

# MONTHLY BULLETIN

**ATTENTION: ALL FACILITIES**

**UPDATES OCCURRING WITHIN THE CIS THE  
WEEK OF - NOVEMBER 25TH, 2019**

**The following solution areas have updates:**

**Provincial Drugs & Therapeutics (PD&T) - Page 2**

**Physicians - Page 2**

**PowerChart - Pages 3 - 4**

**New CIS Login Webpage for Non-Acute Facilities - Page 5**

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## **UPCOMING EVENTS**

**New Login Webpage for Accessing CIS for Non-Acute Facilities.....see page 5 for details.**

## PD&T Updates:

### New PowerPlans:

- Provincial Secondary Stroke Clinic Tests PowerPlan
- Topical Wound and Ulcer Care PowerPlan

**Dose Range Checking (DRC)** - Functionality works at the point of ordering a medication electronically, alerting the user when the dose is outside of a pre-established usual range. DRC is gradually being implemented for Health PEI's high alert medications and is necessary to comply with Accreditation Canada's Standards for organizations with CPOE. DRC has recently been added to the following high alert medications (adult orders).

Alteplase	Adenosine	Digoxin	Fondaparinux	Danaparoid
Tenecteplase	Amiodarone	Milrinone	Eptifibatide	Diltiazem
Esmolol	Procainamide	Ketamine	Fentanyl	Propranolol
Metoprolol	Lidocaine	Enoxaparin	Methadone	
Labetalol	Verapamil	Tinzaparin	Sufentanil	

## Physician Updates:

**New Medically Discharged/ALC Transfer Order** - Beginning on December 1, 2019, there will be 2 ALC designations:

### ALC - Other

- This designation is for any patient occupying a hospital bed, who does not require the intensity of services or resources provided in hospital, and **is not** waiting for admission to long term care.

### ALC - LTC (Long Term Care)

- This designation is for patients waiting for admission to long term care. The patient will only be given this designation when they have been accepted by the Long Term Care Admissions committee and the admission paperwork is completed. **This is the only designation under which the patient is charged a fee.**

**Who can place the order, and assign the appropriate ALC designation?** - The most responsible physician places the Medically Discharged/ALC Transfer order. A Discharge Planner/Clinical Lead will then modify this order to reflect the appropriate ALC designation and choose the correct reason the patient is still in hospital from the drop down list.

**Note:** Each time the ALC designation is changed it must be communicated to Registration.

### Order - Defaults to ALC Other



▼ Details for **Medically Discharged/ALC Transfer**

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\*Transfer Medical service: ALC - Other

Additional Information:

Other reasons:

Transfer Date/Time: 2019-Nov-15   1349

ALC Other reason:

Instructions: The Discharge Planner will modify...

## PowerChart Updates:

**New Staff Resource Centre (SRC) Link in PowerChart** - This link is replacing the INTRANET link.

Pre: 

Post: 

**Safety Check** - Risk Precautions updated and added to Patient Pass form. Label updated on the FA - Mental Health to match IVIEW documentation.

Safety Check			
<input type="checkbox"/> Not required	<input type="checkbox"/> Firearm secured	<input type="checkbox"/> Clothing/Belongings search	<input type="checkbox"/> Illicit drugs secured
<input type="checkbox"/> Medication secured	<input type="checkbox"/> Changed into gown	<input type="checkbox"/> Supervisor notified	<input type="checkbox"/> Other:
<input type="checkbox"/> Sharps secured	<input type="checkbox"/> Observation initiated	<input type="checkbox"/> Police notified	
<input type="checkbox"/> Lighter secured	<input type="checkbox"/> Secured Room	<input type="checkbox"/> Home medication secured	

