

## MONTHLY BULLETIN

**ATTENTION: ALL FACILITIES**

**UPDATES OCCURRING WITHIN THE CIS THE**

**WEEK OF - FEBRUARY 27TH, 2023**

**The following solution areas have updates:**

**PowerChart, FirstNet & SurgiNet - Pages 2 - 6**

**Labs - Pages 7 - 9**

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### UPCOMING EVENTS

#### Privacy Matters Corner...



Health PEI has an Access to Information & Privacy (ATIP) team?

The ATIP team can assist or support with things like:

- General privacy related questions
  - Privacy & Access related education
  - Audits of access
  - Privacy reviews & site assessments
- Questions about release of information
  - Correction of PHI requests
  - Advice & support with Privacy Impact Assessments
  - And so much more!!

*You can connect with the ATIP team by emailing [healthprivacy@ihis.org](mailto:healthprivacy@ihis.org) or calling 902-569-7734.*

## PowerChart, FirstNet & SurgiNet Updates:

### Updates to iView:

**Quick Views:** Safety documentation revised. Matches ADL Safety on powerforms

Hygiene	2023-Feb-15
Safety	10:28
Nutrition	
Sleep Quality	
Oral Health Assessment	
Precautions	
Psychosocial	
Hand Hygiene	
Comfort Measures	
Transport/Transfer	
Provider Notification	
Restraint Episode	
Restraint Evaluation	

Safety	
Patient Specific Safety Measures	
Manage Sensory Impairment	
Special Call Device	
Bed Standard Safety	
Siderails	
Standard Safety	
Level of Observation	

**Conley Fall Assessment Section revised-** Score has been associated with the appropriate Safety Intervention as a reference. Please chart the appropriate Safety Measures based on the Score.

What had occurred: Staff were charting based on what was previously charted and not on the score obtained on the assessment.

Conley Fall Risk Assessment	
◇ Conley Fall Risk Assessment	Documen...
◇ History of Falls in Last 3 Months	Yes
◇ Date of Last Fall	2023-Jan-20
◇ Impaired Judgment/Lack of Safety	Yes
◇ Agitation	No
◇ Impaired Gait/Shuffle/Wide Base/Unsteady	Yes
◇ Ever Experience Dizziness or Vertigo	Yes
◇ Ever Wet or Soil Yourself on Way to BR	No
◇ Fall Risk Score Conley	7
◇ Safety Measures/Interventions Level 2	Assess for... Bed place... Assistive ... Bed table ... Assistive ... Assess for... Assess for... Assess for... Assess for...

### Revised View

Conley Fall Risk Assessment	
◇ Conley Fall Risk Assessment	Document ...
◇ <b>*History of Falls in Last 3 Months</b>	No
◇ Date of Last Fall	◇
◇ <b>*Impaired Judgment/Lack of Safety</b>	Yes
◇ <b>*Agitation</b>	Yes
◇ <b>*Impaired Gait/Shuffle/Wide Base/Unsteady</b>	Yes
◇ <b>*Ever Experience Dizziness or Vertigo</b>	Yes
◇ <b>*Ever Wet or Soil Yourself on Way to BR</b>	Yes
◇ Fall Risk Score Conley	8
◇ Level 3 Safety Measures (Score 4 - 10)	◇

## PowerChart, FirstNet & SurgiNet Updates: (continued)

Incision/Wound section revised:

