add	Histories Active Insues	Histories							A	ves 2	4

2 The **Outpatient Chart Mpage** tab displays patient's electronic information organized in sections called components, you will see components list on the left. The components list allows for reviewing the patient's chart in the most efficient way.

• Click the component from the left side list to display a corresponding chart section, or use the scroll bar.

Provider View								
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The **Oncology Summary MPage** contains components and information relevant to an Oncologist, removing the need to sift through information. You can position your mouse over applicable results for additional information. To modify or add to any data viewed within the summary, you can either click the widget heading or the add button relevant to leave the Oncology Summary and navigate to a different location within the patient chart where you can modify the data.

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Take a few minutes to navigate around the page to familiarize yourself with the contents.

The **Chemotherapy Dosing Mpage** tab provides a historical view of the patient's weight and height which can be viewed by date or represented graphically. The page also displays all the regimens and plans ordered for the patient with the dosages delivered or to be delivered. This data is sorted in reverse chronological order with the most recent orders displayed at the top and completed items at the bottom.

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5 The **Orders MPage** tab layout allows the Oncologist to easily navigate frequently used orders in an oncology setting or search for a specific required order.

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Note: Order entry will be covered later in this book

6

The **Oncology Triage Mpage** tab is a consolidated view of important information to help guide triage decision making.

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7 The **Rounding MPage** tab is used most often in an inpatient setting as a handover tool between providers. Information is similar to the **Outpatient Chart MPage**, however it is organized in a manner to aide with workflow for handover.

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Key Learning Points

- Provider View allows for ease of chart navigation.
- Tabs help aide in decision making.
- Tabs highlight data displayed for workflow purposes.



Activity 1.4 – Oncology MPage

1

Oncology Flowsheet - Displays clinical results in the context of the patient's chemotherapy treatment. Cycle labels are displayed above the flowsheet corresponding to the patient's relevant chemotherapy PowerPlans.

1. Access through the Menu by selecting Oncology.

2. **Flowsheet** is the first tab which will appear. **Note**: Columns in the flowsheet with no data will not populate.

3. Both **Measured** and **Dosing** weights are displayed. These weights are pulled from IView_ and the Dosing Weight PowerForm respectively.

4. **Unexpected Response** information is populated if the patient has experienced an adverse event during their treatment at any time.

5. Treatment shows the chemotherapy treatment being delivered.

6. **Supportive** shows the supportive medications delivered during chemotherapy treatment.

7. Prescriptions list the patients' prescriptions that were given during treatment.

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Note: Staging Tab is available and will be explained in a reference guide as the use has not yet been determined by Health Organizations.



2 The **Timeline** provides one view in which an Oncologist can review a patient's treatment in context to specific events in order to understand the impact of the treatment.

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Febrile Neutropenia – Provides Oncologists with a specialized view for patients that are admitted to hospital for febrile neutropenia (intended for inpatient setting). The Oncologist has the ability to view the trend of the patient's temperature in relation to their absolute neutrophil count and which antibiotic(s) the patient is receiving.

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The Oncology **Treatment Calendar** is designed to be a personalized summary of a patient's treatment including appointments, chemotherapy, and notes from the care team. It can be used to schedule future chemotherapy cycles and create printed calendars to be given to the patient. When working with plan and regimen details in the Calendar Item list, keep the following details in mind:

- Orders with an asterisk (*) indicate an estimated start date for a plan.
- Orders in italics are not yet ordered.
- Dates displayed in *italics* with an asterisk (*) indicate the order is not ordered

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Calendar Items - This is a list of all appointments that are scheduled for a patient in a list of current and upcoming Regimens. You can also see a patient's prescriptions.

Calendar List - This is a list of upcoming events for a patient. Regimen appointments, medications, and other items are displayed in this list.

Calendar View -. The calendar is a visual representation of a patient's appointments, prescriptions, notes, and other important information regarding their treatment schedule. The calendar's first day displayed is always the current day of the week, not the first calendar day of the month.

For a given day, the Calendar View always displays a single icon for an event irrespective of the number of occurrences of the event in that day. This will make the Calendar View look more organized and singular.

Navigation Buttons - These buttons adjust the weeks displayed. Click the forward \triangleright or backward arrow to move ahead or behind one week. Use the double arrows to move ahead \triangleright or behind \triangleleft five weeks.



Key Learning Points

- The Oncology MPage includes 5 tabs which pull specific details into each, which optimize each view for specific oncology functionalities.
- The Flowsheet only populates columns if data is available (good place to view if a patient has had an adverse reaction to treatment).
- Further information on each tab can be found in Quick Reference Guides.



PATIENT SCENARIO 2 – Reviewing Patient Data and Updating Documentation

Learning Objectives

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

- Review Patient History
- Manage Patient Allergy Status
- Complete the Best Possible Medication History
- Understand and complete the Dosing Weight PowerForm

SCENARIO

You are now ready to go in to see your new patient. Together you review her personal and family history, allergy status, home medications and measurements:

- She has had a tonsillectomy in the past
- Her maternal grandfather had colon cancer and passed away two years ago as a result
- She has a severe (anaphylactic) allergy to Morphine
- Is experiencing anxiety regarding going forward with Chemotherapy
- Is needle phobic
- Will require a prescription for Lorazepam
- Current height: 168cm, Current weight 63kg



Activity 2.1 – Patient History

1

In the Provider View under the **Outpatient Chart MPage** the fourth section you will see is the **Histories**. When you open the patient's chart for the first time during the visit, the reconciliation status will be 'Incomplete.' For each component with Incomplete status, review and update the information as necessary and click Complete Reconciliation.

There is a separate tab for each history type. The number in brackets indicates how many entries are in each tab.

- How many entries are under Social History ______
- What other medical problems does this patient have? ______

Click the specific history tab to display these entries without leaving the current view.

Histories									All Visits C =
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Neuropathy								Medical	
Schizophrenia								Medical - POA	
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									Recordiation Status: Incomplete Complete Recordiation

2 Click the item on the list to split the screen and display more details without leaving the Outpatient Chart tab. Then click the X to remove the split screen.

listories											lla	visits 2
Medical History	(4)	Surgical History	(1)	Family History	(3)	Social History	(1)					
Category	Details		Þ									
lame/Frivironment	Printery	r Carre Giver - unable tu	त्रसम् विषे अर्थ	Lives with: Father, M	lother				Home/Environment			
ctive Issues									Printary Care Giver:	Lives with:		
								Add new as: This Visit and C	unable to care for sell	Father Mother		
Name								Classification	Last Updated By: TestUser, OncologistHematologist-	Last Updated: 14/02/2017	Last Review Date: 14/02/2017	
Facial basal o	ell cancer							Medical	Physician, MD			
Neuropathy								Medical				



3 To add a new entry to patient histories, click the component heading **Histories**.

The Histories window opens. Note the separate tabs to enter each history (family, procedure, social, and implants). Add to the patient's Family History:

Select the Family tab and click the + Add icon.

$ \rightarrow $	🔹 🚹 🛛 His	stories					
Family	Procedure	Social	Implant	s			
e				-			
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+	Add 🗹	Modify	Display	y: Family Membe	er View (Positive	: Only)	•
Last U	pdate: 14-Feb-3	2017 8:28	by TestUse	er, OncologistHem	atologist-Physic	ian, MD	
Family	Member Infom	nation 🔺		Age of Onset	0	Severity	r
Mothe	er:						
B	Preast cancer.						
Father	r:						
A	Icohol abuse.						
Grand	father (M):						
H	lypertension.						

4 To practice, add that the patient's maternal (M) grandfather had colon cancer by placing a positive sign in the corresponding cell.

	Relati	ionship	Father	Mother	randmother (N	irandfather (M	ra
		Name					Г
	Health	n Status	•	•	r 🖵	-	
🛛 QuickList	٩,	45					
🖯 General Family Histo	ry 🔍						L
Alcohol abuse.		-	+				Г
Alzheimer's disease.		-					L
Breast cancer.		-		+			L
Cancer.		-					
Colon cancer	double click for details	-				+	Γ
Dementia.		- 1				_	I
Developmental delay		-					Г
Diabetes		-					I
Heart attack.		-					I
Hypertension.		-				+	I
Mental disability.		-					I
Osteoporosis.		-					L
Prostate cancer		-					L
Seizures		-					L
Stroke.		-					Г
Substance abuse.		-					
Suicide.		-					
Tuberculosis.		-					



5 You can also add information about the family member you are entering history on by clicking on the relationship header and completing any relevant data. Then click **OK**.

💷 Update Family Member - Grandfather (M)		X
First Name:	Last Name:	Sex:	Birth: Date
BOB	CSTPRODONC	Male	🔹 06-Dec-1930 🛛 🚔 💌
V Deceased	Age at Death: Age 85 Years	Cause of Death:	
			OK Cancel

6

To add more detail about the family history Double-Click in the corresponding cell and complete any relevant condition information. Then click **OK** to save the information and close the window.

	💷 Update Family Member - Grandfather	(M)					×
	 Hide Family Member Information 						
	First Name:	Last Name:			Sex:	Birth: Date	
	вов	CSTPRODON	С		Male	▼ 06-Dec-1930	-
	Deceased	Age at Death:	Age		Cause of Death:		
Grandfather (I	\triangleright	85	Years	•			
CSTPRODO	Condition:			Onset Age: Age			
_	Colon cancer			0			•
	Comment:						
							-
_	✓ Hide Additional Details						
+	Life Cucle:	Severitu			Course:		
		•			▼		
+	Hide Conditional Details						
	🔲 Include All Children						
	Local recurrence of malignant tumor of colon						
	Malignant tumor of ascending colon Malignant tumor of descending colon						
	Malignant tumor of sigmoid colon Malignant tumor of transverse colon						
	Primary malignant neoplasm of colon Secondary malignant neoplasm of colon						
							Cancel



7 If you want to practice, add to the Procedure History: add the patient had a tonsillectomy last year.

- 1. Select Procedure tab
- 2. Click 🕈 Add icon
- 3. Complete the mandatory field marked by asterisk and highlighted yellow with procedure done
- 4. Click the 🚧 icon
- 5. Select the appropriate procedure
- 6. Click OK
- 7. Click OK or OK & Add New if there are more procedures to be entered

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To return to the **Provider View** use the navigation buttons **Solution** or select **Provider View** from the **Menu**.

Key Learning Points

- Display more information without leaving the current view by clicking the row, the corresponding tab, or by 'hover to discover'.
- Reconcile the status of incomplete components when you review patient's chart for the first time.
- Procedures will be added when taking a patient's history on admission or triage when the procedure wasn't already documented in the Clinical Information System.

