Advanced EMR Manager Training

Presenter: Carlos Salgado



Innovating for better health

Continuing Education Disclosures

Commercial Support – None

Speaker or planner conflicts of interest – None

For CME and CNE credit or an Attendance Certificate -Full session attendance and completion of an on-line evaluation is required.

Link to the evaluation is on the AllianceChicago Conference App

Thank you!

METASTAR Higher quality. Healthier lives.

Today's Training Agenda

| Торіс | Discussion | Time |
|---------------------------|--|------------------|
| Welcome and Introductions | Welcome to the Session! | 8:00 – 8:05 am |
| EMR Managers Roles & Jobs | Open discussion about tasks expected from EMR Managers | 08:05 – 8:25 am |
| End User Training | Review of current training plans for new staff | 8:25 – 8:45 am |
| Administration Module | Deep Dive Covering Popular Administration Module sections w/ Questions | 8:45 – 11:05 am |
| CPS Tips and Tricks | EMR Manager related tips and tricks (training + configuration) | 11:05 – 11:25 am |
| How do I | Open Topic Q&A | 11:25 – 11:55 am |
| Wrap Up + Survey | Review of topics, questions, and Survey Completion | 11:55 – 12:00 am |



Introductions

- •Name
- Job Title
- Organization



Polling Question 1

What is your Primary Role?

- A. EHR Support/Troubleshooting
- B. Reporting
- C. Maintenance
- D. EHR Training
- E. IT
- F. Other
- G. I'm just here for the free cookies



Polling Question 2

What is your Secondary Role?

- A. EHR Support/Troubleshooting
- B. Reporting
- C. Maintenance
- D. EHR Training
- E. IT
- F. Other
- G. Sad that there are no cookies



Polling Question 3

What is your Tertiary Role?

- A. EHR Support/Troubleshooting
- B. Reporting
- C. Maintenance
- D. EHR Training
- E. IT
- F. Other
- G. At least we got free water



Polling Results

<u>https://events.bizzabo.com/alliancechicago/polls/09909/wall</u>



EMR Managers Roles & Job Descriptions



EMR Managers Role & Job Descriptions

- Discussion Questions:
 - What are the roles & responsibilities of the EMR Manager at your organization?
 - How is your job description the same or different amongst your organizations?
 - What is the expectation for training staff?
 - Describe your training program
 - Is training a core role for the EMR Manager?
 - What are the gaps in training?
 - What are the biggest challenges you face in your role?



Best Practices: End User Training at the Health Center Level



EMR Managers: Training Day

- What is the goal of training?
 - Teach new users on functionality
 - Teach my Health Center's workflow
 - Get the users comfortable with how to use the EMR
 - Identify a go-to person that users can come to and ask questions.



Training Strategies





Trainings that are provided to staff using EHR system

- Basic functionality
- Provider workflows
- Clinic Managers
- CareCoordination/CareManage ment
- Quality Managers
- MA/RN workflows
- Outreach Programs
- Behavioral Staff

- Administrative Trainings
- Interns
- Front Desk Staff
- Dental Staff
- Medical Records
- Referral Coordinators
- X-Ray/Lab Techs
- Refresher Courses



Basic Chart Module - Training checklist

| Employee Name: | |
|----------------------------|---|
| Checklist Completion Date: | |
| Trainer(s): | · |

| (X) when | Centricity Function | Trainers |
|----------|---|----------|
| complete | | Initials |
| complete | LOG IN | Initialo |
| | Windows | 1 |
| | Centricity | |
| | CHART MODULE – DESKTOP VIEWS | 1 |
| | Summary view: | |
| | Find patient button | |
| | Open chart | |
| | Alerts and flags view: | |
| | View other user flags | |
| | View removed flags | |
| | Document view: | |
| | View other user documents | |
| | Comments | |
| | PATIENT CHART | 1 |
| | Find a Patient | |
| | Patient Banner | |
| | Chart Summary: | |
| | Problems | |
| | Medications | |
| | Allergies | |
| | Directives | |
| | Alerts/Flags | |
| | Documents | |
| | Flowsheet | |
| | Orders | |
| | Histories | |
| | Registration | |
| | Phone note button | |
| | Renew RX button | |
| | Print Button | |
| | New Flag button | |
| | DOCUMENTATION | |
| | New Document: | |
| | Encounter Types | |
| | Confidentiality type | |
| | Documents: | |
| | Document views | |
| | Sign, append, route | |
| | Sorting | |
| | View Attachments | |
| | CHART DOCUMENT | |
| | Forms | |
| | Add favorite forms | |
| | End document | |
| | OTHER | 1 |
| | | |