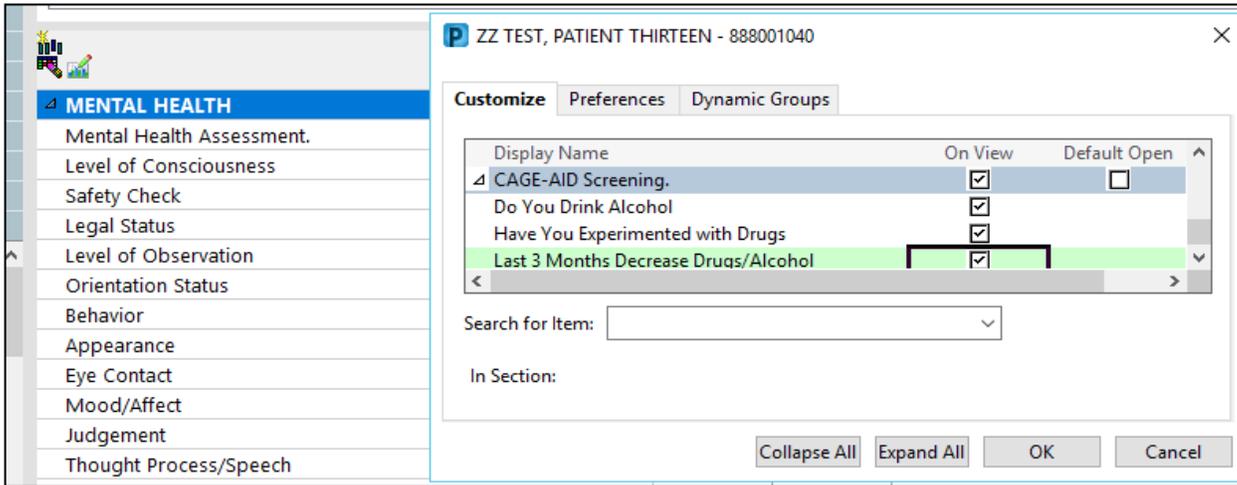
**Chest Tube Section Revised :** Flush has been added as an option in the “Activity” field with conditional logic to open “Flush solution” and “Flush solution amount” fields

## PowerChart, FirstNet & SurgiNet Updates: (continued)

Mental Health revised - revised label : Violent and Aggressive and CAGE-AID Screening sections removed



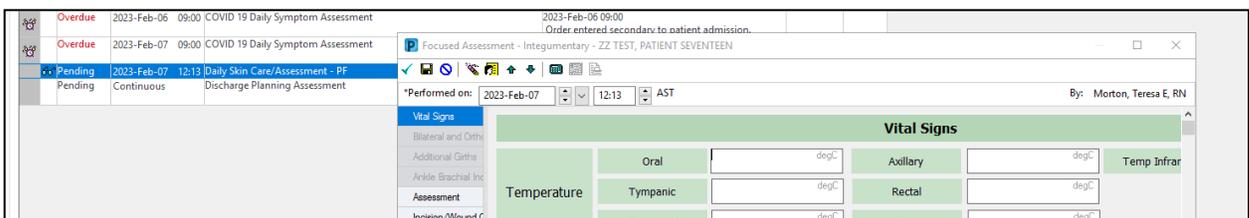
To add - click on the customize icon Select On View-clicking each check box. Click OK to load.



## Gastrointestinal Tube Section: Residual Amount has been added

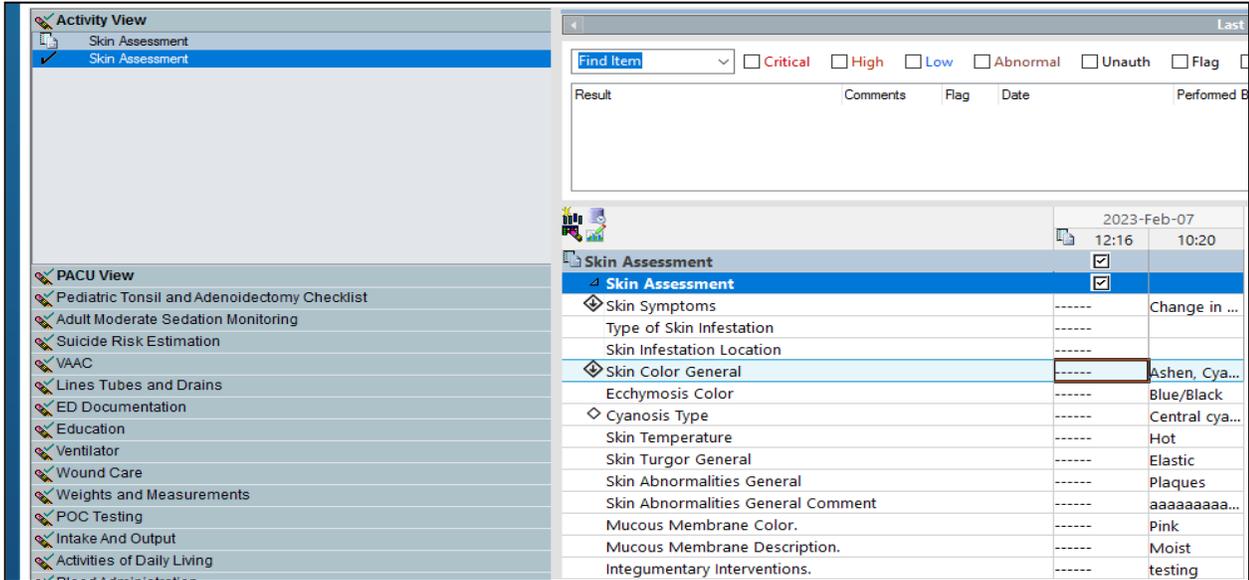
Gastrointestinal Tubes	
<< Gastrointestinal Tube Type:>	<Gastrointestinal Tube I...>
Activity	
Tube Indication	
Centimeter Marking at Lip	cm
Centimeter Marking at Nare	cm
Centimeter Marking at Abdominal Wall	cm
Tube Care	
Topical Analgesic	
Dressing	
Dressing Activity	
Dressing Condition	
Site Condition	
GI Tube Placement Verified	
GI Aspirate pH	
Unexpected Event	
Patient Response	
Degrees Head of Bed Elevated	
<b>Residual Amount</b>	<b>mL</b>
Residual Discarded	mL

