



Admission Process

Lea Monday MD, PharmD

Chief Resident: Quality + Safety

Admission Flow

- Admission Pager Paged by ED
 - Carried by senior resident
 - DRH: 0997 / Harper: 0092 / Karmanos: 93307
- Senior resident takes the sign out from ED
 - Determines if level of care is appropriate
- Consider writing 3 basic orders right away
 - “Admit to inpatient”, Covering MD, Clinical alarms (such as telemetry or isolation), possibly diet
 - Or you can wait and enter everything after seeing patient
- See the patient
 - Can see together with senior or separate
- Return and complete orders (with senior)

Admission Check List

- “Admit to inpatient” order
 - Covering MD
 - Diet
 - DVT prophylaxis
 - Labs / cultures
 - Imaging
 - EKG
-
- Home Meds
 - Hospital Meds
 - Fluids
 - AM Labs
 - AM Images
 - Consults

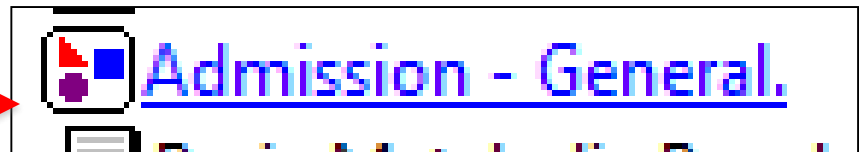
Using the admission “orderset” (next slide) will include options for you to order all the things in this box in one place.



Admission Order Set

- “Admission – General” is our admission order set
- Order sets decrease errors!
 - Includes many parameters needed for a safe admission
 - Code status
 - Clinical alarms (telemetry, I/O's, neurochecks)
 - Covering MD
 - Labs, EKGs, and imaging can be ordered here

When you see this little symbol next to something in the EMR it indicates a nested care set, these are generally safer and better to use. You can always pick what you want to click out of all the options



TEST, TEST

TEST, TEST

Allergies: Allergies Not Recorded

Age:

DOB:

No XDocs

Menu - All

Summary View

Womens Health Workflow

Perioperative Communication

Chart Search

SBAR Nursing Communication

Results Review

PowerOrders

Document Viewing

I/O & I-View Flowsheets

MAR

MAR Summary

Medication List

Clin Doc

Immunization Schedule

Pt. Info

Patient Schedule

Allergies

Problems and Diagnoses

Histories

Outside Records

< > PowerOrders

+ Add | Document Medication by Hx | Reconciliation | Ch

Orders

Medication List

Document In Plan

View

Plans

Document In Plan

Suggested Plans (0)

Orders

☐ ADT/Condition/Code Status

☐ Activity

☐ Nutrition Services

☐ Vitals/Patient Care

☐ Medications

☐ IV Infusions

☐ Laboratory Services

☐ Radiology Services

☐ Consults

☐ Pulmonary Services

☐ Cardiology/Cardiovascular Services

☐ Therapy Services

☐ Communication

☐ Miscellaneous

☐ Order Sets

Diagnoses & Problems

Related Results

Display:



Detail

Dx Tab



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Physician Group

Allergies: Allergies Not Recorded

DOB:

Attending:

Status:OUTPT-0.00 Days

No XDocs

Diagnoses & Problems

Diagnosis (Problem) being Addressed this Visit

+ Add ↔ Convert | Display: All

ICD-10

Annotated Display | Code | Clinic

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These orders below will not be in your profile. These are all of my saved favorites. Yours will not look like this when first starting. We will discuss how to save to favorites at the end.

Search: admission gen | Advanced Options | Type: Inpatient

- Admission - General Neurology.
- Admission - General.
- General Medical Admission Orders.
- General Rehab Admission
- Neurology General Admission Order Set.
- Ophthalmology General Admission/Consult.
- Diabetic Ketoacidosis (Gen Med) Admission.
- Gastrointestinal Bleed Admission P&T EBG.
- Enter to Search

- Admission - General.
- Basic Metabolic Panel.
- Blood Culture
- Blood Gas Analysis with Co-Ox by RT Stat
- CBC w/ Diff.
- Constant Observer
- Routine, One to One Observation, psychosis. sitter
- Admission to APN/CWOCN One Time Only
- Covering Physician Routine, Dr. Monday (7219)
- Covering Physician
- Routine, DR. MONDAY (MICU Resident), 7219
- Covering Physician
- Routine, 0997 until 1pm today (1/7/19)
- EKG-Request for
- Now, Tachycardia, Unit Personnel to Perform
- Note: For Pediatric Patients indicate Height a...
- Incentive Spirometry. Q10MIN
- Initiate Tube Feeding One Time Only

Magnesium-Laboratory

Routine, Nurse Collect, 1, Collect 1 Green Gel tube (Oxygen Therapy. Routine, CONTINUOUS, Oxygen Therapy. Routine, CONTINUOUS, T Phosphorus

Routine, Nurse Collect, 1, Collect 1 Green Gel tube (Repeat Blood Count w

Duplicate Routine, I Collect One lavender Repeat Electrolytes Pro

Duplicate Routine, I Tube type and volu

Repeat Multiphasic Pro Reticulocyte (Reti) Count Sodium Chloride 0.9% Routine, 1,000 mL, I Titrate O2 to Maintain Oxy

