

Entry of Order(s):

The physician/CRNA/NP/PA will enter all orders into CIS. Upon storing, the physician's/CRNA's/NP's initials will become visible in the "ENT", "SIGN", and "CS" columns. If a PA enters the order, their initials will only become visible in the "ENT" and "SIGN" columns. Upon co-signature, the physician's initials will become visible in the "CS" column.

Pharmacy Notification:

Starting Monday, when orders are put into the CIS order entry (OE) system **by a physician** the Inpatient Pharmacy will receive orders via a printout. Please note that Pharmacy will NOT fill orders that aren't signed by a physician.

Acknowledgement of Order(s):

RN acknowledgement must occur in order to activate all orders. All pending orders will be indicated on the patient control screen in the "Pending Orders" column. Once an RN acknowledges an order their initials will become visible in the "ACK" column. In addition, the order(s) will then become active and visible on the appropriate flowsheet.

Verification of Order(s):

Orders will be reviewed by pharmacy staff (either on the Ward or in the Inpatient Pharmacy). Upon review, the pharmacist will verify the order(s) and their initials will become visible in the "VERIFY" column. If the order has not been verified, it may be because the pharmacist is clarifying the order.

Helpful Hints/Reminders:

- Any problems with the medication pick-list or IV drug pick-list should be reported to your Head Nurse or the Nursing Supervisor (on weekends/nights). Issues will then be forward to MAJ Kerkenbush for resolution.
- Any order set changes can be taken to MAJ Kerkenbush. Order set changes are expected to occur through this transition period and will be facilitated as quickly as possible.
- Patient safety must be made a top priority at all times.
- Telephone orders should be kept to a minimum and should be used only when there is no other way to get the order into the system.
- Multiple orders can be selected by using the "Shift" or "Ctrl" key. To select a block of adjacent orders: select one order using your mouse, hold down the "Shift" key, and then select another order using your mouse. To select a block of NON-adjacent orders: select one order using your mouse, hold down the "Ctrl" key, and then select another order using your mouse.
- *Remember that there are new categories for orders—"Diet Orders", "Activity", "Vital Signs", "Bedside Labs", etc.*
- Allergy information **MUST** be documented on the "Admission Information" note (found using the F2 soft key). Remember that any allergy information stored in CHCS will come across into this note, but will need to be edited before the decision support software can screen against it.

Order Entry Tips

Volume 1, Issue 4

18 February 2004

When I enter a dextrose stick value on the “Lab Entry” screen why does it create a new section on the “Treatment” flowsheet called ‘Bedside Lab Tests’?

This has been fixed. The order for dextrose sticks will be visible in a section titled “Bedside Labs” on the “Treatment” flowsheet. We are working on having results entered in the “Lab Entry” screen map back to the “Bedside Labs” section of the “Treatment” flowsheet, but the section titled “Bedside Lab Tests” will no longer be created.

How can I make 24-hour Chart Checks easier?

Use the ‘Create View’ softkey (F9) and select the “For Chart Review: Chart Check” option. This will show you a view with all orders (active and D/C’d) for the last 24 hours. This will help to narrow down the orders you are examining when reviewing transcription accuracy.

CONTACT INFO FOR HELP

Phone Call 968-0338 and press “5”

E-Mail Nicole.kerkenbush@nw.amedd.army.mil

Other Order Entry meetings are held every Wednesday at 0930 in the Cosio Conf Rm (Ground floor next to the Snack Bar). Anyone is invited to come to this meeting with their questions/concerns.

Note: There will be NO meeting on 25 Feb 04

How will 24 hour Chart Checks be done when the physicians start entering their own orders?

Once physicians are entering their own orders there is no need to perform chart checks to review the accuracy of transcribed orders.

Reminders:

- *When a patient is transferred orders must be D/C’d if they should not be continued on the new ward. This should be done by physicians when appropriate. Hospital and ward policy will need to dictate how this process will occur. Remember that just because a patient is transferring, orders may still be pertinent.*
- *If physicians enter their own orders there are only two times when there will be an order without a signature—1) if it is a telephone order that has not been signed and 2) if a medical or CRNA student entered the order. If a medical or CRNA student has entered the order, this should not be acknowledged by an RN until a physician has signed it.*
- *When entering an order there are several ways to enter multiple choices from a pick-list (i.e. D5W and 20KCL):*
 - *Select the first choice—Use the ‘+’ key on the number keypad—Select the next choice*
 - *Double click on the first choice—Double click on the second choice*
 - *Highlight the first choice—Hit ‘Enter’—Use the mouse to go back to the appropriate block—Highlight the second choice—Hit ‘Enter’*

Order Entry Tips

Volume 1, Issue 3

11 February 2004

The 'Sliding Scale Insulin' order set lists a frequency of X1, but it should be PRN.

