

Cerner PowerChart EDUCATION

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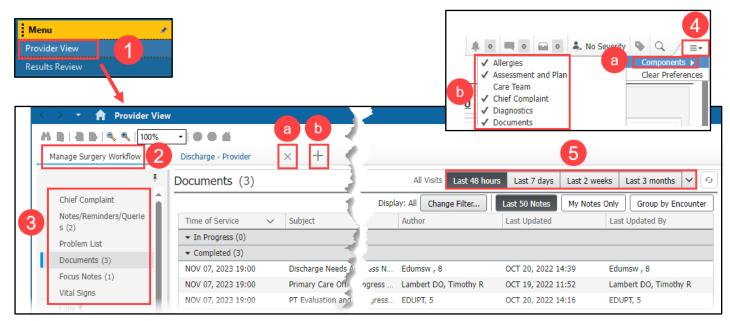


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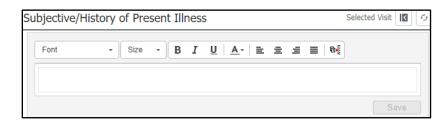
Manage Specialty Workflow Overview

The Manage Specialty Workflow is located within the Provider View and allows for hospital providers to review and/or update patient information, place orders, create a dynamic documentation note, etc. The provider's specialty will determine the name of the Manage (Specialty) Workflow (i.e., Manage Orthopedics Workflow, Manage Cardiology Workflow, etc.) and the components within the workflow available to the provider.

- 1. The Provider View is the default home page while in a patient's chart. The Provider View can also be accessed from the Menu.
- 2. The Manage Specialty Workflow is one of the tabs across the top. These tabs are called MPages, which can be rearranged with a left-click, drag, and drop action.
 - a. MPages can be removed using the **X**.
 - b. MPages can be added using the +. Please review all available MPages.
- 3. Components within the workflow contain pertinent patient information to review and/or modify.
 - **Note:** Some component headers are hyperlinks to a corresponding section within the Menu.
- 4. Components can be added or removed using the Page Menu (3 lines). The only component that cannot be removed is Notes/Reminders/Queries, as this is a billing requirement.
 - a. Hover over Components.
 - b. Place a checkmark to display a component or uncheck a component to remove.
- 5. Various components within the workflow have filters that can be adjusted to display other patient information. **Note**: Dependent on the component, additional display filters may be present.



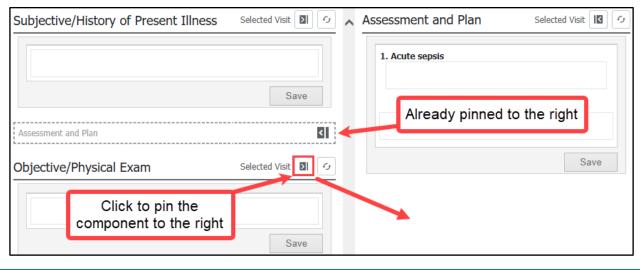
 All free text components such as Subjective/History of Present Illness, Objective/Physical Exam, etc., allow a provider to type, use Dragon Medical One, use Cerner Auto Texts, and add Tagged Items.





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 Contextual View is a feature that allows side-by-side viewing of patient information (left) and pinned free text components for note creation (right). To enable Contextual View, click on the small gray arrow on the right of each free text component.



Allergies

The Allergies component will allow a provider to review, add, and/or update a patient's allergies.

Allergies (1)							+	All Visits	c,
					Reverse A	Allergy Check	ld allergy		Q
Substance	Severity	\sim	Reactions	Category	Status	Reaction	Source	Comr	nents
Å No Known Medication Allergies				Drug	Active	Allergy			
📥 Eggs			Hives	Food	Active	Allergy			

Assessment and Plan

The Assessment and Plan is a free text component that will populate into the provider's dynamic documentation note. Problems designated as This Visit and prioritized from the Problem List component will populate here. As with most free text components, providers can type, use Dragon Medical One, use Cerner Auto Texts, and add Tagged Items.

				Assessment and Plan	Selected Visit
Problem List				1. Acute sepsis	
Classification Medical and F V	В	Jolem			
	Z				Save
Priority Problem Name	5	Classific	Actions		
1 V (!) Acute sepsis		dical	🗸 This Visit	Chronic	
🗸 (!) Atrial fibrillation	1	Medical	✓ This Visit	Chronic Resolve	
Diabetes mellitus type II, controlled		'edical	This Visit	✓ Chronic Resolve	



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Care Team

The Care Team component allows a provider to view, modify, and/or remove a patient's most recent care team assignments for an encounter. A care team can be a provider, a provider team, non-provider, or medical service.

1.	To assign, click the plus sign drop-down and select the	Care Team			+ > 9 = •	Subje
	desired action (i.e., Assign	Role/Relationship	Contact	Phone	Assign Myself	>
	Myself, etc.).			Assign Provider Team		
	wrysen, etc.j.	Infectious Disease	Ledtke MD, Christopher S		Assian Provider	
		Other (Lifetime)	Prior, Brittany		-	
		Primary Care Physician (Lifetime)	Yax MD, Thomas J	(231) 935-8749	Assign Non-Provider	
2.	Click on a care team member to open an options window to modify or remove.	Care Team Role/Relationship Cross-Visits Infectious Disease	Contact Ledtke MD, Christopher S	Ledtke M Infectious I	Remove ID, Christopher S Disease	×

Prior, Brittany

Chief Complaint

The Chief Complaint component allows an admitting provider to view and/or modify the chief complaint of the patient, which will auto-populate into the Admission H & P note.