To search for a term, type the first few characters to display more selections.



Activity 2.2 – Review and Update Patient Allergy

Allergy information is carried forward from one patient visit to the next. The CIS keeps track of the allergy status and will automatically prompt when the information is not up-to-date.

1

The system will track allergy-to-drug interaction. When placing an order with an allergy contraindication an alert is displayed.

Decision S	Support: LEARNTEST, PHYS - 700006586	
The new ord	ler has created the following alerts:	
amoxicil	llin 🛛	
Allero	v [1]	ь
Severity	Substance	Reaction Type
۲	penicillin	
•	m	•
Size Colum	ns to Window	Apply to all interactions Override Reason:
		Apply only to required interactions
		LEARNTEST, PHYS - 700006586 Continue Remove New Order

Note: You can either remove the order and select another medication, or continue with the order by overriding the alert and documenting the reason:



The CIS allows you to check for drug-to-drug interactions by clicking the **Check Interactions** button:

🕇 Add 🦨 Document Medication by Hx	Reconciliation 🛛 👌 Check Interactions
-------------------------------------	---------------------------------------



2 When you need to update the patient's allergies, the best way is to begin at the **Banner Bar**. Allergies are listed there accordingly to severity. 'Hover to discover' to display more details. Click to open the window where you can enter or update allergy information.



Note: Alternatively you can select Allergies from the Outpatient Chart under Provider View to update the section.

To add a new allergy to the patient's record, click the + Add icon on the toolbar. Record that the patient has a severe anaphylactic allergy to Morphine.

P Custom Information: CSTPRODONC, JAY								×
Task Allergy								
Mark A tas Reviewed	es 📿 No	o Known Medica	tion Allergies	🔗 Reverse	Allergy Check	Display	All	
D/A Substance	Category	Reactions	Severity	Туре	Comments	Est. Onset	Reaction Status	Updat
No Known Allergies	Drug			Allergy			Active	10-Jai
•	"	T						+
						0	ОК С	ancel



To add the above noted allergy:

4

- 1. Search for Morphine in the **Substance** box using the **M** to execute the search
- 2. Select Morphine from the list which populates
- 3. Click **OK** to return to the Add Allergy/Adverse Effect Window

A Substance	Category Reactions	Seventy 1	Type Comments	Est. Onset Reaction State	us Updated	By Source	Reviewed Revi	. Interaction
No Known Allergies	Drug		Allergy	Active	10-Jan-2	10	12-Sep-2017 1 Test	
				Substance Search				
				*Search: morphine		Starts with	Within: Terminolo	ogy •
				Search by Nar	ne] [Search by Code	
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5 Complete the entry by adding the other two mandatory fields and any other information which may be of importance (recommended to complete reaction even though it is not marked as mandatory):

- 4. Enter reaction is 'Anaphylaxis' using the 🎮 icon.
- 5. Enter Severity 'Severe'
- 6. Enter 'Drug' for Category
- 7. Click **OK** to save the information and close this window

Type Allergy • An adver *Substance morphine B Free lead	ne reaction to a drug or substance which is due to an immur	logical response.	Add Connert
Reaction(s)	Severity Info source Severe Potent •	Connerts	
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Reconciliation Status: Incomplete Complete Reconciliation



6 Patient's allergy record is updated. If the patient was previously recorded to have No Known Allergies an alert window pops up asking you to verify the information you have entered.

NKA (No Known Allergies) is currently recorded for this Patient. By adding this allergy to the Patient's profile, you will be required to cancel	CPSUIALL	LERGY E	3
the NKA item so that you can add this Allergy. Click Yes to add this Allergy, cancelling the NKA, or click No.	2	NKA (No Known Allergies) is currently recorded for this Patient. By adding this allergy to the Patient's profile, you will be required to cancel the NKA item so that you can add this Allergy. Click Yes to add this Allergy, cancelling the NKA, or click No.	
Yes No		Yes No	

- The green checkmark indicates drug allergies 1.
- 2. The toolbar provides other options for ease of use in entering information for patients without allergies
- 3. Select Mark All as Reviewed to complete the review or if no changes are required

In order for the pharmacy to dispense, they must see that the allergy record has been reviewed by a provider. Alternatively, from the Outpatient Chart you can select

		iompiete tr	le proce	35.				
P Custom Information: CSTPRODONC, JAY								×
Task Allergy 3 Mark All as Reviewed						_		
🕇 Add 🛛 🗹 Modify 🔹 💭 No Known Allergi	es 🖓 N	o Known Medicati	ion Allergies	ᇬ Reverse	Allergy Check	Display	All 🝷	
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Chown Allergies	Drug			Allergy			Canceled	05 De
4		11						4

Note: If you want to modify the existing record, choose the allergy requiring modification, click Modify. To Practice change the Severity to Mild and Reaction to rash for the Morphine.

oplata tha process



Key Learning Points

- You can review, add, or modify patient allergies at any time by clicking the allergy line on the Banner Bar.
- Patient allergies and interactions are monitored by the CIS.
- Review is completed when Mark All as Reviewed is selected or Complete Reconciliation is selected from the Outpatient Chart in Provider View.



Activity 2.3 – Best Possible Medication History (BPMH) Review and Update.

The BPMH is:

1

- The most current medication record
- The best possible list of medications based on available information

It includes all prescription and non-prescription medications.

It is a systematic medication history using multiple sources of information plus a client interview.

Ideally, all medication information is verified by more than one source.

It is not simply a list of prescribed medications. Rather, it must also include information about how the client is currently taking the medications, even though it may be different from how it was prescribed.

Now you will review a best possible medication history (BPMH) and reconcile current medications if appropriate. The CIS offers a few tools to manage medications:

1. **Home Medications** component lists home medications entered for this visit and medications carried forward from the last discharge if documented in the CIS.

2. **Medication reconciliation** allows you to manage all home and current medications and create new prescriptions in one convenient screen. You can see the status of medication management indicated by the following icons:

B means incomplete

- means complete
- means partial completion

The provider view							A.	Constanting of the second
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Outpatient Chart	Stammary Summary	12 Chemotherapy Dosing	10 Onters	tt Oncele	y Triage 20	Revending	8 +	
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Documents (3)	Medication	а. Эк			Responsible Provider	Cariplance	Edimated Supply Remain	ung .
Pathology (5) Chief Complaint	aprepitant 125 mg, PO, 12b, 24 Ref8(s)	as directed, Take 125 mg before each treatment x 2	14 treatments. Take 80 rsg stady for 2 da	ys following treatment., 3	TestON, OncologistHematologist- Physician, MD	H .	-	
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Home Medications (2)								
Physical Exam Follow Up								Save
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The home medication record must be completed before performing admission medication reconciliation

The home medication record is updated and verified by a pharmacy technician. When a pharmacy technician is not available, it can be entered by a medical student or a nurse. In some situations you, as a provider, may need to update this record.

Click the **Home Medications** component from the list. When the Meds History has not been signed off, it is clearly marked *Incomplete* and the status will also be marked by a **()** icon.

It is important to know that home medications can be updated at any time, even if the status clearly states 'complete':

- For incomplete history, click Complete History to update
- To update a completed home medication list, click the **Home Medications** heading.

2 For this scenario, you will add Salbutamol inhaler 1 puff QID PRN:

- 1. Click Home Medications heading
- 2. In the Medication List window, click **Document Medication by Hx**.



3 Click the Add button on the Medication List toolbar.

P Docum	ent Medication by Hx			
CSTPRO	DONC, JAY	DOB:07-Ja	n-2010 M	MRN:700001721
		Age:8 year	rs E	Enc:700000003866
Allergies:	morphine	Gender:Ma	ale F	PHN:9878239303
🕂 Add	Medication History	🔲 Unable To Obtain Information	Use Last Compliance	
Docum	ent Medication by Hx			



4 Start typing in the **Search** box the first three or four characters: salbu. A list of frequently used Salbutamol order sentences is displayed. If you do not see your choice at the top, press **Enter** to display the full catalogue. To truncate the list, add more details to display more relevant order sentences. For this example type **salbu inh 1**

P CSTPRODONC, JAY - Add Order			
CSTPRODONC, JAY DOB:07-Jan-2010 MRN:700001721 Code Statu	s: Process:	Location:LGH Chemo	
Age:7 years Enc:700000003037	Disease:	Enc Type:Recurring	
Allergies: morphine Gender:Male PHN:9878239303 Dosing Wt	83 kg Isolation:	Attending:	
Search salbu inh 1 🔍 Type: 🎝 Document Medication by Hx 👻			
salbutamol 100 mcg/puff inhaler		7	
salbutamol 100 mcg/puff inhaler (1 puff, inhalation, once, PRN as needed, drug form: inhaler,	dispense qty: 1 inh)		
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2.5 mg salbutamol 100 mcg/puff inhaler (1 puff, inhalation, g4h, PRN shortness of breath, order dura	ion: 30 day, drug form; inhaler, dispense gtv; 2 inhaler)		Novo-Salbutamol
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2.5 mg	haler, dispense otv: 1 inhaler)	m: inhaler, dispense qty: 1 inh	Novo-Salbutamol
salbut 2.5 m salbutamol 100 mco/ouff inbaler (1 puff inbalation, OID, PRN shortness of breath, order dura	ion: 30 day, drug form; inhaler, dispense gtv; 1 inhaler)	dispense at a Liphaler	1 puff, inhalation,
salbut salbutamol 100 mcg/puff inhaler (2 puff inhalation, once PRN as needed, drug form inhaler	disnense atv: 1 inh)	dispense quy. 1 innater	2 puff_inhalation
5 mg, salbutamol 100 mcg/putf inhaler (2 putf, inhalation, office, rint us receace, drag form inhibiter,	order duration; 30 day, drug form; inhaler, dispense obc 1 inhaler;	0 day, drug form: inhaler, dispens	PHL-Salbutamol R
salbut salbut salbut and 100 mcg/puff inhaler (2 puff inhalation, QID, drug form; inhaler, dispense ots 1 in	h)		PHL-Salbutamol R
5 mg, alloutament 125 mg/2 5 ml (0.5%) inhabition solution	")	nse qty: 1 inh	PHL-Salbutamol R
salbuta salbutanoi 1.25 mg/2.5 mc (0.5%) innaiation solution			PHL-Salbutamol R
salbut salbutanoi 200 mcg inhaler (1 pull, inhalation, once, PKN as needed, drug form: powder)		er duration: 30 day, drug form: inh	Sandoz Salbutamo
salbut salbutamoi 200 mcg inhaler (1 puff, inhalation, QID, drug form: powder)		m: inhaler, dispense qty: 1 inh	Sandoz Salbutamo
salbut salbutamol 200 mcg inhaler (1 puff, inhalation, TID, drug form: powder)		lad drug formu nourder	Teva-Salbutamol
salbut "Enter" to Search	I calbutamed 200 mcg inhales 1 putt inhalation (JII) drug termin	rea, arug rorm: powaer	Teva-Salbutamol
5 mL PO, OID, PRN as needed for wheezing, drug form; oral lig, dispense gts; 240 mL	salbutamol 200 mcg inhaler 1 puff, inhalation, QD, drug form; p	owder	Teva-Salbutamol
salbutamol 2.5 mg/2.5 ml (0.1%) inhalation solution	salbutamol CEC free 100 mcg/inb inbalation aerosol	onder	
salbutamol 4 mg oral tablet	salbutamol CFC free 100 mcg/inh inhalation aerosol		
salbutamol 5 mg/2.5 mL (0.2%) inhalation solution	1 puff, inhalation, QID, PRN as needed for shortness of breath or	wheezing, drug form: spray	
salbutamol 5 mg/mL (0.5%) inhalation solution	salbutamol CFC free 100 mcg/inh inhalation aerosol		
salbutamol 100 mcg/puff inhaler	2 puff, inhalation, QID, PRN as needed for shortness of breath or	wheezing, drug form: spray	
salbutamol 100 mcg/puff inhaler	ipratropium-salbutamol 0.2 mg-1 mg/mL inhalation solution		
1 puff, inhalation, once, PRN as needed, drug form: inhaler, dispense qty: 1 inh	ipratropium-salbutamol 0.5 mg-2.5 mg/3 mL inhalation solution		
salbutamol 100 mcg/puff inhaler	ipratropium-salbutamol 20-120 mcg/puff inhaler		
т рип, innalation, qin, ики snortness of breath, order duration: 30 day, drug form: inhaler, dispens	ipratropium-saibutamoi CFC free 20 mcg-100 mcg/inh inhalatio	n aerosoi	,
			,
		CSTPRODONC, JAY - 700001	721 Done