Component		Order Details
Admit		
<input checked="" type="checkbox"/>	Resuscitation Status Orders.	
<input checked="" type="checkbox"/>	Admit Inpatient Orders.	
<input type="checkbox"/>	Covering Physician	
Diet		
<input type="checkbox"/>	Nothing By Mouth (NPO)	
Vitals		
<input type="checkbox"/>	Pulse Oximetry (Spot Check).	T;N, One Time Only
<input type="checkbox"/>	Pulse Oximetry.	T;N, CONTINUOUS
<input type="checkbox"/>	Vital Signs.	T;N, Q8
<input type="checkbox"/>	Vital Signs.	T;N
<input checked="" type="checkbox"/>	Vital Signs per Protocol	
Nursing		
<input type="checkbox"/>	Absolute Bedrest (Bedrest)	T;N, Continuous
<input type="checkbox"/>	Ambulate w/ Assist	T;N
<input type="checkbox"/>	Telemetry Class I (72 hrs)	Routine, T;N
<input type="checkbox"/>	Telemetry Class II (48 hrs)	Routine, T;N
<input type="checkbox"/>	Telemetry Class III (24 hrs)	Routine, T;N
<input type="checkbox"/>	Fall Precautions	T;N, One Time Only
<input type="checkbox"/>	Intake and Output.	T;N
<input type="checkbox"/>	Neurological Checks. (Neuro Checks.)	T;N, Q8
<input type="checkbox"/>	Oxygen Therapy.	T;N, CONTINUOUS, Nasal Cannula, Adult, Treat-Prevent Hypoxemia, Titrate to Maintai

This is the actual "admission" order within the admission ordeset. When you click on this a box will populate and you can fill in the attending, the diagnosis, the condition, the floor type (medical ward/floor)

No Results

This is a nested care set.

Order details

Detail values

- So pretend at this point you and your senior just entered the “admit to inpatient” order and the covering MD order.
- Now you go to the ED to see your patient
- Then you can come back and work on the rest of your orders in the “admission – general” orderset.

Components of “Admission General” careset

<input checked="" type="checkbox"/>	Resuscitation Status Orders.
<input checked="" type="checkbox"/>	Admit Inpatient Orders.
<input type="checkbox"/>	Covering Physician
<input type="checkbox"/>	Diet
<input type="checkbox"/>	Nothing By Mouth (NPO)
<input type="checkbox"/>	Vitals
<input type="checkbox"/>	Pulse Oximetry (Spot Check).
<input type="checkbox"/>	Pulse Oximetry.
<input type="checkbox"/>	Vital Signs.
<input type="checkbox"/>	Vital Signs.
<input checked="" type="checkbox"/>	Vital Signs per Protocol
<input type="checkbox"/>	Nursing
<input type="checkbox"/>	Absolute Bedrest (Bedrest)
<input type="checkbox"/>	Ambulate w/ Assist
<input type="checkbox"/>	Telemetry Class I (72 hrs)
<input type="checkbox"/>	Telemetry Class II (48 hrs)
<input type="checkbox"/>	Telemetry Class III (24 hrs)
<input type="checkbox"/>	Fall Precautions
<input type="checkbox"/>	Intake and Output.
<input type="checkbox"/>	Neurological Checks. (Neuro Check)
<input type="checkbox"/>	Oxygen Therapy.
<input type="checkbox"/>	Oxygen Therapy.
<input type="checkbox"/>	Sequential Compression Device.
<input checked="" type="checkbox"/>	Smoking Cessation Information
<input checked="" type="checkbox"/>	Up Ad Lib (Activity as Tolerated)
<input type="checkbox"/>	Up with Help
<input type="checkbox"/>	Weight.

<input type="checkbox"/>	Labs
<input type="checkbox"/>	Chemistry
<input type="checkbox"/>	ALT - Alanine Transaminase (GPT)
<input type="checkbox"/>	Amylase-Laboratory
<input type="checkbox"/>	Bilirubin-Direct/Conjugated
<input type="checkbox"/>	Bilirubin-Total
<input type="checkbox"/>	Basic Metabolic Panel.
<input type="checkbox"/>	Lipase-Laboratory
<input type="checkbox"/>	Magnesium-Laboratory
<input type="checkbox"/>	Phosphorus
<input type="checkbox"/>	Hematology
<input type="checkbox"/>	Complete Blood Count
<input type="checkbox"/>	Complete Blood Count with Differential
<input type="checkbox"/>	URINALYSIS
<input type="checkbox"/>	Urinalysis with Microscopic Exam
<input type="checkbox"/>	MICROBIOLOGY
<input type="checkbox"/>	Resp Cult/Bronc W/Stain (Sputum Culture with Gram Stain)
<input type="checkbox"/>	Blood Culture
<input type="checkbox"/>	Urine Culture W Susceptibility
<input type="checkbox"/>	Radiology
<input type="checkbox"/>	Ancillary
<input type="checkbox"/>	ECG-Request for
<input type="checkbox"/>	ECG-Request for
<input type="checkbox"/>	IV Fluids
<input type="checkbox"/>	Peripheral IV Insertion.
<input type="checkbox"/>	Saline Lock
<input checked="" type="checkbox"/>	Dextrose 5% in Water (D5W)
<input checked="" type="checkbox"/>	Dextrose 5% with 0.45% NaCl (D5W 0.45% NaCl)
<input checked="" type="checkbox"/>	Sodium Chloride 0.45%

<input checked="" type="checkbox"/>	Dextrose 5% with 0.45% NaCl (D5W 0.45% NaCl)
<input checked="" type="checkbox"/>	Sodium Chloride 0.45%
<input checked="" type="checkbox"/>	Sodium Chloride 0.9%
<input type="checkbox"/>	Medications
<input checked="" type="checkbox"/>	docusate (Colace)
<input checked="" type="checkbox"/>	Patient Has No Contraindications to SCD's
<input checked="" type="checkbox"/>	heparin
<input type="checkbox"/>	Consult
<input type="checkbox"/>	Care Management Specialist Referral
<input type="checkbox"/>	Occupational Therapy Evaluation and Treatment. (OT)
<input type="checkbox"/>	Occupational Therapy Evaluation and Treatment Acute Care
<input type="checkbox"/>	Physical Therapy Evaluation and Treatment Acute Care.
<input type="checkbox"/>	Social Work Consult

These are all the orders included in the admission orderset. You can keep scrolling and select anything you need. Click whatever boxes you want on the left and fill in any required parameters. This helps you not miss anything.

