

Student Documentation Guidelines

Students will document assessments, medications, and patient cares in the Electronic Health Record, PHRED, while at Children's Mercy Hospital.

- Students will chart assessments based off of systems and norms set by Children's Mercy Hospital.
- Students <u>will</u> chart: system assessments, vital signs, measurements (Ht, Wt, HC), intake & output (IV fluids only with RN), basic cares (bed, bath, linen, oral care, turning, ambulation, etc), procedures performed, and medications administered.
- Students should <u>communicate all information</u> with the staff in a timely manner in addition to charting. The student should initiate a conversation with nurse to review their documentation before leaving the unit.
- A clinical instructor and/or nurse **MUST** Validate/Authenticate ALL student charting and medications, after reviewing with the student before students leave for the day.
- If changes are needed the <u>student</u> should make these changes at this time.

The School is responsible for verifying that all students complete the following before starting clinical rotation:

- 1. Watch Training Videos
- 2. <u>Review Training Material</u>
- 3. Complete Training Quiz- retain for school records only

First day of clinical/orientation the following must be completed to have access to systems:

- 1. Set Up Network Login & Password- below
- 2. <u>Set Up Patient List</u> (specific to your area)

Creating a Network Logon

You must be in the hospital to be able to set-up your network logon.

- 1. Start at the login screen for a computer. If the computer is already on the desktop use **Ctrl + Alt + Delete** or **Switch User**.
- 2. Enter username: (this was given to you by your school/instructor)
- 3. Enter **password**: (this was given to you by your school/instructor)
- 4. You will be prompted to enter a new password, enter new password, & Confirm.
- 5. Once you have set-up your new password please **Log Off** the computer.

You will now be able to use this username and password to access the Intranet at Children's Mercy on any computer without signing into the computer.

Navigation

Review of CARECOMPASS (List of patients)

- Patient List
 - Drop down menu
 - Top selection defaults open
- List Maintenance Adjust Patient List order
- Establish Relationship
 - Select Relationship
 - Select Establish

CareCompas	5			
A	- 🔍 🔍 100% (• • 4		
Patient List:	5 Sutherland Tower	💥 List Maintenance 🕂 Add Patient	🔹 Establish Re	elationships
▼ Location	4 Sutherland Tower			Visit
5S02A - 2	3 Sutherland Tower ICN 6 Elizabeth Hall Tower 6 Henson Tower			-
	4 Henson Hall Tower 5 Sutherland Tower	XISTS		

- Unit List
 - Location Room and bed number (organize ascending or descending)
 - o Patient Name, age, sex, resuscitation status, allergies, diet (organize ascending or descending)
 - Visit Reason for visit and length of stay
 - o Care Team Attending's for this encounter
 - o Med Calc Weight
 - o PEWS Result changes colors when score increases
 - o Cardiac PEWS Result changes colors when score increases
 - o Patient Discharge Discharge order signed then date of order will populate(replaces person icon)
 - Activities Tasks

Location	Patient	Visit	Care Team	Med Ca	PEWS	Cardiac	Total P	Patient	Activities
4S08A - 1	Zzpmtest, Rose Syrs F No Known Allergies Kayexalate Formula, Regular diet for age, Pediasu	testing LOS: 5w 2d	Test, JCroswhite-Provider	22	ŧ6	!6	3	3/9	15

o Hover to discover - See more information





New orders and results

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- Orange box New orders or results
 - Red box STAT orders or results
 - Click on exclamation point to open



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Contraction Scheduled/Unscheduled

2 Hours

Blans of Care Pati

4 Hours

12 Hours

- **Activities (Tasks)** •
 - Access Task List from Patient or Activities column .
 - Use Task List inside chart to document 0



CARECOMPASS Icons ٠

Icon Identification					
60	Nurse Review				
	Immediate Priority: STAT/NOW orders.				
	Critical Results: Indicates Critical results for a patient.				
1	High Result: Normalcy indicator indicates result is High.				
t	Low Result: Normalcy indicator indicates result is Low.				
۲	Non-Critical New Information: Indicates new non-critical results or orders for a patient.				
.	Critical New Information: Indicates new critical results or STAT orders.				
	High Risk Alert: Indicates the patient has high risk indicators. Placing your pointer over this icon shows additional information about the high risk indicators.				
×	Isolation: Hover to see isolation type(s).				
P	Patient is confidential: Hover to see reason.				

