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LBMMC and Miller Children's ED Resident Start-up Guide

Last updated: August 2015

Table of Contents

ED Basics

- ED Map (Pods: Silver, Gold, Peds)
- ED Processes & Etiquette (Main v Peds)
- Navigating EPIC
 - Trackboard
 - Patient's Profile
- Charting and Billing
 - Creating a Note
 - Dot phrases (Templates, procedures, useful tips)
- Insurance Basics
 - Initial Admitting Process
 - Resources



ED Basics: ED Map – Main and Peds



- > The ED is divided between the "Main" and Pediatric departments. The Main ED is available to patients 24/7 and typically sees adult patients.
- The "Main" ED is divided into two sections, Silver (Rooms 1-6, 20-21, 26-36) and Gold (Rooms 22-25, 37-54) as indicated by the blue line on the ED map.
- The PEDS department is open from 1100-0300., and includes rooms 6-18.
- The following physical elements within the ED are also noteworthy:
 - MD Pod Physicians typically perform their administrative work during their shift here.
 - POD A Case Manager located here.
 - POD B Secretary, TL, and Charge Nurse typically located here.
 - Room 19 (Pelvic Room) Mobile ultrasound located here. Pelvic exams performed here.
 - Rooms 19 & 29 Fast track rooms dedicated to quickly disposition patients. Attendings ONLY.

ED Processes & Etiquette

≻Main

- Attending shifts are as follows:
 - 0600-1500, 1400-2300, 2200-0700.

➢Peds

- Attending shifts are as follows:
 - 1100-1900, 1900-0300

Resident phone

- The phone can be obtained at the beginning of your shift from the TL (team leader) in Pod B if you are working in Main, or from the PDFF (pediatric disposition and facilitator) if you are working in Peds.
- In order to receive your phone you will need to provide a set of keys that will be returned to you after returning the phone to the TL or PDFF at the end of your shift.
- Once you have obtained your phone at the beginning of your shift, inform the unit secretary of your name and number of the phone you have been provided.



ED Processes & Etiquette

Paging the Secretary & Steno Use

- In order to admit or receive a consult regarding a patient, it is helpful to communicate with the secretary via the Steno.
- Hold down letter 'M' to speak. Let go to listen. Hold letter 'C' to end.
- Useful Steno numbers:
 - Main & Ped Unit Secretary 214
 - Main & Ped Case Manager 206
- Proper Steno Etiquette: Hi this is Dr. Doe requesting Dr. Soe for room# ***. My number is *** (if not already provided).





Navigating EPIC: Trackboard

- EPIC Icon Useful for accessing a number of different aspects of EPIC, including a search function, dot phrases, and patient lists.
- Sign in Signing into your EPIC profile is necessary for being able to assign yourself patients. This icon is found on the second highest tool bar.
- ED Map Helpful in orienting yourself. Found on the top and second highest tool bar.
- Legend You will noticed patients' room numbers on the ED map vary in color depending on the step in their care. Familiarize yourself with the basic colors: red, yellow, purple, black.
- All Patients (Currently selected in the referenced image) Visualizes all patients signed into the ED, from triage to treated. Found on the Views tools bar (third highest tool bar).

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Navigating EPIC: Trackboard Cont.

- My Patients Patients will appear in this column only after you have assigned yourself to a patient.
- Waiting to be Seen Patients who have already been triaged are waiting to be seen.
 - If you wish to assign yourself to that patient, right click the patient while under the 'Waiting to be Seen' tab and an option will appear to assign yourself.
 - Please sign up for patients one at a time and only when you are going to see them.
 - Please note: Patients in hallway rooms (EH**) & fast track rooms (EW**) should NOT be assigned to residents.

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Navigating EPIC: Patient's Profile

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- Double clicking on a patient, allows you access to the patient's profile under the 'ED Navigator' tab as currently selected on the column running down the left side of the referenced image.
- Activities List (Left-sided Toolbar):
 - **ED Navigator** Comprehensive view of patient's current visit, PFSH, and any resulted laboratory results.
 - Summary If you wish to print a patient summary, select 'Summary,' then right click and print what we call the 'First Look.'
 - **Chart Review** Visualizes all previous charts performed by an a physician using EPIC.
 - Allows view of discharge summaries, consults, op reports, ect. by accessing 'Notes/transcripts.'
 - Please note: Patients previously seen by Family Medicine Srvs, will likely be assessed again by FM. Please consult your attending prior to interviewing the patient.
 - Results Review Visualizes all lab and radiology results from current and previous visits.
 - Form Reprints Patient's insurance information and contact information.

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Navigating EPIC: Patient's Profile

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Order Sets

- Inputting orders can be accessed by selecting the 'Orders Sets' tab found on the inner leftsided tool bar.
- When placing orders, you can either enter orders individually or enter order sets.
- To enter orders "al la carte" use the "order key."
- Order sets include (but not limited to):
 - Emergency Department Workup (general orders)
 - Intracranial Hemorrhage ED
 - Statpath Psych Hold
 - Statpath Vaginal Bleeding
 - ED Statpath Focal Neurological Deficit (Code Stroke)
 - Diabetes DKA Adult ED
 - BPT STEMI
 - BPT Sepsis ED First 6 hours
 - Chest Pain

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			06/06	/15 0930	Urinalysis With	Microsc	opic ONCE						Ord	lered
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Charting & Billing

Creating a Note

- Once you have selected a patient to assign to yourself and accessed the patient profile, you can create a note by selecting the 'ED Navigator' tab.
- Click the 'Create Note' option.
- Scroll to and select 'Blank Note.'
- To select the desired template, input your dot phrase.