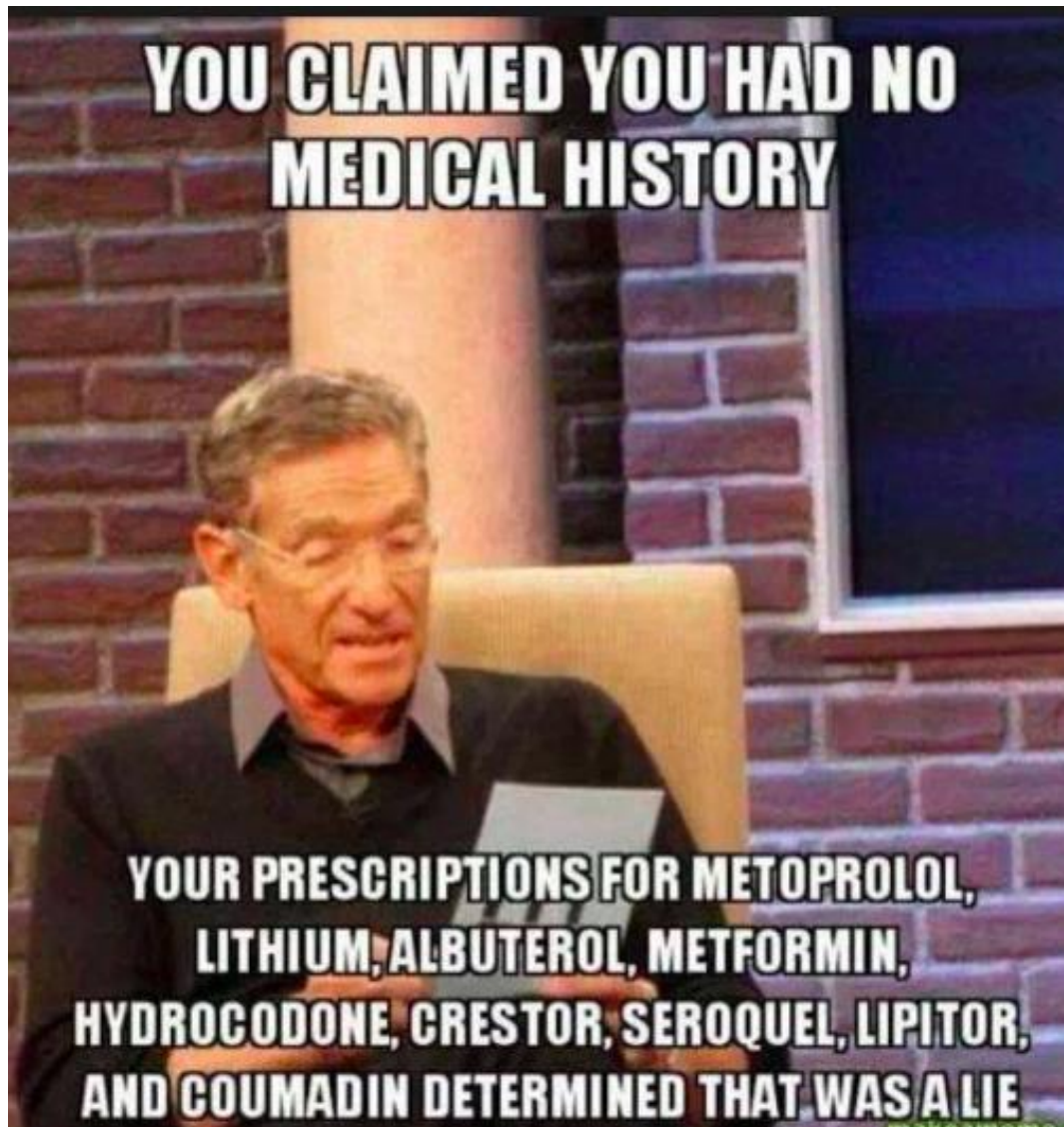
Admission Check List

- ~~“Admit to inpatient” order~~
- ~~Covering MD~~
- ~~Diet~~
- ~~DVT ppx~~
- ~~Labs / cultures~~
- ~~Imaging~~
- ~~EKG~~
- Home Meds
- Hospital Meds
- Fluids
- ~~AM Labs~~
- ~~AM Images~~
- Consults

Everything crossed off would be done if you entered it via the Admission – General orderset. Of course you can still order these things individually in powerorders as well. For example type “EKG” or “CBC” and these things will come up.



Great, now it's time for Med Rec!



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Physician Group

Medication Reconciliation: (Definition)

•the process of creating the most accurate list possible of all medications a patient is taking (drug name, dosage, frequency, and route) — and comparing that list against the physician's admission, transfer, and/or discharge orders, with the goal of providing correct medications to the patient at all transition points within the hospital

Sources of Med Rec

- The Patient or their family:**

- Only as accurate as what they remember unless they brought bottles
- “Its in the computer” → Probably not accurate (see below)

- The Meds from last DC in EMR**

- Only accurate if the patient has been to no other hospital, no PCP, and no other appts since their last DC
- Otherwise, changes have likely been made since they were last here

- The Pharmacy**

- Extra benefit of checking when Rx last filled

- The PCP**

- Only as accurate as the PCP office has documented

Medication Reconciliation

- Situations when accuracy is extremely important
 - HIV cocktails
 - (missed components can create viral resistance)
 - Transplant medications
 - (Organ rejection)
 - Anticoagulants
 - (warfarin)
 - Levothyroxine

Medication Reconciliation: (A+) 😊

- The patient wasn't sure when I was reading off the names of his meds in Citrix, so I called his pharmacy and got the names and last fills dates. His CVS was closed so I called a 24H CVS and had them access his medication profile. It looks like the lasix had a 30 day supply dispensed 45 days ago so he may have missed a few. I updated the EMR to reflect what he was supposed to be taking.