Review of the Patient Chart

Double click on the patient name to access patient chart. This is where you will obtain your current & historical clinical information. If menu is not visible, hover over menu tab and click on push pin to keep open.

Menu P	Band	Description
MPages	MPages	View a brief summary of patient information and assessment.
Orders Add I-View Adverse Reactions Add MAR MAR MAR Summary RxStation Medication Queuing Anesthesia Med / Med Request Su Task List	Orders	View Current Orders to guide your care Under Display select All Active Orders
Documents Forms Results Review	I-View	Used for charting and view of I&O 24hr totals <u>View I&O Totals</u> 1. Click on I-View Section 2. Click on I&O Band (towards bottom) 3. Scroll to right to see last 24hr intake (blue columns)
Transfusion Summer	Adverse Reactions	View reactions and allergies
	MAR	Used for obtaining Med List & for Med Administration
	MAR Summary	View last administered medication dose/time
Growth Chart	Task List	Helps organize tasks to complete. Use this to document labs, & weights (unit/shift dependent). DO NOT document oral care or baths from here.
Patient Info/Visits	Documents	History & Physical, Progress Notes, Consult Notes, etc. If H&P is not listed – change time frame to look closer to admit date. (Right click on time range bar and select Change Search Criteria, Select dates around admit date.)
	Results review	Change timeframe (use arrows to move date) Lab Results- double click on result to view normal high and low results Radiology Results (click on test to view results) Recent Results – View Clinical Documentation All Results Flow sheet
	Growth Chart	View Patient Weight & Height/Length (under 3 years) 1. Click on Measurement 2. Click Table to view all entries
	Patient Info/Visits	View past visits

PHRED Toolbar:

P Pov	PowerChart Organizer for Nyberg, Ginny M, RN							
Task	Edit	View	Patient	Chart	Links	Notifications Navigation Help		
: 🎬 Ca	reCom	pass 🐇	Patient L	ist 🛄 S	chedulin	ig 🖃 Message Center 🌃 Active Consult List 🍟 🗄 🎭 🍦 🗄 🎟 Medication Administration 州 Exit 🎬 AdHoc 🚨		
🗄 📿 Bri	dge Tr	ansfusio	n 📿 Coo	le Sheet	🜏 Lexi	Comp 🔃 Clinical Skills 🛱 Scope 🛱 Web on Call 🛱 Text Paging 💐 Timeless 🛱 GWN Management Console		

Lexi-Comp: Medication Information & Pathophysiology

<u>Clinical Skills:</u> Nursing Skills- Procedures & Nursing Consult- Education

SCOPE/ Policy Manager: Children's Mercy intranet, find Policies and Procedures

<u>Medication Administration</u>: Bar Code Medication Administration, click here and then scan medication at administration <u>Learning Live</u>: Access help with documentation from inside PHRED

Viewing Documentation from Results Review

From the Patient's Chart click on **Results Review** (Note tabs across the top)

Lab- To change the search criteria so you can see more days, Right click Clinical Range bar, change search criteria, select dates **Radiology**- To change the search criteria so you can see more days, Right click Clinical Range bar, change search criteria, select dates dates

<u>Recent Results Tab</u>- documentation from I-View and Documents <u>Infection Control Devices-</u> documentation related to Hospital Acquired Conditions <u>Patient Family Education-</u> documentation done related to education of patient and family <u>Graph icon-</u> shows results in a graph format

