

PowerChart Tip Sheet



Admit Workflow/ History & Physical/ Consult– Providers Guide

September 2015

What's the change?

Beginning on September 14th, 2015, changes to PowerChart will enhance your Admission process and take another step towards a complete electronic medical record. *The use of this new dynamic documentation process in PowerChart will be required for ALL non-elective Admission H&P's and ALL consult notes.*

Click on the link to jump to information about the enhancement:

- [Admit Workflow](#)
- [Improved Consolidated Problems](#)
- [H&P Note Type/ Note Template](#)
- [Consult Note Type/ Note Template](#)
- [Refuse a Document](#)
- [Carbon Copy options](#)

Admit Workflow

A new tab, Admit, is a workflow designed to let you review, validate, and update shared historical data and document essential components of H&P and Consult note.

Many of the components on the Admit Workflow are similar to components you already use on the Manage workflow.

Some departments will have different components based on their workflow. Please refer to the department specific H&P job aid for more information.

Admission Data & Goals of Care

Displays the Medication History Priority of the patient for admission and any Goals of Care documentation.

If Admission Med History review was done by a pharmacist or nurse under Results, it will show completion marked by Yes.

	Result	Date/Time
Results (1)		
Admission Med History Review Pharmacy	Yes	07/24/15 16:05
Forms (1)		
Goals of Care	Auth (Verified)	08/13/15 13:56

Completed Goals of Care forms can be accessed. You can also launch the Goals of Care Form by clicking the dropdown arrow and selecting Goals of Care. (A).

For more information, see the Goals of Care job aid.

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Documents

Documents is similar to Manage Workflow

Not all Documents types will display here.

You'll see the last 50 documents for the past year (across encounter) of these types:

- H&P
- Consults
- Discharge Summary and Planning
- ED Documents
- OP reports

Check **Group by Encounter (A)** to sort the documents by encounter and make it easier to distinguish which notes belong with which encounter.

Documents (13)						
Last 50 Notes Last 1 years Last 3 months More						
<input type="checkbox"/> My notes <input checked="" type="checkbox"/> Group by encounter Display: Facility defined view						
Time of Service	Subject	Note Type	Author	Last Updated	Last Updated By	
Emergency	A	06/15/15				
06/15/15 13:42	ED Teaching Physician Record	ED Teaching Physician Record	McGhee DO, Jonathan D.	06/15/15 15:10	McGhee DO, Jonathan D.	
06/15/15 13:40	ED Physician Record - Resident/PA	ED Physician Record	Hansen DO, Michael J.(resident)	06/15/15 16:24	Hansen DO, Michael J.(resident)	
Inpatient	A	05/19/15				
05/22/15 11:03	Ongoing Discharge Planning Assessment	Ongoing Discharge PlanningAssessmentNot e	Elwood, Laura	05/22/15 11:03	Elwood, Laura	
05/20/15 11:08	CV 2D ECHO W/CF AND DOP	Transthoracic Echocardiogram	Marmo DO, Vincent J.	05/20/15 15:28	Marmo DO, Vincent J.	
05/20/15 10:40	Pulmonary Consult Note	Consult	Stewart MD, Jeffrey I.	05/20/15 11:08	Stewart MD, Jeffrey I.	
05/20/15 07:22		H&P	Burkhart-Smith PA-C, Colleen E.	05/20/15 07:23	Burkhart-Smith PA-C, Colleen E.	
05/19/15 15:19	Advance Directives Assessment	Advance Directives Assessment	Dignan, Erin E.	05/19/15 15:19	Dignan, Erin E.	
05/19/15 13:58	Ongoing Discharge Planning Assessment	Ongoing Discharge PlanningAssessmentNot e	Morris, Elaine	05/19/15 13:58	Morris, Elaine	
05/19/15 13:56	Initial Discharge Planning Assessment	Initial Discharge PlanningAssessmentNot e	Morris, Elaine	05/19/15 13:56	Morris, Elaine	

Use the Display filter to selectively limit the document that display.

Click the **Display** dropdown (B).

Uncheck **Facility defined view**.

Check the boxes next to the type of documents you want to display.

Then click **Apply**.

Only those documents types will display.

To see all available documents again, click the display dropdown and click Reset All and Apply.