Medication Reconciliation: (D) 😞

- The patient wasn't sure when I was reading off the names of his meds in Citrix. I copied whatever orders he got on his last discharge.

Takeaway point:

Med rec is tedious, and difficult to do well when you are busy. Treat the patient like you family and try your best. Reach out to medical students or senior for help calling pharmacies, etc.

TEST, TEST
Allergies: Allergies Not Recorded

Age:
DOB:
No XDocs

Sex:
Attending:
Status:OUTPT-0.00 Days

Weight:

Menu - All

- Summary View
- Womens Health Workflow
- Perioperative Communication
- Chart Search
- SBAR Nursing Communication
- Results Review
- PowerOrders**
- Document Viewing
- I/O & I-View Flowsheets
- MAR
- MAR Summary
- Medication List
- Clin Doc
- Immunization Schedule
- Pt. Info
- Patient Schedule
- Allergies
- Problems and Diagnoses
- Histories

PowerOrders

+ Add | Document Medication by Hx | Reconciliation | Check Interactions | External Rx History | Rx Plans (0): Error

Orders Medication List Document In Plan

View

- Plans
 - Document In Plan
 - Suggested Plans (0)
- Orders
 - ☐ ADT/Condition/Code Status
 - ☐ Activity
 - ☐ Nutrition Services
 - ☐ Vitals/Patient Care
 - ☐ Medications
 - ☐ IV Infusions
 - ☐ Laboratory Services
 - ☐ Radiology Services
 - ☐ Consults
 - ☐ Pulmonary Services
 - ☐ Cardiology/Cardiovascular Services
 - ☐ Therapy Services
 - ☐ Communication
 - ☐ Miscellaneous
 - ☐ Order Sets

Diagnoses & Problems

Related Results

Display: All Active Orders

Details

Dx Table Orders For Cosignature

Before doing the reconciliation we have to document the medication history first. Otherwise an error box will pop up. Clicking here will generate a window with the list of patient's meds as of the last DMC discharge. You can edit the list or delete it and type them in yourself. Or do a mix of both

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- Outside Records

PowerOrders

+ Add | Document Medication by Hx | Reconciliation | Check Interactions | External Rx History | Rx Plans (0): Error

Orders Medication List Document In Plan

View

- Plans
 - Document In Plan
 - Suggested Plans (0)
- Orders
 - ☐ ADT/Condition/Code Status
 - ☐ Activity
 - ☐ Nutrition Services
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 - ☐ Medications
 - ☐ IV Infusions
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 - ☐ Pulmonary Services
 - ☐ Cardiology/Cardiovascular Services
 - ☐ Therapy Services
 - ☐ Communication
 - ☐ Miscellaneous
 - ☐ Order Sets

Diagnoses & Problems

Related Results

No Order History Performed

The order reconciliation process cannot take place until the selected encounter has had an order history performed.

OK

IF you try to do reconciliation before documenting the med history, this error message will pop up.

Details

Dx Table Orders For Cosignature

TEST, TEST - S-842261164 Opened by MONDAY

Task Edit View Patient Chart Links N

Home Inbox Patient List Scheduling

MEDLINE VIS Lippincott Advis

TEST, TEST

TEST, TEST

Allergies: Allergies Not Recorded

Menu - All

- Summary View
- Womens Health Workflow
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- Problems and Diagnoses
- Histories
- Outside Records

Plans

- Document
- Suggested
- Orders
- ADT/C
- Activity
- Nutritio
- Vitals/P
- Medica
- IV Infus
- Laborat
- Radiolo
- Consult
- Pulmor
- Cardiol
- Therap
- Comm
- Miscell
- Order S

Document Medication by Hx

TEST, TEST

Allergies: Allergies Not Recorded

Age: DOB: Sex: Attending: Status: OUTPT-0.00 Days Weight: Loc: Fin#: DRG-GMLOS:

No XDocs

+ Add Medication History

No Known Home Medications ☐ Unable To Obtain Information ☐ Use Last Compliance

Reconciliation Status

✓ Meds History Admission Discharge

Document Medication by Hx

Order Name	Status	Details	Last Dose Date/Time	Information Source	Compliance	Cor
✓ No prescriptions or home medications are available for this patient.						
Pending Home Medications						
metFORMIN (metFORMIN 500 mg ...)	Document	500 mg, = 1 Tab, By Mouth, BID, # 60 Tab, 0 Refill(s)				
insulin gLARGine, LONG-acting (Lantus ...)	Document	20 Units, Subcutaneous, QHS, # 10 mL, 0 Refill(s)				
lisinopril (lisinopril 10 mg oral tablet)	Document	10 mg, = 1 Tab, By Mouth, BID, # 30 Tab, 0 Refill(s)				
atorvastatin (atorvastatin 40 mg or...)	Document	40 mg, = 1 Tab, By Mouth, Daily, # 30 Tab, 0 Refill(s)				
furosemide (Lasix 40 mg oral tablet)	Document	40 mg, = 1 Tab, By Mouth, Daily, # 90 Tab, 0 Refill(s)				

Details for lisinopril (lisinopril 10 mg oral tablet)

Details Order Comments Compliance

Dose	Route of Adminis...	Frequency	Duration	Dispense	Refill
1 Tab	By Mouth	BID		30 Tab	0

PRN:

0 Missing Required Details

Document History Cancel

These are the medications on file for the patient. This list is generated by what was dispensed on last DMC discharge or entered by the nurse in the ED. You can delete outdated medications, edit the orders (changing dose, frequency, etc) or click "+Add" to add additional meds which are not yet listed (next slide)