Employee signature: _____

_Date:____

End User Training: Best Practices

New Employee

- Build into organization orientation
- Structured training by role
- Paired with current employee
- Current Employee
 - OJT
 - Classroom
 - CBTs
- Optimization
 - Department Meetings
 - OJT



End User Training: Best Practices

- Schedule your new users for Computer Based Training Modules (CBT)'s
 - AllianceChicago can help you facilitate these
 - These are a good online resource for getting started with Centricity, including for front desk staff, billers, & clinical users (providers/nurses)
- Clinics who excel utilize their established super-users to help train in the classroom & do OTJ training with new users
 - Some clinics send new users to established clinics to shadow/learn OTJ
 - A combo of classroom & OTJ is recommended for new users



CBT Trainings

- CBTs should be used to *support* the health center hands-on user training on CPS 12. They can be used for both new hires and current employees
 - NOTE: GE CBTs are specific to standard GE modules. The CBTs do NOT provide training on health center specific workflows or Alliance content
- Alliance Suggestions:
 - CBTs can be part of the health center onboarding process for new hires
 - Provide a pre-requisite work for new hires before they receive their health center training
 - Highlight a specific CBT in a provider training/meeting or EMR team meeting
 - Use CBTs as refresher training for current users



Optimization Training

- Optimization training is key for:
 - Established users to continue to improve with their skills and documentation
 - Sites to control consistency in skills and documentation amongst users
 - Providing continued education to users which shows the importance of such continued training opportunities at your organization
 - Providing a venue for your established super-users to train others in their specialty group



Optimization Training

- Optimization training:
 - Is recommended on a consistent basis, such as at provider meetings, team meetings, all staff meetings, etc.
 - Topics can be gathered from resources from AOC and our supporting vendors (i.e. Ignis, Visualutions, etc.)
 - Time allotted depends on category to be trained around
 - Quick tips could be a ¹/₂ hour at every provider meeting
 - Internal improvement projects could be an hour at every all staff meeting, i.e. improved documentation of smoking status