Group by encounter | Display: Facility defined view

☒ Facility defined view

☐ H & P

☐ Consults

☐ Discharge Summary

☐ Discharge Planning

☐ ED Documents

☐ Op Reports

☐ External Documentation

Reset All | Apply | Cancel

Click on a document to open a preview. If you need to open the document for tagging, click **Open Document**.

Home Medications

A list of all documented home medications taken by a patient, including medication from previous hospital visits

Verify the list has been updated this encounter.

Medication reconciliation status bar

- Green check mark next to Meds History (A) indicates the list was verified this visit.
- Can launch Admission Meds Rec by clicking the link (B).

Home Medications (6)			
Status: <input checked="" type="checkbox"/> Meds History <input type="checkbox"/> Adm. Meds Rec <input type="checkbox"/> Disch. Meds Rec			
Medication	Last Dose Date/Time	Compliance	Compliance Comments
Hx: aspirin-dipyridamole (AggRENOX) 1 CAP, PO, BID	--	--	--
Hx: atorvastatin (atorvastatin.) 0 Refill(s)	--	--	--
Hx: calcium-vitamin D (Calcium with Vitamin D) PO	--	--	--
Hx: donepezil (donepezil.) 0 Refill(s)	--	--	--
Hx: ferrous sulfate (Iron) 325 MG, PO	--	--	--
Rx: FUROSemide (Lasix 20 mg oral tablet) 20 MG, 1 TAB, PO, Daily, 30 TAB	--	--	--

Home Medication: aspirin-dipyridamole (AggRENOX)

Order Details: 1 CAP, PO, BID, 0 Refill(s)

Order Comments:

Order Date: 01/25/2013

Order Entered By:

Type: Documented

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Allergies

Displays any documented allergy information

You can add and modify allergies directly in the workflow.

1. Type the allergy into the Add Allergy field.
2. Select the Allergy category.
3. Click Save.
4. Once added, view the detail pane for more information by clicking on the allergy.
5. To change information about that allergy, click Modify.
6. Change information in the fields provided.
7. Click Save to save changes; click Cancel to discard Changes.

Substance	Severity	Reactions	Reaction Type
No Known Medication	--	--	Allergy
Allergies			
Strawberry	Mild	Hives	Allergy
Peanut	--	--	--

Vital Signs +
No results found

Past Medical Hx (Problems)

Selected visit: Latest*

Strawberry

Reactions
Add reaction

Hives

Severity: Mild
Reaction Type: Allergy
Category: Food
Status: Active
Reason:

Histories

Manages Chronic Problems (Past Medical History)

Problems Tab

A list of Chronic (ongoing) and Resolved (resolved chronic) Problems.

Click on a problem to open the preview pane.

- Use Modify to change problem details.
- Use Resolve to make the problem historical, not ongoing; it will move the problem to the Resolved section.
- Use Cancel to remove it as a chronic problem.
- Use the X to close the preview.

You can add new chronic problems by using **Add problem** search field.

Problems (6) | Procedure History (1) | Family History (0) | Social History (0) | Pregnancy (0)

Add problem

Name	Classification
Chronic Problems (4)	
Chronic kidney disease stage 3	Medical
Dementia	Medical
HTN - Hypertension	Medical
Hypercholesterolemia	Medical
Resolved Problems (2)	
Absolute anemia	Medical
Leg laceration	Medical

Hypercholesterolemia

Onset Date: --
Problem Type: Chronic
Status: Active
Classification: Medical
Confirmation: Confirmed

Procedures Tab

A list of any documented past procedures (Past Surgical History).

Add a procedure by using the search field.

- Type the name of the procedure.
- If you don't know the specifics of the procedure, there's an option to add it as free text.

You MUST click Save to add a procedure.

Problems (0) | Procedure History (1) | Family History (0) | Social History (0) | Pregnancy (0)

ICD9 | Add procedure

Procedure	Surgeon	Implant
Procedures (1)		
pacemaker insertion	--	--

hysterectomy

Other and Unspecified Hysterectomy
Laparoscopic Total Abdominal Hysterectomy
Other and Unspecified Vaginal Hysterectomy
Other and Unspecified Subtotal Abdominal Hysterectomy
Add "hysterectomy" as free text

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Histories

The Family History and Social History tabs will only show details from those groups that use the control, so you may see info from Peds or Psych here.

Use the Social Family History component described below to review/add your Social/ Family History.

Social/ Family History

Review and validate existing information added from Social/ Family History Form.