Dot Phrases

- Dot phrases are shortcuts in EPIC that allows a preformatted phrase or chart to appear by typing in a phrase preceded by a period.
 - i.e. .name or .residentgeneral
- These phrases can be accessed by having an individual "share" the phrases with you electronically.





Charting & Billing: Dot Phrases

Procedural Dot Phrases

- A more exhaustive list of preformatted procedural phrases can be found in the SmartText section on the top tool bar of your note by inputting the desired type of procedure in the search bar.
- Common procedural dot phrases include:
 - .proceduralsedation (3 time stamps for any sedation)
 - .edintubation
 - .edincisionanddraignage
 - .edcardioversion
 - .edcentralvenousline
 - .edchesttube
 - .edjointreduction
 - .edlumbarpuncture
 - .edparacentesis
 - .edsplint
 - .edthoracentesis

Useful Dot Phrases

- .id inputs patient's name, gender and age.
- .edlabsthisvisit imports all labs.
- .imaging imports all imaging studies.
- .edmeds imports all meds given in the ED.
- .htnfollowup inputs text for Medicare patients who experience HTN while in the ED. *Must be included in all applicable charts.*



Insurance Basics: Admitting Process

- The patient's insurance is a crucial component to the admission process.
- Once you have determined the patient should be admitted, right click on the patient's name, select patient and then click pending admission.
- The Case Manager will input which admitting service should be contacted in the 'Comments' column.
- Request this service be paged by informing the secretary or utilizing PerfectServe
- When admitting the patient, an admitting order must be placed with a final diagnosis.
- If you have questions, please consult your attending and the Case Manager.

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E201	Yoast, E (72 year old IV)	Altered Mental Status				ED N		03:15			-21:27
E202	Zzmaster, M (70 year old M)	Chest Pain	3			EUN		0000-45		A 了	0010-11
E205	Xyzmastercsu, S (14 year	Altered Mental Status	-			ED N		9339:15	-		9313:11
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E205	Xyzmaster, 3 (74 year old W)	Altered Mental Status						02-15		2	3313.11
5200	Yeast, E (12 year old M)	Altered Mental Status						03.15			-22.40
E207	Kearne L (68 year old M)	Chect Pain	2					-21:53		27 On	-22.40
E200	Zzedmod M (59 year old M)	Fever	3				0	22344-35		00	22343-41
E344	Zzednic, in (35 year old in)	Increacing III Incorporati	J				- ñ	9791-41		10 22	0330-48
E345	Canceira L (57 year old M)	Fever	3				2	24:35		@0	23:41
E346	Livovantes L (57 year old M)	Fever	3					24:35		m ©0	23:41
E347	Boogaloo I (57 year old M)	Fever	3					24:35		m OO	23:41
E348	Gaida I (57 year old M)	Fever	3					24:35		n Co	23:41
EA31	Edtrans I (26 year old E)	Abdominal Pain					0	14828:38			14827:36
EA33	Xyzmastersu S (74 year of	Altered Mental Status					~~~	9339:15		୍ର 🖓 🔊	9314:32
EB25	Zzmastered, P (10 year old F)	Fever						22610:36			22610:35
EB26	Aloe. V (8 year old F)	Fever						26:36			26:35
EB27	Echinacea, E (8 year old F)	Fever						26:36			26:35
EB28	Gingko, G (8 year old F)	Fever						26:36			26:35
EB29	Valerian, V (8 year old F)	Fever						26:36		0 0	26:35
TRN-ED	Snapdragon, T (25 year ol	Abdominal Pain						20:38		2	19:36
TRN-ED	LilacTess, (25 year old F)	Abdominal Pain						20:38		2	19:36
TRN-ED	Snapdragon, O (25 year ol	Abdominal Pain						20:38		2	19:36
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I'RN-ED	Pansy, O (25 year old F)	Abdominal Pain						20:38		ر ش	19:36
TRN-ED	Marigold, T (25 year old F)	Abdominal Pain						20:38		ŝ	19:36
TRN-ED	Oleander, O (25 year old F)	Abdominal Pain						20:38		(je)	19:36
RN-ED	Dattodil, T (25 year old F)	Abdominal Pain						20:38			19:36

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Insurance Basics: Calling Physicians

Calling Admitting Physicians

- Check with your attending before calling any physician.
- Know the patient's insurance and inform the admitting physician up front.
- Have your summary of ED course and reason for admission prepared.
- Make sure your attending knows you are calling and is available at the time of the call.
- Always document time you called, name of doctor, and outcome of call in your note.
- Calling Specialists for Consultation
 - ONLY call a specialist after discussing with your attending.
 - Ask your attending about EPIC consult vs. phone call.
 - Always document time you called, name of doctor, and outcome of call.



Final Comments: Resources

Resources for Success

- Scribe Feedback
 - The ScribeConnect scribe of the ED is available to answer your questions and assist you with any ED basics, charting and billing components!
- Attending Mentorship
 - Your attending is the best resource for questions in regards to order sets and beginning the admitting process.
- Case Manager Advisement
 - The Case Manager is the best resource for questions in regards to admitting physicians, admitting forms, and transfer protocols.

Please do not hesitate to utilize these resources prior to taking action as they will assist in maintaining the flow to the ED!





Acknowledgements

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- Authors: Alec Nielsen, Andrew Park, Hilary Willis

scribe connect

7828 Haven Ave Suite 213 Rancho Cucamonga, CA 91730 info@scribeconnect.com

