

Note Tips

Lea Monday MD, PharmD

Chief Resident: Quality + Safety

Note Tips

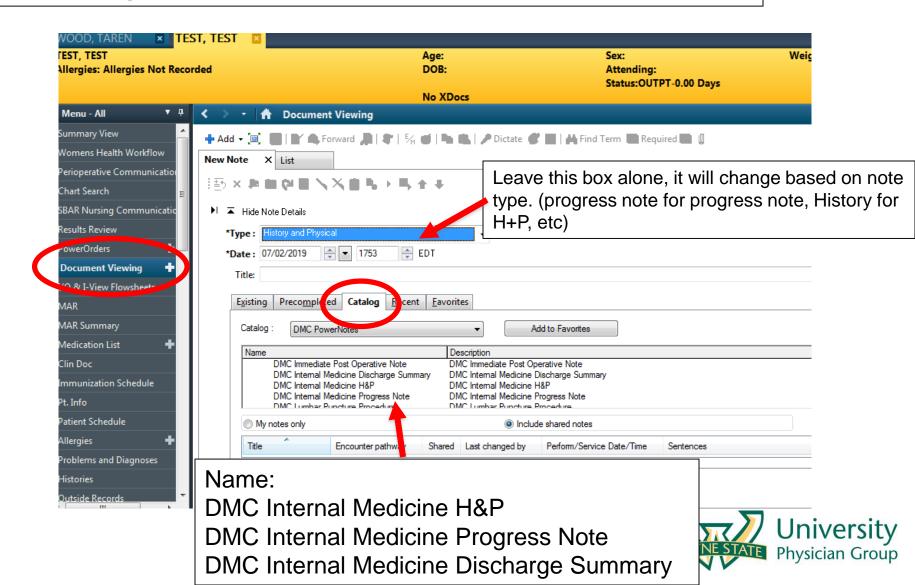
- What Note to pick
- Macros
 - ROS
 - Exam
 - A/P
 - Supportive care
 - Name

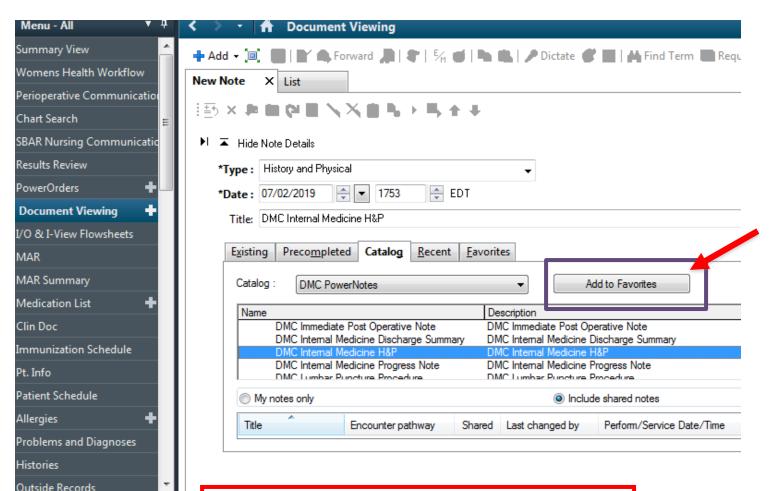




Document Viewing Add

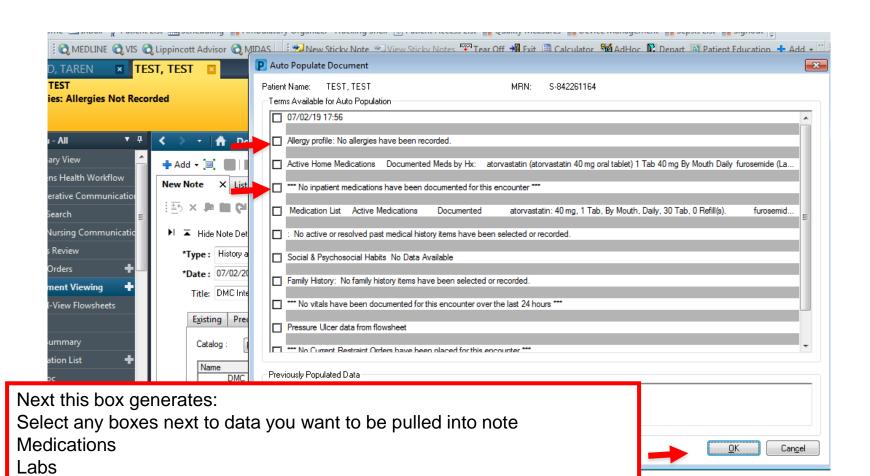
Catalog Tab → Name "DMC Internal Medicine"