Daily Skin Care - At a non iView site or Unit the daily Skin care will open to the Focused Assessment Integumentary



## PowerChart, FirstNet & SurgiNet Updates: (continued)

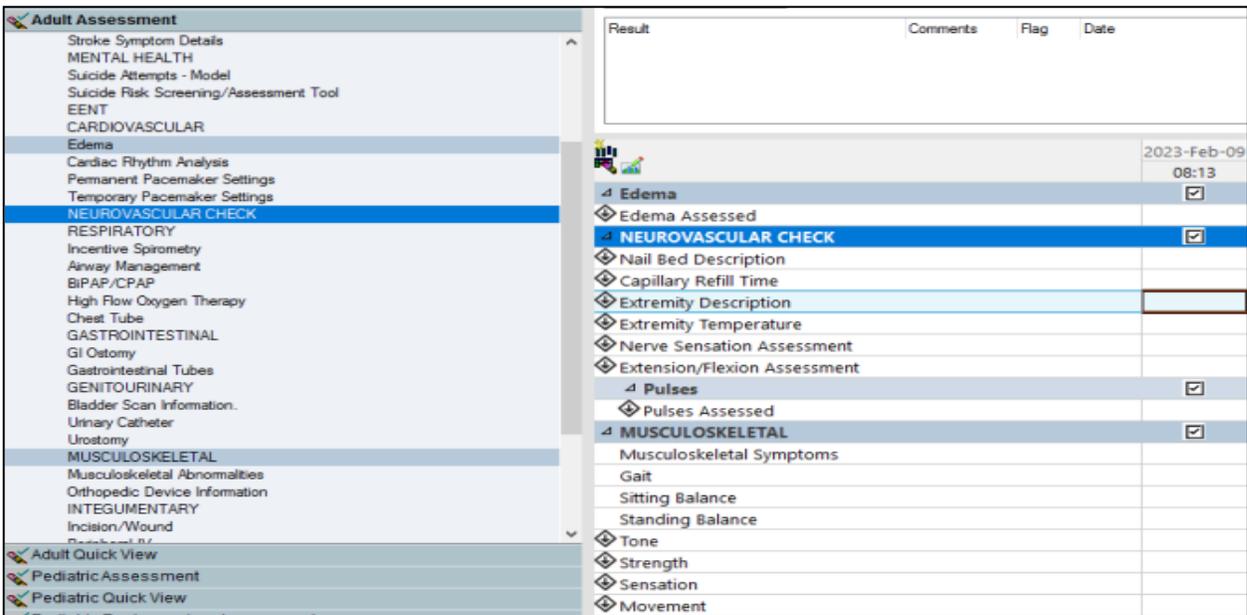
iView users, the task will open to an Activity View



