# Zynx ViewSpace™

# **PowerPlans**



### ViewSpace™

ViewSpace<sup>™</sup> is an on-line forum for PowerPlan /Orderset review.

Once the build team has a rough cut of a PowerPlan (Orderset), they will have it published to ViewSpace<sup>™</sup>. Physicians and clinicians reviewing the PowerPlan will be notified as to which file to look in and how long they have to make comments. Those comments will be compiled into a report and given back to the build team.

In ViewSpace<sup>™</sup>, reviewers can access the evidence (both Zynx and custom), access the quality measures, leave comments on any individual line item and on the order set as a whole. They can also read the comments of other reviewers and reply to them.

The PowerPlan builder saves and uses the comments for Edits

# Accessing ViewSpace<sup>™</sup>

#### LINK IS AT BOTTOM OF REQUEST

PowerPlan Review Request

As per CSM policy, PowerPlans are now created, reviewed, and accepted by clinicians electronically. Three rounds of provider review will take place reflecting feedback and editing. Following the review, a final copy of the PowerPlan will be sent to the provider for electronic acceptance or rejection.

After approval, PowerPlans will be reviewed every 2 years or as needed.

NOTE: Paper copies will no longer be distributed and email feedback will no longer be accepted.

At this time, you are being requested to review the following e NOTE: If this PowerPlan does not pertain to you - please disr Please follow the instructions as outlined below. You will get an email with a link like this, just click the link... Found at BOTTOM of page

- Instructions can also be accessed from this link: (availab
- <u>ViewSpace™ on-line forum for powerplan /orderset review</u>
- If you wish to have a printed copy of the instructions, you can call or email Julie Kreckow

Thank you for your participation,

Please contact Julie Kreckow with any questions or problems you may have.

Active Assignments		·······			
Content	Workflow	Step	Start	End	Status
Breast Reduction Post	Plastic Surgery	Clinician/Provider Review 2	08/13/2013	08/22/2013	In Progress [8 days left]
A rassion ic					



### Accessing ViewSpace<sup>™</sup>

ViewSpace - Windows Internet Explorer	CORP. or Wide MILLING Manual Academy (11) 111	
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<b>◎zynxhea</b>	lth	ViewSpace <sup>™</sup>
		First Name : Last Name :
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		© 2013 Zynx Health Incorporated. All Rights Reserved.
←	1	III +

![](_page_4_Picture_2.jpeg)

# Reviewing in ViewSpace<sup>™</sup>

Content Reviewer - Windows Internet Explorer				
Order Set: - Breast Reductio	n Post		and	you will be taken to
Order Set 🔻   Drug Info 🔻   Print 🖲	I Notes   Help		the V	iewSpace™ reviewer.
Evidence				
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Order Set General Fe	edback		St	art New Topic   Reply
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🔲 T;N Med/Surg - Telemetry				
T;N ICU			Or	der Set General Feedback
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Columbia St Marv's				
A Passion for Patient Care				

### Starting a New Topic

Content Reviewer - Windows Internet Explorer	And and a second	
Order Set: - Breast Reduction Pos	st	
Order Set ▼   Drug Info ▼   Print ▼   No	otes   Help   Evidence	Search
Order Set General Feed ▼ T;N every 15 minutes X 3, then every every hour X 1, then every 4 hours X 24	back comments (5) y 30 minutes X 2, then hours, then every 8 hours	Item Comments: Bathroom Privileges Start New Topic   Reply
Bedrest	Comments (0)	I here are currently no comments.
T;N For hours.		
Bathroom Privileges	Comments (0)	
Up With Assistance	Comments (0)	
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Ambulate	Comments (0)	
aid with assist begin day of surgery	- 1	
Step 1: Click the line Where you would like to comment.	Comments (0) Comments (0) Comments (0) Select checkbox and click Submit when your review is complete	Click the "Start New Topic" button.

Columbia St. Mary's

![](_page_7_Figure_0.jpeg)

### Starting a New Topic

Content Reviewer - Windows Internet Explorer	Instant - Manual Ref.	
Order Set: Total Hip Replacement - Hip/Kn	ee Replacement_	Surgery_Post_DRAFT
Order Set ▼   Drug Info ▼   Print ▼   Notes   Help   Ev	idence	Show Hidden Comments Search
Order Set General Feedback	Comments (0)	Item Comments: Assess for bleeding Start New Topic   Edit Topic   Reply
Nursing Orders	Comments (0)	add dressing changes - reinforce with blue dressing
Assessments	Comments (0)	
🗹 Assess for bleeding	Comments (1)	
Assess neurovascular status	Comments (0)	
Your comment will	Comments (0)	
	Comments (0)	Order Set General Feedback
Measure intake and output	Comments (0)	Start New Topic   Edit Topic   Reply
		There are currently no comments.

