

Virginia Mason Medical Center



PowerChart

Quick Guide

for

Northwest Kidney Center Staff

Karen Griffith
Computer Application Support

Table of Contents
Northwest Kidney Center Cerner Quick Guide



<u>Blood Product Administration:</u>	pages 14-17
How to obtain unit from VMMC Blood Bank	page 14
How to chart Start of Unit	page 15
How to chart Completion of Unit	page 16
How to chart Transfusion Reaction	page 17
<u>Chart (how to open the patient's chart for Orders, MAR and Results)</u>	page 5
<u>Dialysis RN Heparin Orderset: How to Order</u>	pages 30-32
<u>Insert Columns on the PAL</u>	page 34
<u>Lab Specimen charting via Task on PAL and Requisition Printing</u>	page 13
<u>MAR Medication Administration Record</u>	pages 27-29
PRN medication charting	pages 27-29
Documenting Tight or Systemic Heparin	page 33
<u>Multi Patient Task List</u>	pages 3-6
<u>Orders</u>	pages 18-26
Orders Overview	pages 18-19
Placing Orders	pages 20-23
Order Options: Order Info, Cancel/Reorder, Cancel/DC, Void	pages 24-26
<u>Ordering the Dialysis RN Heparin Orderset</u>	pages 30-32
<u>Patient Access List (PAL)</u>	pages 10-12
Insert Columns on the PAL	page 34
PAL Charting via Tasks: Nurse Collect Lab Specimens	page 13
PAL Charting via Tasks: RBC Administration Start & Completion Transfusion Reaction	pages 14-15 page 17
<u>Patient List</u>	pages 7-9
Activating the Master List: Admitted Dialysis Patients	page 7
How to Add Patients to the Admitted Dialysis Patient List	pages 8-9

Multi-Patient Task List

	Name	Location/Room/Bed	Task Status	Task Description	Provider Name	Order Details
<input checked="" type="checkbox"/>	Abdomen, CPOE	10H / 1001 / 01	Pending	Hemodialysis Task	INSTRUCT7, MD	Start 03/09/09 7:12:00, Routine, Duration of dialysis: 4, Blood Flow Rate: As tolera...
<input checked="" type="checkbox"/>	Abdomen, CPOE	10H / 1001 / 01	Pending	Peritoneal Dialysis Task	INSTRUCT7, MD	Start 03/09/09 7:20:00, Dwell Volume 2000 mL, # of Exchanges 5, Leave Empty, ...
<input checked="" type="checkbox"/>	Basal, CPOE A	10H / 1002 / 01	Pending	Peritoneal Dialysis Task	INSTRUCT7, MD	Start 03/09/09 7:25:00, Dwell Volume 2000 mL, # of Exchanges 5, Daytime Fill 15...
<input checked="" type="checkbox"/>	Cataract, CPOE S	10H / 1003 / 01	Pending	Peritoneal Dialysis Task	INSTRUCT7, MD	Start 03/09/09 7:31:00, Dwell Volume 2000 mL, # of Exchanges 5, Leave Empty, ...
<input checked="" type="checkbox"/>	Gallbladder, CPOE	10H / 1064 / 01	Pending	Hemodialysis Task	INSTRUCT7, MD	Start 03/09/09 7:34:00, Routine, Duration of dialysis: 4, Blood Flow Rate: As tolera...
<input checked="" type="checkbox"/>	Gallbladder, CPOE	10H / 1064 / 01	Pending	Peritoneal Dialysis Task	INSTRUCT7, MD	Start 03/09/09 7:37:00, Dwell Volume 2000 mL, # of Exchanges 5, Daytime Fill 15...
<input checked="" type="checkbox"/>	Hammertoe, CPOE R	10H / 1056 / 01	Pending	Hemodialysis Task	INSTRUCT7, MD	Start 03/09/09 7:41:00, Routine, Duration of dialysis: 4, Blood Flow Rate: As tolera...

1. The **Multi-Patient Task List** is the opening screen when a Dialysis RN logs onto Cerner PowerChart. All newly admitted dialysis patient will display here along with patients with new dialysis orders.
2. The **Patient Access List** is a view of patients by floor or custom view and contains order notifications, specimen collection tasks and blood administration tasks.
3. The **Patient List** is a customized view of patients: Admitted Dialysis Patients maintained by the Dialysis staff.
4. Links to **V-Net (Internet)** and **Clinical Applications** are built into the toolbar.

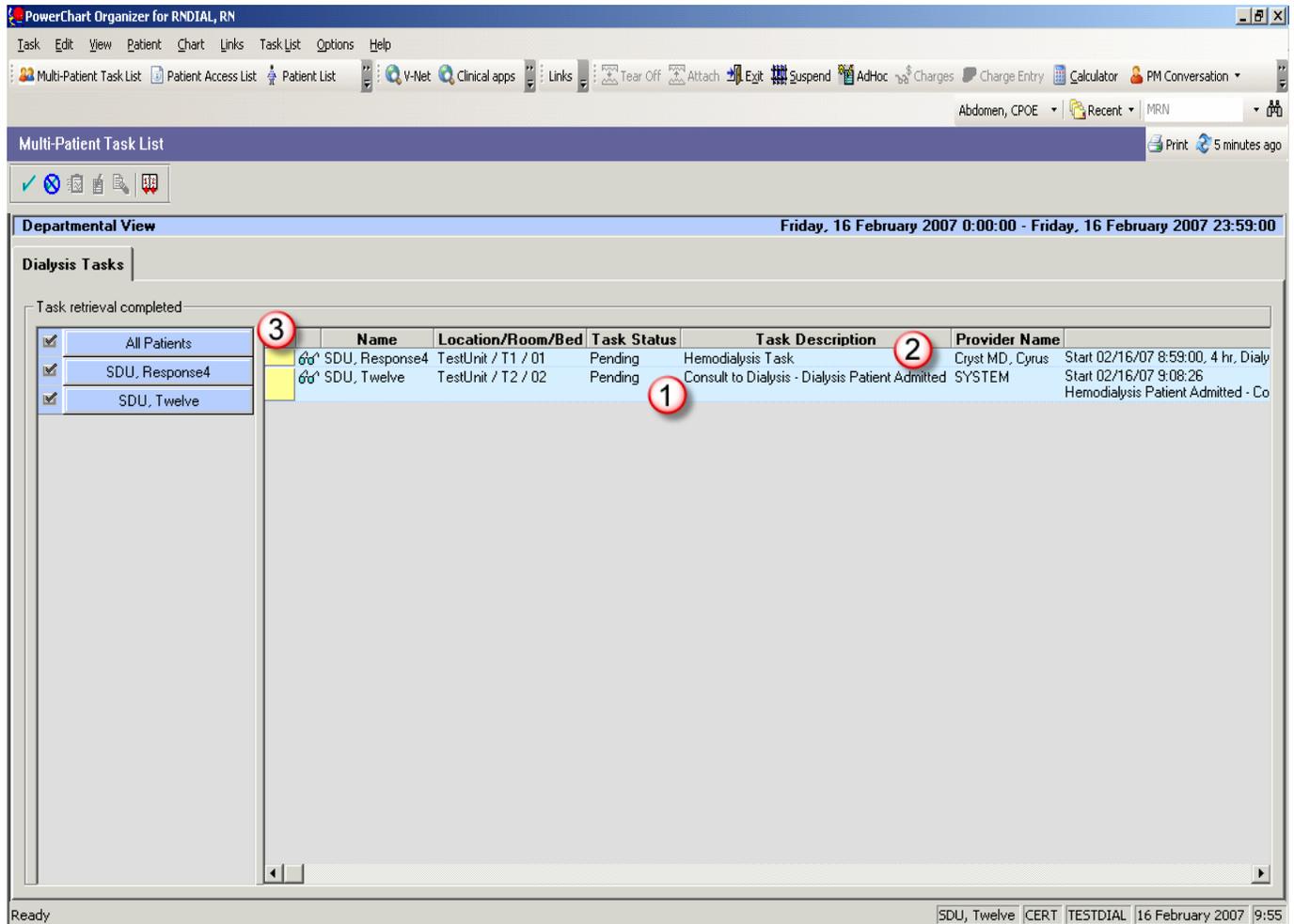
5. **Exit button**  will **log you off** of your Cerner session and present the log in window for the next user
6. **Suspend button**  will secure your Cerner PowerChart session and allow others to also log onto the same computer you are using.

To restore your session *click* on the secured session  on the Task bar at the bottom of the computer screen and type in your password.

7. Once a patient has been selected on a list, *click* the drop down arrow to the right of the name  to open a list of specific areas of the patient's chart.

8. The **Refresh button**  displays how long ago information was refreshed to the screen. *Click* to reset to zero minutes and see the most current information on the Task List.

Multi Patient Task List: Notification window for all newly admitted patients and Hemodialysis and Peritoneal Dialysis orders



1. The **Task List** will display a **Task Description** called **Consult to Dialysis** after the RN's on the floor have documented that the patient receives Hemodialysis or Peritoneal Dialysis upon admission.
2. The **Task List** also displays a **Task Description** called **Hemodialysis or Peritoneal Dialysis Task** which is the notification that the MD has written the orders for the procedure.

The details of this order can be viewed here by *right clicking* on the **Task Description** and selecting **ORDER INFO**.

3. The task can be **removed** from the list by *clicking* in the **yellow** box after the procedure has been completed. After *clicking Refresh* the patient will be removed from the list.

TASK COMPLETED BY MISTAKE?

To **re-display** a completed task go to **OPTIONS**, on the top menu, *click* on **TASK DISPLAY** and check Completed box and OK and all completed tasks will display.

Opening the Patient Chart: How to access the Patient's Clinical Information/Orders and MAR

From any patient list, **single click on the patient name** and **click the drop down arrow next to the patient's name on the Toolbar**

Form Browser contains any forms you have charted on. Go here to modify.

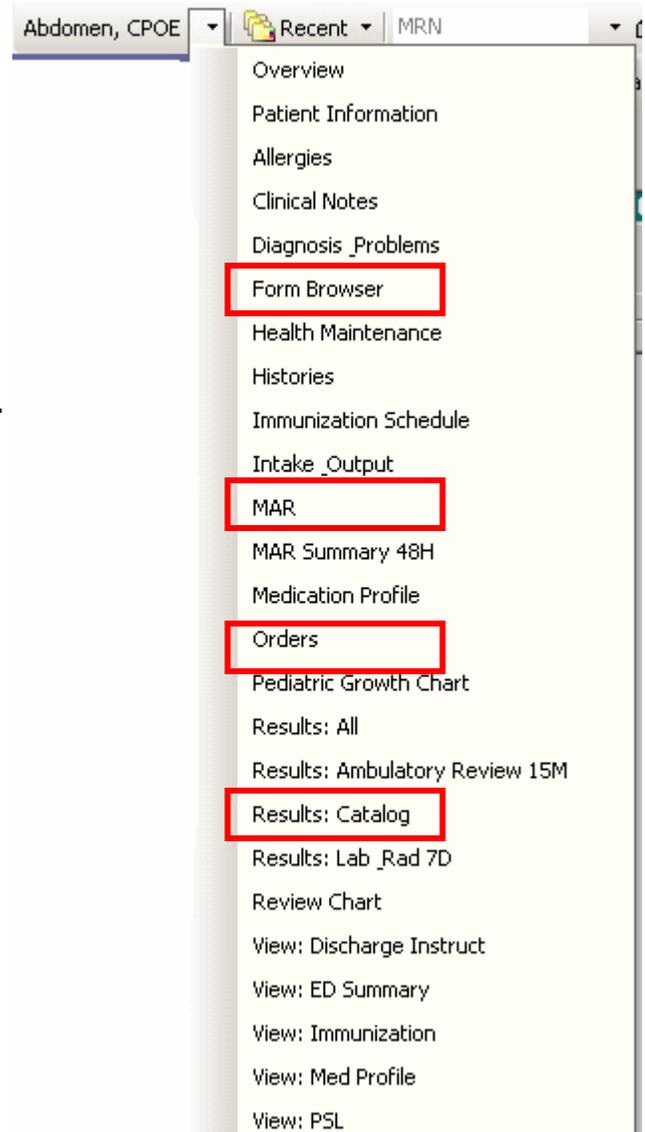
MAR is the Medication Administration Record, chart all administered meds here.