### Workflow tips for iView Documentation

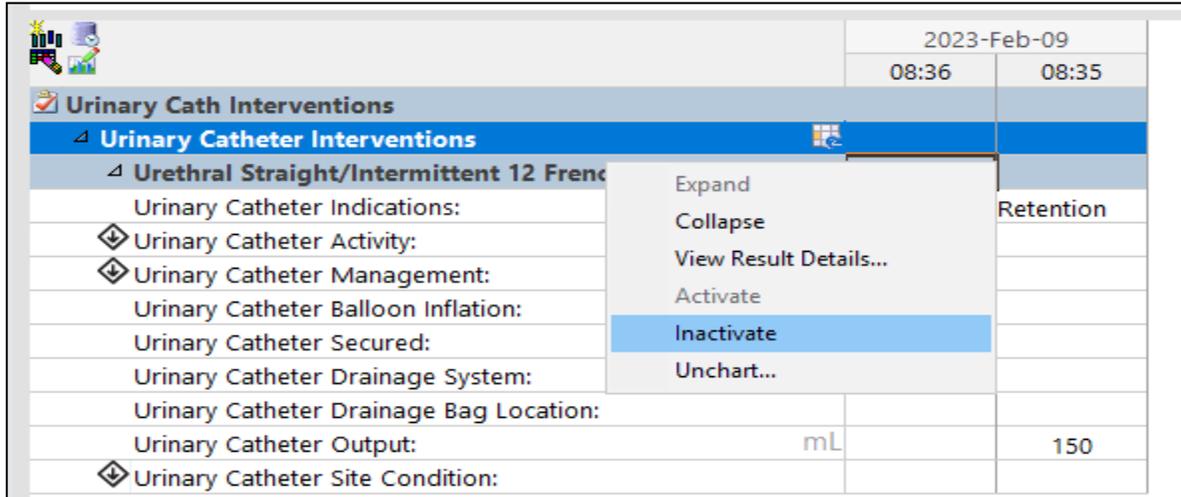
**EXAMPLE:** Documenting a Musculoskeletal Assessment

- Select Neurovascular Check, Musculoskeletal, Edema etc depending on what you wish to document
- Double click on the time display on the column to activate all data fields.
- Use the Tab key to move quickly through the options.



## PowerChart, FirstNet & SurgiNet Updates: (continued)

**Intermittent Catheterization:** From task list, Select Task Opens to Activity View. Document, Sign, Refresh Right click and Inactivate



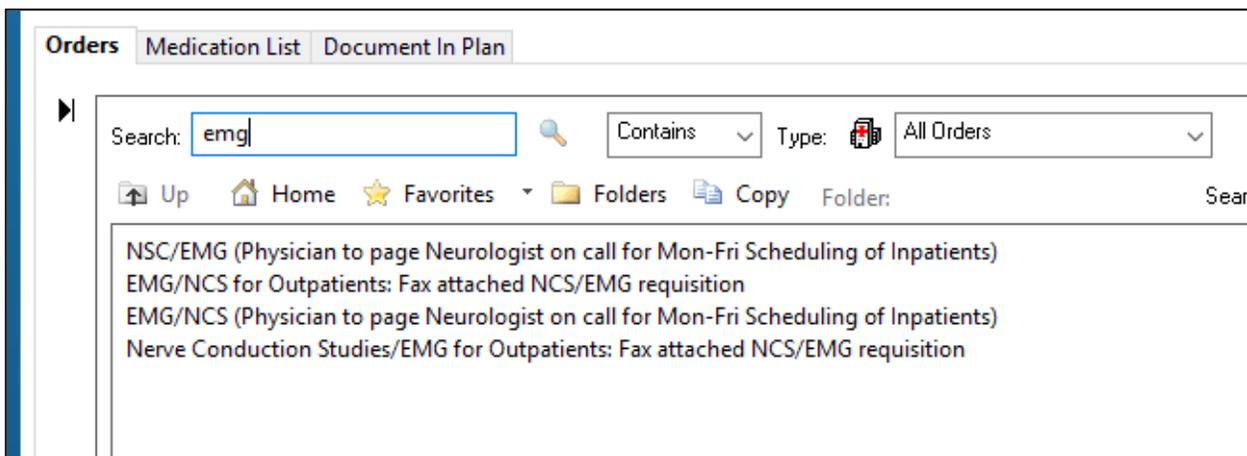
**New Powerform - MH&A Admission Transfer Checklist.** The form is in the Ad Hoc charting folder under both the Admission/Discharge/Transfer as well as the Mental Health subfolders.

### Revised Ordering process for EMG's

Note:

The Inpatient order requires a Physician to Physician Phone call

The Outpatient order requires the requisition to be printed and faxed.



