



Medical Provider 200 Workbook

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How to Use This Exercise Book and Practice in the Training Environments

Please read the below instructions on how to log in and practice in the training environments.

What is a Training Environment?

A training environment is a copy of the live environment that contains training logins and training patients for practice. It does not contain any actual protected health information, and it refreshes every night. Whatever you document in a training environment today will be cleared out tomorrow.

Which Environment Should I Use for Training?

Hartford HealthCare has several training environments, such as PLY, which is the Epic Playground, and ACE, which stands for Actual Classroom Environment. See [Table 1](#) for which environment should be used when practicing.

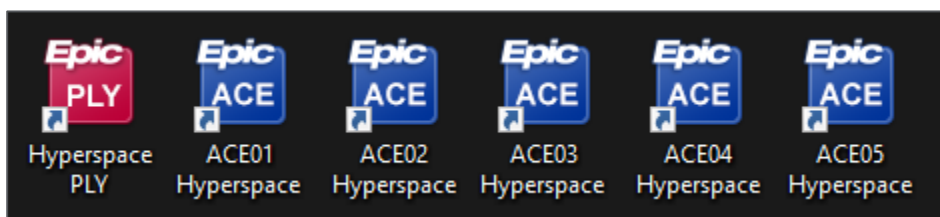
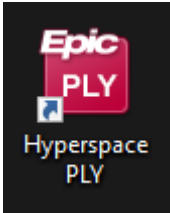
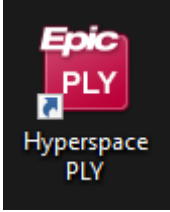
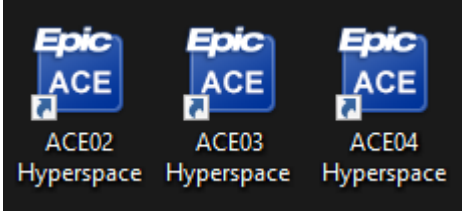


Table 1: Training Environments

Training Method	Which Hyperspace Environment to Log Into
Practicing in conjunction with Epic eLearnings	PLY (Playground)

	
Practicing independently	PLY (Playground) 
Attending a PLY Lab session	ACE02, ACE03, or ACE04 Your instructor will direct you to the proper ACE environment 
Attending a live, instructor-led Epic class	Your instructor will direct you to the proper ACE environment

How Do I Log in and Which Patients Should I Use?

Each application has patients and users with a specific theme. The Inpatient Medical Provider patients and users all have *Greek Mythology* last names. When logging into the Epic training environment, you will log in with one of the User IDs and use the corresponding patient last names listed in [Table 2](#).

Table 2: Classroom Information Sheet (Login Information)

User ID	Password	Patient Last Name	Main Login Department
IPMDM00	train	Achilles	HH MEDICINE SVC IP

IPMDM01	train	Aegea	HH MEDICINE SVC IP
IPMDM02	train	Aeneas	HH MEDICINE SVC IP
IPMDM03	train	Ajax	HH MEDICINE SVC IP
IPMDM04	train	Castor	HH MEDICINE SVC IP
IPMDM05	train	Celaeno	HH MEDICINE SVC IP
IPMDM06	train	Diomedes	HH MEDICINE SVC IP
IPMDM07	train	Eurypyle	HH MEDICINE SVC IP
IPMDM08	train	Ganymede	HH MEDICINE SVC IP
IPMDM09	train	Hector	HH MEDICINE SVC IP
IPMDM10	train	Hippolyta	HH MEDICINE SVC IP
IPMDM11	train	Lampedo	HH MEDICINE SVC IP
IPMDM12	train	Marpesia	HH MEDICINE SVC IP
IPMDM13	train	Melanippe	HH MEDICINE SVC IP
IPMDM14	train	Myrina	HH MEDICINE SVC IP
IPMDM15	train	Odysseus	HH MEDICINE SVC IP
IPMDM16	train	Orpheus	HH MEDICINE SVC IP
IPMDM17	train	Penthesilea	HH MEDICINE SVC IP
IPMDM18	train	Perseus	HH MEDICINE SVC IP
IPMDM19	train	Romulus	HH MEDICINE SVC IP

What if my Patient and User ID are Already in Use?

