

The Monthly Navigator



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What is the Navigator?

The Information Services Training Team is pleased to introduce **The Monthly Navigator**, a monthly newsletter designed to keep you informed about the latest issues effecting patient care and Cerner PowerChart.

Information provided in this newsletter is gathered from Information Services, the Nursing Educators Council, and COMPASS Super Users like you!

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If you have any Hints & Tips that you would like to see in this newsletter, contact us at computertraining@carondelet.org.

Basic Patient Data & Isolation Precautions

REMINDER!

Per Carondelet policy:

It is the responsibility of the Nurse to ensure that the Basic Patient Data PowerForm is completed for each patient 1) at least once a day; 2) upon change in patient condition; and 3) upon change in Level of Care.

Failing to complete the Basic Patient Data PowerForm affects every unit that provides care to the patient.

For example, without a documented weight, Pharmacy is unable to dispense weight-dependent medications to patients. Similarly, without isolation status order Infection Control is not able to properly monitor isolation status. In addition,

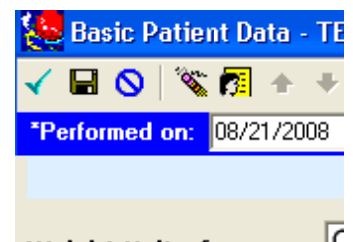
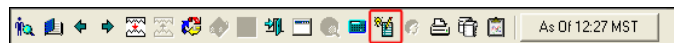
services that require transport do not receive crucial information about the patient.

This is why it is crucial to complete and update a Basic Patient Data and Isolation Precautions PowerForms (if necessary) for every patient.

To access the Basic Patient Data PowerForm:

1. Open a patient's chart.
2. Click the **AdHoc** button on the main toolbar.
3. Click the **Basic Patient Data** check box.
4. Click the **Chart** button.
5. Complete the PowerForm, and then click the green **Sign** button.

Remember to complete a PowerForm for every patient!



AM Lab Collections

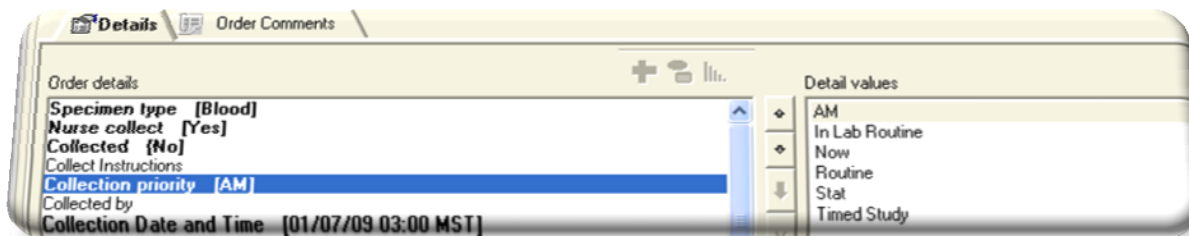
REMINDER!

When you have a lab that needs to be included in the AM draw, ensure that you are selecting **AM** for the **Collection Priority** detail.

If the physician has ordered that the test be drawn every morning set the **Frequency** order detail to **q0300**.

You may also add a **Duration** and a **Duration Unit** details if the AM lab has been ordered for a certain number of days.

Why does it matter? Lab tests ordered with an AM Collection Priority will group together and print on the fewest number of labels possible. If lab test orders are entered with varying collection priorities (such as Timed Study or Routine) then each lab test will print a separate label.



MRI Guidelines for Assessing Claustrophobia

New in PowerChart!

Carondelet Health Network facilities have “closed-ring” Magnetic Resonance Imaging (MRI) machines, which means that patients are imaged in a restrictive environment. Therefore, some claustrophobic patients require extra care.

To ensure we are providing this care, Carondelet now requires you to pre-assess patients for claustrophobia. To assist you with your pre-assessments, your information services team is implementing a new feature in PowerChart.

Starting Tuesday January 13, 2009, all MRI orders entered into PowerChart will **automatically** print an **MRI Guidelines for Assessing Claustrophobia** information sheet in addition to the usual **MRI Inpatient Screen Checklist**.

This new information sheet enables Carondelet to help provide the best care possible for patients undergoing MRI testing.

An example of the MRI Guidelines for Assessing Claustrophobia is included with this newsletter.

MRI In-patient Screen Checklist.

MRI GUIDELINES FOR ASSESSING CLAUSTROPHOBIA

CHN FACILITIES HAVE "CLOSED-RING" MRIS, WHICH MEANS THAT PATIENTS ARE IMAGED IN A RESTRICTIVE ENVIRONMENT. SOME CLAUSTROPHOBIC PATIENTS REQUIRE EXTRA CARE. PLEASE HELP US BY PRE-ASSESSING THE PATIENTS FOR CLAUSTROPHOBIA.

- All MRI anxiolysis requires a physician's order. Radiologist can order the specific meds for the procedure, if not specified.
- Moderate sedation is not performed in MRI. Anxiolytics or anesthesia are offered as alternatives.
- P.O. med orders originate with the ordering physician and are given on the unit prior to MRI scanning.

TYPES OF PATIENT MANAGEMENT SUGGESTED

Meds not usually required

- Patient completed a previous MRI without difficulty
- Patient states no claustrophobia
- Patient verbalizes ability to tolerate MRI procedure
- Patient able to remain supine and motion-free for 30-60 minutes

Oral meds suggested (e.g., Valium, Ativan)

- Previous MRI required oral meds to complete successfully
- Patient states mild fear of enclosed places
- Patient willing to attempt MRI with oral meds

Anxiolysis suggested (e.g., IV meds)

- Previous MRI required IV anxiolysis
- Patient states moderate fear of enclosed places
- Patient is cooperative but restless, so that motion may be an issue
- Slightly confused
- Patient states fear of MRI scanning and has high drug tolerance. For high tolerance, evaluate for anesthesia as an alternative.
- I.V. anxiolysis patients require:
 - Patent IV
 - Pulse dosimetry > 90
 - NPO for 6 hours
 - Family consent on a confused patient, to include name and relationship
 - No consent required for alert/ oriented patients
 - The 3 page sedation record filled out for charting purposes only

General anesthesia suggested

- Restrained, combative, threatening staff
- Dementia, Alzheimer's, severely mentally/emotionally challenged
- Patient states need for general anesthesia to attempt MRI
- Patient experiences diaphoresis, tachycardia, or hyperventilates in enclosed spaces.