## Lab Updates:

### Update to Order Entry Field: Testing Category (call if STAT):

The order entry field “Testing Category (call if STAT)” drop down selections, that are required for the orders FLUVID/RSV PCR, Novel Coronavirus PCR and Rapid Coronavirus-19 Test (NAAT), are being updated.

The screenshot shows a form with several fields. The field labeled '\*Testing Category (call if STAT):' is highlighted with a red border. Other fields include: '\*Specimen type:' (dropdown), 'Freetext/History:' (text input), '\*Collected:' (radio buttons for Yes/No), '\*Requested Start Date/Time:' (date and time pickers), 'Copies to:' (text input with search icon), '\*Collection priority:' (dropdown), 'Collected by:' (text input with search icon), 'Nurse collect:' (radio buttons for Yes/No), and 'Special Instructions:' (text area with a note: 'Indicate symptoms, travel, and if HCW (role/loc.) in the Freetext/History field').

The previous drop down list had 54 possible selections. The list was revised by the new Medical Microbiologist and CPHO and will contain 13 options

The screenshot shows the dropdown menu for the '\*Testing Category (call if STAT):' field. The list of options is as follows:

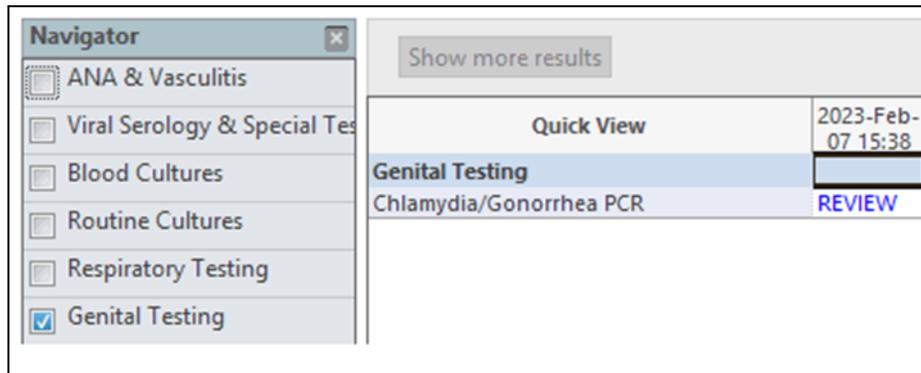
- 01. ER (Admitting)
- 02. ER (Not Admitting)
- 03. Long Term Care
- 04. Community Care
- 05. Group Home
- 06. Palliative Care
- 07. Mental Health and Addictions
- 08. Health Care Worker Associated
- 09. Other (Freetext)
- 10. Special request by CPHO
- 11. Postmortem
- 12. Medical Appointment (Off Island)
- 13. Surveillance

## Lab Updates: (continued)

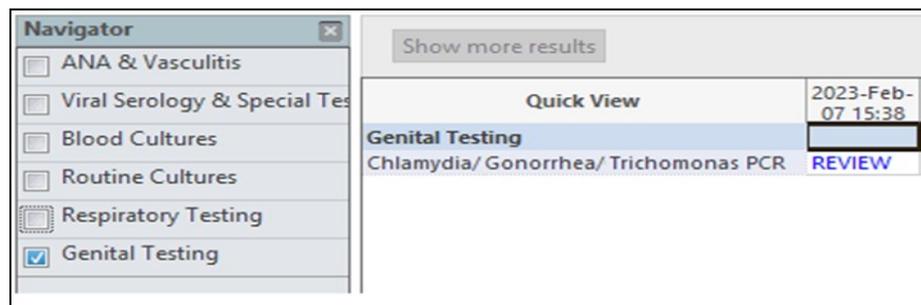
### Name change for Chlamydia/Gonorrhea PCR orderable & Inactivate Trichomonas PCR orderable

The **Chlamydia/Gonorrhea PCR** test now tests for Trichomonas in both males and females, so the name will be updated to **Chlamydia/ Gonorrhea/ Trichomonas PCR** to reflect this change. Previously, the test was only valid on females and a separate order Trichomonas PCR was ordered by reflex. The Trichomonas PCR order will be inactivated after the Chlamydia/ Gonorrhea/ Trichomonas PCR name change.