Audits & Training Report Cards

- Reports & Chart Audits
- Optimization Checklist & Shadowing
- Report Card



| 55 | QUALITY MEASURES (MU, PCMH, CDC, UDS, QI) (1 pt each) | 40 Points | |
|-----|---|-----------|--------|
| 56 | Vital signs (2 pt each) | | |
| 57 | BMI Documented (Goal 80%) (QI/UDS/MU) | 0 | |
| 58 | Weight Management Checkbox (QI/MU) | 0 | |
| 59 | BP Documented (Goal 80%) (UDS/MU) | 0 | |
| 60 | Initial Intake | | |
| 61 | Medications Reviewed (Goal 80%) (MU) | 0 | |
| 62 | Allergies Reviewed (Goal 80%) (MU) | 0 | |
| 63 | No Known Allergies documented (MU) | 0 | |
| 64 | Depression Screening | | |
| 65 | PHQ-9 documented (QI) | 0 | |
| 66 | PHQ-2 documented (QI) | 0 | |
| 67 | Smoking Status | | |
| 68 | Smoking Status documented (Goal 50%) (MU) | 0 | |
| 69 | Tobacco use documented (MU) | 0 | |
| 70 | Patient advised to quit (MU) | 0 | |
| 71 | Alcohol & Drug | | |
| 72 | Alcohol recorded (Goal 50%) (MU) | 0 | |
| 73 | Drug documented (Goal 50%) (MU) | 0 | |
| 74 | MU Checklist | | |
| 75 | Problems Reviewed (Goal 80%) (MU) | 0 | |
| 76 | RX sent electronically (Goal 40%) (MU) | 0 | |
| 77 | Clinic Visit Summary Printed (Goal 50%) (MU) | 0 | |
| 78 | Cancer Screening | | |
| 79 | Mammogram documented (QI/MU) | 0 | |
| 80 | Pap Documented (UDS) | 0 | |
| 81 | Colonoscopy documented (UDS/MU) | 0 | |
| 82 | PSA Documented | 0 | |
| 83 | Diabetes (PCMH) | | |
| 84 | Use of Diabetes Management form | 0 | |
| 85 | Document HBA1C (QI) | 0 | |
| 86 | Document Eye Exam | 0 | |
| 87 | CAD (PCMH) | | |
| 88 | Use of Cardiovascular Disease Management form | 0 | |
| 89 | Medication Prescribed (MU) | 0 | |
| 90 | Asthma (QI) | | |
| 91 | Use of Asthma Management form (QI) | 0 | |
| 92 | Appropriate DX code used (QI) | 0 | |
| 93 | Medications prescribed (QI) | 0 | |
| 94 | Immunizations (QI) | | |
| | Pneumococcal Documented (QI) | 0 | |
| 96 | Adult Influenza (QI) | 0 | |
| 97 | Childhood Immunizations (QI) | 0 | |
| 98 | Education | | |
| | Use of Adult HM & Ed form | 0 | |
| | Use of Bright Futures form | 0 | |
| | Use of Women's Health Education form | 0 | |
| | Medicare Encounters | | |
| | Use of Medicare forms | 0 | |
| | Use of Medicare Orders custom list | 0 | |
| 105 | Total | 0 | 0% |
| | OTHER: | | |
| 106 | | | |
| 107 | | | |
| 108 | | Pts | % |
| 109 | 80-100% Expert (no further training required) | 59 | 73.75% |
| 110 | 60-79% Intermediate (quartley optimization) | | |
| 111 | 40-59% Basic (1hr training & one month optimization) | | |
| 112 | 0-39% Poor (4hr training & one month optimization) | | |
| | | | 1 |



| Care Alerts & Pop Ups | |
|--|-----------|
| Set future care alerts | |
| Set pop up alerts and expiration dates. | |
| QUALITY MEASURES (MU, PCMH, CDC | UDS OD |
| Vital signs | , 020, 21 |
| BMI Documented (Goal 80%) (QI/UDS/MU) | |
| Weight Management Checkbox (QI/MU) | |
| BP Documented (Goal 80%) (UDS/MU) | |
| Initial Intake | |
| Medications Reviewed (Goal 80%) (MU) | |
| Allergies Reviewed (Goal 80%) (MU) | |
| No Known Allergies documented (MU) | |
| Depression (PCMH) | |
| PHQ-9 documented (QI) | |
| PHQ-2 documented (QI) PHQ-2 documented (QI) | |
| Smoking Status | |
| | |
| Smoking Status documented (Goal 50%) (MU) | |
| Tobacco use documented (MU) | |
| Patient advised to quit (MU) | |
| Alcohol & Drug | |
| Alcohol recorded (Goal 50%) (MU) | |
| Drug documented (Goal 50%) (MU) | |
| MU Checklist | |
| Problems Reviewed (Goal 80%) (MU) | |
| RX sent electronically (Goal 40%) (MU) | |
| Clinic Visit Summary Printed (Goal 50%) (MU) | |
| Cancer Screening | |
| Mammogram documented (QI/MU) | |
| Pap Documented (UDS) | |
| Colonoscopy documented (UDS/MU) | |
| PSA Documented | |
| Diabetes (PCMH) | |
| Use of Diabetes Management form | |
| Document HBA1C (QI) | |
| Document Eye Exam | |
| CAD (PCMH) | |
| Use of Cardiovascular Disease Management form | |
| Medication Prescribed (MU) | |
| Asthma (QI) | 1 |
| Use of Asthma Management form (QI) | |
| Appropriate DX code used (QI) | |
| Medications prescribed (QI) | |
| Immunizations (QI) | |
| Pneumococcal Documented (QI) | |
| Adult Influenza (QI) | |
| Childhood Immunizations (QI) | |
| Education | |
| Use of Adult HM & Ed form | |
| Use of Bright Futures form | |
| Use of Women's Health Education form | |
| Medicare Encounters | 1 |
| Use of Medicare forms | |
| Use of Medicare Orders custom list | |
| | |