Click the appropriate sentence to select the medication and its details with one click. If you do not have other medications to add, click **Done** at the bottom right corner.

5 Details for Salbutamol display for your review. In many cases, it is important to know if the patient is following the prescription and when the last dose was taken. Click the **Compliance** tab.

± Defoits for salbutamol (salbutamol 100 mcg/puff inhaler)								
P Details	Gorder Commo	ents Compliance						
Dose		Route of Administration	Frequency	Duration	Dispense	Refill		
1 puff		📓 inhalation	QID QID	30 day	1 inhaler	• 0	+ * 1.	∎×
	PRN:		~		Special Instruct	ions:		
	Drug Form:	inhaler	~					
	Start Date/Time:	05-Dec-2017	PST		Type Of The	rapy: 🔿 Acute		
	Stop Date:	04-Jan-2018 📄 💌				Maintenance		
Per	forming Location:		¥		Order Output Destina	ition:	¥	
BC Cano	cer Protocol Code:							



6 Use the drop-down lists to select appropriate options for status and information source, and to add when last dose was taken by the patient.

itus aking as prescribed	Information source	Last dose date/time
sking as prescribed		
sking, not as prescribed		
vestigating compliance		
n hold		
o longer taking		

Note: Click **Details** to collapse or expand details for any order on the list.

7 To practice, repeat steps to add Yasmin 21 tab PO Qdaily, and add the non-formulary medication ginseng. Search for non-formulary and type the name of the medication under details.

Search: non Type: Document non-formulary continuous infusion non-formulary medication Cor Dristan Cold Non-Drowsy Cor Zantac Maximum Strength Non-Prescription	
Details for non-formulary medication Details I I Order Comments I Order Comments	
Dose Route of Administrat Frequency Duration	Dispense Refill
Drug Name: ginseng Special Instructions:	PRN: Requested Refill Date: Start Date/Time: 05-Dec-2017 05-Dec-2017 V V V PST E
Performing Location:	Stop Date: V No Substitution:: Yes No Order Output Destination: V
0 Missing Required Details	Document History Cancel

To complete the process, click **Document History**.



8 Use navigation buttons to return to your default screen – Provider View:

Coming back to the Outpatient Chart tab, ensure the Medication History has been completed.

Document History: Completed by Test, Onc Physician - Oncologist/Hematologist, MD on 05/12/2017 At 14:40

Another indicator is to see the green checkmark when in the Medication List screen next to the status.



In cases where BPMH might not be available, this should be documented by selecting **No Known Home Medications** or **Unable to Obtain Information.**



Remember to click Refresh to update your view with the new entry and review the list (the status line displays the reviewer).

9

Now you are ready to complete the medication reconciliation to determine which medications the patient should stop taking, which medications she should continue at home, and if prescriptions need to be created.

Note:

1-It is practical to reconcile home medications before placing your own medication orders so that you don't have to reconcile the most recently placed orders.

2- Medications within a chemotherapy PowerPlan will appear on the Outpatient Reconciliation once they have been activated (by the nurse) and are yet to be signed for; Should you chose to complete Medication reconciliation outside of the recommended workflow it is possible that PowerPlan medications will appear on the reconciliation list. Medications within a PowerPlan will be denoted by the Powerplan Icon B and should not be reconciled, they will drop off of the list once the nurse has signed for them.



• Click the **Medication List** from the Menu, click the down arrow and select **Outpatient** from the menu options.

Menu P	< 👻 🕆 🛉 Medication List
Provider View	🕂 Add 🔐 Document Medication by Hx Reconciliation 🔽 🔈 Check Interactions
Oncology	Admission
Results Review	Orders Medication List Document In Pla Transfer
Orders 🕂 Add	Displayed: All Active Orders 1 All Active M
Medication List 🛛 🕂 Add	



A list of medications prior to reconciliation is displayed.

+ Add Manage Plans									
l	▶ _	Orders Prior to Reconciliation							Orders Afte
l		🖳 🕅 Order Name/Details	Status		۵.		₽?	♥ Order Name/Details	
L	△ Home Medications								
		drospirenone-ethinyl estradiol (YASMIN 21 tab) 1 tab, PO, qdaily, 28 tab, 0 Refill(s)	Documented	0	0	0			
l		3 Smultivitamin (Centrum 8400 oral tablet) 1 tab, PO, qdaily, 30 tab, 0 Refill(s)	Documented	0	0	0			
l		O Refill(s)	Documented	0	0	0			
l		Salbutamol (salbutamol 100 mcg/puff inhaler) 2 puff, inhalation, QID, 1 inh, 0 Refill(s)	Documented	0	0	0			
L		Medications							
		Ex Sonaproxen 500 mg, PO, as directed, PRN: acute extrapyramidal symptoms	Ordered	0	0	0			
1									

The reconciliation window displays the current status of medications. Hover to discover over the icons to check what they indicate:

•	
گ .	— •

Decide to continue certain medications and to discontinue others. Check off the corresponding column.



11 Once all the medications are reconciled, click **Sign** (bottom right corner) to complete the process. The button will not be available until you address all medications listed.

PC	order Reco	onciliation: Outpatient - C	STPRODONC, JAY									- • •
CS ⁻ Alle	TPROD	ONC, JAY	DOB:07-Jan-2010 Age:7 years Gender:Male	MRN:700001721 Enc:70000000030. PHN:9878239303	Code Status: Dosing Wt:83	8 kg	Process: Disease: Isolation:			Process: Disease: Isolation:	Location:LGH Chemo Enc Type:Recurring Attending:	
+/	Add 달	Manage Plans									Reconciliation Status Meds History Admission	🤤 Outpatient
			Orders Prior to Reco	nciliation						Orders Aft	er Reconciliation	
	₽?, 1	7 Order Name/Details			Status		۵.		₽?	🕅 Order Name/Details		Status
	⊿ Hom	e Medications										
						۲	0	0	۵	aprepitant 125 mg, PO, as directed, Tail	ke 125 mg before each tre < Notes	Prescribed
	<u></u>	levonorgestrel-ethiny 1 tab, PO, qdaly, 0 Ref	l estradiol (ALESSE 2 ill(s)	1 tab)	Discontinue	0	0	۲				
						۲	0	0	ī.	LORazepam (LORazepam 1 tab, sublingual, TID, 30 ta	0.5 mg sublingual tablet) b, 0 Refill(s) < Notes for Patient >	Prescribed
	an a	non-formulary medica 0 Refill(s)	ation (ginseng)		Discontinue	0	0	۲				
	^a	ondansetron (ondanse 1 tab, PO, once, 10 tab,	tron 4 mg oral table 0 Refill(s)	t)	Documented	۲	0	0	3	ondansetron (ondansetror 1 tab, PO, once, 10 tab, 0 Re	4 mg oral tablet) fill(s) < Notes for Patient >	Documented
	4	salbutamol (salbutamo 1 puff, inhalation, QID,	ol 100 mcg/puff inhal for 30 day, 1 inhaler,	l er) 0 Refill(s)	Documented	۲	0	0	J.	salbutamol (salbutamol 10 1 puff, inhalation, QID, for 3	0 mcg/puff inhaler) 80 day, 1 inhaler, 0 Refill(s) < Notes	Documented
	⊿ Medi	cations										

The prescription for the medication will automatically be printed.

12 You can also create a new prescription (medication renewal) for one of the patient's medications from the Medication List view. Select **Medication List** from the **Menu**. This displays the list of current medications. **Right-Click** the medication and select **Convert to Prescription**.

