



## Hospital EHR Physician Newsletter

August 2015, Volume 2, Issue 4

For non-urgent questions, comments, or suggestions regarding the EHR or this newsletter, please contact me directly.

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### Topics this month

#### Critical Updates

PathNet Migration for lab, August 16<sup>th</sup> (see also additional attachments)

ICD10 PTE (Physician Transition Early), August 25<sup>th</sup>

Patient Discharge Medication List Changes, September 1<sup>st</sup>

#### Informational Updates

Ascension contract changes - Lexicomp replacing Micromedex

Improved access to UpToDate, August 25<sup>th</sup>

Procedure List – Invision interface inactivation

Primary Care Provider in Banner Bar

In-house Support Reminder

### Critical Updates

#### PathNet Migration for Lab, August 16<sup>th</sup>

CSM will migrate from the current lab system, Cerner Classic, to Cerner PathNet on August 16, 2015. The new system will improve multiple lab processes as well as integration with the EHR. Most changes will be seen in the lab department but there will be some visible changes noted on the clinical side also. While there is no change in our workflow or ordering processes, some tests will have changes in nomenclature and/or structure. A noted improvement will also be seen regarding pending order statuses on the flow sheet.

Though no PowerPlan favorites will be disabled, there will be an impact to individual lab orders in favorite folders.

Please reference the attached PathNet communication for more details.

## ICD10 PTE (Physician Transition Early), August 25<sup>th</sup>

10/1/2015 is the ICD10 compliance date when all diagnoses require ICD10 in place of ICD9. To increase early familiarity with these new codes, we will be implementing a tool in the EHR on August 25th called PTE (Physician Transition Early). This tool allows dual coding with ICD9 and ICD10 when using the Diagnosis list in the EHR. A PTE job aide and informational video for hospital workflow will be available on DocPort by Tuesday August 18th.

## Patient Discharge Medication List Changes, September 1<sup>st</sup>

Currently the medication lists that patients receive at discharge are causing confusion for some patients. The goal of the current design is to point out changes in comparison to home medications on admission, but in reality it is creating new risks that do not outweigh the proposed benefits. Work is being done to improve clarity with this type of format. In the meantime, in coordination with the Readmission Reduction Committee, it has been decided to migrate back to a simple list.

As a reminder, <Notes for Patient> is visible only on the patient list and not on the actual prescription. This feature remains with the new simple list.

Orders Prior to Reconciliation				Orders After Reconciliation			
Order Name/Details	Status			Order Name/Details	Status		
<b>Home Medications</b>							
furosemide (Lasix 40 mg oral tablet) 1 tab(s), PO, qDay, 30 tab(s)	Documented			furosemide (Lasix 40 mg oral tablet) 1 tab(s), PO, qDay, 30 tab(s)	Docume		
insulin (NovoLOG Mix 70/30)	Modify			insulin (NovoLOG Mix 70/30)	Modify		

\*\*Some patients admitted from the clinic have suspended medications on their home medications list.

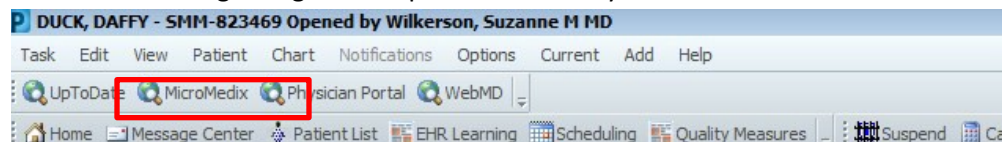
insulin aspart (NovoLOG 100 units/mL) sliding scale, SubCUTANEOUS, qidACbedtime, AC: BS 120-170=1 Unit; 171-220=2 Units; 221-270=3 Units; >270=3 Units. HS: BS 170 -220=1 Unit; 221-270=2 Units; > 270=2 Units, 10 mL	Suspended				
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Unfortunately these medications are not called out as suspended on the new simple medication list. Thus, please discontinue all suspended medications at hospital discharge if they are not being resumed. As a precaution, the "Acknowledge Remaining Home Meds" function does not continue suspended medications.

## Informational Updates

### Ascension contract changes - Lexicomp replacing Micromedex

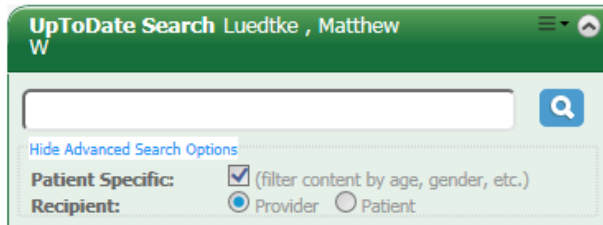
Lexicomp will be replacing Micromedex as our new medication electronic reference tool. Most of you have a Micromedex link in your EHR toolbar. This will be replaced with a Lexicomp link. The exact conversion date has not yet been determined but will happen by September 30th at the latest. An Ascension FAQ regarding Lexicomp is attached for your reference.



