

# ED Observation Checklist for ED Observation Nurses

Cerner FirstNet EDUCATION

ED Observation Checklist								
Admission								
<ul style="list-style-type: none"> <li>✓ ED Nurse End Visit: Admit to Inpatient Bed</li> <li>✓ Notification to Registration to move the patient to an OBS bed thus changing service and status</li> <li>✓ Provider enters Observation Admission Orders</li> <li>✓ Confirm the MOON form is signed (if applicable)</li> </ul>								
<p>Use <b>LaunchPoint</b> to:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Complete the <b>Accept Patient into OBS Care</b> task (Time should reflect OBS order time) </li> <li><input type="checkbox"/> Update the nurse assignment</li> </ul> <p>Use the <a href="#">Adult Intake-Nursing Workflow</a> to document:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Required Admission PowerForms</li> <li><input type="checkbox"/> PAMI Reconciliation (Problems/Histories, Allergies, Home Medications &amp; Immunizations)</li> </ul>								
Documentation								
<p>Tasks will fire to LaunchPoint for documentation of:</p> <table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Admission Skin Assessment</td> <td><input type="checkbox"/> Fall Risk</td> </tr> <tr> <td><input type="checkbox"/> Admission PowerForm &amp; PAMI</td> <td><input type="checkbox"/> Sepsis</td> </tr> <tr> <td><input type="checkbox"/> COVID-19 Status Update</td> <td><input type="checkbox"/> <a href="#">Plan of Care</a></td> </tr> <tr> <td><input type="checkbox"/> Code Status-Verify Armband</td> <td><input type="checkbox"/> Precaution Review</td> </tr> </table> <p>Document:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Full Nurse Assessment (Twice per 12 hr. shift)</li> <li><input type="checkbox"/> Vitals (As ordered)</li> <li><input type="checkbox"/> Patient Update Form (Each time the patient leaves/returns to OBS bed) </li> </ul>	<input type="checkbox"/> Admission Skin Assessment	<input type="checkbox"/> Fall Risk	<input type="checkbox"/> Admission PowerForm & PAMI	<input type="checkbox"/> Sepsis	<input type="checkbox"/> COVID-19 Status Update	<input type="checkbox"/> <a href="#">Plan of Care</a>	<input type="checkbox"/> Code Status-Verify Armband	<input type="checkbox"/> Precaution Review
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Discharge or Facility Transfer								
<p style="background-color: yellow;">Use the <b>ED OBS Discharge-Nursing Workflow</b> to document:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Discharge PowerForm: Pre-discharge Assessment</li> <li><input type="checkbox"/> IV Stop Times</li> <li><input type="checkbox"/> Patient Education (If not completed by provider, Print)</li> <li><input type="checkbox"/> Create Note: <b>Patient (Inpatient) Discharge Instructions</b> (Sign/Submit, Sign &amp; Print, Preview, Yes, Print, Print)</li> <li><input type="checkbox"/> End Visit: <b>Discharge HOME OR SELF CARE (O) or Acute Care Hospital (O)</b> </li> <li><input type="checkbox"/> Discharge PowerForm: Discharge Note (After patient has left)</li> </ul>								
ED Observation to Inpatient								
<p>Use the <b>ED OBS Discharge-Nursing Workflow</b> to document:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Discharge PowerForm: Patient Disposition</li> <li><input type="checkbox"/> IV Stop Times</li> <li><input type="checkbox"/> End Visit: <b>Admit, IP, OR, MPR, CCL</b> </li> </ul>								
Process Demonstration								
<p><a href="#">ED Observation Workflow Demonstration</a></p>								