Notice that clicking on the lisinopril allows me to change the order as appropriate. For Ex I could change the dose or change to QHS if the patient took their medications at night

Search: metformin

Type: Document Medication by Hx

- metFORMIN
- metFORMIN 500 mg oral tablet
- metFORMIN 500 mg oral tablet (= 1 Tab, By Mouth, BID, # 60 Tab)
- metFORMIN 500 mg oral tablet (= 1 Tab, By Mouth, BID, # 180 Tab)
- metFORMIN 500 mg oral tablet (= 1 Tab, By Mouth, Daily, with meals, # 30 Tab)
- metFORMIN 500 mg oral tablet, extended release
- metFORMIN 500 mg oral tablet, extended release (= 1 Tab, By Mouth, Daily, # 30 Tab)
- metFORMIN 500 mg oral tablet, extended release (= 1 Tab, By Mouth, Daily, # 90 Tab)
- metFORMIN 500 mg/5 mL oral solution
- metFORMIN 500 mg/5 mL oral solution (= 5 mL, By Mouth, BID, # 300 mL)
- metFORMIN 500 mg/5 mL oral solution (= 5 mL, By Mouth, BID, # 900 mL)
- metFORMIN 500 mg/5 mL oral solution (= 10 mL, By Mouth, BID, # 600 mL)
- metFORMIN 500 mg/5 mL oral solution (= 10 mL, By Mouth, BID, # 1800 mL)
- metFORMIN 750 mg oral tablet, extended release
- metFORMIN 750 mg oral tablet, extended release (= 1 Tab, By Mouth, Daily, # 30 Tab)

"Enter" to Search

By Clicking "+Add" a box will pop up where you can search for a medication and add it to the patients list. Always try to pick the option with the most information (dose, frequency, etc). This will make it easier for you when the patient leaves as the parameters will be entered for the discharge prescriptions and only slight changes or no changes will be needed.

If you can't figure out the details, you can use a less specific entry and write in the comments "Patient doesn't know dose, etc".

After selecting a drug to add you will click it and then this screen will be white again which is confusing at first. Don't worry, it will be added to the window behind this window which is visible if you reside this one (see next slide)

TEST, TEST

TEST, TEST

Allergies: Allergies Not Recorded

Menu - All

- Summary View
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- Problems and Diagnoses
- Histories
- Outside Records

+ Add

Orders

Plans

Suggested

Orders

- ☐ ADT/C
- ☐ Activity
- ☐ Nutriti
- ☐ Vitals/P
- ☐ Medica
- ☐ IV Infus
- ☐ Laborat
- ☐ Radiolo
- ☐ Consult
- ☐ Pulmor
- ☐ Cardiol
- ☐ Therap
- ☐ Comm
- ☐ Miscell
- ☐ Order S

Document Medication by Hx

TEST, TEST

Allergies: Allergies Not Recorded

Age:

DOB:

No XDocs

+ Add

Medication History

☐ No Known Home Medications

☐ Unable To Obtain Information

Document Medication by Hx

Order Name	Status	Details
Pending Home Medications		
metFORMIN (metFORMIN 500 mg ...)	Document	500 mg, = 1 Tab, By Mouth, BID, # 60
insulin gLARGine, LONG-acting (Lantus ...)	Document	20 Units, Subcutaneous, QHS, # 10 m
lisinopril (lisinopril 10 mg oral tablet)	Document	10 mg, = 1 Tab, By Mouth, Daily, # 3
atorvastatin (atorvastatin 40 mg or...)	Document	40 mg, = 1 Tab, By Mouth, Daily, # 3
furosemide (Lasix 40 mg oral tablet)	Document	40 mg, = 1 Tab, By Mouth, Daily, # 9

Details for furosemide (Lasix 40 mg oral tablet)

Details Order Comments Compliance

Dose	Route of Adminis...	Frequency	Duration
1 Tab	By Mouth	Daily	

PRN:

0 Missing Required Details

TEST, TEST - Add Order

TEST, TEST

Allergies: Allergies Not Recorded

Age:

DOB:

Sex:

Attending:

Status:OUTPT-...

Weight:

Loc:

Fin#:

DRG-GMLOS:

No XDocs

Search:

Type:

Document Medication by Hx

Folder: Favorites

Search within: Medications

Keep in mind these are all just medication history. None of these are active orders. That part is coming.

TEST, TEST - S-842261164

Done

TEST, TEST - S-842261164 Opened by MONDAY

Task Edit View Patient Chart Links N

Home Inbox Patient List Scheduling

MEDLINE VIS Lippincott Advis

TEST, TEST

TEST, TEST

Allergies: Allergies Not Recorded

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Document Medication by Hx

TEST, TEST

Allergies: Allergies Not Recorded

Age: DOB: No XDocs

Sex: Attending: Status: OUTPT-0.00 Days

Weight: Loc: Fin#: DRG-GMLOS:

+ Add Medication History

☐ No Known Home Medications ☐ Unable To Obtain Information ☐ Use Last Compliance

Reconciliation Status

✓ Meds History Admission Discharge

Document Medication by Hx

Order Name	Status	Details	Last Dose Date/Time	Information Source	Compliance	Cor
✓ No prescriptions or home medications are available for this patient.						
Pending Home Medications						
metFORMIN (metFORMIN 500 mg ...)	Document	500 mg, = 1 Tab, By Mouth, BID, # 60 Tab, 0 Refill(s)				
insulin gLARGine, LONG-acting (Lantus ...)	Document	20 Units, Subcutaneous, QHS, # 10 mL, 0 Refill(s)				
lisinopril (lisinopril 10 mg oral tablet)	Document	10 mg, = 1 Tab, By Mouth, BID, # 30 Tab, 0 Refill(s)				
atorvastatin (atorvastatin 40 mg or...)	Document	40 mg, = 1 Tab, By Mouth, Daily, # 30 Tab, 0 Refill(s)				
furosemide (Lasix 40 mg oral tablet)	Document	40 mg, = 1 Tab, By Mouth, Daily, # 90 Tab, 0 Refill(s)				