< 🔹 🔹 者 Results Revie	2W										
8h 🛄											
	1										
Lab Radiology Recent Re	sults Infection Control Devices										
Flowshoot Clinical Info		linical Info		R Table I C G	roun C List						
Howsheet, Jennedrand											
				1	19 July 2015 10:	01 CDT - 23 Jul	y 2015 10:01 CD	T (Clinical Range)		
Navigator 🛛	Show more results										
Clinical Info			1	1	1	1		1	1		-
Medication Calculation	Clinical Info	07/22/2015 08:00 CDT	07/22/2015 07:48 CDT	07/22/2015 07:00 CDT	07/22/2015 06:49 CDT	07/22/2015 06:41 CDT	07/22/2015 06:21 CDT	07/22/2015 06:00 CDT	07/22/2015 05:00 CDT	07/22/2015 04:05 CDT	07/22/2015 04:00 CDT
Measurements	Vital Signs										
Vital Signs	Temperature Celsius	36.4									37.3
Vital signs	Temperature Route	Axillary									Axillary
SBP/DBP Cuff Monitored	Heart Rate	91			80	80	77			67	72
SBP/DBP Art 1	Heart Rate Monitored	15				12	12				12
Pediatric Early Warning	SBP/DBP Cuff Monitored	10				12	12				12
Pediatric Larry Warning :	SBP Cuff Monitored	86.1									86.1
Comfort Assessment #1	DBP Cuff Monitored	45									48
FLACC Pain Scale	MAP Cuff Monitored										
	Cuff Size	Adult									Adult
FLACCr Pain Scale	Extremity	Arm, right									Arm, right
🔽 Cardiovascular Assessm	Vital Signs Position	Lying									Lying
E Bulses	Vital Signs Activity	Calm									Sleeping
Puises	SBP/DBP Art 1										
🔽 Edema Assessment	SBP Art 1										
Respiratory	DBP Art 1										
M nespiratory	MAP Art 1										
Respiratory Assessment	SpO2	98	100			96	97				98
Aerosol Treatment Information	Oximetry Site										1 (Big)
Courde Assist	FiO2					28	28				1 (019)
Cough Assist	Oxygen Flow Rate										
Cough, Sputum, and Su	Delivery Device Oxygen					Trach mask	Trach mask				

<u>Sort by Table, Group or List-</u>Changing the way the screen is viewed (Group or List) makes finding data easier. Examples: Heights & Weights

<u>Choose your Flowsheet-</u> Clinical Info defaults open and shows all sections with clinical documentation. There are many options for more specific views:

- Vitals View
- Pulmonology View
- Diabetes Flowsheet

Review of the eMAR (REVIEW and play with to make bullets match screenshot)

The eMAR is to be used as the source of truth. Good practice includes checking all rights on MAR as a first step before scanning.

- Meds are organized by scheduled, unscheduled, PRN, continuous infusions, & discontinued
- Blue Boxes indicate a medication dose is due
- Red Boxes indicate medication is overdue or STAT
- Green Boxes indicate a PRN medication and the last given information
- Gray Boxes indicate a dose scheduled beyond the next scheduled dose.
- The location of the medication is listed with the medication details (i.e., 6H2 Pyxis or Med Drawer).
- Check your 5 Rights here on all your medications, even when Bar Code Medication Administration is used.
- Medications are considered on time at Children's Mercy Hospital when given within 30-60 min of the scheduled time. Please note
 this depends on the medication and you should note time critical and time sensitive medications.
 - Medications can be rescheduled by the nurse using Reschedule Admin Times. Talk with patient's RN to ensure an appropriate schedule.

						2			
Medications	08/15/2019 20:00 CDT	08/15/2019 18:00 CDT	08/15/2019 16:00 CDT	08/15/2019 14:00 CDT	08/15/2019 12:00 CDT	08/15/2019 11:58 CDT	08/15/2019 10:28 CDT	08/15/2019 09:13 CDT	08/15/2019 09:11 CDT
Scheduled ondansetron (ondansetron injectable) 08/01/19 20:00:00 CDT, 4HBMT RxStation Tower1, Routine, 4 mg = 2 mL, IV, 2 mL total volume, infuse over 15 minute(s), g8hr For dose less than or equal to 0.1mg/kg, maximum 4mg, give product u	4 mg Last given: 4 mg @ 08/15/2019 04:09 CDT				4 mg Last given: 4 mg @ 08/15/2019 04:09 CDT				
ondansetron Control Control C	10 mL Last given: 10 mL @ 05/15/2019 09:11 CDT			10 mL Last given: 10 mL @ 08/15/2019 09:11 CDT				0	
chlorhexidine topical mycophenolate mofetii (mycophenolate mofetii injectable) 07/24/19 11:00:00 CDT, Med Drawer (Pharmacy), Routine, 400 mg = 80 mL, IV, 80 mL total volume, infuse over 2 hr(s), g8hr **Hazardous Material, Handle Properly**				400 mg Last given: 400 mg @ 08/15/2019 06:00 CDT					10 mL PO

- 1. Previous administration documentation
 - a. Shows in time in that time column
 - i. 8/15/2019 @ 0911
 - b. Shown in future task boxes (#3)
- 2. Current time column
- 3. Task box
 - a. Use this to document current dose, if not using MAW for BCMA
 - b. Will show when a previous dose was given or if *Not given within 8 days*
- 4. Future doses
 - a. Greyed out
 - b. Can't document on the task, informational only

Documentation

Documentation on the eMAR

At Children's Mercy Hospital we use Bar Code Medication Administration to assist in our delivery of medications.

