

EMR Tip Sheet

Select Visits

Displays a summary of previous hospital visits for the patient.

Filters

Use the Time Period and Visit Type filters to restrict the view to specific visits.

✓ Indicates the current active visit

EMR “See” Tabs

Review Visit	Provides overview of non-clinical information.
New Results	Displays new lab results and reports
Clinical Panels	Displays data elements in Flowsheet format. Select Panels footer button to view all panels.
Vital Signs	Displays all documented vital signs.
I&O	Displays current intake and output fluid balance.
Medications	Displays current medication and medication administration history.
Laboratory	Displays lab results.
Microbiology	Displays microbiology results.
Blood Bank	Displays blood bank results.
Reports	Displays Medical Imaging and Provider reports.
Patient Care	Displays all assessments, regulatory assessments and care plans documented by nursing/allied health.
Notes	Displays nursing and allied health notes.
Refresh EMR	Click this tab to refresh the EMR in advance of the auto refresh time.

Summary Tab

Clinical

Special Indicators	May be added by clinicians as per organizational policy.
Active Problems	Current problems for this visit, updated by providers only.
Resolved/Inactive/ Ruled Out Problems	Past resolved or inactive problems from this visit or previous visits, updated by providers only.
Patient History	Medical/Surgical entered/reviewed by nursing and providers. Social history entered by providers.
Allergies	Provides ability to add new, review and update patient allergies.
Active Medications	For inpatients, displays a list of current active medications.
Home Medications	Provides ability to enter patient home medications.
Implantable Devices	Providers ability to track implantable devices in case of a recall.
Patient Pharmacy	Enter patient’s preferred pharmacy here.
Legal Indicators	Contains information pulled from registration and orders
Demographics	Displays demographic information pulling primarily from registration.
Appointments	Displays past or scheduled same day appointments.
Surgeries	Displays surgical procedures for current visit, past and future surgeries booked in SUR
Care Team	Lists the care providers from registration

EMR “Do” Tabs

Orders	Review and enter orders	Worklist	Enter documentation
Snapshot	Provides overview of patient and support Transfer of Accountability process	MAR	Administer medications
Specialty Care	Access the Specialty Care flowsheet	Write Note	Enter patient notes
		TAR	Document transfusion/blood product infusion
		Discharge Plan	Used for ongoing discharge planning

Home Medications

Document New home medication

1. Click on the **Edit** button from the Home Medication section of the Summary tab.
2. Type the name of the home medication until it displays.
3. Click the plus sign beside the medication. If the prescribed dose is not available select the choice that is the closest to the prescription.
4. Respond to all fields as known.
 - 🚩 Indicates there are additional fields to be completed
 - ✅ Indicates the information is ready to be filed.
5. The medication is now added to the home medication list. Continue to add any additional medications as required.

No Known Medications

Click the **No Known Home Medications** button to indicate that a patient is not on any medications.

Unobtainable

Click the **Unobtainable** button if the patient is either unresponsive or unable to communicate.

Non Formulary

If the medication cannot be found it can be added as a Non Formulary medication with the "Free Text" button.

Note: Non Formulary medications are not included in interaction checking.

Medical/Surgical/Family History

Document medical/surgical history

1. Click on the **Edit** button from the Med/Surg History section of the Summary tab.
2. Each section has been arranged by system. Use the Picklist or Search by text.
3. Click the + for each system to display the illnesses listed. Select all that apply.
4. Click **Save**

Document surgical history

1. Click the **Edit** button from the Med/Surg History section.
2. In the Search For field, type "S/P". Select the name (e.g. S/P abdominoplasty).
3. Click on the item (e.g. S/P abdominoplasty) under the History column.
4. Change the Category to "Surgical".
5. Click **Save**

Review Med/Surg History

1. Click the **Edit** button from the Med/Surg History section.
2. To document that the med/surg history was reviewed and nothing changed, click on the **Edit** button
3. Click the **Reviewed Med/Sur Hx** button at the bottom of the screen.
4. Shows last reviewed, hit cancel to go back.

Implantable Devices

Implantable devices populate the Summary screen when entered in the SUR module or can be entered manually.

Document new implantable device

1. Click on the **Edit** button from the Implantable Device section of the Summary tab.
2. Click **New**. Enter the Implant Date if known
3. Use the caret to select free text input method.
4. Type in the identifier
5. Enter a quantity. Add a comment if required.
6. Click **Save**.

Patient Pharmacy

Document new Patient Pharmacy

1. Click on the **Edit** button from the Patient Pharmacy section of the Summary tab.
2. Click **New**.
3. Search for the pharmacy in the look up.
4. Select the pharmacy and click OK.
5. Click **Save**.

Note: More than one pharmacy can be added and a preferred pharmacy can be defined by clicking the radial button under preferred.

Document Allergies

1. Click the button for Allergies/AdvReac
2. Click **Edit New** and search for allergy.
3. Select the allergy and click on the button.
4. Select the Type and Reaction. ***Edit**
5. Click **Save**.

Note: Use **Add as Uncoded** to add uncoded allergies.

Confirm Allergies

1. Check off the allergies that have been reviewed.
2. Click the **Confirm** button at the bottom of the screen.
3. Click **Save**

No Known Allergies

Use **NKA** the button to indicate no known allergies.

Unobtainable

Use the button **Unobtainable** if the patient is unresponsive or otherwise unable to communicate.