- 1. Click in the **Chief Complaint** field.
 - If no Chief Complaint has been entered, enter one.

Other (Lifetime)

 If the Chief Complaint has been entered by nursing, review and modify as needed.

Chief Complaint	Selected Visit
Shortness of breath	
19/255	2 Sign Cancel

Phone Numbers

2. Click Sign.

Diagnostics

The Diagnostics component allows a provider to view diagnostic reports and images, and tag that information to use in a note.

1. Click on the desired diagnostic test name to open the report.

Diagnostics (3)			All Visits	Last 48 hours	Last 7 days	Last 2 weeks	Last 3 months
Name	Reason For Exam	Performed	\sim	Last Updated		Status	
 Cardiovascular (1) 							
Echocardiogram		NOV 07, 2023 19:00		NOV 07, 2023 11	:28	Auth (Verified	d)
 Computed Tomography (CT) (1))						
CT ABD + PELVIS W/IV CONT (abdominal pain	NOV 07, 2023 13:18		NOV 07, 2023 09	:33	Auth (Verified	d)
 Diagnostic Radiology (1) 							
CHEST 2 V	chest pain	NOV 07, 2023 13:17		NOV 07, 2023 09	:33	Auth (Verified	d)



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- To Tag information from a diagnostic report to use in a note, highlight the information and click Tag to save the text in the Tagged Items inbox on the workflow.
- Click on the View Image icon at the top of the screen to see any associated images with the report.

Note: Diagnostic Results in the last 24 hours will automatically display in the Admission H & P and Consult notes.

∭∎ ≌∠∞	a 🗮 🔍 🗶 🗟 + + 🖴 🔟 🐙 🖉 🖤
CERNED, TARA	Female 68 years DOB:5/22/1955 3
Type: Date: Status: Title: Performed By: Verified By: Encounter info:	Echocardiogram November 07, 2023 7:00 PM EST Auth (Verified) Echocardiogram Report Recchia MD, Dino on October 19, 2022 11:28 AM EDT Recchia MD, Dino on October 19, 2022 11:28 AM EDT MT172000237, MMC, I/P (Inpatient), 9/21/2022 -
Primary Physician Primary Cardiolog: Hospital Location Indications: arrh	st: 0000 none Sonographer: Michael Test Probe ID:
fl	mplete 2D echocardiography, spectral Doppler, M Mode, and color www.mapping Doppler was performed. Image quality for this study adequate.
 Left ventricul Moderately di Moderately cai Mitral annula: Mild-moderate Mildly elevati Grade II diasi 	ttion fraction and global LV systolic function. Lar ejection fraction is 53%. Lated left atrium. Loified aortic valve with moderate AS. Peak 33 mean 16 AVA 1.4cm2. Mild AR. c calcium with moderate MR. 2+ by visual estimate. tricuspid regurgitation. di pulmonary artery systolic pressure. colic dysfunction. left atrial pressure.

Documents

The Documents component allows a provider to view a variety of documentation including Admission H & P, Consult notes, Progress notes, Operative/Procedure notes, Hospital Summary, and multidisciplinary documentation. Nursing documentation will not display in this component but can be viewed in the Focus Notes component.

- 1. Select a document to view.
- 2. Options within the document viewer:
 - Click **Modify** to add an addendum or revise a document.
 - Click **Print** to print the document.
 - Click the View Document hyperlink to open the document in a separate window.
 - Check the **Enable Continuous Scrolling** box to allow all documents on the component list to be continuously scrolled through in the viewer without needing to select each individual document.

0	ocuments (3)			2	Modify	Print	View Document		\Box Enable Continuous Scrolling $$ $$ $$
				Displ	🚺 Infor	mation.	This document contains i	mages that cannot be d	isplayed. Click 'View Document' to view.
	Time of Service Tin Progress (0)	~	Subject	Note Type	Primar	y Care	Office Note		
	✓ Completed (3)				· · ·		Progress Note (Auth		ontributor(s): Lambert DO, Timothy
	SEP 20, 2023 19:00		Discharge Needs Assessm	Case Manag	(Verified		CT 19, 2022 11:45	R Last Unda	ted By: Lambert DO, Timothy R
	SEP 20, 2023 19:00		Primary Care Office Note	Family Med	Luse ope	accu. o	01 15, 2022 11.15	Lust opda	ted by: Eulibert bo; filliouty it
	SEP 20, 2023 19:00 One-click to view docume	-	PT Evaluation and Treatm	Physical Th	Time Sta I spent 2 and 5 m to the vi	20 minut inutes ir isit today	es face-to-face with th non-face-to-face activ y. Total visit time is 25	vities related	Problem List/Past Medical Histor Ongoing Diabetes Mellitus Type II, Control Atrial Fibrillation controlled
	1				<u>1.</u> Dia	<u>nent/ Pla</u> abetes (T nplicatio	ype 2 diabetes mellit	us without	Procedure/Surgical History Cholecystectomy (2004)
						continue	e to monitor		Medications
				Ord		omplete Blood Count erral PT for exercise pr	ogram	Warfarin 5 mg Oral, daily Metoprolol 25 mg, Oral, Daily	



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Contextual View allows the workflow to be split into two columns, providing the ability to scroll through the workflow components on the left while documenting in the free text components on the right. With the free text components set to contextual view, a provider can use the **Documents** component to highlight information in another document and then drag and drop it into the intended free text component, as shown below.