This order set has now been fixed to reflect the appropriate frequency.

How can I specify an odd medication frequency such as q 76 hours?

These frequencies will be recognized if typed like this:

Q76 HRS Q19 HRS
Q13 HRS Q45 HRS

Sometimes D/Cd orders disappear right away, and sometimes they never seem to disappear. Why is this?

All D/Cd orders should now be set to drop off of the flowsheets at the end of the day. In the Order Entry area D/Cd orders will remain until the next full hour after the D/C time; then they will drop off. To view D/Cd orders after they have dropped off the Order Entry area use the "Create View" (F9) softkey.

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Reminders:

- *If Nursing toggles a medication time to change the schedule, this should be communicated to the Pharmacy so they can ensure the medication is available in the Omnicell. If Pharmacy toggles a medication time, this should be communicated to Nursing as well.*
- *There is now a "Remarks" key (F11) on the MAR. This can be used to communicate information about an order and will be visible right beneath the order name.*
- *When transferring a patient you will no longer see the prompt asking if you want to D/C all orders. Any orders that are not going to be active after the transfer will need to be D/Cd from the OE area. We will be working on the hospital policy regarding transfer orders.*
- *Orders on the flowsheets will reflect the "Start Time" and not the "Order Time". The "Start Time" for orders is the previous full hour prior to the "Order Time".*
- *The "Attending Physician" field on the "Admission Information" note is now editable. The name in this field is reflected on the "Patient Control" screen.*
- *D/Cd orders that have not been acknowledged will have initials in the "ACK" column. These are the initials from the acknowledgement of the original order. If you see "PEND D/C" this order still needs to be acknowledged.*
- *Use the "Copy Order" (F11) function to save you time.*

Order Entry Tips

Volume 1, Issue 2

04 February 2004

Where does the patient allergy information come from?

This information is documented on the "Admission Information" note (found using the F2 soft key). Remember that any allergy information stored in CHCS will come across into this note, but will need to be edited before the decision support software can screen against it.

What category should I use when ordering TPN?

At this time, use the CRYSTALLOID category.

What happens if physicians decide to start using OE before we fully implement?

While we don't want to discourage any physicians from using OE, we need to remember that the printing of orders has not yet been turned on (with the exception of L&D and 3S). It is best if the physician prints a copy of the orders and sends to Pharmacy (I will be putting this word out to the physicians). If this doesn't happen

the staff on the ward can print a copy of the orders by:

Selecting F8—"Print Etc..."

Select F4—"Print Chart"

Type the number that corresponds with "Orders Kardex-Day"

Select F8 "Dispatch Reports"

This form can then be faxed to Pharmacy to alert them that there are new orders.

I accidentally D/C'd all the orders when I transferred a patient. What do I do?

The option to D/C all orders when transferring a patient has been removed. If you do accidentally D/C orders, you can reactivate them using the COPY ORDER function. If you D/C the wrong patient, please call MAJ Kerkenbush or Mr. McCarthy for assistance.

What is the ADT category for?

This category can be used to communicate any patient **A**dmissions, **D**ischarges, or **T**ransfers to the Pharmacy. At this time, these orders do NOT show up on the Treatment flowsheet (we have asked that this be changed). Please use this order category for any admission, discharge or transfer orders.

Reminders:

- *When entering a free-text DIET order you need to type "DIET:" before the order. This will allow the order to show on the diet report.*
- *CAPS LOCK will lock your cursor in place.*
- *If you enter an order with a start time in the future, the order CANNOT be D/C'd until after the start time.*

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Order Entry Tips

Volume 1, Issue 1

28 January 2004

How do I D/C multiple orders at one time?

Multiple orders can be selected by using the “Shift” or “Ctrl” key. To select a block of adjacent orders: select one order using your mouse, hold down the “Shift” key, and then select another order using your mouse. To select a block of NON-adjacent orders: select one order using your mouse, hold down the “Ctrl” key, and then select another order using your mouse.

Why can't I pick the medication that the physician ordered?