Menu P	< 🖂 🝸 者 Medication List		
Provider View	🕂 Add 🔐 Document Medication by Hx	Reconciliation - MCheck Interactions	
Oncology			
Results Review	Orders Medication List Document In Pla	n	
Orders 🕂 Add	<u> </u>	Distance de All Antice De Jose de All Antice Martine Martine	
Medication List 🕂 Add	View	Displayed: All Active Urders All Active Medications	
Documentation 🛛 🛨 Add	Orders for Signature Medication List	🔊 🕅 Order Name 🔺	Status Dose Details
	Admit/Transfer/Discharge	△ Medications	
Allergier d Add	- Status	acetaminophen	Renew
	Patient Care	Δ τοδο' P aprepitant	Modify
Diagnoses and Problems	Activity Dist/Nutrition	Image: The second s	Сору
Histories			Cancel and Reorder
MAR Summary	Medications	Atropine	Suspend
MAR	- Blood Products	🕨 🔲 🦙 📴 atropine	Activate
Form Browser	- Laboratory	A Straning	Complete
Patient Information			Cancel/Discontinue
Interactive View and I&O	Respiratory	🕨 🛄 🦙 🛃 atropine	Void
Lines/Tubes/Drains Summans	- Allied Health	atropine	Convert to Prescription
	Consults/Referrals		Reschedule Administration Times
Growth Chart	Supplies	▶ 🛄 📷 ຫ້ຫ1 🛃 bevacizumab	Add/Modify Compliance
Immunizations	Non Categorized		Add/Modify Compliance



Key Learning Points

- Medication History must be completed before the medication reconciliation.
- A home medication can be added to a complete medication history when information becomes available.
- The Outpatient Medication Reconciliation screen displays home and current medications allowing continuing or discontinuing any listed medication.
- When using the Search box, type the first characters of the term to limit the list of possible entries.
- You can create a prescription from the Outpatient Medication Reconciliation in the Outpatient Chart workflow view.
- You can create a prescription from the Medication List under the left side Menu.



Activity 2.4 – Dosing Weight PowerForm

PowerForms are the electronic equivalent of paper forms currently used to chart patient information. Data entered in PowerForms can flow between IView flowsheets, Clinical Notes, Problem List, Allergy Profile, and Medication Profile.

- 1 To access the Chemotherapy Dosing Weight PowerForm go to the Provider View under the Outpatient Chart:
 - 1. Select Vital Sign & Measurements
 - 2. Click the down area 🔻 beside the heading, select the Chemotherapy Dosing Weight (only option provided).

< 👻 🕆 者 Provider View						
A 🗎 🖌 🕒 🔍 🔍 🛛 100%	- 😋 🔳 🕍					
Outpatient Chart	Summary		×	Chemotherapy Dosing	Orders	×
Histories Active Issues	Vital Signs & Mea	sureme				
Documents (3)			OCT 17, 2017 07:55		07:51	
Pathology (0)	Height/Length Measured	cm	149		149	
Chief Complaint	Weight Dosing	kg			81	
Vital Signs & Measurements	* Displaying recent resul	ts up to 18	columns of inf	formation for the selected visit		
Visits (5)						

The form opens in a new window:

- 3. Complete both the Dosing Weight and Height/Length
- 4. BSA automatically calculates with the above data entered
- 5. Click the \checkmark to sign the document

Chemotherapy	Dosing Weight - CSTPROD	ONC, JAY			0.0	
2 O F	🌠 🔹 🗧 📾 🔛 🔛					
med on:	05-Dec-2017 📑 💌 15	47 PST		By: TestON, Oncol	ogistHematologist-Physician	, MD
therapy D		Chem	otherapy Measu	rements		ĥ
	The current Dosing W the chemother	/eight, Height/Length rogy measurements	 and BSA are used to calcul in the required fields to apply 	ate medications dose these measurements	es in the PowerPtan. Enter s to this encounter.	
	Dosing Weight:	EQ .	0			
	Height/Length:	150 <				=
		-	3			
	BSA:	L 1581 His	4 storical Measure	ments		
	BSA:	1.58 most recent results in	storical Measurer	ments emotherapy flowsheet to	see more results.	
	BSA: This section only pulls the Date of Measure:	1.58 m His 5 most recent results in Height Measured	torical Measurer	ments emotherapy flowsheet to Weight Measured	see more results.	
	BSA: This section only pulls the Date of Measure: 17-0CT-2017 07:55	1581 His 5 most recent results in Height Measured 149 cm	torical Measurer	ments emotherapy flowsheet to Weight Measured	see more results. Body Surface Area 0 m2	
	BSA: This section only pulls the Date of Messure: 17-0CT-2017 07:55 17-0CT-2017 07:55	1.581 His 5 most recent results in Height Measured 149 cm	torical Measurer the last 90 days. Please use the ch Weight Bosing B3 tg - Test0N, OncolegyAmb.	ments emotherapy flowsheet to Weight Measured	see more results. Body Surface Area 0 m2 0 π2 0 π	
	BSA: This section only pulls the <u>Date of Measure:</u> 17-0CT-2017 07:55 17-0CT-2017 07:55	1 58 - His 5 most recent results in Height Measured 149 cm 149 cm	the last 80 days. Please use the ch Weight Dosing B3 tg - TestTN, OncologyAnte B1 tg - TestTO, OncologyAnte	ments emotherapy flowsheet to Weight Measured	800 more results. Body Surface Area 0 m2 0 m2 1.83 m2	
	BSA: This section only pulls the <u>Date of Measure:</u> 17-0CT-2017 07:55 17-0CT-2017 07:55 17-0CT-2017 07:55	1.581 His 5 most recent results in Height Measured 149 cm 149 cm 150 cm	The last 50 days. Please use the ch Weight Dosing 83 tg - TeatTON, OncolegyAmb 81 tg - TeatTON, OncolegyAmb	ments emotherapy flowsheet to Weight Measured	see more results. Body Surface Area 0 m2 1.83 m2	
	BSA: This section only pulls the Date of Measure: 17-0CT-2017 07:55 17-0CT-2017 07:51 17-0CT-2017 07:51 17-0CT-2017 07:51	1.58 m His 5 most recent results in Height Measured 149 cm 149 cm 149 cm 149 cm 150 cm	torical Measurer the last 90 days. Pesse use the ch <u>Weight Doaling</u> (5) Ig-1 sectXI, Oncologuett. 30 Ig-1 secXI, Oncologuett. 30 Ig-1 secXI, Oncologuett.	ments emotherapy flowsheet to Weight Measured	see more results. Body Surface Area 0 m2 1 A3 m2	
	BSA: This section only pulls the Date of Messure: 17-0CT-2017 07:55 17-0CT-2017 07:55 17-0CT-2017 07:51 17-0CT-2017 07:51 17-0CT-2017 07:54	1.5% most recent results in Height Measured 149 cm 150 cm 150 cm	torical Measurer Weight Dowing 113 - Testin, Oncooguer. 113 - Testin, O	ments emotherapy flowsheet to Weight Measured	Body Surface Area 0 m2 0 m2 1 83 m2 1 83 m2	
	BSA: This section only pulls the <u>Date of Measure</u> : 17-0CT-2017 07:55 17-0CT-2017 07:55 17-0CT-2017 07:51 17-0CT-2017 07:49 09-0CT-2017 13:23 09-0CT-2017 11:32	1.58 m His 5 most recent results in Height Measured 149 cm 149 cm 149 cm 150 cm 150 cm	A Comparison Control Measured Control Measured Control Measured Vielpht Dosing Control Measured Si sy - Teacht, Oncoopartit. To Sy - Teacht, Oncoopartit.	ments enotherapy flowsheet to Weight Measured 76 tig	see more results. Body Surface Area 0 m ² 1.33 m ² 1.31 m ² 1.31 m ²	
	BSA: This section only pulls the Date of Messure: 11.0CT23017 07:53 17.0CT23017 07:53 17.0CT23017 07:53 17.0CT23017 07:51 17.0CT23017 07:54 08.0CT23017 11:12 04.0CT23017 11:12	1.59 m His 5 most recent results in Height Measured 149 cm 149 cm 150 cm 150 cm	torical Measurer Weight Dowing 113 - Testin, Oncologati. 119 - Testin, Oncologati. 119 - Testin, Oncologati. 129 - Testin, Oncologati. 178 - Testin, Oncologati. 178 - Testin, Oncologati. 178 - Testin, Oncologati.	ments enotherapy flowaheet to Weight Measured 78 kg 76 kg	see more results. 0 m2 1 m2 1 k3 m2 1 k3 m2	
	BSA: This section only pulls the Date of Measure: 17-0CT/2017 07:55 17-0CT/2017 07:55 17-0CT/2017 07:51 17-0CT/2017 07:49 09-0CT/2017 11:32 04-0CT/2017 11:32 04-0CT/2017 11:32 04-0CT/2017 107 07	1.58 r His S most recent results in Height Measured 149 cm 149 cm 150 cm 150 cm	3 4 storical Measurer the last 80 days. Pesse use the ch Veight Doaling (3) Ig Test01, Oncologath 11 Ig Test01, Oncologath 78 Ig Test01, Oncologath 78 Ig Test01, Oncologath	ments enotherapy flowsheet to Weight Measured 78 kg 76 kg 76 kg	see more results. Body Surface Area 0 m ² 0 m ² 1.83 m ² 1.83 m ² 1.81 m ²	
	BSA: This section only pulls the Defic of Messure: 11.0CT-2017 07-55 12.0CT-2017 07-55 12.0CT-2017 07-55 12.0CT-2017 07-51 12.0CT-2017 07-51 12.0CT-2017 07-55 08.0CT-2017 11.12 28.6FR-2017 01-55	1.59 m His 5 most recent results in Height Measured 140 cm 140 cm 150 cm	torical Measurer the last 80 days. Pease use the ch Weight Dowing 10 Jay - TestON, Oncotoguet. 10 Jay - TestON, Oncotoguet. 10 Jay - TestON, Oncotoguet. 178	ments errotherapy flowsheet to Weight Measured 78 tsp 76 tsp 76 tsp 79 tsp 79 z sp	Body Surface Area 0 m2 0 m2 1 83 m2 1 83 m2 1 83 m2	



You can see the data has populated under the Vital Sign & Measurements.

Vital Signs & Measurements -

6	Today 15:47
Height/Length Measured cm	150
Weight Dosing kg	60 6

Note: These metrics also pull into the Dosing Calculator.

Key Learning Points

2

PowerForms push data into other sections of the chart.

As an Oncologist the Chemotherapy Dosing Weight PowerForm pushes into the Dosing Orders.

1



Activity 2.5 – Review Labs, Imaging, and Documents

In order to review specific sections of information in a patient's chart, it is best to navigate from the Provider View. From the Provider View multiple tabs can be used to view information. As an Oncologist working in the outpatient setting the main tab will be the Outpatient Chart tab. The below method will describe how to access the following information from this tab.

When using the CIS, you may be faced with large amounts of information. For many components, you can filter documents in many ways. For example, in the Documents component, you can:

- Display notes from the Last 24 hours or My notes only
- Use Group by encounter to see notes for the current encounter only
- Limit documents to Last 50 notes
- Access notes for All Visits



You can also display notes by Facility defined view or Oncology Documents.



You can also select a custom time range by expanding the options under **More**.



Note: If you select a specific filter, the selection narrows and you may not display all of the relevant information.