Orders contains all orders for your patient:

The Hemodialysis orders will display in the **Ancillary Depts. section.**

Peritoneal Dialysis solutions will display in the **IV Solutions section.**

Results Catalog: contains all flowsheets displaying patient information.



Viewing Orders seen on the Multi Patient Task List

Abdomen, CPOE - 99031405002 Opened by RNDIAL, RN

Task Edit View Patient Chart Links Options Current Add Help

Multi-Patient Task List Patient Access List Patient List V-Net Clinical apps Links Tear Off Attach Exit Suspend AdHoc Charges Charge Entry Calculator PM Conversation

Abdomen, CPOE x

Abdomen, CPOE DOB:02/02/35 Age:74 years Sex:Female MRN:99031405002 Loc:10H; 1001; 01

Allergies: No Known Allergies IQHealth: No Fin#:77731405002 Inpatient Medical: [09/01/07 7:01 - <No - Discharge date>]

Menu - All

- Overview
- Patient Information
- Allergies + Add
- Clinical Notes
- Diagnosis & Problems
- Form Browser
- Health Maintenance
- Histories
- Immunization Schedule
- Intake & Output
- MAR
- MAR Summary 48H
- Medication Profile
- Orders + Add
- Pediatric Growth Chart
- Results: All
- Results: Ambulatory Re...
- Results: Catalog
- Results: Lab & Rad 7D
- Review Chart
- View: Discharge Instruct
- View: ED Summary
- View: Immunization
- View: Med Profile
- View: PSL

Orders

+ Add

Display: 1_Standard/View Customize View

	Order Name	Status	Details
Ancillary Depts.			
<input checked="" type="checkbox"/>	66 ⁺ Peritoneal Dialysis	Ordered	Start 03/09/09 7:20:00, Dwell Volume 2000 mL, # of Exchanges 5, Leave Empty, Note try for net of 100
<input checked="" type="checkbox"/>	66 ⁺ Hemodialysis	Ordered	Start 03/09/09 7:12:00, Routine, Duration of dialysis: 4, Blood Flow Rate: As tolerated, Ultrafiltration goal: Patient to Dry Wt., Pt's Dry Wt: 83 kg, Dialysate Flow Rate: 500 mL/minute, D...

1. Click on **Ancillary Depts.** to see **Hemodialysis or Peritoneal Dialysis Orders**

Once you have opened the patient chart you have access to all parts of the chart via the menu on the left side of the window.

Patient List: Activating Master List of all Admitted Dialysis Patients

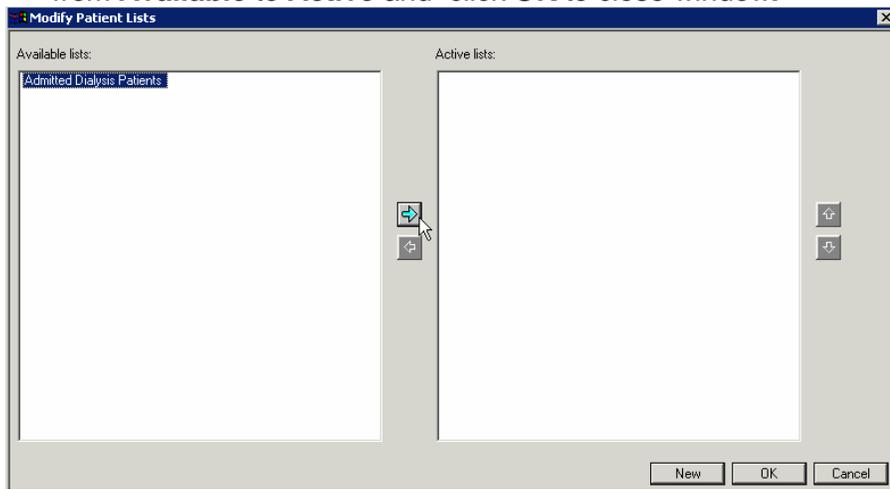
1. Click **Patient List** on the toolbar.



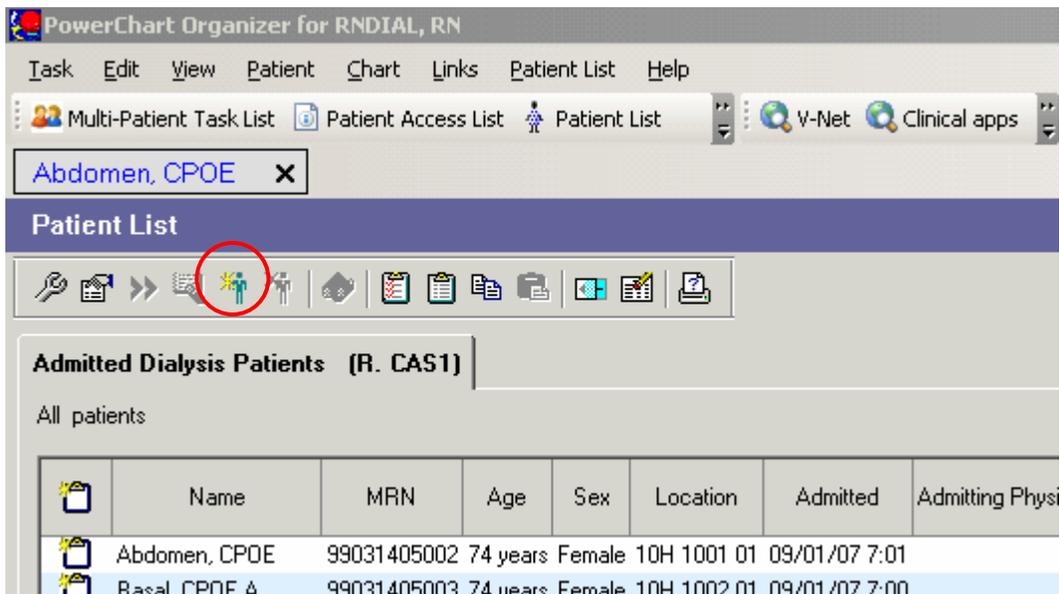
2. Click the wrench icon to open **List Maintenance**.



3. Select **Admitted Dialysis Patients** on the left and click the blue arrow in the **middle** to move the list from **Available** to **Active** and click **OK** to close window.



Patient List and How to Add Patients



PowerChart Organizer for RNDIAL, RN

Task Edit View Patient Chart Links Patient List Help

Multi-Patient Task List Patient Access List Patient List V-Net Clinical apps

Abdomen, CPOE

Patient List

Admitted Dialysis Patients (R. CAS1)

All patients

Name	MRN	Age	Sex	Location	Admitted	Admitting Physi
Abdomen, CPOE	99031405002	74 years	Female	10H 1001 01	09/01/07 7:01	
Basal CPOE A	99031405003	74 years	Female	10H 1002 01	09/01/07 7:00	



1. To **add patients** to this list *click Add Patient icon.*

Patient Search will open

2. Click the drop down arrow to the right of **Location** at the bottom of the list.

The screenshot shows a 'Patient Search' window with a search form on the left and a results table on the right. The search form includes fields for MRN, Name, Middle Name, FIN NBR, SSN, Birth Date, and Gender. The 'Location' field is a dropdown menu currently set to 'TestUnit', with a red circle '2' next to it. Below the form are 'Search' and 'Reset' buttons, with a red circle '3' next to the 'Search' button. The results table has columns for Name, Birth Date, MRN, FIN NBR, Enc Status, Enc Type, Attending Physician, Reg Date, and Disch Date. The first row is highlighted in blue and has a red circle '4' next to the patient's name. The second row is also highlighted in blue and has a red circle '5' next to the 'Enc Status' column. At the bottom of the window are 'OK', 'Cancel', 'Preview...', and 'Add Person' buttons, with a red circle '6' next to the 'OK' button.

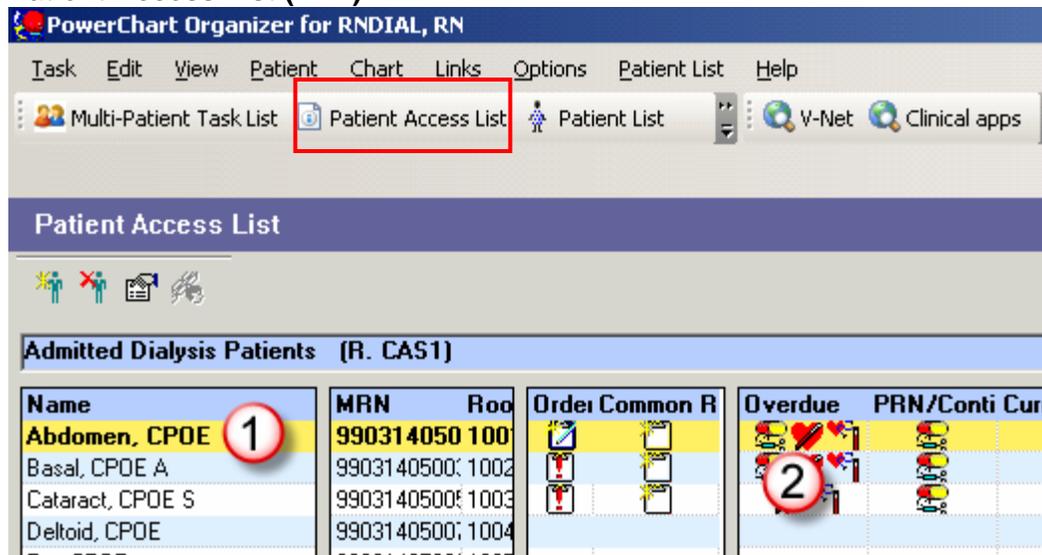
Name	Birth Date	MRN
CALENTINE, JEREMY D	05/16/96	TMRN00001
CISTEST, ANGELA	04/14/54	9012902
CISTEST, PORTIA	03/08/34	6026253
Co-Sign, Sally	01/30/63	CO1234
GRIMES, LAURA R	02/26/85	1834191
Order-Format, Changes	12/29/29	M1206271
Ruletest, Upgrade		RT99887766
SDU, Five	09/16/75	9114040005
SDU, Four	01/18/77	9114040004; (4040004)
SDU, Fourteen	04/14/40	9114041014; (4041014)

FIN NBR	Enc Status	Enc Type	Attending Physician	Reg Date	Disch Date
99999881	Active	Inpatient Surgical	Test MD, Bobbi	08/11/2006 0:03	

3. Click **Search**.
4. Click **Patient's Name**.
5. Click on the **Encounter** (inpatient visit).
6. Click **OK**.

Patient Access List (PAL) Overview

Patient Access List (PAL):



1. *Single click* on **Patient's name** and then **click** on the **icons** in the **Current** or **Overdue** category to see the specimens that need collecting or any Blood Administration tasks that need to be completed by the RN.
2. **The following describes the icons:**

The **Heart icon**  will display to notify the RN that **patient care** tasks are due. This is where the **Start and Completion of Blood** forms will be listed.