If you don't find a drug that you are looking for, please notify MAJ Kerkenbush. She is working with the Pharmacy to ensure our formulary pick-list is accurate. Please remember to look for drugs using their generic name.

Why can't I select the right frequency for my order?

This should now be fixed. Please notify MAJ Kerkenbush if you continue to have problems.

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How can I re-activate an order that I accidentally D/C'd?

Use the “Copy Order” soft key to do this. This function allows you to basically D/C the erroneous D/C, and then it writes a new, accurate order. This is similar to the “Renew Order” function in Order Transcription.

Reminders:

- Remember that there are new categories for orders—“Diet Orders”, “Activity”, “Vital Signs”, “Bedside Labs”, etc.
- When entering a diet please select from the pick-list. If you must free-text type a diet, type “DIET:” before the order. This will allow the order to show on the diet roster.
- ALL users can now D/C orders.
- Allergies must be documented properly on the “Admission Information” note. This note can be found using the F2 soft key.
- When a patient is transferred please D/C all appropriate orders. Note that if new orders have been entered you DO NOT want to D/C these.
- The “Renew Order” function only works for orders with an automatic STOP time.
- RNs ‘Acknowledge’ orders
- Pharmacists ‘Verify’ orders
- If you see boxes ■ on a flowsheet it is because the order text is greater than the space allowed.

MAMC CIS Order Sets

1	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
	2	Order Set Title	Primary POC	Users:														
2S				2N	ICU-W	ICU-E	Cardiac Cath	PACU	OR	L&D	NICU	3S	Peds	5N	6S	6N	7S	7N
3	3S Baby Standard Orders	3S									X		X					
4	5N Admission	5N												X				
5	5N Drug & Alcohol Admission	5N												X				
6	Anesthesia OB C/S Epidural Duramorph	Anesthesia Service									X		X					
7	Anesthesia OB Epidural Orders	Anesthesia Service									X		X					
8	Anesthesia OB Intrathecal Duramorph	Anesthesia Service									X		X					
9	Braden Scale Orders	Nursing Documentation Committee	X		X	X			X		X		X	X	X	X	X	X
10	Falls Protocol	Nursing Documentation Committee	X		X	X					X		X	X	X	X	X	X
11	ICN Standard Admission Orders	NICU										X						
12	ICU Adult Admission	ICU Head Nurse			X	X												
13	ICU Standard Orders	ICU Head Nurse			X	X												
14	Insulin GTT Protocol	ICU Head Nurse			X	X												
15	NICU Nursing Admission Orders	NICU Head Nurse											X					
16	NICU Standard Admission Orders	NICU											X					
17	NICU/ICN Bilirubin Orders	NICU											X					
18	NICU/ICN On-Going Orders	NICU											X					
19	NICU/ICN Sepsis Workup Orders	NICU											X					
20	NICU/ICN Vent/Oxygen Orders	NICU											X					
21	NIO Comfort Measures	Nursing Documentation Committee	X		X	X					X		X	X	X	X	X	X
22	NIO NICU 136 Altered Growth Dev	NICU											X					
23	NIO NICU 137 Comfort	NICU											X					
24	NIO NICU 138 Infection	NICU											X					
25	NIO NICU 139 Alteration In Skin Integrity	NICU											X					
26	NIO NICU 16 Cardiac Status	NICU											X					
27	NIO NICU 31 Gas Exchange	NICU											X					
28	NIO NICU 4 Alteration in F/E/N	NICU											X					
29	NIO NICU 8 Altered Parenting	NICU											X					
30	Restraint Standard Orders	Nursing Documentation Committee											X					
31	Transfusion/Blood Products Orders	Nursing Documentation Committee	X		X	X			X	X	X	X	X		X	X	X	X
32	Amnioinfusion Orders	L&D									X							
33	Post Cath	2S	X		X	X	X	X								X	X	X
34	Post PTCA	2S	X		X	X	X	X								X	X	X
35	Pre-Op Open Heart Surgery 2S	2S	X		X	X	X	X								X	X	X
36	Pre-Cardiac/Pre-PTCA Orders	2S	X		X	X	X	X								X	X	X
37	R/O MI	2S	X		X	X	X	X								X	X	X
38	Open Heart Transfer Orders To 2S	2S	X		X	X	X	X								X	X	X
39	Transfer to 2S	2S	X		X	X	X	X								X	X	X
40	Cardiac	Pediatrics			X	X								X				
41	Cellulitis	Pediatrics			X	X								X				
42	Chemo	Pediatrics			X	X								X				
43	Cleft Palate/Lip Repair	Pediatrics			X	X								X				
44	Diabetes	Pediatrics			X	X								X				
45	Epidural/Intrathecal Opiate Orders-Peds	Pediatrics			X	X								X				
46	Fracture/Ortho	Pediatrics			X	X								X				
47	Gastroenteritis/Dehydration	Pediatrics			X	X								X				
48	General Pediatric Nursing Care	Pediatrics			X	X								X				
49	Peds TPN Orders	Pediatrics			X	X								X				
50	Phototherapy	Pediatrics			X	X								X				
51	Pyelo/UTI	Pediatrics			X	X								X				
52	Respiratory Illness Nursing Care	Pediatrics			X	X								X				
53	Seizure/Head Injury	Pediatrics			X	X								X				
54	Sepsis/Meningitis Nursing Care	Pediatrics			X	X								X				
55	Std Order Admin	Pediatrics			X	X								X				
56	Surgical	Pediatrics			X	X								X				
57	ICN Nursing Admission Orders	NICU											X					
58	L&D Amnioinfusion Orders	L&D									X		X					
59	L&D Cytotec Orders	L&D									X		X					
60	L&D Diabetes in Pregnancy	L&D									X		X					

