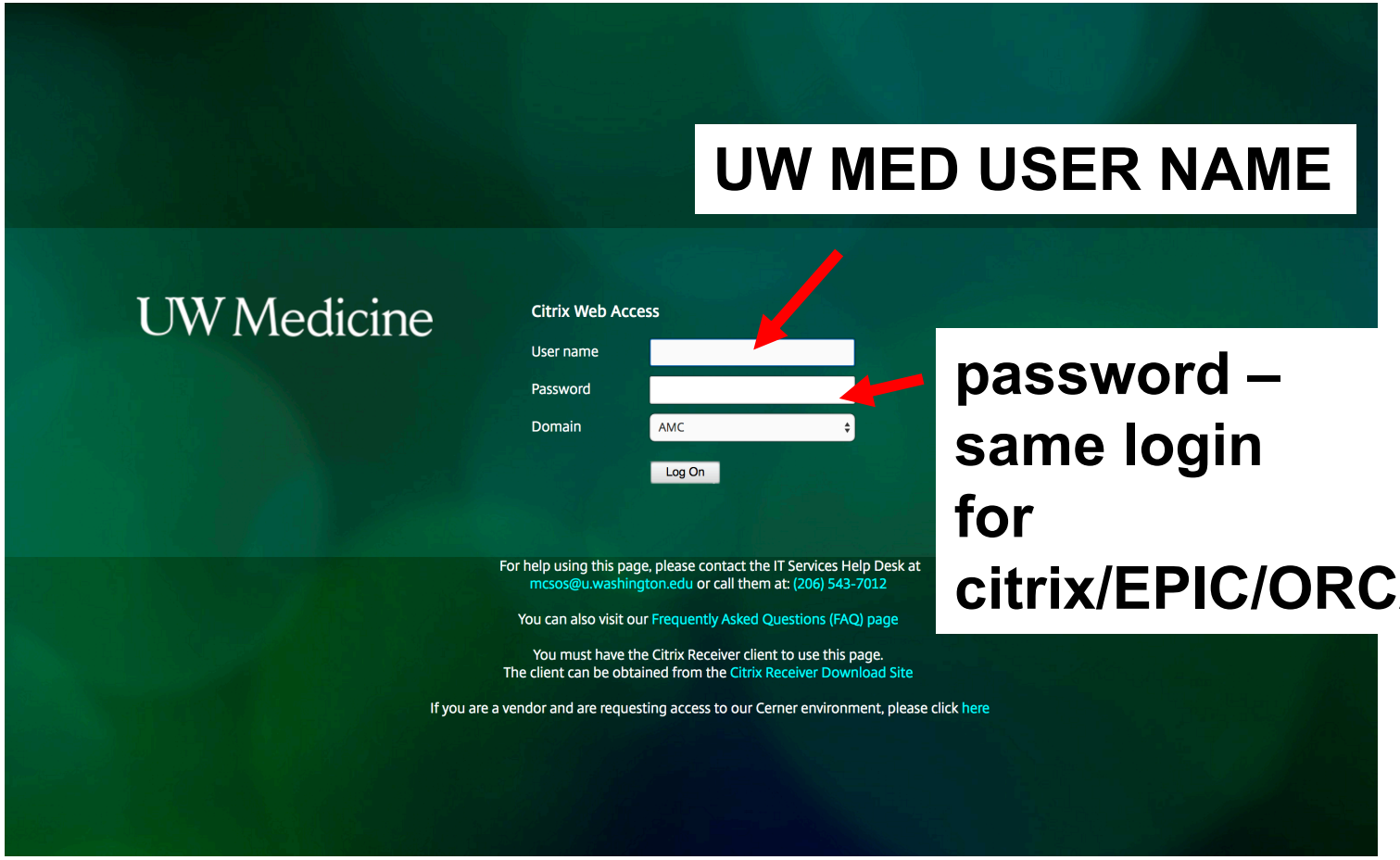
ORCA:
UW MEDICINE'S VERSION OF CERNER

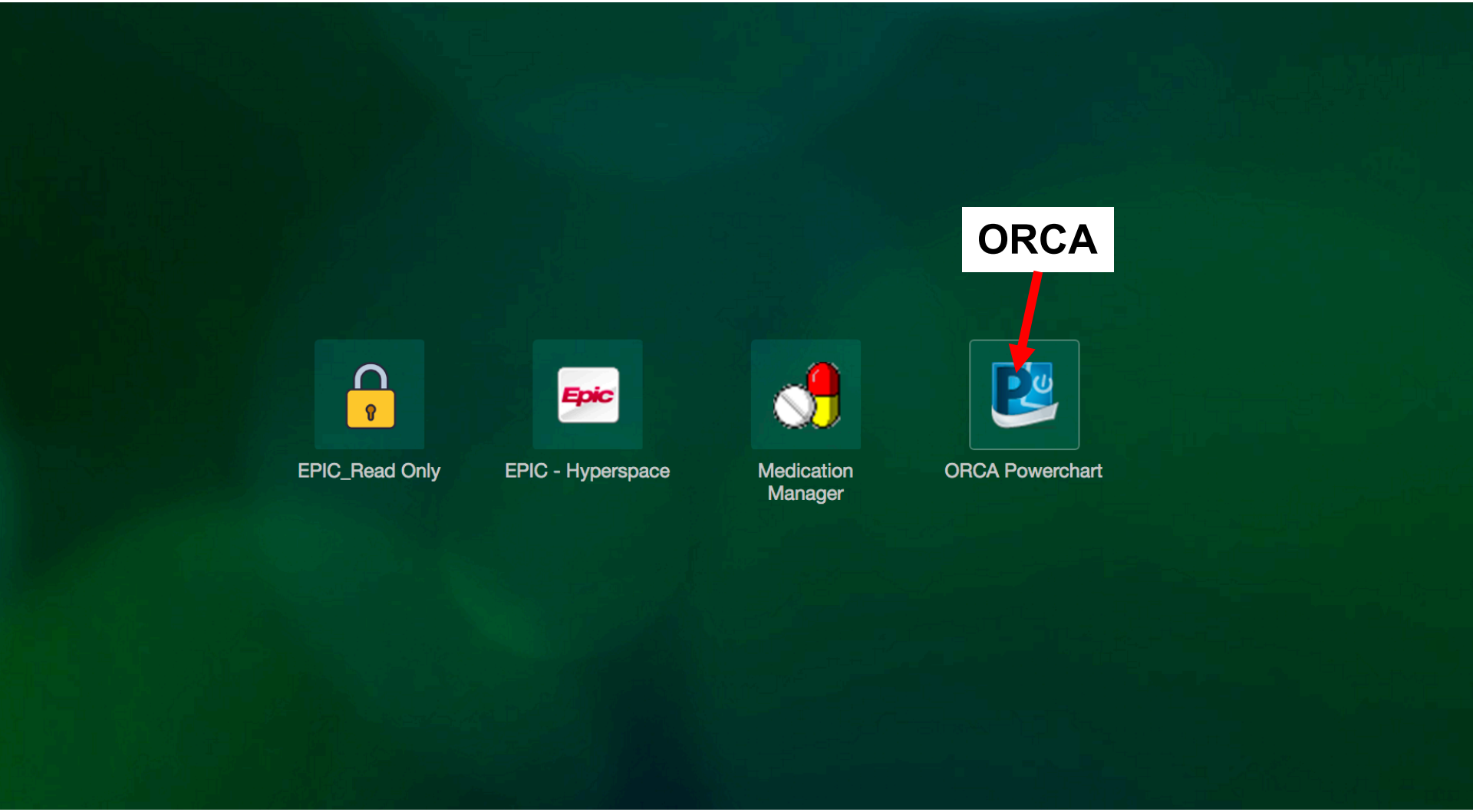
WRITING NOTES,
FINDING INFORMATION,
KEEPING TRACK OF YOUR TEAM,
SIGNOUT,
A FEW TIPS

GETTING STARTED – LET'S TALK ABOUT LOGGING IN

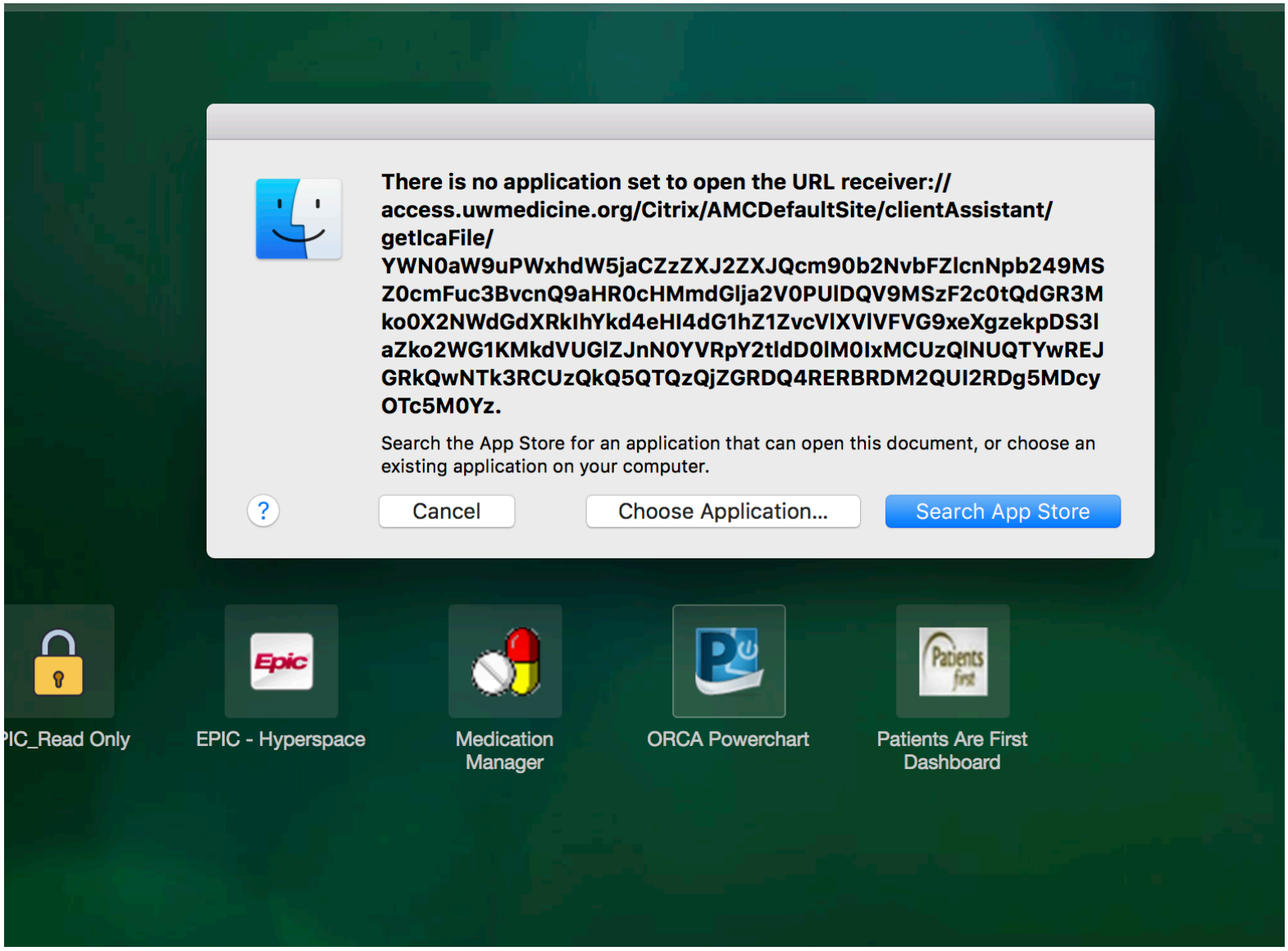
https://access.uwmedicine.org



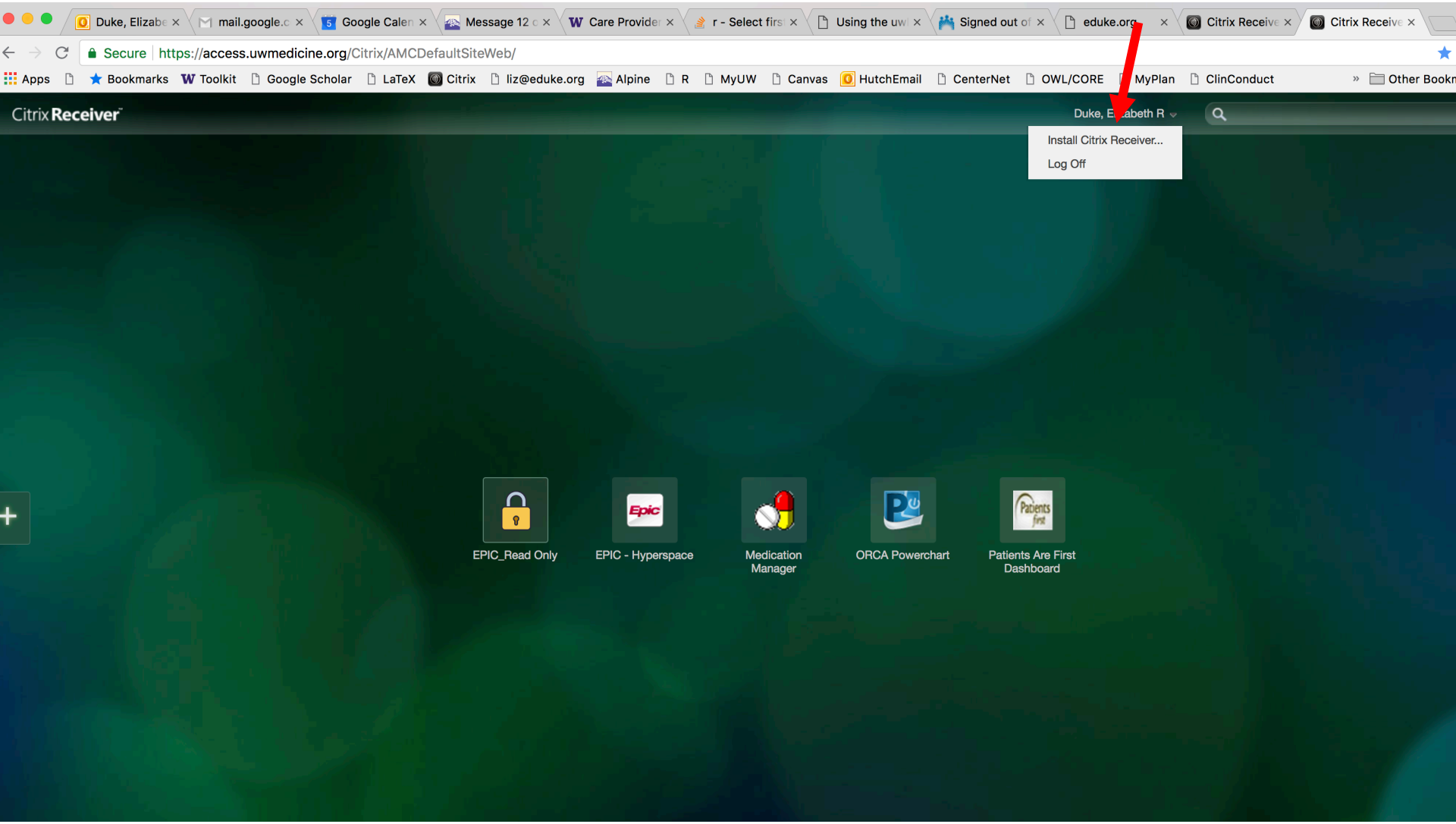
THAT WILL TAKE YOU HERE: FROM HERE, CAN GO TO EPIC OR ORCA



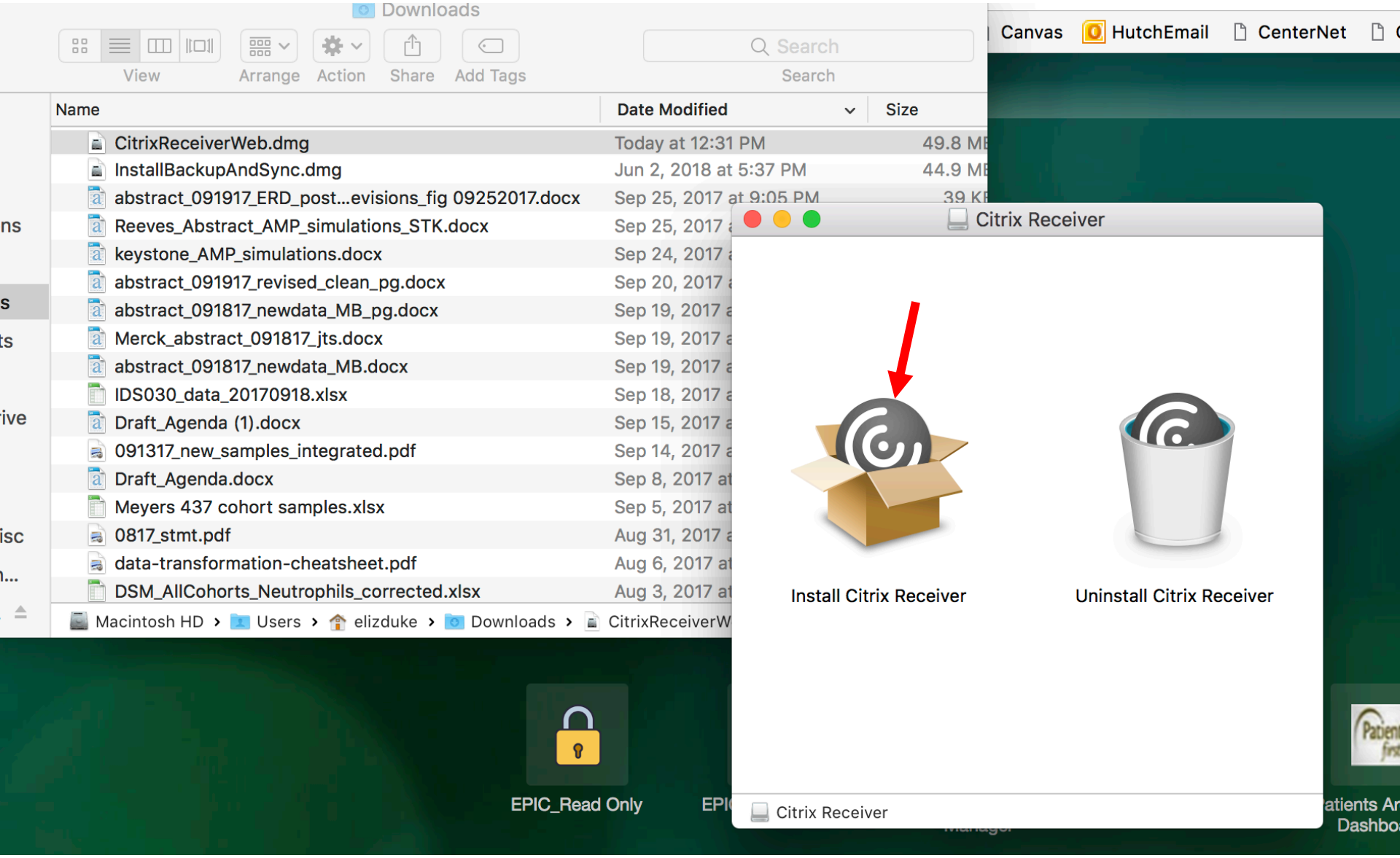
YOU MAY GET THIS NASTY ERROR. DON'T FEAR.



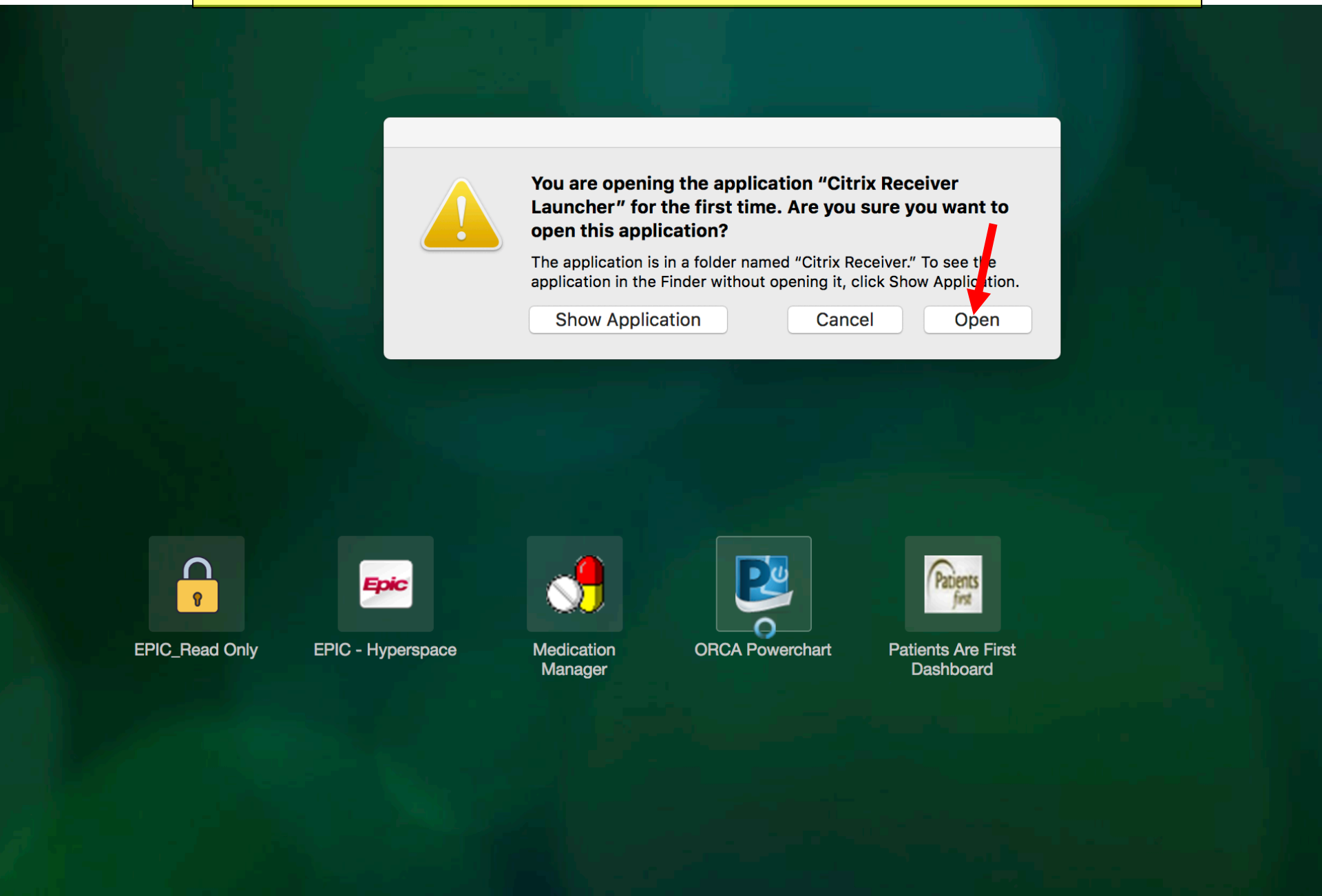
GO TO YOUR NAME IN THE UPPER R. CLICK IT. AND INSTALL CITRIX RECEIVER.



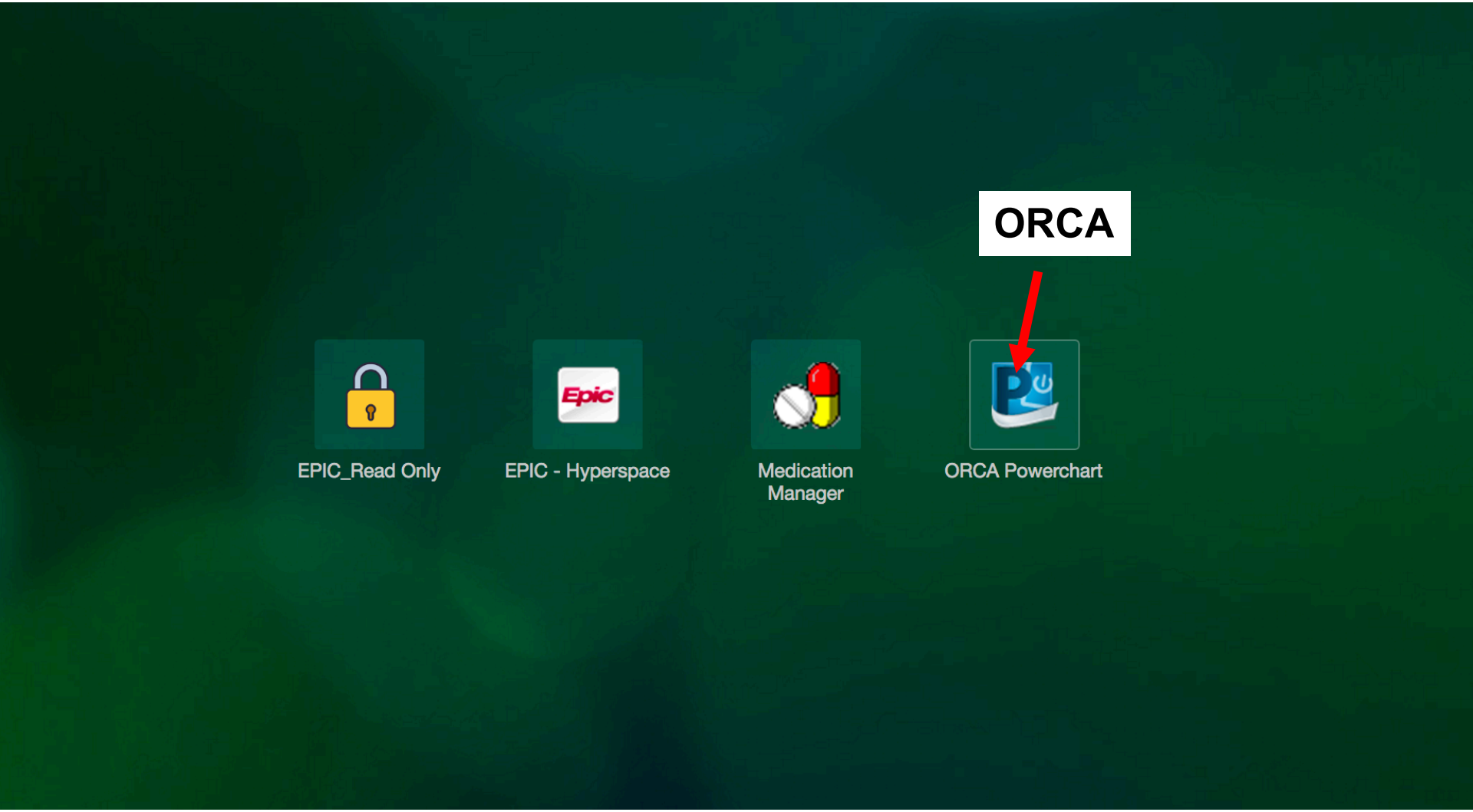
DOWNLOAD THE FILE. OPEN IT. DOUBLE CLICK. INSTALL CITRIX RECEIVER.

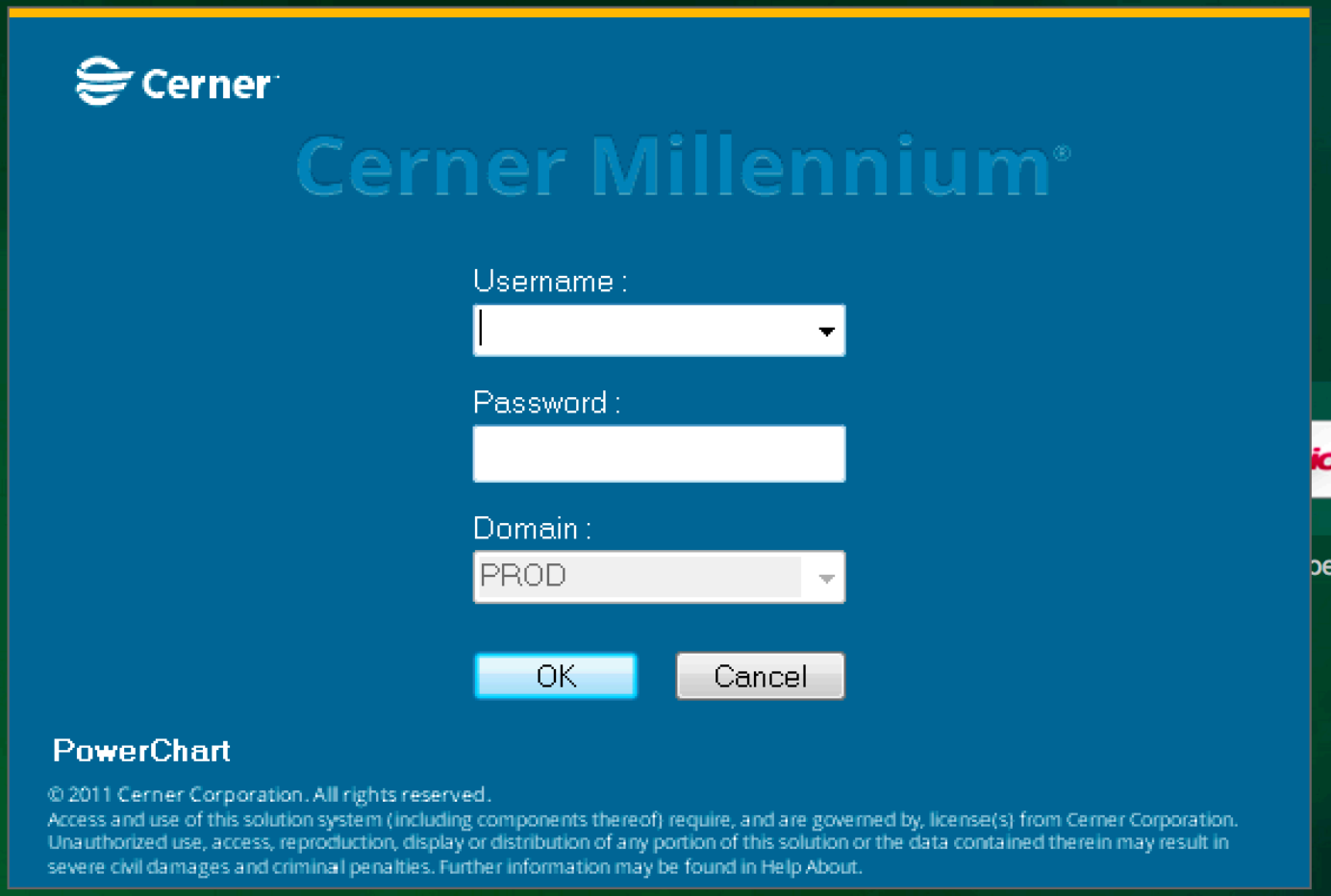


FOLLOW ON-SCREEN INSTRUCTIONS FOR INSTALLING.
ON SOME MACS, WILL ALSO NEED TO CLICK "OPEN" HERE.