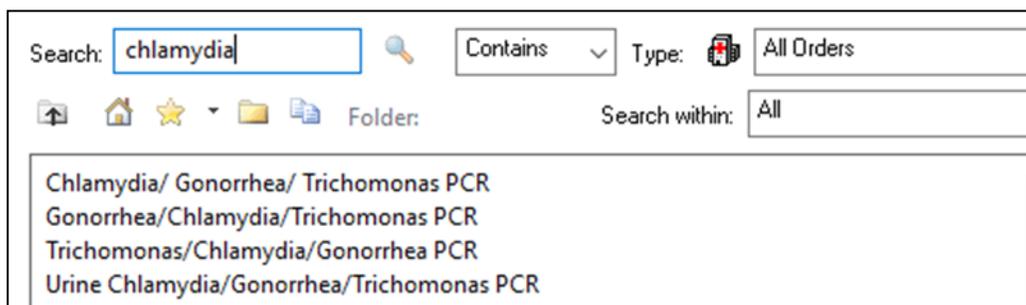
Old name display in PowerChart:



New name display in PowerChart:



The PowerChart synonyms for the order will also be updated:



## Lab Updates: (continued)

### Changes to Body Fluid Powerplans:

Container Collection Reference material for the CSF, Peritoneal Fluid, Pericardial Fluid and Pleural Fluid Lab Order powerplans will have the container collection material in the Reference notes, and will be added to the body of the powerplan, so they will be readily available. To avoid confusion with the different collection containers for the QEH and PCH, each facility will have their own powerplan for each of the body fluid orders.

**Reference Note**

Reference Notes added to the body of the powerplan

**CSF Lab Orders QEH (Initiated Pending)**

Laboratory

**IN ORDER COMMENTS:**  
For a limited sample state which test is of the most importance  
Enter the Antibiotics Given

QEH Unit Nurse:  
1. Between 0730 -1600 call the Hematology Laboratory (2332) and advise of request.  
2. Between 1600 - 0730 or on Stat holidays call the switchboard and request to page Hematology Lab stating Code CSF.  
If there are Microbiology orders, also request to page Microbiology Lab stating Code CSF  
3. IMPORTANT: INSTRUCT PORTER SERVICE TO DELIVER CSF SPECIMENS DIRECTLY TO THE HEMATOLOGY LAB.

**TUBE USAGE AND LABELING:**  
1. CSF tubes are numbered 1 through 4 (etched in plastic under the cap) and MUST be collected in that order.  
2. Apply patient registration labels on ALL CSF tubes collected  
3. Place all Cerner generated labels in side pocket of the biohazard bag (bar-coded labels AND spacer labels that have been properly signed and dated).

\*\*Examination for Malignant Cells requires a Cytology requisition.

**Tube Usage**  
Tube # 1 - CSF Glucose,Protein, Chloride  
Tube #2 - CSF Culture and Gram Stain  
Tube #3 - CSF Cell Count Panel  
Tube #4 - Meningitis/Encephalitis panel and Oligoclonal Banding\*\* Malignant Cells.

<input type="checkbox"/>	<input checked="" type="checkbox"/>	Microbiology	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cerebrospinal Fluid Culture (CSF Culture and Gram Stain)	Cerebrospinal Fluid, Routine collect, Start: T;N, Nurse collect
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Meningitis/Encephalitis Panel	Cerebrospinal Fluid, Routine collect, Start: T;N, Nurse collect
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Misc Microbiology Order	Misc. Micro Source, Cerebrospinal Fluid, Routine collect, Nurse collect, Start: T;N
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Gen Lab	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	CSF Cell Count Panel	Cerebrospinal Fluid, Stat collect, Start: T;N, Nurse collect, Once
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Glucose CSF	Cerebrospinal Fluid, Stat collect, Start: T;N, Nurse collect, Once
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Protein CSF	Cerebrospinal Fluid, Stat collect, Start: T;N, Nurse collect, Once
<input type="checkbox"/>	<input checked="" type="checkbox"/>	BF Other	Body Fluid, Routine collect, Start: T;N, Nurse collect
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Oligoclonal Bands testing requires CSF and Serum (red top tube) specimen. Labels will automatically print	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Oligoclonal Bands	Cerebrospinal Fluid, Routine collect, Start: T;N, Nurse collect
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cytology	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cytology Fluids and Misc	AP Specimen, Collected