

# **MONTHLY BULLETIN**

**ATTENTION: ALL FACILITIES (CORRECTION)**

**UPDATES OCCURRING WITHIN THE CIS THE  
WEEK OF - JULY 29TH, 2019**

**The following solution areas have updates:**

**Physicians - Page 2**

**PowerChart - Page 3**

**FirstNet - Page 4**

**Labs - Pages 5 - 6**

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## **UPCOMING EVENTS**

CIS will be performing system maintenance on August 7th at 0000 until approximately 0500. During this time, the system **WILL** be available however, there could be short periods of slowness (less than 5 minutes) or messages to log out of your application.

If you experience any issues other than those mentioned above within the maintenance window, contact the Service Centre.

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### **Further Information:**

Bulletins are available for viewing at: <https://src.healthpei.ca/cis-bulletins>

If you have questions please contact ITSS Service Centre:

Phone 3600 in Charlottetown, (6)-3600 outside Charlottetown;

Email (non-urgent) - type "Service Centre" in GroupWise.

## Physician Updates:

A recent memo sent out to All Health PEI Physicians from Dr. Andre Celliers, Executive Director Medical Affairs & Dr. Spencer Brown, Chief Medical Information Officer:

### Subject: EDD Revisions

The implementation of a standardized **Expected Date of Discharge (EDD)** is an evidence based practice that has the potential to improve the coordination and effective use of our hospital beds across the province. Our goal is to reduce ED Overcrowding and provide the best possible care for our patients. The Provincial Bed Coordination team uses the EDD on the electronic Bed Board to proactively coordinate patient movement between and within hospitals and from off-island.

We feel that the clinical knowledge and expertise of a physician makes him or her the provider best suited to determine his or her patient's Expected Date of Discharge. Health PEI Leaders acknowledge that physicians have many tasks to complete in the day to day care of their patients. With these factors in mind and the shared goal of balancing the potential harms of IT related burnout and alert fatigue with efforts to assist physician in entering the EDD, Health PEI leadership met with the CMIO. Outcomes of this meeting are below:

- No daily repeat of the reminder alert will occur
- A single reminder alert will fire at 24 hours prior to the initial EDD (Currently fires at 48 hours from EDD)
- Trial this for 3 months and if no significant degradation (EDD entry remains above 75%, no significant decline in accuracy of EDD entries) will further reduce the alerts.
- Communication with physicians will occur through LMACs at QEH, PCH and Hospitals West
- Priority assigned to further education about the purpose and evidence for the EDD project to be supplied to physicians especially at the QEH.

The EDD order will be revised in CIS as described above as of Monday, July 15th, 2019.

## PowerChart Updates:

**Medical Records Request - Out of Province Format Content Updates:** In order to support printing of information for patients transferring out of province, especially from the Emergency Departments using iView, additional content has been added to the OOP Template. This includes physician documentation, the MAR, IVEW documentation, Vital Signs and all posted lab and DI results.

**Oral Care Assessment PowerForm** - Revisions have been made to align the terminology with policy and powerplan updates.

**New option for Information source when documenting BPMH -**

Details | Order Comments | Compliance

Status: Still taking, as directed

Information source: Community Pharmacy

Comment:

**Updates to iVIEW (new category) -**

EENT Assessment added to iVIEW and will display on the Assessments tab

Intake And Output

ED Documentation

Find Item

Result

Comments

Flag

2019-Jul-11

14:42

14:39

EENT Assessment

Vision Testing

Corrective Lenses

Color Blind Correct Plates

Eye, Right Visual Acuity

Eye, Right w/Correction Visual Acuity

Eye, Left Visual Acuity

Eye, Left w/Correction Visual Acuity

EENT Assessment - Eye

Left Eye Symptoms

Left Eye Foreign Body Present

Left Eye Foreign Body Type

Right Eye Symptoms

Right Eye Foreign Body

Assessments

Flowsheet: Clinical Info

Level: Clinical Info

Navigator

Vision Testing

EENT Assessment - Eye

EENT Assessment - Ear

Clinical Info

2019-Jul-11 14:39

Vision Testing

Corrective Lenses

Eye, Right Visual Acuity

Eye, Right w/Correction Visual Acuity

Eye, Left Visual Acuity

Eye, Left w/Correction Visual Acuity

EENT Assessment - Eye

Left Eye Symptoms

Left Eye Foreign Body Present

Left Eye Foreign Body Type

Right Eye Symptoms

Right Eye Foreign Body Present

Right Eye Foreign Body Type

EENT Assessment - Ear

Left Ear Symptoms

Left Ear Foreign Body Present

Left Ear Foreign Body Type

Right Ear Symptoms

Right Ear Foreign Body Present

Right Ear Foreign Body Type

## FirstNet Update:

Addition to the ED Pediatric Triage Assessment: PRAM (Pediatric Respiratory Assessment Measure)