10 Minute Break!



Administration Module Deep Dive



CPS Administration Module

- The engine of the CPS application
- Set Up Components for:
 - End User Access
 - Practice Management Functionality
 - Chart Functionality
 - Permissions/Securities
 - Interface setup



Administration Module Overview: EMR

Areas of the Administration module that should be Mastered

- Charts
 - Electronic Prescriptions
- Charts > Chart
 - Administered Medication Custom Lists
 - Flowsheet Views
 - History Views
 - Patient banner
 - Quick Text
- Chart > Chart Documents Folder's
 - Document Template
 - Encounter Types

- Chart > Handout's
- Codes > Charts > Orders Custom Lists
 - Best practices on how to set it up orders
 - Highlight on how a site optimized their referral set up
- Codes > Codes and Categories
- System > User and Resource Management > User > Security
 - Please reference Securities & Permissions excel spreadsheet for CPS 12



Administered Medication Custom List

ALLIANCE TIPS/RECOMMENDATIONS

- Med Admin form must be built out with a clinical eye on it to look at sites, manufacturers, name of medication and so on.
- **Special Characters are NOT recommended** ANYWHERE in the med admin form. Periods are ok, NO "/" including in the <u>name</u> of the list. This can cause major issues even processing the medication. Ex: mg/ml.
- **Doses:** keep that just numeric.
- Build the form from scratch that would be the recommendation. Do not work off the GE lists
- Each medication has at least one manufacturer if no manufacturer, you can't put in the lot number.
- Recommendation to put in each medication (See Comments) as the form requires a manufacturer. That way, when the nurse / med assistant is putting in a medication and they don't see the manufacturer, they can choose "see comments" and then the manufacturer can go in the comments.
- **<u>Reminder</u>**: You have to go into a test patient to put the lot #s in based on that manufacturer.
- Have the "Auto Generate Orders" button checked. ALL people must have this checked
- Do not delete out the *medication administration list*; because this is what makes the form work. One list is in the medication admin section, another one is in the services.
- NDC Codes: if you are OK with the default NDC that comes from the GE reference list, when we call that into the form that is
 defaulted. Otherwise, add all NDC known NDC codes to the list



Medication Administration - Location

- Find the Med Admin Section
 - Administration Module → Charts → Chart → Administered Medication Custom Lists

| 🔑 Administration | « | -Chart > Administered Medication Custom L | .ists |
|--|---|--|-------|
| Charts Desktop Document Views Electronic Prescriptions Internet Sites MQIC Chart Administered Medication Custom Lists Allergy Custom Lists Coding Requirements | | Injections IV Solutions Other Medications Testing Medications Topicals | |



Medication Administration – How to

 Select a custom list you will be adding the medication to and click "Add New Medication"