If information needs to be added or updated:

1. Click arrow next to heading.
2. Select Provider Family & Social Hx.
3. Update information on the Power Form.
4. Click the green check mark to Sign.

It is added to the workflow and will pull into your note under Social and Family History.

Histories

Problems (6) Procedure History (2) **Family History (0)** Social History (0)

Social/Family History (3) **1**

Selected visit

	Result	Date/Time
4 Results (3)		
Ever Smoked Tobacco	Never Smoker	06/15/15 13:46
Alcohol Use - Frequency	None	06/15/15 13:46
DRUG USE	Never	06/15/15 13:46
4 Forms (0)		
No results found		

4 → **Provider Family & Social History - ROGERS, ARLENE**

*Performed on: 09/04/2015 1048 By: Walton, Lisa L.

Social History

Tobacco Use

☐ Current Every Day Smoker ☐ Heavy Tobacco Smoker
☐ Current Some Day Smoker ☐ Light Tobacco Smoker
☐ Smoker, Current Status Un ☐ Former Smoker
☐ Never Smoker
☐ Unknown if Ever Smoked

Tobacco Frequency

☐ < 0.5 pack/day ☐ 3 packs/day
☐ 0.5 pack/day ☐ > 3 packs/day
☐ 1 pack/day ☐ Other:
☐ 1.5 packs/day
☐ 2 packs/day
☐ 2.5 packs/day

Years Smoked

YRS

Pack Years

Alcohol Frequency

☐ Occasional ☐ Moderate ☐ Heavy ☐ Weekends Only ☐ None ☐ Other:

Drug Use

☐ Never ☐ Marijuana
☐ Quit ☐ Methamphetamines
☐ Cocaine ☐ Prescription drug
☐ Heroin ☐ Other:

Drug Frequency

☐ Occasional ☐ Other:
☐ Moderate
☐ Heavy
☐ Weekends Only

Social History Comments

Family History

Family History

☐ AAA ☐ Asthma ☐ Cerebral Aneurysm ☐ DVT ☐ MI - Heart Attack ☐ Stroke
☐ Aortic dissection ☐ Cancer ☐ Diabetes ☐ Hypertension ☐ PE ☐ Other:

Family History Comments

Chief Complaint

Free text section to provide the patient's chief complaint, preferably in their own words, or the reason for the encounter.

Vital Signs

Works like the Vital Sign component in Manage workflow

Subjective/HPI

Free text section to provide a detailed characterization of the patient's current problem.

Use Dragon/ macros/ auto-text/free-text to add the information.

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Review of Systems

Documentation of systems reviewed.

Use Dragon/ macros/ auto-text/free-text to add the information.

Note: If you document a thorough 10-system + review of system in your HPI section, you can use the "ROS per HPI" macro to document Review of Systems. For those that prefer to do a separate ROS documentation, use "ROS template" macro.

Objective/PE

Section for your observations during the physical exam. Use Dragon macros, dictate or free text your findings.

Labs

Displays **results across encounters within the last month**.

Functionality such as graphing, previewing, and multi-select tagging are the same as in the Manage Workflow.

Microbiology

Displays the **last 50 reports for the last 3 months**.

May see results that are not for this current encounter. Use the filters to change the timeframe.

Microbiology (1)

Last 50 Reports					Last 3 months	Last 1 months	More	↺	≡
Order	Susceptibility	Growth	Organism(s)	Source/Site	Collected	Last Updated	Status		
Blood Cult		CULTURE --		Blood,	06/15/15	06/15/15	Preliminary		
		NEG		Peripheral	14:30	16:23			

* Displaying up to the last 50 recent reports for the last 3 months

Reminder: If you want to tag Microbiology information, navigate to Micro Viewer to open the report and tag.

Diagnostics

Displays the last 3 months of results across encounter.

Reminder: Click on a report to open it and tag information.

Medications

Like the Manage Workflow, Medications displays the current active medications.

Note: May be blank if you are seeing the patient in the ED.

You can review Medication reconciliation status here as well.