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![](_page_9_Picture_0.jpeg)

![](_page_10_Figure_0.jpeg)

Reply	ving to a	Торіс
Content Reviewer - Windows Internet Explorer Order Set: Total Hip Replacement - Hip/Knee	Replacement_	Surgery_Post_DRAFT
Order Set Drug Into Print Notes Help Evidence Order Set Fu Fu Pi Fu Pi Pi Vour reply will appear here. Nursing Orders	Comments (0)	Show Hidden Comments       Search         Item Comments: Assess for bleeding         Start New Topic   Edit Topic   Reply         By Kreckow, Julie on 8/21/2013 1:29:39 PM         add dressing changes - reinforce with blue dressing         Image: By Kreckow, Julie on 8/23/2013 9:44:49 AM         please change to: Change dressing BID with orange dressing
Assessments Assess for bleeding Assess neurovascular status every 4 hours for 72 hours (step 1 of 2) Assess neurovascular status every 8 hours start 72 hours postoperative (Step 2 of 2) Communication order assess for nausea and vomiting	Comments (0) Comments (2) Comments (1) Comments (0)	Order Set General Feedback Start New Topic   Edit Topic   Reply
Done		There are currently no comments.

![](_page_11_Picture_1.jpeg)

![](_page_12_Figure_0.jpeg)

![](_page_13_Figure_0.jpeg)

## Adding a General Comment

It is always preferat to comment on the iten much easier for others to foll	ole n line – ow the chain	rgery_Post_DRAFT now Hidden Comments Search Item Comments: General
General	Comments (0)	Start New Topic   Edit Topic   Reply
<ul> <li>Admit to hospital</li> <li>Admit to observation</li> <li>Resuscitation status</li> <li>Vital signs</li> <li>every 4 hours postoperative for 24 hours (Step 1 of 2)</li> <li>every 8 hours start 24 hours postoperative (Step 2 of 2)</li> </ul>	Comments (0) Comments (0) Comments (0) Comments (0)	There are currently no comments.
Jse the general comment for thing • not my area of expertise • no edits / comments, • content is fine	s such as – e,	Order Set General Feedback Start New Topic   Edit Topic   Reply There are currently no comments.
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![](_page_15_Figure_0.jpeg)

![](_page_15_Picture_1.jpeg)

![](_page_16_Figure_0.jpeg)

### **Accessing Evidence**

G Total Hip Replacement > Therapy > Wound Drainage - Windows Internet Explorer	
S https://www.zynx.com/Reference/Content.aspx?ItemID=13216&ver=13	- 🔒 🗟 😽 🗙 🔽 Bing
S Total Hip Replacement > Therapy > Wound Drai	🚹 🔻 🗟 👻 🖃 🖶 Vage 👻 Safety 👻 Tools 👻 🕢 🗸
•	Home (Alt+M)
© zynxhealth	Print Include Evidence Tables
Reminder	
For patients undergoing THR, the evidence for the benefit of p clamping of the drains for the first 6 postoperative hours, and c	ostoperative closed-suction drains is conflicting. If used, consider intermittent onsider removing the drains during the first postoperative day.
Abbreviations	

#### Rationale

A meta-analysis by Parker et al (2007) finds that in patients und wound infection with the use of postoperative closed suction we

#### The evidence will open in a separate web site window Click red X to close when finished reading.

The following table summarizes randomized controlled trials rel

Study	Comparison	Results
Strahovnik et al (2010)	Closed suction drainage for 24 hours vs Closed suction drainage for 48 hours vs Control (no closed suction drainage)	<ul> <li>In patients undergoing THA:</li> <li>Use of closed suction drainage for 24 or 48 hours reduces mid-thigh pain on postoperative day 5 and reduces the variation in preoperative and postoperative mid-thigh circumference (as measured on day 5).</li> <li>There is no significant between-group difference in LOS.</li> <li>There is no significant between-group difference in the incidence of prolonged serous drainage with use of a closed suction drain for 24 hours as compared with 48 hours.</li> </ul>

![](_page_17_Picture_7.jpeg)

#### **Accessing Evidence**

\*\*This is not the most recent version of the evidence. There is a newer version available

#### Synxhealth

#### Reminder

For patients without contraindications who are undergoing TH in conjunction with an assessment of each patient's risk profi include warfarin, dabigatran, a factor Xa inhibitor (eg, fondapa

The (NEW) evidence will also open in a separate web site window. Click "new version to see updated evidence

Print

Include Evidence Tables

For patients with a reason for not administering pharmacolog pump.

For patients with a high risk of VTE, use dabigatran, a factor Xa inhibitor (eg, fondaparinux, rivaroxaban), an LMWH, or warfarin for up to 35 days postsurgery.

For patients undergoing elective THR, discontinue antiplatelet agents (eg, aspirin, clopidogrel) before surgery.

For patients undergoing elective THR, avoid the routine use of aspirin, IPC, or LDUH alone for DVT prophylaxis.

For patients undergoing elective THR, the evidence for the use of aspirin as DVT prophylaxis is conflicting.