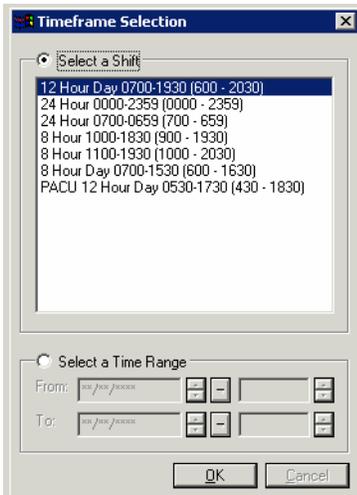
The **Test Tube icon**  will display to notify the RN that the patient has **laboratory specimens** that the RN needs to collect.

The **medication capsule icon**  will display if the patient has any medications due. **These are charted on the MAR.**

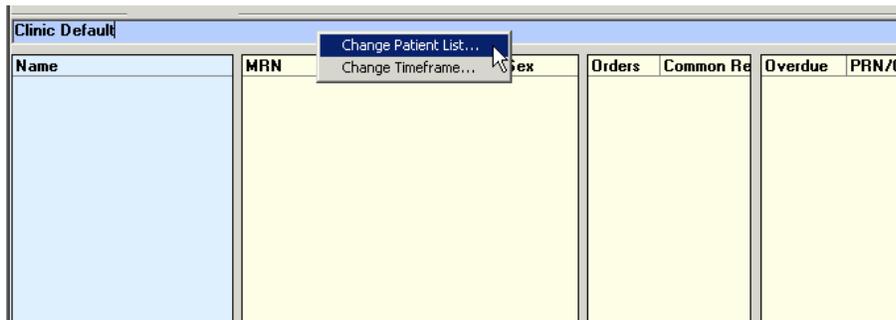
Patient Access List (PAL) Charting Nurse Collected Specimens

RN goes to the Patient Access List (PAL) to chart that the Nurse Collect Laboratory Specimens that have been collected.

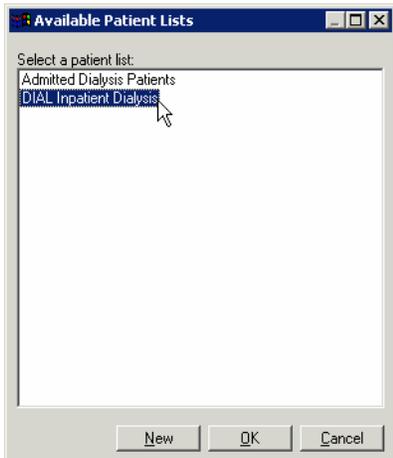
1. Select **Patient Access List** off the Toolbar.
2. **Select a shift** that covers the time you are working.



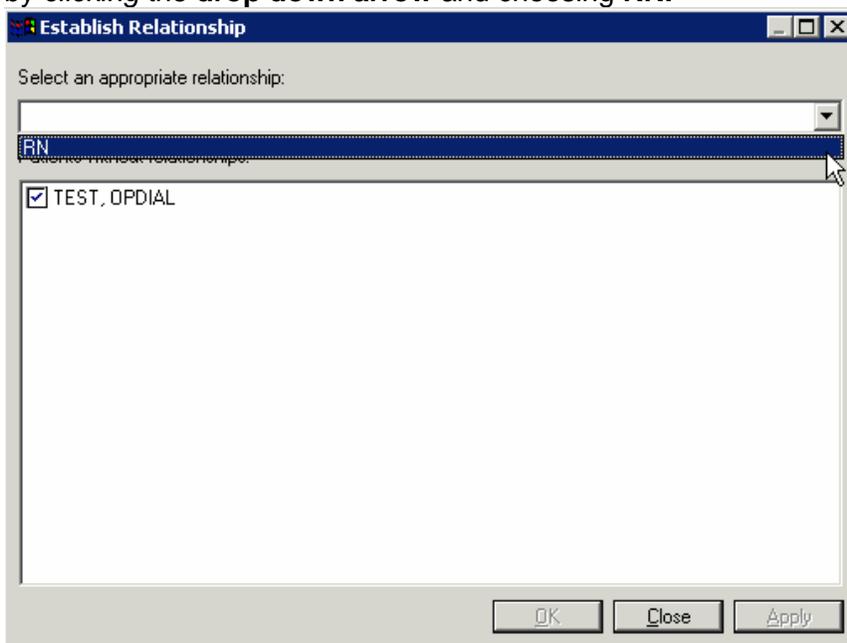
3. *Right click* on the **blue bar** to **Change Patient List** and select with left *click*.



4. Select **DIAL Inpatient Dialysis** or **Admitted Dialysis Patients**.



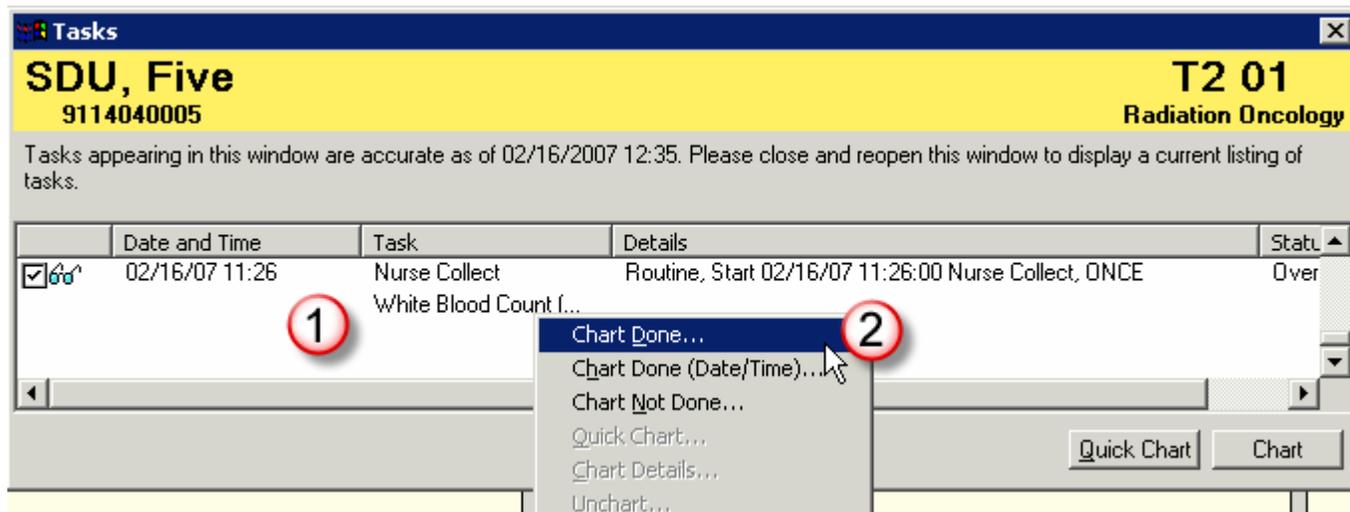
5. **Establish a relationship** with those patients in the 7th floor Dialysis Unit by *clicking* the **drop down arrow** and choosing **RN**.



6. *Click* **OK**.

Nurse Collect Task on PAL

Important: the patient must be in the DIAL Inpatient Dialysis Unit to print the requisition in your Dialysis Unit. If the patient is not in this location, call their “home” nursing unit and ask the PFC to transfer the patient to you.



We recommend that the RN never use **Quick Chart or Chart** as this affects all task not just the one you are completing.

1. **Right click**

Selecting **Chart Done** on the nurse collect task will complete the task and fire an order to the lab.

Selecting **Chart Done (Date/Time)** allows you to change the time the specimen was collected and/or the name of the person collecting the specimen

Selecting **Chart Not Done** cancels the order and can be used if the specimen is not going to be collected, for example a Duplicate order.

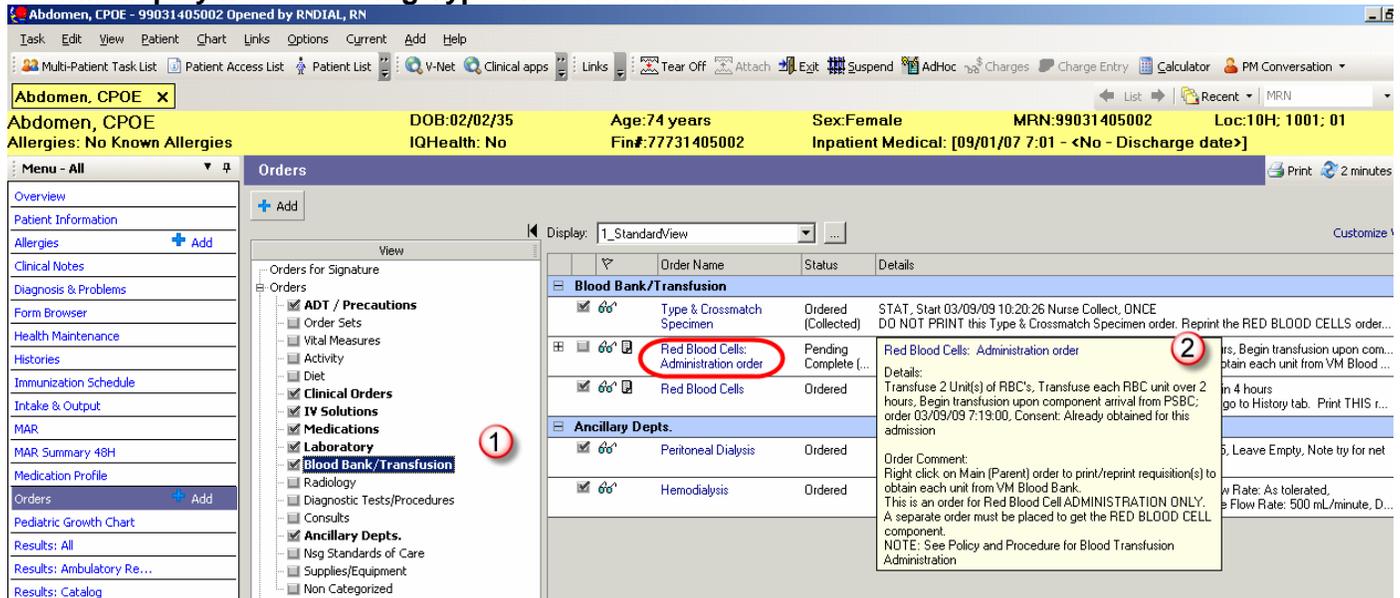
2. **Chart Done** or **Chart Done Date and Time** will print the requisition that goes with the specimen to the lab
3. Call **Transport (ITT)** to have the specimen picked up and delivered to the laboratory ext **61322**.

Patient Access List (PAL) Charting Blood Transfusions

Chart from the Heart: Patient Care Tasks

How to obtain Blood from Blood Bank:

1. Go to **Blood Bank/Transfusion Section of Power Orders** NOTE: ALL associated blood orders will display here including Type and Cross match.