Select the note you want.
Can add to favorites by clicking "add to favorites"





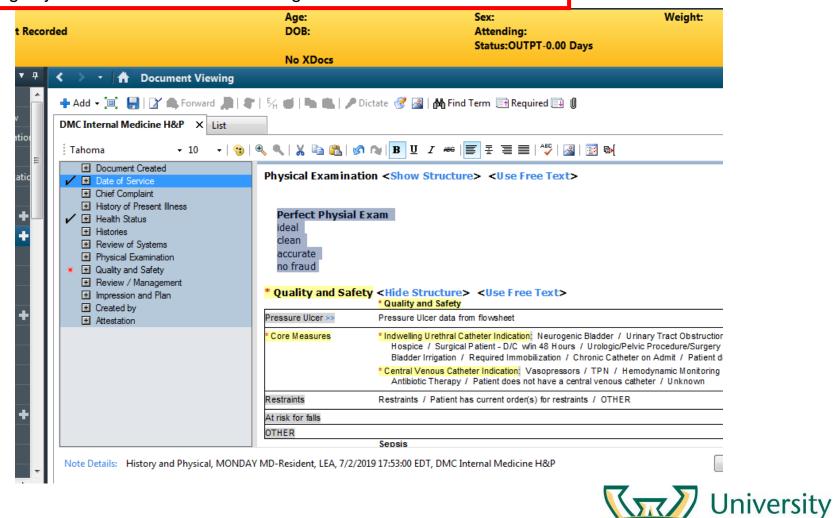
University

Etc

(Can delete anything later if looks like too much)

Follow the template CC: -> HPI → Etc

Anything in yellow has to be filled out to sign the note



Macros

- Saved Text that you can personalize and name
- Can be used for anything from your exam to your signature
- Saves time and improves note quality IF accurate

Whether using marcos or not...
 Sloppy work = garbage notes



Default exam in the EMR (not ideal)

- General: Alert and oriented, No distress.
- Eye: Pupils are equal, round and reactive to light, Normal conjunctiva.
- **HENT**: Normocephalic, Atraumatic, Normal hearing.
- Respiratory: Lungs CTA bilaterally, No wheeze, Respirations are nonlabored, Breath sounds are equal.
- Cardiovascular: Regular rate, Regular rhythm, S1 auscultated, S2 auscultated, No murmur, Normal peripheral perfusion, No edema.
- **Gastrointestinal**: Soft, Non-tender, Non-distended, Normal bowel sounds, No organomegaly.
- **Musculoskeletal**: Normal strength, No tenderness, No swelling, No deformity.
- **Neurologic**: Alert, Oriented, Normal sensory, Normal motor function, No focal defects, Cranial Nerves II-XII are grossly intact.
- Psychiatric: Cooperative, Appropriate mood & affect, Non-suicidal University

 WAYNE STATE Physician Group

 Physician Gro

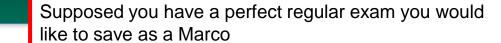
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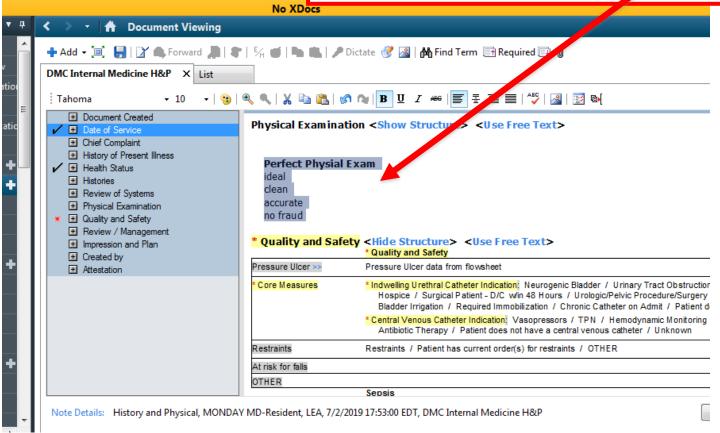
 Wayne State Physician Group

 Physic Phy



Write it in exactly how you want, then highlight, then right click, save as autotext, and name.

