

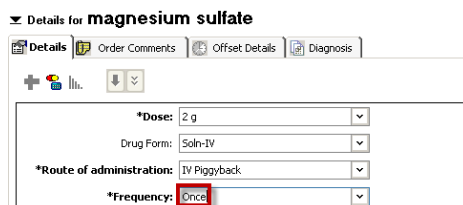
Please post / share this communication within 24 hours in your department/unit.

Remember: Many answers/clarifications on EHR processes can be accessed through the EHR Intranet site or EHR Learning (Learning Live)

❖ **RIE Changes (Rolling Implementation Starting Week of August 13th)**

Several enhancements in EHR will be implemented as a result of the Rapid Improvement Event (RIE) held in May to address issues with orders for laboratory, pharmacy and medical imaging:

1. ED medications will include a “Once” frequency, and will auto-complete while the patient is in ED. This includes most single ad hoc orders. Medications within PowerPlans will be updated with “Once” order sentences at a later date. Medications already designed with a specific number of doses (i.e. nitroglycerine, albuterol) and continuous IV infusions will not be modified.



Details for **magnesium sulfate**

Details | Order Comments | Offset Details | Diagnosis

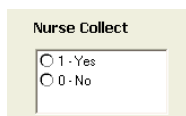
*Dose: 2 g

Drug Form: Soln-IV

*Route of administration: IV Piggyback

*Frequency: **Once**

2. The Order Entry Details PowerForm will no longer pull in information from previous encounters. ED nurses will leave “Nurse Collect” field BLANK in Order Entry Details PowerForm. Inpatient nurses will address this field when completing Order Entry Details prior to initiating any Admission PowerPlan.



Nurse Collect

1 - Yes

0 - No

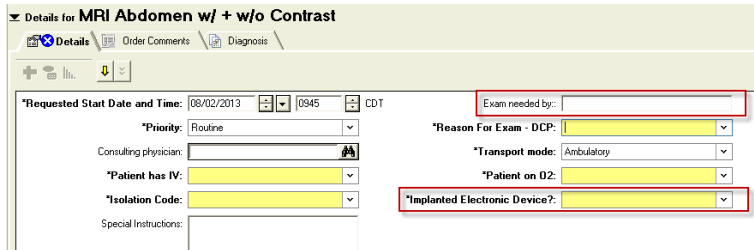
3. When a Radiology exam is started, the order will now show as “In Progress” to notify staff that the exam is in progress and cannot be discontinued.
4. The “MRI Checklist” PowerForm will be renamed “MRI Safety Checklist”
5. All end users will see a “+” sign in front of any recurring order (e.g. q12hours). Click the + sign to expand window to show any scheduled instances that exist under that order. **Note:** EHR will only display recurring orders up to 12 hours into the future. This could impact Lab, Nursing orders, Medications, etc.

This change allows for cancelling single instances of an order without cancelling the entire order.



EHR Hospital Communication: August 7, 2013

- Radiology orders will be changed to include several new Order Entry fields:
 - “Exam needed by” will be a free text field allowing physicians to indicate when exam is needed.
 - MRI orders will require ordering providers to assess patients for any implantable electronic devices.
 - “AM” priority has been changed to “Future AM” to keep all orders consistent with Lab. The order will automatically default to the following day, regardless of when it is placed.



Details for MRI Abdomen w/ + w/o Contrast

*Requested Start Date and Time: 08/02/2013 0945 CDT

*Priority: Routine

Consulting physician: [Field]

*Patient has IV: [Field]

*Isolation Code: [Field]

Special Instructions: [Field]

Exam needed by: [Field]

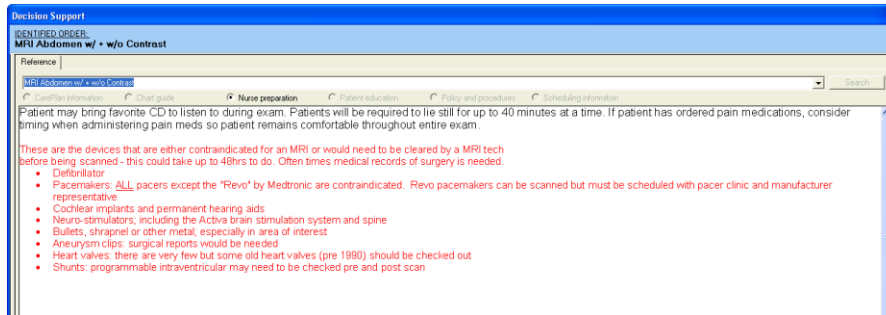
*Reason For Exam - DCP: [Field]

*Transport mode: Ambulatory

*Patient on O2: [Field]

*Implanted Electronic Device?: [Field]

- Prior to placing an MRI order, an alert will remind the ordering provider that implantable electronic devices and other metallic objects are contraindications for the exam.



Decision Support

SENTINEL ORDER:
MRI Abdomen w/ + w/o Contrast

Reference: MRI Abdomen w/ + w/o Contrast

*Patient may bring favorite CD to listen to during exam. Patients will be required to lie still for up to 40 minutes at a time. If patient has ordered pain medications, consider timing when administering pain meds so patient remains comfortable throughout entire exam.