Abdomen, CPOE - 99031405002 Opened by RNDIAL, RN

Abdomen, CPOE DOB:02/02/35 Age:74 years Sex:Female MRN:99031405002 Loc:10H: 1001: 01
Allergies: No Known Allergies IQHealth: No Fin#:77731 405002 Inpatient Medical: [09/01/07 7:01 - <No - Discharge date>]

Menu - All Orders

Orders for Signature

Order Name	Status	Details
Blood Bank/Transfusion		
Type & Crossmatch Specimen	Ordered (Collected)	STAT, Start 03/09/09 10:20:26 Nurse Collect, ONCE DO NOT PRINT this Type & Crossmatch Specimen order. Reprint the RED BLOOD CELLS order...
Red Blood Cells: Administration order	Pending Complete [...]	Red Blood Cells: Administration order Details: Transfuse 2 Unit(s) of RBC's, Transfuse each RBC unit over 2 hours. Begin transfusion upon component arrival from PSBC; order 03/09/09 7:19:00. Consent: Already obtained for this admission
Red Blood Cells	Ordered	Transfuse 2 Unit(s) of RBC's, Transfuse each RBC unit over 2 hours. Begin transfusion upon component arrival from PSBC; order 03/09/09 7:19:00. Consent: Already obtained for this admission
Ancillary Depts.		
Peritoneal Dialysis	Ordered	Order Comment: Right click on Main (Parent) order to print/reprint requisition(s) to obtain each unit from VM Blood Bank. This is an order for Red Blood Cell ADMINISTRATION ONLY. A separate order must be placed to get the RED BLOOD CELL component. NOTE: See Policy and Procedure for Blood Transfusion Administration
Hemodialysis	Ordered	

2. The RBC Administration order states **Right click on Main Parent Order to print/reprint this requisition to obtain each unit from VM Blood Bank.**

Call ITT and ask them to come to the unit to get the requisition for the blood you need. This requisition is given to ITT to obtain the blood from the VMBC blood bank and they will deliver it back to the unit.

3. To print a requisition to draw a **Type and Crossmatch specimen**; Right click on the **Red Blood Cell order.**

Blood Bank/Transfusion			
<input checked="" type="checkbox"/>	Type & Crossmatch Specimen	Ordered (Collected)	STAT, Start 03/09/09 10:20:26 Nurse Collect, ONCE DO NOT PRINT this Type & Crossmatch Specimen order. Reprint
<input checked="" type="checkbox"/>	Red Blood Cells: Administration order	Pending Complete [...]	Transfuse 2 Unit(s) of RBC's, Transfuse each RBC unit over 2 hours. Right click on Main (Parent) order to print/reprint requisition(s) to o
<input checked="" type="checkbox"/>	Red Blood Cells	Ordered	<p>Red Blood Cells</p> <p>Details: 2 units, CMV Neg - CMV "safe" may be substituted, Routine - within 4 hours</p> <p>Order Comment: To view Order details - Right click on Order, select Order Info and go to History tab.</p> <p>Print THIS requisition to take to the bedside when collecting specimen</p> <p>This is an order to OBTAIN Red Blood Cells from Puget Sound Blood Center. Red Blood Cell Administration order(s) must be entered separately.</p>

How to Chart Blood: Start and Completion

On the Patient Access List look for the two tasks: RBC Start and Complete Transfusion under a Heart icon: (Overdue or Current Time column)

The order to give blood generates two tasks for each unit of blood to be transfused:

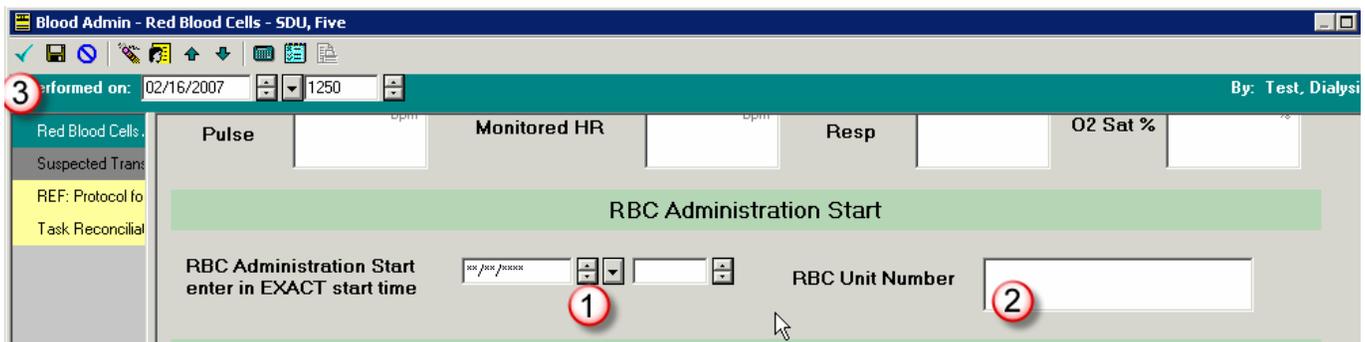
Start a unit or RBC's and **Complete** a unit of RBC's.

How To Start a Unit of RBC's:



1. *Right click* and select **Chart Details** on the task: **“START a unit of RBC’s”**:

This task launches the **Blood Admin-Red Blood Cells Form**



Dialysis RN will chart **Vital Signs** on paper (within 15 minutes) before the blood unit is hung and on **Cerner** chart the **RBC Administration Start information** which includes the **RBC Unit number of the blood**.

1. **Chart the Date and Time** the blood administration began: (Type “T” for today’s date to auto-populate and “N” for now in time field, or type in the actual time (24 HOUR, IE 1400))
2. **Chart Unit Number:**
3. **Sign Charting**, by *clicking* the green check mark in top left corner.

How To Complete a Unit of RBC's:

1. *Right click* and select **Chart Details** on the "Complete a unit of RBC's":

This task launches the same **Blood Admin-Red Blood Cells Form**

Blood Admin - Red Blood Cells - SDU, Five

Performed on: 02/16/2007 12:50 By: Test, Dialysis

Pulse Monitored HR Resp O2 Sat %

Red Blood Cells

Suspected Transfusion

REF: Protocol for Task Reconciliation

RBC Administration Start

RBC Administration Start enter in EXACT start time RBC Unit Number

RBC Administration Patient Observations

Transfusion WNL Yes No

RBC Administration Completion

RBC Transfusion Completed? Yes No **1**

Reason Transfusion Not Completed

IV infiltration

Possible transfusion reaction

Unit expired

Other:

Time Completed/Stopped **2**

+ Red Blood Cells (mL) mL **3**

This will update I & O and Crit Measures; if you have already entered volume for this transfusion on those forms, DO NOT re-enter you could "double count" the volume.

NOTE: remember to order a Post Transfusion HCT, if applicable (if/Then order exists)

Suspect Transfusion Reaction if following signs/ symptoms are present during or up to 6 hours post administration.

FEVER, SHAKING CHILLS, FLUSHING, HIVES, URTICARIA, PERIORBITAL EDEMA, WHEEZES, DIFFICULTY BREATHING, PERSISTENT SEVERE HYPOXIA, ANAPHYLAXIS, NAUSEA/ VOMITING, BACK PAIN, CHEST PAIN, DARK or RED URINE.

Document the following:

1. **Transfusion Completed**
2. **Time completed/Stopped**
3. **Volume administered**

How To Chart a Transfusion Reaction:

If RBC Transfusion Not Completed: due to Possible Transfusion Reaction the following page will open:

5 Suspected Transfusion Reaction - SDU, Five

5 Suspected Transfusion Reaction

1 Suspected Transfusion Reaction Management

- IV maintained with normal saline
- Physician notified
- Administration stopped
- Vital Signs checked frequently
- Two (2) EDTA purple top blood specimens collected
- PSBC "Report of Suspected Transfusion Reaction" completed
- Blood bag, tubing, specimens, Report sent to Blood Bank
- Unit number, ABO-Rh on label matches w/Transfusion Report
- Patient name, MRN on ID Band matches w/ Transfusion Report
- Other:

2 IF REACTION SUSPECTED: perform and document following activities

1. Stop Administration
2. Notify Patient's MD
3. Maintain IV with 0.9% NaCl (Normal Saline)
4. Continue to Monitor VS frequently
5. Perform "Clerical" Double Checks
 - a) Patient name & MRN on Transfusion Report match Pt's ID band
 - b) Component unit number and ABO-Rh on Transfusion Report match with blood component unit label.
6. Collect TWO (2) EDTA (purple top) blood specimens
Note: no need to collect urine specimen.
7. Complete pink Puget Sound Blood Center "Report of Suspected Transfusion Reaction" (Note: PSBC form # 99-32007- available from VMCC Blood Bank ext 57257.)
8. If Transfusion is Discontinued; return to Blood Bank
 - o Blood bag
 - o Tubing set
 - o Attached Fluids
 - o Two EDTA Blood Specimen tubes
 - o PSBC "Report of Suspected Transfusion Reaction"

Refer to Clinical Policy and Procedure Section 7: "Blood Components: Suspected Transfusion Reaction" if needed.

3 Suspected Transfusion Reaction Symptoms

- Wheezes
- Periorbital edema
- Fever
- Anaphylaxis
- Nausea and vomiting
- Urticaria
- Shaking Chills
- Flushing or Hives
- Persistent, severe hypoxia
- Back or Chest pain
- Dark or Red urine
- Difficulty Breathing
- Other:

4 Suspected Transfusion Reaction Comments

1. Chart: **Reaction Management** need to check each box
2. Note **Red Text** lists actions that need to occur
3. **Complete** Suspected Transfusion Reaction Symptoms check box
4. Additional space is available for comments
5. Click the "**Hook Back**" arrow  to return to front page and to sign charting.

Orders Overview

Abdomen, CPOE DOB:02/02/35 Age:74 years Sex:Female MRN:99031405002 Loc:10H: 1001: 01
 Allergies: No Known Allergies IQHealth: No Fin#:77731405002 Inpatient Medical: [09/01/07 7:01 - <No - Discharge date>]

1. View: The View section is a list of all Order Categories

- ◆ Click on a **Category**, example: Blood Bank/Transfusion to auto-scroll that category to the top of the display.
- ◆ Caution: **Taking checkmarks out** of the Order Category will **hide** those orders on the screen until you *click* the checkmark box again.

2. Reference Text Reference text has been built into many orders.

- ◆ Look at the **Resuscitation Status** order in **ADT/Precautions** category
- ◆ To view **Reference Text** Rest your mouse on the **Reference Text** icon
- ◆ Click the link: “ [click to see the Reference Text Information](#)” to open the Reference Materials
- ◆ Click internal Link to open the Policy
- ◆ Click X in top right corner to close policy
- ◆ Click **OK** to close the **Reference Text** dialog

3. Order Profile

The right side of the window displaying orders and their details is called the Order Profile.

Order Status will default to view only ACTIVE orders with a Status of Ordered. (**1_Standard View**) To see other statuses change the display to **All Orders (All Statuses)**.

- ◆ **Processing** - displays once an order is signed until the window is Refreshed.
- ◆ **Ordered** - displays until the order has been completed, discontinued or cancelled.
- ◆ **Completed** - displays when the order is complete.
- ◆ **Discontinued** - identifies an order that has been administered or completed once and then stopped.
- ◆ **Canceled** - identifies an order that is stopped prior to initial administration or completion.

Order Details display the information entered in **Order Details** and **Order Comments** when the order was written.

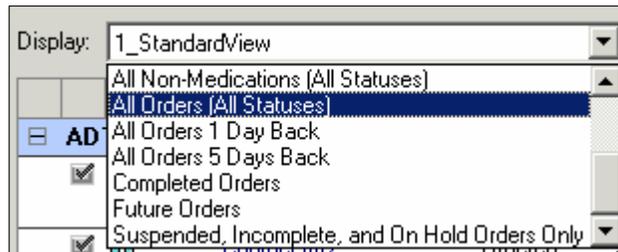
4. Orders Filters

The default for the **Orders Display** filter is “1_Standard View”. This was set by VMCC to display **only ACTIVE, Pending, and Medical Student’s Orders**.

Orders Display can be filtered to display in a variety of ways.

To change the order filter

click the filter drop down arrow and *select* a preferred option.



