

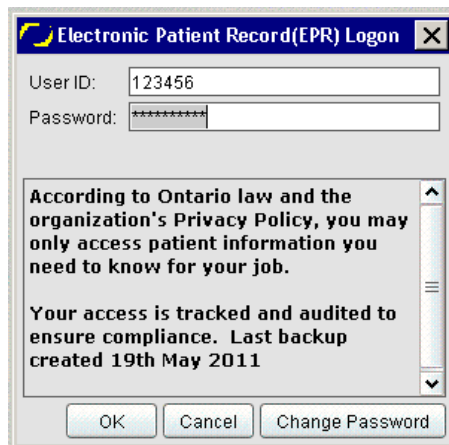
SLP - TIP SHEET

- **Need Help?** For assistance with computer issues, Contact **HelpDesk**, ext. 4357 (HELP) or Email: **Helpd@uhn.ca**
- **Account Access:** Your personal EPR account will be available within 48hrs following training. Contact Helpdesk, ext. 4357, prompt 1 for Clinical Systems, prompt 1 for EPR Support

LOGGING IN TO THE EPR



1. Double-click on EPR Icon
2. Enter ID and password
3. Click "OK" button to proceed



PATIENT SEARCH OPTIONS

- Last name, First name → **Super, Cilia**
- Last name → **Rehab**
- MRN → **2003085**
- OHIP → **o987654339**
- Visit → **v40734000004**
- Wildcard (use the dash "-") → **Re-, J-**












VIEWING PATIENT INFORMATION

1. Click **Patient Search** Icon and type in patient search criteria.
2. Select the **correct patient** by double clicking over their name
3. Double click over the **correct visit** and click **Yes** to the **Audit Trail Warning**
4. Click **View Scanned Documents** (to view discharged patient charts)

HEIGHT AND WEIGHT ASSESSMENTS

- Select the **Assessments** tab, then click on **Height & Weight** from the assessments block
- Document the correct date and time of the assessment
- Enter Height in cm. If you are entering in feet and inches instead, you must follow the numbers with the symbol for feet (') and the symbol for inches("). For example, 5'10"
- Enter the height again to confirm the correct value (these two figures must match)
- Select the method you used to take the measurement and if necessary a reason or explanation.
- Enter Measured Weight in kg. If you are entering in pounds, you must follow the number with 'lbs' (150lbs).
- Enter the weight again to confirm the correct value (these two figures must match)
- Enter Weight Method and/or an explanation if required, then Choose **'Accept'**
- Go to the Patient Care tab and select the **Height/Weight** section (refresh to reflect updates)

PATIENT DASHBOARD ICONS

Description	Icon	Detail
Allergies/Adverse Reactions		Displays the yellow warning icon if the allergies are documented for the patient on the current admission/visit
		Displays greyed-out icon if allergies for the patient are documented as “No Known” allergies
		Displays the blue mandatory action icon if allergies have not been documented on current admission/visit
Height and Weight		Displays the blue mandatory action icon if historical data is present but not documented on the current admission/visit
		Displays the white supplementary icon if height and weight has been documented on the current admission/visit
Preferred Language		Displays the white supplementary icon if preferred language is not English. Displays no icon if preferred language is English
Behaviour Safety Alert		Displays the yellow warning icon if Behaviour Safety Alert is documented.
Advanced Care Planning		Displays the white supplementary icon with a checkmark if patient has Power of Attorney (POA) and document is photocopied and put in chart.
		Displays the white supplementary icon with an empty square if patient has Power of Attorney (POA) but did not bring hard copy of document.

FOOD ALLERGY ASSESSMENT

Allergy assessment **MUST** be entered **PRIOR** to placing a diet order.

Note: If a diet order is entered without having done the allergy assessment first, a mandatory alert will come up. It is important that you **do not bypass the alerts** (which is done by clicking on the Return button) but instead close the task. Once a nurse has done the allergy assessment you will then be able to place the diet order.

1. Under the Assessments block **{select} Food Allergy/Adverse Reaction**.



2. Enter the **date and time** that the assessment was done
3. Choose the source the information came from.
4. The next screen will allow you to **{choose}** to **Document a Food Allergy/Adverse Reaction**.
Note: If the patient does not have food allergies, choose No Known Food Allergy/Adverse Reaction.
5. **You can only document one food allergy at a time.**
6. **{Select}** one **food allergen** from the list of foods and **{click} OK**.
Note: If there is not a food allergen to select from the common list, a partial search should be done to see if there is an existing allergen available in EPR. Free texted allergies are not checked for compliances and therefore must be used as a last option to document allergies.
7. The next mandatory field requires you to **{select}** one **most severe symptom** that the patient presents and **{click} OK**.
8. **{Select}** any **additional symptoms** the patient may present in the **Add'tnl Symptom** field. Here you can document multiple symptoms. **{Click} OK**.