🔹 🏫 Provider Vie	ew							💱 Full screen 🛛 🖶 F	Print 🥠 34 min	
Manage Hospitalist Workflow	X Discharge - Provider	× -	+				A 0 0	🖬 💿 👗 No Sever	rity 🗣 🔍 🖉	
Ŧ	Documents (4)		Modify Print View Document		\Box Enable Continuous Scrolling X	(0	Objective/Physical Exam	Sele	ected Visit	
Notes/Reminders/Queries (2)		Subject	 Information. This document contains images 	s that cannot	be displayed. Click 'View Document' to view.		Font - Size - 🐰 🗅 🗎 🖪 I 😃	<u>A</u> - = = =		
Problem List	In Progress (0)	Subject	ED Provider Report							
Vital Signs	Completed (4)		Emergency Department Report (Auth							
Documents (4) Intake and Output	MAR 28, 2022 11:34 MAR 28, 2022 11:30	Discharg PT Evalu	Last Updated: JUN 18, 2021 11:09						Save	
Scales and Assessments Labs ?	MAR 28, 2022 11:30 MAR 28, 2022 11:13 MAR 28, 2022 11:07	Primary	Critical Care Time: Total critical care time sp with the patient was 50 minutes which inclu	ides	PRN for constipation Fexofenadine 180 mg=1 tab each dose,	^ R	Review of Systems	Sele	ected Visit	
Diagnostics (2) Microbiology (2) Pathology/Misc (1)	Intake and Output	ED Provi	family, caregivers, EMS, consultants, time re medical records and results, and not includi spent performing separate billable procedur	Tab, Refill(s):0 <u>Allergies</u> No Known Allergies		Fontive for faver or chills. Positive for Fontive for dizziness, negative for fails.	<u>A</u> - E = 3			
Quick Links	Fluid Balance (Since Admissio +2100 mL View Details	n):		GENERAL: Negative for fever or chills. Positive for weakness. Negative for dizziness, negative for falls.			Positive for shortness of breath and or exertion. Negative for lower exercises			
Focus Notes (Last 24 Hours)	1	AR 29, 20			Alcohol Use: Current. Alcohol Type: Be		ARY. Negative for shortness of breath.		Save	
New Order Entry			dyspnea on exertion. Negative for lower ext edema.	Alcohol Use Frequency: 1-2 times per v Alcohol use in household: No. Six or Me		ner rough or increased sputum		Ouro		
Order Profile	Intake mL -	-	PULMONARY: Negative for shortness of bre	ath,	Occasions: Less than monthly. Drink me	Δ.	Assessment and Plan	Self	ected Visit	
Allergies (1)	Output mL -	-	negative for cough or increased sputum production. Negative for hemoptysis.		Yes. Tobacco	-				
Medications Timeline	Fluid Balance	-	GASTROINTESTINAL: Negative for nemoptysis.	omiting,	Smoking tobacco use: 5-9 cigarettes (b		Font - Size - 🔏 🗅 🛅 B I U	A- = = =		
Home Medications (7)	 Intake 		diarrhea, melena, hematochezia, or hemate		pack)/day in last 30 days. Tobacco Type				- (- (
MAPS - MI Only	 Output 		Physical Exam	Tan	Family History					

Once text from another document has been dragged and dropped into a free text component, a footnote is placed at the end of the text to cite where the text originated from at the bottom of the note. This footnote will be removed once the text has been edited, or the footnote can manually be removed; to do this, highlight the footnote and click Delete on the keyboard.

Objective	
<u>Physical Exam</u> NECK: There is no jugular venous distention or cervical lymphadenopathy. There is no sign of thyro CARDIOVASCULAR: Patient has a normal rate with an irregular rhythm. There is no murmurs, rubs RESPIRATORY: Clear to auscultation bilaterally but decreased at both bases. There is no wheezing EXTREMITIES: Patient has trace pedal edema equal bilaterally. Patient has normal distal pulses equ	or gallops noted. or rhonchorous lung sounds.
Vitals & Measurements T: 36 °C (Oral) HR: 100 (Pulse Rate) RR: 15 BP: 140/90 HT: 175 cm WT: 75 kg BMI: 24.5	
[1] Primary Care Office Note; Lambert DO, Timothy R 09/20/2023 19:00 EDT	
Note Details: Surgical Office Note, Eduphys, 7, 9/21/2023 4:10 PM EDT, Surgical Office Note	Sign/Submit Save Save & Close Cancel

Focus Notes (Last 24 Hours)

The Focus Notes component allows the provider to view nursing focus notes and shift summaries.