Placing Orders:

Abdomen, CPOE - 99031405002 Opened by RNDIAL, RN

Task Edit View Patient Chart Links Options Current Add Help

Multi-Patient Task List Patient Access List Patient List W-Net Clinical apps Links Tear Off At

Abdomen, CPOE X

Abdomen, CPOE DOB:02/02/35 Age:74 years
Allergies: No Known Allergies IQHealth: No Fin#:77731405002

Menu - All Overview Patient Information Allergies + Add Clinical Notes Diagnosis & Problems Form Browser Health Maintenance Histories Immunization Schedule Intake & Output

Orders + Add

Orders for Signature

- Orders
 - ADT / Precautions
 - Order Sets
 - Vital Measures
 - Activity
 - Diet
 - Clinical Orders
 - TV Solutions

Display: All Orders (All Statuses)

	Order Name
ADT / Precautions	
RESUSCITATION STATUS-FULL	
Contact MD	
Diagnosis	
Consulting Physi	
Contact Physi	

1. Click the **Add Order** icon  to open up the **Add Order** catalog.

Nerve, Nick - Add Order

Nerve, Nick Age:28 years Sex:Male MRN:9903140... Location: 17H...
Allergies: Latex DOB:01/16/80 Fin Number: ... Inpatient 777...

Find: HCT Search Starts with Type: Inpatient

Folder: Contains Starts with At location: VM Downtow

HCT
HCT (If/Then, RN to order)
HCT Body Fluid

Nerve, Nick - 99031405208 Done

2. Type in the full name or part of the name of the order and let the catalog search.
3. You can choose to search by what the order 'Starts with' or a word the order 'Contains'.
4. Left *click* on the order you need to place.

Ordering Physician and Communication Types:

When an RN places orders the **Ordering Physician** and the **Communication Type** must be identified.

This box will appear after selecting the order:.

1. Type in the **LAST NAME** of the MD authorizing the order placement. The field will auto complete or state: "Multiple Matches". *click* the binoculars icon if that occurs.

2. Select the **Communication Type**; see definitions below:

- **MD Sign / Phone (GOES TO PROVIDER FOR CO-SIGN)**
For orders a provider phones in when no computer is available
- **MD Sign / Verbal (GOES TO PROVIDER FOR CO-SIGN)**
For orders that are given verbally, such as during a MET event or procedure

- **Scope of Care (DOES NOT GO TO PROVIDER FOR CO-SIGN)**

For orders that are within the user's scope of care. This includes orders covered by policy (i.e. Nursing Order policy) as well as those related to "if / then" orders a provider has placed. These do not require provider co-signature.

- **MD Sign / Protocol (GOES TO PROVIDER FOR CO-SIGN)**

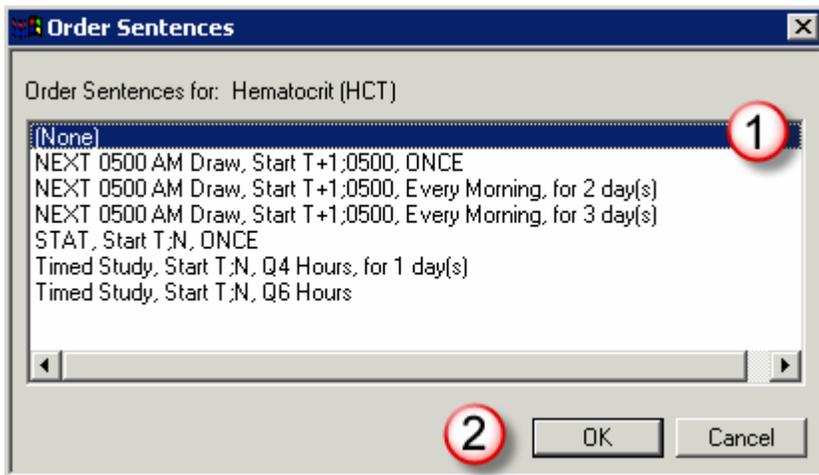
For orders that have a written protocol in place, e.g. Emergency Department, Dialysis, etc.

3. OK

The screenshot shows a window titled "Ordering Physician". It has three main sections: "Physician name" with a text box containing "Cryst MD, Cyrus" and a binoculars icon; "Order Date/Time" with two date/time pickers showing "02/22/07" and "1226"; and "Communication type" with a dropdown menu. The dropdown menu is open, showing four options: "MD Sign / Phone" (which is highlighted), "MD Sign / Verbal", "MD Sign/ Protocol", and "Scope of Care". At the bottom of the window are "OK" and "Cancel" buttons.

Note: If a Communication Type is not selected an error message will appear stating "All fields must have valid values"

Orders: Selecting the Order Sentence and completing the Details

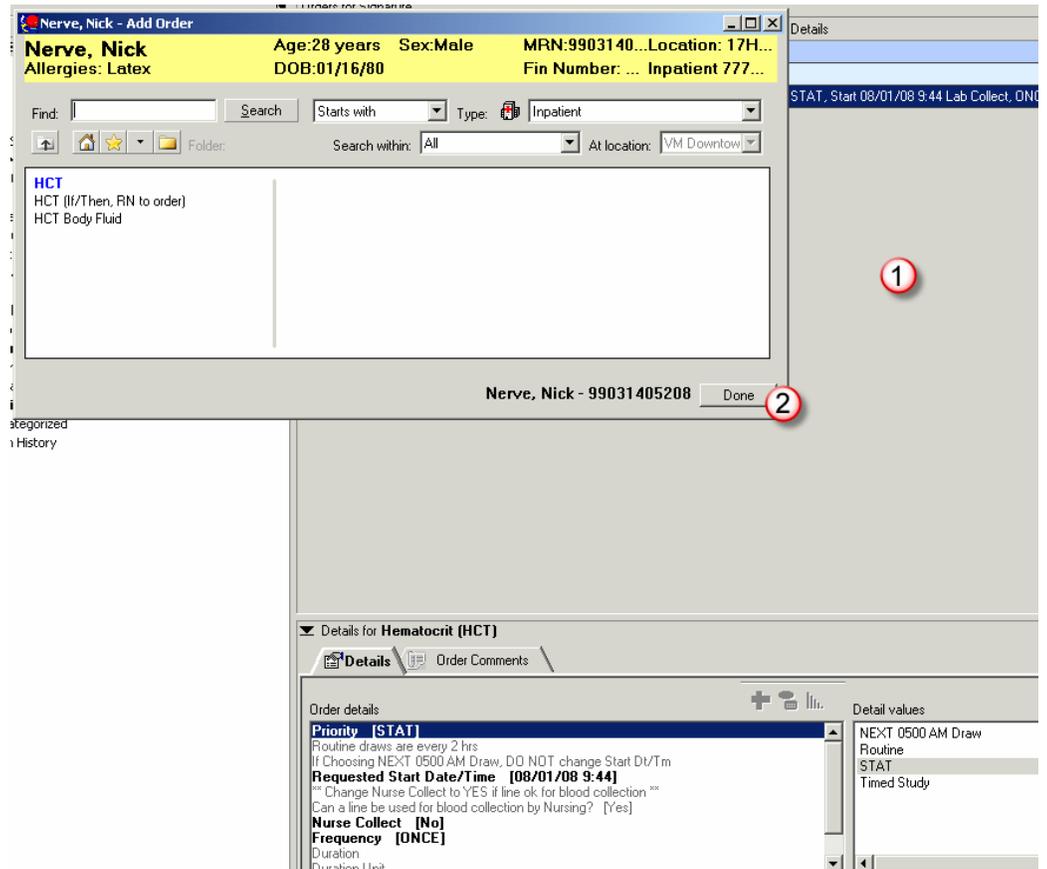


Order Sentences will appear for all Laboratory and Medication Orders.

1. Select **None** if the pre-built sentences do not meet your needs.
2. Click **OK** after making choice.

Orders: Completing Order Details

1. The **selected order** will **appear behind the Add Order Catalog**.



2. Click **Done** to close catalog and review and modify any details of the selected order at the bottom of the screen. (See next page)

Order Detail Completion and Signing Orders

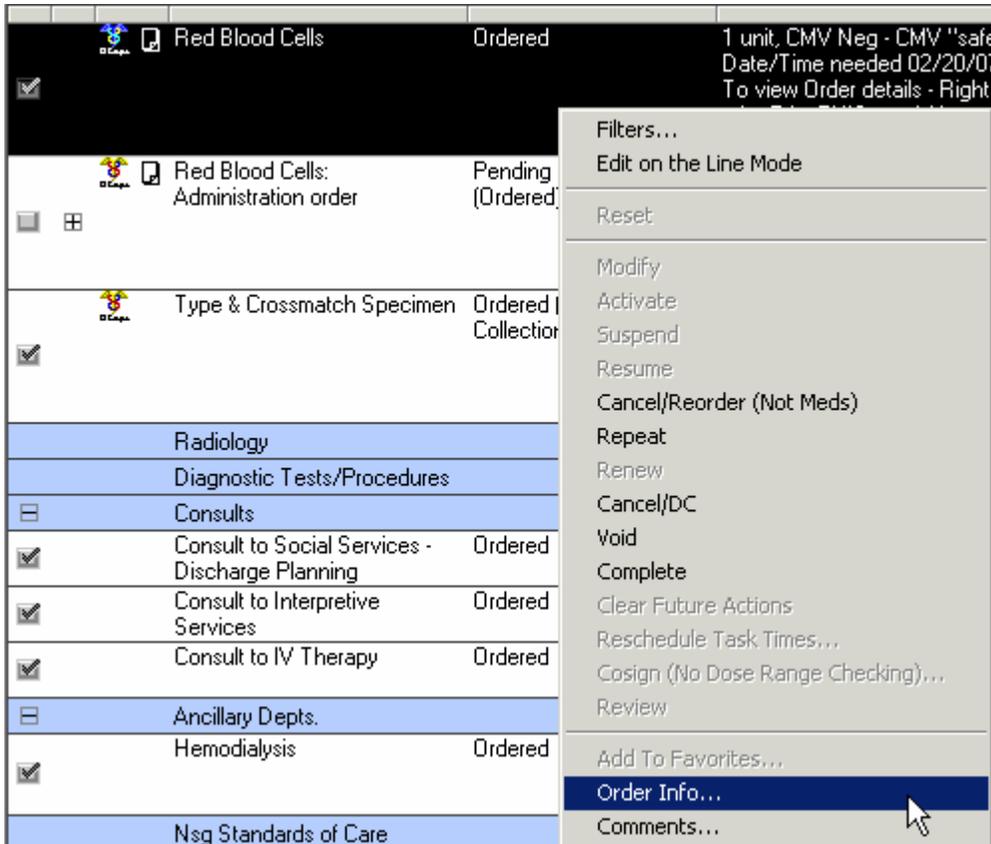
1. Make any changes to order details by selecting the Detail on the left and **making the appropriate changes on the right side**. In this example we are changing the Nurse Collection of the specimen from **NO** (phlebotomist would draw the patient) **to Yes** so the RN can draw the specimen.
2. Note changes on the order line in the section.
3. **“Sign”** to complete the order placement.

Refresh ‘Minutes Ago button’:

1. *Click* refresh ‘Minutes ago’ button to see the order in the **Ordered Status**.
2. If the order is in the **Processing status** you cannot make any changes to the order. (See **Order Options** next page)

Order Options via right click: Order Info:

1. **Order Info:** To display additional information that may have been cut off on the order display as indicated by ...
2. Click the Order Name: **Blue text** or
3. *Right click* on the **order** for a menu that offers **Order Info**, and select with *left click*.