- Meds History: Green check mark indicates the list was verified this visit.
- Can launch Admission Meds Rec by clicking the link

Medications			Selected visit	↺	≡
			Status: ✓ Meds History ⓘ Adm. Meds Rec ⓘ Disch. Meds Rec		
Order	Order Start	Status			
⌵ Scheduled (0)					
⌵ Continuous (0)					
⌵ PRN/Unscheduled Available (0)					
▶ Administered (0) Last 24 hours					
▶ Discontinued (0) Last 24 hours					

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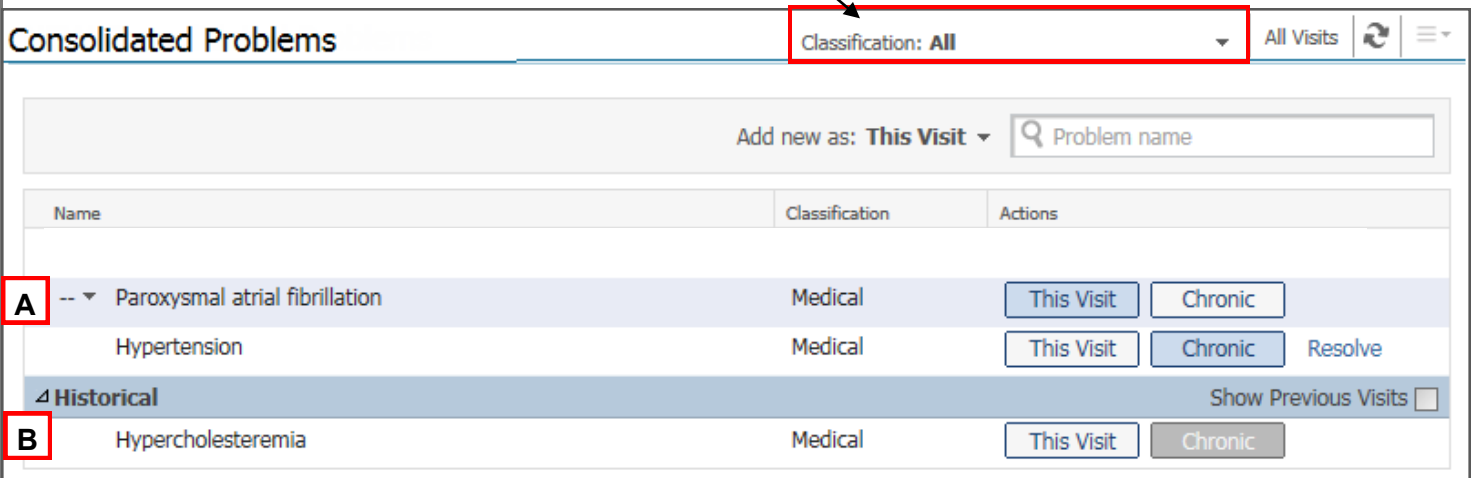
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Consolidated Problems

In both the Admit and Manage workflows, the Consolidated Problems section has been redesigned to make it easier to add and manage problems; both Chronic (past medical history) and This Visit (problems/ working diagnoses being addressed this encounter).

Tip: When you first access the new list, change the Classification filter to All (from Medical and Patient Stated) by clicking the arrow next to the Classification and clicking All. This allows you to view all problems. Once you make this selection, it will remain selected for you.



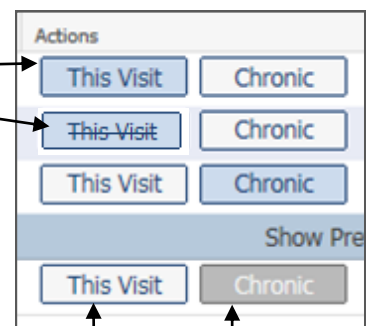
Name	Classification	Actions
Paroxysmal atrial fibrillation	Medical	<button>This Visit</button> <button>Chronic</button>
Hypertension	Medical	<button>This Visit</button> <button>Chronic</button> <button>Resolve</button>
Historical Show Previous Visits <input type="checkbox"/>		
Hypercholesteremia	Medical	<button>This Visit</button> <button>Chronic</button>

- ◇ This Visit and Chronic problems display at the top of the list (A).
- ◇ Historical problems (problems from previous encounters, not chronic) can be viewed by clicking the triangle next to historical (B).

The new Actions column makes managing problems easier.

In the This Visit and Chronic section:

- Blue indicates an active, current selection. To remove it, hover over it. A blue line appears, which means remove the selection. Click to remove.
Note: This removes/cancels the problem from the Problem list, not just your note. You could remove another provider's problem, so use with caution.
- White indicates a choice. Hover over a white choice and it turns blue. Click it to make it active.
- Resolve will only display for chronic problems. Clicking it will move the problem to the historical section.