COPYING/FUTURE DIET ORDER

In the event that food allergies are updated or reverified, the existing diet must be re-entered. The 'Copy' feature can be used for this purpose

When making changes to a diet order, the "Change" option should never be used. If a change needs to be made it is best start from scratch or to copy and then edit from the preview pane (shopping cart). In this example we will copy and edit in order to carry over the existing therapeutic diet order and make texture modifications.

1. From the Patient Shortcuts, **{select} Order Entry**.
2. **{Select}** the appropriate **Order Type**.
Note: UHN does not use verbal/written or telephone/written.
3. The **date and time** will automatically populate to the current date and time to the minute. If this needs to be changed, use the drop down menu to do so.
4. **{Select}** the appropriate **Order Author**. If the order author is not listed in the drop down field, use a partial search to enter the correct Order Author.
5. **{Click} OK**.

A screenshot of a software window titled 'Order Entry - Order Information'. It contains several fields: 'Order Type' with radio buttons for Direct, Written (selected), Verbal, Telephone, Verbal/Written, Telephone/Written, and Protocol; 'Order Time' with a text field showing '08-Jul-13 12:17:53' and a dropdown arrow; and 'Order Author' with a text field showing 'Generic,TRI-Physician' and a dropdown arrow. A red rectangular border highlights the 'Order Type' section and the 'Order Time' and 'Order Author' fields.

6. In order entry under the Order History tab, **{select}** the **diet order** you want to copy.

Order Selection Order History Search

Order History Options

Order Type: ☐ All ☒ Active Only

Kardex: ☒ All Orders ☐ Nutrition ☐ TRI/ADT ☐ TRI Assessments ☐ TRI Laboratory ☐ TRI Microbiology

Visit(s): ☐ All ☒ Current ☐ Life Care

Update List

Procedure	Information	Status	Visit Time	Order Time	Author	Kardex	Specialty
NPO	qmeal start at 16 Jul 0700	active	15-Jul-13 11:44	15-Jul-13 13:58	Generic TRI	Nutrition	Q-General M
Therapeutic full, diabetic 1...	qmeal full no restriction, di...	active	15-Jul-13 11:44	15-Jul-13 13:58	Generic TRI	Nutrition	Q-General M

Review Change Discontinue Hold Unhold Copy Order Renew Replace Copy Order Order Summary

7. **{Select}** the **diet** from the Order Preview (shopping cart) and **{click}** on **Edit**.

Cp	Procedure	Order Information	Start Time	Type	Order Set	Advisory	Remove
	Therapeutic full, diabetic 1800kcal/250 g CHO; controlled electrolytes: sodium <100 mmol (2.3 gm); GI SurgDiet high fibre; Dairy Free/Milk Allergy.	qmeal full, no restriction, diabetic 1800kcal/250 g CHO; controlled electrolytes: sodium <100 mmol (2.3 gm); GI SurgDiet high fibre; Dairy Free/Milk Allergy, none	15-Jul sup	new			Edit

8. **{Select}** the **Order Profile** tab.

9. **{Select}** the **When** field.

In this example we are going order a future diet to take place 2 days from now so that when the NPO is lifted the patient will receive a diet order with a consistency change. Here we are going to **{select}** **qmeal** and **start at** and **{click}** **OK**.

Therapeutic full, diabetic 1800kcal/250 g CHO; controlled electrolytes: sodium <100 mmol (2.3 gm); GI SurgDiet high fibre; Dairy Free/Milk Allergy.

Dietary Frequency/Schedule Options

NPO/DAT/Fluid/Therapeutic required element

1	qmeal
2	q breakfast (ONLY)
3	q lunch (ONLY)
4	q supper (ONLY)
optional modifier	
5	start at
Enteral Feeding required element	
6	continuous

10. In the "enter start date/time field **{enter}** the **future date**.

In this example we are going to order the diet to change 2 days from now at breakfast so the format used here is **t+2 0700** and **{click}** **OK**

11. The patient in this example will need a new consistency added to the diet order. **{Select}** the **consistency** field and select the appropriate texture modification. In this example we will **{select}** **dysphagia** and **{click}** **OK**.

Food Allergies: Egg causing: anaphylaxis /hives /itching /nausea /rash

Therapeutic full, diabetic 1800kcal/250 g CHO; controlled electrolytes: sodium <100 mmol (2.3 gm); GI SurgDiet high fibre; Dairy Free/Milk Allergy.