To access Documentation:

2

- 1. Either scroll or click **Documents** from the options to the left.
- 2. Select the document you would like to view
- 3. A window displays with the document content without leaving the screen
- 4. Click the tab to close the split screen
- 5. Clicking the component heading **Documents** will take you to the documentation section of the chart and display the full list of documents available



Add 💷 Submit 🚚 🖷	Forward Provider Letter Modify	🛛 🏶 🗣 📄 🔛 In Error 🔤 Preview 🔍						
ist								
Dieplau I All								
Service Date/Time 🔻	Subject	Туре	Facility	Author; Contributo				
05-Dec-2017 15:47:00 PST	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	TestON, Oncologist				
29-Nov-2017 12:08:48 PST	General Message	Phone Message	LGH Chemo	TestUser, Oncology				
21-Nov-2017 17:19:00 PST	Pharmacy Chemo Clinical Check	Pharmacy Chemo Clinical Check - Text	LGH Chemo	TestON, Pharmacist				
23-Oct-2017 14:47:00 PDT	Treatment Calendar	Oncology Treatment Calendar	LGH Chemo	TestON, Oncologis				
23-Oct-2017 14:45:23 PDT	Melanoma Of The Skin Staging Form AJCCV7	Cancer Staging Documentation	LGH Chemo	TestON, Oncologist				
20-Oct-2017 07:05:00 PDT	Oncology Referral Triage	Oncology Referral Triage - Text	LGH Chemo	TestON, Oncologist				
20-Oct-2017 06:50:00 PDT	Oncology Referral Triage	Oncology Referral Triage - Text	LGH Chemo	TestON, Oncologis				
17-Oct-2017 07:55:00 PDT	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	TestON, Oncologis				
17-Oct-2017 07:53:00 PDT	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	TestON, Oncology				
17-Oct-2017 07:51:00 PDT	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	TestON, Oncologis				
17-Oct-2017 07:49:00 PDT	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	TestON, Oncologist				
09-Oct-2017 13:43:00 PDT	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	TestON, Oncologist				
09-Oct-2017 11:32:00 PDT	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	TestON, Oncologis				
04-Oct-2017 11:12:00 PDT	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	Gentsch, Michelle				
03-Oct-2017 14:41:00 PDT	Oncology Outpatient Clinic Note	BMT Treatment Clinic Note	LGH Chemo	Lehoczky, Jay				
03-Oct-2017 14:37:00 PDT	Oncology Outpatient Clinic Note	BMT Treatment Clinic Note	LGH Chemo	TestON, Oncologist				
02-Oct-2017 11:49:00 PDT	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	Gentsch, Michelle				
02-Oct-2017 11:41:00 PDT	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	Gentsch, Michelle				
02-Oct-2017 11:38:00 PDT	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	Gentsch, Michelle				
02-Oct-2017 11:36:00 PDT	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	Gentsch, Michelle				
02-Oct-2017 11:33:00 PDT	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	Gentsch, Michelle				
02-Oct-2017 11:31:00 PDT	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	Gentsch, Michelle				
01-Oct-2017 11:46:00 PDT	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	Gentsch, Michelle				
01-Oct-2017 11:43:00 PDT	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	Gentsch, Michelle				
13-Sep-2017 15:18:00 PDT	Oncology Consultation Note	Onc. Radiation Clinical Trial Note	LGH Chemo	TestON, Oncologis				
16-Aug-2017 09:28:00 P	Pharmacy Chemo Clinical Check	Pharmacy Chemo Clinical Check - Text	LGH Chemo	TestON, Pharmacis				
15-Aug-2017 10:36:00 P	Treatment Calendar	Oncology Treatment Calendar	LGH Chemo	TestON, Oncologist				
10-Aug-2017 09:27:00 P	Chemotherapy Dosing Weight	Chemotherapy Dosing Weight - Text	LGH Chemo	TestON, Oncologist				
31-Jul-2017 15:50:00 PDT	Medication Administration Follow Up	Medication Administration Follow Un-Text	LGH Chemo	TestON, Oncology/				
21-Jul-2017 15:02:00 PDT	Medication Administration Follow Un	Medication Administration Follow Up-Text	LGH Chemo	TestON Oncology/				



By Clicking on the component headings Vital Signs & Measurements, Labs, or Imaging (4) from the Outpatient Chart (2) in the Provider View (1) it will bring you to the Results Review window. You can easily navigate to these sections by selecting from the menu (3). Click on the Vital Sign & Measurements.





You will now:

4

- 1. Be in the **Results Review** Window.
- 2. The tab which opens is defaulted to the Vitals-Recent tab.
- 3. This tab has a predetermined time frame to look back upon, otherwise known as the Clinical Range.
- 4. You can choose to adjust the date range forward or backwards by 3 days at a time.

<>・合	Results Review														[D] Full screen	Print	21 minutes ago
St 🖾	1																
Recent Results	Advance Care Planning	Lab - Recent	Lab - Extended	Pathology	Micro Cultures	Transfusion	Diagnostics	Vitals - Ree	ent Vitals -	itended							
Flowsheet:	/itals View	• [] Level:			@ Table	Group	() Eist	2				-				^
• •						Friday, J.	2-January-20	16 14:50 151	- Saturday, 1	January-2014	8 1450 PST (CI	inical Range)	3				

- 5. You can also choose to view Vitals-Extended tab.
- 6. This allows for a longer **Clinical Range** to be viewed.
- 7. You can choose to adjust the Clinical Range forward or backwards 6 months at a time.

🔹 🔹 🏫 Results Revi	ew)									(0) Full screen 🛛 👘 Pr	nt 😌 0 minutes
18: 💘											
Recent Results Advance Care F	Planning Lab - Recent Lab - Extens	ed Pathology Micro Cul	Itures Transfusion D	iagnostics Vitals - Rece	nt Vitals - Extended	100					
Flowsheet: Vitals View	• 📻 Level: Vi	als View	• @ Table 🔘	Group 💮 List		5					
			Friday: 15	lly 2016 15:50 PDT - 7	horsday, 35 February 7	018 14:50 PST (Clinical)	tange)				
Navigator	Showing results from (10-Jan-2017	05-Dec-2017) Show more	resulta				6				0
100 Mitch Firmer	Vitals View	05-Dec-2017 15:47 PST	28-Nov-2017 09:24 P51	14-Nov-2017 14:00 PST	17-Oct-2017 07:56 PDT	17-0d-2017 07:55 PDT	17-0d-2017 07:53 PDT	17-Oct-2017 07:51 PD7	17-Oct-2017 67:49 PDT	09-0ct-2017 13:43 PDT	09-0-6-2017 11:
KN wear signs	Measurements		1								
2 Pain Tools	Height/Length Measured Weight Measured Weight, Admit	150 cm				149 cm		150 cm; 149 cm	150 cm	150 cm	150 cm
Tel Pomani Pain Accessment										78 kg	
M Finnary Fain Monoperiors					82 kg		81 kg	79 kg			
	Weight Dosing	60 kg					83 kg	81 kg	80 kg	79 kg	78 kg
	Body Surface Area Measured										
	Body Surface Area Dosing	1.58 m2				0 m2	0 m2	1.83 m2	1.83 m2	1.81 m2	1.8 m2
	Body Mass Index Measured										
	Double Signed Measurements							Height and Weight			
	Vital Signs										
	Temperature Oral		36 DegC (C)								
	Temperature Tympanic										
	Peripheral Pulse Rate		18 bpm (L)								
	Respiratory Rate			16 br/min							
	Systolic Blood Pressure										
	Diastelic Blood Pressure										
	Mean Arterial Pressure, Cuff										
	Pain Tools										
	Pain Present			Yes actual or suspected	F.						
	Primary Pain Assessment										
	Location			Back *							

Note: Under the Lab tabs the view and options to change Clinical Range are the same.



5 **Results** view allows for graphing of data to note any trends or changes in a patients status. In the **Vitals-Extended** tab:

- 1. Check off **Temperature Oral**.
- 2. Click on the **Graph** ^{the} icon.
- 3. Note the data you are wanting appears graphed in a pop up window.



4. The **Seeker** icon is a quick locator tool that enables you to view a thumbnail sketch of the entire results flowsheet and focus on an area containing a cluster of results. The rectangle outlined represents the current screen display.



Note: These functions are also the same within the Lab tabs.



6 To access other results you would select the corresponding tab available within **Results Review**. If you are accessing the results from **Provider View** you would select the corresponding component heading be brought into the **Results Review**.

Recent Results Advance Care Planning Lab - Recent Lab - Extended Pathology Micro Cultures Transfusion Diagnostics Vitals - Recent Vitals - Extended

Note: For viewing any imaging that is available click on Diagnostics.

Key Learning Points

- You can filter the view range/type from the Provider View.
- You can preview documents and results within Provider View.
- Clicking on the component heading will take you into the corresponding section of the chart for a more comprehensive display.
- Within Results Review you can Graph results or choose to use the Seeker to hone in on a cluster of data.



PATIENT SCENARIO 3 – Chemotherapy Ordering

Learning Objectives

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

- Understand structure of Chemotherapy Regimens and Powerplans
- Order a Chemotherapy Regimen/Powerplan
- Managing cycles within Regimen
- Utilize dosing calculator for weight based medications

SCENARIO

As an Oncology Provider you are going to follow a patient through their journey. Your first patient is a 32 year old female born March 3rd, 1985. She has come to you via a referral made though her Surgeon, post right breast lumpectomy, now requiring chemotherapy. After reviewing her documents, labs, and imaging you decide she needs to be started on BRAJACT-G. Follow along to complete the required tasks.

As an Oncology Provider you will be completing the following activities:

- Navigating provider workflow MPage and Oncology flowsheet
- Ordering Chemotherapy plans and utilizing dosing calculator to adjust dosing
- Working with Regimens
- Ordering prescriptions

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Activity 3.1 – Chemotherapy Orders

1

Understanding the structure of Chemotherapy Orders:

PowerPlan: One individual order set or cycle of treatment. The orders are broken out into phases of treatment and days of treatment. **Powerplans** are indicated by

Regimen: A grouping of PowerPlans or individual cycles of treatment. One regimen may equal an entire protocol. Regimens allow clinicians to select a treatment regimen for a patient which shows the entire protocol including expected plans, cycles, dates of treatment, and status of each treatment cycle across time. Regimens can be viewed by clinicians to determine where a patient is in their treatment plan. The clinician view includes past, present, and future cycles of treatment. **Regimens** are indicated by includes past, present, and future cycles of treatment.

Note: the functionality of the regimen is different than a powerplan.

Naming convention for Oncology plans: ONC is the prefix for the naming convention of all Oncology plans.