1. Click on the note header to view the Focus Note form in another window.

Focus Notes (Last 24 Hours) (1) Selected Visit	2	C)
Family interaction Short Note: Family at bedside and attentive to patient. Spouse voiced concern on medication compliance. Will notify Dr. Smith of the concern.		Edson, Kelli (05/04/21 12:53)



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stc	ru	<u> </u>
JUC		C 3

The Histories component allows a provider to view the patient's history including Problems, Procedures, Family, Social, and Pregnancy.

Problems		Procedure	 Family	8	Social		Pregnancy	H	
				S	earch within IMO	Add problem	n		Q
Name			/	N Cla	ssification				
	ms (1)								
Turner's syndrom	ie			Me	dical				

Home Medications

The Home Medications component allows a provider to view the patient's documented home medications and perform the Admission or Transfer Medication Reconciliation.

- 1. A green check mark indicates that the Meds History is complete.
- 2. The list of medications will be displayed on the left side of the component.
- 3. There is a Compliance column where the provider can review any comments.
- 4. Click on the Admission or Transfer hyperlink to perform the Admission or Transfer Medication Reconciliation.

ome Medications (5)			1	4 + All Visits 📀 🗏
2	Che	ck Health Plans Status: ✔ Me	ds History 🗸 A	dmission Transfer View Details
Medication	^	Compliance	Supply	Responsible Provider
aspirin (aspirin 81 mg oral tablet) 1 Tab, Oral, BID, 90 Tab, 0 Refill(s)		- 3		-
atenolol (atenolol 25 mg oral tablet) 1 Tab, Oral, BID, 60 Tab, 0 Refill(s)		-		-
 lisinopril (lisinopril 2.5 mg oral tablet) 1 Tab, Oral, Daily, 30 Tab, 0 Refill(s) 	-	Still taking, not as prescribed		
multivitamin with minerals (Vitamin D with Minerals oral tablet) 1 Tab, Oral, Daily, 30 Tab, 0 Refill(s)				

Hospital Course

The Hospital Course component is a free text component that will populate into the discharge provider's Hospital Summary note. Providers can type, use Dragon Medical One, use Cerner Auto Texts, or use Tagged Items. This is a **multi-contributor** component that allows multiple users to add content that will save for everyone.

Hospital Course	2					Selected Visit
Font	• Size	• B 2	I <u>U</u> A	· = =	1	
						Save

NOTE: This component needs to be completed by the attending provider group.



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Immunizations

The Immunizations component displays the patient's immunization information. This data populates from a variety of sources including hospital encounters, primary care offices, and MCIR (Michigan Care Improvement Registry).

nmunizations						+ V All Visits
View Forecast						Print Record
Vaccine	Status	^	Admini	Next Recommended	Last Action	Last Action Date
 Documented/Recommended 	(7)					
Hepatitis B	Overdue			Today		
Td/Tdap	Overdue			Today		
Pneumococcal Conjugate	Overdue			Today		
Pneumococcal Polysaccharide	Overdue			Today		
COVID-19	Overdue			Today		
Zoster.	Overden		-	VeboT	-	and the second second

Implant History

The Implant History component allows a provider to view implanted devices (i.e., Scanned or manually entered surgical implants).

mplant Histor	у								C)
								Active	~
Implant Date		Description	Explant Date	Туре	Materials	Site	MR Classific	Source	
▼ Active									
FEB 04, 2015		CATHETER VENTRI		Non Biological				Patient Chart	
OCT 04, 2020		STENT ABSOLUTE		Non Biological	Metal	Chest		Patient Chart	
OCT 30, 2020		Knee Replacement		Non Biological	Metal	Knee	MR Safe	Patient Chart	

Intake and Output

The Intake and Output component allows a provider to view 24 hour balances of intake, output, and counts.

- 1. The Intake and Output component in the workflow only shows 24-hour balances.
- 2. Click on a drop-down for further details related to those 24-hour balances.
- To view Intake and Output in Interactive View within the Menu, click on the Intake and Output component header in the workflow. Interactive View is where nursing records their documentation. It displays hourly reporting, shift balances, yesterday and today's balances at the top.

Intake and Output	3		
Fluid Balance (Since Admiss +1300 mL View Details	ion):	1	
	NOV 10, 2023 *	NOV 09, 2023	NOV 08
Intake mL		2000	
Output mL		700	
Fluid Balance		+1300	
🕶 Intake			
Oral Intake Amount mL	2	2000	
Intake Total		2000	
✓ Output			
Urine Voided mL		700	
Output Total		700	
- Counts			
Urine Void Count		3	
	<		
* Indicates a day without a	full 24 hour meas	urement period	

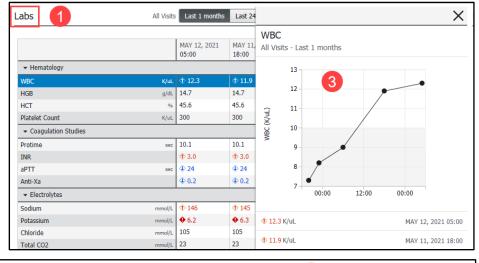


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Labs

The Labs component allows the provider to view and Tag lab values to pull into their note.

