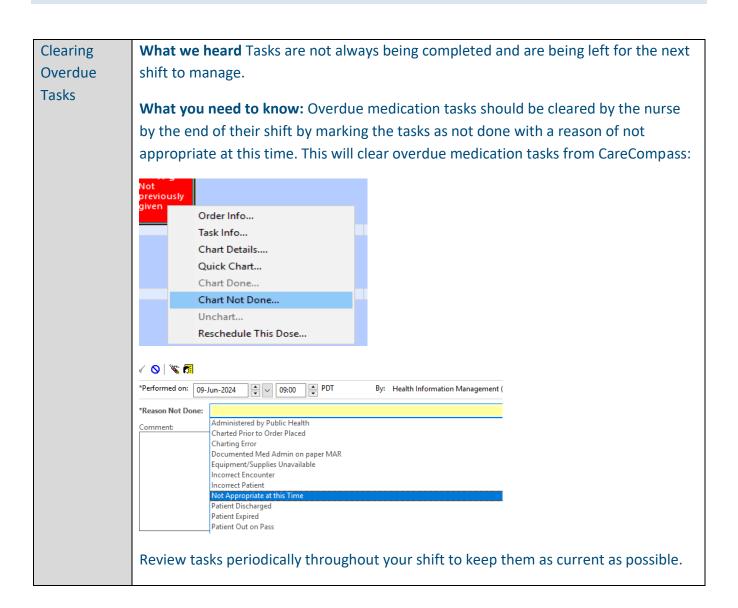


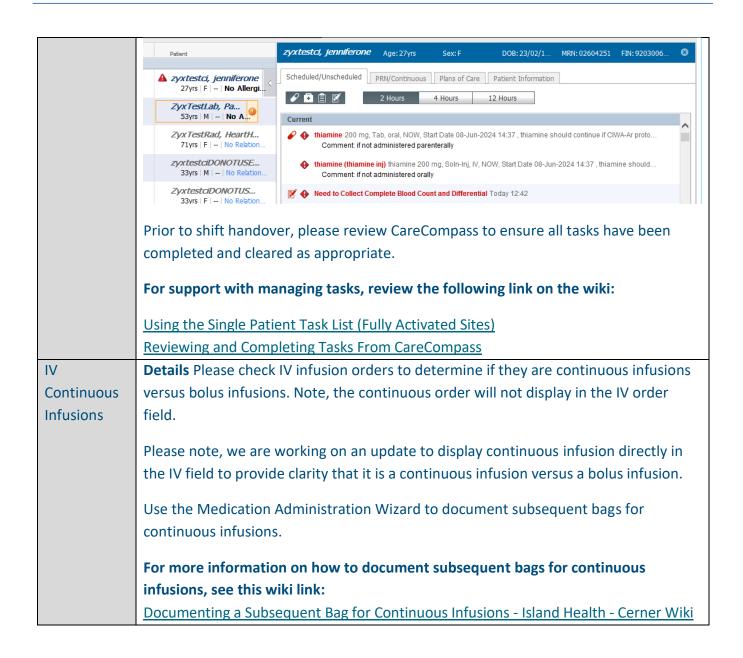
RJH Daily Key Messages - Day: 3 (REVISED)

Attention: RJH Clinicians, Physicians, Midwives, and support staff.

PRACTICE REMINDERS







CPOE TIPS & TRICKS

Cancel and	What we heard: Given lab collect workflow processes differ between clinical care areas,
Reorder Lab	there may be a need to switch the lab orders from "lab collect" to "nurse collect" or vice
Work	versa.



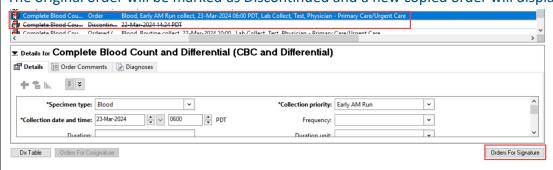
What you need to know: Providers and Clinicians can update lab order details placed as "Nurse Collect" or "Lab Collect" by canceling and reordering the lab order before the specimen is collected.



- 1. Right click on the order and select Cancel and Reorder.
- 2. Update the order details to change "Nurse Collect" to "No" if Lab is desired for collection, or "Yes" if Nursing is desired for the collection. Review the remaining order details to ensure that they are correct.



The original order will be marked as Discontinued and a new copied order will display.



3. Click Orders for Signature and Sign.

For more Information including cancelling and reordering a series, review this link on the wiki:

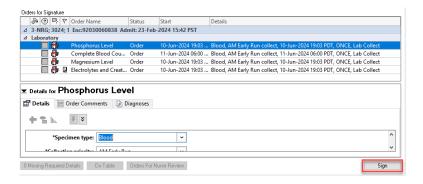
Cancel & Reorder Lab Orders - Island Health - Cerner Wiki



Multiple Lab Specimen Labels

What we heard: If lab orders are entered and signed one at a time, several labels will print out and multiple accession numbers will be created.

What you need to know: When placing lab orders, adding all lab orders before pressing "Sign" will reduce the number of labels printed. If multiple labels are printed, you may insert the labels into the lab specimen bag along with the labelled specimen.