ED Pediatric Triage Assessment - ZZTEST, PATIENT NONCANADIAN

\*Performed on: 2019-Jul-11 14:25

**Pediatric Respiratory Assessment Measure (PRAM)**

Signs/Scoring

O2 Saturation on Room Air (on room air x 1 minute)	<input type="radio"/> Greater than or equal to 95% <input type="radio"/> 92 - 94% <input type="radio"/> Less than 92% (resume O2 as soon as possible)
Suprasternal Retraction	<input type="radio"/> Absent <input type="radio"/> Present
Scalene Muscle Contraction	<input type="radio"/> Absent <input type="radio"/> Present
Air Entry *	<input type="radio"/> Normal to all fields <input type="radio"/> Decreased air entry at one or both bases (either anterior or posterior) <input type="radio"/> Widespread decreased air entry (apex and bases) <input type="radio"/> Minimal or absent
Wheezing **	<input type="radio"/> Absent <input type="radio"/> Expiratory only <input type="radio"/> Inspiratory ( +/- expiratory) <input type="radio"/> Audible without stethoscope OR silent chest (minimal or no air entry)
PRAM Score	<p>* In case of asymmetry, the most severely affected lung field (right or left, anterior or posterior) will determine the rating of the parameter.</p> <p>** In case of asymmetry, the two most severely affected auscultation zones, irrespective of their location, will determine the rating of the parameter.</p> <p>PRAM Score 1 - 3 (MILD Asthma exacerbation) - Reassess 60 minutes after initial assessment. If score remains low, score as needed as part of ongoing respiratory assessments.</p> <p>PRAM Score 4 - 7 (MODERATE Asthma exacerbation) - REPEAT PRAM score every 30 minutes</p> <p>PRAM Score 8 - 12 (SEVERE Asthma exacerbation) - REPEAT PRAM score every 20 minutes</p>

**POC Charting** - Users in FirstNet will notice additional options on some of the fields in the POC Charting section within iView. These new options are being added to accommodate a gradual roll-out of new point of care urinalysis machines in emergency departments across PEI. Once all the emergency departments have the same urinalysis machines in place, the drop-down menus will be modified to only display the results appropriate for the new devices. One example of a modified drop-down is below:

**Existing POC Urine pH drop-down:**

POC Testing 14:23

Rapid Strep Screen	
POC Urine Beta hCG QI	
Appearance Urine Dipstick	
POC Urine Spec Grav	
POC Urine pH	POC Urine pH X
POC Urine Leukocytes	5
POC Urine Nitrite	6
POC Urine Protein Qual	6.5
POC Urine Glucose	7
POC Urine Ketones	8
POC Urine Urobilinogen	9
POC Urine Bilirubin	
POC Urine Hgb	

Existing options

**POC Urine pH drop-down with additional values added:**

POC Testing 14:27

Rapid Strep Screen	
POC Urine Beta hCG QI	
Appearance Urine Dipstick	
POC Urine Bilirubin	
POC Urine Glucose	
POC Urine Hgb	
POC Urine Ketones	
POC Urine Leukocytes	
POC Urine Nitrite	
POC Urine pH	POC Urine pH X
POC Urine Protein Qual	5
POC Urine Spec Grav	5.0
POC Urine Urobilinogen	5.5
	6
	6.0
	6.5
	7
	7.0
	7.5
	8
	8.0
	8.5
	9
	>=9.0

Additions to the drop-down to accommodate new urinalysis analyzers.

## Lab Updates:

To reflect changes in Laboratory testing:

- **Adeno and Rotavirus Screen** and **Novovirus PCR** tests are going to be replaced by a new test **Enteric Viral Panel**

### Before Change:

Previously CPOE orders were found searching under “Adeno and Rotavirus Screen” or “Novovirus PCR”

**P** ZZTEST, LOUISE - Add Order

**ZZTEST, LOUISE** Age:20 years Sex:Female  
 Recurring [2018-Jul-17 14:19:00 - <No - Disc... DOB:1999-Jan-18 MRN:888000736  
 Violent/Aggressive:

Search:  Contains Type: All Orders

Folder: Search within: All

Adeno and Rotavirus Screen  
 Stool for Adeno and Rotavirus Screen

**P** ZZTEST, LOUISE - Add Order

**ZZTEST, LOUISE** Age:20 years Sex:Female  
 Recurring [2018-Jul-17 14:19:00 - <No - Disc... DOB:1999-Jan-18 MRN:888000736  
 Violent/Aggressive:

Search:  Contains Type: All Orders

Folder: Search within: All

Norovirus PCR  
 Stool for Norovirus PCR

**Recent Results** Vitals Lab Diagnostic Imaging Warfarin Respiratory/COPD PACU Documentation

Flowsheet: Quick View ... Level: Quick View Table

**Navigator**

☒ Enteric Testing

Show more results

Quick View	2019-Jul-1 1 11:45
<b>Enteric Testing</b>	
Norovirus PCR	<a href="#">REVIEW</a>
Adeno and Rotavirus Screen	<a href="#">REVIEW</a>

## Lab Updates: (continued)

### After Change:

Now orders are found searching under "Enteric Viral Panel"

**P** ZZ TEST, PATIENT ONE - Add Order

**ZZ TEST, PATIENT ONE** Age:61 years Sex:Male  
 Inpatient [2019-May-09 12:55:00 - <No - Disc... DOB:1957-Sep-02 MRN:888000852  
 Violent/Aggressive: ...

Search:  Contains  Type:

Folder:  Search within:

Enteric Viral Panel

**Recent Results** Vitals Lab Diagnostic Imaging Warfarin Respiratory/COPD PACU Do

Flowsheet:  ... Level:

**Navigator** ☒ Enteric Testing

Show more results

Quick View	2019-Jul-1 1 11:53
Enteric Testing	
Enteric Viral Panel	<a href="#">REVIEW</a>