

Level 3 – Level 3 of *Nursing Documentation Using Electronic Health Records* includes chapters 9, 10, and 11. These chapters take the students deeper into EHR features of documentation and enable them to add on to their Nurse Notes using these features. The student learns such EHR administrative features as working through a ‘to do’ list, sending and receiving internal messages, etc.. A whole chapter in Level 3 is devoted to patient education in which the student learns patients’ rights and nurses’ responsibilities. The Nurse Note documentation is taken to a more complex level and the student completes the notes that were created in Levels 1 and 2.

Chapter 9 – Routine Documentation

In the first chapter of Level 3, students are exposed to various administrative EHR functions. They learn how to use the ‘to do’ feature, send and receive internal messages, complete immunization records, and create patient instruction sheets. This chapter also exposes the student to the draw program within the EHR program that is used to enhance nursing documentation.

Learning Outcomes

After completing Chapter 9, the students will be able to:

- 9.1** Use the *ToDo* List feature.
- 9.2** Use internal messages.
- 9.3** Carry out accessing and completing the patient’s immunization record.
- 9.4** Carry out creating and distributing a patient instruction sheet.
- 9.5** Use the draw program to develop illustrations to enhance documentation.

Key Terms & Definitions

Terms and abbreviations encountered in Chapter 9:

VIS: Vaccination Information Statement. Forms developed by the Centers for Disease Control and Prevention (CDC) to explain the risks and benefits of vaccines; must be given to a patient or guardian before administration of certain immunizations.

Presentation Outline

LO 9.1 ToDo’s and Reminders

Power Point Slides: 1, 2, 3, 4.

LO 9.2 Internal Messages

Power Point Slides: 5, 6.

Concept Checkup 9.1

- A. What happens to a red-checked ToDo item the next time the user logs into SpringCharts?

Answer: It is removed.

Rationale: A ToDo item with a red check is a completed item and does not appear with subsequent log-ons.

- B. To what two things does a user have access when a message is connected to a patient?

Answer: Any two of the following: Patient's chart, patient information, patient demographics, patient's routine medications and previous prescriptions.

Rationale: After a message is initiated; it may be linked to a patient by selecting the [Change Pt] button in the original *New Message* window. The patient's name appears as the subject and the [Get Chart] and [Pt Info] buttons are activated. If needed, the Rx button provides access to the patient's routine medications and previous prescriptions.

- C. Where does an urgent message appear for the recipient?

Answer: It appears on the foreground of the recipient's SpringCharts' screen.

Rationale: Once [Sent], the urgent message instantly appears on the foreground of the receiver's screen.

LO 9.3 Immunization Record

Power Point Slides: 7, 8, 9, 10.

LO 9.4 Patient Instructions

Power Point Slides: 11, 12, 13.

LO 9.5 Draw Program

Power Point Slides: 14, 15, 16, 17.

Concept Checkup 9.2

- A. Immunizations are automatically added to the patient's immunization record when ordered in the _____.

Answer: Nurse Note or an Office Visit Note

Rationale: Immunizations are automatically added to the immunization list when ordered

in a Nurse Note or an Office Visit Note.

- B. In what format must an existing patient instruction document be to import it into SpringCharts?

Answer: RTF (rich text format)

Rationale: Under the *New* menu on the main screen the users select *New Patient Instruction*. The user has the option to either import an RTF (rich text format) file or to create a patient instruction document.

- C. In what menu of the Office Visit screen is the draw feature located?

Answer: The Tools menu.

Rationale: SpringCharts' Office Visit screen and the Nurse Note screen provide access to a rudimentary draw program that enables the nurse to indicate the condition and location of wounds, scars, incisions, injuries, or procedures by drawing on prebuilt templates. Within either of these encounter notes the nurse accesses the *Tools* menu and selects the *Draw* option.

Chapter 9 Review Key

Checking Your Understanding

1. F
2. T
3. T
4. T
5. T
6. F
7. T
8. F
9. F

Rationale:

1. If the sender wishes to send a message to more than one user, the [MultiSend] button is used to allow selection of the appropriate recipients.
2. The *ToDo List* is located in the lower left quadrant of the *Practice View* screen. A *ToDo* item is set by clicking once on the *ToDo List* title bar. In the *New ToDo/Reminder* window one may 1) notate the *ToDo* item, 2) send the item to another coworker, 3) link the item to a patient, and/or 4) schedule the *ToDo/Reminder* for a future date.
3. Current and future *ToDo/Reminders* can be accessed by selecting *Edit>My ToDo List* on the main menu. From the *Edit ToDo* window, items can be reassigned to different users, reset to a different due date, or linked to a patient.

4. The message center is located in the lower right quadrant of the main screen. The SpringCharts message system is an intra- and interoffice mail function that enables users to send and receive messages with other SpringCharts users on the network and to e-mail messages over the Internet.
5. There are two types of messages in SpringCharts: messages that concern a patient and messages that do not concern a patient. If a user selects a message that concerns a patient then the user has quick access to the patient's demographics, medication lists, and chart.
6. If a message concerns a patient, the user can view the patient's demographics on the left side of the message window.
7. At times, a nurse may need to provide confidential patient information to a coworker quickly. The *Urgent Messages* function prevents having to locate the coworker and provides a mechanism for communicating information discreetly in order to maintain patient privacy. The urgent message functions similar to that of an instant message. The message pops up on the recipient's SpringCharts display.
8. Elaborate illustrations can be quickly imported into the draw program by selecting *Background Image* on the menu bar then selecting a .jpg image from within the computer or a computer on the network. A digital photo taken of the patient's body area may be imported to the draw program.
9. SpringCharts' Office Visit screen and the Nurse Note screen provide access to a rudimentary draw program that enables the nurse to indicate the condition and location of wounds, scars, incisions, injuries, or procedures by drawing on prebuilt templates. The draw program does not allow for free-hand sketching and is limited to the tools available from within the draw program.