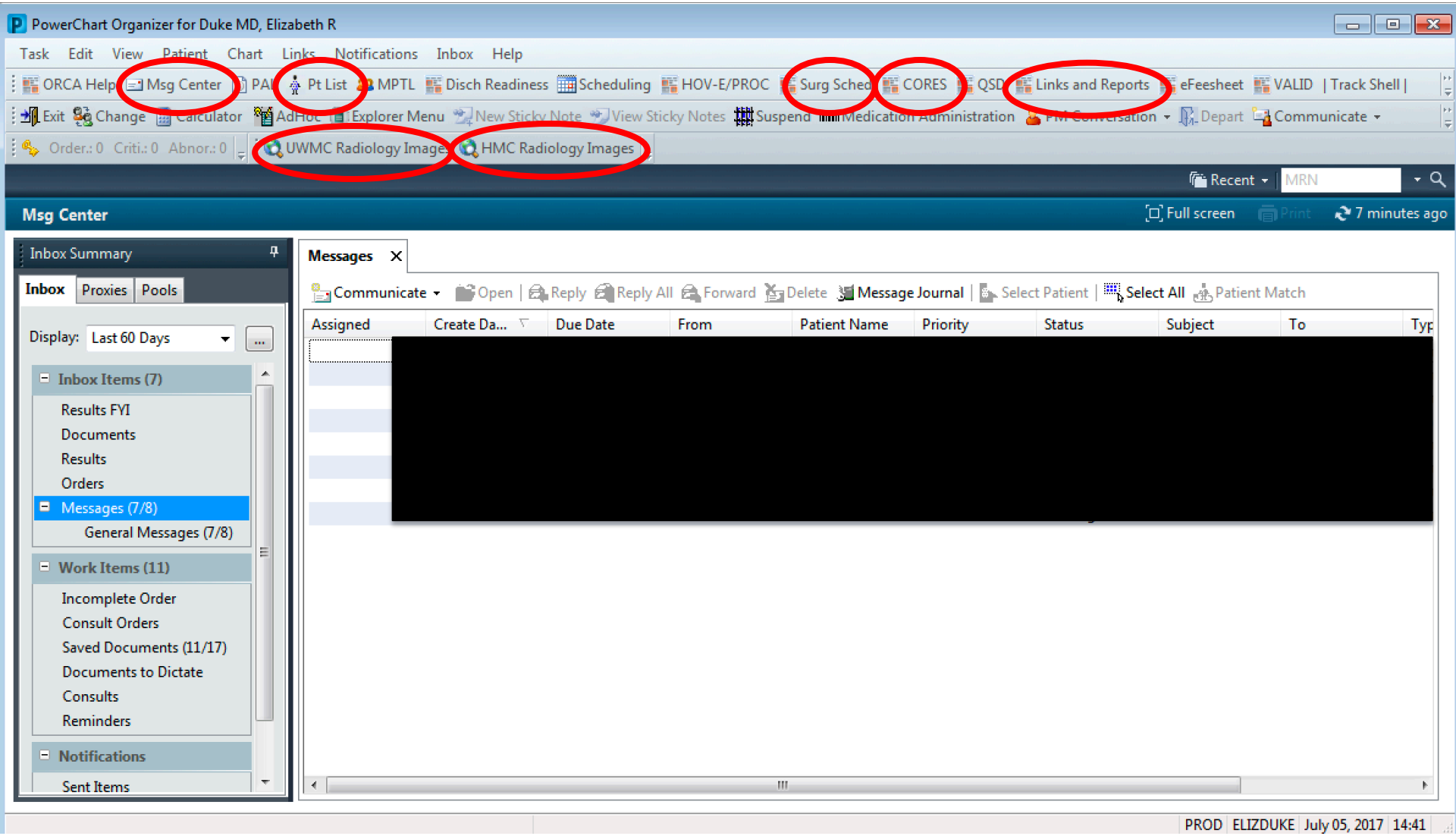
FINALLY, BACK TO THE SCREEN WE NEED.





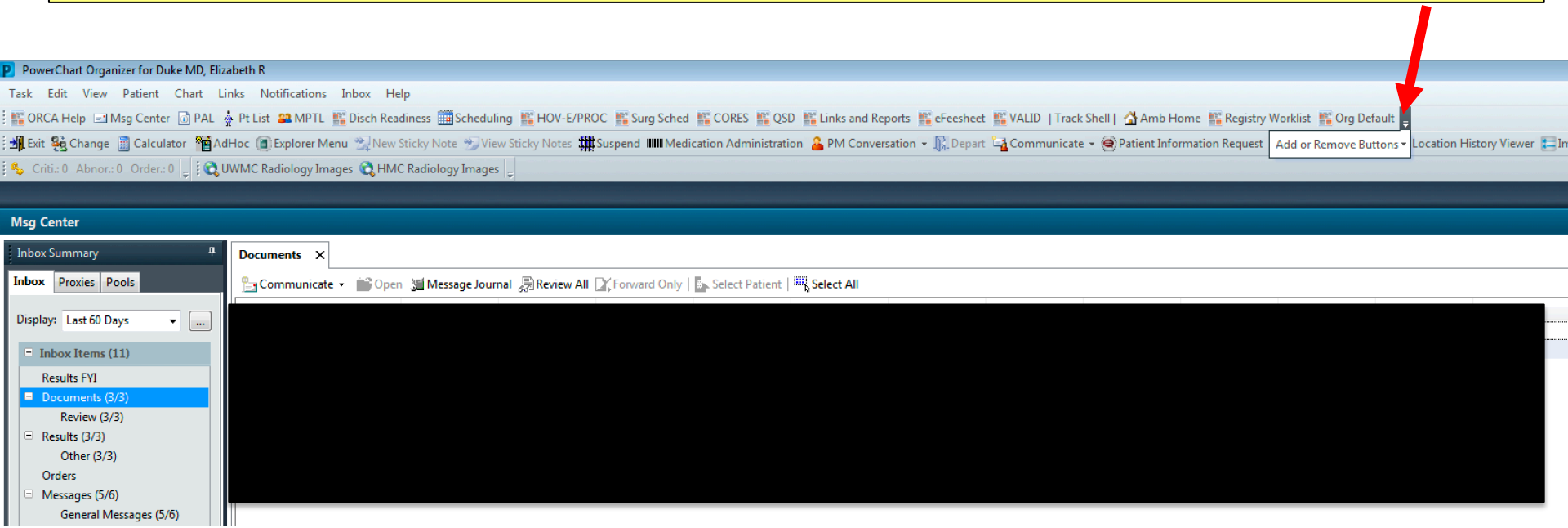
THIS WINDOW POPS UP.
ENTER SAME USER NAME AND PASSWORD.

INITIAL SET UP:
Let's make sure you have the buttons you need. I recommend all the ones in red circles.

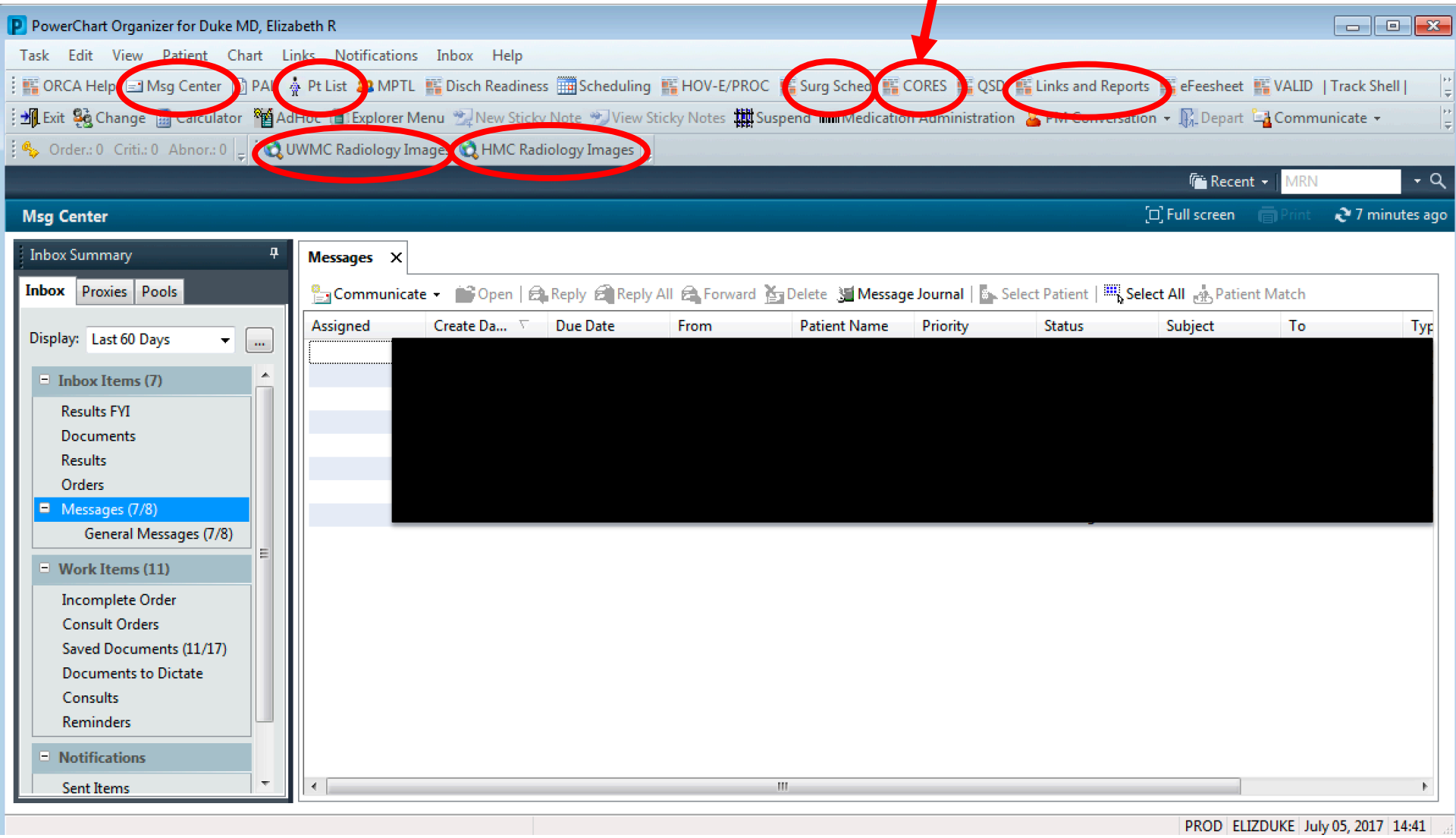


INITIAL SET UP:
If you don't have them, we don't have time to fix today, but click this vertical dot button.

You can add and delete here. If you have trouble, ask me or chiefs.

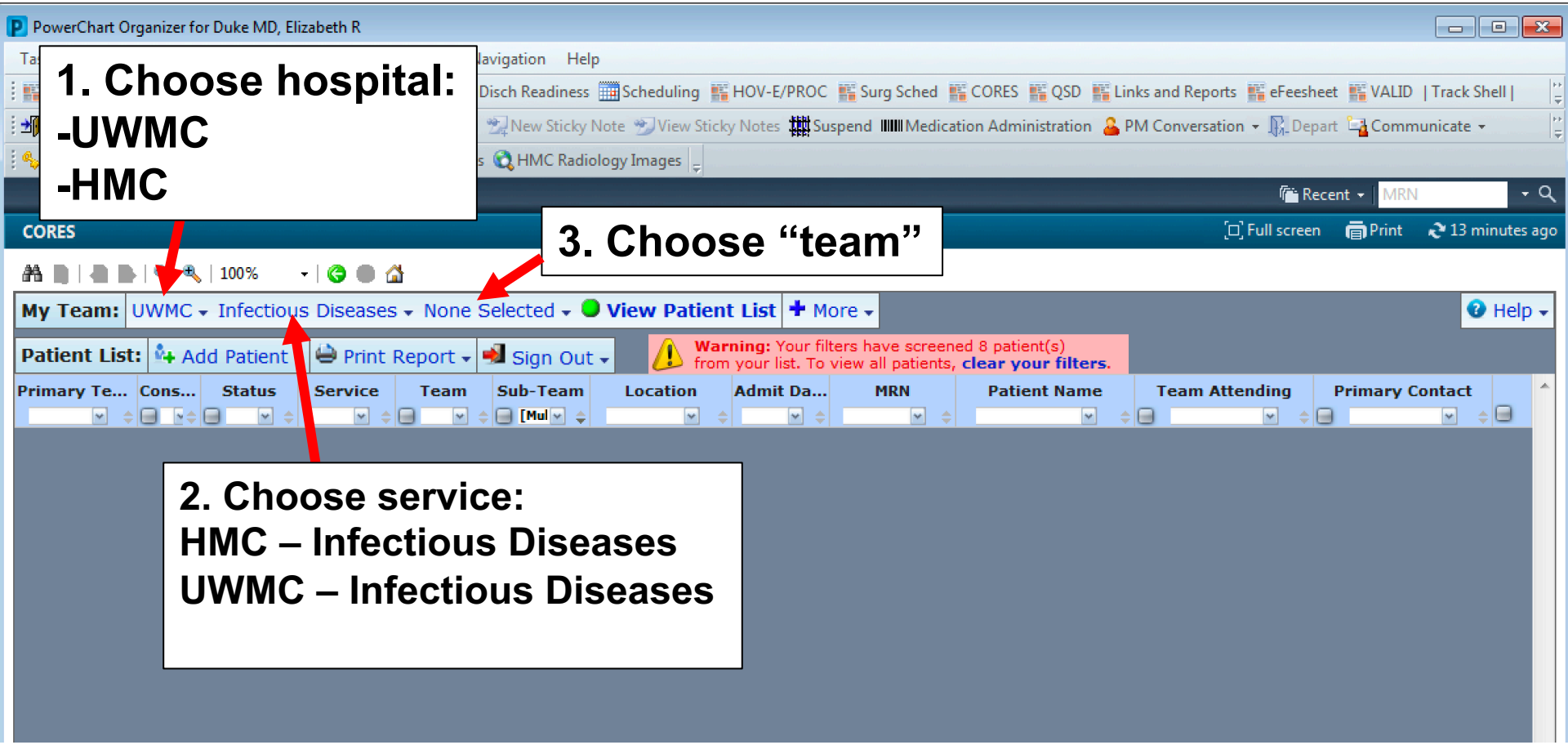


Let's start with CORES.
This is the list-making function in ORCA.

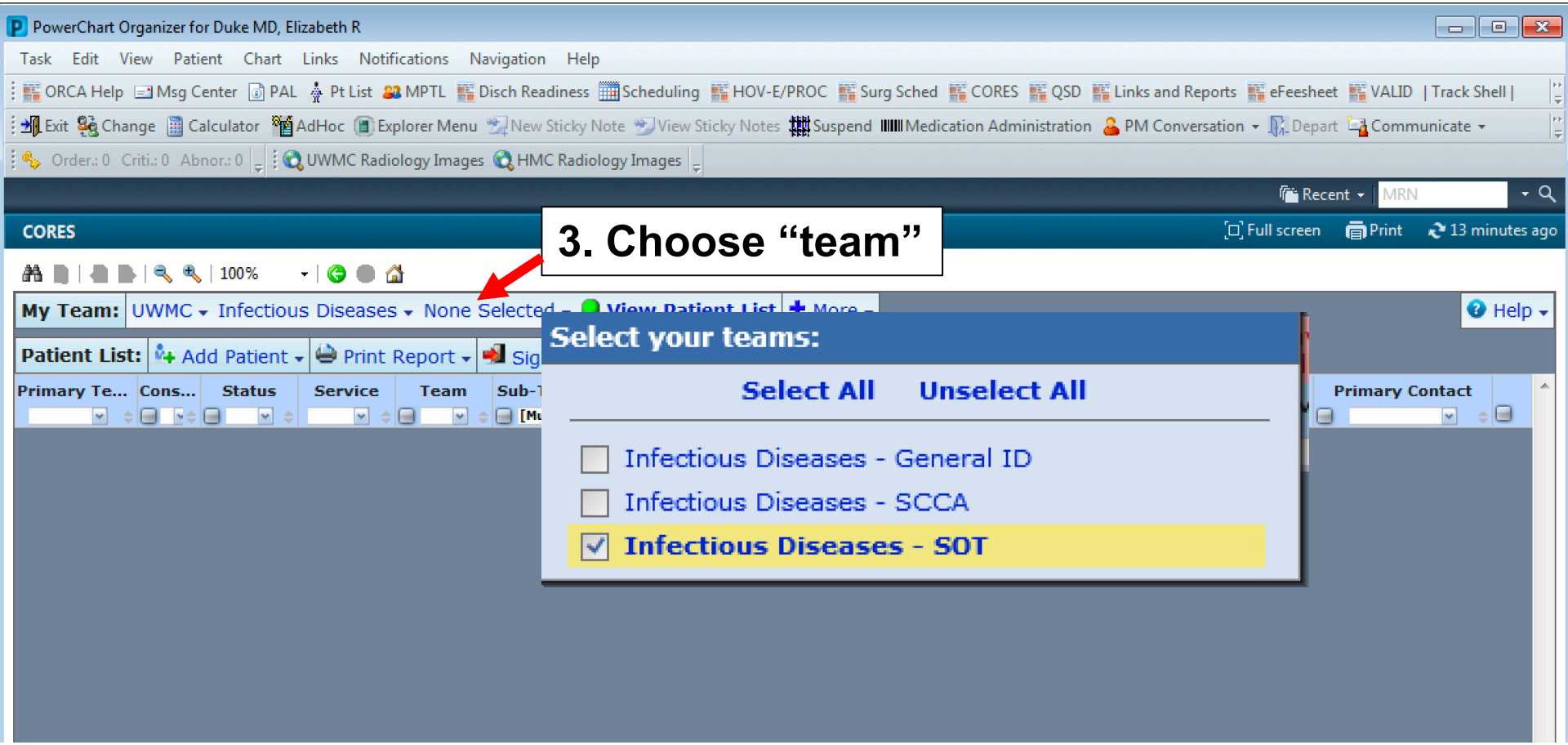


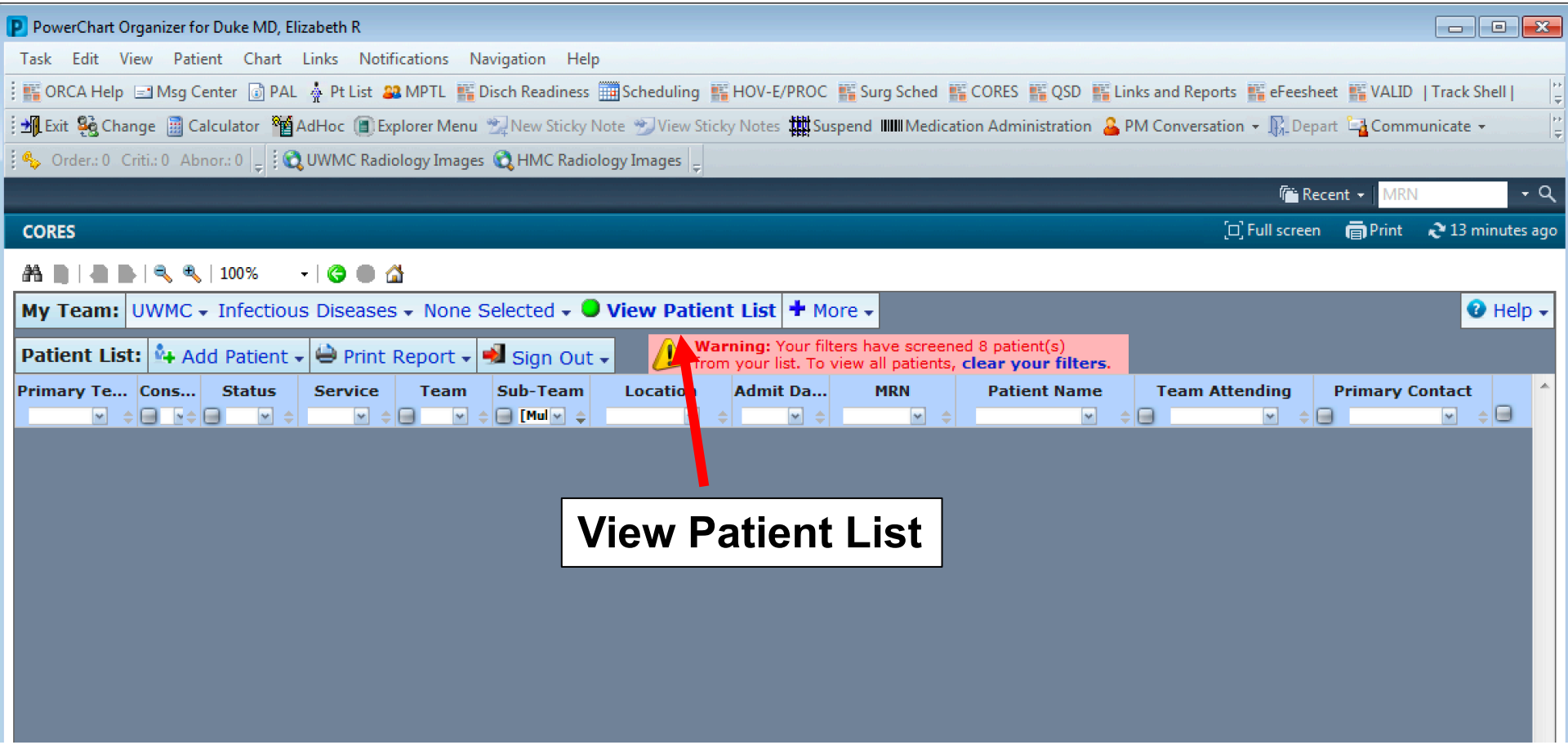
USING CORES

First choose UWMC.

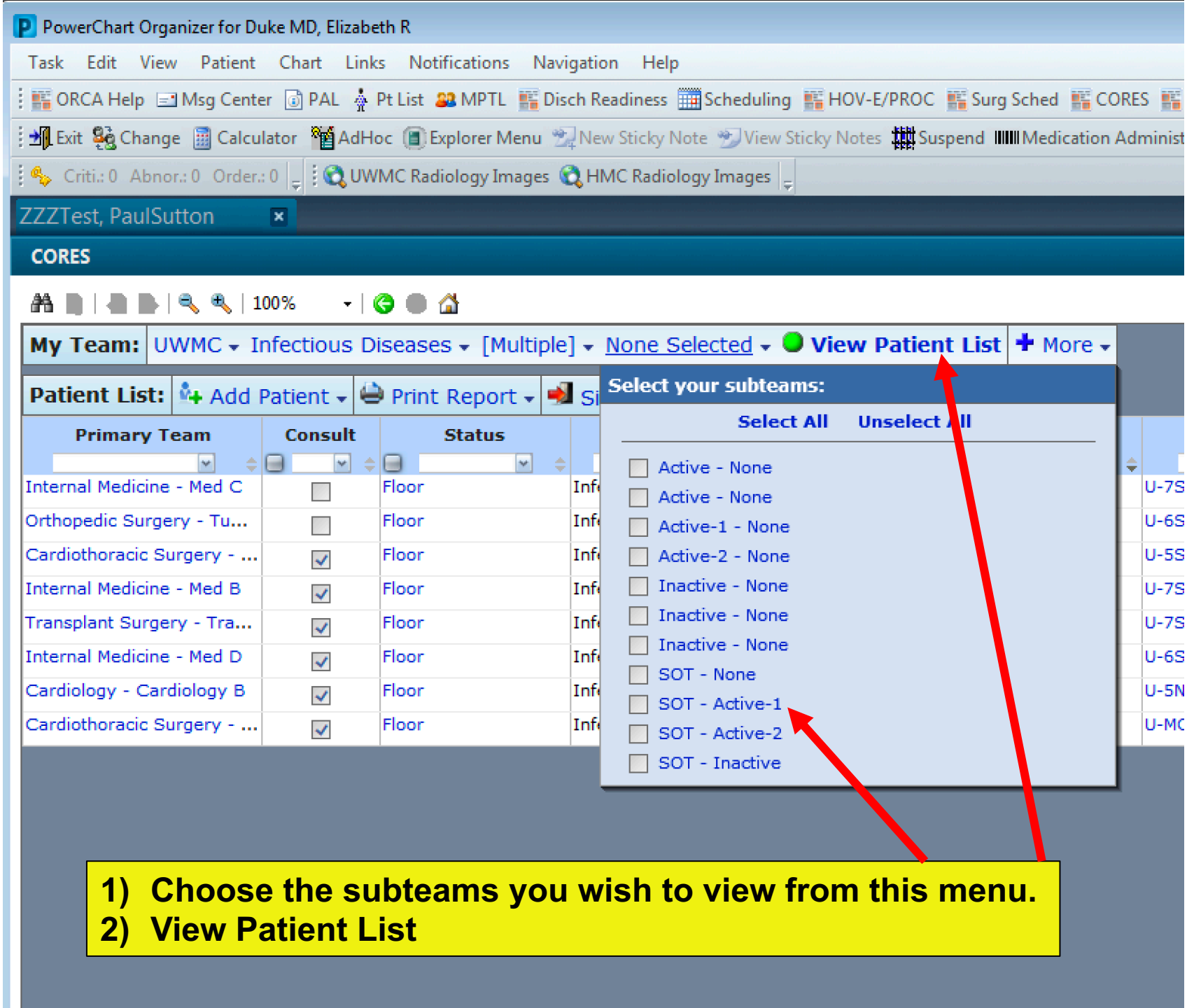


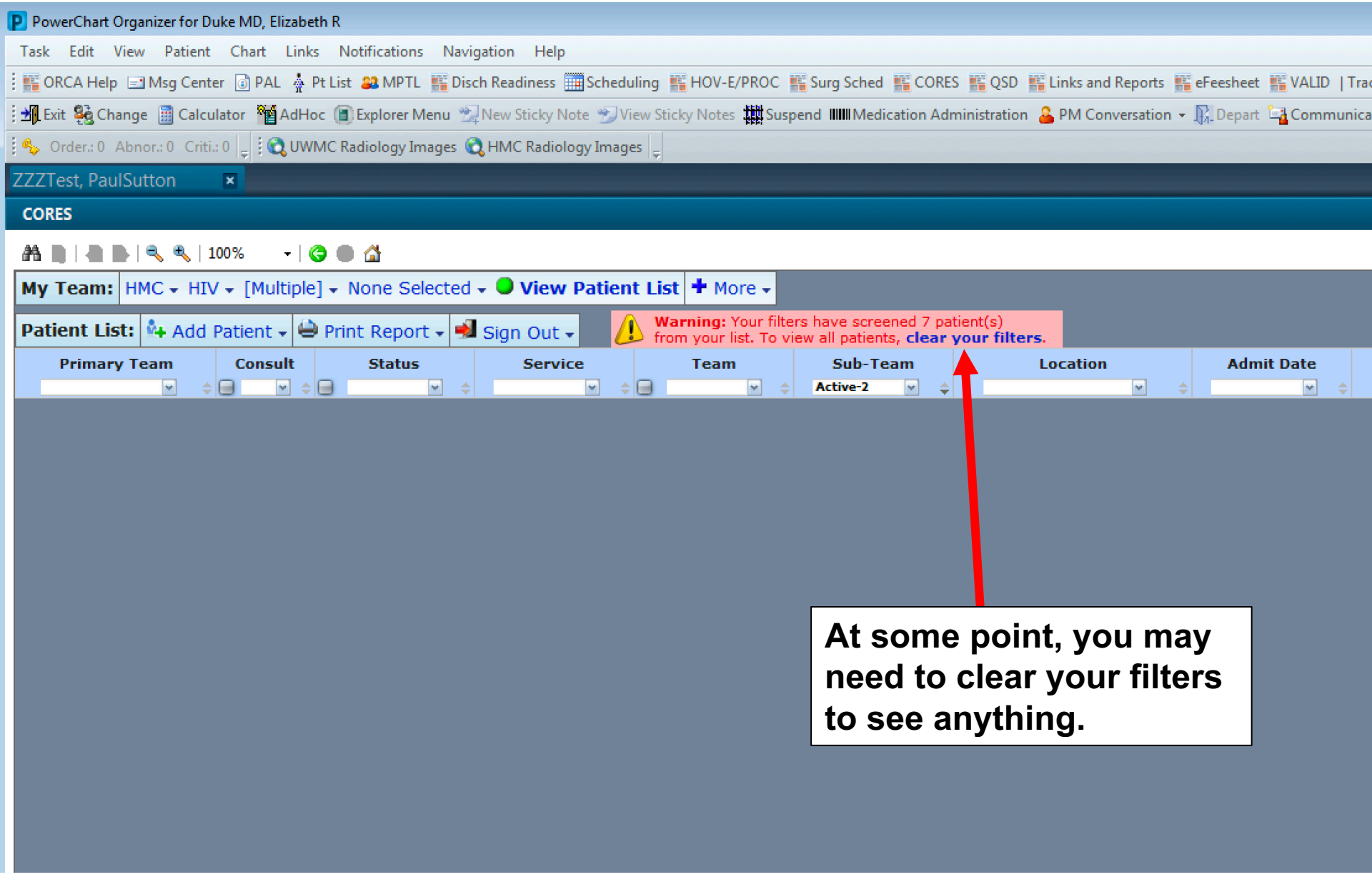
Then choose SOT.