SDU, Response4 - Order Information for: Red Blood Cells

Task View Help

 **3** ?

SDU, Response4 Age: 52 years Sex: Male
 DOB: 04/04/54 MRN: TST04

Original order entered by Test, Dialysis on 02/20/07 at 8:09. **1**
 MD Sign / Phone order by Cryst MD, Cyrus
 Laboratory Department
Red Blood Cells

Details Additional Info Comments Validation History Ingredients Pharmacy Results

Details

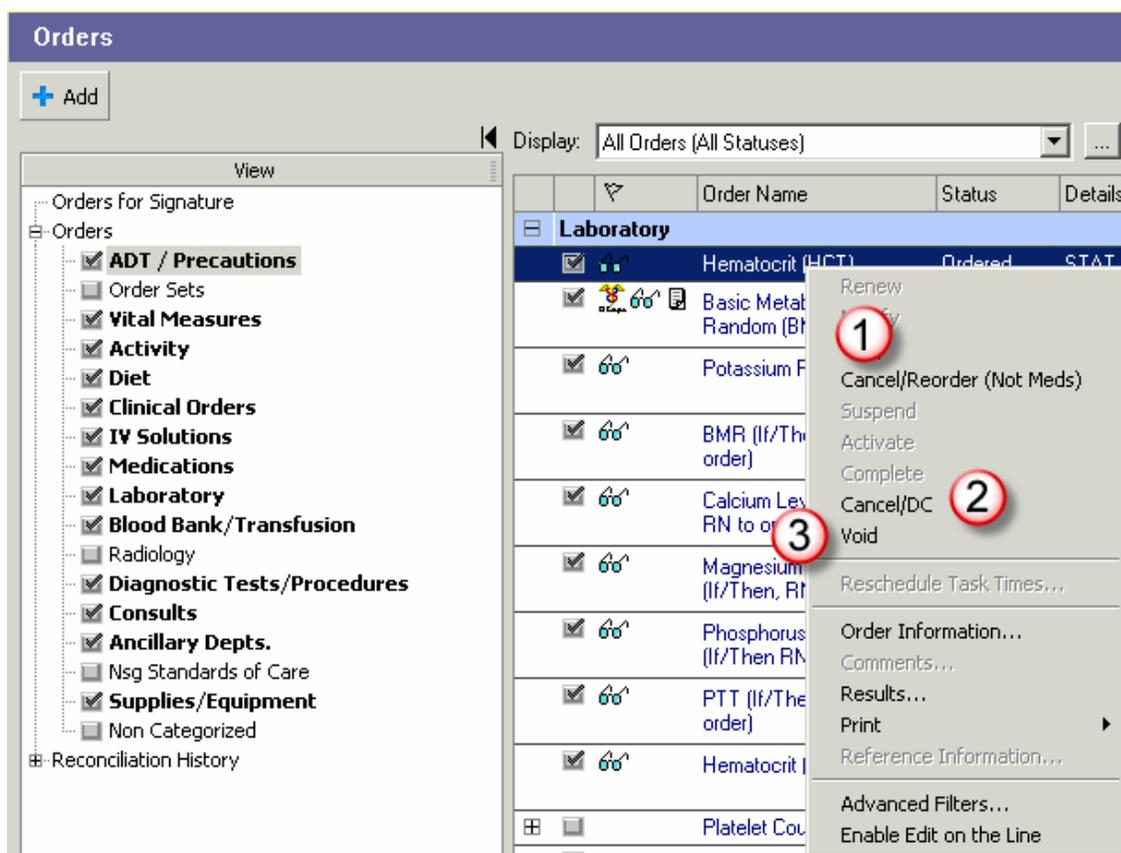
Number needed	1 unit
Attribute(s)	CMV Neg - CMV "safe" may be substituted
Priority	Planned procedure
Date/Time needed	02/20/07 12:00
Ordered Date/Time	02/20/07 8:09
Indication(s) for transfusion	Anemia (HCT < 24%)

Comment

To view Order details - Right click on Order, select Order Info and go to History tab.
 Print THIS requisition to take to the bedside when collecting specimen.
 This is an order to OBTAIN Red Blood Cells from Puget Sound Blood Center.
 Red Blood Cell Administration order(s) must be entered separately. **2**

1. Order info will display Details along with the name of the person that **placed the original order** under the patient's name
2. All details of the order will display under **Comment**.
3. To **close the window**, *click* this **arrow and door icon**  to return to the Power Orders section.

Additional Order Options:



1. **Cancel/Reorder:** This option allows you to replace a previous order with all or some of the same order details. For example, changing a Nurse Collect lab specimen to Lab Collect.

This action is not to be used for medication orders. Use Cancel/DC and write a new order.

2. **Cancel/DC:** Used to cancel orders that are no longer appropriate.

Note: The checkmarks in the boxes on the order itself are a shortcut to forcing the order in a **Cancel/DC** order option.

3. **Void:** Used to clear an order placed by mistake.

This action is not to be used for medication orders. Use Cancel/DC and write a new order.

MAR Medication Administration Record

1. *click* on **MAR** from the menu

Abdomen, CPOE		DOB:02/02/35	Age:74 years	Sex:Female
Allergies: No Known Allergies		IQHealth: No	Fin#:77731405002	Inpatient Medic

<ul style="list-style-type: none"> Overview Patient Information Allergies + Add Clinical Notes Diagnosis & Problems Form Browser Health Maintenance Histories Immunization Schedule Intake & Output MAR 1 MAR Summary 48H Medication Profile Orders + Add Pediatric Growth Chart Results: All Results: Ambulatory Re... Results: Catalog Results: Lab & Rad 7D Review Chart View: Discharge Instruct View: ED Summary View: Immunization View: Med Profile View: PSL 	<p style="text-align: center;">MAR</p> <p style="text-align: right;">08 March 2009 15:30 - 10 March 2009 3:30</p> <table border="1"> <thead> <tr> <th>Time View</th> <th>Medications</th> <th>03/09/09 9:58</th> <th>03/09/09 15:30</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> Scheduled</td> <td>acetaminophen</td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Unscheduled</td> <td>Pain Intensity</td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> PRN 2</td> <td>Pain Location</td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Continuous Infusions</td> <td>Pain - Response to PRN Meds</td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Future</td> <td>continuous renal replacement PRN ** CRRT Orders **, Therapy: CWHDF, Filter: M-100, Pump Rate Per Dialysis Nurse (range 120 - 180 mL/min), For Night Time Failure: Restart ASAP, Routine, Start: 03/09/09 7:19:00, 24 hr, Stop: 03/10/09 7:18:00, Note: RN: Verify ...</td> <td></td> <td>1 Bag Not previously given</td> </tr> <tr> <td><input checked="" type="checkbox"/> Discontinued Scheduled</td> <td>continuous renal replacement</td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Discontinued Unscheduled</td> <td>CRRT Solution Type</td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Discontinued PRN</td> <td>heparin (heparin 1,000 unit(s)/mL injectable solution) PRN 500 unit(s), inj soln, MISC, Q1 HR, PRN, For: Other, Routine, Start: 03/09/09 9:04:00, for 8 hr, Stop: 03/09/09 17:03:00, Note: For DIALYSIS RN use only. Use to prime pump per protocol.</td> <td></td> <td>500 unit(s) Last given: 2,800 unit(s) @ 03/09/09 9:58</td> </tr> <tr> <td><input checked="" type="checkbox"/> Discontinued Continuous Infusion</td> <td>heparin * 2,800 unit(s)</td> <td></td> <td></td> </tr> <tr> <td></td> <td>Sodium Chloride 0.9% (Sodium Chloride 0.9%-IV Bolus) PRN Bolus with 250 mL, Infuse bolus over 20 Minutes, IV, Q2 HR, PRN, For: Blood Pressure Control, Routine, Start 03/09/09 7:14:00, Note: For SBP < 15 mmHg below baseline SBP; SBP < 120 mmHg; or cramping. **For Administration by Dialysis RN ...</td> <td></td> <td>250 mL Not previously given 3</td> </tr> <tr> <td></td> <td>Sodium Chloride 0.9%</td> <td></td> <td></td> </tr> <tr> <td></td> <td>Continuous Infusions</td> <td></td> <td></td> </tr> <tr> <td></td> <td>Peritoneal Dialysate-Dextrose 1.5% (Low Ca++) 6,000 mL PRN ** PERITONEAL DIALYSIS SOLUTION **, Rate per Dialysis RN, Dialysate bag Volume: 6,000 mL, PERITONEAL, Start: 03/09/09 7:20:00</td> <td></td> <td>Pending Not previously given</td> </tr> <tr> <td></td> <td>Administration Information</td> <td></td> <td></td> </tr> <tr> <td></td> <td>Peritoneal Dialysate-Dext 1.5%(Low Ca)</td> <td></td> <td></td> </tr> <tr> <td></td> <td>Discontinued Scheduled</td> <td></td> <td></td> </tr> <tr> <td></td> <td>heparin (heparin 1,000 unit(s)/mL injectable solution) 2,000 unit(s), inj soln, CATHLOCK, ONCE, Routine, Start: 03/09/09 10:00:00, Stop: 03/09/09 10:00:00, Note: For DIALYSIS RN use only. For arterial port (lumen) access.</td> <td></td> <td>4</td> </tr> <tr> <td></td> <td>heparin</td> <td></td> <td></td> </tr> </tbody> </table>	Time View	Medications	03/09/09 9:58	03/09/09 15:30	<input checked="" type="checkbox"/> Scheduled	acetaminophen			<input checked="" type="checkbox"/> Unscheduled	Pain Intensity			<input checked="" type="checkbox"/> PRN 2	Pain Location			<input checked="" type="checkbox"/> Continuous Infusions	Pain - Response to PRN Meds			<input checked="" type="checkbox"/> Future	continuous renal replacement PRN ** CRRT Orders **, Therapy: CWHDF, Filter: M-100, Pump Rate Per Dialysis Nurse (range 120 - 180 mL/min), For Night Time Failure: Restart ASAP, Routine, Start: 03/09/09 7:19:00, 24 hr, Stop: 03/10/09 7:18:00, Note: RN: Verify ...		1 Bag Not previously given	<input checked="" type="checkbox"/> Discontinued Scheduled	continuous renal replacement			<input checked="" type="checkbox"/> Discontinued Unscheduled	CRRT Solution Type			<input checked="" type="checkbox"/> Discontinued PRN	heparin (heparin 1,000 unit(s)/mL injectable solution) PRN 500 unit(s), inj soln, MISC, Q1 HR, PRN, For: Other, Routine, Start: 03/09/09 9:04:00, for 8 hr, Stop: 03/09/09 17:03:00, Note: For DIALYSIS RN use only. Use to prime pump per protocol.		500 unit(s) Last given: 2,800 unit(s) @ 03/09/09 9:58	<input checked="" type="checkbox"/> Discontinued Continuous Infusion	heparin * 2,800 unit(s)				Sodium Chloride 0.9% (Sodium Chloride 0.9%-IV Bolus) PRN Bolus with 250 mL, Infuse bolus over 20 Minutes, IV, Q2 HR, PRN, For: Blood Pressure Control, Routine, Start 03/09/09 7:14:00, Note: For SBP < 15 mmHg below baseline SBP; SBP < 120 mmHg; or cramping. **For Administration by Dialysis RN ...		250 mL Not previously given 3		Sodium Chloride 0.9%				Continuous Infusions				Peritoneal Dialysate-Dextrose 1.5% (Low Ca++) 6,000 mL PRN ** PERITONEAL DIALYSIS SOLUTION **, Rate per Dialysis RN, Dialysate bag Volume: 6,000 mL, PERITONEAL, Start: 03/09/09 7:20:00		Pending Not previously given		Administration Information				Peritoneal Dialysate-Dext 1.5%(Low Ca)				Discontinued Scheduled				heparin (heparin 1,000 unit(s)/mL injectable solution) 2,000 unit(s), inj soln, CATHLOCK, ONCE, Routine, Start: 03/09/09 10:00:00, Stop: 03/09/09 10:00:00, Note: For DIALYSIS RN use only. For arterial port (lumen) access.		4		heparin		
Time View	Medications	03/09/09 9:58	03/09/09 15:30																																																																										
<input checked="" type="checkbox"/> Scheduled	acetaminophen																																																																												
<input checked="" type="checkbox"/> Unscheduled	Pain Intensity																																																																												
<input checked="" type="checkbox"/> PRN 2	Pain Location																																																																												
<input checked="" type="checkbox"/> Continuous Infusions	Pain - Response to PRN Meds																																																																												
<input checked="" type="checkbox"/> Future	continuous renal replacement PRN ** CRRT Orders **, Therapy: CWHDF, Filter: M-100, Pump Rate Per Dialysis Nurse (range 120 - 180 mL/min), For Night Time Failure: Restart ASAP, Routine, Start: 03/09/09 7:19:00, 24 hr, Stop: 03/10/09 7:18:00, Note: RN: Verify ...		1 Bag Not previously given																																																																										
<input checked="" type="checkbox"/> Discontinued Scheduled	continuous renal replacement																																																																												
<input checked="" type="checkbox"/> Discontinued Unscheduled	CRRT Solution Type																																																																												
<input checked="" type="checkbox"/> Discontinued PRN	heparin (heparin 1,000 unit(s)/mL injectable solution) PRN 500 unit(s), inj soln, MISC, Q1 HR, PRN, For: Other, Routine, Start: 03/09/09 9:04:00, for 8 hr, Stop: 03/09/09 17:03:00, Note: For DIALYSIS RN use only. Use to prime pump per protocol.		500 unit(s) Last given: 2,800 unit(s) @ 03/09/09 9:58																																																																										
<input checked="" type="checkbox"/> Discontinued Continuous Infusion	heparin * 2,800 unit(s)																																																																												
	Sodium Chloride 0.9% (Sodium Chloride 0.9%-IV Bolus) PRN Bolus with 250 mL, Infuse bolus over 20 Minutes, IV, Q2 HR, PRN, For: Blood Pressure Control, Routine, Start 03/09/09 7:14:00, Note: For SBP < 15 mmHg below baseline SBP; SBP < 120 mmHg; or cramping. **For Administration by Dialysis RN ...		250 mL Not previously given 3																																																																										
	Sodium Chloride 0.9%																																																																												
	Continuous Infusions																																																																												
	Peritoneal Dialysate-Dextrose 1.5% (Low Ca++) 6,000 mL PRN ** PERITONEAL DIALYSIS SOLUTION **, Rate per Dialysis RN, Dialysate bag Volume: 6,000 mL, PERITONEAL, Start: 03/09/09 7:20:00		Pending Not previously given																																																																										
	Administration Information																																																																												
	Peritoneal Dialysate-Dext 1.5%(Low Ca)																																																																												
	Discontinued Scheduled																																																																												
	heparin (heparin 1,000 unit(s)/mL injectable solution) 2,000 unit(s), inj soln, CATHLOCK, ONCE, Routine, Start: 03/09/09 10:00:00, Stop: 03/09/09 10:00:00, Note: For DIALYSIS RN use only. For arterial port (lumen) access.		4																																																																										
	heparin																																																																												