10. Actions.

Rationale:

In SpringCharts, a patient's immunization record may be viewed or modified by accessing the *Actions* menu within a patient's chart.

11. By selecting a vaccine under the *Immunization* heading of the procedure navigation tab in either the Nurse Note or the Office Visit screens.

Rationale:

In both the nurse note and the office visit note, the nurse selects the *Proc* (procedure) navigation tab and then the procedure category heading *Immunization*. The program lists all the vaccinations that have been set up as procedures in SpringCharts. The appropriate vaccine is selected. Because the vaccine procedures have been designated under the *Immunization* category heading, the program automatically adds the vaccines to the *View Vaccine* window.

12. Manufacturer, lot number, date of administration, name, title, and address of individual administering.

Rationale:

Federal law requires documentation of the following information when vaccines are administered: manufacturer and lot number of the medication, date of administration, name, title, and address of individual administering the vaccine.

13. National Institutes of Health Medline Plus Webpage
(<http://www.nlm.nih.gov/medlineplus/medlineplus.html>)

Rationale:

Many routine patient instructions can be found on Websites such as the Food and Drug Administration Website
(<http://www.fda.gov/Drugs/DrugSafety/PostmarketDrugSafetyInformationforPatientsandProviders/UCM111085>) or the National Institutes of Health Medline Plus Webpage
(<http://www.nlm.nih.gov/medlineplus/medlineplus.html>).

14. A, C

Rationale:

The *ToDo List* is located in the lower left quadrant of the *Practice View* screen. A *ToDo* item is set by clicking once on the *ToDo List* title bar. In the *New ToDo/Reminder* window one may 1) notate the *ToDo* item, 2) send the item to another coworker, 3) link the item to a patient, and/or 4) schedule the *ToDo/Reminder* for a future date.

15. B

Rationale:

At times, a nurse may need to provide confidential patient information to a coworker quickly. The *Urgent Messages* function prevents having to locate the coworker and provide a mechanism for communicating information discreetly in order to maintain patient privacy. The urgent message functions similar to that of an instant message. The message pops up on the recipient's SpringCharts display.

16. A

Rationale:

One e-mail account is set up for the health care facility on the SpringCharts server.

17. B

Rationale:

Once a message is processed and no further action is needed, it is placed in the patient's record by clicking the [Chart It] button. An information window appears indicating that the message has been saved in the patient's chart. The message is saved under the Encounter tab by default or any other custom-designed tab in the patient's Care Tree selected by the user. Subsequently the message may be accessed under the chart tab where saved.

18. A

Rationale:

Current and future ToDo/Reminders can be accessed by selecting *Edit>My ToDo List* on the main menu. From the *Edit ToDo* window, items can be reassigned to different users, reset to a different due date, or linked to a patient.

19. C

Rationale:

Messages that are not patient-related may be saved to private message archives. Archived messages are viewed from the *Edit* menu by selecting *Message Archive*. The message can be re-activated into the Message center from the *Message Archive* window. In addition, new messages can be created from the *Message Archive* window.

20. B

Rationale:

SpringCharts' Office Visit screen and the Nurse Note screen provide access to a rudimentary draw program that enables the nurse to indicate the condition and location of wounds, scars, incisions, injuries, or procedures by drawing on prebuilt templates. Within either of these encounter notes the nurse accesses the *Tools* menu and selects the *Draw* option.

21. A, B

Rationale:

To obtain and distribute a *Patient Instruction*, the provider opens either a new or existing Office Visit Note or Nurse Note from a patient's chart. From within either of these two patient encounter windows, the provider selects the *Tools* menu and chooses *Patient Instructions*. A list of all instructions that have been created in Spring- Charts is available for selection. The user is provided the option to print or e-mail the selected patient instruction sheet. Once the patient instruction sheet is selected, the program automatically notes in the *Teaching* section of the nurse note or the *Other Tx* (Treatment) section of the Office Visit Note that the instruction/teaching document was given to the patient.

22. B

Rationale:

A ToDo item with a blue bar on the right indicates the item is linked to a patient. When this item is selected, the patient's chart opens. When the chart is closed, the task is automatically checked as completed. The item may be checked to reactivate it.

23. B

Rationale:

The draw image is stored with the Office Visit Note or the Nurse Nnote. The *Follow-Up* segment on the note is stamped with the word: *Graphic*. To view the attached graphic from within the patient's chart without opening the entire note screen, the user simply clicks on the specific encounter note in the care tree, then clicks the word: ****Graphic***** in the lower right detail panel of the chart. The draw item window displays along with the accompanying encounter note.

24. B

Rationale:

Urgent messages function like instant messaging; the information is *not* saved in the program when the [Cancel] button is selected. However, an urgent message can be printed before closing the window. An urgent message is turned into a regular message by clicking on the [Message] button. It can then be sent or saved into the message list for follow-up at a later time.

25. C

Rationale:

E-mails in SpringCharts function like a mail sorting room. All e-mails come to a central location where they are forwarded to specific SpringCharts users. Specific users are assigned the security function to receive incoming e-mails for this e-mail account. On the SpringCharts server, the user(s) responsible for *receiving* the healthcare facility's e-mails are given the security clearance.