

# Epic Updates for Providers

## General Changes:

- Order “Strict Intake & Output” is being replaced by “Intake and Output”. Ability to indicate it is “Strict I&O” is within the order of “Intake & Output”. If “Strict I&O” is saved as a “preference” please remove and replace with “Intake and Output” order.
- Post-Op Navigator with additional option. (See screen shot)
- SNF Discharge when mid-level is performing the discharge. (see screen shot)
- Process change when making multiple Discharge follow-up appointments with same provider. (see Screen shot)
- “Blood Product Transfusion” order set changing. Please remove any current saved “favorite” set for blood transfusion and replace with new set. (see screen shot of set on third page).

## New Blood Product Transfusion Order Set Changes (see attached copy of Order set):

- **“Blue” type is important information to assist in navigating through blood product ordering** to ensure all parts of the order are placed
- **Patients need to have a current Type and Screen order**; patients that have an active T&S currently on record will display in this area. T&S are only current for 72 hours after which a new T&S needs to be performed to release blood products.
- **“Order and Transfuse” places the order to the blood bank for the product as well as directs nursing to “transfuse the blood”**
- **“Place XXX (blood product) on hold” is ONLY an order to blood bank to Cross-match or allocate blood product** for patient—but NOT to transfuse.
- **“Transfuse” is only used by itself when there is a previous order for “Place XXX (blood product) on hold”**; it is essentially telling the nurse that the product needs to be given to the patient now.
- **Pre-Medications are available** for selection if needed.
- **IV Fluid** is pre-checked as needs to be part of “order and Transfuse”; please uncheck if you are ordering blood products on hold and place this order at the point of time you are ordering the “transfuse blood product”
- **General Nursing area and Lab orders (Pre and Post Transfusion) should be marked as appropriate.** Remove Check mark in front of Vital signs if you are placing the blood order as a “hold”.

## Post-Op Navigator Changes:

The screenshot shows the Post-Op Navigator interface. At the top, three buttons are highlighted: "Post-op Discharge", "Post-op Admit", and "Post-op Return to Floor". A yellow callout box contains the following text:

Post-Op Button Will now be a larger button with the options being on the top of the navigator when opened:

1. Post-Op Discharge: Patient discharging from the outpatient surgical area.
2. Post-Op admit: Patient going up to the floor after surgery, includes 23 hour as well as Inpatient (may need admission order if patient is changing to be an inpatient).
3. Post-Op Return to Floor: Only for patients returning to same bed/unit they came from. No transfer order needed. (may need admission order if patient is changing to be an inpatient).

## Discharges to SNF when mid-level preparing orders for MD/DO; SNF regulations require MD/DO signature:

The screenshot shows the order entry interface with a "Save Work" dialog box open. The dialog box asks "Is this work ready for others to view?" and has "Ready" and "Not Ready" buttons. Below the dialog box, a yellow callout box contains the following text:

Discharges to SNF require the Physician to "Sign" orders for admission.

Mid-level should complete all discharge components then click "Save Work"; mark as "Ready"; you may add a message if needed.

Notify the physician needing to "Sign" using your preferred method (phone, DocHalo, in-Basket, pager).

Orders are not valid until signed by physician; patient cannot be discharged until "Signed"

The "Save Work" dialog box also contains a text area with the message: "Please review the therapy order, does the patient need OT also? If you feel they do please order".

## Discharge "Follow-Up" Multiple Appointments with Same Provider:

The screenshot shows the Follow-up appointment scheduling interface. At the top, there are buttons for "Provider or Organization", "Follow-up", "PCP", "Care Team", "Add Me", and "Unlisted". The "Unlisted" button is highlighted. Below the buttons, there is a form for adding a provider. A yellow callout box contains the following text:

Multiple Appointments for the Same Provider:

1. Make the first follow-up appointment as you normally do
2. Click "Unlisted" and type in provider's name
3. Copy and Paste address
4. Select date for appointment

A blue arrow points from the callout box to the "Unlisted" button and the provider information form. The form contains the following information:

Name: Benson, Terry D  
 Contact Info: EAU CLAIRE MEDICAL CLINIC  
 703 W HAMILTON AVE  
 EAU CLAIRE WI 54701  
 How: Call, Make appointment, Go to  
 When: 1 Days, Weeks, Months, 10/31/2017  
 Instructions:

At the bottom, there is a "copy and paste" button and a "Sign" button.