There will be a large number of users that may be completing their exercises at the same time. As a result, two or more users may have selected the same login information and patient last name in the training environment. If you notice the patient you have chosen for practice is in use or locked, simply log out of Epic and choose a different User ID and patient last name from [Table 2](#) to complete the exercises.

How to Use This Exercise Book

The Exercise Book contains practice exercises and is designed to teach Epic functionality and walk you through workflows. The beginning of each exercise will contain a patient scenario and patient first name. Be sure to use the last name that matches with the User ID, as identified in [Table 2](#).

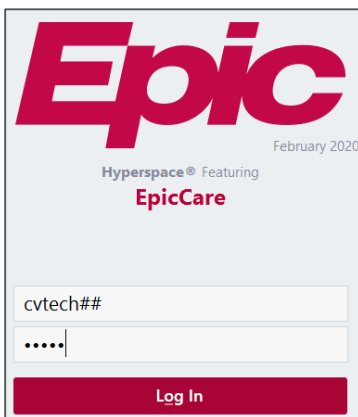
Many of the exercises build as you go along. It is advised that you follow the Exercise Book from beginning to end to avoid any missed pieces in the workflow.

Need Some Extra Help? Contact Us!

For assistance related to the training environment, practice patients, or training logins, reach out to the Instructional Design Team at InstructionalDesign@hhchealth.org.

Let's Get Started... Log Into Epic

- ☐ Identify a User ID and patient last name on [Table 2](#).
- ☐ Open the appropriate Hyperspace training environment. Refer to [Table 1](#) for guidance.
- ☐ **Log In** to Hyperspace.



- ☐ Search for your department using the magnifying glass icon (select **HH MEDICINE SVC IP**).

Message of the day will appear, make sure you read this in the Live environment, as it contains important information about system updates.

Admitting a Patient

Throughout these exercises, choose any diagnoses, medications, etc. that would apply to your specialty. If you get stuck and the hints do not provide enough assistance, ask your instructor or consult your Learning Home dashboard.

In this exercise, you will review patient information, update documentation on the patient, and place some admission orders.

PATIENT: Bobby

Finding and Reviewing Patients

SCENARIO:

You completed a consult on Bobby and have determined he needs to be admitted.

TRY IT OUT:

- Find your patient on your My List (You should have assigned yourself in the previous exercise).
- You are now going to be the Attending provider.
 - Right-Click on Bobby and select Assign me
 - Check the box for the Attending provider
- Open the chart. Hint: Double-click to open the chart from patient lists
- Use the **Overview** report in the Summary activity to answer the following questions:
 - What was the last recorded temperature?
 - What was the last recorded SpO2?
 - What was the white blood cell (WBC) count?
 - What are the patient's allergies?
 - Hint: Look at the top of the chart.
 - Click on **See Allergies**
 - When done reviewing, Click on the White Back Arrow above the Activity buttons

Writing Admission Orders

SCENARIO:

You just finished your review of the patient. You've diagnosed Bobby with pneumonia (or another problem related to your specialty) and it's time to work in the Admission navigator and place admission orders.

TRY IT OUT:

- Open the Admission Navigator.
 - Hint: Click **Admission** on the far left of the screen.
- In the Admission Documentation group, you will see sections related to documenting Allergies and History as well as finding any orders needing to be cosigned.
- Let others know you have reviewed your patient's allergies.
 - Hint: Use the Allergies navigator section, not the activity on the far left.
 - Hint: Click **Mark as Reviewed**.
 - **NOTE:** Mark as Reviewed should only be clicked when you have verbally reviewed with the patient and/or family. Do not click on Mark as Reviewed if just reviewing the chart for yourself.
 - **IMPORTANT:** Allergies must be Marked as Reviewed before placing medication orders or you may receive a pop up box stating medication cannot be ordered until allergies have been reviewed.
- A VTE Risk assessment must be completed before orders can be placed to admit the patient.
 - Select the Med IMPROVE assessment and fill out
 - This will populate the appropriate VTE treatment to the order set you choose to use later
- Go down to the Problems/H&P Note group and open up your problem list
 - Add a problem related to your specialty (or use Pneumonia)
 - Make the problem the Principal Problem
 - Mark that the problem was present upon admission
 - The system provides suggested order sets based on the problem list so it is beneficial to have this list updated before placing orders
- Click the Med Reconciliation section of the Admission navigator.