- Our number one priority is patient safety. BCMA adds one more safety check in the medication administration process
- Scanning does not replace use of the eMAR and checking your 5 rights
- The eMAR will still be available as a resource and to be utilized as the source of truth
- BCMA is not intended to speed up the medication administration process

View the Bar Code Medication Administration Training video & handouts for medication documentation utilizing scanning technology.

Documentation of Assessment & Procedures in I-View

I-View, is where most documentation occurs.

- I-View is organized by bands and sections and will vary depending on your position in the system.
- The colored clinical range bar is set to a specific time frame and can be changed by right clicking. The time columns are also set to specific time frames and can also be changed by right clicking.

Basic Navigation

To document in I-View you need to activate the column

1. Double click on the time to activate time column Note the white boxes and check marks in all sections

2. Click in area you want to document



3. Sign by clicking on Green Checkmark





• Other commonly used icons:



Takes to previous location in system



View only documented values by selecting Show Empty Columns/Rows Button



Stops and clears documentation, without signing

Assessment Documentation

Assessments are done by documenting system norms. Assessment findings that are not normal are documented in other sections of I-View often below the Norms. In the example below the patient is not on room air so it is not selected and then Oxygen information is documented elsewhere.

Respiratory Assessment	Respiratory Assessment Norms	×	
Norms	✓ Lung sounds equal		
Lung Sounds Left	Lung sounds left, clear		
Lung Sounds Right	Lung sounds right, clear		
Description of	Respirations regular, unlabored	Oxygen/Oximetry	
Respirations	✓ No cough	SpO2 9	[%] 99
FiO2 %	Secretions thin clear (if visible)	Oximetry Site	Toe, left f
Oxygen Flow Rate L/min	Able to clear secretions	" 🔷 Toe Digit	1 (Big)
Cardiovascular		SpO2 Site 2	%
Assessment Norms	Trachaostomy stoma healing (healed nink (if present)	Oximetry Site 2	
Perfusion Assessment	Tracheoscomy scoma nearing/neared, pink (ir presenc)	Delivery Device Oxygen	Nasal can.
		Airway Support/Patient Interface	
		FiO2 9	%
		Oxygen Flow Bate //mir	n 1

Printing Lab Labels

To complete lab label view: Collections Inquiry- Pathnet Barcode Labels Demand Print

Completing a Procedure on the Task List

- Task list helps to organize your day, like an electronic brain.
- Task "Performed on" date/time will default to the date/time the task is scheduled.
- You will complete some procedures from in task list, for example lab draws.
- DO NOT document *Mouth Care and Bathing* on the Task List.
- It's important to **NEVER** document medications from the Task List.

Complete a Task:

1. Click on Task List from the Menu

Menu	
MPages	
Orders	🕇 Add
I-View	
Adverse Reactions	🕇 Add
MAR	
MAR Summary	
Anesthesia Med / Med	Request Su.
Task List	
Documents	
Forms	

2. Right click on task you want to complete and click Chart Done.

Scheduled Patient Care All PRN Tasks All Continuous Tasks

	Ta	sk retr	ieval complet	ed				
			Task Status	Scheduled D	ate and Time	Task Description	Mnemonic	Order Details
l			Pending	08/01/2019	08:00 CDT	Turn/Reposition Patient	Turn/Reposition	08/01/19 8:00:00 CDT
			Pending	08/01/2019	08:00 CDT	Weight	Weight	08/01/19 8:00:00 CDT

Completing Lab Task:

 When documenting lab draw you will need to verify Date, Time, and Performed by then Click OK

P Nurse Collec	t (Chart Done) - Zzpmtest, Bridge
Date/Time:	08/05/2016 🖕 🕇 1354 🚔 CDT
Performed by:	Nyberg, Ginny M, RN
	OK Cancel