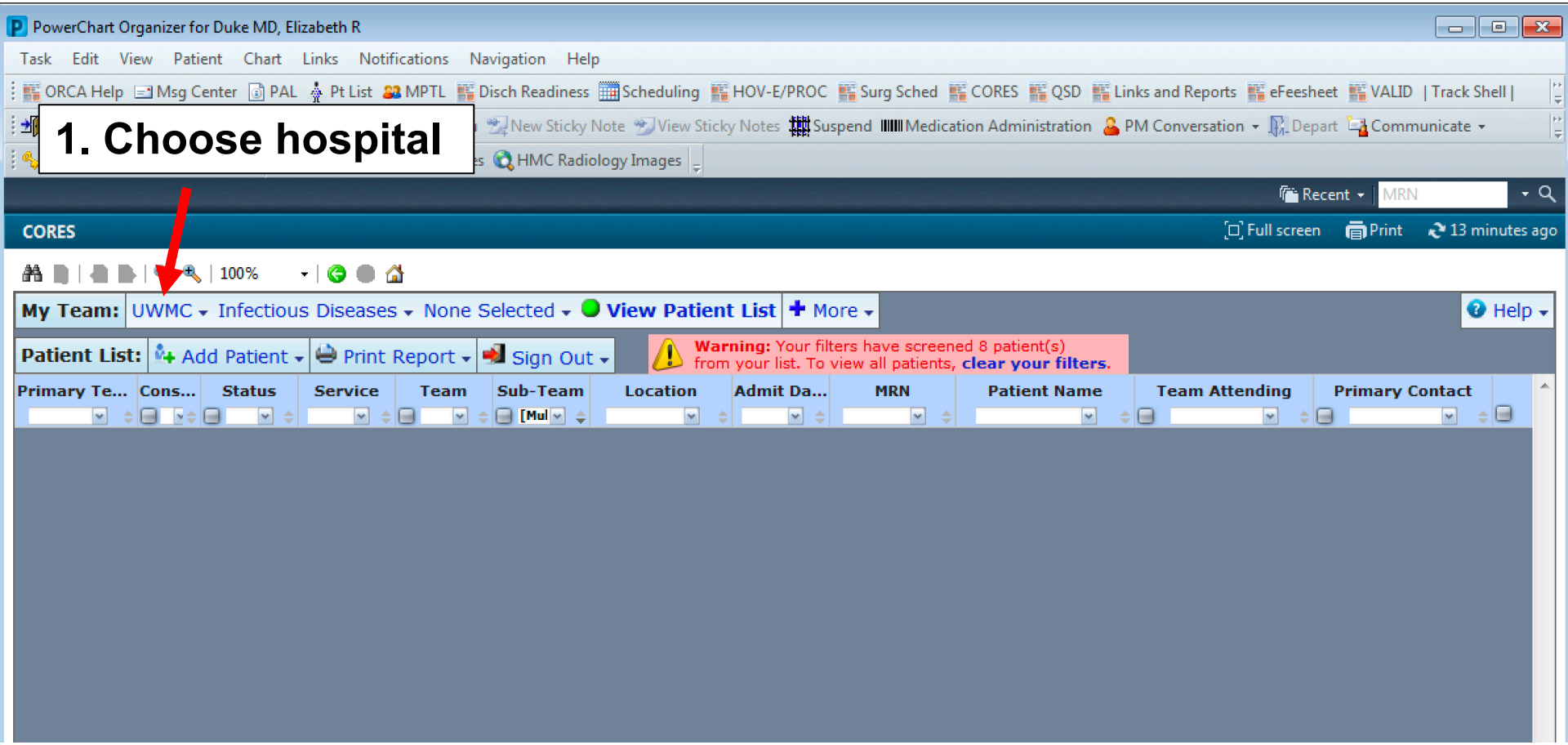


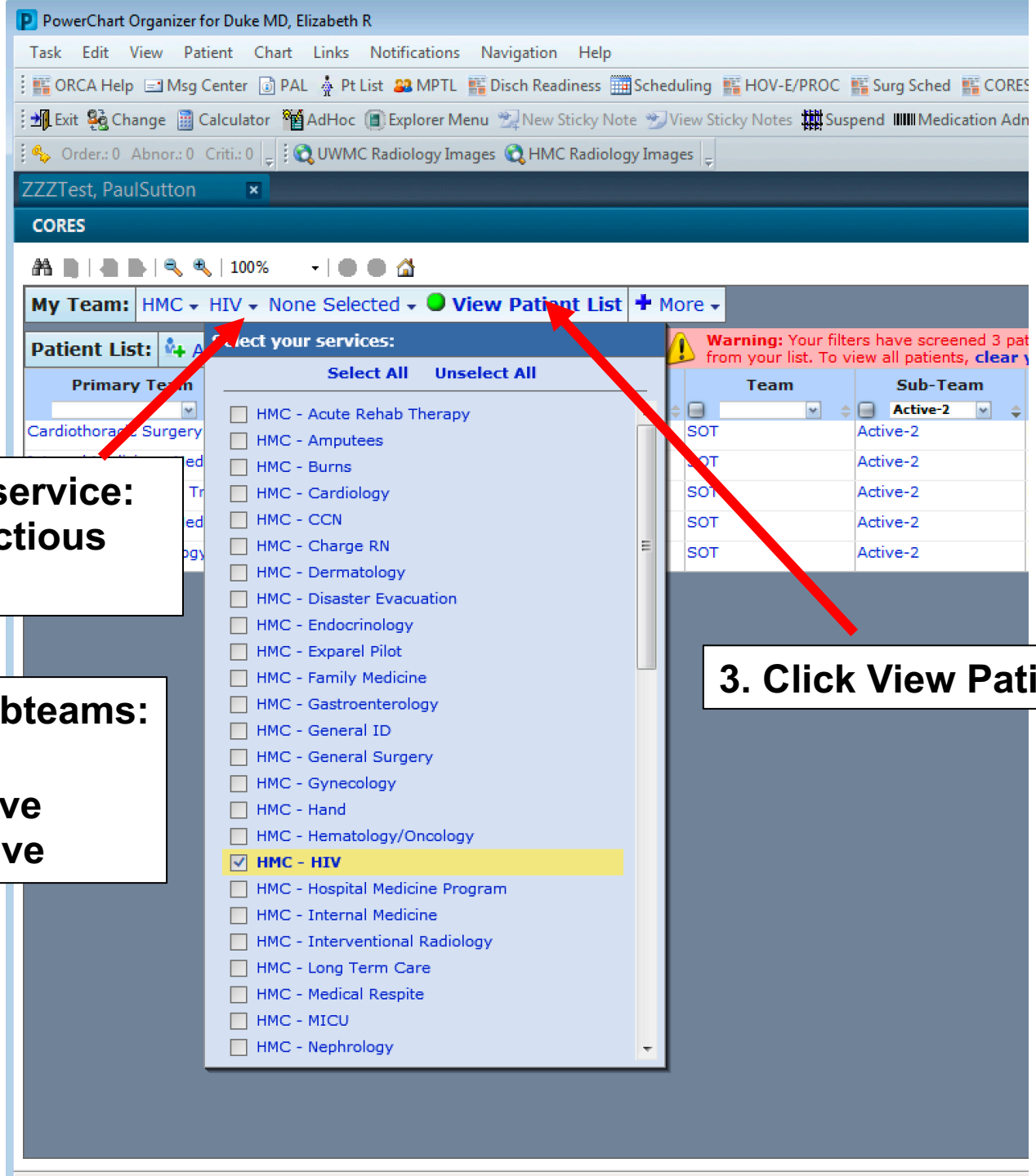
Don’t worry if nothing happens. Sometimes you have to choose a sub-team


PowerChart Organizer for Duke MD, Elizabeth R
Task Edit View Patient Chart Links Notifications Navigation Help
ORCA Help Msg Center PAL Pt List MPTL Disch Readiness Scheduling HOV-E/PROC Surg Sched CORES
Exit Change Calculator AdHoc Explorer Menu New Sticky Note View Sticky Notes Suspend Medication Administ
Criti.: 0 Abnor.: 0 Order.: 0 UWMC Radiology Images HMC Radiology Images
ZZZTest, PaulSutton
CORES
100%
My Team: UWMC Infectious Diseases [Multiple] None Selected View Patient List More
Patient List: Add Patient Print Report
Primary Team
Consult
Status
Internal Medicine - Med C
Orthopedic Surgery - Tu...
Cardiothoracic Surgery - ...
Internal Medicine - Med B
Transplant Surgery - Tra...
Internal Medicine - Med D
Cardiology - Cardiology B
Cardiothoracic Surgery - ...
Floor
Select your subteams:
Select All
Unselect All
Active - None
Active - None
Active-1 - None
Active-2 - None
Inactive - None
Inactive - None
Inactive - None
SOT - None
SOT - Active-1
SOT - Active-2
SOT - Inactive
1) Choose the subteams you wish to view from this menu.
2) View Patient List


PowerChart Organizer for Duke MD, Elizabeth R
Task Edit View Patient Chart Links Notifications Navigation Help
ORCA Help Msg Center PAL Pt List MPTL Disch Readiness Scheduling HOV-E/PROC Surg Sched CORES QSD Links and Reports eFeesheet VALID
Exit Change Calculator AdHoc Explorer Menu New Sticky Note View Sticky Notes Suspend Medication Administration PM Conversation Depart
Order.: 0 Abnor.: 0 Criti.: 0 UWMC Radiology Images HMC Radiology Images
ZZZTest, PaulSutton
CORES
100%
My Team: HMC HIV [Multiple] None Selected View Patient List More
Patient List: Add Patient Print Report Sign Out
Warning: Your filters have screened 7 patient(s) from your list. To view all patients, clear your filters.
Primary Team
Consult
Status
Service
Team
Sub-Team
Active-2
Location
Admit Date
At some point, you may need to clear your filters to see anything.

Let's choose Harborview instead.

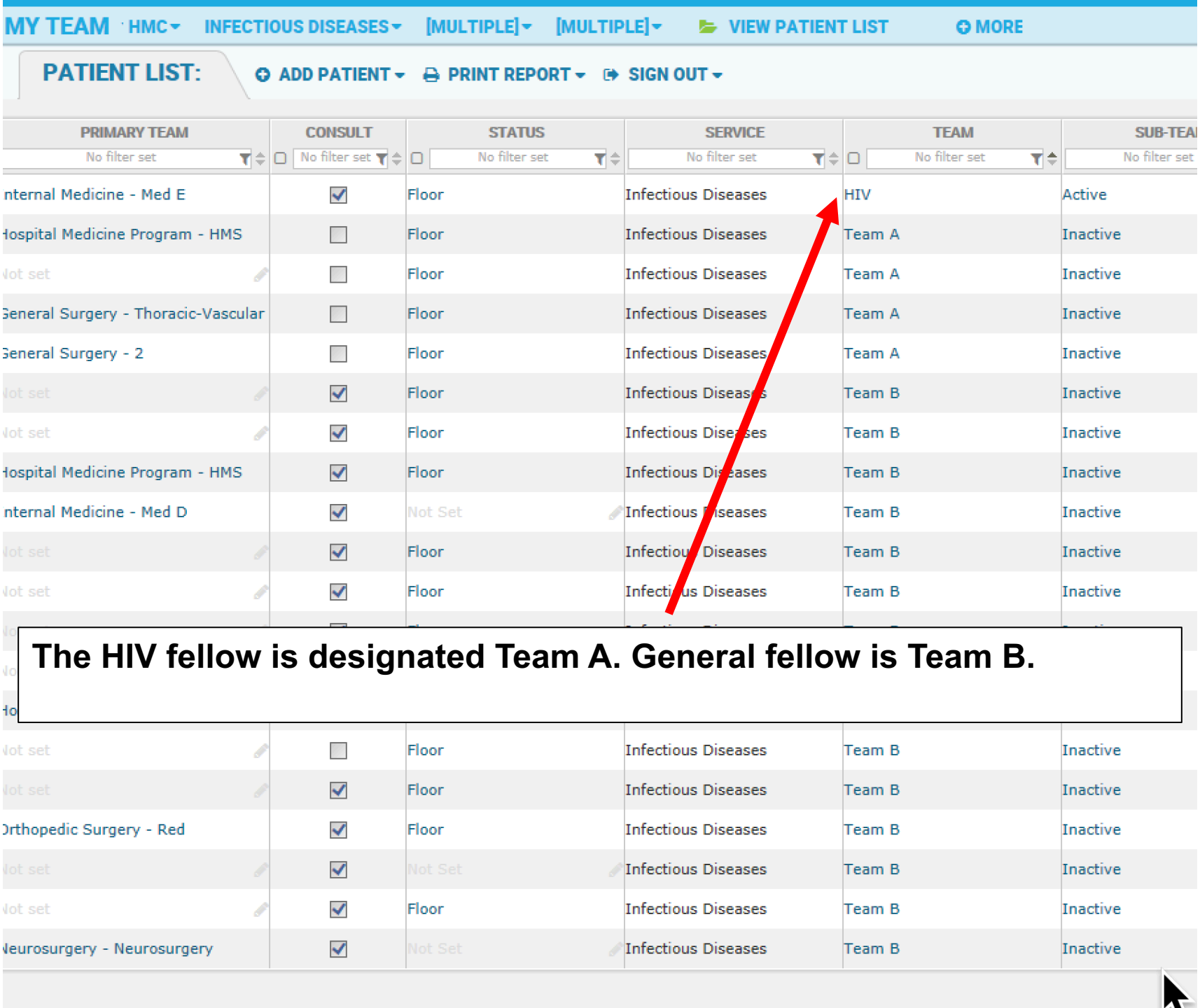


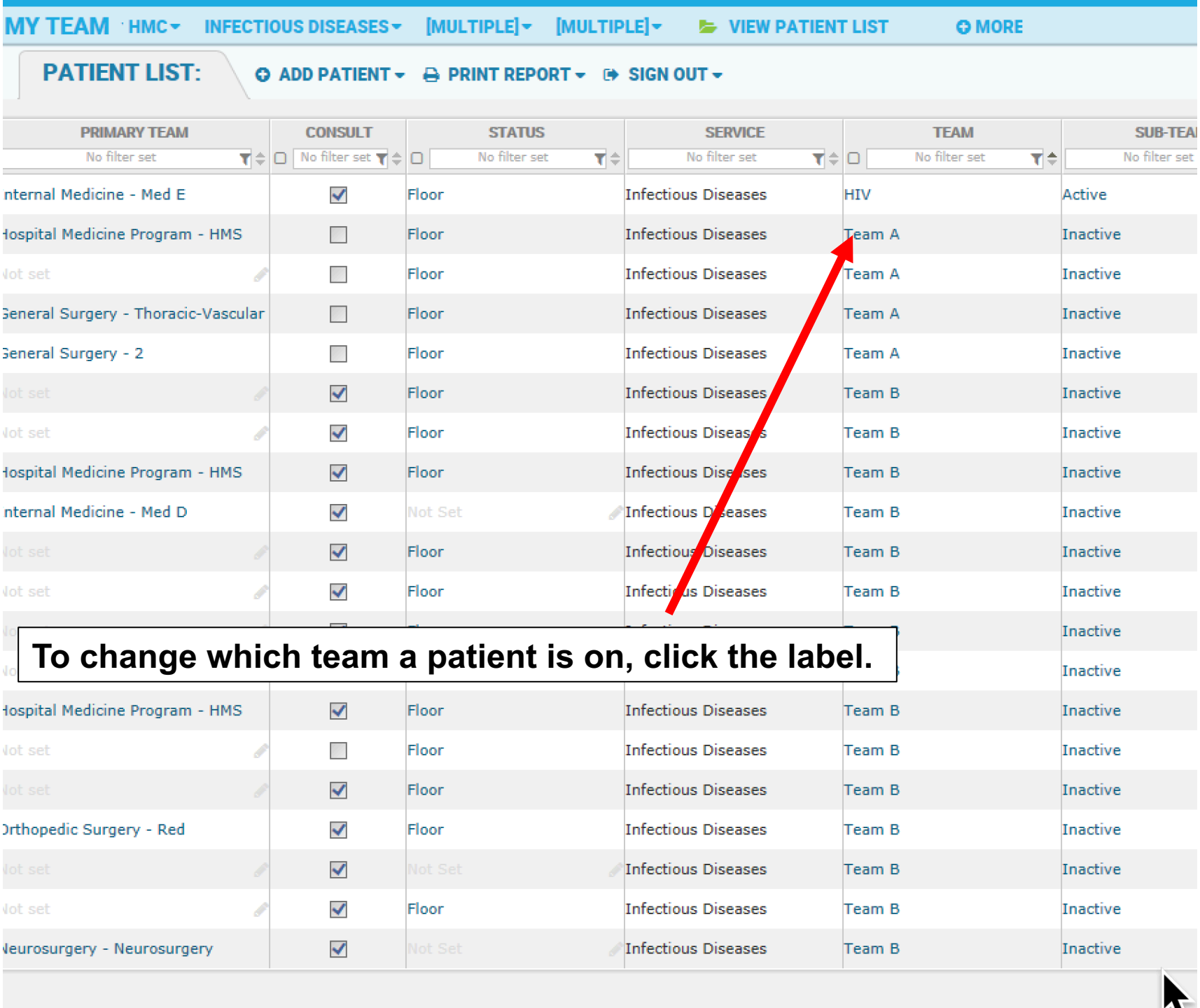


1. Choose service: HMC – Infectious Diseases

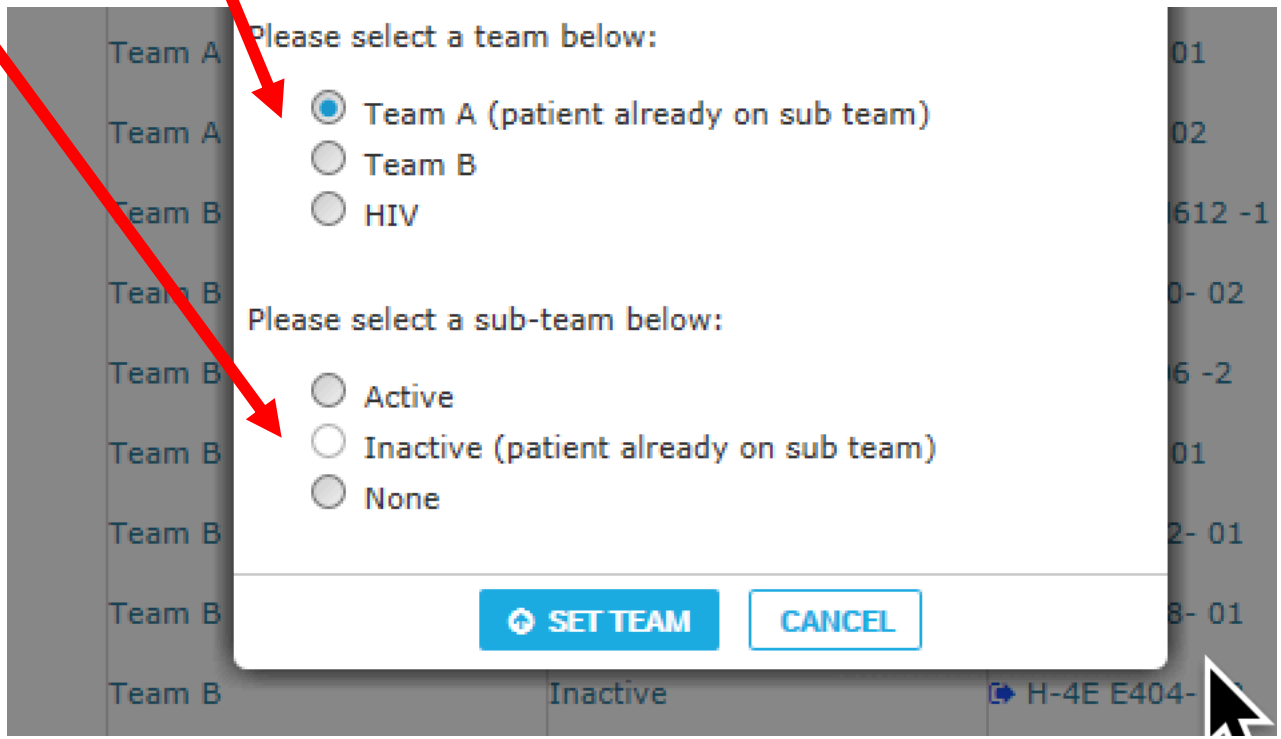
2. Choose subteams: HIV
Team A - Active
Team B - Active

3. Click View Patient List


MY TEAM
HMC
INFECTIOUS DISEASES
[MULTIPLE]
[MULTIPLE]
VIEW PATIENT LIST
MORE
PATIENT LIST:
ADD PATIENT
PRINT REPORT
SIGN OUT
PRIMARY TEAM
CONSULT
STATUS
SERVICE
TEAM
SUB-TEA
No filter set
nternal Medicine - Med E
Floor
Infectious Diseases
HIV
Active
Hospital Medicine Program - HMS
Team A
Inactive
Not set
General Surgery - Thoracic-Vascular
General Surgery - 2
Team B
Not Set
Orthopedic Surgery - Red
Neurosurgery - Neurosurgery
The HIV fellow is designated Team A. General fellow is Team B.


MY TEAM
HMC
INFECTIOUS DISEASES
[MULTIPLE]
[MULTIPLE]
VIEW PATIENT LIST
MORE
PATIENT LIST:
ADD PATIENT
PRINT REPORT
SIGN OUT
PRIMARY TEAM
CONSULT
STATUS
SERVICE
TEAM
SUB-TEA
No filter set
nternal Medicine - Med E
Floor
Infectious Diseases
HIV
Active
Hospital Medicine Program - HMS
Team A
Inactive
Not set
General Surgery - Thoracic-Vascular
General Surgery - 2
Team B
Not Set
Team B
Orthopedic Surgery - Red
Neurosurgery - Neurosurgery
To change which team a patient is on, click the label.

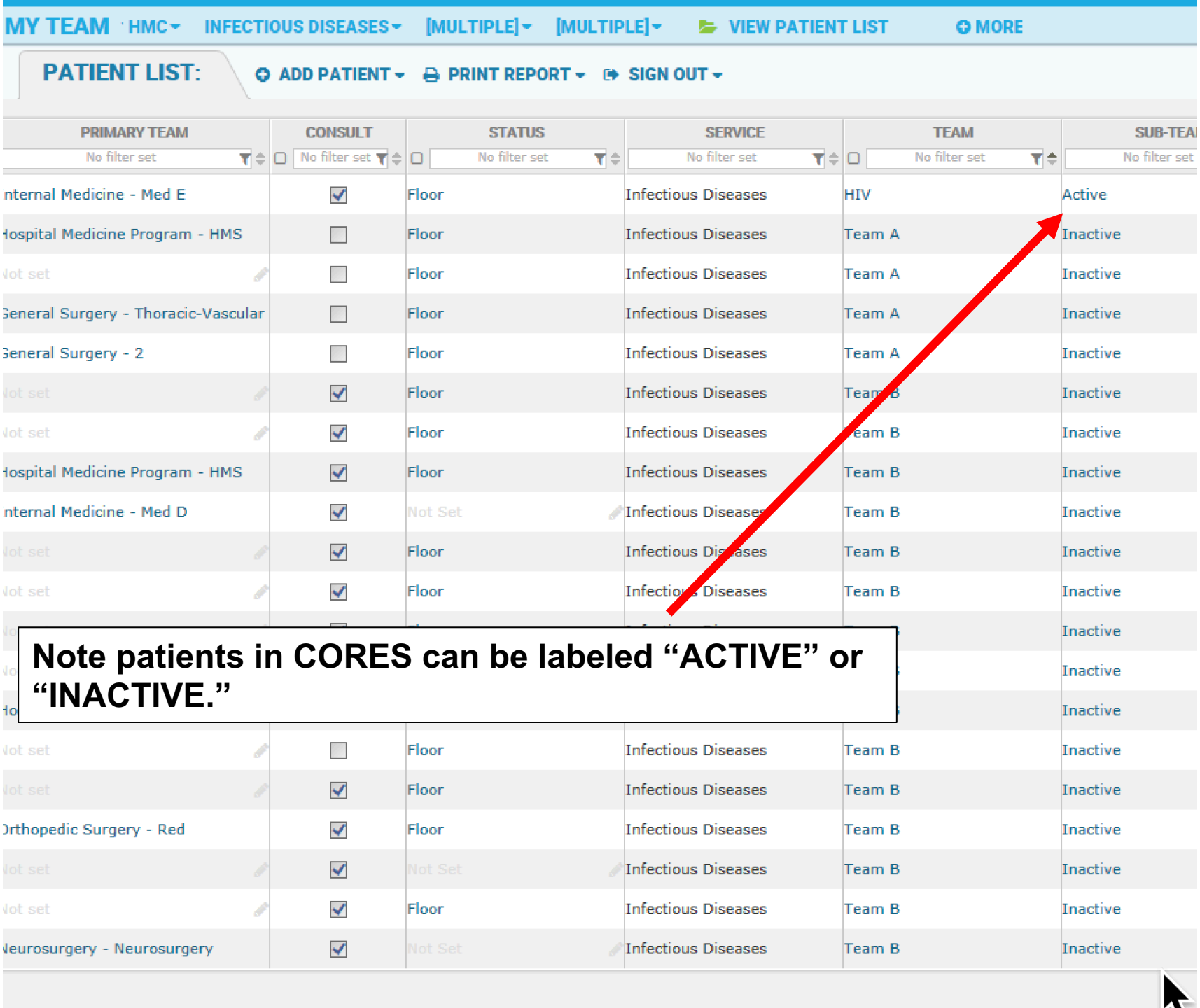
Select the new team below. You can also change a patient from Active to Inactive here.