- 1. The Lab header links to Results Review.
- 2. Certain labs automatically populate into the note.
 - Most recent labs in the last 24 hours.
 - Varies per specialty.
- The provider can click on the lab name to view a trending graph.
- 4. The provider can Tag a single lab or multiple labs.
 - a. To Tag multiple labs, hold down the Ctrl key and select any desired lab value (s).
 - b. Click the Tag button.



Labs All	Visits	Last 1 months	Last 24	► Tag (4)	×		
		MAY 12, 2021 05:00	MAY 11, 18:00	4 results selected All Visits - Last 1 months			
✓ Hematology				14.7 g/dL MAY 12, 2			
WBC	K/uL	12.3	11.9	HGB			
HGB	g/dL	14.7	14.7	45.6 %	MAY 12, 2021 05:00		
нст	%	45.6	45.6	НСТ			
Platelet Count	K/uL	300	300	10.1 sec	MAY 12, 2021 05:00		
✓ Coagulation Studies		a		Protime	MAT 12, 2021 03.00		
Protime	sec	10.1	10.1	16.2 mg/dL	MAY 12, 2021 05:00		
INR		3.0	\$ 3.0	BUN	MAT 12, 2021 05:00		
aPTT	sec	4 24	4 24				
Anti-Xa		() 0.2	() 0.2				

Lines/Tubes/Drains

The Lines/Tubes/Drains component displays the following for active or discontinued items:

- Type
- Location
- Insertion date and time

When each individual line, tube, or drain is selected, the most recent clinical documentation correlated with that site is displayed in a side panel providing full visibility to the site status, assessment, need for reassessment, and replacement or renewal.

ines/Tubes/Drains		<u> </u>	
pe	Location		
Lines (0)			
No results found			Chest Tube(s)
Tubes/Drains (0)			
No results found			Left upper
⊿ Discontinued (1)			
Chest Tube(s)	Left upper		Inserted
			-
			Activity, Chest Tube
			Assessment (MAY 21, 2021 12:50)
		- <u>-</u>	
			Suction, Chest Tube
			-20 cm suction (MAY 21, 2021 12:50)
			Site Description, Chest Tube
			Well approximated (MAY 21, 2021 12:50)
		<u> </u>	



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Medications Timeline

The Medications Timeline component allows a provider to view medications that are Scheduled, Unscheduled, PRN, Continuous Infusions, or Inactive.

- 1. View Menu: Allows the user to change the viewpoint.
- 2. Icon Legend: Displays the Icon Legend.
- 3. Medication Profile: Orders are displayed below their corresponding headings.
- 4. **Time Frame**: There are a few ways to change the timeframe in Medication Timeline.
 - Click the timeline and drag it into a new time frame.
 - Click the forward button (>) to move to a later time frame or click the back button (<) to move to an earlier time frame.
 - From the Time Interval menu above the time frame on the right, select the time interval you want to use.
 - Click Today to return to the time frame that was displayed when Medication Timeline was initially accessed or refreshed.
- 5. **Pop-Up Boxes**: Click a cell that contains an icon to view corresponding information in a pop-up box. Click the View hyperlink to display more details, such as rate changes and important medication action details.

Medications Timeline								
View: Standard -					4	Today Results from	the past: 1 Hour 💌	۹, २
Icon Legend	13, 2021							•
08	:50	09:00	09:	:10	09:20	09:30	09:40	
1,000 mL, IV, Start 05/12/21 9:31:0 EDT, 125 mL/hr, Routine					_			~
⊿ Scheduled (5)		MAY 13, 2021		09:00 - 09:09				
aspirin		Time		Details				
81 mg, Oral, Tab, BID, Start 05/12/21 21:00:00 EDT, Routine		09:00 🔕 Order Started		View				
atenolol mg		09:00 👙 Overdue Admin	istration		5			
25 mg, Oral, Tab, BID, Start 05/12/21 21:00:00 EDT, Routine		U						
atorvastatin ^{mg}		1						
20 mg, Oral, Tab, Daily, Start 05/13/21 9:00:00 EDT, Routine		(a)						
e.								
Med Not Found/Not Known/Non Tab Vitamin D with Minerals oral tablet, 1 Tab,								
Tab, Oral, Daily, Routine, Start 05/13/21		Order Start						
9:00:00 EDT								
sodium chloride (Sodium Chlorid ml 5 mL, IVPush, Inject, q12hSTD, Start	0	Order Stop						
05/12/21 21:00:00 EDT, Routine	0	Order Suspended						
Ð	0	Rejected by Pharmacy						
	. See	Pharmacy Intervention						
	1	Multiple Drug Categories						
		Modify						
	PRN	PRN						
	•	Immediate Priority						
		Pending Administration						
	Ĭ	Administration						
		Rate						
	8							
	e e							
		Result Comment						
	_	Result Modification						
	-	Result Prouncedon						
			l					



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Microbiology

The Microbiology component allows a provider to view microbiology results.

- 1. In the Susceptibility column, click on the pill icon to open the susceptibility report.
- 2. Click on an individual test to see further details.

Note: Providers are unable to Tag items in this Component. Must use Ctrl-C to copy and then Ctrl-V to paste into the note.