From the orders tab click on The Powerplans, Chemotherapy folder \rightarrow disease/tumor group \rightarrow treatment intent \rightarrow Regimens/Powerplans



Hint: When searching for Oncology plans you can search by first two letters of tumor site (e.g. BR), protocol name, and/or ONC to filter list of Oncology plans.

Naming convention for PowerPlan: Oncology PowerPlans are indicated with a "P" indicating PowerPlan. (ex: ONCP BR BRAVA7)

Zero Time Orders- added to PowerPlans as an anchor order to allow accurate timing and sequencing on the eMAR (Electronic Medication Administration Record). No additional action is required for time zero order within plans.



Regimens contain prebuilt Pretreatment Plans which may include:

- Labs
- Diagnostics
- Other supportive meds

Oncology Powerplans are groups of orders categorized by phases, such as Chemotherapy, labs, diagnostics and scheduling which allow for orders within phases to be processed at different time points. The chemotherapy, diagnostic, and lab phases are future orders which require order completion (final doses) and activation. The scheduling and prescription phases are set to order now allowing for chemo appointments to be scheduled in advance and prescriptions to be processed and picked up now.

Note: The Chemotherapy Phase Includes:

- Pre-chemo metrics (indicators)
- Pre or post hydration (if recommended in protocol)
- Pre-meds
- Chemotherapy
- Supportive medication

Future Orders and Planned State: The ideal workflow in PowerPlans is one in which the physician enters future order details on the orders in the phase and immediately 'future' initiates the phase. At future initiation (signing the orders), the orders in the phase enter a **Future** status. When the patient presents for the lab draw, or for treatment, the appropriate clinician then **Activates** the Orders from the **Future Orders View**, in the plan profile.

View Excluded Components is a feature within an Oncology PowerPlan that allows the provider to select a drug or IV fluid within a plan that was not originally selected upon initial plan placement. This feature allows the drug to remain with offsets pre-determined within the plan build. All of the components of a particular PowerPlan will be available for selection prior to signing. Some components are pre-selected, where others are optional. In the example below, the optional leucovorin treatments are not pre-selected.

ON	CP G	I GIFFI	RB - Cycle 1, Chemotherapy (Day 1) (Future Pending) *Est. 3	1-Jan-2018 08:00 PST
				Day 1
	S	12	Component	Future Pending
0% T		`	Component	*Est. 31-Jan-2018 08:0
				Actions 🔻
			🔭 Zero Time	0 hr
			_	Planned
		8	🍞 irinotecan (irinotecan - oncology)	0 min
			180 mg/m2, IV, once oncology, administer over: 90 minute,	
			Day 1	Planned
	1		🖑 Choose leucovorin IV infusion or leucovorin IV Direct:	
		_	🍞 leucovorin (leucovorin - oncology)	0 min
			400 mg/m2, IV, once oncology, administer over: 90 minute,	
			May be infused at the same time as irinotecan using a Y-con	
		8	🔭 leucovorin (leucovorin - oncology)	0 min
			20 mg/m2, IV direct, once oncology, drug form: inj	
			Day 1	



icon, will bring the orders not originally

Signing the orders without selecting one of the leucovorin options means that they will become an excluded component. In the Example below, the leucovorin does not display.

ONCP GI GIFFIRB - Cycle 1, Chemotherapy (Day 1) (Future) *Est. 31-Jan-2018 08:00 PST - 31-Jan-2018 Last updated on: 30-Jan-2018 16:16 PST by: TestON, Oncologist/Hematologist-Physician, MD

				Day	/1
0		57	Component	Futi	Jre
00		3	Component	*Est. 31-Jan-	2018 08:0
				💡 Activate	Actions 🔻
			🚱 Choose leucovorin IV infusion or leucovorin IV Direct:		
		666	🔭 fluorouracil (fluorouracil - oncology)	<u>`@</u> 66'	+90 min
			400 mg/m2, IV direct, once oncology, drug form: inj, first do	Futi	ure
			Day 1		
		<u>`@60</u> ^	🍸 bevacizumab (bevacizumab - oncology)	<u>`</u>	+100 min
			5 mg/kg, IV, once oncology, administer over: 15 minute, dru	Futi	ire
			In 100 mL Sodium Chloride 0.9% (NS) over 15 minutes via in		
		600	🝸 atropine	000	
			0.3 mg, subcutaneous, q5min, PRN other (see comment), or	Futi	ure
	_		For early diarrhea, abdominal cramps, rhinitis, lacrimation, d		
		<u>60</u> 00	T fluorouracil (fluorouracil INFUSOR)	<u>, 19</u> 00,	+115 min
			2,400 mg/m2, IV, once oncology, administer over: 46 hour, d	Futi	ire
			Over 46 hours in Dextrose 5% (D5W) to a total volume of 230		

Clicking on the **View Excluded Components** selected prior to signing back into view.

🍖 🚫 🕂 Add to Phase 🗸 🛄 Comments

ONCP GI GIFFIRB - Cycle 1, Chemotherapy (Day 1) (Future) *Est. 31-Jan-2018 08:00 PST - 31-Jan-201 Last updated on: 30-Jan-2018 16:16 PST by: TestON, Oncologist/Hematologist-Physician, MD

				Day	y1
0		57	Component	Fut	ure
~		r	Component	*Est. 31-Jan-	2018 08:0
				💡 Activate	Actions 🔻
			🌀 Treatment Regimen		
		66	🔭 Zero Time	661	0 hr
			once oncology, 31-Jan-2018, Future Order, Day 1, -1	Fut	ure
		60	🍞 irinotecan (irinotecan - oncology)	`@6 6'	0 min
			180 mg/m2, IV, once oncology, administer over: 90 minute,	Futi	ure
			Day 1		
			It infusion or leucovorin IV infusion or leucovorin IV Direct:		
		•	🔭 leucovorin (leucovorin - oncology)		0 min
			400 mg/m2, IV, once oncology, administer over: 90 minute,		
			May be infused at the same time as irinotecan using a Y-con		
		•	🔭 leucovorin (leucovorin - oncology)		0 min
			20 mg/m2, IV direct, once oncology, drug form: inj		
			Day 1		
		- Gol	🔽 fluorouracil (fluorouracil - oncology)	San And	+90 min



When viewing the orders, some things to make note of are:

- 1. Blue note types divide the PowerPlan into phase headings (e.g. Chemotherapy, Next Cycle Labs, Prescriptions, Scheduling)
- 2. Green note types divide the PowerPlan into sections (e.g. Pre-Chemo Metrics, Pre-Medications, Treatment Regimen, Post-Treatment)
- 3. Yellow note types provide instructional information (e.g. Frozen Gloves, No Ice Chips, Ensure patient has taken pre-med, See Patient Handout)
- 4. Details contain instructions that are directed to the pharmacy for medication preparation or to nursing for medication administration (e.g. diluent information or special administration set details)

10	17	Component	Status	Dose	Details	~
⊿ ONCP	' BR BRAJ	DCARBT Cycle 1 - Cycle 1, Chemotherapy (Day 1) (Fut	ure - Review Req	uired) *Est.	26-Jul-2017 08:00 PDT - 26-Jul-2017 22:00 PDT	
Last u	pdated or	n: 25-Jul-2017 15:59 PDT by: TestON, OncologistHer	natologist-Physici	ian, MD		
Additi	ional revie	ew required. Review request sent to message center	pool LGH Chemo	Provider P	ool on 25-Jul-2017 15:59 America/Vancouver.	
	- 3	Pre-Chemo Metrics Pre-Medications				
	() ()	Patient to take own supply of pre-medications. RN/Ph prior to treatment.	armacist to confirr	m. Patient t	o take dexamethasone 8 mg PO BID for 3 days starting one day prior to DOCEtaxel. Patient must receive 3 doses	e
		ondansetron	Review Required	-	8 mg, PO, once oncology, drug form: tab, first dose: Routine, start: 26-Jul-2017 Prior to treatment Day 1	£
		dexamethasone	Review Requir	-	8 mg, PO, once oncology, drug form: tab, first dose: Routine, start: 26-Jul-2017 Prior to treatment Day 1	÷
	~	Optional: Frozen gloves starting 15 minutes before DO	Etaxel infusion un	ntil 15 minut	es after DOCEtaxel infusion; gloves should be changed after 45 minutes of wearing.	=
		Treatment Regimen				-
	2	Zero Time	Review Requi		once oncology, 26-Jul-2017, Future Order, Day 1	
	°	DOCEtaxel	Review Required	4	96.75 mcg_IV_once oncology_drug form; bag_first dose; Routine_start; 26-Jul-2017 In 100 to 500 mL (non-DEHP bag) Sodium Chloride 0.9% (NS) over 1 hour (use non-DEHP tubing). Day 1 Targ	
	°	CARBOplatin	Review Required	-	791.92/9 mg, IV, once oncology, drug torm: bag, trist dose: Koutine, start: 26-Jul-2017 In 250 mL Sodium Chloride 0.9% (NS) over 30 minutes. Day 1 Target Dose: CARBOplatin 6 AUC (CARBOplatin)	
	2	acetaminophen	Review Required	-	325 mg, PO, once oncology, PRN other (see comment), drug form: tab, first dose: Routine, start: 26-Jul-2017 For headache and rigors. Day 1	
⊿ ONCP	BR BRAJ	DCARBT Cycle 1 - Cycle 1, Next Cycle Labs (Day 1) (Dis 30-Oct-2017 22:50 PDT by SYSTEM SYSTEM Care	scontinued) *Est. 2	27-Sep-201	7 14:01 PDT - 30-Oct-2017 22:50 PDT	
		Differential (CBC and Differential)	Ordered		Blood Routine Unit collect Collection: 2017-Sen-27.14:01 PDT once	
	1 🕅	Platelet Count	Ordered		Blood Routine Unit collect Collection: 2017-Sep-27 14:01 PDT, once	
	4 66 🕅	Creatinine Level	Ordered		Blood, Routine, Unit collect, Collection: 2017-Sep-27 14:01 PDT, once	
	- <u>7</u>	MUGA scan or echocardiogram prior to cycle 1 and Cy	cle 5 then every 3 o	or 4 months	until completion of treatment:	
	Ŕ	NM MUGA			T:N	
	2	EC Echocardiogram			T;N	
	2	Bilirubin Total			Blood, once, Order for future visit	
	2	Protein Level (Total Protein Level)			Blood, once, Order for future visit	
	17 7	Albumin Level			Blood ance Order for future visit	*
🛣 Detail	s					
Orders Fo	or Cosignati	Ire Orders For Nurse Review Save as My Favorite			Orders For Signatu	ire
					PRODEC ONTEST ONAMERNI Wednesday, 29-November-2017, 09-	49 PC



With your patient perform the following ordering tasks:

2 In order to place an order for a particular treatment, click on the + Add icon to right of **Orders** in the menu tab.



Note: You are able to access the Add New Order window by clicking the ^{+ Add} icon above the orders tab.