If the patient takes no medication you can click "no known Home medications"

if they have no idea what they take and you are unable to figure it out you can click "Unable to obtain information"

Details for lisinopril (lisinopril 10 mg oral tablet)

Details Order Comments Compliance

Dose	Route of Adminis...	Frequency	Duration	Dispense	Refill
1 Tab	By Mouth	BID		30 Tab	0

PRN: []

0 Missing Required Details

Document History Cancel

TEST, TEST

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PowerOrders

+ Add | Document Medication by Hx | Reconciliation | Check Interactions | External Rx History | Rx Plans (0): Error

Orders Medication List Document In Plan

Admission
Transfer
Discharge

View

- Plans
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 - ☐ Communication
 - ☐ Miscellaneous
 - ☐ Order Sets

Display: All Active Orders

	Order Name	Status	Details
Medications			
	atorvastatin (atorvastatin 40 mg oral tablet)	Documente	40 mg, = 1 Tab, By Mouth, Daily, # d
	furosemide (Lasix 40 mg oral tablet)	Documente	40 mg, = 1 Tab, By Mouth, Daily, # d
	insulin gLARGine, LONG-acting (Lantus 100 uni...	Documente	20 Units, Subcutaneous, QHS, # 10 d
	lisinopril (lisinopril 10 mg oral tablet)	Documente	10 mg, = 1 Tab, By Mouth, BID, # d
	metFORMIN (metFORMIN 500 mg oral tablet)	Documente	500 mg, = 1 Tab, By Mouth, BID, # d

Details

Displayed: All Active Orders

Table Orders For Cosignature

Now that you've entered all their home meds, you can click on "reconciliation" tab for "admission" and decide what you will keep and what you will hold.

TEST, TEST - S-842201104 Opened by MONDAY

Task Edit View Patient Chart Links N

Home Inbox Patient List Scheduling

MEDLINE VIS Lippincott Advis

TEST, TEST

TEST, TEST

Allergies: Allergies Not Recorded

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- Problems and Diagnoses
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Orders Medi

Plans

- Document
- Suggested
- Orders
- ADT/C
- Activity
- Nutriti
- Vitals/P
- ☒ Medic
- IV Infus
- Laborat
- Radiolo
- Consult
- Pulmon
- Cardiol
- Therap
- Comm
- Miscell
- Order S

Order Reconciliation: Admission - TEST, TEST

TEST, TEST Age: Sex: Weight: Loc:
Allergies: Allergies Not Recorded DOB: Attending: Fin#: DRG-GMLOS:
 No XDocs Status:OUTPT-0.00 Days

+ Add | Manage Plans

Reconciliation Status
☒ Meds History ☐ Admission ☐ Discharge

Orders Prior to Reconciliation

Order Name/Details	Status					
Medications						
atorvastatin (atorvastatin 40 mg oral tablet) 40 mg, 1 Tab, By Mouth, Daily, 30 Tab, 0 Refill(s)	Documented	<input type="radio"/>	<input type="radio"/>			
furosemide (Lasix 40 mg oral tablet) 40 mg, 1 Tab, By Mouth, Daily, 90 Tab, 0 Refill(s)	Documented	<input type="radio"/>	<input type="radio"/>	Continue		
insulin gLARGine, LONG-acting (Lantus 100 units/mL subcutaneous solution) 20 Units, Subcutaneous, QHS, 10 mL, 0 Refill(s)	Documented	<input type="radio"/>	<input type="radio"/>			
lisinopril (lisinopril 10 mg oral tablet) 10 mg, 1 Tab, By Mouth, BID, 30 Tab, 0 Refill(s)	Documented	<input type="radio"/>	<input type="radio"/>			
metFORMIN (metFORMIN 500 mg oral tablet) 500 mg, 1 Tab, By Mouth, BID, 60 Tab, 0 Refill(s)	Documented	<input type="radio"/>	<input type="radio"/>			

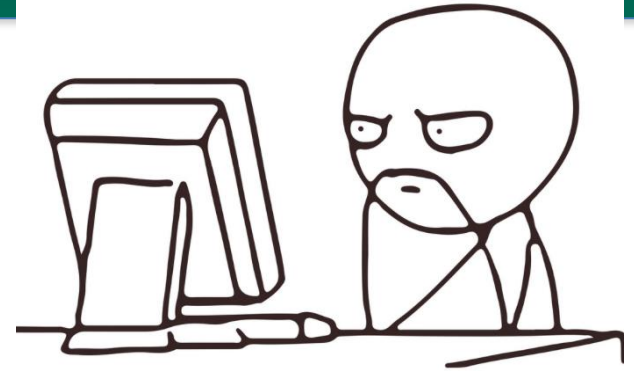
Orders After Reconciliation

Order Name/Details	Status
--------------------	--------

You can continue (green arrow) or stop (red square)

Details

0 Missing Required Details 5 Unreconciled Order(s) Dx Table Reconcile And Sign Cancel



- What is the point of this history and med-rec, can't I just type in all the medications I want my patient to take directly into power orders?
 - Yes you can but....
 - For quality and safety purposes, all patients need to have a med/rec documented
 - It is annoying coming in, but makes writing discharge prescriptions much easier
 - It is the right thing to do

Admission Check List

- ~~Admission OrderSet~~
- ~~Covering MD~~
- ~~Diet~~
- ~~DVT ppx~~
- ~~Labs / cultures~~
- ~~Imaging~~
- ~~EKG~~
- ~~Home Meds~~
- Hospital Meds
- Fluids
- ~~AM Labs~~
- ~~AM Images~~
- Consults