- To see **PRN** medications *click* on **green PRN bar** and this section will move up to the top of the MAR.
- To **chart the administration of a medication** *click* on the “**dose task cell**” to open the charting form.
- Discontinued or Single dose medications will discontinue once charted** and move to the **Discontinued etc Section** of the MAR.

To chart medications in the Medication Administration Record (MAR)

1. For a **Pain** medication you must chart the **Pain Intensity**.
2. For a **Pain** medication you must chart the **Pain location**. *click* the drop down arrow for choices.
3. For a **Dose Range** medication you must indicate the dose administered.
4. To **Sign** the charting, *click* the  **checkmark icon**

To **Cancel** charting *click* the  **circle icon**

acetaminophen 325 mg tablet: SDU, Response4

✓ ❌ 4

acetaminophen (acetaminophen - dose range)
325 - 650 mg. tab, PO, Q4 HR., PRN, For Other, Routine, Start 02/22/07 13:13:00, Note: Give up to 325 mg for mild (1-3) pain; up to 650 mg for moderate (4-6) pain. MAX 4 g/day, all sources.

*Performed date / time 02/22/07 1317
*Performed by Test, Dialysis

No record of last documented administration.

Pain Intensity 6 1
Pain Location Arm Lower L 2

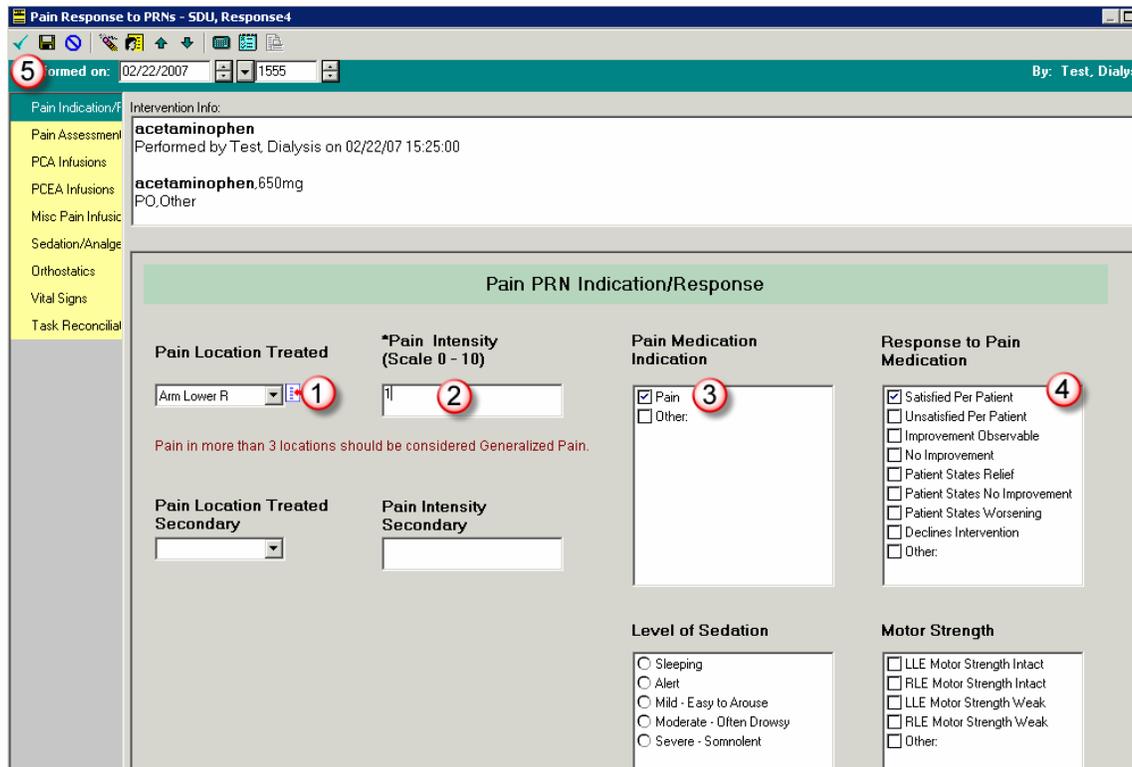
*acetaminophen 650 mg 3
Diluent: <none> ml
*Route: PO Site:
*Reason: Other
 Not Given
Reason:
Comment:

Response to PRN Medication Charting:

1. After charting a PRN medication the “**Response to PRN Medication**” cell will appear on the MAR.

PRN				
 PRN acetaminophen (acetaminophen - dose range) 325 - 650 mg, tab, PO, Q4 HR, PRN, For Other, Routine, Start 02/22/07 13:13:00, Note: Give up to 325 mg for mild (1-3) pain; up to 650 mg for moderate (4-6) pain. MAX 4 g/day, all sources.			325 - 650 mg Last given: 02/22/07 15:25	response to PR <div style="border: 2px solid red; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> 1 </div>
acetaminophen		* 650 mg PO		
Pain Intensity		6		
Pain Location		Arm Lower R		
Pain - Response to PRN Meds				

Documentation of the evaluation of the patient’s response to the PRN medication is required. After clicking on the cell the charting form will open.



2. The previous **Pain Location Treated** charting will carry forward.
3. **Pain Intensity** needs to be evaluated and charted
4. Check **Indication**.
5. **Response to Pain Medication** is a multi-option charting field, select as many responses that apply. Level of sedation and motor strength are also available.
6. **Sign** charting

Ordering the Dialysis RN Heparin OrderSet in Power Orders & Documenting Heparin on the MAR

Go to Orders on the Menu.

Note: Per the Clinical Orders placed by the Nephrologist, the NWKC RN has been directed to order the heparin for the hemodialysis procedure

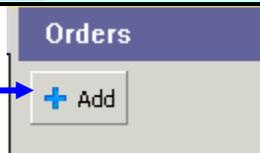
Clinical Orders			
<input type="checkbox"/>	Hemodialysis related Communication (to get Heparin during Dialysis)	Order	Start 06/26/07 10:37, Instructions: Dialysis RN: to obtain heparin for hemodialysis procedure, use "Dialysis RN Heparin OrderSet". Administer heparin bolus and drip per MD instructions for heparinization in Hemodialysis order., for 12 hr, Stop 06/26/07 22:36

Note: Per the Hemodialysis order placed by the Nephrologist the heparinization will be ordered as TIGHT: 500 units or SYSTEMIC 1000 units.

Ancillary Depts.			
<input type="checkbox"/>	Hemodialysis	Order	Start 06/26/07 10:37, Routine, Duration of dialysis: 6, Blood Flow Rate: As tolerated, Ultrafiltration goal: Patient to Dry Wt., Pt's Dry Wt.: 83 kg, Dialysate Flow Rate: 500 mL/minute, Dialysis Potassium: 1 mEq/L (for K >6 mEq/L), Dialysate Calcium: 2.5 mEq/L, Dialysate Bicarbonate: 35 mEq/L, Dialysate Sodium: 140 mEq/L, Heparinization: TIGHT: 500 units bolus; 200 units/hr, Heparin OFF: 60 minutes before end, Dialyzer Polyflux 10L, Order Effective for 12 hr

Placing the Dialysis RN Heparin Order Set:

1. click the **Add Order** button to open the **Order Catalog**



2. Type in **DIAL** to locate the [Dialysis RN Heparin OrderSet](#)

TEST, BECKY - Add Order
TEST, BECKY Age:57 years Sex:Female Location: Test Allergies
 DOB:03/25/50(MRN:6007521 Fin Number: Inpatient 999)

Find: Search Search within: All

Search Results

- Dialysis
- Dialysis - Chronic Ambulatory Peritoneal
- Dialysis- Systemic Heparin Coagulation
- Dialysis- Tight Heparin Anticoagulation
- Dialysis RN Heparin OrderSet**
- diazepam

diclofenac
 dicloxacillin
 dicyclomine
 didanosine enteric coated capsule
 Diet - ADA
 Diet - ADA + Cardiac

TEST, BECKY - 6007521 Done

Ordering Physician

Physician name
 Test MD, Cyrus

Order Date/Time
 3/24/07 0627

Communication type
 MD Sign / Protocol
 MD Sign / Verbal
 MD Sign / Phone
 Scope of Care

OK Cancel

3. click on the **Dialysis RN Heparin OrderSet** to open the order set.