| 🄑 Administration | <u> </u> | | > Administered Medication Custor | m Lists – | | |
|--|----------|--------|-------------------------------------|-----------|--------|---|
| Charts Desktop Document Views Electronic Prescriptions MIC MQIC Chart Administered Medication Custom Lists | | Other | utions Change Medications Remove | | | |
| - 😭 Allergy Custom Lists - 😭 Coding Requirements - 😭 Document Views | - | njecti | ions | | | |
| | | O D | emerol 25 mg/ml Inj Soln | Change | Remove | 1 |
| Flowsheet Views | | O D | emerol 50 mg/ml Inj Soln | Change | Remove | |
| 🗃 History Views | | O D | emerol 75 mg/ml inj Soln | Change | Remove | |
| - 🕞 Immunization Custom Lists - 🕞 Join Updates | | O D | emerol 100 mg/2ml Inj Soln | Change | Remove | |
| | - | O P | henergan 25 mg/ml Inj Soln | Change | Remove | |
| | | O P | henergan 50 mg/ml Inj Soln | Change | Remove | |
| [CQR Register Member] | | R | tocephin 500 mg Inj Solr | Change | Remove | |
| Chart Desktop | | R | tocephin 1gm Inj Solr | Change | Remove | |
| Chart | | к | etorolac Tromethamine 15 mg/ml Soln | Change | Remove | |
| Chart Reports | | к | etorolac Tromethamine 30 mg/ml Soln | Change | Remove | |
| Chart LinkLogic | | к | etorolac Tromethamine 60 mg/ml Soln | Change | Remove | |
| Scheduling | | Add | l New Medication | | | |



Medication Administration – How To Continued

• You will then see the medications reference list appear. Search the medication you would like to add and select OK.

| iearch <u>b</u> y: | | Search <u>m</u> ethod: | | Search <u>f</u> or: | | | |
|---|---------|------------------------|------------|---------------------------|------------|---------|---|
| <eyword< th=""><th>•</th><th>containing</th><th>×</th><th>metformin</th><th></th><th>ch</th><th></th></eyword<> | • | containing | × | metformin | | ch | |
| earch <u>r</u> esults: | | | | | | | |
| | and Nam | - | | Generic Name | Туре | Avg. \$ | ^ |
| ACTOPLUS MET 15- | | | | ZONE HCL-METFORMIN HCL | Rx Brand | 11.46 | |
| ACTOPLUS MET 15- | | ORAL TABS | | ZONE HCL-METFORMIN HCL | Rx Brand | 11.46 | = |
| ACTOPLUS MET TAI | | | | ZONE HCL-METFORMIN HCL TA | | | |
| ACTOPLUS MET XR | 15-1000 | MG ORAL XR24H | 1 PIOGLITA | ZONE HCL-METFORMIN HCL | Rx Brand | 12.41 | |
| | | | | ZONE HCL-METFORMIN HCL | Rx Brand | 24.61 | |
| ACTOPLUS MET XR | | | | ZONE HCL-METFORMIN HCL XR | | | |
| ALOGLIPTIN-METFO | RMIN HO | L 12.5-1000 MG O | R ALOGLIF | TIN-METFORMIN HCL | Rx Generic | 3.90 | |
| | | | | TIN-METFORMIN HCL | Rx Generic | 3.90 | |
| ALOGLIPTIN-METFO | | | | TIN-METFORMIN HCL TABS | | | |
| FORTAMET 1000 MC | GORAL | XR24H-TAB | METFOR | MIN HCL | Rx Brand | 39.82 | |
| FORTAMET 500 MG | | R24H-TAB | METFOR | | Rx Brand | 39.82 | |
| FORTAMET XR24H- | | | | MIN HCL XR24H-TAB | | | |
| GLIPIZIDE-METFORM | | | | | Rx Generic | 0.83 | |
| GLIPIZIDE-METFORM | IN HCL: | 2.5-500 MG ORAL | GLIPIZID | E-METFORMIN HCL | Rx Generic | 0.99 | |
| GLIPIZIDE-METFORM | IN HCL | 5-500 MG ORAL TA | E GLIPIZID | E-METFORMIN HCL | Rx Generic | 1.02 | |
| GLIPIZIDE-METFORM | IN HCL | TABS | GLIPIZID | E-METFORMIN HCL TABS | | | |
| GLUCOPHAGE 1000 | MG OR | AL TABS | METFOR | MIN HCL | Rx Brand | 2.44 | - |
| | | LITARC | | MIN HOL | Dy Brand | 4 4 0 | |



Medication Administration

Once the medication is selected, you are able to change the display name. Do not include "/" or "\" in the names of the medications. An example of this is using "mg/ml", instead write "mg per ml", or "mg ml".