## Improved access to UpToDate, August 25<sup>th</sup>

In addition to the current link in the tool bar, UpToDate will also be available as a separate section/widget on the following summary pages:

Inpatient Summary, Ambulatory Summary, and ED Summary

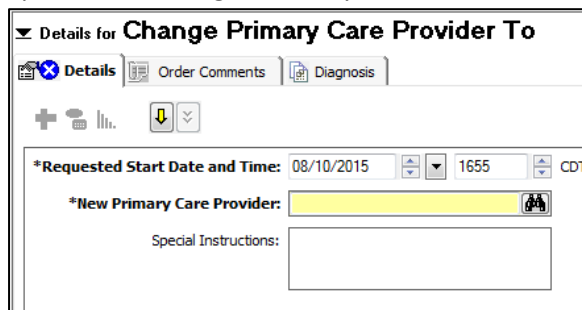


## Procedure List – Invision interface inactivation

Some EHR users had a display interface between Invision (registration and billing system) and the EHR procedure list. This sometimes created duplicate or erroneous entries. To avoid this problem, the interface has been inactivated. The current and past recommended workflow is that all procedures must be manually entered by the provider performing the procedure or a designee.

## Primary Care Provider in Banner Bar

New order – if you find that the PCP listed in a patient’s banner bar is inaccurate, please enter the following order. It will not create an automatic change but will task a HUC who can arrange to have it updated in our registration system which interfaces the EHR.



## In-House Support Reminder

In-house support is available Monday through Friday from 8am to 4pm on both Ozaukee and Milwaukee campuses. To contact a support team member, dial the Vocera and request **“EHR support.”**

Vocera numbers vary by campus.

**Ozaukee Vocera Phone: 262-243-6707**

**Milwaukee Vocera Phone: 414-585-1995**

**As a reminder, for urgent/emergent EHR technical assistance outside of the above hours, contact the Help Desk at 414-326-2400. When asked for an extension, choose “7” for expedited transfer to a service desk analyst.**

**CSM will migrate from the current lab system, Cerner Classic, to Cerner PathNet on August 16, 2015.**

The new lab system creates some changes in lab order nomenclature and also provides improved visibility of pending order statuses.

Please review the information below carefully.

- **PowerPlans Favorites**

- Favorite PowerPlans that contain lab orders changes **will not be disabled**. You will, though, receive an alert asking you to resave these PowerPlans. This is not required but is recommended to avoid seeing alerts with future use. Attached job aide details the process for resaving updated PowerPlans.

- **Individual Lab orders**

- Public order folders
  - ▬ Inactivated/renamed orders and orders with changes to order details will be automatically *updated* during the downtime
- Personal favorite order folders
  - ▬ Inactivated/renamed orders will be *automatically removed* during the downtime.
  - ▬ Orders that are not inactivated but have changes in details will be *manually updated* by an IT analyst during the downtime. As the manual update could be a prolonged process it is recommended to not use your favorite order folder until after 12noon on 8/16.
  - ▬ Repopulation of personal favorite folder requires a new search and addition of the order to the folder by the individual provider.

- **New “Body Site” field on Microbiology orders**

- You will notice a new, **required Body Site field** on the order details for micro orders.
- Knowing the site of the culture allows lab to set up the appropriate media. It also lets them know if identified organisms are consistent with normal flora for that site.

- **Lab Flowsheet Improvements**

- Microbiology – improved status details. Culture specimens visible as soon as collected.
- Transfused blood products – new addition. Click on the TRANSFUSED cell to get product details.

Lab View	06/01/2015 2:52 PM CDT	06/01/2015 1:56 PM CDT	06/01/2015 1:55 PM CDT	06/01/2015 10:46 AM CDT	06/01/2015 9:55 AM CDT	06/01/2015 8:00 AM CDT
<b>Blood Bank Results</b>						
ABO Rh Interpretation						A POS
Antibody Screen Interpretation						Negative
<b>Crossmatch</b>						
Crossmatch Interpretation						Compatible
<b>Transfusion Summary</b>						
Transfused	TRANSFUSED					

- **Orders Tab**

- More detailed descriptions of collection and in-process statuses.

Laboratory	
Urinalysis Macro Rfix Micro Rfix Culture	Ordered (Collected)
Thyroid Antibody Panel	InProcess (In Process)
Crossmatch	Ordered (In-Lab)
Crossmatch	InProcess (In Process)
Potassium Level	Ordered (Dispatched)



# PathNet Activation Command Center Hours

## EHR Command Center

**CSM Milwaukee Women's Hospital – Sr. Elizabeth Ann Seton #1**

- **Command Center Help Line: 414-585-1111**
- **Vocera: "EHR Roamer"**
- **Online: <http://activationissues>**
- **IS Service Desk: 414-326-2400**

## Hours of Operation:

**August 16<sup>th</sup> Opens at 1:00 am**

**August 30<sup>th</sup> Closes at 2:00 pm**

## For PathNet assistance/questions:

- **Contact your Super User or EHR Roamer**
- **If Super User or Roamer unavailable, call the Command Center**
- **Low priority issues can be entered using the online form at the website listed above**

*For assistance/questions unrelated to PathNet call:*

- *"EHR Support" on Vocera during normal support hours (EHR usage/non-technical issues)*
- *IS Service Desk (technical issues)*

***\*\*Directors/Managers/Super Users – Please make sure to check the EHR Intranet at the start of your shift for updated FAQs and Tips and Tricks\*\****