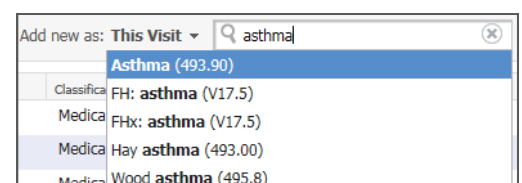


In the Historical section:

White indicates a choice to select. Gray indicates a the status of the problem before it was resolved (made historical) You may click to renew the status back to an ongoing chronic problem.

Add a new problem

Next to Add new as: choose This Visit or This Visit and Chronic. Then, begin typing in the search field. A list of possible results appears.



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The new problem preview pane allows you to quickly see details of the problem without leaving the workflow. Click on a problem to view the preview pane.

When you preview Chronic Problems you will have action options.

- Use **This Visit** and **Chronic** buttons to change status.
- **Modify** allows you to make changes to a Chronic problem directly in the workflow.
- **Resolve** will move the problem to Historical.

Click the problem again to close the preview.

The screenshot shows the 'Hypertension' problem preview pane. At the top, there are buttons for 'This Visit', 'Chronic', 'Modify', 'Resolve', and 'Cancel'. Below these, the problem details are listed: 'Condition type: This Visit and Chronic', 'Classification: Medical', 'Onset Date: --', 'Status: Active', and 'Confirmation: Confirmed'. There is a 'Comments' section with an 'Add new' button. At the bottom, there is a 'History' section showing two entries: '09/04/2015 ICD-9-CM: Hypertension (401.9) - This Visit Classification: Medical' and '-- ICD-9-CM: Hypertension (401.9) - Chronic Classification: Medical'.

Assessment and Plan

As you manipulate the problems list, the Assessment and plan section updates real time and pulls in each This Visit problem. This allows you to document your plan of care for each directly in the workflow.

When you create your note, all documentation will pull into the Assessment/Plan section of the note automatically under the problem.

- Don't want to include a problem in your note? Hover over the problem name and click the X.
Tip: If you removed a problem from Assessment and Plan by mistake, click the main refresh button to bring the problems back.
- In the box below each problem, use Dragon and Auto-text the same way you would have in your Note.
Tip: To quickly move from field to field, press the tab key on the keyboard or the Tab forward button on the Dragon microphone.

The screenshot shows the 'Assessment and Plan' section of the PowerChart interface. It features a toolbar with options for Font, Size, Bold, Italic, Underline, and other formatting tools. Below the toolbar, there are two numbered sections: '1. Sepsis' and '2. Diabetes mellitus'. Each section has a large text area for documentation. At the bottom right, there is a 'Save' button.

- Click **Save** when finished.

New Order Entry

New order Entry is used the same way as the Manage Workflow.

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Creating the Admit H&P Note

1. After documenting on the Admit workflow, click **Create Note**.
2. The New Note screen opens.
3. From the Type dropdown, select **H&P**.
4. Verify the Date and Time matches your Date and Time of Service (you may backdate if making a late entry).
5. Under Note Templates, click **Admit H&P**.
6. Click **OK**.

Document Viewing

Full screen Print 0 minutes ago

New Note X List

Note Type List Filter:

Position

Type: H&P 3

Title: Admit H&P

Date: 09/04/2015 11:11 4

Author: Walton, Lisa L.

Note Templates

All (54) Favorites (1) Search

Name	Description
Admit H&P 5	History & Physical
Brief Consult Note	Consultant Initial Brief Note
Brief Op Note	Brief Op Note
Colorectal Surgery Attending Progress N	Colorectal Surgery Attending Progress Note
Consult Note	Consult Note
Downgrade Patient Status from Critical C	Downgrade Patient Status from Critical Care
ED Obs Discharge Progress Note	ED Obs Discharge Progress Note
ED Observation History & Physical	ED Observation H & P
ED Physician Record	Emergency Department Physician Record
ED Physician Record - Resident/PA	ED Physician Record - Resident/PA
ED Physician Record and Teaching Note	Department Physician Record with Teaching Note
ED Supertrack Provider Record	ED Supertrack Provider Record
ED Teaching Physician Record	Emergency Department Teaching/Supervisory Note
H&P Update Note	H&P Update Note
ICU H&P	ICU History & Physical
NB Newborn History and Physical	Newborn History and Physical