| Display Name | ACTOPLUS MET 15-500 MG ORAL TABS | Lookup |
|-----------------|----------------------------------|--------|
| Reference Name | ACTOPLUS MET | |
| DDID | 97256 | |
| Order | | Change |
| NDC | [1 defined] | Change |
| Route(s) | [0 defined] | Change |
| Site(s) | [0 defined] | Change |
| Dose(s) | [0 defined] | Change |
| Unit(s) | [0 defined] | Change |
| Manufacturer(s) | [0 defined] | Change |
| | | |
| | | |



Medication Administration Setup

| \$ | Edit Medication | - 🗆 X | & | NDC List | _ | |
|--------------------|----------------------------------|---------|--|----------|--------|--------|
| Display Name | ACTOPLUS MET 15-500 MG ORAL TABS | Lookup | 64764015560 64764015 64764015 64764015 64764015 64764015 64764015 6476401 6476401 6476401 6476401 6476401 | | Change | Remove |
| Reference Name | ACTOPLUS MET | | | | | |
| DDID | 97256 | | | | | |
| Order | | Change | | | | |
| NDC | [1 defined] | Change | | | | |
| Route(s) | [0 defined] | Change | | | | |
| Site(s) | [0 defined] | Change | | | | |
| Dose(s) | [0 defined] | Change | | | | |
| Unit(s) | [0 defined] | Change | | | | |
| Manufacturer(s) | [0 defined] | Change | | | | |
| Lot Number?? | ?? | | Add New NDC Default item | | | _ |
| | ОК | Canceli | | | | Close |



Medication Administration Setup Cont.

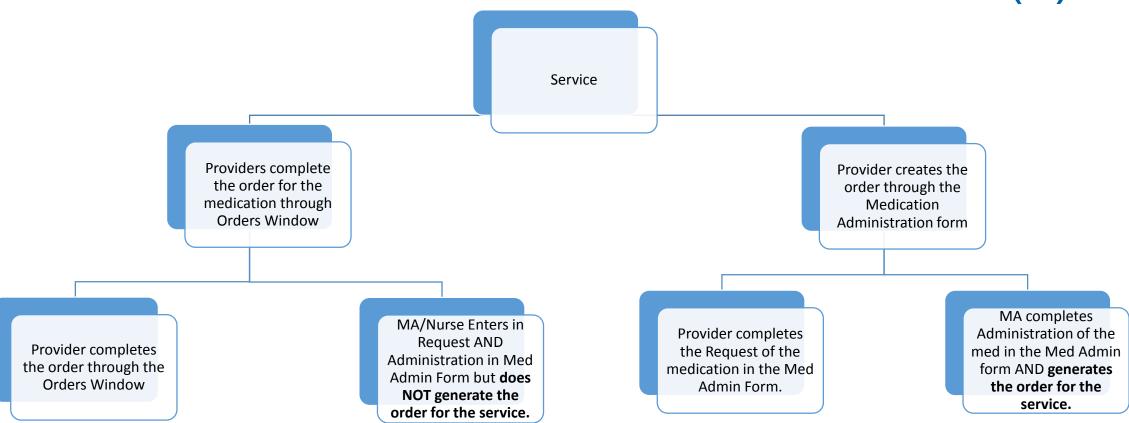
- Enter options for
 - NDC
 - Route(s)
 - Site(s)
 - Dose(s)
 - Unit(s)
 - Manufacturer(s)

REMEMBER!

- Leave the "Order" blank if your providers will be ordering the medication from the orders module. This "Order" section is meant to generate the order automatically for providers ordering from the HTML Form.
- Talk with your Clinical Staff on the specific Routes, Sites, and Doses to only include options that will actually be used per medication.



Medication Administration Workflow(s)



() AllianceChicago

Provider uses Orders Window

The "Order" portion in "Edit Medication" remains empty.

Why?