1) When: with each meal start at Wednesday, 17 July 2013 0700

2) Consistency: dysphagia Pureed, honey consistency;

3) Modifier: no restriction;

4) Therapeutic Type: diabetic 1800kcal/250 g CHO; controlled electrolytes: sodium <100 mmol (2.3 gm); GI SurgDiet high fibre; Dairy Free/Milk Allergy;

5) Supplement Feeding: house- ensure: 3 cns per day (vanilla strawberry chocolate);

Food Allergy Facesheet: Egg causing: anaphylaxis /hives /itching /nausea /rash 15Jul2013 1153

6) Food Dislikes: none

7) Medical Directive:

8) Comment:

Select field to edit:

OK Back Keep Cancel


12. **{Select}** the **appropriate consistency** (here we select- ed Pureed,honey consistency).

Note: Remember that you must change the consistency of the supplements if you change the consistency of fluids in a diet.

13.

HELP

If you are having any computer problems, please contact the **HelpDesk**, Ext: 4357 (HELP) or Email: Help@uhn.ca

Nursing EPR eManual: Click this icon  to be taken directly to the eManual for EPR step-by-step instructions

Diet Order Entry Chart: http://documents.uhn.ca/sites/uhn/nutrition/epr/appendixa_quick_reference.pdf

VIEW SCANNED DOCUMENTS

Scanned Documents:

- ◆ Available through View Scanned Documents link in Electronic Patient Record (EPR)
- ◆ Available on all visits that have scanned documents
- ◆ After pick up of Patient Charts, electronic images are available to view within 24 hours
- ◆ For more information http://intranet.uhn.ca/departments/sims/health_records/scanning

Medical Document Viewer

The screenshot displays the Medical Document Viewer interface. At the top, patient information is shown: Name: General, Hpf, DOB: 10/10/1980, Sex: M, Admit Date: 03/26/2014, Age at Encounter: 33 Years, Facility: UHN, Discharge Date: 04/09/2014, Encounter: 11310000769, MRN: 7018385. The left sidebar contains 'All My Documents' and a 'Documents' section with a search bar and a list of document types. The main area shows a 'Doctor's Order Sheet' for the University Health Network. The order sheet includes a section for allergies (NO KNOWN ALLERGIES) and a table for physician orders and signatures. The bottom of the interface features navigating arrows and a search bar.

1	All My Documents: Allows you to view all the different document categories available
2	Document Type: Allows sorting and viewing document list by admit details, encounter number and document type
3	Patient Type: Note that patient type (Inpatient, Clinic, Outpatient) is displayed in document list
4	Patient Demographic/Visit Information: Populated with patient information from EPR
5	Document Viewer: Main viewer of patient documents
6	Navigating Arrows: To navigate within document if multiple pages exist
7	Search: Allows for keyword search within PDF documents (only PDF documents with solid blue dots are searchable)
8	Advanced Filter: Custom filter for user defined criteria . User can create a custom filter to search criteria and display specific document

Navigating in Scanned Documents


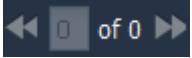







1. Open Scanned Document from Patient Care tab in EPR
2. **Click** on the dropdown box from the Documents tab to Select Document Type or Encounter # (**same as Visit #**)
3. **Click** on the to Expand /Compress view
4. Document will be displayed in the **Document Viewer**
5. **Click** on scrollbar within the document if necessary for viewing

****For TRI Documents only ****

Click the "All My Documents _ TRI " dropdown to make selection then follow **steps 2– 5** from above.

The screenshot shows the Document Type dropdown menu. The menu is open, displaying the following options: Document Type, Admit Details, Admit Details (Compact), Encounter#, Encounter# (DocType-Subtitle-DocDate), Encounter# (DocDate-DocType-Subtitle), and Encounter# (DocType-DocDate-Subtitle).

View Scanned Documents Icon Description List

<u>Icon</u>	<u>Description</u>
	<ul style="list-style-type: none"> Information icon displays additional information on patient demographic and visit
	<ul style="list-style-type: none"> Allow user to navigate in document containing multiple pages
	<ul style="list-style-type: none"> Navigates to previous and next document
	<ul style="list-style-type: none"> Print to default local printer
	<p>Clicking this magnifying glass displays the following 4 navigation options:</p>
	<div>  <ul style="list-style-type: none"> Zoom Fit-to-Width To expand width of document for full view of document </div> <div>  <ul style="list-style-type: none"> Zoom Fit-to-Height To expand height of document for full view of document </div> <div>  <ul style="list-style-type: none"> Rotating Document Rotate right or left depending on the position of document </div> <div>  <ul style="list-style-type: none"> Zoom In and Out on Document Allows for magnification or expansion of document </div>