MAMC CIS Order Sets

1	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
	2	Order Set Title	Primary POC	Users:														
2S				2N	ICU-W	ICU-E	Cardiac Cath	PACU	OR	L&D	NICU	3S	Peds	5N	6S	6N	7S	7N
61	L&D Routine Postpartum	L&D									X		X					
62	L&D Routine Labor	L&D									X		X					
63	L&D Pitocin Augment/Induce	L&D									X		X					
64	L&D PML-MGSO4 Orders	L&D									X		X					
65	L&D Obs D&C	L&D									X		X					
66	L&D IUGR/Discordant	L&D									X		X					
67	L&D IV Hydration	L&D									X		X					
68	L&D Terbutaline	L&D									X		X					
69	L&D IUFD	L&D									X		X					
70	L&D Obs-N/V of Pregnancy	L&D									X		X					
71	L&D Obs -Dysfunctional Labor	L&D									X		X					
72	L&D Obs R/O Preterm Labor	L&D									X		X					
73	L&D Obs-R/o Preeclampsia	L&D									X		X					
74	L&D Obs-S/P MVA	L&D									X		X					
75	L&D Obs-Version	L&D									X		X					
76	L&D PCA	L&D									X		X					
77	L&D Preop C-Section	L&D									X		X					
78	L&D Postop C-Section	L&D									X		X					
79	L&D Pre-Admit/Perop	L&D									X		X					
80	L&D Respiratory Distress In Pregnancy	L&D									X		X					
81	Obstetrical Neuraxial Opiate Orders	Anesthesia Service									X		X					
82	Obstetrical Neuraxial Opiate Orders (Duramorph)	Anesthesia Service									X		X					
83	3S Baby Sepsis Work Up	3S									X		X					
84	3S Hyperemesis	3S									X		X					
85	3S Hypothermia	3S									X		X					
86	3S Photo Therapy Orders	3S									X		X					
87	3S Preterm Labor	3S									X		X					
88	3S Per-Eclampsia	3S									X		X					
89	3S GDMA Standard Orders	3S									X		X					
90	GYN Post-Op Standard Orders	Gyn Service			X	X							X		X	X	X	X
91	Acetaminophen Overdose Orders	ICU Service			X	X												
92	Cisplatin Chemotherapy	Chemotherapy			X	X									X			
93	6South/ACU Standard Orders	??			X	X									X			
94	6South/Obs Unit Standard Orders	??			X	X									X			
95	Ortho Post-Op Orders	Orthopedic Service			X	X		X							X	X	X	X
96	Supplemental Ortho Orders	Orthopedic Service			X	X		X							X	X	X	X
97	PCA Orders (Revised)	??	X		X	X		X							X	X	X	X
98	Epidural/Intrathecal Opiate Orders-Medsurg	Anesthesia Service	X		X	X		X							X	X	X	X
99	Groshong Protocol	??	X		X	X									X	X	X	X
100	Interventional Radiology Orders	Interventional Radiology Service	X		X	X									X	X	X	X
101	Mastectomy/Lumpectomy	??													X	X	X	X
102	New Adult Tube Feeding Orders	??	X		X	X					X		X		X	X	X	X
103	New TPN Orders	??	X		X	X					X		X		X	X	X	X
104	PICC Line Protocol	??	X		X	X		X			X		X		X	X	X	X
105	Port-A-Cath Protocol	??	X		X	X					X		X		X	X	X	X
106	Orthognathics	Oral Surgery			X	X		X							X	X	X	X
107	CIVWA-Ar Protocol Orders	Critical Care CNS			X	X												
108	NIO CABG	Nursing Documentation Committee	X		X	X												
109	NIO Cardiac Catheterization	Nursing Documentation Committee	X		X	X												
110	NIO Permanent Pacemaker	Nursing Documentation Committee	X		X	X												
111	NIO Epidural Management	Nursing Documentation Committee	X		X	X		X			X		X		X	X	X	X
112	NIO Alcohol Abuse	Nursing Documentation Committee	X		X	X					X		X		X	X	X	X
113	Care Plan 124 Skin Integrity	Nursing Documentation Committee	X		X	X		X			X		X	X	X	X	X	X
114	Care Plan 45 Knowledge Deficit	Nursing Documentation Committee	X		X	X		X			X	X	X	X	X	X	X	X
115	Care Plan 9 Anxiety	Nursing Documentation Committee	X		X	X		X			X	X	X	X	X	X	X	X
116	NIO Airborne Precautions	Infection Control Committee	X		X	X					X	X	X	X	X	X	X	X