- Because the provider is ordering the administration of this medication via the orders window.
- We don't want duplicate orders being created.

| 4 | 80 | Edit Medication | • | - 🗆 X |
|---|-----------------|--------------------------|----|--------|
| | Display Name | TYLENOL 325 MG ORAL CAPS | | Lookup |
| | Reference Name | TYLENOL | | |
| | DDID | 193727 | | |
| | Order | | | Change |
| | NDC | [1 defined] | | Change |
| | Route(s) | [3 defined] | | Change |
| | Site(s) | [3 defined] | | Change |
| | Dose(s) | [2 defined] | | Change |
| | Unit(s) | [1 defined] | | Change |
| | Manufacturer(s) | [3 defined] | | Change |
| | | | | |
| | | | | |
| | | | OK | Cancel |



Want to have Autogenerated orders?

- Having autogenerated orders will work best if your providers are NOT using the orders module and instead are using the HTML forms. Once the Administration of the medication is completed, the orders will be generated.
- The next steps will show:
 - Selecting your Service order
 - Selecting the correct medication item
 - Location of where your Service orders are being pulled from in Centricity.



Alternative: Provider orders from Med Admin Form

| 8 | Edit Medication | _ 🗆 X | | | | | |
|--|---|--|---|---------------|------------------|--|------------|
| Display Name Reference Name DDID Order NDC Route(s) Site(s) Dose(s) | TYLENOL 325 MG ORAL CAPS TYLENOL 193727 [1 defined] [0 defined] [0 defined] [0 defined] [0 defined] [0 defined] | Lookup Change Change Change Change Change Change Change | Order Type Order Category Order Description Order Priority Diagnosis Code(s) Diagnosis Description(s) Comment | Add New Order | Lookup Lookup | Select Category Dental E&M Services Enabling Services GEImmunizations IV Solutions Immunization Administration | y <u> </u> |
| Unit(s) Manufacturer(s) | [0 defined] [0 defined] | Change | Modifier(s) Units | OK | Cancel | Immunizations Injections Medicare eRx Incentive Medication Administration Office Services | OK Cancel |

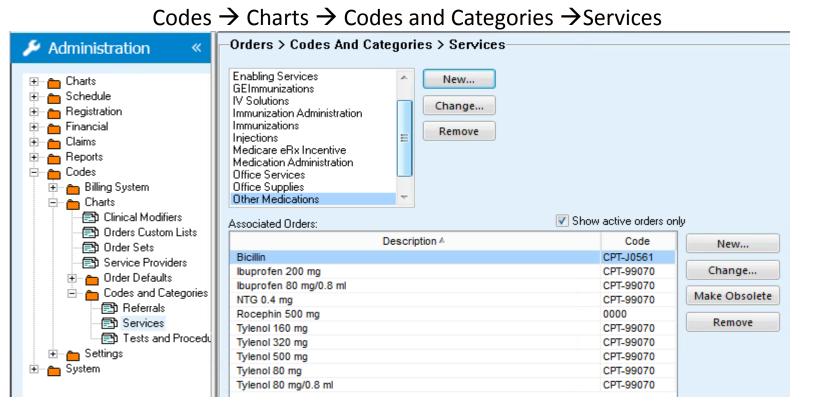


Alternative: Provider orders from Med Admin Form

| 20 | Add New Order | _ 🗆 X | 8 | 2 | Select Code | _ D X |
|--------------------------|-------------------|--------|---|------------------------|-------------|--------------|
| Order Type | Services 🔻 | | | Bicillin | | |
| Order Category | Other Medications | Lookup | | Ibuprofen 200 mg | | |
| Order Description | | Lookup | | lbuprofen 80 mg/0.8 ml | | |
| Order Priority | | r | | NTG 0.4 mg | | |
| Diagnosis Code(s) | | Lookup | | Rocephin 500 mg | | |
| Diagnosis Description(s) | | | | Tylenol 160 mg | | |
| Comment | | | | Tylenol 320 mg | | |
| Modifier(s) | | | | Tylenol 500 mg | | |
| Units | | | | Tylenol 80 mg | | |
| | | | | Tylenol 80 mg/0.8 ml | | |
| | | | | Tylenol 60 mg/0.8 mi | | |
| | | | | | | |
| | ОК | Cancel | L | | ОК | Cancel |



Location of Order for Medication Administration





Medication Administration Setup

Questions?