OK Cancel

*Favorites: It is recommended to make this template a favorite.
Click the star next to the template name.
The template will be added to the Favorites folder.
On future note creation, click on the Favorites tab to select the Admit H&P.*

Admit H&P Note Template

Left side; your documentation pulled from the workflow

- Demographics
- Date and time of service
- Chief complaint
- HPI (including interpreter statement)
- ROS
- PE (including vitals & measurements)
- Assessment/Plan

Right side: information pulled from chart

- Problem List/Past Medical History, (includes Ongoing or Chronic problems and Historical problems)
- Procedure/ Surgical History
- Home medications
- Allergies
- Social History
- Family History
- Lab results (Fishbone labs and ED labs), tagged labs automatically pull in
- Diagnostics Results

Admit H&P X List

Caliber Size

History and Physical

DOB 09/08/1944 FIN 3800108560 MRN 2800105963 Location ECED/MAIN/

Date and Time of Service
09/04/2015
11:25

Chief Complaint

History of Present Illness
Interpretation: The information was presented orally to [patient, representative, decision maker] and was interpreted into [language]. The person for whom the information was interpreted stated [s/he] understood the interpretation.
Interpreter: [name and agency, ID#]

Review of Systems

Physical Exam
Vitals & Measurements

Assessment/Plan
Paroxysmal atrial fibrillation

Female pelvic pain

Note Details: H&P, Walton, Lisa L., 09/04/2015 11:11, Admit H&P

Problem List/Past Medical History
Ongoing
Hypertension
Historical
Hypercholesteremia

Procedure/Surgical History
hysterectomy, pacemaker insertion.

Home Medications
No qualifying data available

Allergies
penicillin
shellfish

Social History

Family History

Lab Results

Sign/Submit Save Save & Close Cancel

If you documented in the workflow, there should be little you need to document in the note.

Review to ensure a correct and complete note before clicking Sign/ Submit.

***Reminder: Mid-level providers must forward this document for co-signature.**

Refer to the job aid: [Tip Sheet: Midlevel Providers Required to forward for co-signature in Sign/Submit Window](#)

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Creating the Consult Note

1. After documenting on the workflow, click **Create Note**.
2. The New Note screen opens.
3. From the Type dropdown, select **Consult**.
4. Verify the Date and Time matches your Date and Time of Service (you may backdate if making a late entry).
5. Under Note Templates, click **Consult Note**.
6. Click **OK**.

Favorites: It is recommended to make this template a favorite. Click the star next to the template name. The template will be added to the Favorites folder. On future note creation, click on the Favorites tab to select the Consult.

Consult Note Template

Left side; your documentation pulled from the workflow

- Demographics
- Date and time of service
- Chief complaint
- Reason for Consult
- HPI
- ROS
- PE (including vitals& measurements)
- Assessment/Plan
- Additional recommendations or Comments

Right side: information pulled from chart

- Problem List/Past medical History, which includes Ongoing or Chronic problems and Historical problems
- Procedure/ Surgical History
- Medications (including Home and Inpatient)
- Allergies
- Social History
- Family History
- Lab results (Fishbone labs and ED labs), tagged labs automatically pull in.
- Diagnostic Results
- I&O

Review to ensure a correct and complete note before clicking Sign/ Submit.

***Reminder: Mid-level providers must forward this document for co-signature. Refer to the job aid: [Tip Sheet: Midlevel Providers Required to forward for co-signature in Sign/Submit Window](#)**