Microbiology (3)		Â.	All Vis	Last 50 Re	ports Last 12 months	Last 6 months	Last 18 months 🗸 🖓
	Susceptibility	Growth/Result		∨ Last	t Updated	Status	
Sputum Culture	6	POS	00	JAN	05, 2021 15:35	Completed	
Blood Culture	- 1	NEG	12	JAN	05, 2021 15:37	Completed	
Blood Culture	6	POS	(8:12	JAN	05, 2021 15:35	Ordered	

New Order Entry

The New Order Entry component allows for various types of orders to be searched, entered, and saved as a favorite for future use.

- 1. Search for an order by typing the name of the order into the search field.
- 2. Select a tab and search through the available orders.
 - Home: Displays provider specialty specific orders (Hospitalist specialty displayed).
 - Mine: Displays any folders, orders and/or PowerPlans that have been saved as a favorite.
 - Public: Displays all provider specialty specific order folders.
 - **Shared**: Search a specific provider's name to view their favorited orders for selection and/or favoriting.

New Order Entry				+ 9
Acute Care Discharge Meds as Rx	Search New Order Results		Q	Check Health Plan
A Home Mine	Public	Shared	2	
Folders Available / MHC POE SECTION F	F / Hospitalists			
Patient Care & Activity	IVs		Admitting Labs	
Vital Signs	Medications		Observation	
Food & Nutrition	Nightrider		ED STAT and Now	
Radiology	AKI		Code Status	
Radiology Caresets	Anemia Wor	kup	🔀 Core Admission	
Cardiology	Hyponatrem	ia	🞦 Cardiac	
Lab	Hospitalists		COU/C2 Observation Order	s
Consults	Restraints		📔 COU Patient Status Change	1
Therapies	PEDS		COPD	
Respiratory	🖿 GI Bleed		🞦 Hemorrhagic Stroke	
Page 1 of 2			First 🗸 Previ	ous Next > Last

3. Orders selected within the New Order Entry component will go into the Orders for Signature inbox for signature.





Notes/Reminders/Queries

The Notes/Reminders/Queries component allows a provider to address both non-urgent Provider Communication from clinical staff and Clinical Documentation Queries.

Provider Communication

This communication will not be part of the permanent medical record. The communication will display in the Message column. To address a Provider Communication:

Prov

- 1. Click on the Message hyperlink.
- 2. Within the Communication to Provider Form, review the information and select a response in the Provider Section Only.
- Click the green check mark to sign the form.

der Communio	cation (1)				
5pecialty	From	Date	Message		
All Discipline	Edurnac, 79	09/06/23 19:00	Please call family at 23	1-454-7878 regarding pending discharge	
	n To Provider Form - CERM	NED, TARA		— 🗆	
🖌 🖃 🚫 🕱 🖥					
	9/07/2023	900 🔹 EDT		By: Ed	Juphy
✓ Communication		Con	nmunication To	Provider	
		0.011			
	The purpose of this	s form is to communicate	information about the patier	nt that is NON URGENT. This communication will	Inot
3				EPLACE WRITTEN OR VERBAL ORDERS.	
		Select the medical specialty Communication	/ specific for Nurse		
	Communication To, Specialty	All Discipline Cardiology (or THV) ENT Family Practice Gastro Digestive Health General surgery Hospitalst (or Sound Physician	Intensivist Nephrology Neuro Surgery Neurology Obstetrics & Gynecology Oncology Oncology Oncology	C Plautice O PMLR O Psychiatry C Surgeon C Trauma (ar TACS) C Urology C Vaccular	
		O Infectious Disease	O Pediatrics	O Other:	
		Enter Information/Concerns	regarding patient care		
	Communication Detail	Please call family at 231-454-7878	3 regarding pending discharge]	
I [PROVIDER SECTION	ON ONLY:			
		Acknowledge/Close Comm	unication		
	Communication Acknowledged	Note acknowledged Note acknowledged order with Note acknowledged no furthe Nof unther action taken Order intended Addressed in rounds		2	

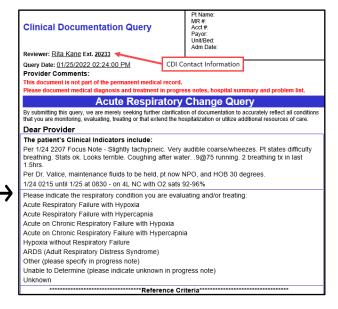
Documentation Queries

A clinical documentation query is sent from Clinical Documentation Improvement (CDI) and contains recommendations to add/modify a diagnosis in the Problem List component as well as revise the dynamic documentation note. Best practice is to address queries that are specific to the provider's group/specialty throughout a patient's hospitalization.

Click on the Subject
title hyperlink to view
the query.

Ν	Notes/Reminders/Queries (3) Selected Visit	
	Documentation Queries (1)	
	Subject	1
	THV Atrial Fibrillation	l

Note: The Subject title of each query will contain the group/specialty the query applies to (i.e., TACS, Sound Physicians, etc.).





Cerner PowerChart EDUCATION

Objective/Physical Exam

The Objective/Physical Exam component is a free text component that will populate to the provider's note. Providers can type, use Dragon Medical One, use Tagging, or use Cerner Auto Texts.

jective/Pł	nysical Exam	1						Selected Visit
Font	• Size	• B	I	<u>U</u> <u>A</u> - ≡	±	1	■ ••[)
								Save

Opioid Review

The Opioid Review component allows a provider to view MAPS data related to controlled substances for the patient.