▼ Blood Product Transfusion Manage My Version▼

For STAT  Negative transfusions, please use the Massive Transfusion order set.

Transfusion of blood products requires two separate orders:

1. An lab order to Blood Bank that makes the product available (e.g. "Order RBC units")
2. An nursing order to patient care staff that initiates the transfusion (e.g. "Transfuse RBC")

This order set is intended to facilitate standardization and efficiency, and to minimize any confusion about what the correct orders are. Please use this order set for routine administration of blood products in adult patients. If a patient is expected to require a large volume of blood product (e.g. 4 or more units), please consider using Order Set 917, "Massive Blood Transfusion."

In addition, transfusion of packed red blood cells also requires a current type and screen. The type and screen is considered current if it has been done within the last 72 hours. Crossmatching is automatically performed by the lab when indicated, so a separate crossmatch order is not necessary if a type and screen is ordered.

- Up to Date Link: Transfusion Guidelines

GENERAL Co

▼ Vital Signs

- Vital signs according to local transfusion practice  
Routine, Per unit routine starting Today at 1021 Until Specified

▼ Consent

- Verify informed consent  
Routine, Once, Verify informed consent on chart.

LABS Co

▼ Pre-Transfusion Labs

- HEMATOCRIT  
Once
- HEMOGLOBIN  
Once

▼ Post-Transfusion Labs

- Place order for PT/INR when transfusion is complete  
Routine, Once
- Place Orders for Hemoglobin and Hematocrit when Transfusion is Complete  
Routine, Once

BLOOD PRODUCTS Collapse

▼ Type & Screen

Type & Screen is required within 72 hours of administration of new RBC units. Verify that previously ordered testing is current. If it has expired, reorder at the time of ordering RBC units. The most recent result is shown:

Type and Screen  
No lab results found.

- TYPE & SCREEN  
Routine, Once, Starting 10/19/17, Verify expiration date is current

▼ Order and Transfuse Blood Products

Use orders from this section if you are ordering new blood products to be made available by blood bank, and you would like them transfused once they become available.

- Order and Transfuse RBC Units
- Order and Transfuse Platelets (Pheresed)
- Order and Transfuse Fresh Frozen Plasma
- Order and Transfuse Cryoprecipitate

▼ Place Blood Products on HOLD

Use orders from this section if you would like to have blood products placed on HOLD by the blood bank, but you do not necessarily want them to be transfused at this time.

- Place RBC units on HOLD  
STAT
- Place platelet pheresis on HOLD  
STAT
- Place fresh frozen plasma on HOLD  
STAT
- Place cryoprecipitate on HOLD  
STAT
- Place granulocytes on HOLD  
STAT Until Specified

▼ Transfuse Previously Held Blood Products

Use orders from this section if blood products have already been placed on hold, and you would now like to transfuse those products.

- Transfuse (held) RBC units  
STAT
- Transfuse (held) platelet pheresis  
STAT
- Transfuse (held) fresh frozen plasma  
STAT
- Transfuse (held) cryoprecipitate  
STAT
- Transfuse (held) granulocytes  
STAT

IV FLUID

▼ IV Fluid

- sodium chloride 0.9% infusion  
at 10 mL/hr, Intravenous, Continuous, starting Today at 1030 Until Discontinued  
infuse at TKO rate
- sodium chloride 0.9% infusion 500 mL  
at 10 mL/hr, Intravenous, Continuous, Infuse at TKO rate

MEDICATIONS

▼ Pre-medications

- acetaminophen (TYLENOL) tablet  
650 mg, Oral, Once, Prior to blood administration
- diphenhydramine (BENADRYL) capsule  
25 mg, Oral, Once, Prior to blood administration
- diphenhydramine (BENADRYL) injection  
25 mg, Intravenous, Once, Prior to blood administration
- METHYLPREDNISOLONE IV ORDERABLE  
Intravenous, Once, Prior to blood administration
- hydrocortisone sodium succinate (SOLU-CORTEF) injection  
100 mg, Intravenous, Once, Prior to blood administration