Search ONC BR to populate list of Oncology Breast plans. Select ONC BR BRAJACT-G Regimen.

	SCOTT-LEARN, CHELSEA - Add Order SCOTT-LEARN, CHELSEA	
[Allergies: No Known Allergies Constant Search: ONC BR Adv	
	Pov Add Disk ONC BR BRAJACTW Disk ONC BR BRAJDC Tria ONC BR BRAJDCARBT Pro ONC BR BRAJTDC	SCOTT-LEARN, CHELSEA - Add Order SCOTT-LEARN, CHELSEA Allergies: No Known Allergies
	Lab Lab Met Cor Pati Cor Pati Cor Cor Cor Cor Cor Cor Cor Cor	Search:
	CONC BR BRAVGEMP Carboplatin Tenter to Search	



You will be required to enter an estimate start date/time. **Please note this is the READY TO TREAT date which will be used for reporting purposes**. For practice, enter today's date.

Note: Entering a value for the day, week(s), or month(s) field will automatically calculate the correct estimate start date and time from today. Click ok.

P SCOTT-LEARN, CHELSEA - Add Regim	en 💌
ONC BR BRAJACTG	
Select Treatment Start	
In Day(s)	
In Week(s)	
In Month(s)	
Est. Start: D6-Dec-2017 🚔 💌	
SCOTT-LEARN, CHELSEA - 700008618	OK Cancel

Click done in the add order window.

P SCOTT-LEARN, CHELSEA - Add Order						
SCOTT-LEARN, CHELSEA	DOB:03-Jun-1985 Age:32 years	MRN:700008618 Enc:7000000016026	Code Status:	Process: Disease:	Location:LGH Chemo Enc Type:Pre-Outpatient	
Allergies: No Known Allergies	Gender:Female	PHN:9876416698	Dosing Wt:63 kg	Isolation:	Attending:	
Allergies: No Known Allergies Search:	Gender:Female	PHN:9876416698 Type: & Ambulatory - h within: All	In Office (Meds in Office)	Isolation:	Attending:	
					SCOTT-LEARN, CHELSEA - 70000861	8 Done





3

The pre-selected **Pretreatment** Powerplan is highlighted. From the orders profile view click **Start**.

ONC BR BRAJACTG (Pending)	
🖉 🕇 Add 🖺 Document Response 🗳 View Responses	
ONCP BR PT VIACTG Pretreatment Plan Start	*Est. Start Date: 06-Dec-2017 Skip
ONCP BR BRAJACTG Cycles 1 to 4 - Cycle 1	*Est. Start Date: 06-Dec-2017
ONCP BR BRAJACTG Cycles 1 to 4 - Cycle 2	*Est. Start Date: 20-Dec-2017
ONCP BR BRAJACTG Cycles 1 to 4 - Cycle 3	*Est. Start Date: 03-Jan-2018
ONCP BR BRAJACTG Cycles 1 to 4 - Cycle 4	*Est. Start Date: 17-Jan-2018
ONCP BR BRAJACTG Cycles 5+ - Cycle 5	*Est. Start Date: 31-Jan-2018
ONCP BR BRAJACTG Cycles 5+ - Cycle 6	*Est. Start Date: 14-Feb-2018
ONCP BR BRAJACTG Cycles 5+ - Cycle 7	*Est. Start Date: 28-Feb-2018
ONCP BR BRAJACTG Cycles 5+ - Cycle 8	*Est. Start Date: 14-Mar-2018
	Extend
T Details	
Orders For Cosignature Orders For Nurse Review	Sign

4 The add plan window opens. The ONCP BR BRAJACTG **Pretreatment Plan** is defaulted to start this visit. Confirm that the start date/time is correct and click **OK**.

SCOTT-LEARN, CHELSEA - Add Plan		
ONCP BR BRAJACTG Pretreatment Plan		
Select Visit and Start Time		
This Visit Confirm ON	CP BR BRAJACTG Pretreatment Plan S	Start Date/Time
Future Inpatient Visit 06-Dec-2017	≑ 💌 1305 ≑ PST	
Future Outpatient Visit		
Confirm Phase Action		
Phase	Start Date/Time	Action
ONCP BR BRAJACTG Pretreatment Plan	06-Dec-2017 13:05 PST	Order now 🗸
SCOTT-LEARN, CHELSEA - 700008618		OK Cancel

5

You are able to select and deselect pre-labs and diagnostics here by clicking the box to left side of the order within the ONCP BR BRAJACTG **Pretreatment Plan**.

8	9 19 1	Component	Status	Dose		Details
ONCP	ONCP BR BRAJACTG Pretreatment Plan (Initiated Pending)					
	2	Differential (CBC and Differential)				Blood, Routine, Collection: T;N, once
	2	Platelet Count				Blood, Routine, Collection: T;N, once
	Ż	Bilirubin Total				Blood, Routine, Collection: T;N, once
	2	Alanine Aminotransferase				Blood, Routine, Collection: T;N, once
	<u> </u>	If clinically indicated:				
	2	NM MUGA				T;N, Routine
	Ż	EC Echocardiogram				T;N, Routine



Click Orders for Signature. Review orders one last time and click Sign. Click Sign. Note the

icon to the left of the order (1) indicates order requires Nurse review and the \Box icon indicates an order (2).

٢	Add Add Add Document Medication by Hx Reconciliation Orders Medication List Document In Plan	Check Interactions	Reconciliation Status ✓ Meds History 🥥 Admission 🌒 Outpatient
	View Orders for Signature Orders for Signature ONC BR BRAJACTG (Started) U-ONCP BR BRAJACTG Pretreatment Plan (initiated) Plans	Image: Start: Off-Dec-2017 13:05 PS Image: Start: <th< th=""><th>PST Stop: None View All Status Dose Details natologist-Physician, MD Ordered Blood, Routine, Collection: 06-Dec-2017 13:05 PST, once</th></th<>	PST Stop: None View All Status Dose Details natologist-Physician, MD Ordered Blood, Routine, Collection: 06-Dec-2017 13:05 PST, once
	Document In Plan Suggested Plans (0)	 ✓ 66 ∑ Platelet Count ✓ 66 ∑ Bilirubin Total ✓ 66 ∑ Alanine Aminotransferase (1) (2) 	Ordered Blood, Routine, Collection: 06-Dec-2017 13:03 PS1, once Ordered Blood, Routine, Collection: 06-Dec-2017 13:05 PST, once Ordered Blood, Routine, Collection: 06-Dec-2017 13:05 PST, once

6

Click on ONC P BR BRAJACTG in orders profile.



Click the down arrow to the left of the ONCP BR BRAJACTG **Pretreatment Powerplan** to minimize the Pretreatment plan. You can now view all of the cycles within the **Regimen**.

🥝 🕂 Add 🛅 Document Response 🖷 View Respons	es	
→ ONCP BR BRAJACTG Pretreatment Plan		Start Date: 06-Dec-2017 13:05 PST
		Repeat
		*E + C + D + OC D - 2017
⊜ CNC BR BRAJACTG		
ONCP BR BRAJACTG Pretreatment Plan Dec 6, 2017		
No Variance From Protocol		
V ONCP BR BRAJACTG Pretreatment Plan		
This plan matches the protocol.		

Click Start

🥝 🕂 Add 🖺 Document Response 🖷 View Responses	
ONCP BR BRAJACTG Pretreatment Plan	Start Date: 06-Dec-2017 13:05 PST
	Repeat
ONCE BR BRAACTG Cycles 1 to 4 - Cycle 1	*Est. Start Date: 06-Dec-2017
ONCE BR BRAJACTG Cycles 1 to 4 - Cycle 2	*Est. Start Date: 20-Dec-2017
ONCP BR BRAJACTG Cycles 1 to 4 - Cycle 3	*Est. Start Date: 03-Jan-2018
ONCP BR BRAJACTG Cycles 1 to 4 - Cycle 4	*Est. Start Date: 17-Jan-2018
ONCP BR BRAJACTG Cycles 5+ - Cycle 5	*Est. Start Date: 31-Jan-2018
ONCP BR BRAJACTG Cycles 5+ - Cycle 6	*Est. Start Date: 14-Feb-2018
ONCP BR BRAJACTG Cycles 5+ - Cycle 7	*Est. Start Date: 28-Feb-2018
ONCP BR BRAJACTG Cycles 5+ - Cycle 8	*Est. Start Date: 14-Mar-2018
	Extend



The Add Plan window opens. Confirm the plan details here.

7

NCH	P BR BRAJACTG Cycles	1 to 4	
Ente 1	r Cycle		
Selec	ct Visit and Start Time		
0	This Visit	Estimated Start Date of Chemotherap	y (Day 1)
0	Future Inpatient Visit	◎ In Day(s)	
	Fotore Option Visit	In Week(s)	
۲	Future Outpatient Visit		
		In Month(s)	
		Est. start 06-Dec-2017 🚔 💌 080	D 🖶 PST
Cont	firm Phase Action		
	Phase	Start Date/Time	Action
Œ	Chemotherapy (Day 1)	*Est. 06-Dec-2017 08:00 PST	Order for future visit
Ħ	Next Cycle Labs (Day 1)	*Est. 18-Dec-2017 08:00 PST	Order for future visit
	Diagnostics (Days 1)	*Est. 06-Dec-2017 08:00 PST	Order for future visit 🔹
Ħ	Scheduling	06-Dec-2017 08:00 PST	Order now 👻
Ħ			
Addi	itional Review Settings Review Required		

Note: If additional provider review is required click on the Review Required box (1) and search for Provider using the icon. Click **OK**.



8 From the orders profile review the pre-selected pre-medications, pre-metrics, supportive

medications, etc. Click on the icon beside the Doxorubicin order to access the dosing calculator.