1. Current Orders

- Review the current orders and mark the individual orders you want to continue or reorder.
- Discontinue the rest of the orders.
 - Hint: Click **Mark Unreconciled DISCONTINUE** to efficiently apply the decision to all unselected orders in section.
- Make sure your sidebar has a green header.
- Hint: If your sidebar is red, take action on the orders listed under **Unreviewed on Admission**. You can also click **Find Orders Needing Reconciliation** to highlight the orders that need review.

SCENARIO:

The ED nurse started to update the home meds list, but it needs to be finished. For the sake of training, you will finish the updates. You note the following:

- The nurse added "Unknown to Patient" to the list as a placeholder until the patient's mother could provide more information about the over-the-counter meds she'd been giving.
- The wife is here now. She tells you that she gave him Tylenol for his fever and Mucinex for his cough.

TRY IT OUT:

2. Review Home Medications

- The Unknown to Patient order was only needed as a placeholder for Tylenol and is no longer needed. We want to delete this from the list.
 - Hint: Use the red **X** to the right of the medication.
- Select Discontinue and give a reason OR Select Delete (Erroneous Entry) and click **Accept**
- Search for the new Tylenol order.
 - Hint: Use the **Add Prior to Admission Med** field.
 - Hint: If you can't find the medication you are looking for on the preference list, click the **Database Lookup** tab.
 - Hint: Enter "Help" in the **Add Prior to Admission Med** field if you can't find a medication. On the **Database Lookup** tab, you'll see options for Unknown to Patient and Unable to Find.
- Add the Tylenol to the list of home medications.

- Update the home meds with a last dose of today.
 - Hint: Click **Mark Unreconciled Today**.
- Update the Med List Status to **Provider Complete** and then **Mark as Reviewed** to let other clinicians know that this list is up to date.
 - This also helps fulfill a Meaningful Use requirement.

SCENARIO:

You completed your review of the home medications. The next step is to Reconcile Home Medications for this admission.

TRY IT OUT:

3. Reconcile Home Medications

- Click **Order** for home meds you want the patient to take during the admission.
- Click Don't Order for any medications that you want your patient to keep taking at home, but not on the floor.
- Click Discontinue for any orders you want the patient to stop taking both at home and on the floor.
- For one order of your choice, click Replace and choose a suitable alternative medication
- Reconcile any remaining medications.
 - Hint: Click Mark Unreconciled ORDER or Mark Unreconciled DON'T ORDER to efficiently apply the decision to all unselected orders in section.
- Make sure your sidebar has a green header.
 - Hint: If your sidebar is not green, take action on orders listed as needing review.

Write the rest of the admission orders using an Order Set. Unless specified, select values that would apply to a patient under your specialty (if applicable).

- Go to New Orders.
- Under Order Sets and Pathways, you may see recommended order sets or you may search for an admission Order Set that is related to your specialty or a diagnosis you entered.
 - Hint: Type the first few letters of the patient's diagnosis followed by "admit".
 - Example: Pneu Admit
 - Hint: If you can't find a specific Order Set for your patient, for this exercise, use the Community-Acquired Pneumonia Order Set (Search Pneumonia)