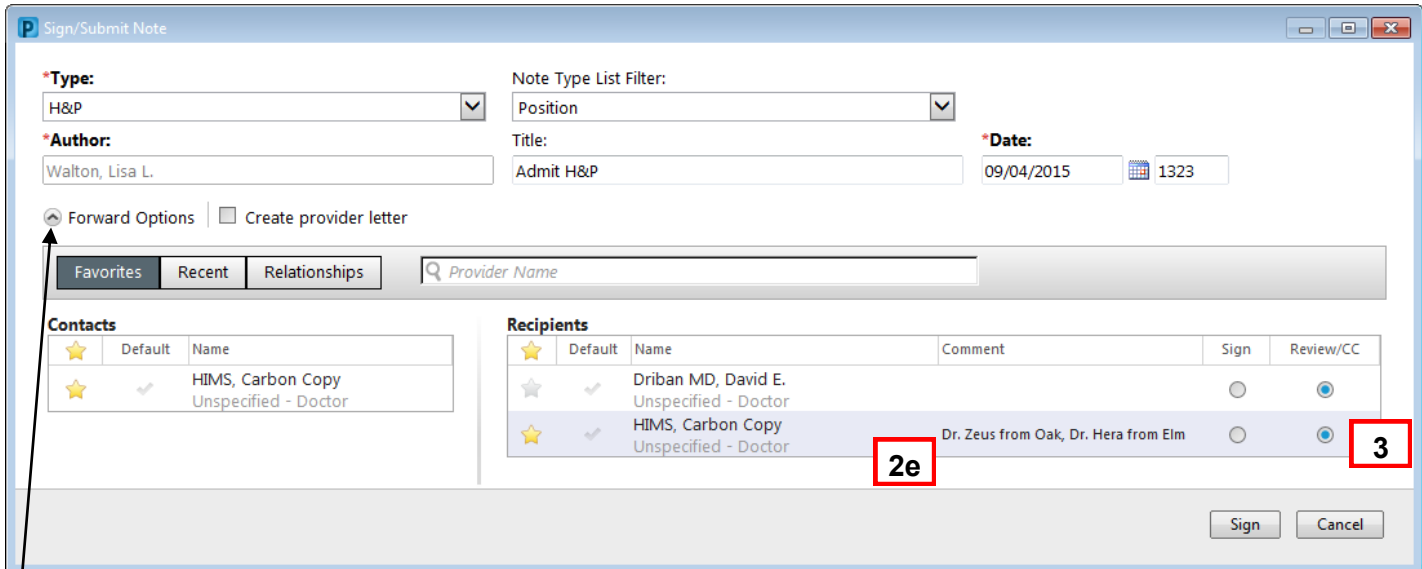
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Carbon Copy (CC)

You will now have the ability to send a copy of H&P and Consults to other providers directly from PowerChart. A list of providers and groups/ practice related to CCHS is pre-loaded. After you click Sign/Submit, this window appears.



Note: You may need to click the arrow next to Forward options to expand the section.

1. Type the name of the provider you wish to copy in the Provider Name field.
 - If there is only one provider by that name, it will automatically be added to the Recipients list.
 - If there is more than one provider by that name, you can choose the correct provider on the provider Selection window.
 - If the provider you entered is not available, no name or selection window will appear.
2. For providers who are not on our list, the HIMS team can carbon copy the note.
 - a. To send the name of the provider to the HIMS team, type HIMS in the provider name window.
 - b. Select **HIMS, Carbon Copy** from the list.
 - c. On the Recipient list, HIMS, Carbon Copy is added. Click the star to save it as a favorite so you don't have to search for it again. The next time you need to use HIMS, Carbon copy, under Contacts, you simply click the Blue plus sign next to the name.
 - d. To add the name of the provider you would like HIMS to send copies to, double click in the column under Comment.
 - e. Type at least the name of the provider you wish to copy. You can enter the address and/or phone number if you know it.
 - f. If there is more than one provider to cc, type all of the names, separated by a comma.
3. Be sure the **Review/CC circle** is filled in.
(Mid-level providers should check carefully, as your option defaults to Sign.)
4. You can remove a provider from your recipient list, by hovering over the name and clicking the X.
5. Click **Sign**.



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Carbon Copy (CC)- continued

Carbon Copy can also be completed from Message Center when signing a forwarded document.

You can see if anyone has already been sent the document by opening the Action List.

- Click and hold on the line between the note and the Action Pane.
- Slide up to open the Action List.

- Check the box next to Additional Forward actions.
- Ensure the Action is set to Review.
- Type the name of the provider in the To: field.
- If it is an external provider not on the list, type HIMS, Carbon Copy. In the comments section, enter the name and information of the provider.
- Click OK.

History and Physical

DOB 09/08/1944 FIN MRN Location ECED/C19/A

Date and Time of Service
08/15/2015 16:17

Assessment/Plan
Anemia
Dementia

Problem List/Past Medical History
Ongoing
Chronic kidney disease stage 3
Dementia
Historical
HTN - Hypertension
Hypercholesterolemia

Procedure/Surgical History
pacemaker insertion, suture.