Great, now it's time to add any medications you want to start in the hospital

Task Edit View Patient Chart Links Notifi

Home Inbox Patient List Scheduling

MEDLINE VIS Lippincott Advisor

TEST, TEST

TEST, TEST

Allergies: Allergies Not Recorded

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Orders

- Plans
- Document In P
- Suggested Plans
- Orders
- ADT/Condit
- Activity
- Nutrition Se
- Vitals/Patier
- ☒ Medication
- IV Infusions
- Laboratory S
- Radiology S
- Consults
- Pulmonary S
- Cardiology/
- Therapy Ser
- Communica
- Miscellaneo
- Order Sets

TEST, TEST

Allergies: Allergies Not Recorded

Age: Sex: Weight: Loc: Fin#: DRG-GM

DOB: Attending: Status: OUTPT-0.00 Days

No XDocs

Diagnoses & Problems

Diagnosis (Problem) being Addressed this Visit

+ Add Convert Display: All

ICD-10

Annotated Display Code

Problems

+ Add Convert No Chronic Problems

Display: All

ICD-10

Annotated Display Name of Problem Co

Search: lasix

Lasix

Lasix (20 mg, By Mouth, Tab, Daily)

Lasix (40 mg, By Mouth, Tab, Daily)

Enter to Search

Advanced Options Type: Inpatient

Search within: All

Magnesium-Laboratory

Routine, Nurse Collect, 1, One Time Only, 1, Day/Collect 1 Green Gel tube (preferred)

Oxygen Therapy.

Routine, CONTINUOUS, Nasal Cannula, Adult, 28

Oxygen Therapy.

Routine, CONTINUOUS, Treat-Prevent Hypoxemi

Phosphorus

Routine, Nurse Collect, 1, One Time Only, Blood Collect 1 Green Gel tube (preferred)

Repeat Blood Count with Differential Routine

Duplicate Routine, Nurse Collect, 1, One Time Only, Collect One lavender top tube.

Repeat Electrolytes Profile Routine - Na/K/Cl/Cr

Duplicate Routine, Nurse Collect, 1, One Time Only, Tube type and volume: Green Gel (preferred)

Repeat Multiphasic Profile Routine

Reticulocyte (Retic) Count

Sodium Chloride 0.9%

Routine, 1,000 mL, IV INFUSION, 100 mL/hr

Titrate O2 to Maintain Oxygen Sat > 94%

Go to power orders and add any medications you want to start in the hospital. You can also order anything else here> more labs, new diet, restraints, etc.

Medication frequency and priority

- **Frequency**

- Daily = 0900
- Q24 = 0900
- Q24H = every day at the time you are writing the order
- BID = 0900 and 2100
- Q12 = 0800 and 1800
- Q12H = every 12 hours starting at the time you are writing the order
- You don't have to memorize these, when you enter any medication you will be able to see when the start time is and can adjust if needed.

- **Priority**

- Routine: will be given at the next scheduled default time
 - Now: will give a dose now, then next dose at the next scheduled default time
 - Stat: will give a dose now, then next dose at the next scheduled default time
-
- Lasix 40mg PO daily routine (written by resident 7/1 @10:22) = first dose 9am 7/2
 - Lasix 40mg PO Q24 routine (written by resident 7/1 @10:22) = first dose 9am 7/2
 - Lasix 40mg PO Q24H routine (written by resident 7/1 @10:22) = first dose 10:22 am 7/2
 - Lasix 40mg PO daily NOW (written by resident 7/1 @10:22) = first NOW then next dose 0900 am 7/2
 - Lasix 40mg PO one time only routine = one dose at the time of the order being written

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Allergies

Problems and Diagnoses

Allergies

Set All as Reviewed

+ Add

Modify

No Known Allergies

No Known Medication Allergies

Reverse Allergy Check

Display Active

D.	Substance	Category	Reactions	Seve...	Type	C.	Est. Onset	Reaction S...	Updated By	Source	Reviewed	I..
----	-----------	----------	-----------	---------	------	----	------------	---------------	------------	--------	----------	-----