- Select the Order Set and click Open Order Sets.
- When placing orders, look for any red stop signs and address them.
 - Stop signs indicate required information that must be completed before signing the orders.
 - Hint: The admit order typically has required fields.
- With your Order Set open, select orders typical for a patient being admitted from the ED. Try to incorporate one of each of the following order types:
 - Admission
 - Transfer Service is where the patient is being sent to and assist bed planning in assigning the appropriate unit/room/bed
 - All of the required fields need to be completed or you be unable to sign the order
 - Provider Team
 - Open the order composer, click on the magnifying glass in the Team field and find your related team. If you or the patient will not be part of a team, select No Team
 - Code Status
 - Vital Signs
 - Notify Physician
 - Activity
 - Diet
 - Nursing Assessments
 - Labs
 - VTE Requirement (if applicable)
 - IV fluids
 - Other medications

Now that all current orders and home meds are reviewed and reconciled and new admission orders have been determined, it's time to take one last look at the orders about to be signed and held.

4. Review and Sign

- Verify that your orders appear correctly and check for any omissions.

- When you're satisfied with your orders, click **Sign & Hold - Will be Initiated by Receiving Unit**.
- Review any medication warnings and act on anything that needs to be addressed.
- If you aren't moving on to the When You Have Time exercise, close the chart.

When You Have Time: Creating User Order Sets

SCENARIO:

To make your ordering workflow more efficient, you can create your own specific Order Sets and save them as your favorites.

TRY IT OUT:

- Open a patient's chart.
- Open the **Orders** activity.
 - Hint: It is one of the primary (larger) activity tabs on the left side of your screen.
- Click **Go To Order Sets** on the sidebar.
- Click **Advanced**.
- Search for an admission Order Set for your specialty and select it. Suggestions:
 - Community Acquired Pneumonia – Admit
 - Search for other order sets
- Click Manage My Version then
- Click **Create New Version**.
- Give your version a new name.
- Select orders you place for most of your patients.
- Update the details you would like for your orders.
- Click **Accept** and then **Yes** to save your Order Set.

CHECK YOUR WORK:

- Open the Order Set you just created.
 - Hint: It should be in your list of favorites.
- Look at the details and selected orders in the new Order Set to confirm the work you did.
- Close the chart.

Performing a Consult

In this exercise, you will use what you have already learned and apply it to completing a consult.

PATIENT: Bobby

Locating and Reviewing Patients Needing a Consult

SCENARIO:

You just came on call and would like to see how many patients have an outstanding consult order for your service.

TRY IT OUT:

- From the Patient Lists activity, under the **Available Lists** on the left side the screen, navigate to the folder for Hartford Hospital.
- Click the folder called **Consults-Physicians by Service**.
 - This folder contains lists of patients needing a consult. It's organized by service.
- Normally, you would navigate to the list for your service/specialty to find the patient whom you need to see. For the sake of this exercise, click the Infectious Disease list.
- Find your Bobby patient on the list.
 - Hint: Click the **Patient Name** column to sort the list of patients alphabetically.
- Assign yourself as the consulting physician.
 - Hint: Right-click the patient's name and choose **Assign Me**.
- Open the chart.
- Review the patient's recent labs, his last set of vitals, and orders placed by the ED staff.

Completing a Consult Order and Documentation

SCENARIO:

You have reviewed Bobby's information and decide that he should be admitted. Now you need to write a consult note.

TRY IT OUT:

- In the Notes activity, click **New Note**.
 - NoteWriter is not available for consult notes. You'll need to use a SmartText (template) to write your note.
- Select a note type of Consults.

- Select the box at the top of the note window next to the consult order to associate the order with your note.
 - Critical: This will complete the consult and remove the patient from the list of patients needing a consult, making it easier for you to manage incoming consult requests.
- In the **Insert SmartText** field, type "consult" to search for an appropriate SmartText. Choose the template most relevant for your specialty.
 - Hint: If this is a SmartText you use frequently, add it to your Favorites.
- Enter an appropriate Service for the note.
- Fill out all of the SmartLists and wildcards within the note.
 - Hint: Press **F2** to be taken to find any unresolved lists or wildcards.
- Sign the note.