For all providers prescribing controlled substances, it is **required** to:

- 1. Click View Report.
- 2. Click Marked as Reviewed.

Completing this process is **required** for regulatory compliance, which gives the providers credit for CMS Regulatory and Michigan mandates.

More than 3 Opioid Rx i	n the last 60 days: No Coprescribed Opioid and B	enzo: No
PDMP Review	Clicking on View Report will automatically check this box	
All Visits Last 60 Days Prescribed and Dod	nistrations (0) o Morphine mg Equivalent View De cumented Opioids (0) o Daily Morphine mg Eq	Reviewed will add a time stamp and mak
All Visits Luc 60 Days	wed PDMP information. PDMP Reviewed: 😣 🥓	checkmark

Orders Profile

The Orders Profile component allows the provider to view orders, Cancel/DC orders, and Cancel and Reorder orders.

- 1. The Orders Profile header links to the Orders in the Menu.
- 2. The component will default to display All Active Orders. The View can be changed by selecting a different filter.
- 3. Providers can Cancel/DC or Cancel and Reorder within the component:
 - Single click on an order, then click the appropriate button at the top, then click on the Orders for

Signatur	re inbox.				Cancel/DC Cancel and Reorder Clear 3 ×
Order Profile (20)					Creatinine, Serum NOW, ONCE, 10/07/22 8:54:00 EDT, Stop 10/07/22 8:54:00 EDT
	Show only pending 2 View All Act	tive Orders		~ 0	Dose
Order ^	Details	Start	Status	Status	Route
Laboratory (2)					Frequency
🕀 Creatinine, Serum 💻	NOW_ONCE, 13/07/22 8:34:00 EDT, Stop 10/07/22 8:54:00 EDT	OCT 07, 2022 08:	Ordered	OCT 07	ONCE
🕄 🔚 Sputum Culture	Routine, ONCE, 10/07/22 8:53:00 EDT, Stop 10/07/22 8:53:00 EDT, Nurse Collect	OCT 07, 2022 08:	Ordered	NOV 23	JCI 07, .ь. 4 Stop
					DEC 31, 2100 18:59
COPD Pathway Nurse Referral Task	Routine, 10/07/22 8:53:00 EDT	OCT 07, 2022 08:	Ordered	NOV 2	Category Laboratory
					Order Information



Pathology/Misc

The Pathology/Misc component allows a provider to view or Tag any pathology reports and view send out lab information. Send out labs come from Mayo Clinic, Spectrum, and other sources.

1. To view the report, click on the blue hyperlink. Providers can Tag information within the report if needed.



Problem List

The Problem List component allows a provider to view, add, review, and change This Visit and Chronic problems. Munson Healthcare policy requires all providers to participate in managing this Problem List Component.

Problem List	1						وك
Classification Medical and Patient St	Add as This Visit		✓ Add problem			1	Q
		< €					1 Unspecified Problem(s)
Priority Problem Nam	e		Classi	ication	Actions		
1 Depression			Medica	· 2	🗸 This Visit	✓ Chronic Resolve	
- V Other epileps	y, not intractable, without status epilepticus	•	Medic		✓ This Visit		
Epilepsy		-	Medic	I	This Visit	Chronic Resolve	
Screening for	depression		Medica	I	This Visit	Chronic Resolve	5
Tobacco use			Patien	Stated	This Visit	Chronic Resolve	
Resolved Chronic Problems							

- 1. Search for and add problems in the upper right search field. Use the **Add as** drop-down to change the problem being added to This Visit, This Visit and Chronic, or Chronic.
- 2. Use the This Visit and Chronic buttons as appropriate on each diagnosis.
- 3. Individually prioritize problems, which does not affect another provider's order. Prioritized This Visit problems will automatically populate into the Assessment and Plan component of the note, in the assigned order. Nonprioritized This Visit problems will not display in the Assessment and Plan component, unless all This Visit problems are not prioritized, then all This Visit problems will display.
- 4. Diagnosis Assistant is available by clicking on the exclamation point. This allows the provider to select a more specific diagnosis that meets ICD-10 requirements.
 - Selecting appropriate choices from the columns will narrow the diagnosis choices, then click save.
- 5. Use caution when resolving problems because this is a shared list across the system. If a provider resolves a problem, it resolves it for all other providers.

Important Information for Managing the Problem List – For Consultants

- Consultants do <u>not</u> need to prioritize all the problems contained on the Problem List, only the specific problems that they are managing.
- Only the problems that are prioritized flow into the Assessment/Plan of the note. Any problem which is not prioritized will be left out.
- Consultants should **not** delete a problem from the Problem List unless it is a problem that they are managing. The Problem List is a single, shared list used by **all** providers care for the patient. When a problem is resolved, that problem is then unavailable for other providers taking care of the patient, who need it to be available for their notes.



Cerner PowerChart EDUCATION

Procedure/Surgical History

The Procedure/Surgical History component is a free text component that will populate into the note. Providers can type, use Dragon Medical One, use Tagging, or use Cerner Auto Texts.