Then next time you want to insert it you just type the name and the system will add it in.

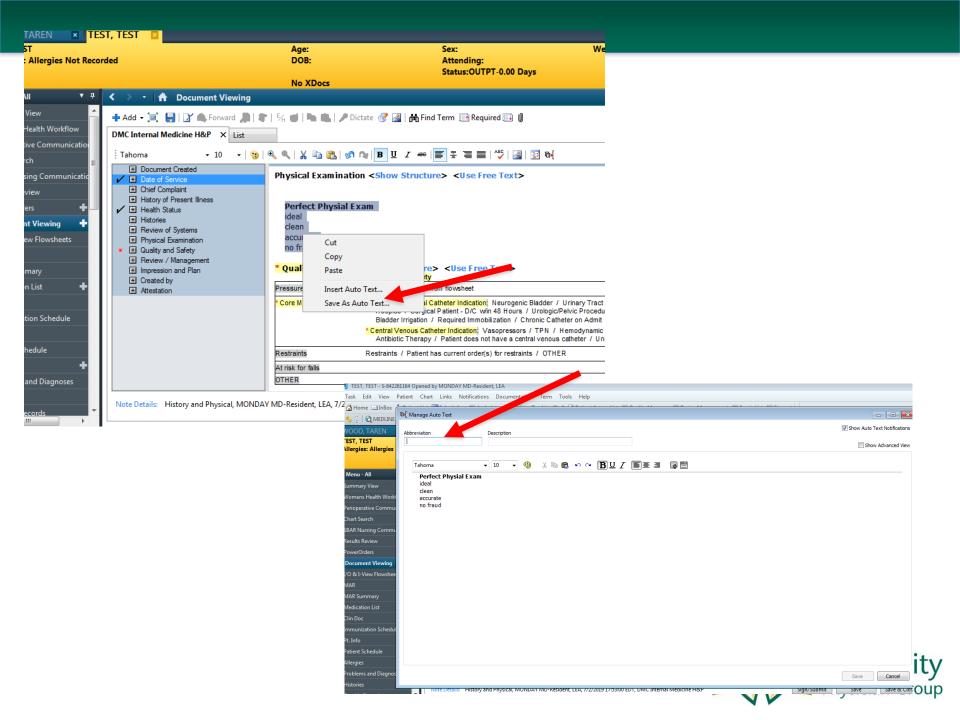


Age:

DOB:

t Recorded





Macros

- Can use for anything
 - ROS (or unable to determine)
 - Exam (cardio focused vs neuro focused)
 - A/P (CHF, COPD, Sick cell, etc)
 - Supportive care (pain, diet, bowel, DVT)
 - Name (Name, pager, service, attending)



Keep In Mind

- No one macro will be the same all the time
- Still need to make edits
- Don't be bad
 - Supportive care that says NPO from day 1 when patient has been eating now for 3 days



Final Tips

- Make your exam accurate
 - Remove anything you didn't examine
- Assessment/Plan: More is not better
 - 3-4 lines assessment and 3-4 lines plan for primary problem
 - Consider less lines for secondary problems
 - A/P is not a running dialog of lines and lines that get added every day.
 OPQRST from HPI is not needed here.
- Use Dates
 - Yesterday, Today, Tomorrow (copy and pasted) now make no sense
 - Pt had surgery last year (copy and pasted for 6 years...)
- Speical Considerations (Discussing labs results)
 - Labs are in "results review" section
 - Na $122 \rightarrow 124 \rightarrow 123 \rightarrow 126 \rightarrow 128 \rightarrow 130 \rightarrow 134 \rightarrow 136 \rightarrow 140 \rightarrow 142 \rightarrow 144$
 - Admission Na 122 (6/20/19), trending up to 144(7/2/19)

Find this presentation in the Intern Lecture series boot camp area of www.wsumed.com