SCENARIO:

Once the consult note is signed, the system prompts you to indicate the appropriate charges based on the level of care you provided.

TRY IT OUT:

- Select the appropriate charge under **Consult Charges**.
- If needed, click the charge name to associate it with a diagnosis.
 - Hint: If the patient doesn't have a diagnosis yet, add one in the Other diagnosis field.
 - Hint: You can tell a diagnosis has been associated with a charge if you see this.
- Click **Accept**.
- You have completed the consult request and documentation, so close Bobby's chart.

When You Have Time: Removing Yourself from the Treatment Team

You might be automatically added to a patient's treatment team when a consult order is placed if your name was specified in the order or added after signing by a unit clerk. You might decide to stop following a patient prior to discharge. In that case, you should remove yourself from the treatment team.

SCENARIO:

Assume you will no longer be consulting on your patient. You are no longer going to be involved in his care, so you need to remove yourself from his treatment team.

TRY IT OUT:

- Find Bobby on your Patient List and remove yourself from his treatment team.
 - Hint: Right-click and choose **End My Assignments**.
- Check your work by right-clicking again and choosing Treatment Team.
 - Does your name (the physician from your classroom information sheet) show up as a current provider on the treatment team? What about as a past provider?
 - Hint: Select the **Past Providers** option.
- Click **Close**.

- When you end your assignment with a patient, the patient will be removed from your My Patients list when the screen refreshes.

When You Have Time: Ordering a Consult

In this exercise, you will place a consult order to request that another specialist see your patient.

PATIENT: Frank

SCENARIO:

After rounding on Frank, you decide that he needs to be seen by a cardiologist. You need to place a consult order to cardiology.

TRY IT OUT:

- Use the Search All Admitted Patients field to find the Frank patient on your classroom information sheet.
- Open the chart and place a new order for Inpatient Consult to Cardiology.
- Click the magnifying glass next to the To field so you can specify the cardiologist you want.
- Choose anyone from the list (Note: The training environment may not be completely accurate)
- In the Name field, search.
- Complete other fields as desired.
 - Hint: Make sure you enter something in all fields with a stop sign.
- Sign the consult order and close the chart.

Transferring a Patient

PATIENT: Edward

Writing Transfer Orders

SCENARIO:

You've decided to transfer your patient to a lower level of care.

TRY IT OUT:

- Verify that you have the orders that are needed until the patient is actually transferred. Open the activity you would use to manage your patient's current orders.
 - Hint: Go to the **Orders** activity.
- Make a change to one of the orders for your patient. Sign the order.
 - When will this change take effect?
- Add a new medication order, with a start time two hours in the future. Sign the order.
 - Since you entered the order in the Orders activity, this order will start in two hours, as you specified, regardless of when the transfer actually takes place.
 - Hint: Type "h+2" to quickly place the correct start time.
- Now open the activity you would use to go through the transfer process.
 - In the **Transfer Navigator**, you see sections that look familiar from previous exercises. Here you need to place the order for the patient to be transferred and reconcile the patient's medications prior to transfer.
- Reconcile the patient's outstanding medication orders.
 - Hint: Open the **Med Reconciliation** section.
 - Here you see a four-step process. Step one is very similar to what you've seen already during admission.
- Once you have indicated a decision for each order, review the decisions you made regarding home meds when the patient was admitted.
 - Step two is an optional step, and you are not required to do anything on this screen. It allows you to review the decisions you made regarding home meds

at admission and make changes upon transfer now that the patient's condition has changed.

- For a home med marked as Don't Order, try ordering it now.
 - Hint: Click **Edit** for that medication to get started.
- Fill out the patient's transfer order.
 - Hint: Click **3: New orders**.
 - The transfer order automatically appears.
 - Fill out any required information in the Transfer order.
 - This order will be active as soon as you sign it, so the patient can get a bed assigned. All other orders in med rec are signed and held until the patient gets to the new unit and the nurse releases them. New orders or order sets can be placed during this step, but this works the same way that it did during admission, so you'll move on to the next step.
- Review and sign your orders.