Procedure/S	Surgical H	History	Y						Selected Visit][4
Font	•	Size	• B	ΙL	<u>J A</u> -	Ē	± 3	 @ . []	
									Save	

Quick Links

The Quick Links component allows a provider to view Focus Notes and other basic patient information regarding Code Status-AMD (Advanced Medical Directives). This varies per specialty, for example: Cardiologist have a Quick Link called LVEF Results where they can view patient's ejection fraction information.

Note: MyPatient Views leads to myPatient Views in the Menu where SmartWeb can be utilized, and Blood Transfusion information can be viewed.

ς	Juick Links
	Other Chart Locations (4)
	Focus Notes
	myPatient Views
	Lab - Recent
	Results Review
L	L

Review of Systems

The Review of Systems component is a free text component that will populate into the provider's note. Providers can type, use Dragon Medical One, use Tagging, or use Cerner Auto Texts.

Font	- Size	• 🗶 🔓	B B	IUA-	3.8	6	

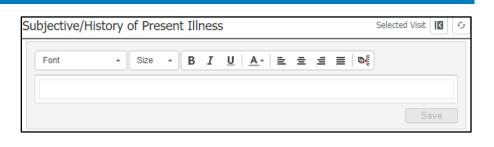
Scales and Assessments

The Scales and Assessment component allows a provider to view patient information such as pain scale, CIWA, PCA dosing, Broset score, Glasgow, and CHA2DS2-VASc Screening. The specific information available to view in this component varies per specialty.

Scales and Assessm	ients	+ V All Visits Last 24 hours	ast 48 hours Last 7 days Last 2 weeks
	DEC 13, 2023 20:00	19:30	18:00
Presence of Pain		Yes	
Pain Level (0 - 10)	2 - Mild Pain	6 - Moderate Pain	2 - Mild Pain
Location, Pain		left knee	

Subjective/History of Present Illness

The Subjective/History of Present Illness component is a free text component that will populate into the provider's note. Providers can type, use Dragon Medical One, use Tagging, or use Cerner Auto Texts.





Visits

The Visits component allows a provider to view details about a patient's current, future, and previous visits. Providers can view additional details about a visit by positioning their cursor over a visit row.

1. The Visits component displays information about the Reason for Visit, Location, Type, and Date columns for additional visit details. The current, open patient encounter is indicated with the Currently Viewing label.

			All Visits 🥠		>
Appointment/Encounter T	FIN	Location	Reason for Visit	I/P (Inpatient)	
				JUN 25, 2020 13:54 (Currently Viewing)	
I/P (Inpatient)	2100400002	MMC A3 3505 A	TESTING LAB RESULTS	Location	
I/P (Inpatient)	2017700003	MMC A4 4504 A	TEST	MMC A4 4504 A	
E/R (Emergency Rm)	1918211747	GRY EDG	NOT FEELING WELL STATES MY	Reason for Visit	
E/R (Emergency Rm)	1917400248	GRY EDG	BACK PAIN	TEST	
	I/P (Inpatient) I/P (Inpatient) E/R (Emergency Rm)	I/P (Inpatient) 2100400002 I/P (Inpatient) 2017700003 E/R (Emergency Rm) 1918211747	I/P (Inpatient) 2100400002 MMC A3 3505 A I/P (Inpatient) 2017700003 MMC A4 4504 A E/R (Emergency Rm) 1918211747 GRY EDG	Appointment/Encounter T FIN Location Reason for Visit I/P (Inpatient) 2100400002 MMC A3 3505 A TESTING LAB RESULTS I/P (Inpatient) 2017700003 MMC A4 4504 A TEST E/R (Emergency Rm) 1918211747 GRY EDG NOT FEELING WELL STATES MY	I/P (Inpatient) 2100400002 MMC A3 3505 A TESTING LAB RESULTS Location MMC A4 4504 A I/P (Inpatient) 2017700003 MMC A4 4504 A TEST MMC A4 4504 A Test E/R (Emergency Rm) 1918211747 GRY EDG NOT FEELING WELL STATES MY Reason for Visit

Vital Signs

The Vital Signs component allows the provider to view the latest and previous vital signs for the patient. The most recent set of Vital Signs with max temp will auto populate to most notes.

- 1. The most recent set of vital signs display first.
- 2. The display view can be changed by clicking on the right side of the icon.
- Click on the vital sign name to view a trending graph.

Vital Signs	All Visits 🛛 Last 72 hours 🛛 Last 7 days 🛛 Last 2 weeks 🔷 Last 3 months 🕅 🔲 🔗
MAY 14, 2021 10:09	MAY 13, 2021 18:00
Temp DegC 37.0	36.9
11D Lun 99	90
BP 3 134/92 1	130 / 88
Respiratory Rate br/min 18	16
Sp02 % 88	
SpO2 Location Finger, right	X
Respiratory Device room air/O2 standby	Temp
	37.00 36.98 36.94 36.92 36.92 36.90 18:00 00:00 06:00 MAY 14, 2021 10:09
Ti 33	emperature Axillary 7.0 DegC MAY 14, 2021 06:00 emperature Axillary
3/	6.9 DegC MAY 13, 2021 18:00

Temperature Axillary