4. Ordering Physician window will open
5. Type in last name of Ordering MD
6. *click* on **MD Sign/Protocol** for the **Communication Type**.
7. *click* **OK**.
8. Dialysis RN Heparin Orderset will open.

Component	Order Details
** This orderset is to be used for DIALYSIS patients only **	
CLINICAL ORDER - Catheter Dressing Care	
Place order below to communicate to other hospital staff correct process for dialysis catheter dressing care. Un-check the order if it has been entered previously.	
*** DRESSING CHANGES - check order below if an active order for Dialysis Catheter dressing change and care is not on patient chart.	
<input type="checkbox"/>	Dressing Change - Dialysis Catheter Start: T,N, Dialysis RN will complete all dressing changes and flushes. Contact Dialysis at 64145 if catheter is not cle
MEDICATIONS	
<input type="checkbox"/>	lidocaine (lidocaine 1% injectable solution) 0.5 mL, inj soln, INTRADERMAL, ONCE, Routine, Note: For DIALYSIS RN use only. Infiltrate for local anesthesia at
HEPARIN - During Dialysis	
WARNING Heparin should NEVER be given to patient with history of / or possible HIT If patient is already on heparin drip, message page nephrologist immediately.	
Heparin for anticoagulation - Tight or Systemic Heparin	
Heparin needed during Dialysis to be entered by RN based Anti Coagulation Protocol (Tight or Systemic) selected in hemodialysis orders. Please choose either 500 unit(s) or 1,000 unit(s) below.	
<input type="checkbox"/>	heparin (heparin 1,000 unit(s)/mL injectable solution) 500 unit(s), inj soln, MISC, Q1 HR, PRN, For: Other, Routine, for 8 hr, Note: For DIALYSIS RN use only. Use to prim
<input type="checkbox"/>	heparin (heparin 1,000 unit(s)/mL injectable solution) 1,000 unit(s), inj soln, MISC, Q1 HR, PRN, For: Other, Routine, for 8 hr, Note: For DIALYSIS RN use only. Use to pri
MEDICATIONS / HEPARIN - Post Dialysis	
RN to order Heparin flush based on Standing orders and Heparin Capp Off Guidelines, from hemodialysis orderset.	
Select appropriate order below based upon Arterial or Venous Access. Select appropriate Heparin concentration based upon protocol guidelines.	
Arterial Port	
<input type="checkbox"/>	heparin (heparin 1,000 unit(s)/mL injectable solution) unit(s), inj soln, CATHLOCK, ONCE, Routine, Note: For DIALYSIS RN use only. For arterial port (lumen) access.
<input type="checkbox"/>	heparin (heparin 5,000 unit(s)/mL injectable solution) unit(s), inj soln, CATHLOCK, ONCE, Routine, Note: For DIALYSIS RN use only. For arterial port (lumen) access.
Venous Port	
<input type="checkbox"/>	heparin (heparin 1,000 unit(s)/mL injectable solution) unit(s), inj soln, CATHLOCK, ONCE, Routine, Note: For DIALYSIS RN use only. For venous port (lumen) access.
<input type="checkbox"/>	heparin (heparin 5,000 unit(s)/mL injectable solution) unit(s), inj soln, CATHLOCK, ONCE, Routine, Note: For DIALYSIS RN use only. For venous port (lumen) access.

9. Select orders by *clicking* in checkbox to the left of the order. (Must see checkmark in the box to actually select the order).

Lidocaine: (if patient has a graft)

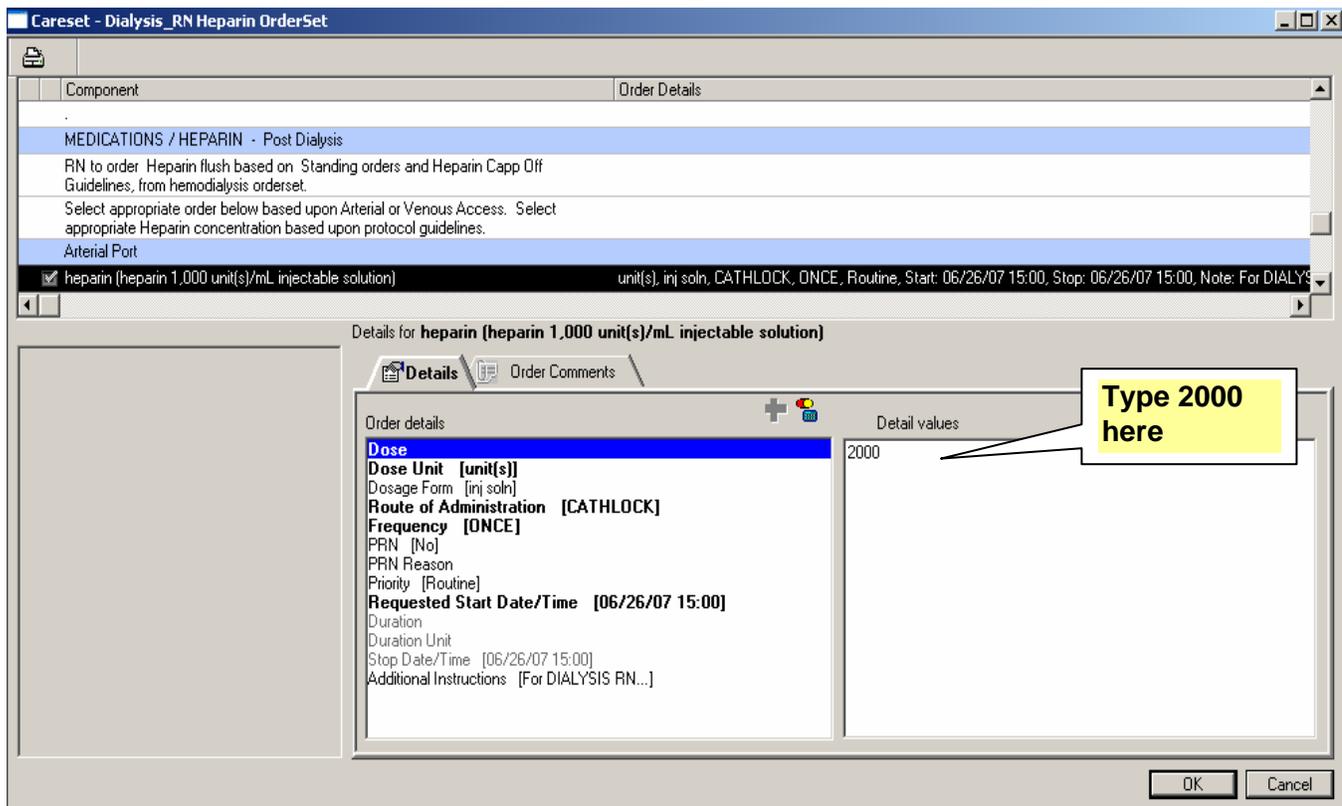
Heparin Tight: 500mL or Systemic 1000mL.

Arterial Port*: 1000 unit(s)/mL

Venous Port*: 1000 units(s)/mL

*These orders have required fields and the **Dose** must be typed in before signing the order. See next page

Order Details for Arterial or Venous Port Heparin:

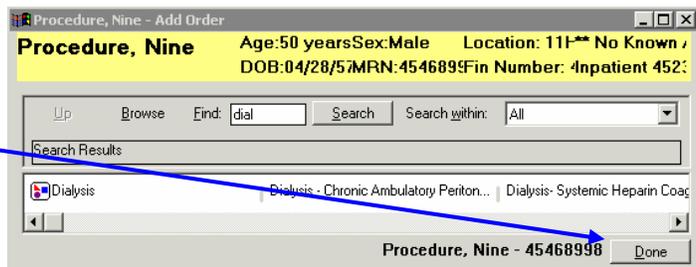


10.

Type in **2000** (units) in Detail values for Dose.

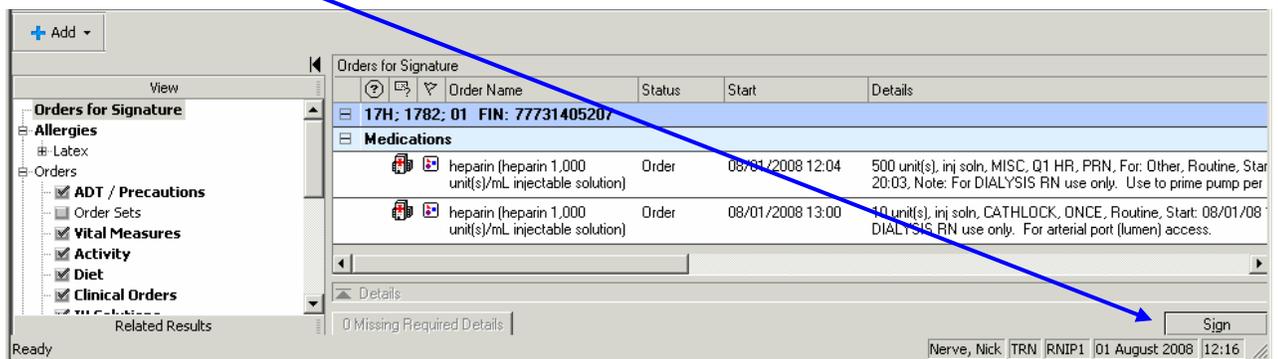
11. *click OK* to Close

12. **Close Add Order** window by *clicking Done* in bottom right corner



13. **Review selected orders** for accuracy and *click* on any order you need to make changes to before signing. Details will open and changes can be made.

14. *click Sign* to place the order.



Documenting Tight or Systemic Heparin via the MAR

From the MAR:

click on **PRN Heparin** dose task cell to open chart details after hemodialysis is complete.

Medications	06/26/07 16:00	06/27/07 9:39
heparin		
Unscheduled		
PRN		
heparin (heparin 1,000 unit(s)/mL injectable solution) 500 unit(s), inj soln, MISC, Q1 HR, PRN, For: Other, Routine, Start: 06/26/07 15:01:00, for 8 hr, Stop: 06/26/07 23:00:00, Note: For DIALYSIS RN use only. Use to prime pump per protocol.	PRN	500 unit(s) Not previously given

1. Enter the correct number of units administered
2. *click* Comment:

1: Type in Total # of units administered.

2. Click Comment

3. Type in: the Prime units received

Type In: Total Received: # of units/hour x total # of hours, plus the prime amount.

click OK to close comment box

4. Sign charting.

**3. Prime 500 Units
Total Received: 200 units/hr x 4 hrs = 1300**

How to Insert Columns on the PAL

How to Insert Columns on the PAL:

On the far right section of the PAL right *click* and select Insert Column.

To add Potassium Plasma:

- Right *click* and Insert Column,
- Open **ALLOCFSETS**
- Open ALLRESLTSECT
- Open **ALLSRVSECTS**
- Open General Lab
- Open General Chemistry
- Select Potassium Plasma
- *click* NEXT
- Type in 7 Days
- *click* Next
- Column Title K+
- *click* Next
- *click* Finish

To add Hematocrit:

- Right *click* and Insert Column,
- Open **ALLOCFSETS**
- Open ALLRESLTSECT
- Open **ALLSRVSECTS**
- Open General Lab
- Open Hematology testing
- Open Hematology
- Select Hematocrit
- *click* NEXT
- Type in 7 Days
- *click* Next
- Column Title HCT
- *click* Next
- *click* Finish