SCENARIO:

Challenge: You realized you need to make a change to one of the transfer orders you signed and held.

TRY IT OUT:

- Change one of your signed and held orders.
 - Hint: Click **Med reconciliation** again.
 - Hint: On the **Review Current Orders** screen click the Continue button.
 - After making the change, make sure you sign the changed order.
 - Similarly, had you forgotten to reconcile an order and need to do so, you would re-enter the Med Reconciliation navigator, indicate your decision for that order, and sign it.
- Close the chart.

Discharging a Patient

In this exercise, you will learn how to write prescriptions before discharge and reconcile orders at discharge.

PATIENT: Jamal

Writing Discharge Orders

SCENARIO:

Your patient will be ready to go home in the next couple days, and you'd like to place a few prescriptions in advance without doing full order reconciliation. You have the ability to enter and pend orders for discharge.

TRY IT OUT:

- Open your patient's chart and select the navigator you would use to discharge a patient.
- In the Discharge Navigator, click **Med Reconciliation** under the Place Discharge Orders section.
 - Even if you aren't reconciling all discharge orders now, you must go here to place orders that take effect upon discharge.
- In the 1. **Review Orders for Discharge** section click **Prescribe** for one of the medications.
 - Edit any order details and fill in any required information.
 - Notice your order now appears under the Order on Discharge header in the Sidebar to the right.
- Place a new order for a medication of your choosing.
 - Hint: Go to New Orders and then search in the Additional Orders Search section.
- You're not ready to discharge the patient, so remove the discharge patient order.
 - When the attending reconciles orders later, the discharge order will appear again for convenience.
 - If the attending had already placed the discharge order, it wouldn't appear here for you now.
- Click on the **Save Work** button
 - The orders are now "pended" and will still need to be signed prior to patient being discharged.

SCENARIO:

Time has passed and you are now ready to discharge the patient. You must now reconcile all orders including any possible pended orders.

TRY IT OUT:

- You were waiting for the result of a lab you ordered yesterday. Has the lab come back yet?
 - Hint: Check the Unresulted Labs navigator section.
- Do you have any orders to be cosigned? IMPORTANT: All orders should be cosigned prior to discharge
- to ensure compliance with laws and regulations.
- NOTE: If the admit order is displayed in the cosign section, it indicates that the order was signed by a mid-level provider. This order must be signed by an authorizing provider. Failure to do so will prevent anyone from being able to sign the discharge order.
- Begin the discharge order reconciliation process.
- Hint: In the Discharge Navigator, click **Med Reconciliation** under the Place Discharge Orders section.
- If there are any pended orders, you will see a pop up informing you that there are pended orders.
- Click on Manage this unsigned work to open the section.
- NOTE: The pop up may occur if there are pended orders in each of the sections
- Review your patient's current orders to determine what should continue at discharge.
 - Hint: You can change the order of the medications with the **Sort by** field.
 - Hint: Save time by taking action on the meds you specifically want to prescribe and then clicking **RESUME Unreconciled Home Meds** OR **DON'T PRESCRIBE Unreconciled IP Meds**
- Verify that you have acted on all orders.
 - Hint: Check the summary pane to the right.
- Place the order for discharge, making sure to address all required fields.
 - Hint: Go to New Orders.
- Use a discharge order set related to your specialty or feel free to use the Generic Discharge Order Set to enter additional orders for your patient.