Medications
Home Medications (6) Active
AggRENOX 1 CAP, PO, BID
atorvastatin.
Calcium with Vitamin D . PO

Action	Performed By	Performed Date	Action Status	Comment	Proxy Personnel	Requested By	Requested Date	Request Comment
Sign	Resident, Test	08/15/2015 16:18	Completed					
Perform	Resident, Test	08/15/2015 16:18	Completed					
Review	HIMS, Carbon Copy		Completed			Resident, Test	08/15/2015 16:18	Dr. Zeus from Olympus, Dr. Hera fr
Sign	Walton, Lisa L.		Requested			Resident, Test	08/15/2015 16:18	

Action Pane

Sign ☐ Refuse Reason:

Additional Forward Action: ☒ Review To: (Limit 5)

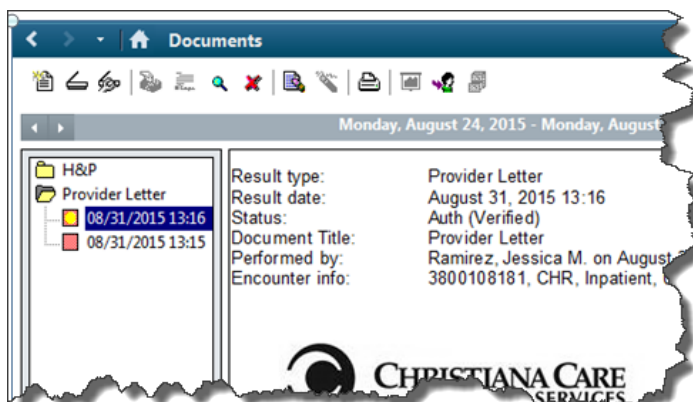
Comments:

Next OK OK & Next

Provider Letter

When you use HIMS, Carbon Copy to carbon copy an external provider not in the PowerChart database, HIMS will create a Provider Letter to send with your document. It displays to whom the document was sent via fax/U.S. mail.

You will see this provider letter under **Documents> Provider Letter**. There will be one Letter per carbon copied provider. Double click to open and view details.



Patient Name: IPASS, JESSICA
Medical Record Number: 2800105671
Date of Birth: 04/04/2015
Admission Date: 07/01/2015

Health Information Management Services
4755 Ogletown-Stanton Road
Newark, DE 19718
(302) 733-1128 or (302) 733-1070

Timothy Shih,
123 Street Address
City, State

Dear Timothy Shih,

Enclosed is the Document related to the stay of JESSICA IPASS. If you have problems with this transmission, please contact the HIMS department at Christiana Care at the telephone number listed above.

If you have received this transmission in error, please notify the HIMS department immediately by telephone and return the original transmission to us at the above address.

Attached: 08/31/15 H&P

Sincerely,

Christiana Care Health Services

Notice: This transmission is intended only for the use of the provider to whom it is addressed and may contain information that is privileged, confidential and exempt from disclosure under applicable law. The recipient of this information is prohibited from disclosing the information to any other party and is required to destroy the information after the need has been fulfilled.

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DOB: 04/04/2015

PowerChart Tip Sheet



Admit Workflow/ History & Physical/ Consult- Providers

September 2015

Refusing a Note

In some cases, you may receive a document in your Message Center inbox that you feel should not be there.

1. Refuse a document by clicking the **Refuse** circle.
2. Click the dropdown next to reason.
3. Select a reason for refusal from the list.
4. Click OK or OK and Next.

The screenshot shows the PowerChart interface with the 'Refuse' action pane open. The 'Reason' dropdown menu is expanded, showing a list of reasons for refusal. The 'Wrong Provider/Physician' option is highlighted. The 'Forward Action' section shows a 'Review' button and a 'To:' field with a limit of 5. The 'Comments' field has a limit of 255. The 'Next', 'OK', and 'OK & Next' buttons are visible at the bottom right.

Lasix 20 mg oral tablet 20 MG = 1 TAB, PO, Daily

Allergies
Nuts

Social History
Ever Smoked Tobacco: Never Smoker
Alcohol use - frequency: None
Drug use: Never
Family History ED: Cancer, Hypertension

Action Pane

☐ Sign ☒ Refuse Reason: Wrong Provider/Physician

☐ Additional Forward Action: Review To: (Limit 5)

Comments: (Limit 255)

Next OK OK & Next