CPS Tips & Tricks // EMR Manager Tips & Tricks



Easy Wins

- What are Easy Wins? (As defined by Carlos)
- Items that can be created a single time and used by all staff in that department, role, or facility.
- Examples:
 - Document Views
 - Quick texts
 - Reports



Document Views *LIVE DEMO*

To set up chart document views

- 1 In Administration , select Charts > Chart > Document Views.
- 2 For Show Document Views for, select Global List or an individual user.
- 3 Select from the following:
 - New Create a new document view.
 - Change or Copy Change a selected view or use it as a template.
 - Remove Delete an existing document view from the database.
- 4 On the New / Change or Copy Document View window, select an individual user or Global Listto make the view available to all users.
- 5 Enter a unique **View Name** that describes the view documents. For example, *Lab Reports* or *Transcription*.

This name appears as a folder in the view panel of the Chart Documents list; it contains the document types you select in the next step.

Note. To replace an existing view with your changes, enter the name of that view.

6 To customize the view, check the **Document Types**, **Locations**, **Confidentiality Types**, and **Document Status** you want to include.

Note. All users can view documents with a Normal confidentiality type. Only users with the relevant confidential documents privileges can view other types.

7 Click OK.



Quick Text

- EMR Managers/Techs don't use quick text. Why focus on it?
- Learning Quick text is the foundation of using other sections of Centricity Effectively.
- What is a quick text? You type in a series of characters and it gets replaced by up to 256 Characters.
- Example of a common/basic quick text:

.CP = Patient presents with History of Chest Pain. Pain is sharp and lasts X minutes and is relieved with X



Quick Text from EMR Managers

- Example of a slightly more complex Quick text that EMR Managers should be able to do:
- .wcc = -Appropriate G & D
 - Age is {PATIENT.FORMATTEDAGE}

- Weight today is **{LASTOBSVALUE("WEIGHT")}**lbs., BMI is **{LASTOBSVALUE("BMI")}**, which is **{LASTOBSVALUE("BMI%ILE")}**% for age.

- Vaccines given:
- Lab orders:

- Hemoglobin result is {LASTOBSVALUE("HGB")} on {LASTOBSDATE("HGB")}. Lead result is {LASTOBSVALUE("LEAD,BLOOD")} on {LASTOBSDATE("LEAD,BLOOD")}.

- -School Physical Given
- PPD Placement
- Anticipatory guidance provided

.ChickenHx = {If OBSANY("HX CHICK POX") = "1999" Then "Vaccinated" Else "Not Vaccinated" Endif}



Quick Text Continued

So now what?

- The reason why the first step is learning quick text is due to the how you can apply this knowledge to building letters and history views.
- For example, there was a health center that built out a History view for items providers would like to see in a single page (lab results, vitals, histories).
- This will make your staff HAPPIER.



BREAK: 10 Minutes



"How Do I"

Q&A Administration



Administration Module Overview: EMR

Charts

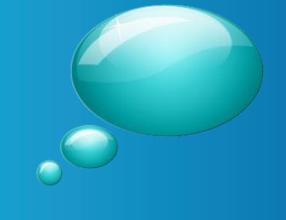
- Electronic Prescriptions
- Charts > Chart
 - Administered Medication Custom Lists
 - Flowsheet Views
 - History Views
 - Patient banner
 - Quick Text
- Chart > Chart Documents Folder's
 - Document Template
 - Encounter Types

- Chart > Handout's
- Codes > Charts > Orders Custom Lists
 - Best practices on how to set it up orders
 - Highlight on how a site optimized their referral set up
- Codes > Codes and Categories
- System > Auditing (Clinical)
- System > User and Resource Management > User > Security
 - Please reference Securities & Permissions excel spreadsheet for CPS 12



Thank You Questions & Thoughts?







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