- Select the appropriate orders for your patient.
- Enter at least one referral order.
 - Open the Referral section in the order set
 - Note: If the referral you want is not included in the Referrals section of the Order Set, you can add the order in the Additional Orders Search section.
- Using Additional Orders Search section, prescribe your patient at least one over-the-counter medication.
 - Hint: If you would prefer not to print this order since this is an over-the-counter medication, open the order and change the class to OTC so it will not print or be transmitted to the pharmacy.
- In the Additional Orders Search section, enter a medication to be administered while the patient is still in the hospital.
 - Hint: In Discharge Orders, you can enter both inpatient and outpatient orders. While searching, a bed icon denotes an inpatient order, and a house icon denotes an outpatient order. Select the appropriate check boxes to filter your search and find the order you need:

Order and Order Set Search

CRUTCHES

Browse Preference List **Facility List** Database

Order Sets & Panels (No results found) Search order sets by user

After Visit Medications (No results found)

After Visit Procedures (Alt+3)

Name	Type	Pref List	Px Code	Resulting Agencies
DC supply- Crutches	Supplies	HHC IP DISC...	EQ342	
DC supply- Crutches, axillary	Supplies	HHC IP DISC...	EQ302	
DC supply- Crutches, forearm	Supplies	HHC IP DISC...	EQ305	

During Visit Medications (No results found)

During Visit Procedures (Alt+5)

Name	Code	Type	Phase of Care	Pref List
Crutches	NUR2...	Nursing		HHC IP HH FACILI...

- Set the frequency to Once.
 - Note: As long as the nurse caring for the patient administers the medication on the MAR, this order will not require reconciliation.
- As you prepare to sign your orders, review the orders you have queued up.
 - Hint: Go to Review and Sign.

- Note the patient's preferred pharmacy listed at the top of the screen.
 - This information was entered by nursing. If no pharmacy is listed, you can enter one yourself.
- Sign your orders.
- Associate the orders with the appropriate diagnoses.
- If you see a medication warnings window, review the warning(s) and take the action you feel is clinically appropriate.
- Update your patient's principal problem and any other hospital problems as necessary.
 - Hint: To save time, use the Problem List navigator section instead of opening the Problem List activity.
- Open the Discharge Summary and write your note. Notice the note is pre-populated and has SmartLists and Wildcards to fill out.
- Click on Freetext Instructions to write discharge instructions. Feel free to write anything for this exercise
- IMPORTANT! When you are done writing the instructions, make sure to add your name and date so the other team members know who wrote the instructions. You may use the Smartphrases .mcred and .td for the name and date.
- NOTE: Do NOT use the Free Text letter for your discharge instructions. This is a letter format and will print elsewhere in the After Visit Summary.

Previewing the After-Visit Summary

In this exercise, you will preview the AVS (After Visit Summary), which includes information and instructions that the patient will receive upon discharge.

SCENARIO:

When the patient is ready to leave the hospital, the nursing staff will provide him with a document outlining his care in the hospital, his orders and instructions for discharge, and information about when and how he should follow-up with a physician or other provider. You also have access to this document to review with other members of the care team or with the patient.

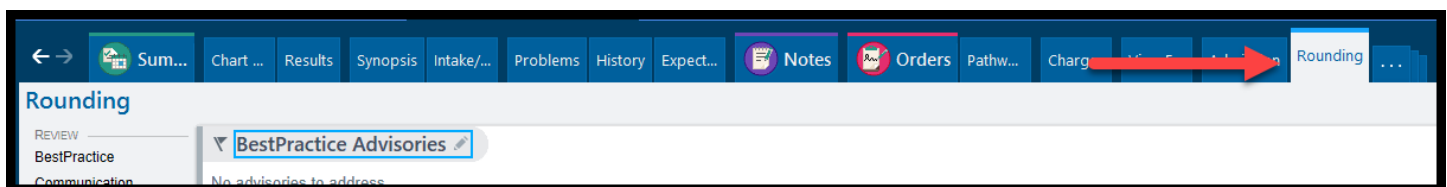
TRY IT OUT:

- In the Discharge Navigator, preview the patient's AVS and review it for completeness and clarity.
 - Nurses and ancillary staff will contribute additional information surrounding patient education and any additional instructions for the patient to follow post discharge. They will provide the patient with a copy to keep, and a copy to be sent to medical records.
 - Tip: You do not need to complete a discharge summary in order to print the AVS.
 - However, the medication reconciliation MUST be completed to allow the AVS to be printed

Rounding on Your Patients

PATIENT: Charlie

- Click on the Rounding Activity



If you feel so inclined, do a new VTE risk assessment and update the problem list with a problem related to your specialty (or one you may commonly treat). When working with patients on the floor, these would be updated as needed based on your patient's change in condition.