Allergies tab: to add allergies

See www.wsumed.com

Helpful hints for how to save orders to favorites in citrix

Free Hotmail Web Slice Gallery Suggested Sites

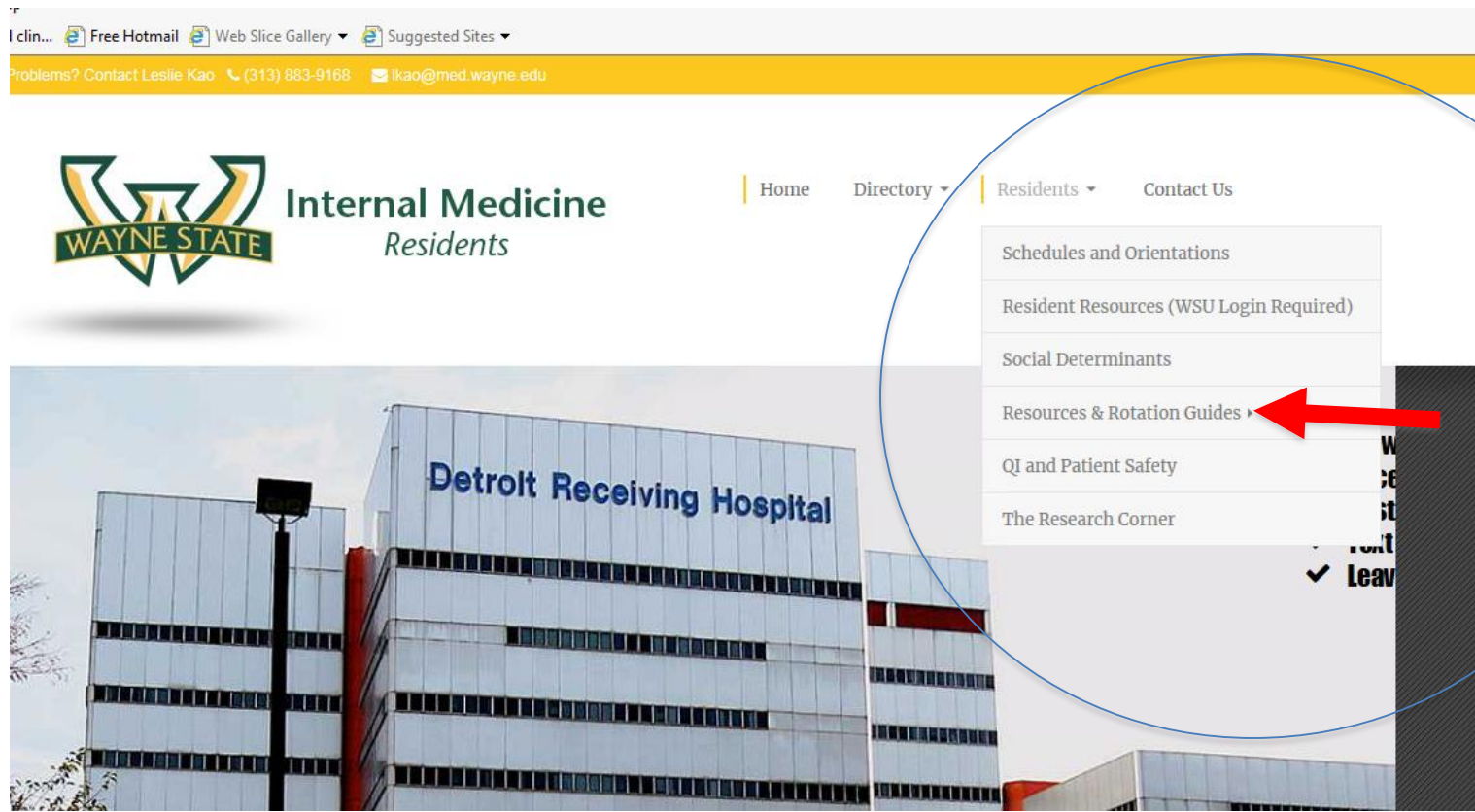
Problems? Contact Leslie Kao (313) 883-9168 lkao@med.wayne.edu

WAYNE STATE Internal Medicine Residents

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- Schedules and Orientations
- Resident Resources (WSU Login Required)
- Social Determinants
- Resources & Rotation Guides
- QI and Patient Safety
- The Research Corner

✓ Leave





Internal Medicine *Residents*

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Resources & Rotation Guides



Resources for Medical Floor Rotations (DRH/HUH/KCI/VA)

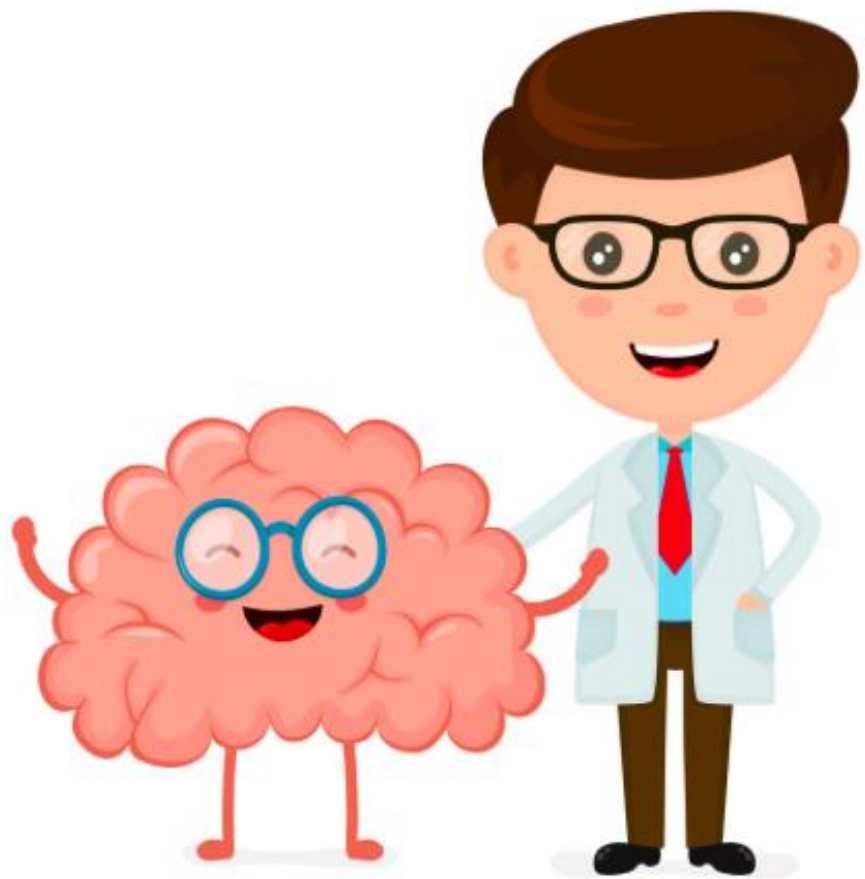
Morning Report Expectations/Examples The rules and expectations for morning report including recommendations from Dr. Levine, along with 3 example presentations for reference.

Helpful Hints. EMR tips, supportive care templates, and more.

VA Operational Resources. Information specific to the VA including Phone/pager directory, VA pearls survival guide, hyperlink to access Citrex while at the VA, Interfacility transfer steps, and other resources which were previously taped to the wall in the A3 work room.

[Schedules](#)[Applicant Portal](#)[Resident Resources](#)

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