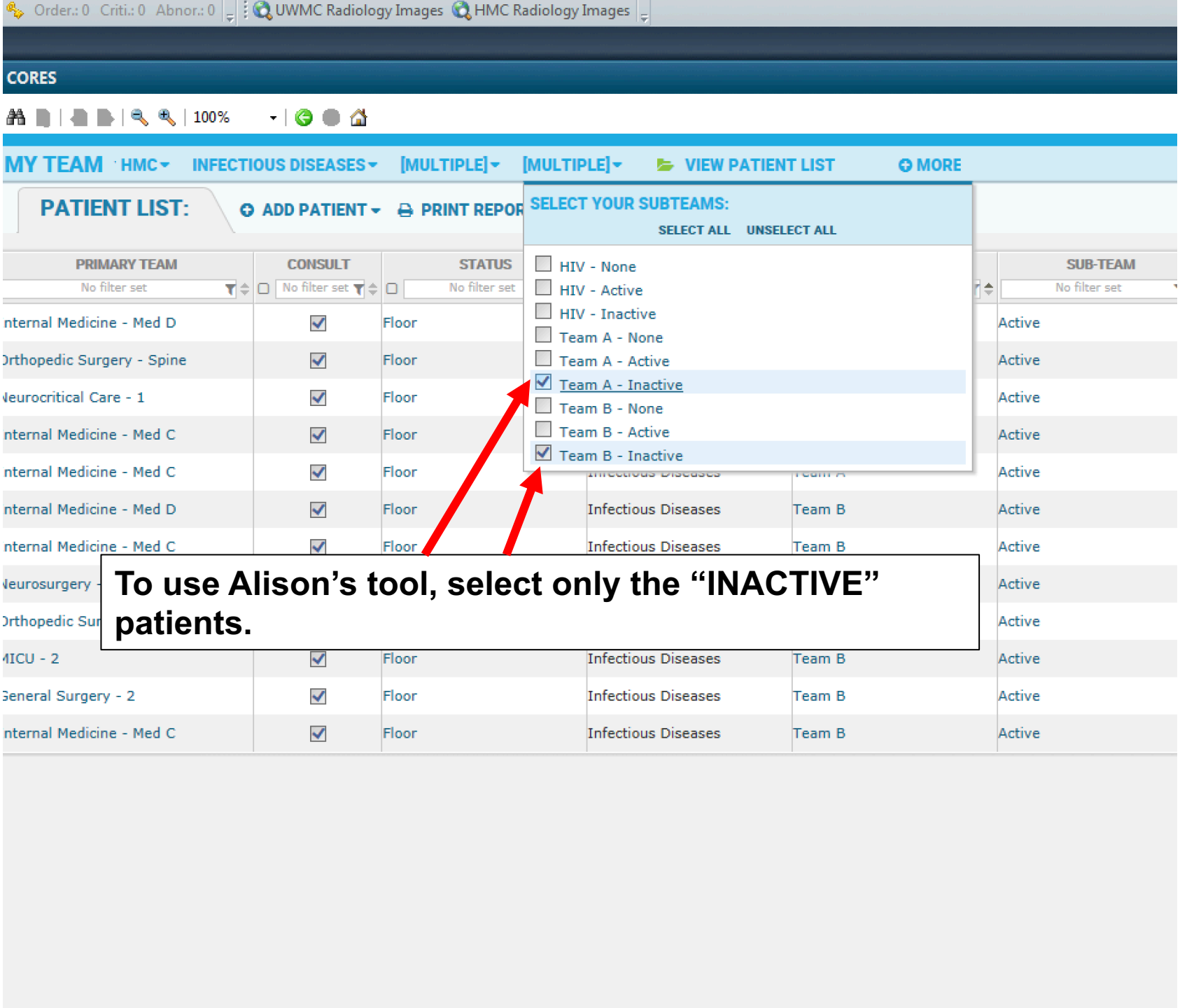


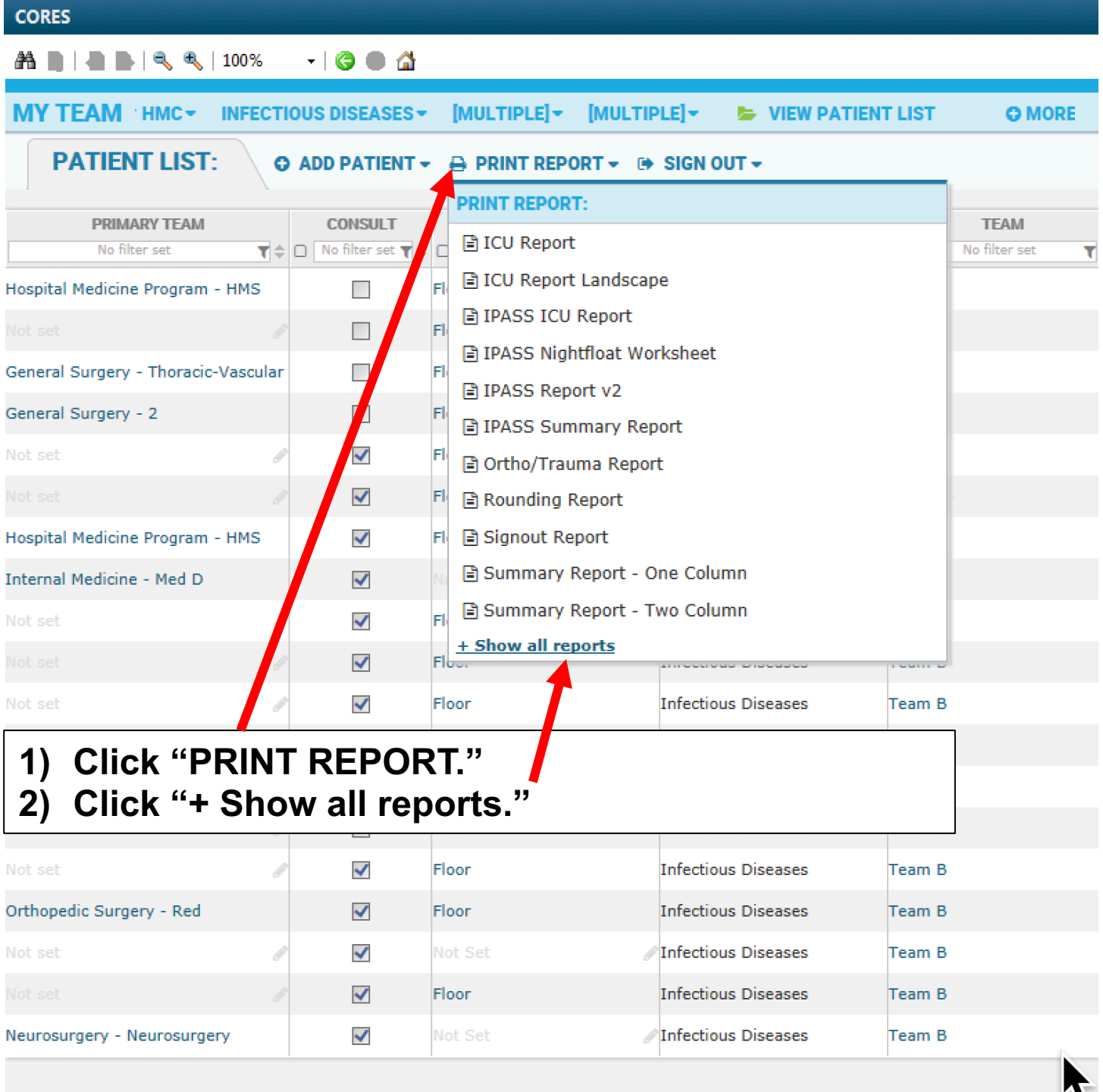
ACTIVE VERSUS INACTIVE PATIENTS

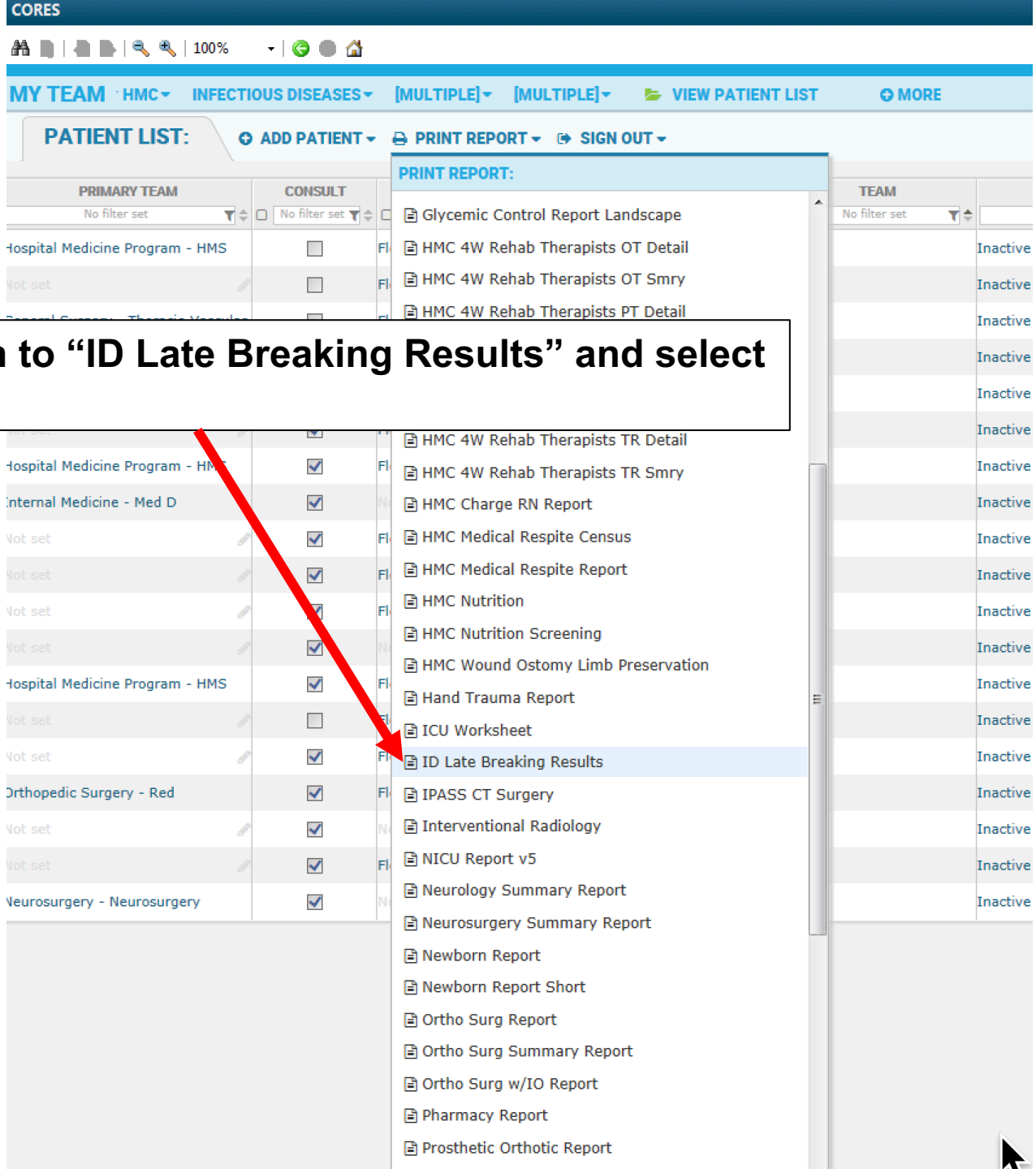
ACTIVE patients are being followed regularly by the ID consult team and have not yet been "signed off" on. Once the ID team no longer needs to physically or verbally round actively on a patient, if their cultures or other infectious disease testing has not finalized, they should be made INACTIVE. Once follow-up testing has resulted and been handed off, the patient can be removed from the INACTIVE list.

Alison Bieler has worked with ORCA to print a report of changes in culture information for those on the INACTIVE list. I'll show you how to access that.

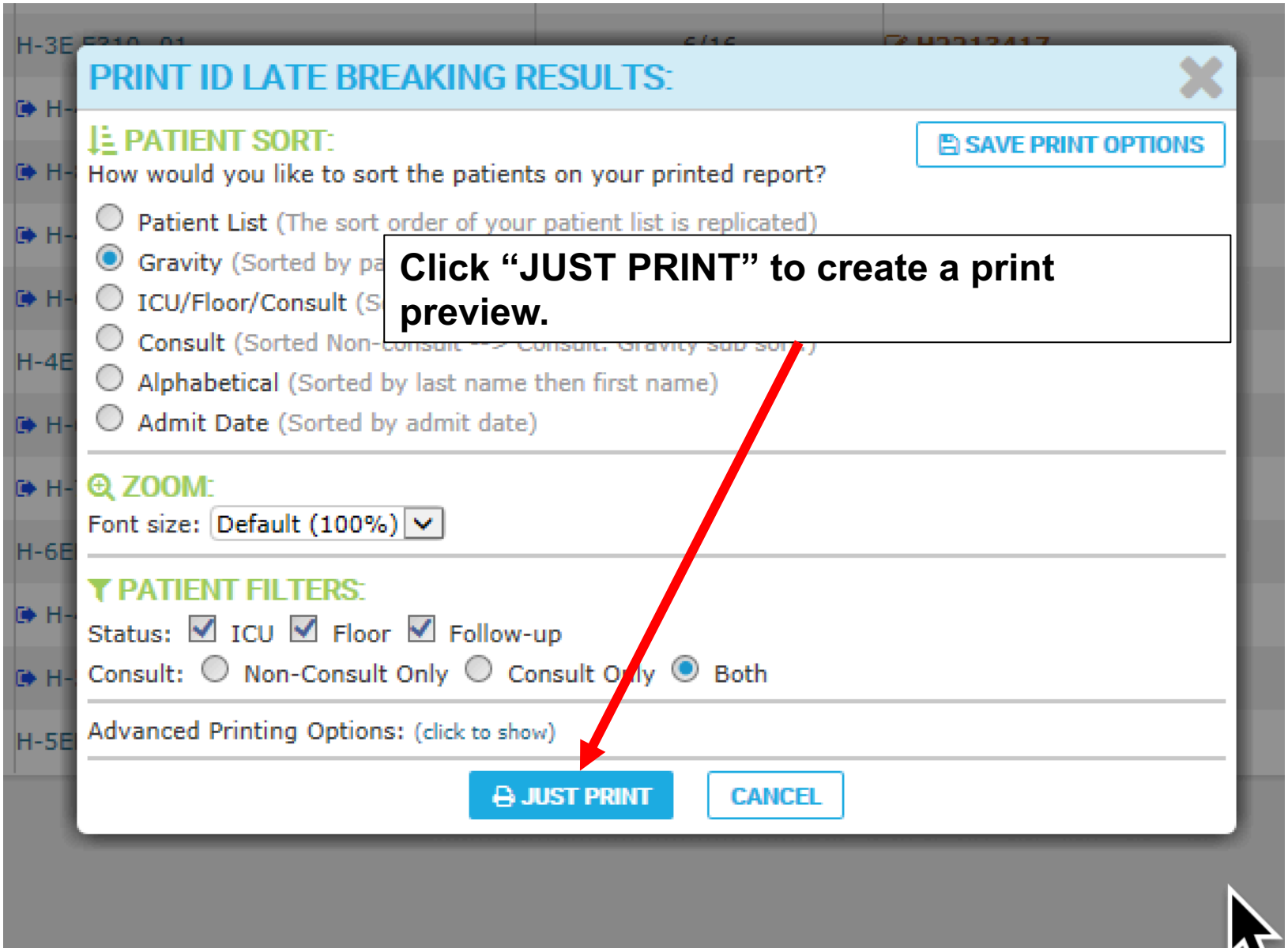

MY TEAM
HMC
INFECTIOUS DISEASES
[MULTIPLE]
[MULTIPLE]
VIEW PATIENT LIST
MORE
PATIENT LIST:
ADD PATIENT
PRINT REPORT
SIGN OUT
PRIMARY TEAM
CONSULT
STATUS
SERVICE
TEAM
SUB-TEA
No filter set
nternal Medicine - Med E
Floor
Infectious Diseases
HIV
Active
Hospital Medicine Program - HMS
Team A
Inactive
Not set
General Surgery - Thoracic-Vascular
General Surgery - 2
Team B
Team B
Not Set
Orthopedic Surgery - Red
Neurosurgery - Neurosurgery
Note patients in CORES can be labeled “ACTIVE” or “INACTIVE.”


Order.: 0 Criti.: 0 Abnor.: 0
UWMC Radiology Images
HMC Radiology Images
CORES
100%
MY TEAM
HMC
INFECTIOUS DISEASES
[MULTIPLE]
[MULTIPLE]
VIEW PATIENT LIST
MORE
PATIENT LIST:
ADD PATIENT
PRINT REPOR
SELECT YOUR SUBTEAMS:
SELECT ALL
UNSELECT ALL
HIV - None
HIV - Active
HIV - Inactive
Team A - None
Team A - Active
Team A - Inactive
Team B - None
Team B - Active
Team B - Inactive
PRIMARY TEAM
CONSULT
STATUS
SUB-TEAM
No filter set
nternal Medicine - Med D
Floor
Active
Orthopedic Surgery - Spine
Floor
Active
Neurocritical Care - 1
Floor
Active
nternal Medicine - Med C
Floor
Active
nternal Medicine - Med C
Floor
Active
nternal Medicine - Med D
Floor
Infectious Diseases
Team B
Active
nternal Medicine - Med C
Floor
Infectious Diseases
Team B
Active
Neurosurgery
Active
Orthopedic Sur
Active
MICU - 2
Floor
Infectious Diseases
Team B
Active
General Surgery - 2
Floor
Infectious Diseases
Team B
Active
nternal Medicine - Med C
Floor
Infectious Diseases
Team B
Active
To use Alison's tool, select only the "INACTIVE" patients.

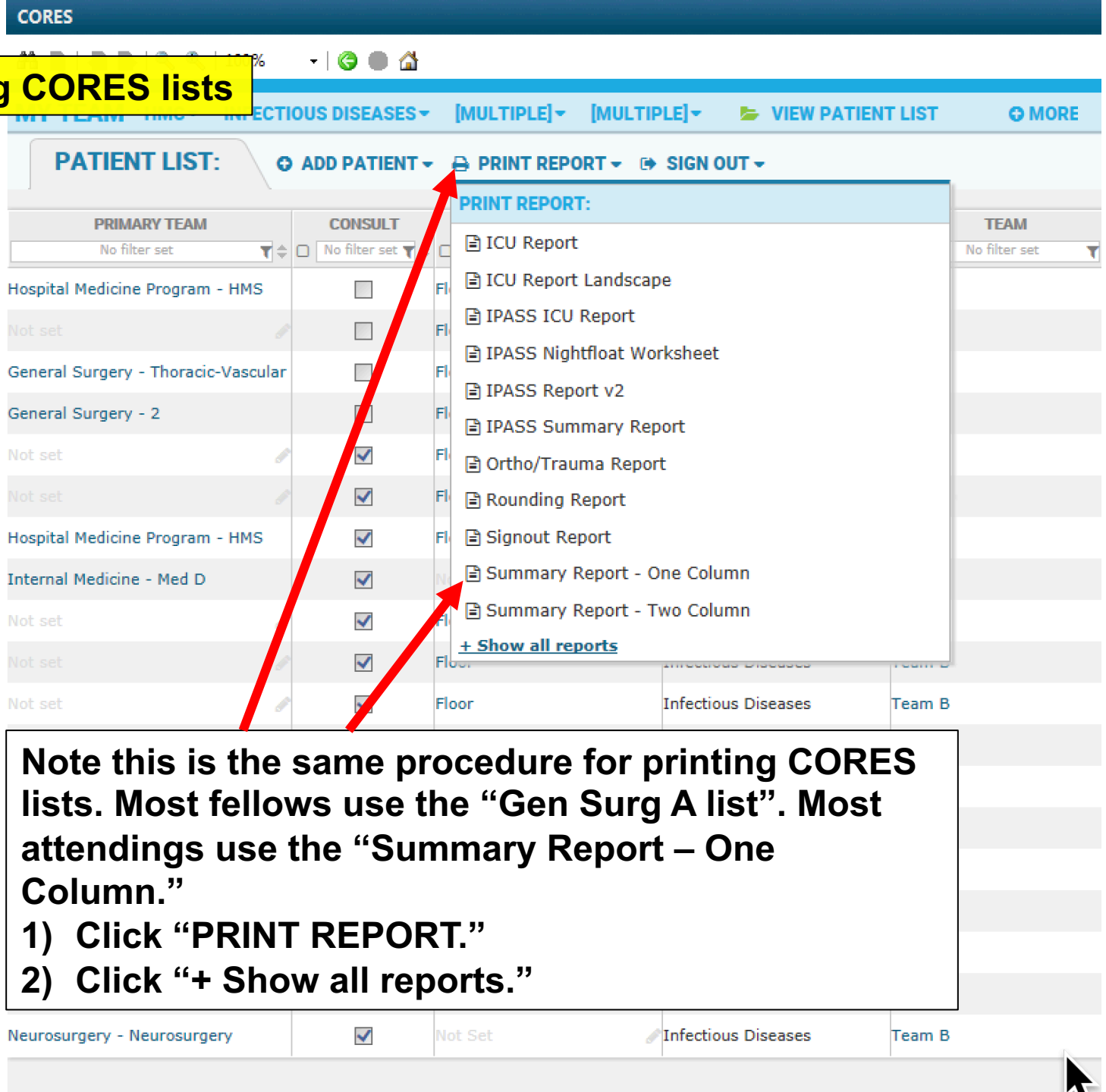

CORES
100%
MY TEAM
HMC
INFECTIOUS DISEASES
[MULTIPLE]
[MULTIPLE]
VIEW PATIENT LIST
MORE
PATIENT LIST:
ADD PATIENT
PRINT REPORT
SIGN OUT
PRINT REPORT:
ICU Report
ICU Report Landscape
IPASS ICU Report
IPASS Nightfloat Worksheet
IPASS Report v2
IPASS Summary Report
Ortho/Trauma Report
Rounding Report
Signout Report
Summary Report - One Column
Summary Report - Two Column
+ Show all reports
PRIMARY TEAM
CONSULT
TEAM
No filter set
Hospital Medicine Program - HMS
Not set
General Surgery - Thoracic-Vascular
General Surgery - 2
Not set
Not set
Hospital Medicine Program - HMS
Internal Medicine - Med D
Not set
Not set
Not set
Floor
Infectious Diseases
Team B
Not set
Floor
Infectious Diseases
Team B
Orthopedic Surgery - Red
Floor
Infectious Diseases
Team B
Not set
Not Set
Infectious Diseases
Team B
Not set
Floor
Infectious Diseases
Team B
Neurosurgery - Neurosurgery
Not Set
Infectious Diseases
Team B
1) Click “PRINT REPORT.”
2) Click “+ Show all reports.”



Scroll down to “ID Late Breaking Results” and select it.


PRINT ID LATE BREAKING RESULTS:
SAVE PRINT OPTIONS
PATIENT SORT:
How would you like to sort the patients on your printed report?
Patient List (The sort order of your patient list is replicated)
Gravity (Sorted by pa
ICU/Floor/Consult (S
Consult (Sorted Non-
Alphabetical (Sorted by last name then first name)
Admit Date (Sorted by admit date)
Click “JUST PRINT” to create a print preview.
ZOOM:
Font size: Default (100%)
PATIENT FILTERS:
Status: ICU Floor Follow-up
Consult: Non-Consult Only Consult Only Both
Advanced Printing Options: (click to show)
JUST PRINT
CANCEL

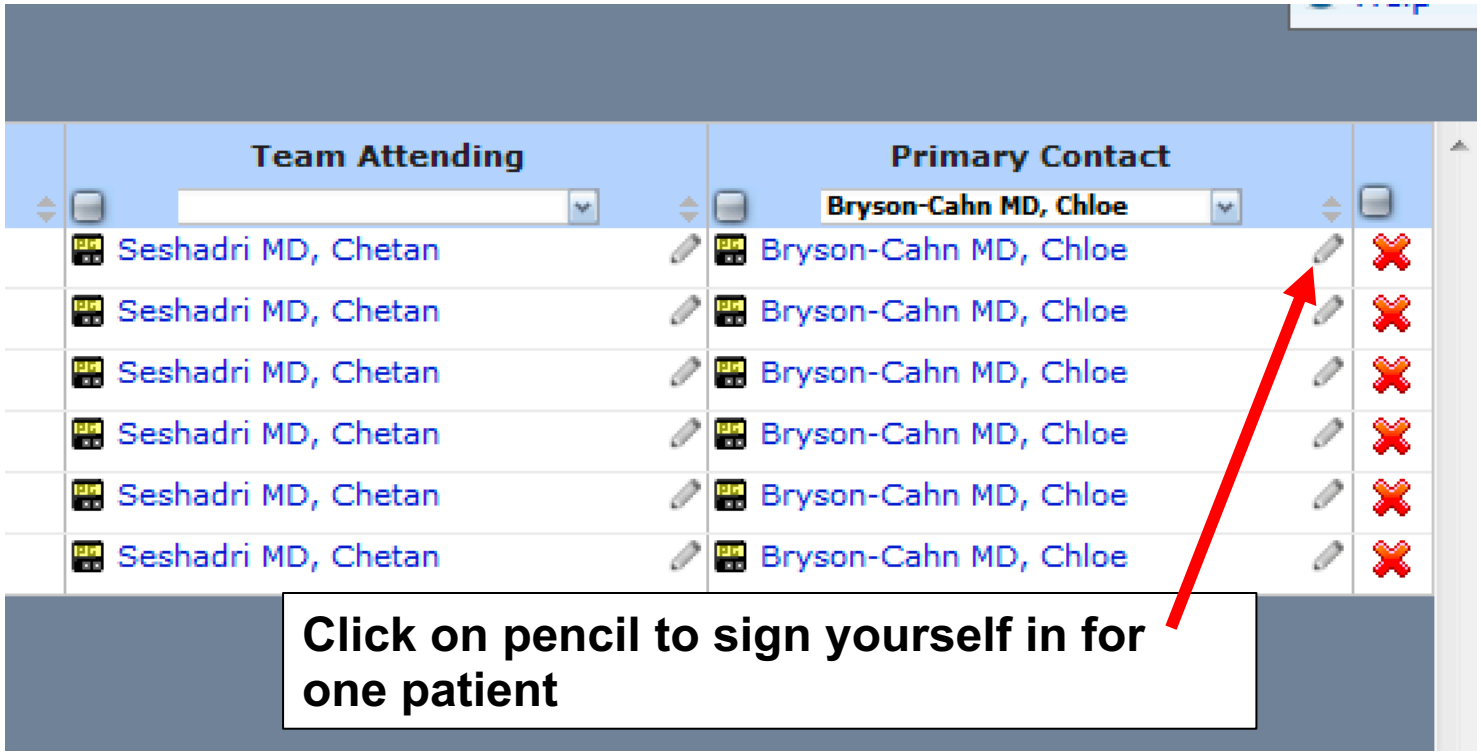
Printing CORES lists



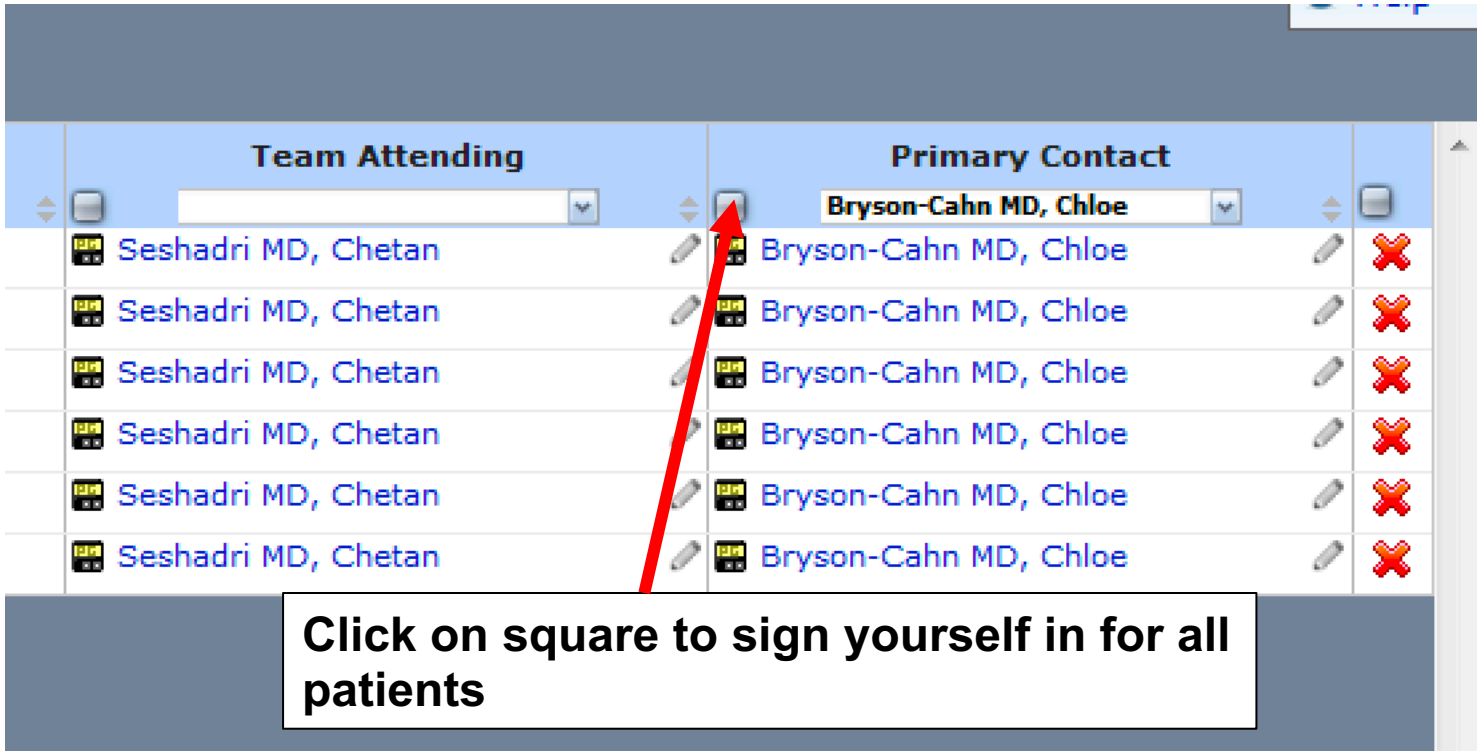
Note this is the same procedure for printing CORES lists. Most fellows use the "Gen Surg A list". Most attendings use the "Summary Report – One Column."