P	0	+ A	dd to Phase 🗸 🛕 Check Alerts 🛄 Comments	
ON	CP B	R BRA	JACTG Cycles 1 to 4 - Cycle 1, Chemotherapy (Day 1) (Future	Pending) *Est. 06-Dec-
	S	\$	Component	Day 1 Future Pending *Est. 06-Dec-2017 08: Actions マ
			 dexamethasone 8 mg, PO, once oncology, drug form: tab to 60 minutes prior to treatment. Day 1 	Planned
			 aprepitant mg, PO, once oncology, drug form: cap to 60 minutes prior to treatment. Patient to take 80 mg da 	
			Prochlorperazine 10 mg, PO, once oncology, PRN other (see comment), drug Day 1	
			To metoclopramide 10 mg, PO, once oncology, PRN other (see comment), drug Day 1	
			🍊 Treatment Regimen	
	Г	_	🔭 Zero Time	0 hr Planned
			DOXOrubicin (DOXOrubicin - oncology) 60 mg/m2, IV direct, once oncology, drug form: inj Day 1	0 min Planned
			Cyclophosphamide (cyclophosphamide - oncology) 600 mg/m2, IV, once oncology, administer over: 20 minute, In 100 to 250 mL Sodium Chloride 0.9% (NS) over 20 minute	+20 min Planned

Note: The pre-chemo metrics are predefined within the plans and built as indicators. You can filter the Regimen by preselected orders here using the funnel icon $\frac{1}{2}$. Find the first Chemotherapy drug within the Chemotherapy phase.



Confirm the dosing details and click Apply Dose.

2) Calculated dose: 102				
.,	2.6 mg	Percentag	Day 1	*
3) Dose Adjustment: 102	2.6 mg	100 Contraction of total dos		
4) Final dose: 102	2.6 mg	60		
5) Standard dose:	mg	mg/m2		
6) Rounding rule: No	rounding	-		
7) Adjust Reason:		•		Ŧ
B) Route: IV c	direct		-	
Ethnicity: Height: 168	 8 cm	ource:	05-Dec-2017 10:34 168.00 cm Height/Length Measured	
Actual weight: 63	kg	Source:	05-Dec-2017 10:34 63.000 kg Weight Dosing	r
Adjusted weight: 63	kg	Adjustment:	Actual (no adjustment)	
Serum creatinine:	mg/c	L Source:	Manually entered	•]
DrCl (est.):		Algorithm:	Cockroft-Gault (Actual Weight)	Missing data
		Weight Used for CrCl:		
Body surface area: 1.7	'1 m2	Algorithm:	Mosteller	•

Note: Once the dose is applied (verified) the order sentence will become bold.

You will now be returned to the order profile screen. Access the **Dosing Calculator** for the Cyclophosphamide and repeat the dosing calculator review for all of the weight/BSA based medication dosing as needed.

9	Click Orders For Signature	. Click Sign	. Click refresh	n 🎝 2 hor
---	----------------------------	--------------	-----------------	-----------



Key Learning Points

- PowerPlans are equivalent to one Cycle of a Protocol
- Regimens are collections of PowerPlans, equivalent to an entire Protocol
- PreTreatment Plans may contain Labs, Diagnostics and some Supportive Meds
 - The Dosing Calculator will need to be accessed for all weight/BSA based medications



PATIENT SCENARIO 4 – Clinic Note Documentation

Learning Objectives

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

- Tag results for inclusion in a Note.
- Select appropriate Note Types and Templates
- Utilize Auto or Free text to populate a Clinical Note.

SCENARIO

Now that the patient's reason for visiting the clinic has been addressed, you will complete your documentation for the visit.



Activity 4.1 – Creating a Note

1

Start by "tagging" some results for inclusion in a Clinical Note. From the **Provider View**, click on **Labs** within the **Outpatient Chart** tab. Choose which values are pertinent; click on them one by one then click tag. Alternatively, hold the Shift key down and select multiple results to Tag all at once.

Uncelogy		Outpatient Chart	22 Oncology Triage		22 Summary	12	Chemotherapy Dosing	22	Orders	21	Rounding	35	+
Results Review													
Orden	🕈 Add	Histories	Labe								1 alar	I art 7 months	Last 7 m
Medication List	+ Add	Active Issues	Laus								Barren and	and a monoto	1 644 5 64
Documentation	+ Add	Documents (4)			007 13, 2017						10		
		Pathology (0)	4 Chemistry								_		
Allergies	🕈 Add	Chief Complaint	Sodium	Mamm	138					Sodiu	m		
Diagnoses and Probl		Vital Signs & Measurements	POCASSIUM	annes.	transmitter to the second					138 m	mol/L		
Histories		Visits (4)	Calcium	mmal/L	2.15								
		Labs	Glucose Random	mmol/L	6.0					Date/Til 13/10/2	ne 017.09-00	Status	(Verified)
MAR		Micro Cultures (0)	Creatinine	smol/l.	7 200					tinemal.	Lain	\$1	el.thah
Form Browser		Imaring (7)	Glomerular Filtratio	est/min	60							10*	
Patient Information		Links			*	.m.	24						
Interactive View and	80	Links History of Present Illness	" Displaying recent res	ilto up to 3(columns of information f	e the last 3 months							

Note: the recommended workflow is to Tag results that you may wish to include in a Clinical Note at the time of reviewing the results

2 The top 5 communication note types display at the bottom left hand corner of the **Outpatient Chart**. Additional Note Types are available. Click **Select Other Note**.

Provider View	者 📄 📥 📄 🔍 🔍 100%		
Oncology	Outpatient Chart		
Results Review			
Orders 🕂 Add	Imaging (0)		
Medication List 🛛 🕂 Add	Links		
Documentation 🕂 Add	History of Present Illness		
	Allergies		
Allergies 🕂 Add	Home Medications		
Diagnoses and Problems	Physical Exam		
Histories	Follow Up		
MAR Summary			
MAR	Create Note		
Form Browser	Oncology Consultation Note		
Patient Information	Oncology Medical Communica		
Interactive View and I&O			
Lines/Tubes/Drains Summary	Oncology Medical Follow-Up Clinic Note		
Growth Chart	Opcology Modical Traatmont		
Immunizations	Clinic Note		
Clinical Research	Oncology Transfer Summary		
CareConnect	Soloct Other Note		



3 Click on Type to see the selection of available Note Types.

Add [@] New Note X List	Consent Oncology Family Conference Note Neurological Determination of Death Oncology Conference Note Onc. Gynecologic Clinical Trial Note Onc. Gynecologic Consult Clinic Note Onc. Gynecologic Follow-Up Clinic Note Oncology Gynecologic Communication Oncology Gynecologic Consult Onc. Hereditary Consult Clinic Note Onc. Hereditary Follow-Up Clinic Note Oncology Hereditary Consult Onc. Medical Clinical Trial Note Onc. Medical Consult Clinic Note Onc. Medical Follow-Up Clinic Note
Note Type List Filter: Position *Type:	Oncology Medical Communication Oncology Medical Consult Onc. Other Clinical Trial Clinic Note Oncology Other Communication Oncology Other Consult Onc. Other Follow-Up Clinic Note Onc. Other Treatment Clinic Note Onc. Pain and Symptom Communication Note Onc. Pain/Symptom Clinical Trial Note Onc. Pain/Symptom Clinical Trial Note
Title:	Oncology Pain and Symptom Consult

4 Once you have selected your Note Type you must also select a template. Note Templates allow you to organize your note with headers and use the related auto text.

*Note T	Note Templates							
1	Name 👻	Description						
*	Absence Note	Absence Note Template	Â					
*	Admission H & P	Admission History & Physical Note Template	ш					
*	Anesthesia Consult	Anesthesia Consult Template						
\$	Antenatal Testing	Antenatal Testing Note						
*	APSO Note	APSO Note Template						
*	Clinic SOAP Note	Clinic SOAP Note Template						
*	Confirmation of Neurological Determination of Death Ad	u Adults and Children age > or = 1 year						
\$	Consult Note	Consult Note Template						
*	Discharge - ONC Transfer of Care	Discharge - ONC Transfer of Care						
\$	Discharge Summary	Discharge Summary	-					

OK Cancel



5 Try this; select the Note Type for Oncology Pain and Symptom Consult and the SOAP Note template and then click OK. You will know that you have done this right based on the details that appear at the bottom of your blank note.



Now, go back to your top five list and click on Oncology Consultation Note. Hover around headings within the note to refresh, insert free text or remove the heading from the note altogether.



6



7 You can free text in the available space under each heading. Alternatively you can use auto text by typing a comma (,) and a drop down box opens. The commonly used oncology auto text can be found by typing **"onc**. Double-click to choose an auto text and the chosen text will then automatically populate for you to edit as necessary.



Front End Speech Recognition (FESR) can also be used to populate the clinical notes.

The lab values that you tagged will be on the left. Drag and drop these to the Lab section.



8



9 Continue to fill out your note. To complete documentation at a later time; click Save & Close at the bottom of the window. Your unfinished note will be under Documentation and the Status will be "In Progress."

Note: Documents in progress are not visible to other health care professionals.

10 When ready to finalize the note, go to **Provider View** and within the **Outpatient Chart**, select **Other Note**, click on **List** and choose the Note that you want to complete. Click **Sign/Submit** when done.

	inn
Oncology	Quitatient Chart St Onc
Results Review	
Orders 🕂 Add	Home Medications (3)
Medication List 🛛 🕂 Add	Links
Documentation 🛛 🕂 Add	History of Present Illness
	Allergies
Allergies 🕂 Add	Physical Exam
Diagnoses and Problems	Follow Up
Histories	Crosto Noto
MAR Summary	
MAR	
Form Browser	Oncology Medical Communica
Patient Information	Oncology Modical Follow Up
Interactive View and I&O	Clinic Note
Lines/Tubes/Drains Summary	Oncology Medical Treatment
Growth Chart	Clinic Note
Immunizations	Oncology Transfer Summary
Clinical Research	Select Other Note
· · · · · · · · · · · · · · · · · · ·	

< 👻 🕇 Documentation				[□] Full so			
+ Add 📝 Sign 💭 😂 Forward 🔲 Provider Letter 🚰 Modify 🖿 🕿 🖤 📰 🔐 In Error 🛄 Preview 🏷 New Note 🛛 List 👍							
Display : All 🔹 🛄							
Service Date/Time 🗸 Subject	Туре	Facility	Author; Contributor(s)	Status 5			
22-Jan-2018 10:40:00 PST Oncology Consultation Note	Oncology Medical Consult	LGH Chemo	TestON, Oncologist/Hematologist-Physician, MD	In Progress			



Key Learning Points

- You can access the most commonly used Note Types from the Outpatient Tab in the Provider View.
- Auto-Text can be used within the 'Free-Text' areas of a note. You access this by using a (,)
- FESR can also be used to populate a Note.
- While reviewing results, you can Tag them to easily pull them into your note.
- Remember, if you Save a note without signing it, it will not be visible to others.





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