These are the devices that are either contraindicated for an MRI or would need to be cleared by a MRI tech before being scanned - this could take up to 48hrs to do. Often times medical records of surgery is needed.

- Defibrillator
 - Pacemakers: **ALL** pacers except the "Revo" by Medtronic are contraindicated. Revo pacemakers can be scanned but must be scheduled with pacer clinic and manufacturer representative
 - Cochlear implants and permanent hearing aids
 - Neuro-stimulators, including the Active brain stimulation system and spine
 - Bullets, shrapnel or other metal, especially in area of interest
 - Aneurysm clips; surgical reports would be needed
 - Heart valves: there are very few but some old heart valves (pre 1990) should be checked out
 - Shunts: programmable intraventricular may need to be checked pre and post scan

- Radiology orders folders have been redesigned to make searching for common exams easier. The number of total imaging subfolders have been reduced:

NEW	CURRENT
<input type="checkbox"/> CT Standard Exams	<input type="checkbox"/> CT Standard Exams
<input type="checkbox"/> NM Standard Exams	<input type="checkbox"/> NM Standard Exams
<input type="checkbox"/> MRI Standard Exams	<input type="checkbox"/> MR Standard Exams
<input type="checkbox"/> US Standard Exams	<input type="checkbox"/> US Standard Exams
<input type="checkbox"/> XR Standard Exams	<input type="checkbox"/> XR Standard Exams - Abdomen_Chest
<input type="checkbox"/> XR Standard Exams - EPR	<input type="checkbox"/> XR Standard Exams - Extremities Lower
	<input type="checkbox"/> XR Standard Exams - Extremities Upper
	<input type="checkbox"/> XR Standard Exams - GI_Urinary
	<input type="checkbox"/> XR Standard Exams - Head_Neck
	<input type="checkbox"/> XR Standard Exams - Infants
	<input type="checkbox"/> XR Standard Exams - Spine_Pelvis

Each subfolder includes more commonly ordered exams:

NEW	CURRENT
<input type="checkbox"/> CT Abd/Chest/Pelvis w/ Contrast	<input type="checkbox"/> CT Abd/Pelvis w/ IV and Oral Contrast
<input type="checkbox"/> CT Abd/Pelvis w/ Contrast	<input type="checkbox"/> CT Abd/Pelvis w/ Oral Contrast Only
<input type="checkbox"/> CT Abd/Pelvis w/o Contrast	<input type="checkbox"/> CT Head or Brain w/o Contrast
<input type="checkbox"/> CT Abdomen w/ Contrast	<input type="checkbox"/> CT Maxillofacial w/o Contrast
<input type="checkbox"/> CT Abdomen w/ + w/o Contrast	<input type="checkbox"/> CT Soft Tissue Neck w/ Contrast
<input type="checkbox"/> CT Angiogram Abd/Chest/Pelvis	<input type="checkbox"/> CT Spine Cervical w/o Contrast
<input type="checkbox"/> CT Angiogram Abd/Pelvis w/ + w/o Contrast	<input type="checkbox"/> CT Spine Lumbar w/o Contrast
<input type="checkbox"/> CT Angiography LE Blat	<input type="checkbox"/> CT Thorax w/ Contrast
<input type="checkbox"/> CT Chest w/ Contrast	<input type="checkbox"/> CT Thorax w/o Contrast
<input type="checkbox"/> CT Facial Bones/Head w/o Contrast	
<input type="checkbox"/> CT Head or Brain w/o Contrast	
<input type="checkbox"/> CT Maxillofacial w/o Contrast	
<input type="checkbox"/> CT Orbit/Sella/Post Fossa/IAC w/o Con	
<input type="checkbox"/> CT Pelvis w/ Contrast	
<input type="checkbox"/> CT Perfusion w/Contrast	
<input type="checkbox"/> CT Soft Tissue Neck w/ Contrast	
<input type="checkbox"/> CT Spine Cervical w/o Contrast	
<input type="checkbox"/> CT Spine Lumbar w/o Contrast	

The following RIE changes will be implemented **September 4th**:

1. Lab labels will print primarily in lab. This change is designed to simplify the process of collecting “nurse draw” lab samples. Labels will be sent up to nursing units prior to scheduled draws.

Exceptions: Nurse Collect STAT labs will continue to print to nursing units. Timed orders placed within 10 minutes of the next scheduled collection time (0850 for a 0900 lab draw) will print to nursing units.

2. When “yes” is selected under Nurse Collect in the Order Entry Details PowerForm, “Nurse Collect”, will appear on lab stickers. This will assist lab in determining which labs get sent to patient care areas.

For questions/concerns about RIE Changes, contact: Tom Ramlow, RN, Clinical Informatics

❖ **PowerPlan Updates (Starting August 15th)**

Discharge Planning – Newborn PowerPlan has had revisions and a title change:

- Former title was Discharge Planning NICU
- Changes were incorporated to make the PowerPlan all-inclusive for all newborns

For questions/concerns contact: Ashley Kas, Dr Wolf, or Julie Kreckow

Information regarding impacted PowerPlans and associated Favorites is available on the Physician Portal