#### Abbreviations

#### Rationale

土 Aspirin

![](_page_18_Picture_14.jpeg)

![](_page_19_Picture_0.jpeg)

Accessing Core mea	easure and Blue Ribbons
Order Set: Total Hip Replacement - Hip/Knee	e Replacement_Surgery_Post_DRAFT
Order Set V   Drug Info V   Print V   Notes   Help Vevident	Comments (0)
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<ul> <li>Active patient warming </li> <li>Apply abduction device</li> <li>Apply trapeze to bed</li> </ul>	Click any line with an Click any line Ribbon)and click
<ul> <li>Communication order flotation mattress</li> <li>Drain management </li> <li>Elastic stockings </li> </ul>	the "Evidence" button to read the evidence for that item.
<ul> <li>Elevate head of bed</li> <li>Epidural catheter management</li> </ul>	Comments (0) Comments (0) Order Set General Feedback
Pillows for positioning, comfort and pressure relief	Comments (0) Start New Topic   Edit Topic   Reply There are currently no comments.
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![](_page_20_Picture_1.jpeg)

# Accessing Quality Information

Content Reviewer - Windows Internet Explorer		
Order Set: Chronic Obstr	uctive Pulmonary Disease - COPD	Admission to Medicine AHIS
Order Set ▼   Drug Info ▼   Prin	t ▼   Notes   Help   Evidence	Show Hidden Comments
Order Set General	Feedback Comments (0)	Item Comments: Bronchodilators: Beta-2
	every 4 hours as needed for rever	
<ul> <li>** Bronchodilators - Forsee Nebulizer RC Proto</li> </ul>	Hover your cursor ove	r the (Blue Ribbon)
Bronchodilators: Beta-2 Ag Long-acting 🧿 🤱	icon to get a acces	ss the name of
salmeterol 50 microgran	the quality or	ganization.
1 inhalation inhaled	every 12 hours	
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Administer an NCQA Health agonist in patier Bridges to Exc COPD 2 R	care Effectiveness Data and Information ce Measure ellence Care Recognition Program rre	
albuterol 90 microgram/inh	alation aerosol 📑 Comments (0)	
2 puff inhaled, with breath or wheezing	spacer every 4 hours as needed for shortness of	Order Set General Feedback
albuterol 2.5 mg/3 mL (0.0	83%) neb solution Comments (0)	Start New Topic   Edit Topic   Reply
3 milliliter by nebuli	zer every 4 hours as needed for shortness of breath or	I nere are currently no comments.
Columbia St. Ma	ry's	

![](_page_22_Picture_0.jpeg)

ent Reviewer - Windows Internet Exp	lorer		
er Set: - Copy of C⊦	IF Admission, EB - 12/16/05		
er Set ▼   Drug Info ▼   I	Print ▼   Notes   Help   Evidence		Internet Explorer cannot display the we
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Cross Allergenicity Disease Interactions Drug Interactions	m/minute intravenously titration range 0-12 mcg/mir	Comments (0)	information you want
Descriptions and Images Warning Labels	minute intravenously intravenously, titrate 0-0.04 unit	Comments (0) ts/min to keep SBP >90 or	
MAP > 60. Phenylephrine Infusion Start 50 microg	40 mg/ 250 mL NS 🥃 gram/minute solution intravenously titration range 0-1	Comments (0) 80 mcg/min, titrate to	
nitroprusside	WAF > 00	Comments (0)	
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eplerenone 📑		Comments (0)	There are currently no comments.

![](_page_23_Picture_1.jpeg)

# Accessing Drug Information

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Order Set	File Edit View Favorites Tools Help				Search	
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Sodiu	CefTRIAXone (Multum [	AXone (Multum Drug Information)				
	Section: Disease Interactions -					
	Interacting Conditions Disease Interactions between cefTRIAXone and Biliary O			Kone and Biliary Obstruction		
Biliary Obstruction			Moderate Severity			
	Colitis/Enteritis (Noninfectious)		Modorato Plausibility			
	Gallbladder Disease					
	Liver Disease	Ceffriaxone can	precipitate in the gallbladder. Sonogra	phic abnormalities and symptoms of		
Sodiu	Renal Dysfunction	gallbladder dise	ease have been reported. Therapy with	ceftriaxone should be administered		
		cautously in par	nography may be appropriate during	therapy. The drug should be discontinued	L	
The desired Information						
will open in a						
separate window.						
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A Passion for Patient Care						

Complete							
Content Reviewer - Windows Internet Explorer							
Order Set: - Breast Reduction Post							
Order Set ▼   Drug Info ▼   Print ▼   Notes   Help   Evidence		Show Hidden Comments					
Order Set General Feedback	Comments (5)	Item Comments: Admit/Transfer/Discharge					
Admit/Transfer/Discharge	Comments (1)	Start New Topic   Edit Topic   Reply					
Admit to Inpatient T;N AAU (Ozaukee) T;N Med/Surg T;N Med/Surg - Telemetry T;N ICU	Comments (0)	By <b>Cox, Clarissa</b> on 5/13/2013 11:19:17 AM No changes					
Admit to Bedded Outpatient T;N Med/Surg T;N Med/Surg - Telemetry T;N Observation Unit	Comments (0)						
Admit to Outpatient T;N Day Surgery T;N Pre & Post Operative	Comments (0)						
Code Status  T;N Full Code  T;N DNR/DNI  T:N DND/fatick at-	Comments (0)	When you are done reviewing, Check "Review complete" and click "submit"					