1) **Click "PRINT REPORT."**
2) **Click "+ Show all reports."**

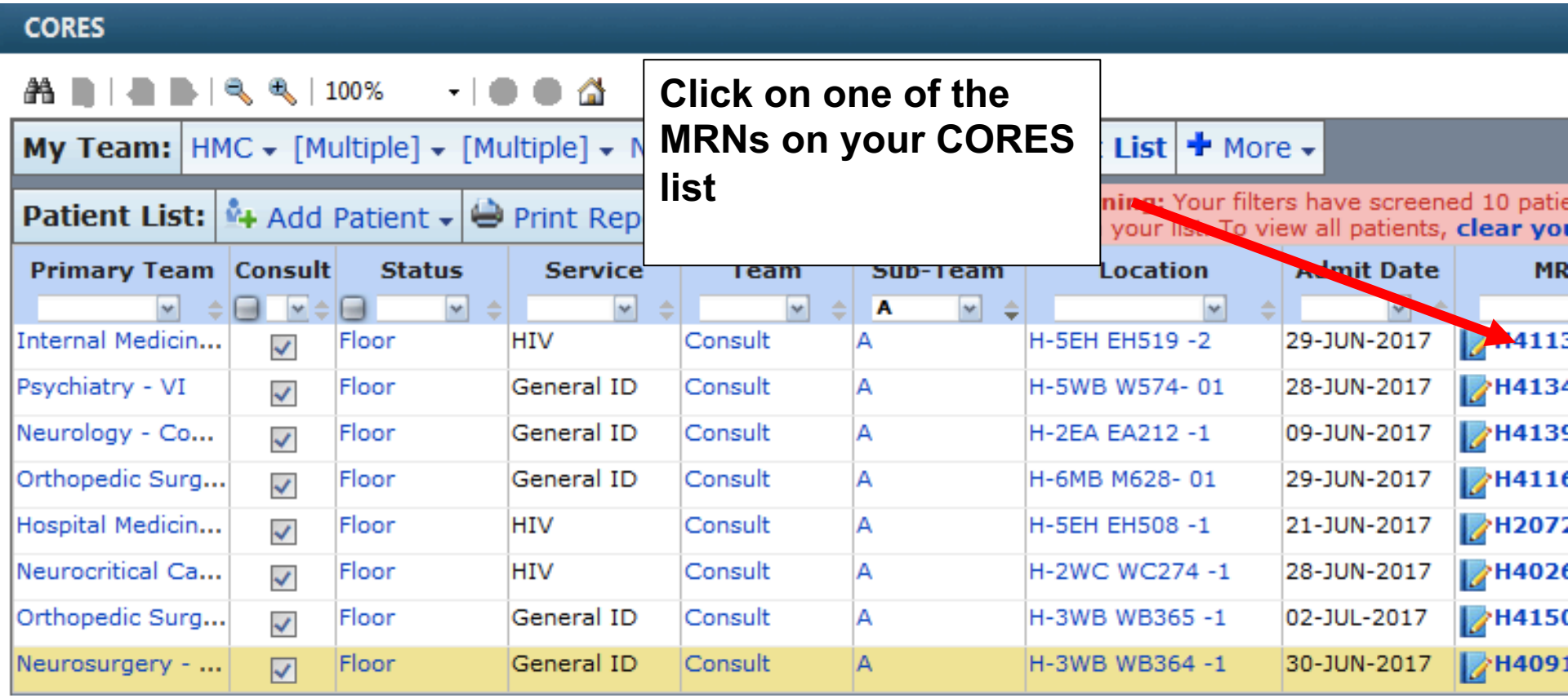
To sign yourself into CORES



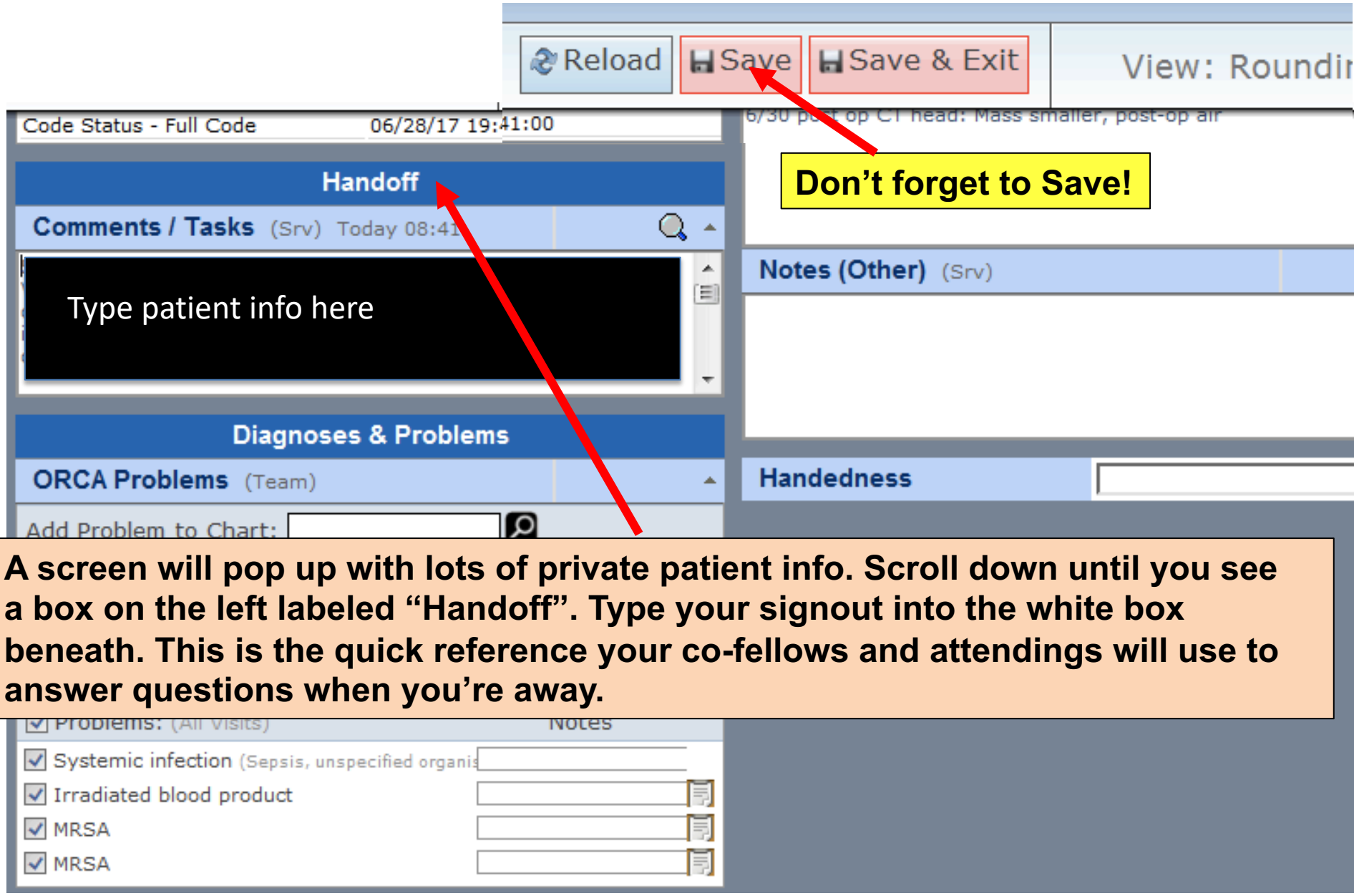
To sign yourself into CORES



HOW TO UPDATE CORES SIGNOUT:

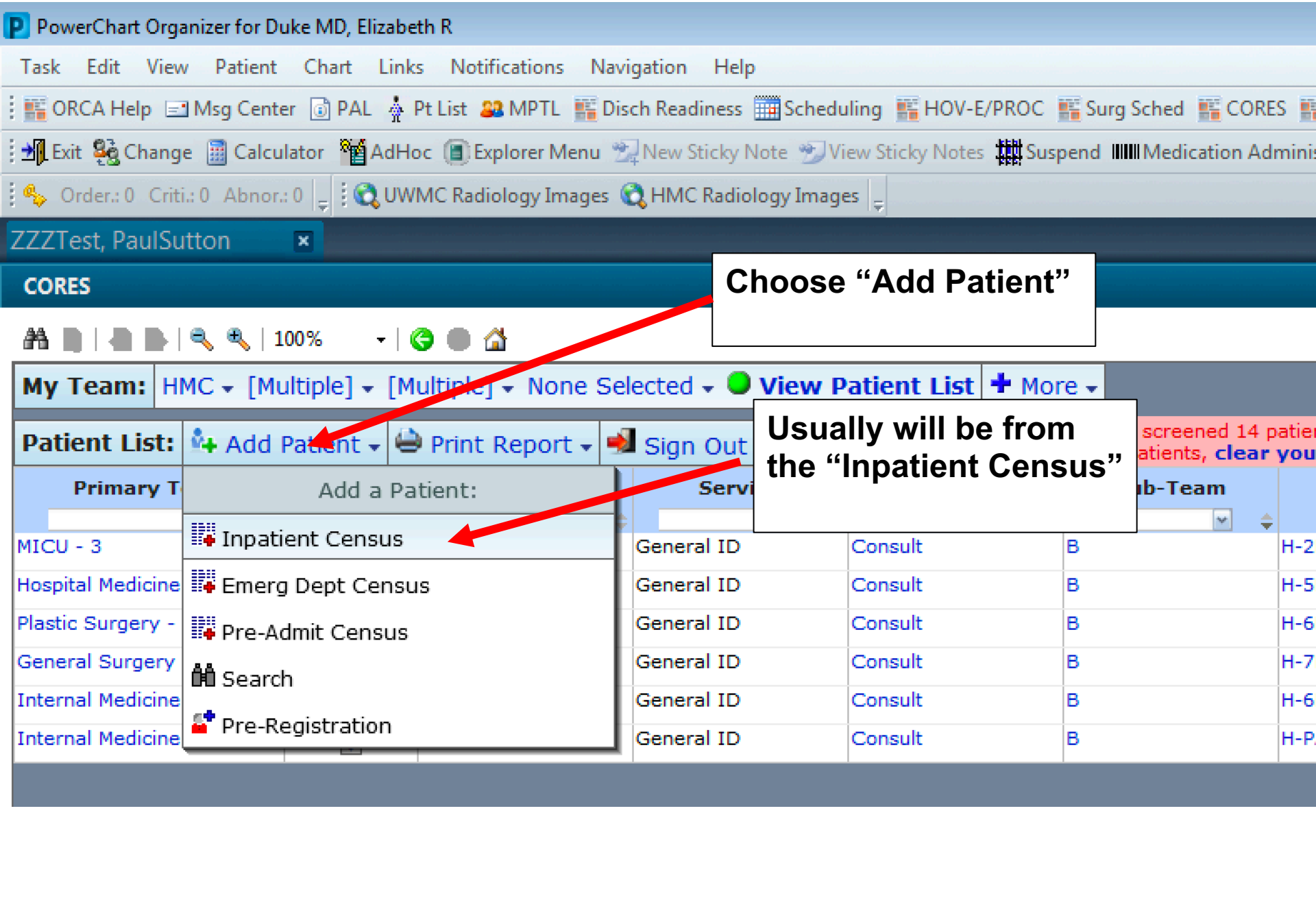


Click on one of the MRNs on your CORES list

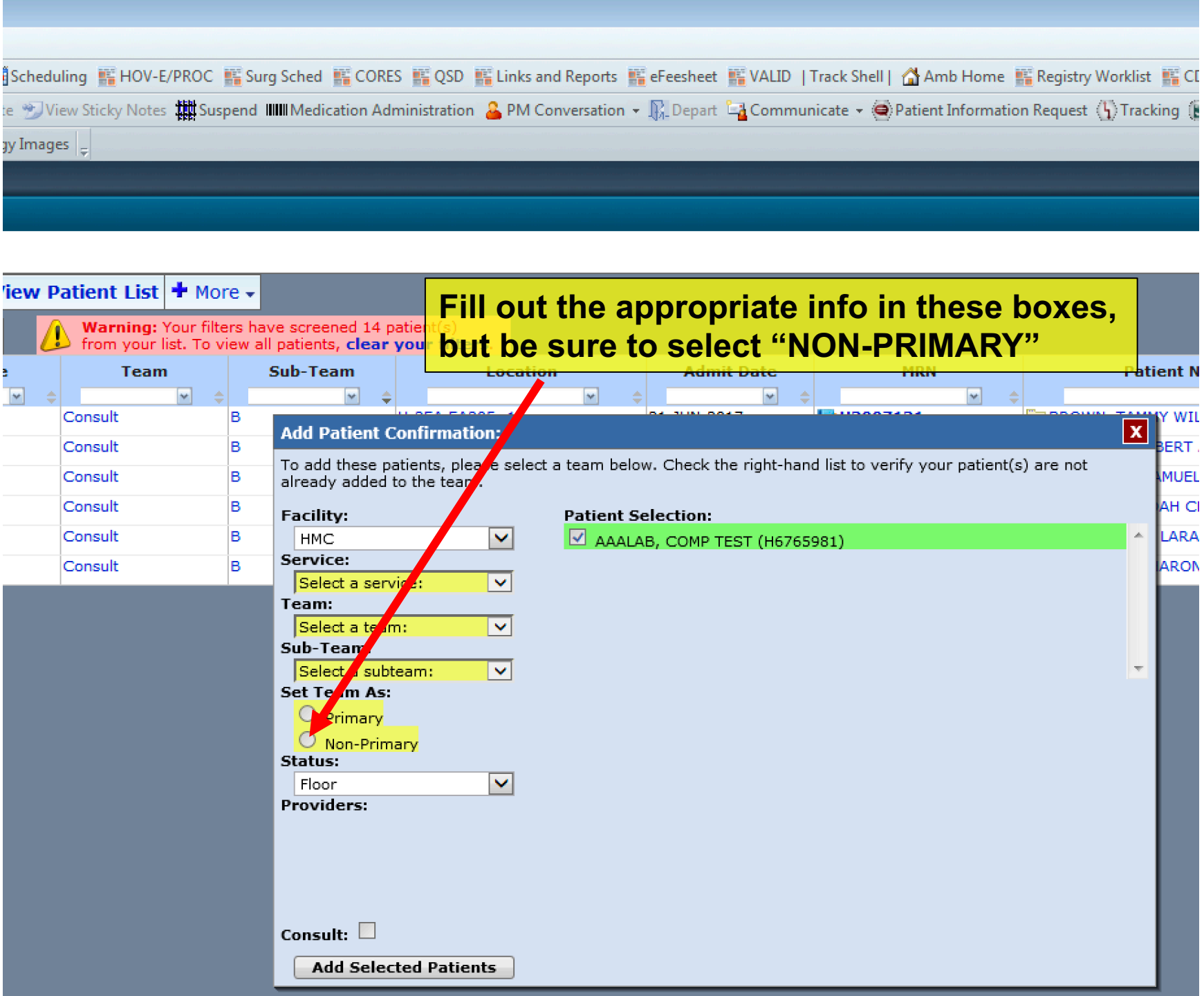


A screen will pop up with lots of private patient info. Scroll down until you see a box on the left labeled "Handoff". Type your signout into the white box beneath. This is the quick reference your co-fellows and attendings will use to answer questions when you're away.

HOW TO ADD SOMEONE TO THE CORES LIST

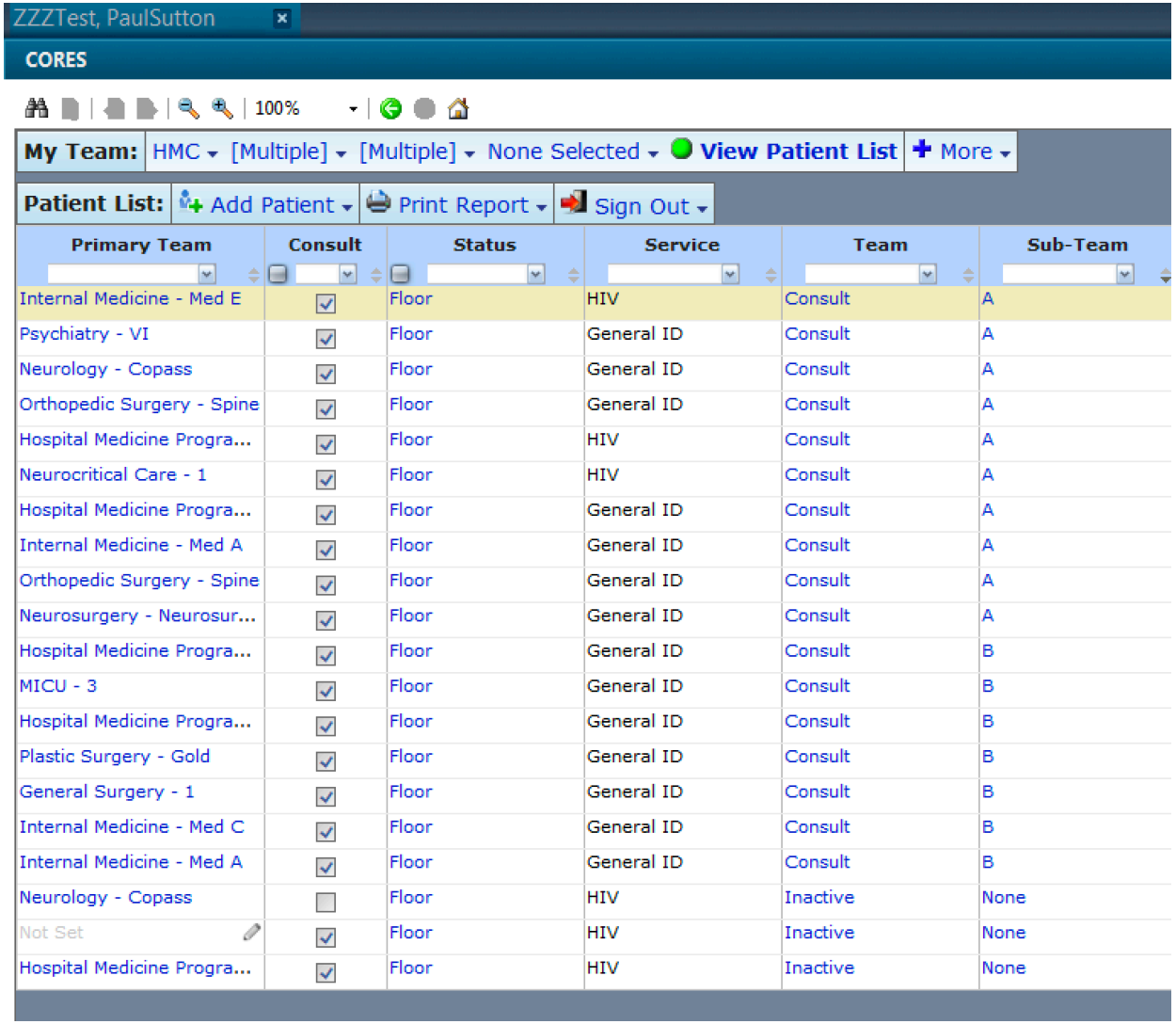


Choose a patient. They're in alphabetical order. Then the following will pop up (next slide).


Scheduling
HOV-E/PROC
Surg Sched
CORES
QSD
Links and Reports
eFeesheet
VALID
| Track Shell |
Amb Home
Registry Worklist
View Sticky Notes
Suspend
Medication Administration
PM Conversation
Depart
Communicate
Patient Information Request
Tracking
Images
View Patient List
More
Warning: Your filters have screened 14 patient(s) from your list. To view all patients, clear your
Fill out the appropriate info in these boxes, but be sure to select "NON-PRIMARY"
Team
Sub-Team
Location
Admit Date
MRN
Patient N
Consult
B
Add Patient Confirmation:
To add these patients, please select a team below. Check the right-hand list to verify your patient(s) are not already added to the team.
Facility:
HMC
Service:
Select a service:
Team:
Select a team:
Sub-Team:
Select a subteam:
Set Team As:
Primary
Non-Primary
Status:
Floor
Providers:
Patient Selection:
AAALAB, COMP TEST (H6765981)
Consult:
Add Selected Patients

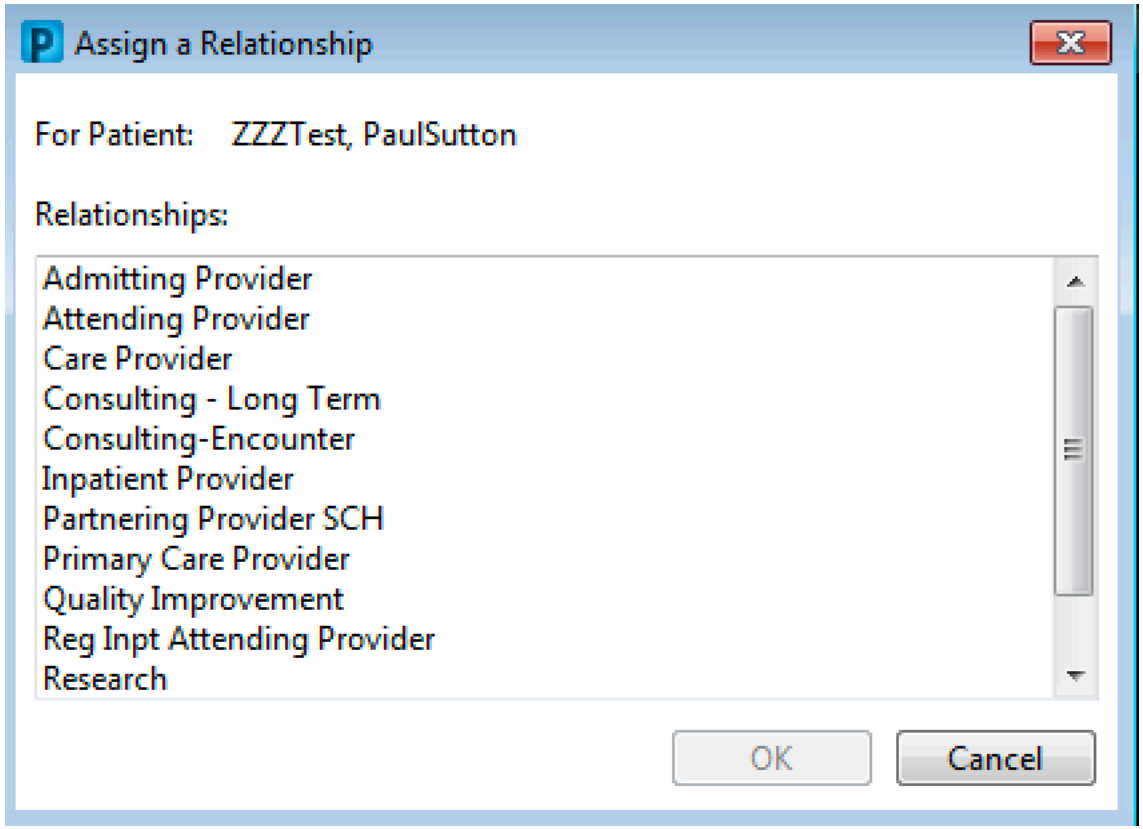
HOW TO PAGE SOMEONE IN CORES

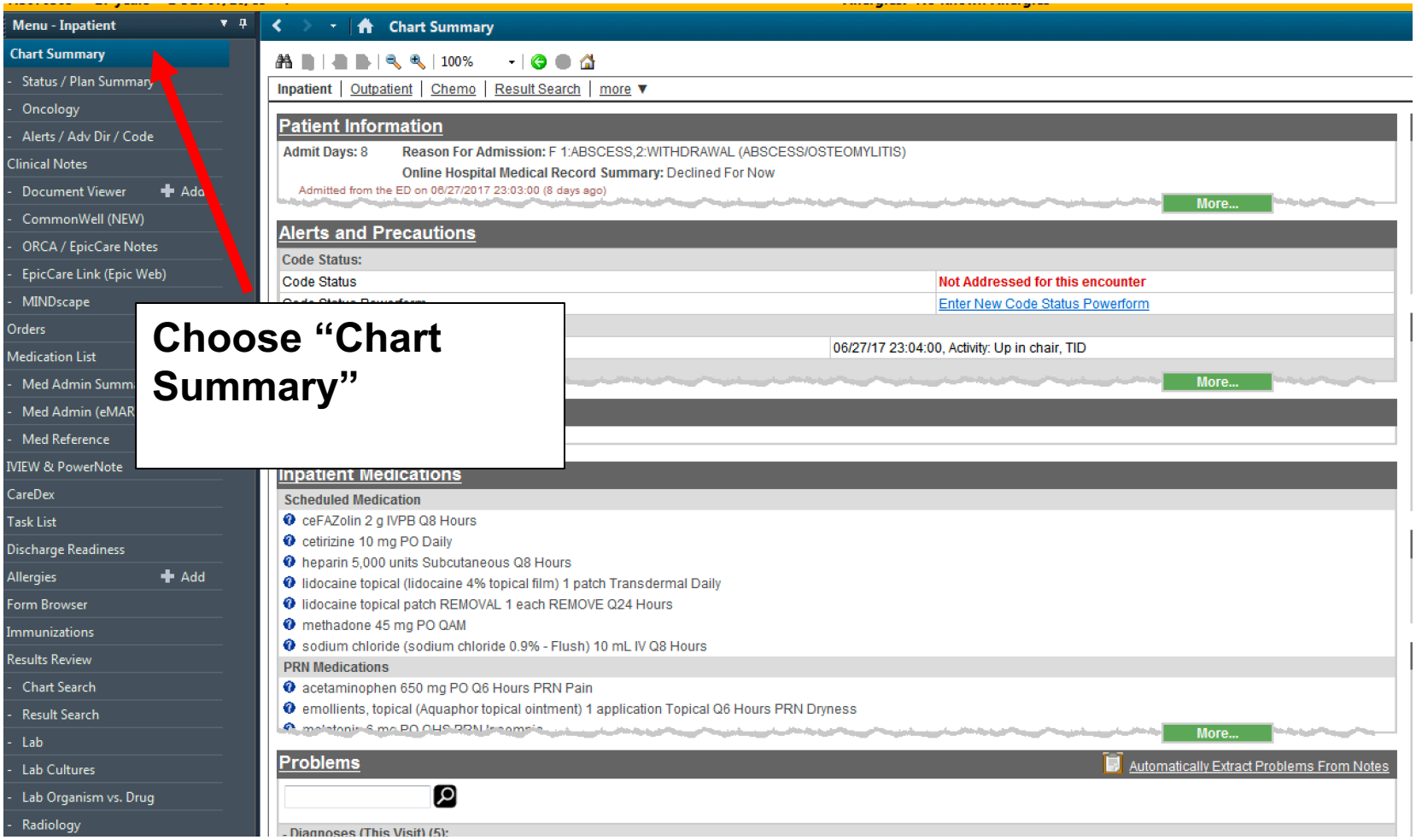
First choose a patient from the ID list.



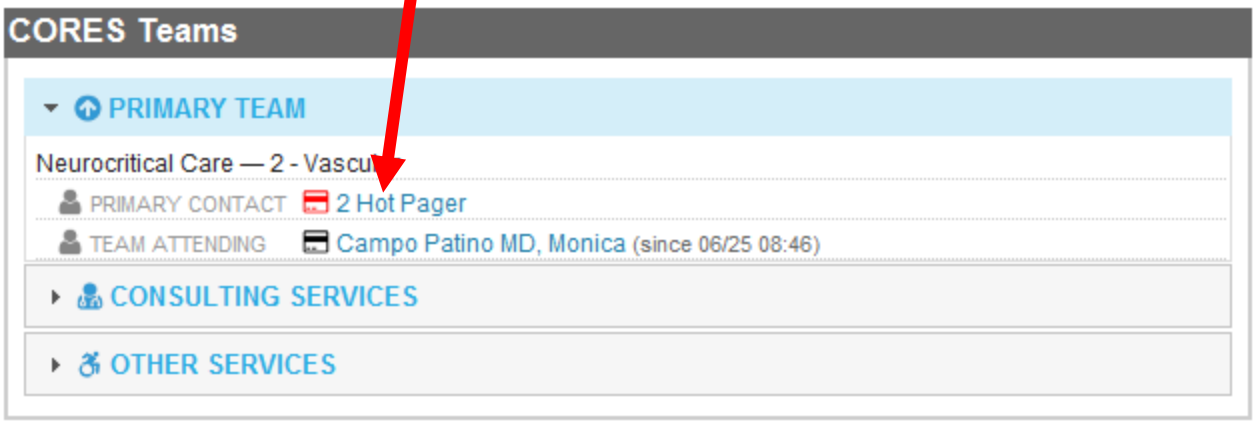
Primary Team	Consult	Status	Service	Team	Sub-Team
Internal Medicine - Med E	☑	Floor	HIV	Consult	A
Psychiatry - VI	☑	Floor	General ID	Consult	A
Neurology - Copass	☑	Floor	General ID	Consult	A
Orthopedic Surgery - Spine	☑	Floor	General ID	Consult	A
Hospital Medicine Progra...	☑	Floor	HIV	Consult	A
Neurocritical Care - 1	☑	Floor	HIV	Consult	A
Hospital Medicine Progra...	☑	Floor	General ID	Consult	A
Internal Medicine - Med A	☑	Floor	General ID	Consult	A
Orthopedic Surgery - Spine	☑	Floor	General ID	Consult	A
Neurosurgery - Neurosur...	☑	Floor	General ID	Consult	A
Hospital Medicine Progra...	☑	Floor	General ID	Consult	B
MICU - 3	☑	Floor	General ID	Consult	B
Hospital Medicine Progra...	☑	Floor	General ID	Consult	B
Plastic Surgery - Gold	☑	Floor	General ID	Consult	B
General Surgery - 1	☑	Floor	General ID	Consult	B
Internal Medicine - Med C	☑	Floor	General ID	Consult	B
Internal Medicine - Med A	☑	Floor	General ID	Consult	B
Neurology - Copass	☐	Floor	HIV	Inactive	None
Not Set	☑	Floor	HIV	Inactive	None
Hospital Medicine Progra...	☑	Floor	HIV	Inactive	None

Indicate you are a “Care Provider”
(for micro rounds – “Quality Improvement”)

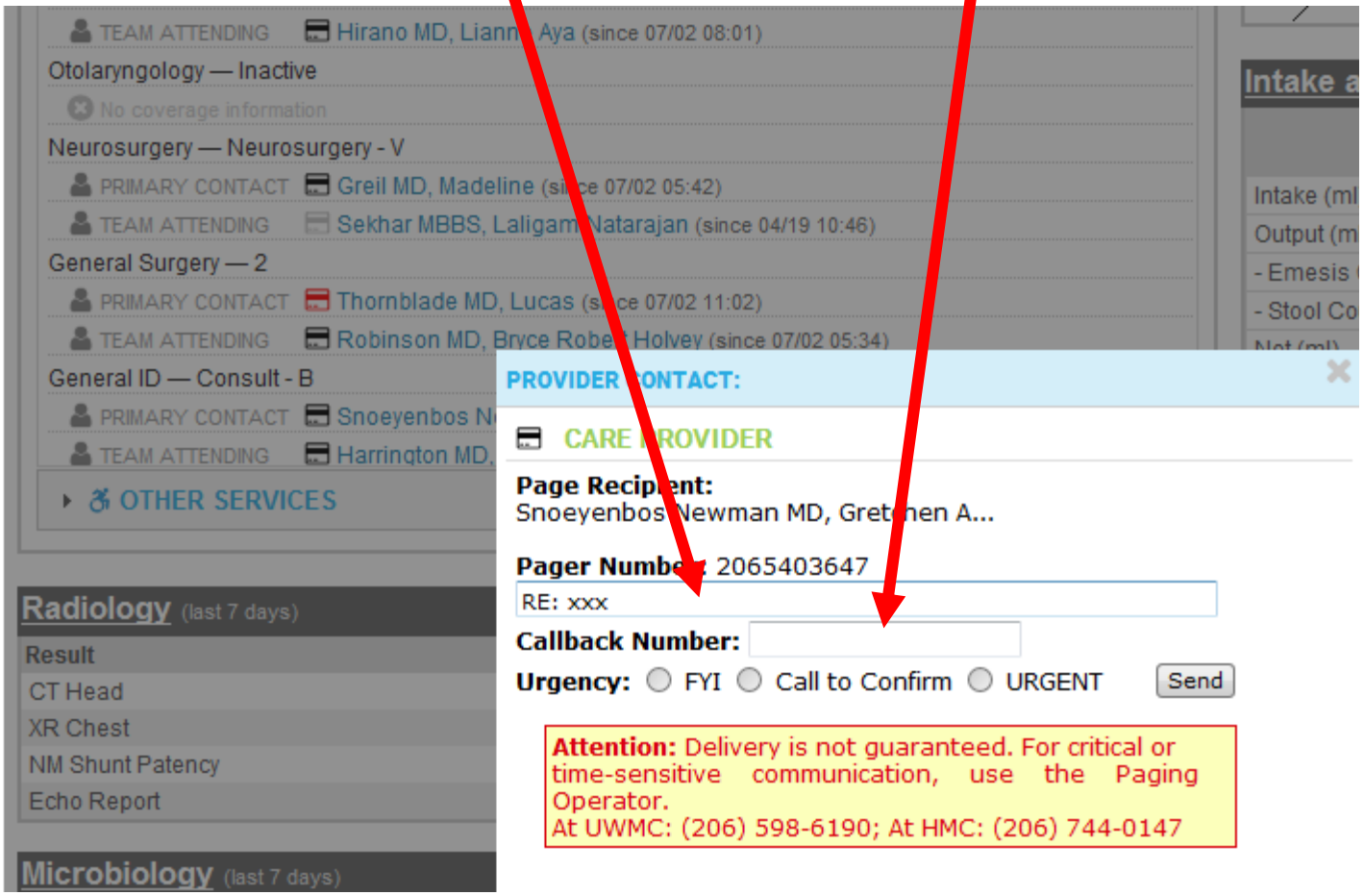



Menu - Inpatient
Chart Summary
- Status / Plan Summary
- Oncology
- Alerts / Adv Dir / Code
Clinical Notes
- Document Viewer
- CommonWell (NEW)
- ORCA / EpicCare Notes
- EpicCare Link (Epic Web)
- MINDscape
Orders
Medication List
- Med Admin Summ
- Med Admin (eMAR
- Med Reference
IVIEW & PowerNote
CareDex
Task List
Discharge Readiness
Allergies
Add
Form Browser
Immunizations
Results Review
- Chart Search
- Result Search
- Lab
- Lab Cultures
- Lab Organism vs. Drug
- Radiology
Chart Summary
100%
Inpatient | Outpatient | Chemo | Result Search | more
Patient Information
Admit Days: 8
Reason For Admission: F 1:ABSCESS,2:WITHDRAWAL (ABSCESS/OSTEOMYLITIS)
Online Hospital Medical Record Summary: Declined For Now
Admitted from the ED on 06/27/2017 23:03:00 (8 days ago)
More...
Alerts and Precautions
Code Status:
Code Status
Not Addressed for this encounter
Enter New Code Status Powerform
06/27/17 23:04:00, Activity: Up in chair, TID
More...
Inpatient Medications
Scheduled Medication
ceFAZolin 2 g IVPB Q8 Hours
cetirizine 10 mg PO Daily
heparin 5,000 units Subcutaneous Q8 Hours
lidocaine topical (lidocaine 4% topical film) 1 patch Transdermal Daily
lidocaine topical patch REMOVAL 1 each REMOVE Q24 Hours
methadone 45 mg PO QAM
sodium chloride (sodium chloride 0.9% - Flush) 10 mL IV Q8 Hours
PRN Medications
acetaminophen 650 mg PO Q6 Hours PRN Pain
emollients, topical (Aquaphor topical ointment) 1 application Topical Q6 Hours PRN Dryness
More...
Problems
Automatically Extract Problems From Notes
Choose “Chart Summary”