**Bladder Scan** - This form has been updated to improve documentation.

Bladder Scan	
Patient States Need to Void	<input checked="" type="radio"/> Yes <input type="radio"/> No
Bladder Distention	<input type="radio"/> Absent <input checked="" type="radio"/> Present
Void Prior to Scan	<input type="radio"/> Yes <input checked="" type="radio"/> No
Pre Void Bladder Scan Volume	1,500 mL
Urine Voided	750 mL
Post Void Bladder Scan	<input checked="" type="radio"/> Yes <input type="radio"/> No
Post Void Bladder Scan Volume	740 mL
Second Void	<input checked="" type="radio"/> Yes <input type="radio"/> No
Urine Output from Second Void	75 mL

Today's Intake: 0 mL Output: 825 mL Balance: -825 mL Yesterday's Intake: 0 mL Output: 0 mL Balance: 0 mL							
	Clinical Range To...	24 Hour Total	2019-Nov-08		2019-Nov-07		
			20:00 - 07:59	08:00 - 19:59	24 Hour Total	20:00 - 07:59	
Δ Intake Total							
Δ Oral							
Oral Intake	mL						
Δ Output Total							
Δ Urine Output							
Second Void Urine Output	mL	75			75		75
Urine Voided	mL	750			750		750
Δ Stool Output							
Stool Count							
Balance		-825 mL			-825 mL		-825 mL


## PowerChart Updates: (continued)

**IV Bolus Documentation Updated** - The bolus volume will display at the beginning of the order details for more clarity on the intent of the order.

### Background

Currently, the rate is the first order detail for IV Bolus orders on the clinical display line, appearing before the actual volume to be infused. If the bolus is to be infused over less or more than an hour, the rate and the volume to be infused will not match.

### Updated Display

 <b>Hypertonic Saline 3% IV Bolus - Test 100 mL</b> 100 mL Bolus, Infuse over 10 minute(s), IV, *** Independent Double Check Required ***, Start: 2019-Nov-05 07:54	<b>Pending</b> Not given within 31 days.
<b>Administration Information</b> Sodium Chloride 3% IV Solution	

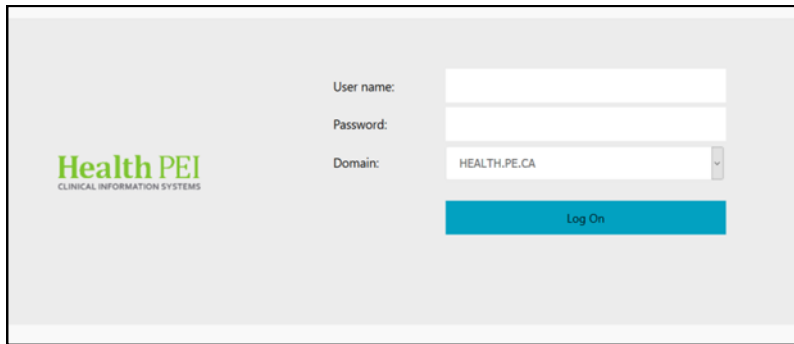
**Updates to IVIEW** - The Activities of Daily Living iView band will be added.



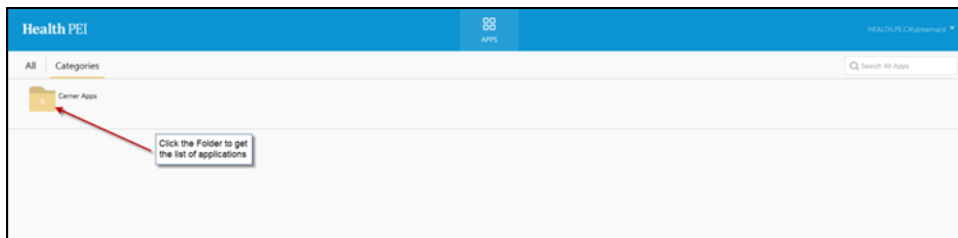
## Accessing CIS:

On December 3rd, CIS will be rolling out a new webpage for accessing the system in non-acute facilities. This will not change the access for those individuals who login to the CIS using Cerner Apps.

### Main login page



### Click Cerner Apps for application list



From here, you'll be able to access your applications, go back to the main Cerner Apps page or logout of the system