Writing Your Progress Note

SCENARIO:

You've completed rounding on Charlie and now need to write the progress note.

TRY IT OUT:

- Notes may be written in various ways: NoteWriter, SmartText Note, Dragon, or Free Text

- Hint: Click on Progress Note and choose one of the following based on your preference
 - **NOTE WRITER:** Select the appropriate NoteWriter based on your specialty
 - Fill in the Assessment/Pan, Subjective, Objective sections
 - Click on the Note tab
 - See all details you filled in using the three previous tabs
 - Fill in the WildCards and SmartLists
 - Start by pressing F2 on your keyboard
 - Reminder: You must fill in all wildcards and SmartLists or you will not be able to sign the note
 - Sign your note
 - **SMART TEXT:** Select Blank Note
 - In the Insert Smart Text field, type Progress
 - Select the appropriate progress note you wish to use.
 - IMPORTANT: Select one that ends with NOTE not Notewriter
 - Fill in the wildcards and Smart Lists
 - Start by pressing F2 on your keyboard
 - Reminder: You must fill in all wildcards and SmartLists or you will not be able to sign the note
 - Sign your note
 - **DRAGON:** Select Blank Note (UNABLE TO TRY OUT IN TRAINING ENVIRONMENT)

If you are planning to use Dragon, this is the option you will follow in the live environment. Unfortunately, we are unable to perform this function in training environment.

 - In the Insert Smart Text field, type Dictated
 - Select the progress note
 - The note will populate with information from the chart simplifying what you will need to dictate with Dragon
 - Highlight the wild cards and press Space Bar then perform your Dragon dictation

- NOTE: The *** needs to be removed or Epic will not allow you to sign the note even if you dictated that section.
 - Sign your note
 - FREE TEXT: Select Blank Note
- Add a new medication order, with a start time two hours in the future. Sign the order.
 - Since you entered the order in the Orders activity, this order will start in two hours, as you specified, regardless of when the transfer actually takes place.
 - Hint: Type "h+2" to quickly place the correct start time.
- Now open the activity you'd use to go through the transfer process.
 - In the Transfer Navigator, you see sections that look familiar from previous exercises. Here you need to place the order for the patient to be transferred and reconcile the patient's medications prior to transfer.
- Reconcile the patient's outstanding medication orders.
 - Hint: Open the **Med Reconciliation** section.
 - Here you see a four-step process. Step one is very similar to what you've seen already during admission.
- Once you've indicated a decision for each order, review the decisions you made regarding home meds when the patient was admitted.
 - Step two is an optional step, and you are not required to do anything on this screen. It allows you to review the decisions you made regarding home meds at admission and make changes upon transfer now that the patient's condition has changed.
- For a home med marked as Don't Order, try ordering it now.
 - Hint: Click Edit for that medication to get started.
- Fill out the patient's transfer order.
 - Hint: Click 3: **New orders**.
 - The transfer order automatically appears.
 - Fill out any required information in the Transfer order.
 - This order will be active as soon as you sign it, so the patient can get a bed assigned. All other orders in med rec are signed and held until the patient gets to the new unit and the nurse releases them. New orders or order sets can be placed

during this step, but this works the same way that it did during admission, so you'll move on to the next step.

- Review and sign your orders.

SCENARIO:

Challenge: You realized you need to make a change to one of the transfer orders you signed and held.

TRY IT OUT:

- Change one of your signed and held orders.
 - Hint: Click **Med reconciliation** again.
 - Hint: On the **Review Current Orders** screen click the **Continue** button.
 - After making the change, make sure you sign the changed order.
 - Similarly, had you forgotten to reconcile an order and need to do so, you would re-enter the Med Reconciliation navigator, indicate your decision for that order, and sign it.
- Close the chart.

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