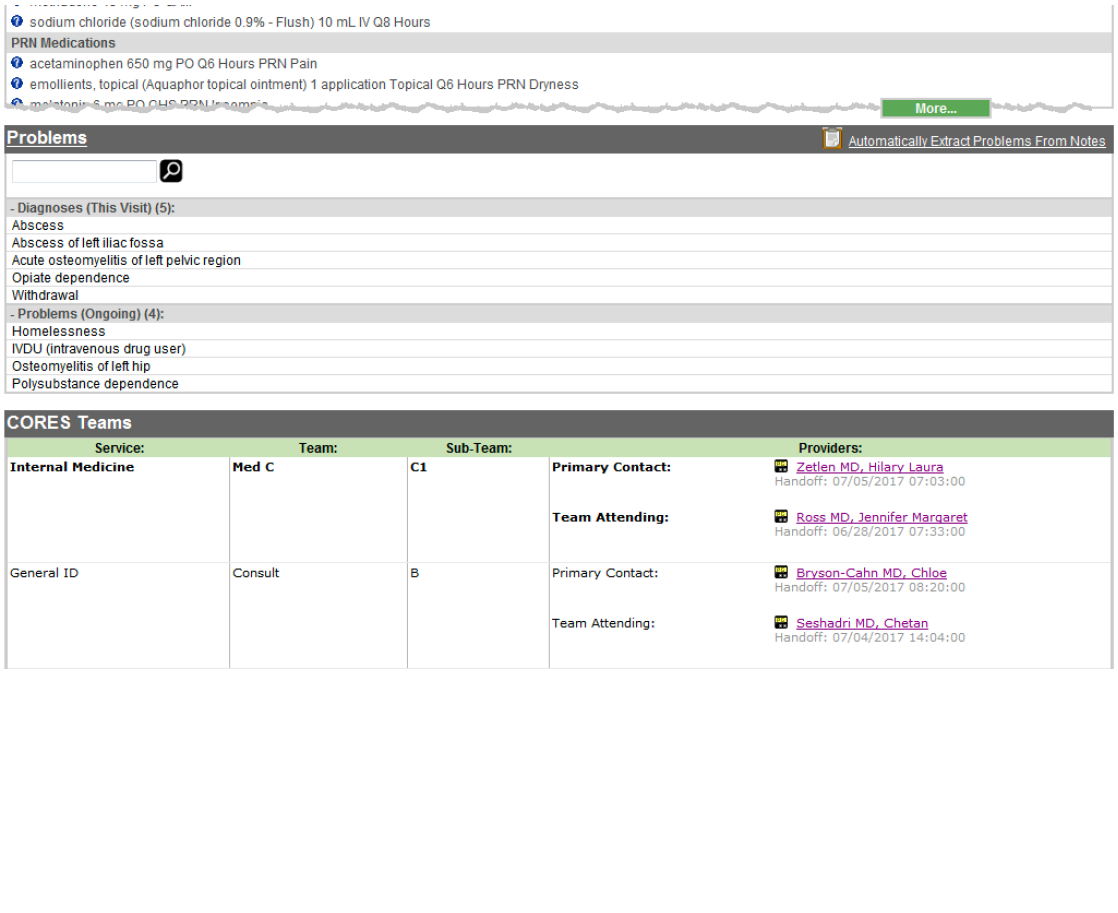
Scroll down until you see “CORES Teams” on the left side: To page, simply click on the provider name.

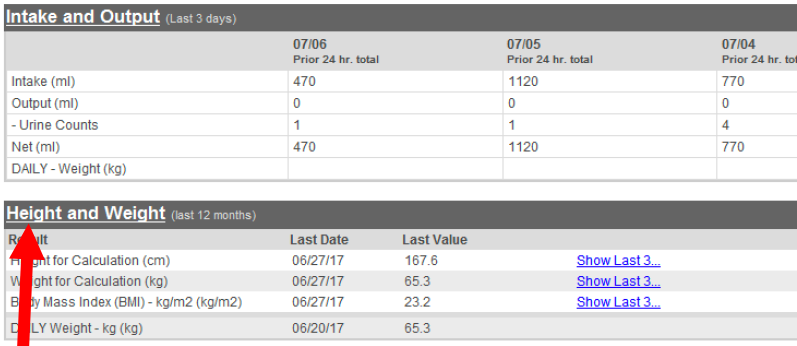


Write your page here and indicate call back number.



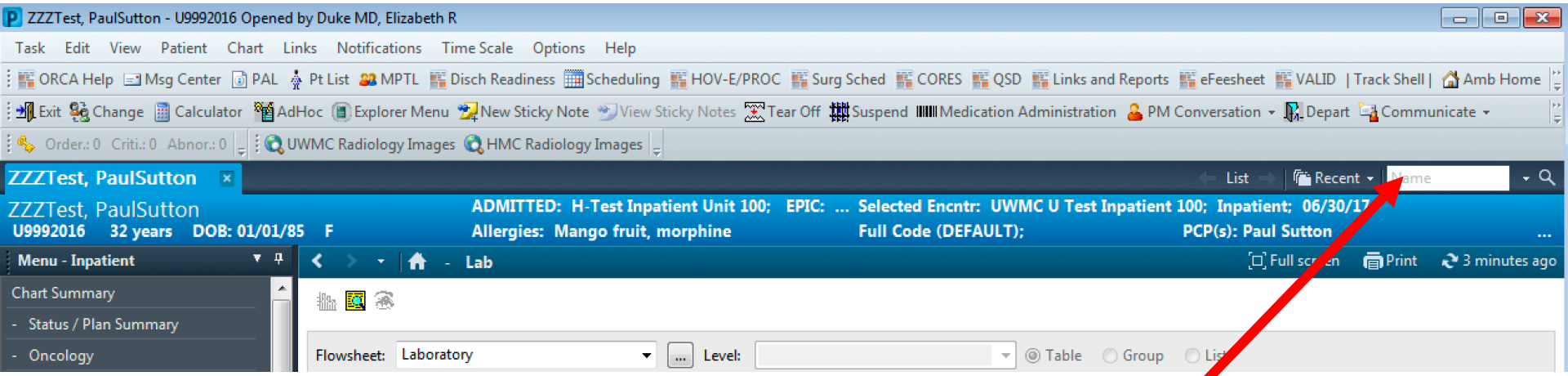
Still in Chart Summary





Notice “Height and Weight” are on the right. Hard to find elsewhere in chart.

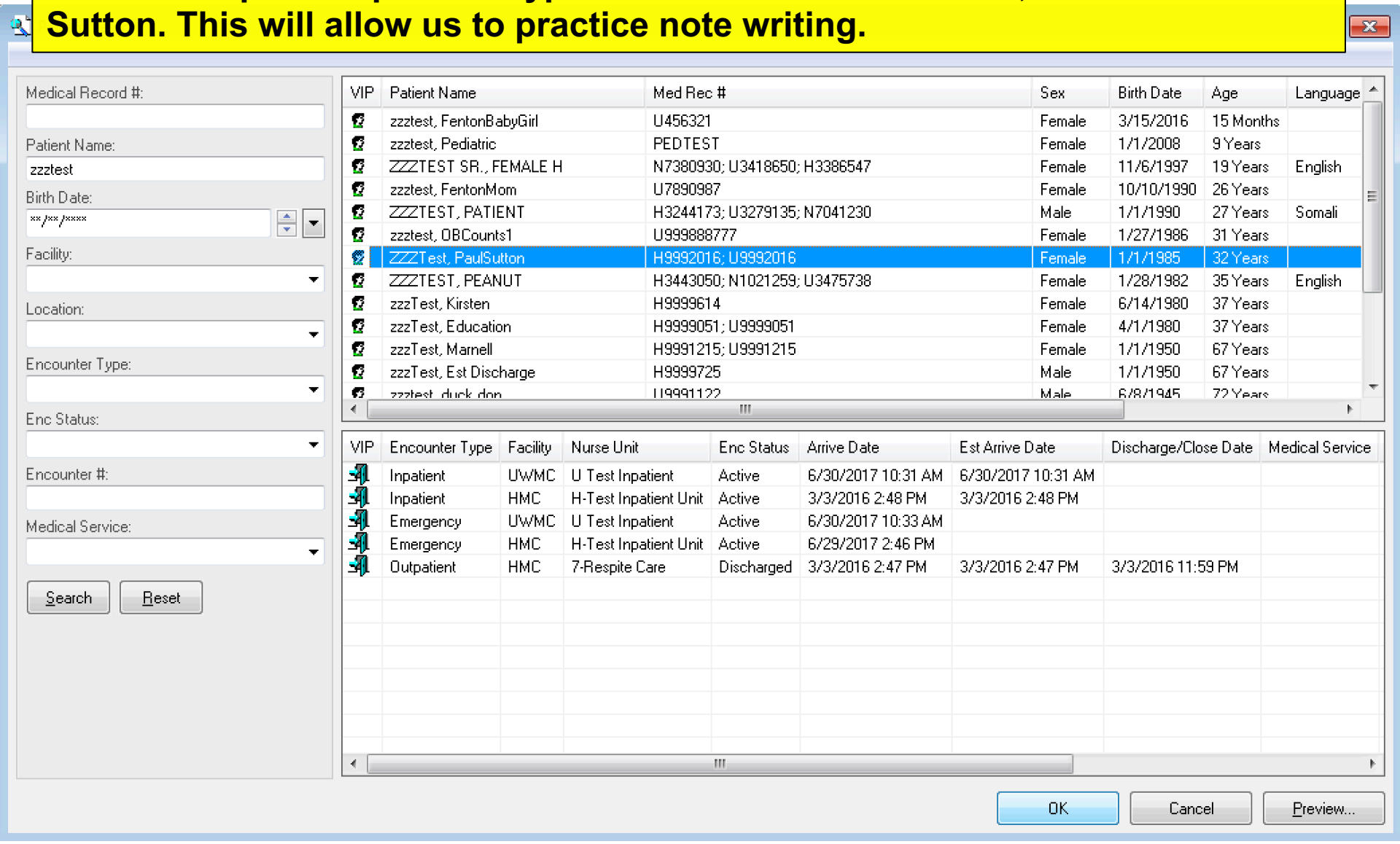
How to look up a non-admitted patient or one you don't want to add to your list:



Type in name or H or U number in this box.

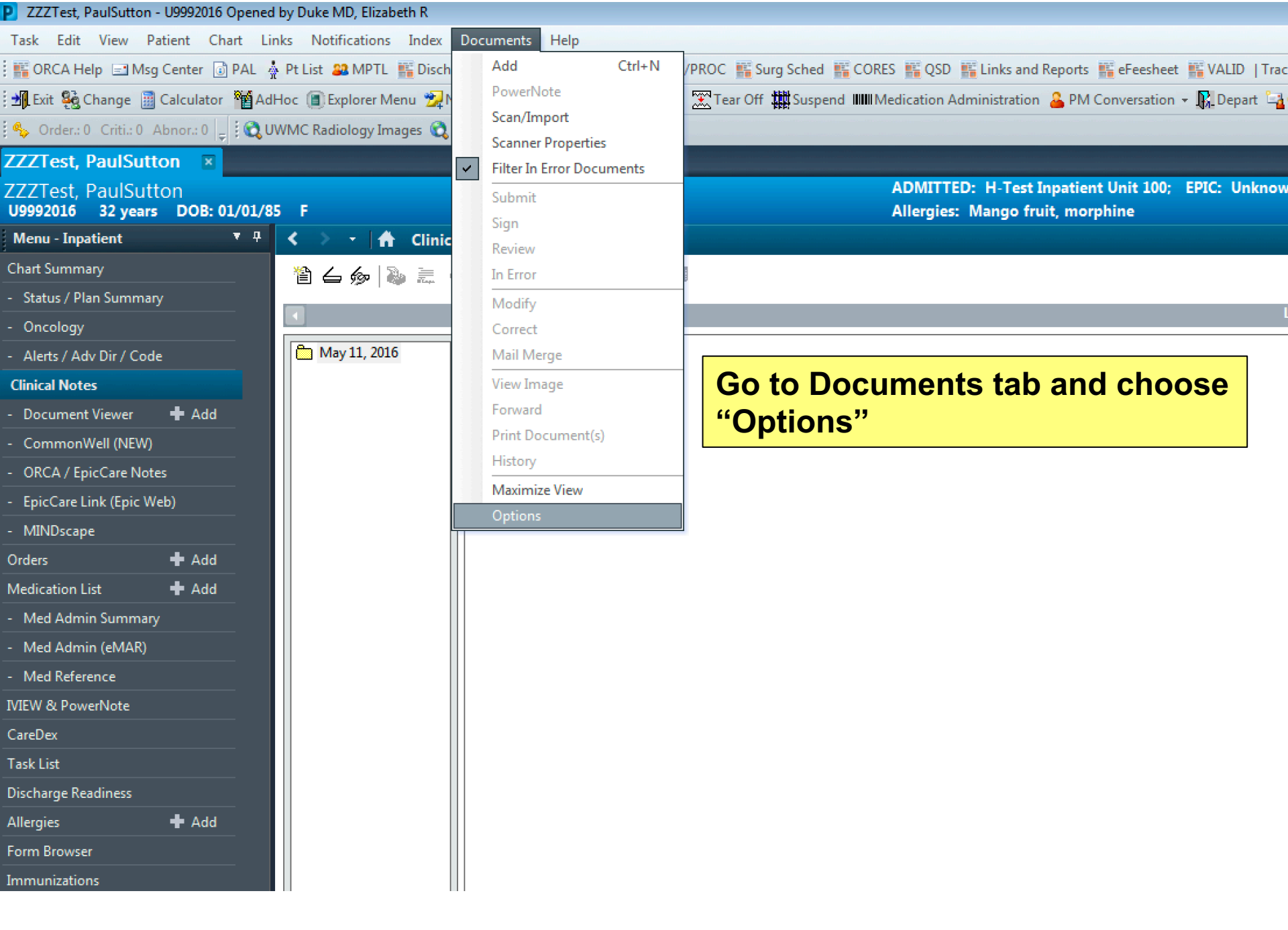
Or if you've recently opened that chart, "Recent patients" is helpful.

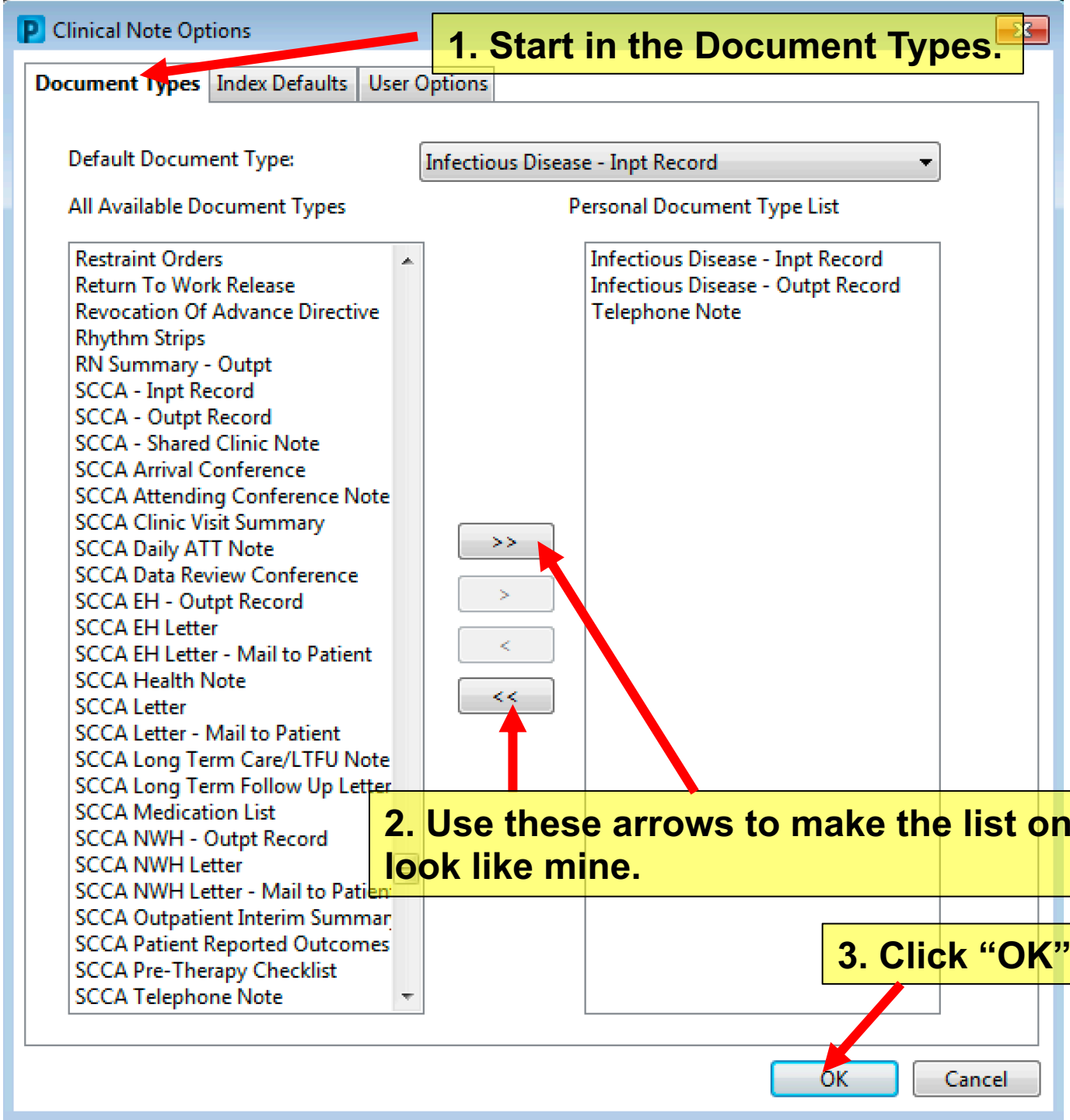
Let's look up a test patient. Type "zzztest" in the white box, and choose Paul Sutton. This will allow us to practice note writing.

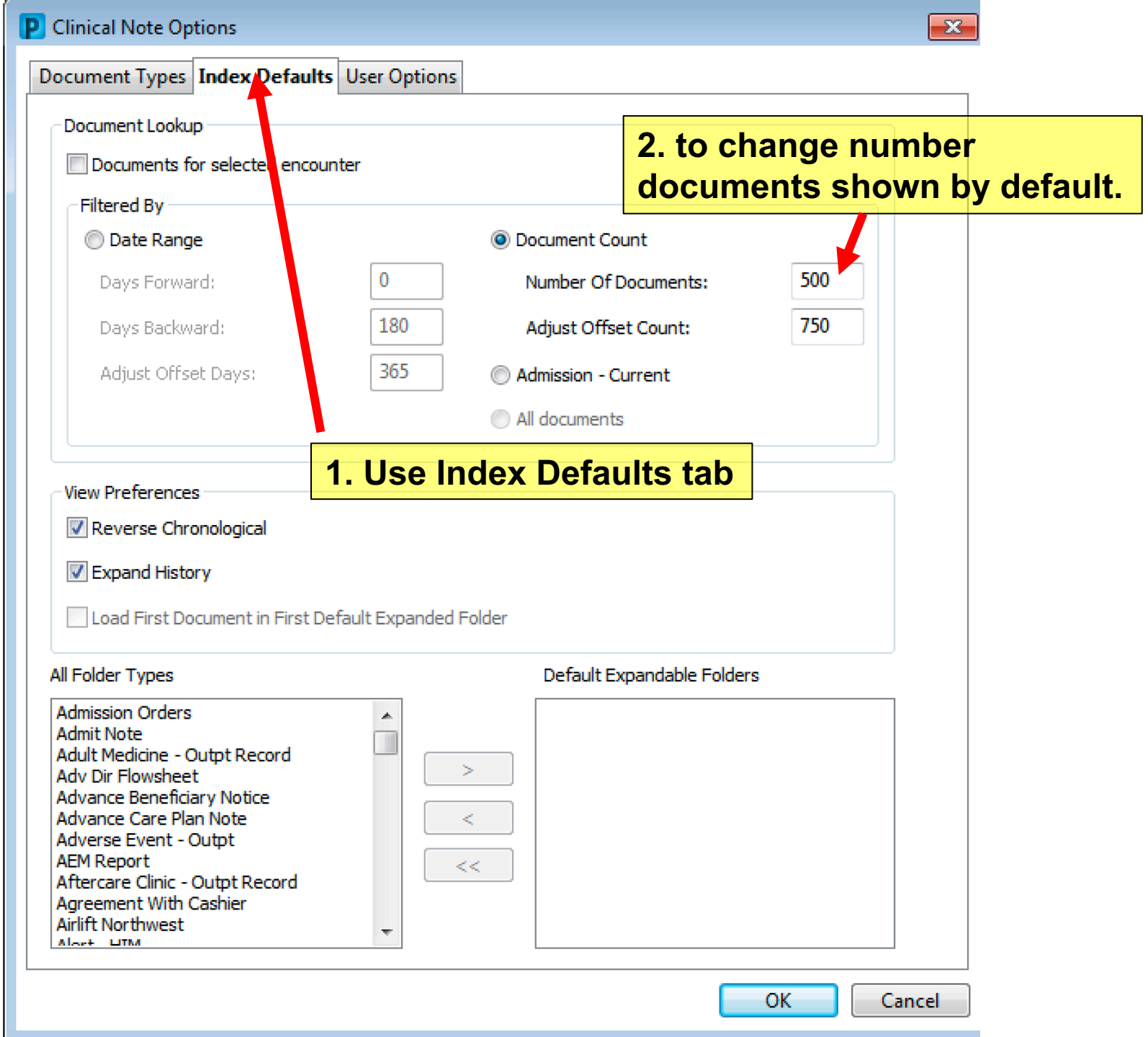


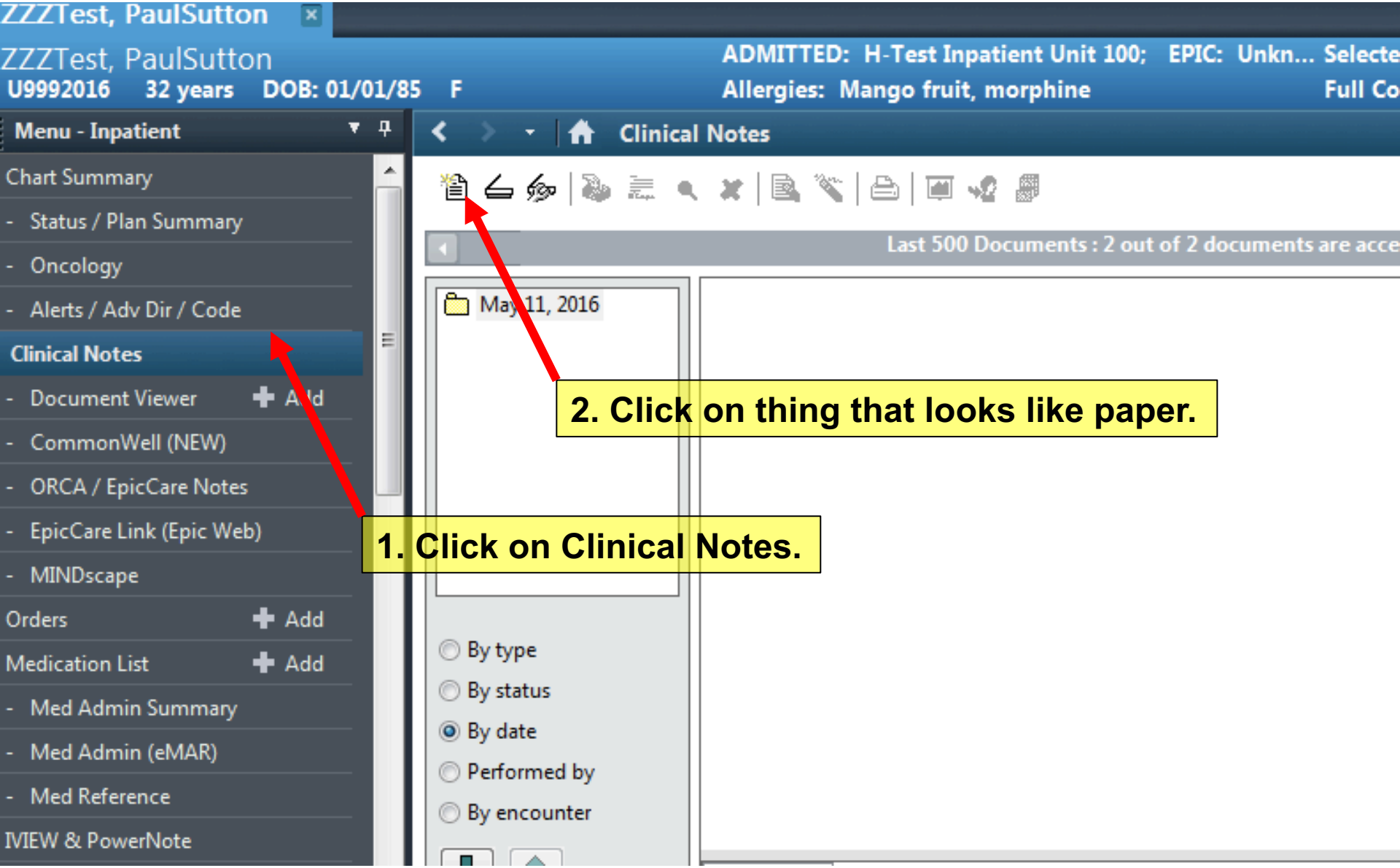
How to WRITE NOTES:

First we need to set some things up that you'll never have to do again.