MAMC CIS Order Sets

1	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
2	Order Set Title	Primary POC	Users:															
			2S	2N	ICU-W	ICU-E	Cardiac Cath	PACU	OR	L&D	NICU	3S	Peds	5N	6S	6N	7S	7N
117	NIO Anxiety 7N	7N																X
118	NIO Braden Score	Nursing Documentation Committee	X		X	X				X		X		X	X	X	X	X
119	NIO Contact Precautions	Infection Control Committee	X		X	X				X	X	X	X	X	X	X	X	X
120	NIO Diabetic Ketoscidosis	Nursing Documentation Committee	X		X	X				X		X		X	X	X	X	X
121	NIO Droplet Precautions	Infection Control Committee	X		X	X				X	X	X	X	X	X	X	X	X
122	NIO DT Precautions	Nursing Documentation Committee	X		X	X				X		X		X	X	X	X	X
123	NIO Elimination Bowel 7N	7N																X
124	NIO Elimination Urinary 7N	7N																X
125	NIO Gastrointestinal Surgery	Nursing Documentation Committee	X		X	X								X	X	X	X	X
126	NIO Hemodialysis Pt/Peritoneal Dialysis	Nursing Documentation Committee	X		X	X								X	X	X	X	X
127	NIO Incentive Spirometry	Nursing Documentation Committee	X		X	X		X		X		X	X	X	X	X	X	X
128	NIO Mobility 7N	7N																X
129	NIO Neurovascular Checks 7N	7N																X
130	NIO Patients in Shock	Nursing Documentation Committee	X		X	X								X	X	X	X	X
131	NIO Post Angiography Care	Nursing Documentation Committee	X		X	X								X	X	X	X	X
132	NIO Pt Undergoing Vascular Surgery	Nursing Documentation Committee	X		X	X		X						X	X	X	X	X
133	NIO Pt Undergoing Adult Cardiac Surgery	Nursing Documentation Committee	X		X	X		X						X	X	X	X	X
134	NIO Pt Undergoing General Surgery	Nursing Documentation Committee	X		X	X		X					X	X	X	X	X	X
135	NIO Pt w/Neurological Dysfunction	Nursing Documentation Committee	X		X	X							X	X	X	X	X	X
136	NIO Pt w/Multi-System Organ Failure	Nursing Documentation Committee	X		X	X							X	X	X	X	X	X
137	NIO Pt w/Neurological Dysfunction Requiring Surgical Intervention	Nursing Documentation Committee	X		X	X		X						X	X	X	X	X
138	NIO Pt w/Respiratory Compromise	Nursing Documentation Committee	X		X	X				X		X	X	X	X	X	X	X
139	NIO S/P Thorocotomy/Pneumothorax w/CT's	Nursing Documentation Committee	X		X	X		X						X	X	X	X	X
140	NIO Standard Precautions	Infection Control Committee	X		X	X				X	X	X	X	X	X	X	X	X
141	NIO Skin Integrity 7N	7N																X
142	ACU Standard Orders	PACU						X										
143	7-North Admit	7N																X