Printing using Export

PCHED, PT1TB 🛛 🛛						- List - MRN + Q
PCHED, PT1TB Emergency [2018-Sep-07 13:37:00 - Violent/Aggressive:	- <no -="" date="" discharge="">]</no>	Age:73 years DOB:1946-Jun-23	Sex:Male MRN:028000067		Loc:Emerg PCH ** Allergies **	ARO: RESUS:
Menu [‡]	< > 🔹 者 Docum	ents				(그) Full screen
Triage Summary	***					
Documentation 🛛 🕂 Add						
PowerNote ED	4	Last 400	Documents : 11 out of 11 doc	uments are accessible. (Docum	ient Count)	•
Orders 🕂 Add	D Admission/Discharge					<u>^</u>
Patient Summary	Discharge Summa History and Physi	History and Physical (Unverified)				
Discharge Summary	2020-Jan-25 08	COPIES TO:				Open document you wish to export
Transfusion Summary Report	Diagnostic Imaging	ADMITTING DIAGNOSIS: Suspected large bowel o	bstruction	Add	Ctrl+N	and print. Right-Click anywhere in the
Overview	Nursing/Allied Health	ATIENT SUMMARY:		PowerNote Scan /monort		body of the document and click
Results Review	💼 Physician Consultatic	Xx is an xx year old man who is very pleasan only history I was able to obtain was from h	t and has dementia im today. He stat	Scanner Properties	e. The	EAFORI
Problems and Diagnoses	Physician Surgical Do	yesterday morning. He has been admitted on	a number of occasi	Filter In Error Documents	ted for	
Flowsheet	Mursing Progress	was treated with enemas and polyethylene gly	col. Harold denie	Submit	uble to	
Assessments	🖶 📂 Physician Progres	tell me when his last bowel movement was. H having been admitted yesterday evening. The	e says that he did physicians report	Sign	ould	
Documents	2020-Jan-25 0	suggest that his vomiting started a little e	arlier in the wee)	Review		
Form Browser		Xx's past medical history includes BPH with	urinary retention,	In Error	al	
MAR Summary				Modify		
MAR		Xx is alert and in no distress. He is well	hydrated. Examina	Correct	.s no	
Med List 🕂 Add		abnormality. Heart sounds are normal. Ches lung fields. The abdomen is firm and disten	t is clear with fa ded, but not tende	Mail Merge	though	
Reference Text Browser	some	somewhat reduced. There is no palpable mass examination. A rectal examination was done	in the belly. The by Dr. Bader in the	View Image	on 7 and	
Patient Schedule	• <u> </u>	was unremarkable.		Forward		
Allergies 🕂 Add	Putma	Xx had a CT scan of the abdomen done this m	orning, which appa	Print Document(s)	ng in	
Patient Info	By type By status	sigmoidoscopy early this week.	consulted and is	History	.bie	
Histories	By date	Xx's creatinine is moderately elevated at ju	st over 250, both	Hide Tracked Changes	m	
	Performed by	receiving intravenous saline at 125 cc/hr ov overnight Potassium has been added to the	ernight. His pota	Show Toolbar	to 2.7	
	By encounter	been decreased to 100 ml/hr.		Import	loc nub	
		Xx also has an elevated white blood cell co	unt at just over 1	Export	and	
		riagyi for the possibility of this being rel the thickening seen in the rectal wall as we	atea to diverticul	Insert Auto Text	coming	-
				Save As Auto Text		

To print a document, it must be exported to a Microsoft Word document.

- 1. Open the document
- 2. Right-Click the document
- 3. Click export.
- 4. The next window opens, select Microsoft Word and click okay
- 5. Select "Print"
- 6. The document will print in Microsoft Word format