ZZZTest, PaulSutton - U9992016 Opened by Duke MD, Elizabeth R
Task Edit View Patient Chart Links Notifications Index Documents Help
Add Ctrl+N
PowerNote
Scan/Import
Scanner Properties
Filter In Error Documents
Submit
Sign
Review
In Error
Modify
Correct
Mail Merge
View Image
Forward
Print Document(s)
History
Maximize View
Options
ZZZTest, PaulSutton
U9992016 32 years DOB: 01/01/85 F
ADMITTED: H-Test Inpatient Unit 100; EPIC: Unknow
Allergies: Mango fruit, morphine
Menu - Inpatient
Chart Summary
Status / Plan Summary
Oncology
Alerts / Adv Dir / Code
Clinical Notes
Document Viewer Add
CommonWell (NEW)
ORCA / EpicCare Notes
EpicCare Link (Epic Web)
MINDscape
Orders Add
Medication List Add
Med Admin Summary
Med Admin (eMAR)
Med Reference
IVIEW & PowerNote
CareDex
Task List
Discharge Readiness
Allergies Add
Form Browser
Immunizations
May 11, 2016
Go to Documents tab and choose "Options"

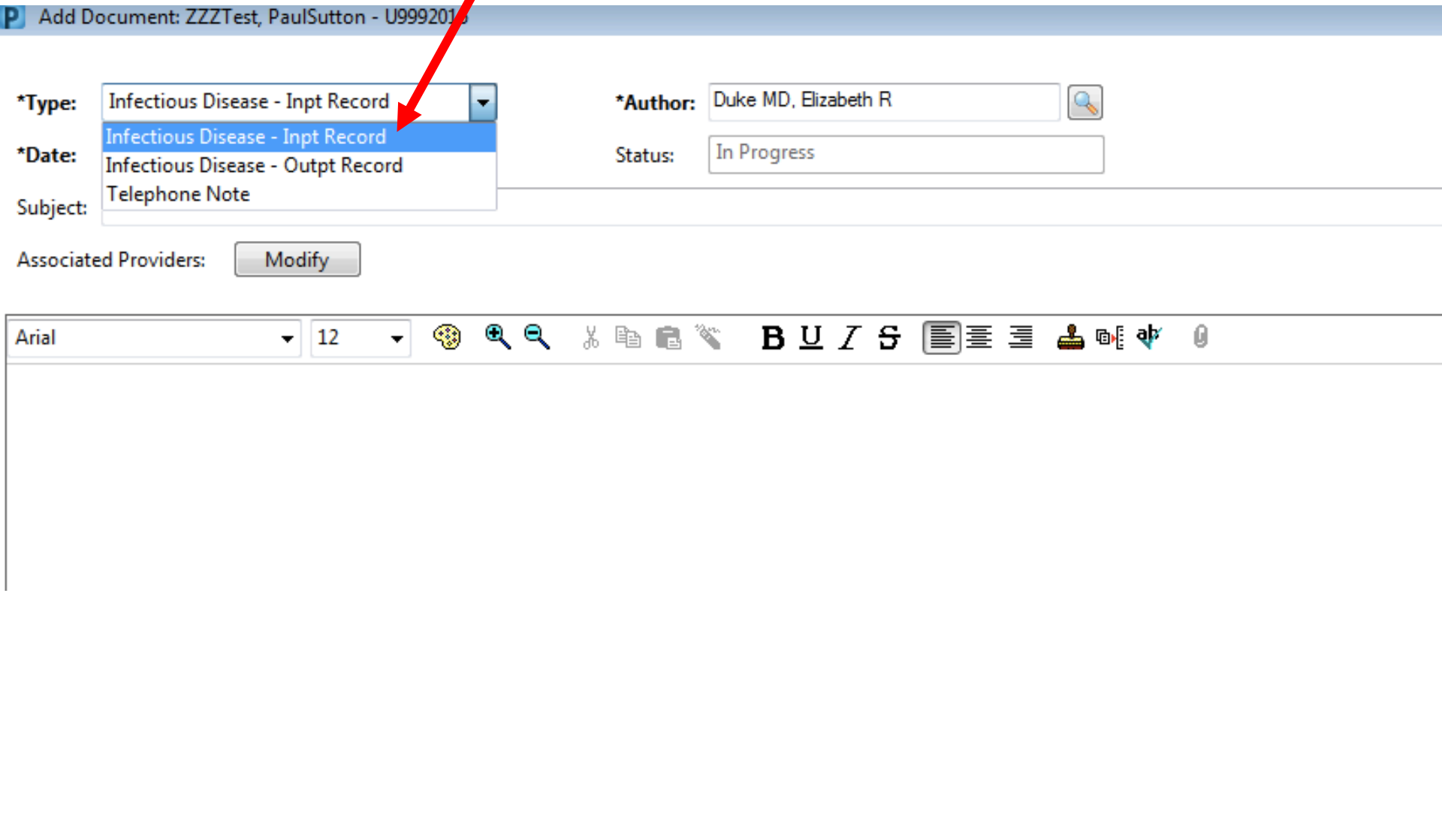

Clinical Note Options
1. Start in the Document Types.
Document Types
Index Defaults
User Options
Default Document Type:
Infectious Disease - Inpt Record
All Available Document Types
Personal Document Type List
Restraint Orders
Return To Work Release
Revocation Of Advance Directive
Rhythm Strips
RN Summary - Outpt
SCCA - Inpt Record
SCCA - Outpt Record
SCCA - Shared Clinic Note
SCCA Arrival Conference
SCCA Attending Conference Note
SCCA Clinic Visit Summary
SCCA Daily ATT Note
SCCA Data Review Conference
SCCA EH - Outpt Record
SCCA EH Letter
SCCA EH Letter - Mail to Patient
SCCA Health Note
SCCA Letter
SCCA Letter - Mail to Patient
SCCA Long Term Care/LTFU Note
SCCA Long Term Follow Up Letter
SCCA Medication List
SCCA NWH - Outpt Record
SCCA NWH Letter
SCCA NWH Letter - Mail to Patien
SCCA Outpatient Interim Summar
SCCA Patient Reported Outcomes
SCCA Pre-Therapy Checklist
SCCA Telephone Note
>>
>
<
<<
Infectious Disease - Inpt Record
Infectious Disease - Outpt Record
Telephone Note
2. Use these arrows to make the list on the right look like mine.
3. Click “OK”
OK
Cancel

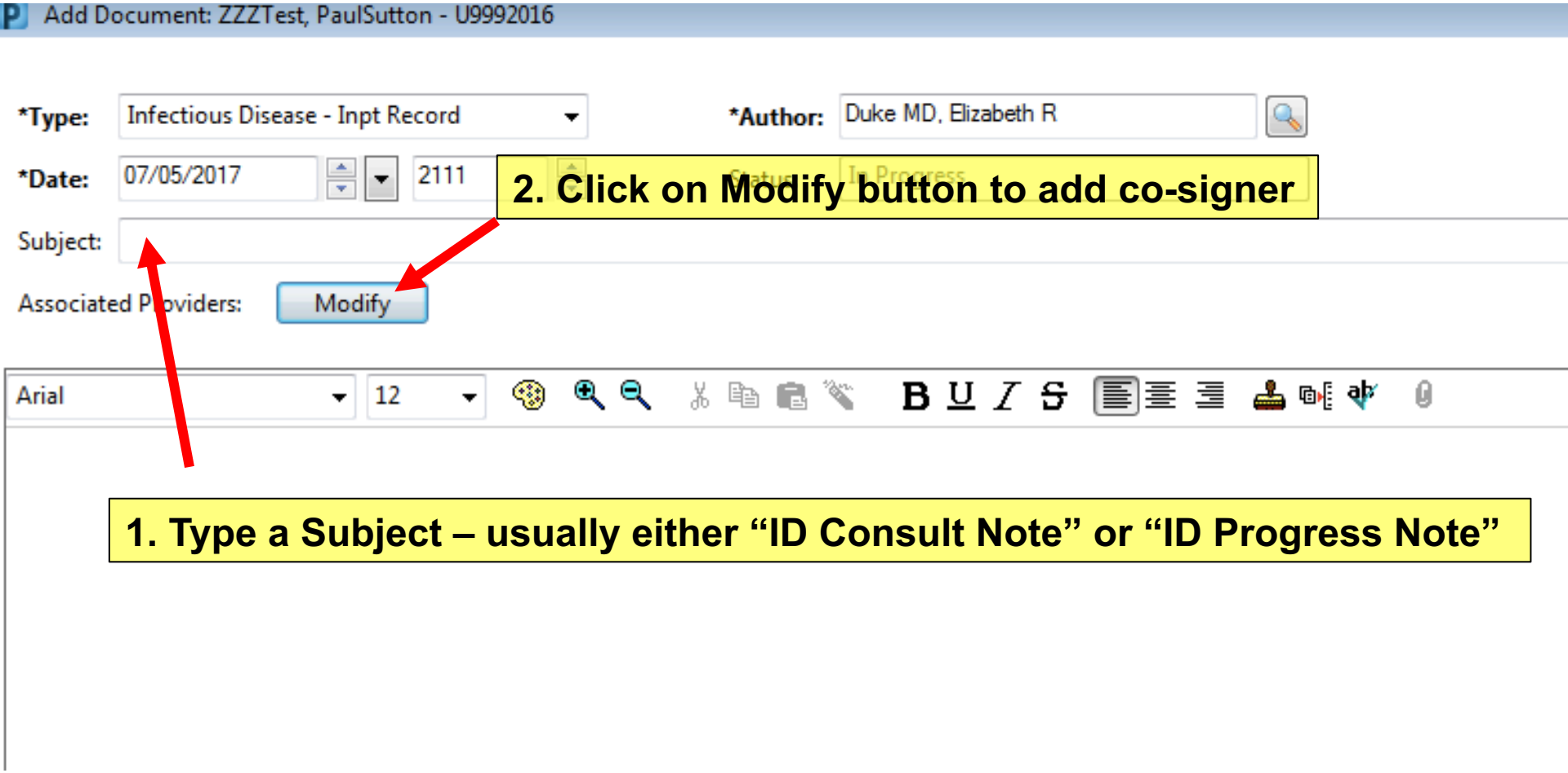

Clinical Note Options
Document Types
Index Defaults
User Options
Document Lookup
Documents for selected encounter
Filtered By
Date Range
Days Forward:
0
Days Backward:
180
Adjust Offset Days:
365
Document Count
Number Of Documents:
500
Adjust Offset Count:
750
Admission - Current
All documents
2. to change number documents shown by default.
1. Use Index Defaults tab
View Preferences
Reverse Chronological
Expand History
Load First Document in First Default Expanded Folder
All Folder Types
Admission Orders
Admit Note
Adult Medicine - Outpt Record
Adv Dir Flowsheet
Advance Beneficiary Notice
Advance Care Plan Note
Adverse Event - Outpt
AEM Report
Aftercare Clinic - Outpt Record
Agreement With Cashier
Airlift Northwest
>
<
<<
Default Expandable Folders
OK
Cancel

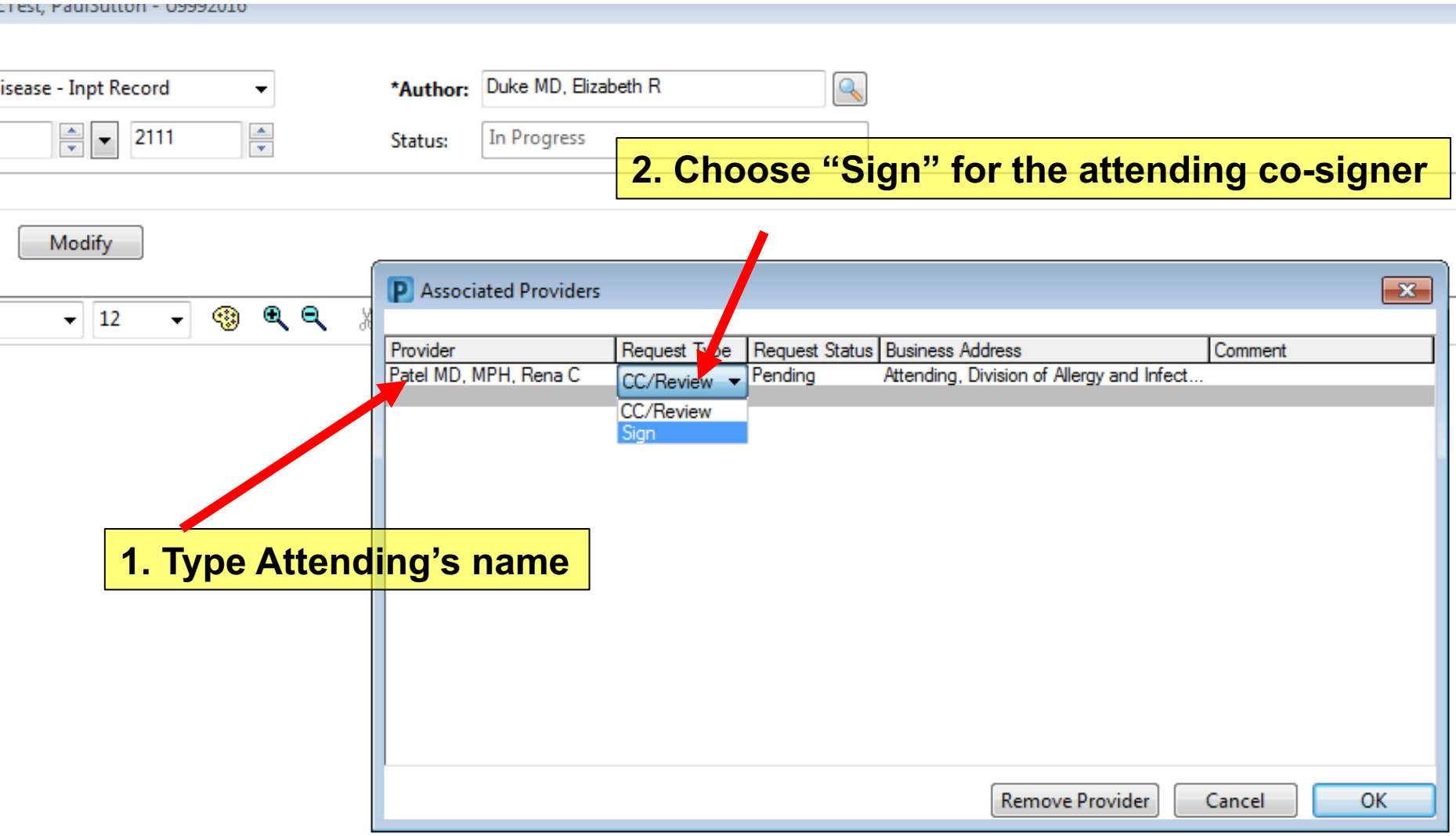

ZZZTest, PaulSutton
ZZZTest, PaulSutton
U9992016 32 years DOB: 01/01/85 F
ADMITTED: H-Test Inpatient Unit 100; EPIC: Unkn... Selecte
Allergies: Mango fruit, morphine
Full Co
Menu - Inpatient
Chart Summary
- Status / Plan Summary
- Oncology
- Alerts / Adv Dir / Code
Clinical Notes
- Document Viewer
- CommonWell (NEW)
- ORCA / EpicCare Notes
- EpicCare Link (Epic Web)
- MINDscape
Orders Add
Medication List Add
- Med Admin Summary
- Med Admin (eMAR)
- Med Reference
IVIEW & PowerNote
Clinical Notes
Last 500 Documents : 2 out of 2 documents are acce
May 11, 2016
By type
By status
By date
Performed by
By encounter
2. Click on thing that looks like paper.
1. Click on Clinical Notes.

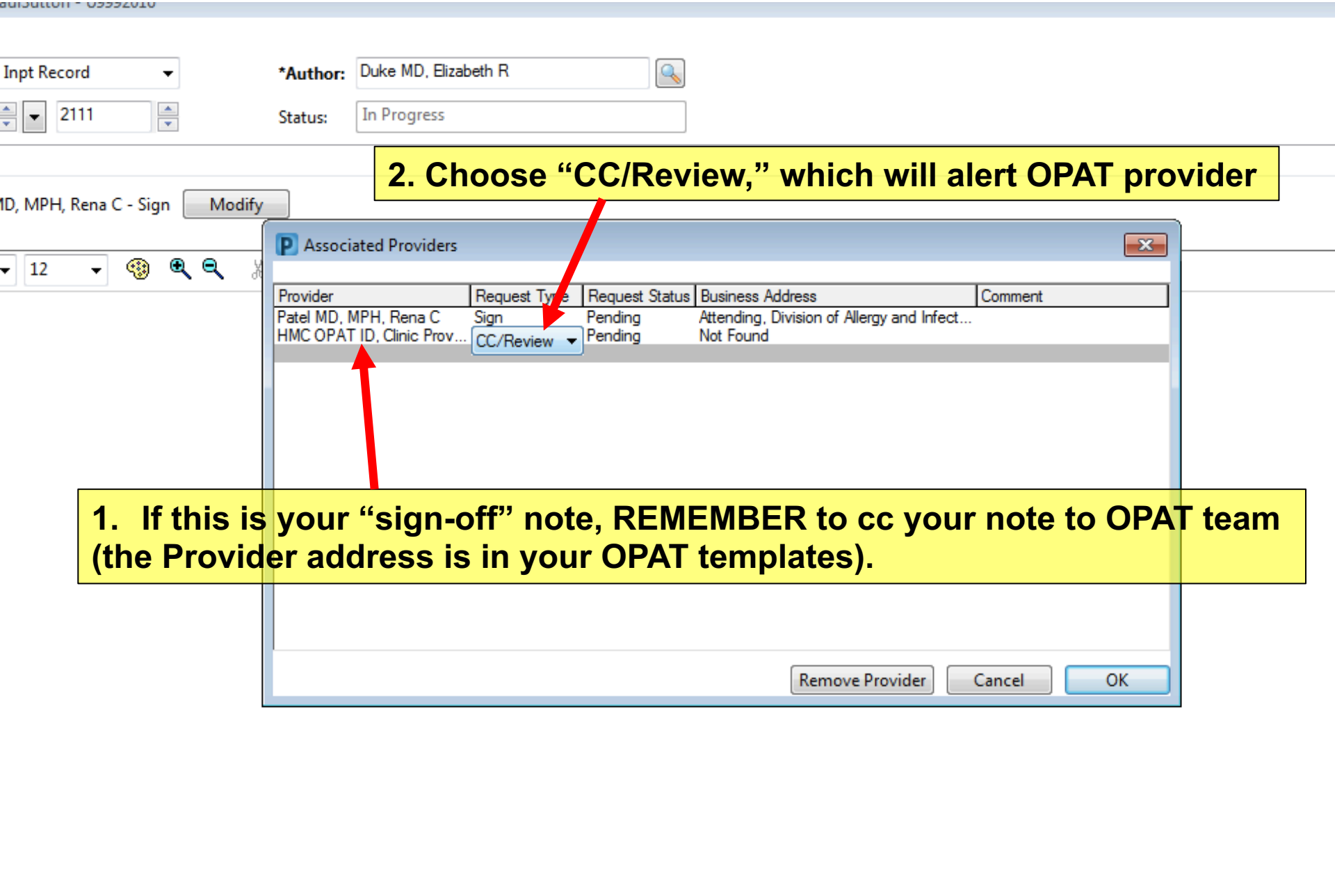
We'll start with Consult notes.

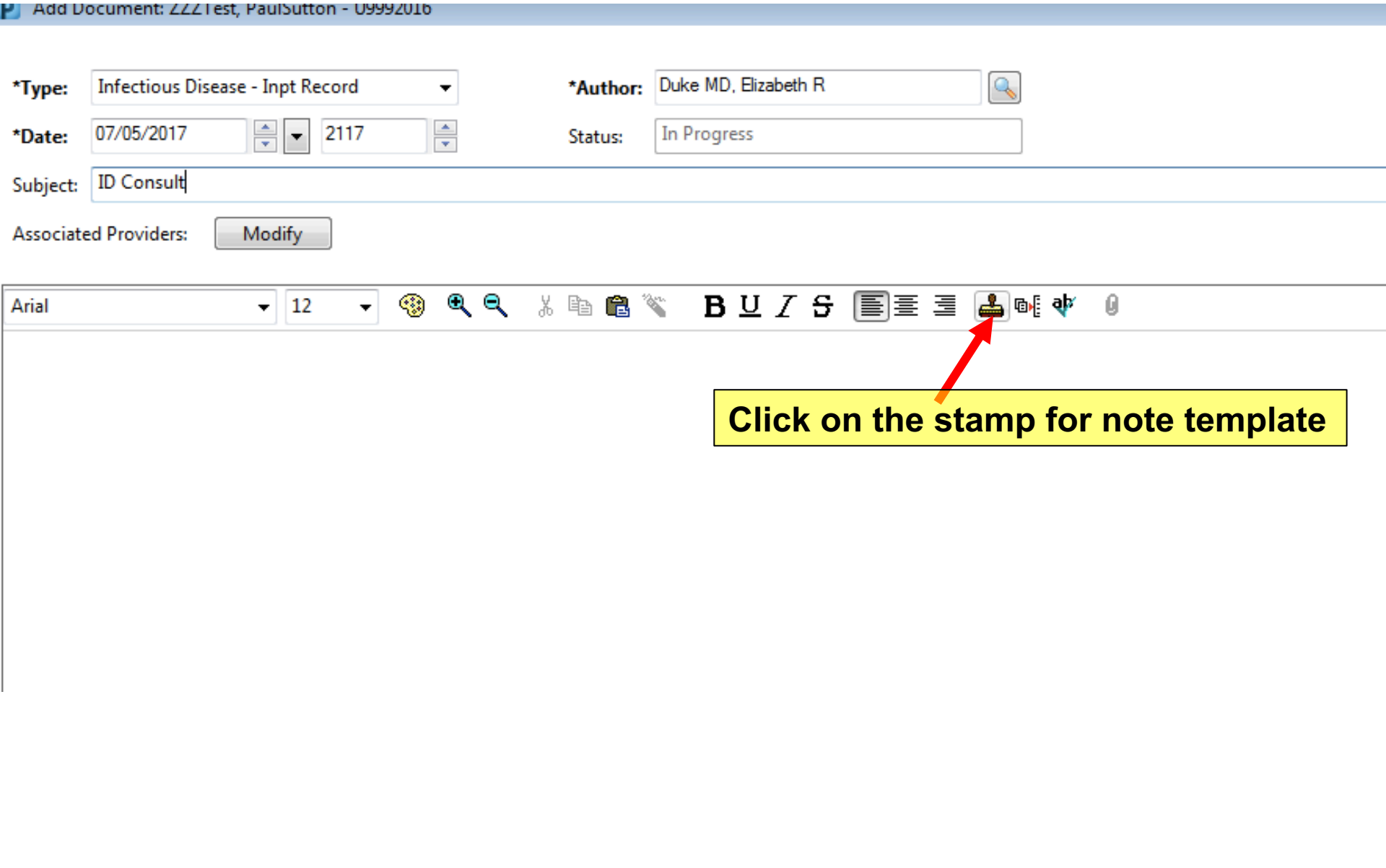
For *Type, choose "Infectious Disease - Inpt Record"

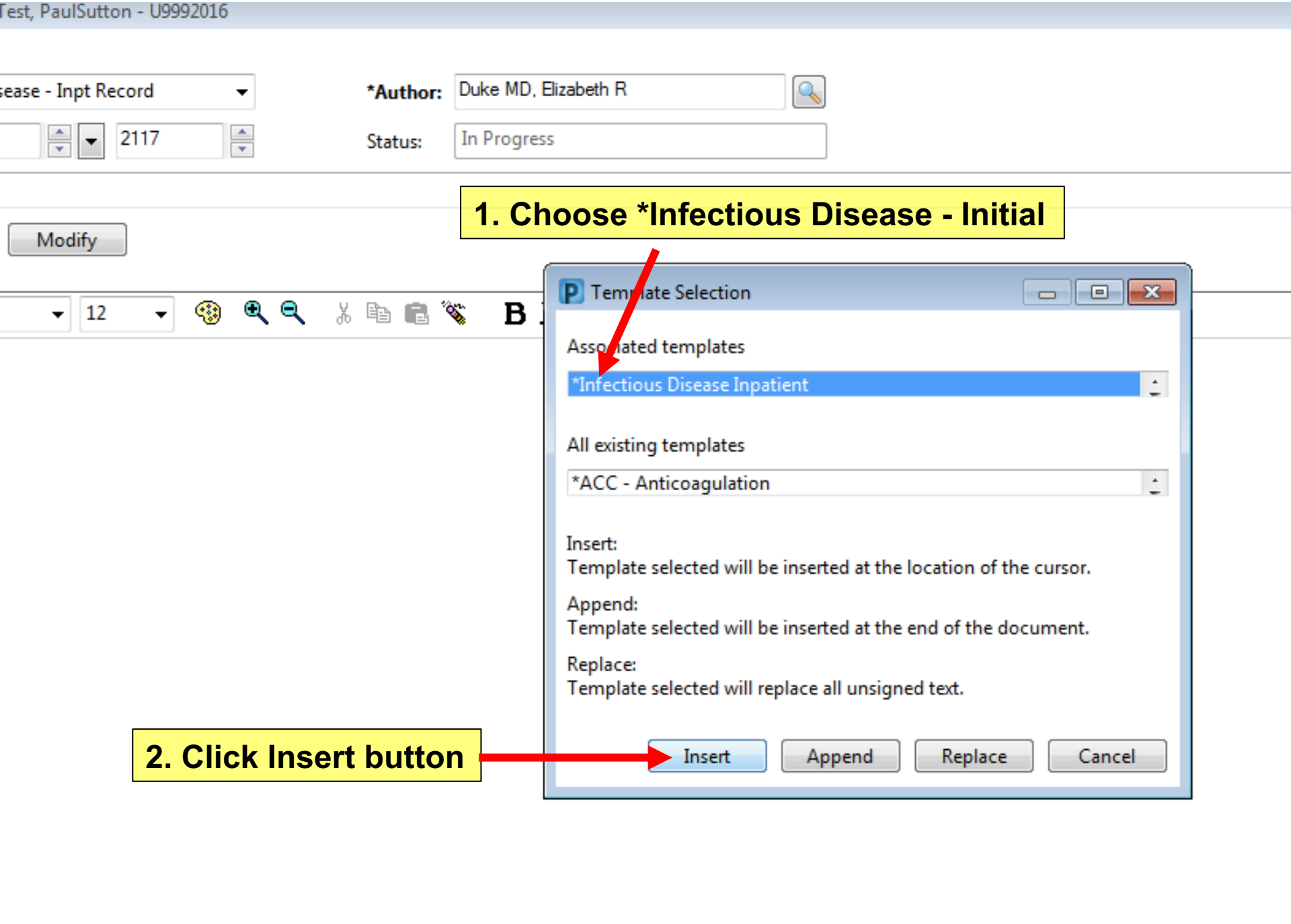



Add Document: ZZZTest, PaulSutton - U9992016
*Type:
Infectious Disease - Inpt Record
*Author:
Duke MD, Elizabeth R
*Date:
07/05/2017
2111
Subject:
Associated Providers:
Modify
Arial
12
2. Click on Modify button to add co-signer
1. Type a Subject – usually either “ID Consult Note” or “ID Progress Note”


isease - Inpt Record
*Author:
Duke MD, Elizabeth R
2111
Status:
In Progress
2. Choose “Sign” for the attending co-signer
Modify
12
Associated Providers
Provider
Request Type
Request Status
Business Address
Comment
Patel MD, MPH, Rena C
CC/Review
Pending
Attending, Division of Allergy and Infect...
CC/Review
Sign
1. Type Attending’s name
Remove Provider
Cancel
OK


Inpt Record
*Author:
Duke MD, Elizabeth R
2111
Status:
In Progress
MD, MPH, Rena C - Sign
Modify
12
2. Choose "CC/Review," which will alert OPAT provider
Associated Providers
Provider
Request Type
Request Status
Business Address
Comment
Patel MD, MPH, Rena C
Sign
Pending
Attending, Division of Allergy and Infect...
HMC OPAT ID, Clinic Prov...
CC/Review
Pending
Not Found
Remove Provider
Cancel
OK
1. If this is your "sign-off" note, REMEMBER to cc your note to OPAT team (the Provider address is in your OPAT templates).


Add Document: ZZZTest, PaulSutton - 09992016
*Type:
Infectious Disease - Inpt Record
*Author:
Duke MD, Elizabeth R
*Date:
07/05/2017
2117
Status:
In Progress
Subject:
ID Consult
Associated Providers:
Modify
Arial
12
Click on the stamp for note template


Test, PaulSutton - U9992016
sease - Inpt Record
*Author:
Duke MD, Elizabeth R
2117
Status:
In Progress
Modify
1. Choose *Infectious Disease - Initial
12
Template Selection
Associated templates
*Infectious Disease Inpatient
All existing templates
*ACC - Anticoagulation
Insert:
Template selected will be inserted at the location of the cursor.
Append:
Template selected will be inserted at the end of the document.
Replace:
Template selected will replace all unsigned text.
Insert
Append
Replace
Cancel
2. Click Insert button

Note there are specific templates for each service and for follow ups versus intial consults.

***Infectious Diseases – Initial**
***Infectious Diseases – Follow up**
***Infectious Diseases – HIV Initial**
***Infectious Diseases – HIV Follow up**
***Infectious Diseases – SOT Initial**
***Infectious Diseases – SOT Follow up**
***Infectious Diseases – SCCA Initial**
***Infectious Diseases – SCCA Follow up**

Add Document: ZZZTest, PaulSutton - U9992016

*Type: Infectious Disease - Inpt Record

*Author: Duke MD, Elizabeth R

*Date: 07/05/2017 2117

Status: In Progress

Subject: ID Consult

Associated Providers: Modify

Scroll through and see what's here.

Arial 14

HOSPITAL DAY: 0

I was asked to see the patient by _ for evaluation of _.

CHIEF CONCERN: *(Required for all billing levels)*

_

HISTORY OF PRESENT ILLNESS:

_

REVIEW OF SYSTEMS: [_] Unable to Obtain due to Patient Condition
CONSTITUTIONAL [_] Negative _ EYES [_] Negative _ ENMT [_] Negative _
CARDIOVASCULAR [_] Negative _ RESPIRATORY [_] Negative _ GI [_] Negative _
GENITOURINARY [_] Negative _ NEURO [_] Negative _ MUSCULOSKELETAL [_] Negative _
SKIN [_] Negative _ ENDOCRINE [_] Negative _ ALLERGY/IMMUNOLOGY [_] Negative _
HEME/LYMPH [_] Negative _ PSYCHIATRIC [_] Negative _

ALLERGIES:
morphine

Try using the F3 key (or fn + F3 on a Mac) to go from underscore to underscore.

Notice, ORCA is not a very good word processor. In this regard, EPIC is much better.

You can use the Bold, Underline, Italics, and Strikethrough features using the buttons at the top (next slide), but you CANNOT use keyboard short-cuts (they don't work), AND there is NO SELECT ALL.

HOWEVER, to COPY or PASTE something, you HAVE TO USE KEYBOARD SHORTCUTS:

- **COPY = CTRL + C**
- **PASTE = CTRL + V**

Add Document: ZZZTest, PaulSutton - U9992016

*Type: Infectious Disease - Inpt Record

*Author: Duke MD, Elizabeth R

*Date: 07/05/2017 2117

Status: In Progress

Subject: ID Consult

Associated Providers: Modify

Arial 14

HOSPITAL DAY: 0

I was asked to see the patient by _ for evaluation of _.

CHIEF CONCERN: *(Required for all billing levels)*

_

HISTORY OF PRESENT ILLNESS:

_

REVIEW OF SYSTEMS: [_] Unable to Obtain due to Patient Condition
CONSTITUTIONAL [_] Negative _ EYES [_] Negative _ ENMT [_] Negative _
CARDIOVASCULAR [_] Negative _ RESPIRATORY [_] Negative _ GI [_] Negative _
GENITOURINARY [_] Negative _ NEURO [_] Negative _ MUSCULOSKELETAL [_] Negative _
SKIN [_] Negative _ ENDOCRINE [_] Negative _ ALLERGY/IMMUNOLOGY [_] Negative _
HEME/LYMPH [_] Negative _ PSYCHIATRIC [_] Negative _

ALLERGIES:
morphine

Bold, underline, italics, strikethrough

Add Document: ZZZTest, PaulSutton - U9992016

*Type: Infectious Disease - Inpt Record

*Author: Duke MD, Elizabeth R

*Date:

Subject: ID Consult

Associated Providers: Modify

1. Scroll down to PHYSICAL EXAM. Notice this is not populated for you at all. Let's learn how to make a "dot phrase" to store a standard exam you can modify

Arial 12

Previous Daily Wt: No Results Found.

