

Chlamydia Screening Recommendation Workflow for Providers, Clinical Staff

Cerner PowerChart Ambulatory EDUCATION

Summary: Chlamydia Screening is recommended for females between the ages of 16 and 25. This health maintenance recommendation will automatically display on the Recommendation component within the Ambulatory Workflow page annually. To satisfy requirements to meet quality measures for Chlamydia Screening, one of the following needs to be completed from Recommendations: ChlamydiaGC Screening Completed, Order: Chlamydia NAAT and Order: Chlamydia/GC NAAT.

Support: Ambulatory Informatics at 231-392-0229.

Chlamydia Screening from Urine Specimen			
1. Within the Ambulatory Nursing Workflow, select the Recommendations component.			
a. Click the Orders drop-down.	Recommendations		+
b. Select Order:	Pending Not Due / Historical Communication Preference: Edit		My Role Only Group By
Chlamydia NAAT.	Recommendation Due ChlamydiaGC Screening D	Recurrence Every 1 Year(s)	Source Orders
Chlamydia/GC NAAT			Order: Chlamydia NAAT
	 Clinical Media (0) 		Order: Chlamydia/GC NAAT
		12	Drdering Physician X
2. Fill in the Ordering Physician box (If being orderd by clinical staff).			
a. Select Order.			Proposal
b. Add the correct provider's name.			MD, Physician
c. Select Communication type: Cosign Required.			ler Date/Time
d. Click OK.			5/2023 • V 1322 • EDT
		*Con	nmunication type
			sign Required
3. Click Orders for Signature			
4 Select Modify Details Orders for Signature			
Laboratory (1)			
Chlamydia/GC NAAT (Chlamydia and Remove			
Routine, Owce, 5/11/2023 10:40 Am Clear row			
Sign Modify Details			
		Orders for Signature \$ (?) □ ♡ ♡ Order	Name Status Start Details
5. Add additional Detail requirements in	⊿ Munson Family Practice Center ⊿ Laboratory	FIN:AT0056127927 Admit: 10/3/2022 6:15 PM EDT	
window.		🗹 🧞 🎯 Chlam (Chlan	ydia/GC NAAT New Order Routine, ONCE,atigue nydia and GC N Proposal
a. Specimen Type: Urine.			
6. Select the Diagnoses tab.		Details for Chiamydia/GC NAAT (Chiamydia and GC NAAT)	
a. Enter: Z11.3: Encounter for screening examination for		*Priority: Routine	
sexually transmitted disease.		*Specimen Type: Uri	ne 🗸
7. Click Sign.		Ana	al
		Ure	vical thrai
Details for Chlamydia/GC NAAT (Chlamy	ydia and GC NAAT)	Vag	inal
Petails 💷 Order Comments			
Encounter for screening examination for sexually	transmitted disease (Z11.3)		
Encounter for screening for bacterial sexually tra	nsmitted disease (Z11.3)		
	ACC 015(05C) (21113)		
1 Missing Required Details Dx Table Orders For Nurse Revie	evv 7	Sign	



Chlamydia Screening Recommendation Workflow for Providers, Clinical Staff

Cerner PowerChart Ambulatory EDUCATION