Scanning Tips and Tricks

What we heard: Some medication barcodes have been challenging to scan.

What you need to know: Some tips for scanning single-dose medications in transparent packaging:

- 1. Place a piece of white paper underneath the packaging.
- 2. Cover the small QR Code and scan the long rectangular barcode





Chart Checks

What we heard: Staff have been asking if they need to scan the patient's arm band before opening the chart, performing chart checks, or completing Nurse Review.

What you need to know: While you need to scan the patient's arm band prior to tasks such as medication administration and/or specimen collections, scanning the patient's arm band prior to a chart check is not necessary.



	For more information on checks, review this link on the wiki:
	Performing Chart Checks
ECG STAT or	What we heard: STAT or ASAP ECGs may be missed or delayed.
Ordering	What you need to know: To order a STAT or ASAP ECG, place an electronic order AND phone the department to ensure the order is received and the ECG is performed promptly.
	For the ED: ECGs will not appear completed in LaunchPoint until reviewed by the cardiologist. Please notify the most responsible physician when the ECG is completed as per your department processes.
	△ Diagnostic Imaging HH ECG Electrocardio Order 10-Jun-2024 19:04 10-Jun-2024 19:04 PDT, STAT, Chest pain
Navigating	What we heard: Some nurses are wanting to view Patient Summary or other parts of the
the patient	patient record for reference while administering medications through the Medication
chart while	Administration Wizard (MAW). They are not able to scroll or interact with other portions
using the	of the chart while the MAW is open, even if using 'Tear Off' function.
MAW	Milestones and the language Males and a Malestone and a second second language and a second s
	What you need to know: When the MAW is open, you will not be able to interact with any other parts of the chart in the background. Before opening the MAW, review the MAR and any relevant patient information
	For additional medication administration support, review this link on the wiki:
	Navigating the Electronic Medication Administration Record (MAR)
	Documenting Medication Administration using the Medication Administration Wizard (MAW)



Cleaning and Disinfecting WOWs

What we heard: Staff are wondering what the expectations are for cleaning and disinfecting WOWs between patients.

What you need to know:

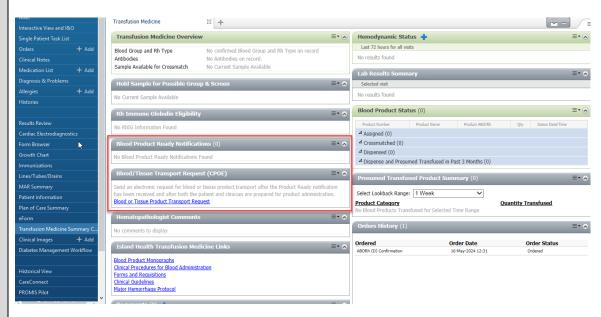
- WOW cleaning and disinfecting quick tips are coming IPAC will be seeking input from frontline staff
- For now, focus on:
 - Great hand hygiene
 - Making sure to clean the scanner after each use
- Further direction coming very soon

Blood product requests workflow

What we heard: Staff are placing blood product transport orders before the product is ready to be picked up and administered.

What you need to know:

Staff should use the Transfusion Medicine Summary Page to see when blood products are available prior to initiating a transport request.



Once blood product ready notification is visible, the Blood or Tissue Product Transport Request can be submitted.

For more information on blood administration, please see the wiki links below:



	Reviewing Transfusion Medicine Summary CPOE
	Requesting Transport of Blood or Tissue Product
	Completing Order Details of Blood or Tissue Transport Request
	Documenting Blood Product and Blood Derivative Administration
Transfer	What we heard: When patients are transferring between care areas such as ED to ICU or
Orders	ward to ICU, duplicate orders are seen on the MAR/MAW.
	What you need to know: Any previous orders from the sending unit need to be reviewed and reconciled (transfer reconciliation). This may include Initiating order sets from a
	planned state and cancelling any duplicate orders.
Planned Order Sets	What we heard: Some units have reported patients who have not yet arrived/not been admitted however have active orders in their chart.
Versus Active Order Sets	What you need to know: Prior to hospital admission/patient arrival, orders placed in the electronic chart should be placed into a planned state and not activated.
Duplicate Prescriptions	What we heard: Staff are unclear on the process for duplicate prescriptions (ie prescriptions for narcotics and controlled substances), specifically regarding when the prescription is faxed to a pharmacy and not given to the patient. What you need to know: The provider should still sign both sides of the duplicate prescription, then give the duplicate portion to the NUA who will attach this to a controlled prescription printing (CPP) mounting form and placed in the paper lite chart. The original prescription should be faxed to the community pharmacy; this should later be mailed to the community pharmacy by the NUA.

FEEDBACK



If you have feedback for us, please email IHealth@islandhealth.ca

FURTHER INFORMATION ON IHEALTH

Trying to remember what was in a previous Summary or Need an Update on IHealth?



Check out the following links:

Where Did I Read That?

 $\frac{https://intranet.islandhealth.ca/ihealth/Pages/activation-1b.aspx}{IHealth\ Intranet\ Homepage}$

https://intranet.islandhealth.ca/ihealth/Pages/default.aspx