No I&O Results Found.

PHYSICAL EXAM:

GENERAL: _

NEURO: _

HEENT: _

LUNGS: _

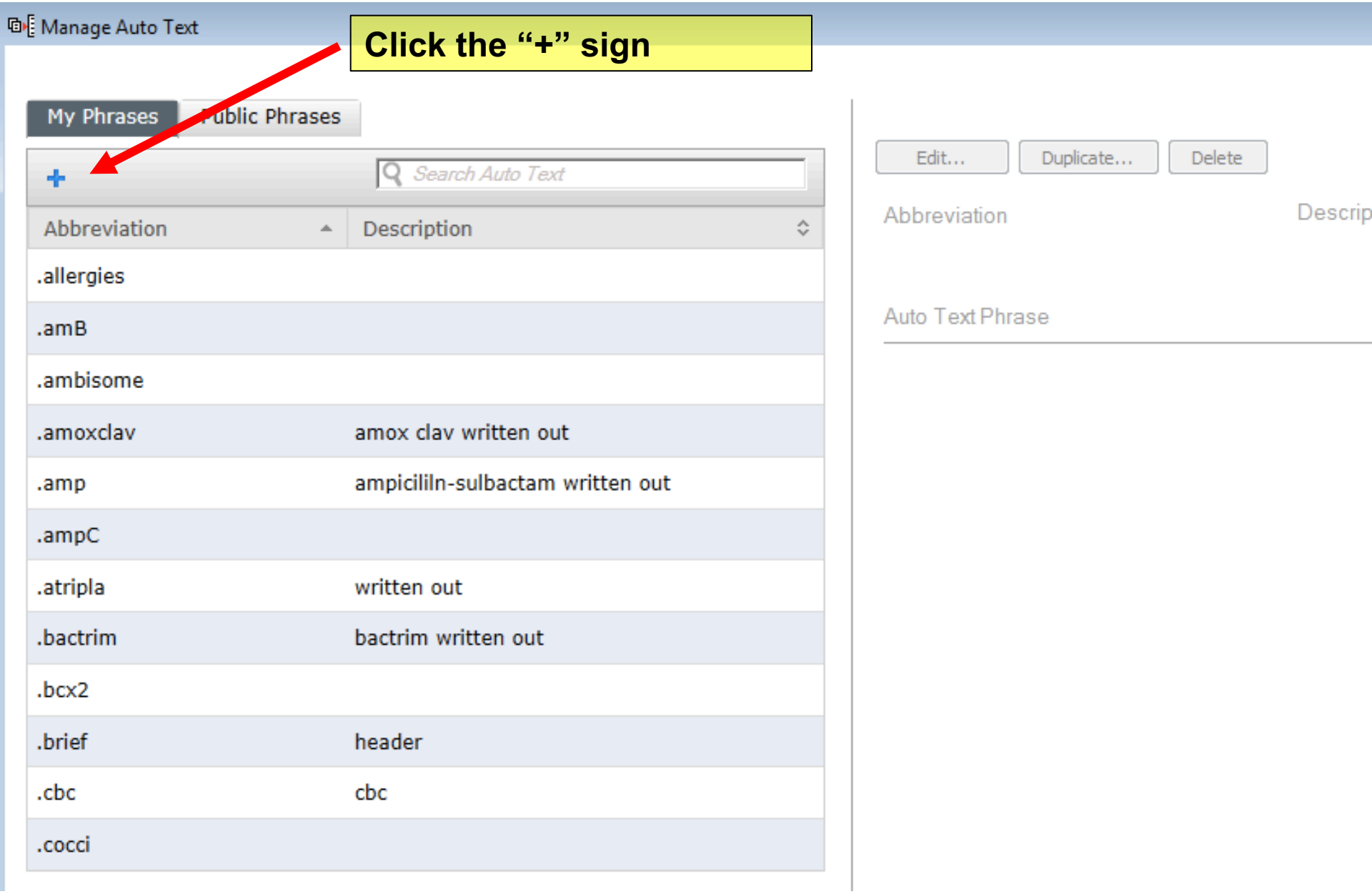
HEART: _

ABDOMEN: _

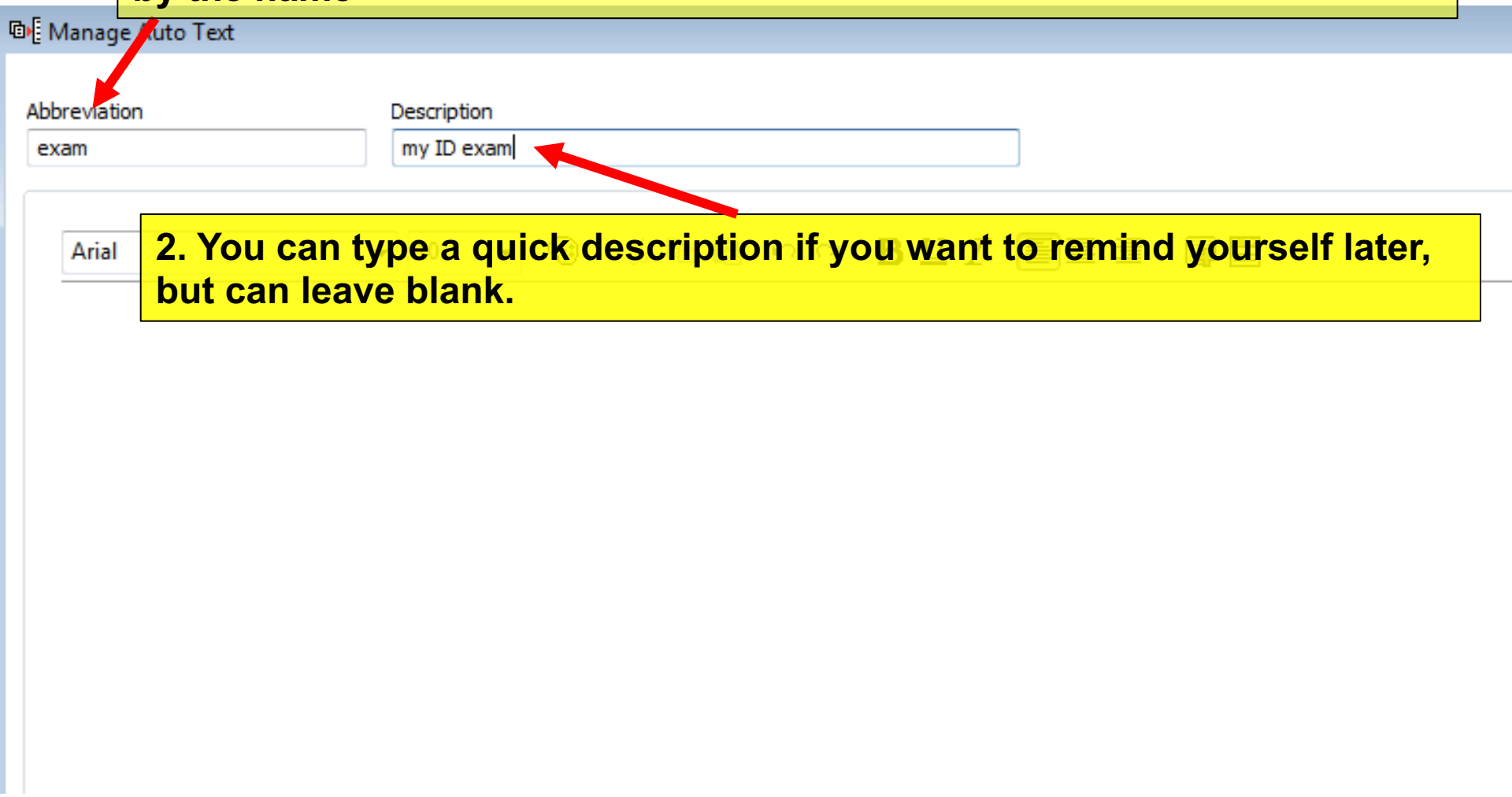
EXTREMITIES: _

SKIN:

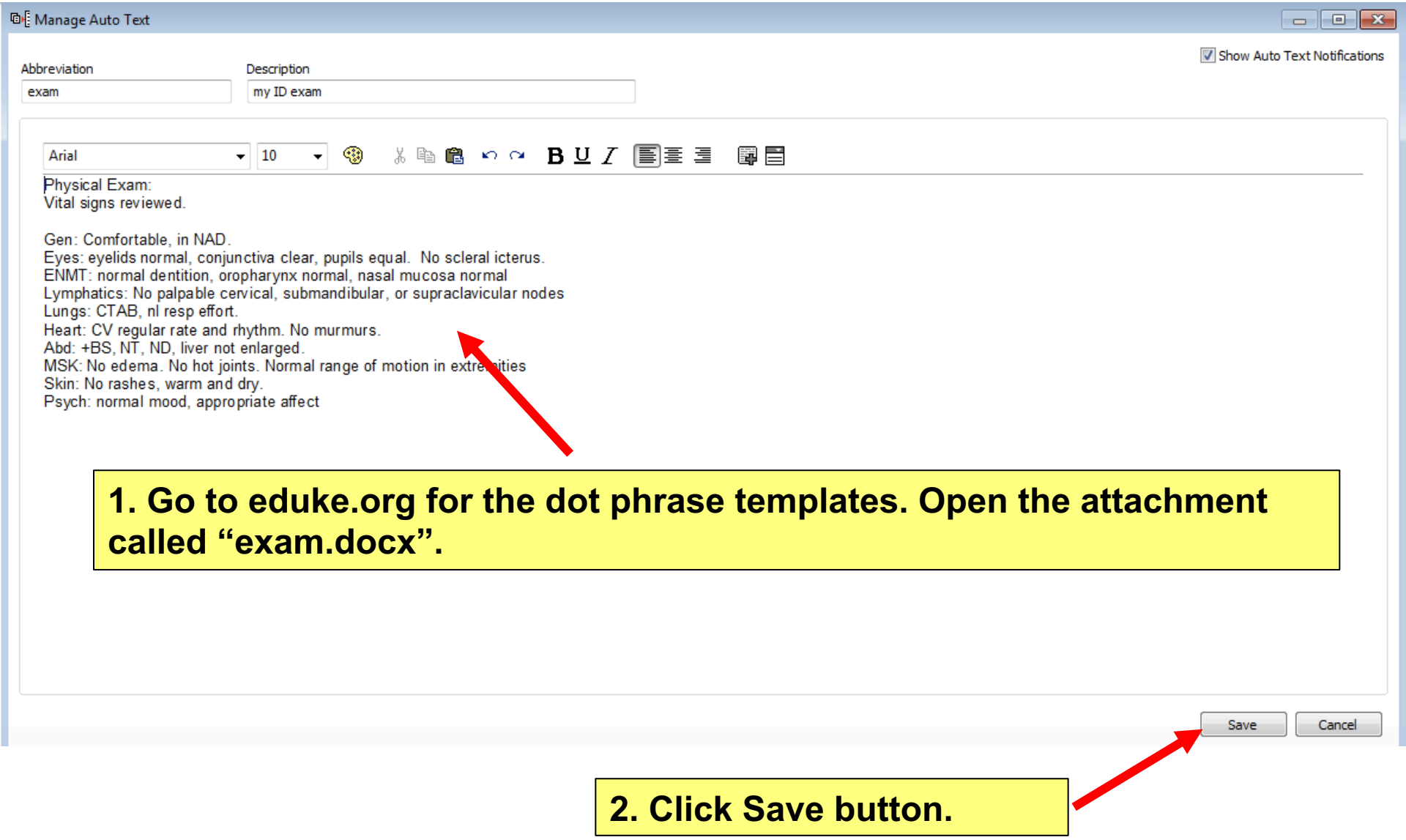
2. Click on this ruler thing

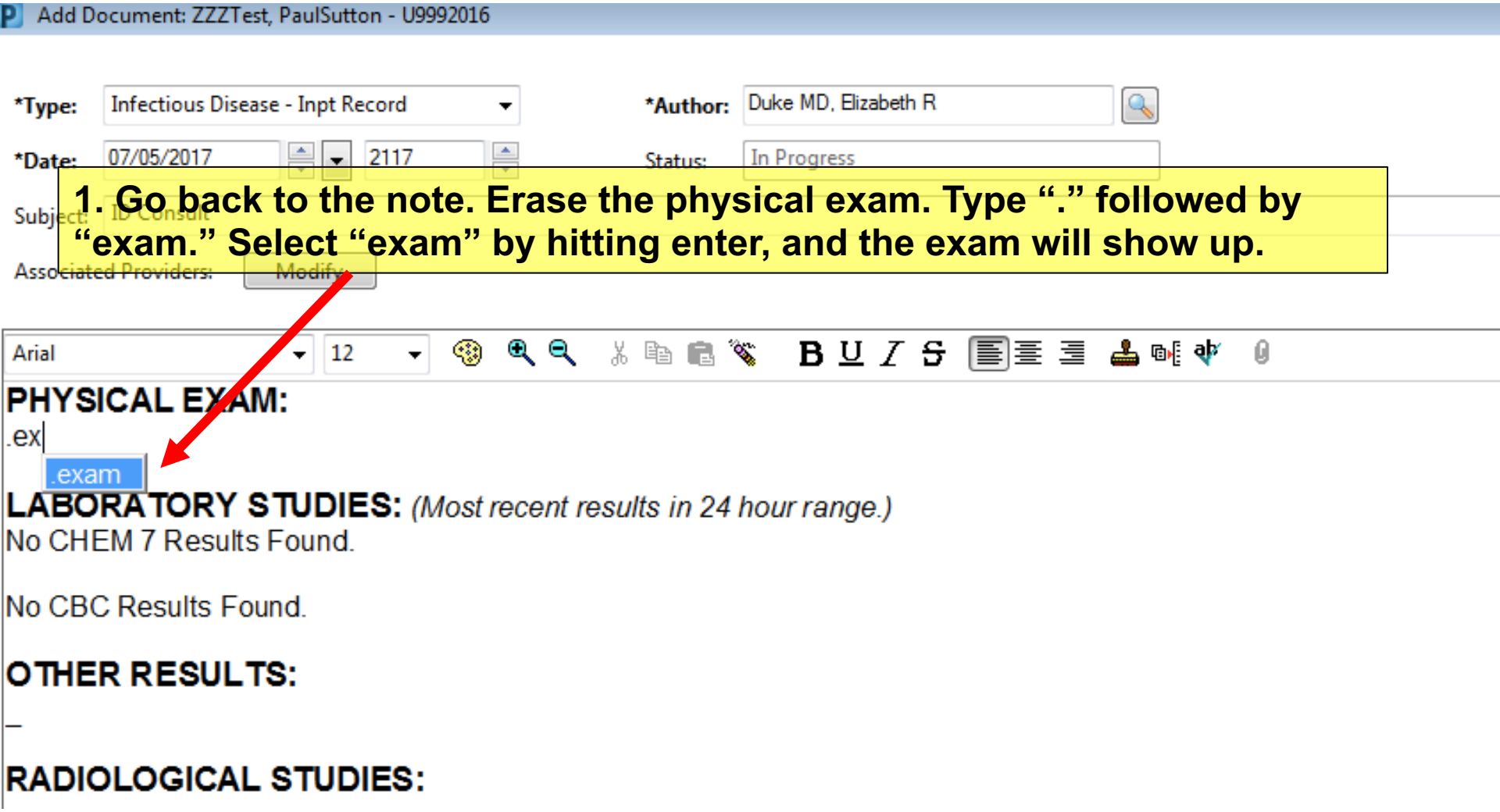

Manage Auto Text
Click the “+” sign
My Phrases
Public Phrases
Search Auto Text
Edit...
Duplicate...
Delete
Abbreviation
Descrip
Auto Text Phrase
Abbreviation
Description
.allergies
.amB
.ambisome
.amoxclav
amox clav written out
.amp
ampicililn-sulbactam written out
.ampC
.atripla
written out
.bactrim
bactrim written out
.bcx2
.brief
header
.cbc
cbc
.cocci

1. Name your dot phrase. YOU MUST BEGIN THE NAME WITH A PERIOD. Every time you want this to appear in your note, you'll type "." followed by the name

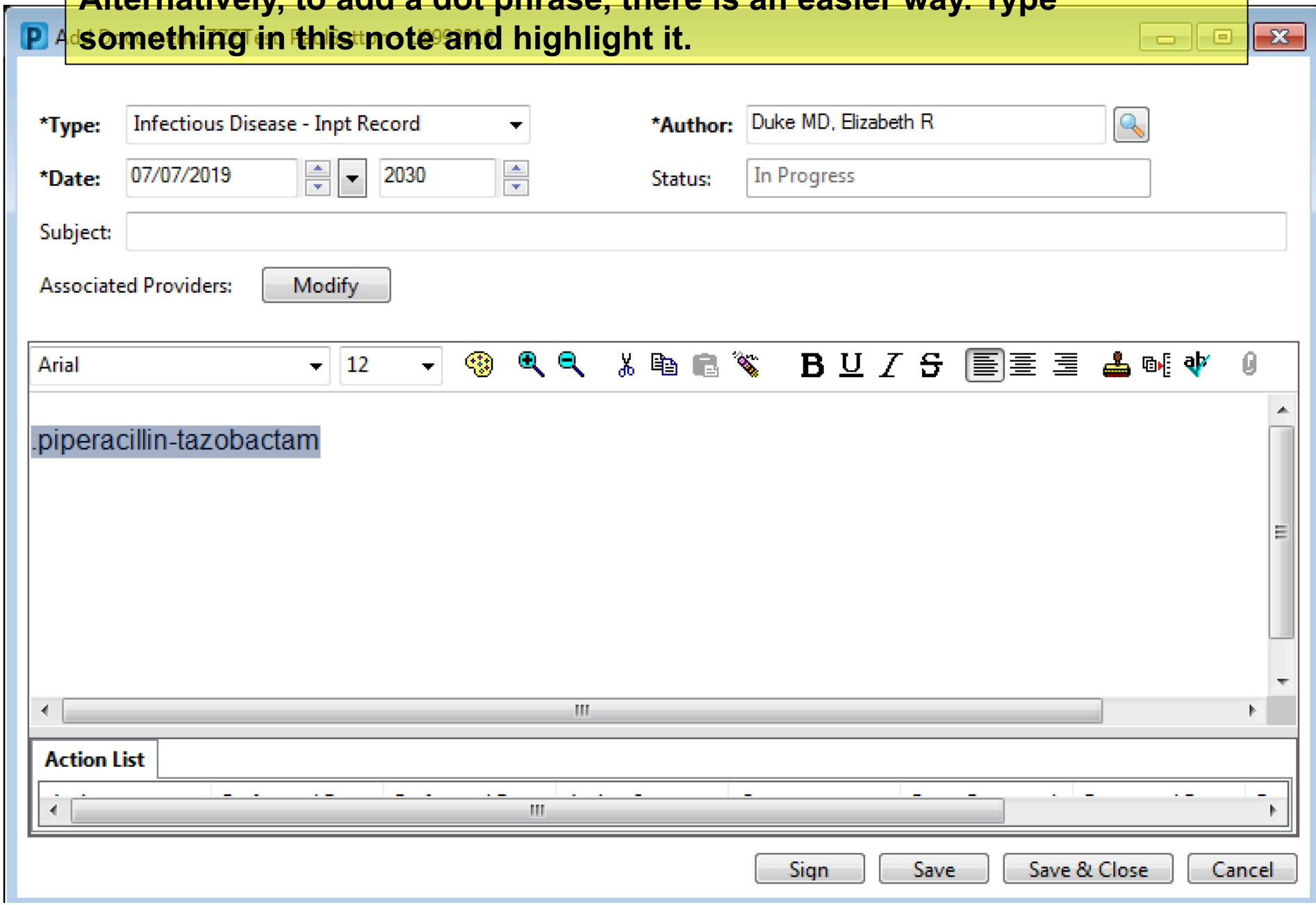


2. You can type a quick description if you want to remind yourself later, but can leave blank.


Manage Auto Text
Show Auto Text Notifications
Abbreviation
exam
Description
my ID exam
Arial
10
Physical Exam:
Vital signs reviewed.
Gen: Comfortable, in NAD.
Eyes: eyelids normal, conjunctiva clear, pupils equal. No scleral icterus.
ENMT: normal dentition, oropharynx normal, nasal mucosa normal
Lymphatics: No palpable cervical, submandibular, or supraclavicular nodes
Lungs: CTAB, nl resp effort.
Heart: CV regular rate and rhythm. No murmurs.
Abd: +BS, NT, ND, liver not enlarged.
MSK: No edema. No hot joints. Normal range of motion in extre ities
Skin: No rashes, warm and dry.
Psych: normal mood, appropriate affect
1. Go to eduke.org for the dot phrase templates. Open the attachment called “exam.docx”.
Save
Cancel
2. Click Save button.


Add Document: ZZZTest, PaulSutton - U9992016
*Type: Infectious Disease - Inpt Record
*Author: Duke MD, Elizabeth R
*Date: 07/05/2017 2117
Status: In Progress
Subject: ID Consult
Associated Providers:
Modify
1. Go back to the note. Erase the physical exam. Type "." followed by "exam." Select "exam" by hitting enter, and the exam will show up.
Arial
12
PHYSICAL EXAM:
.ex
.exam
LABORATORY STUDIES: (Most recent results in 24 hour range.)
No CHEM 7 Results Found.
No CBC Results Found.
OTHER RESULTS:
–
RADIOLOGICAL STUDIES:

Alternatively, to add a dot phrase, there is an easier way. Type something in this note and highlight it.



Add Document: ZZZTest, PaulSutton - U9992016

*Type: Infectious Disease - Inpt Record

*Author: Duke MD, Elizabeth R

*Date: 07/05/2017 2117

Status: In Progress

Subject: ID Consult

Associated Providers: Modify

Arial 14

Physical Exam:
Vital signs reviewed.

Gen: Comfortable, in NAD.
Eyes: eyelids normal, conjunctiva clear, pupils equal. No scleral icterus.
ENMT: normal dentition, oropharynx normal, nasal mucosa normal
Lymphatics: No palpable cervical, submandibular, or supraclavicular nodes
Lungs: CTAB, nl resp effort.
Heart: CV regular rate and rhythm. No murmurs.
Abd: +BS, NT, ND, liver not enlarged.
MSK: No edema. No hot joints. Normal range of motion in extremities
Skin: No rashes, warm and dry.
Psych: normal mood, appropriate affect

*Type: Infectious Disease - Inpt Record

*Author: Bryson-Cahn MD, Chloe

*Date: 07/02/2018 1639

Status: In Progress

Let's add micro data to a note:

SKIN: _

LABORATORY STUDIES: *(Most recent results in 24 hour range.)*
No CHEM 7 Results Found.

No CBC Results Found.

OTHER RESULTS:
_

RADIOLOGICAL STUDIES:
_

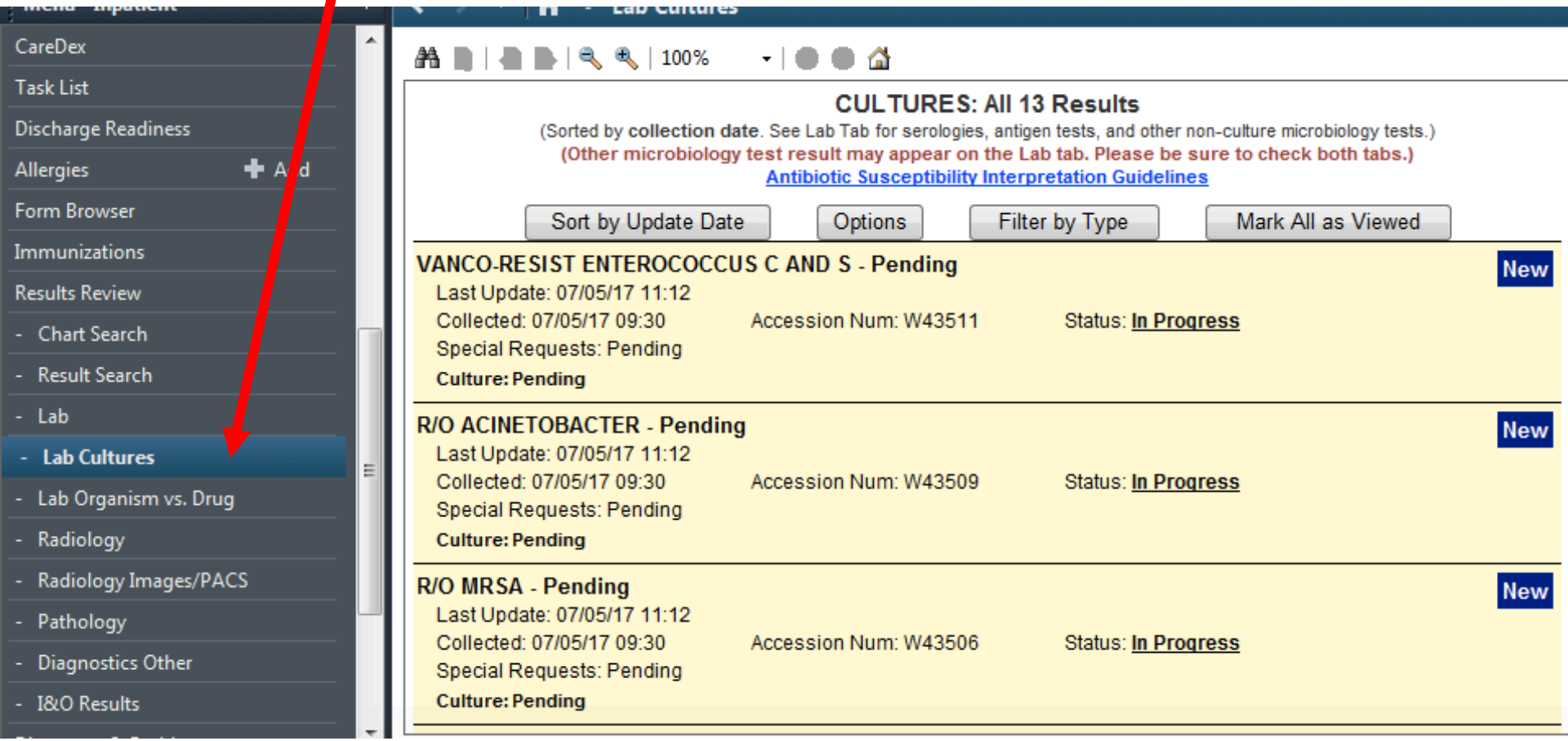
MICROBIOLOGY:
_

PROBLEMS / ASSESSM
_

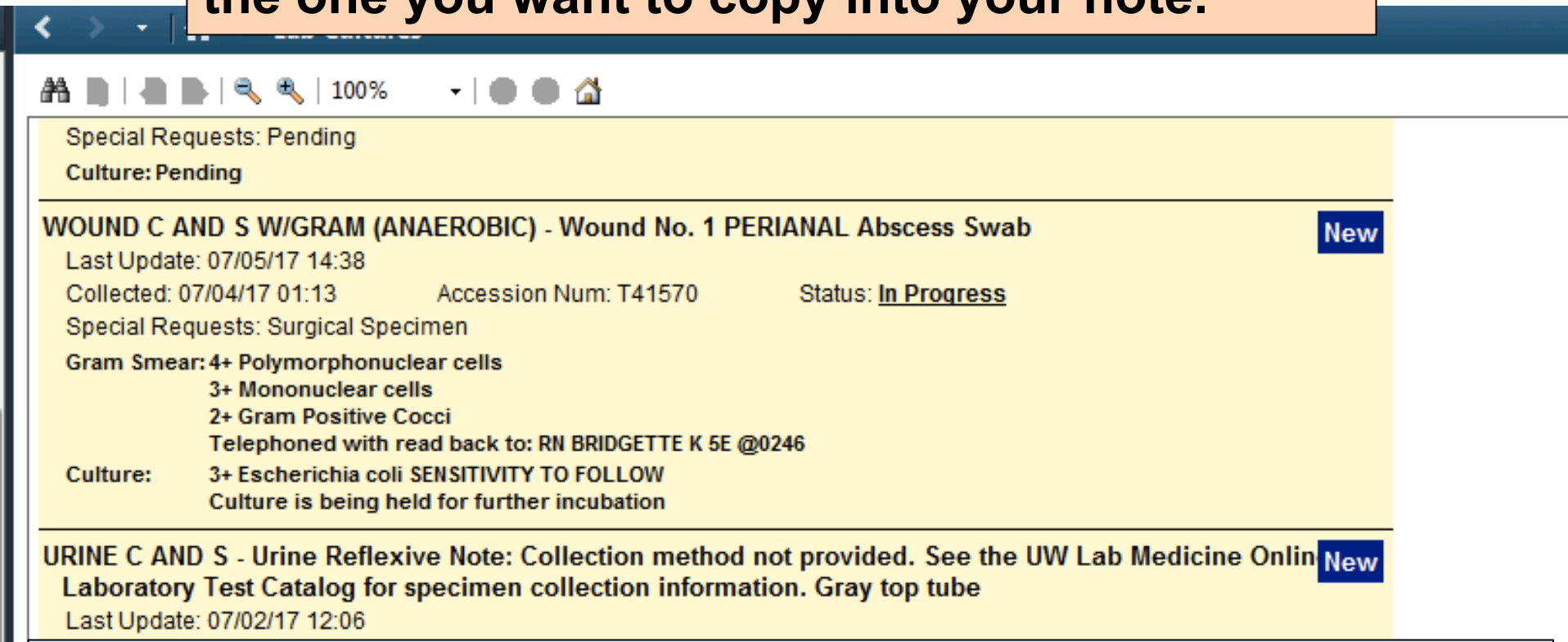
Thank you for the opportunity
any questions.

Choose a patient from the ID list who will have lots of culture data. We'll do this part in class so I don't put any pt info up.

Scroll in the left column until you get to “Lab Cultures”

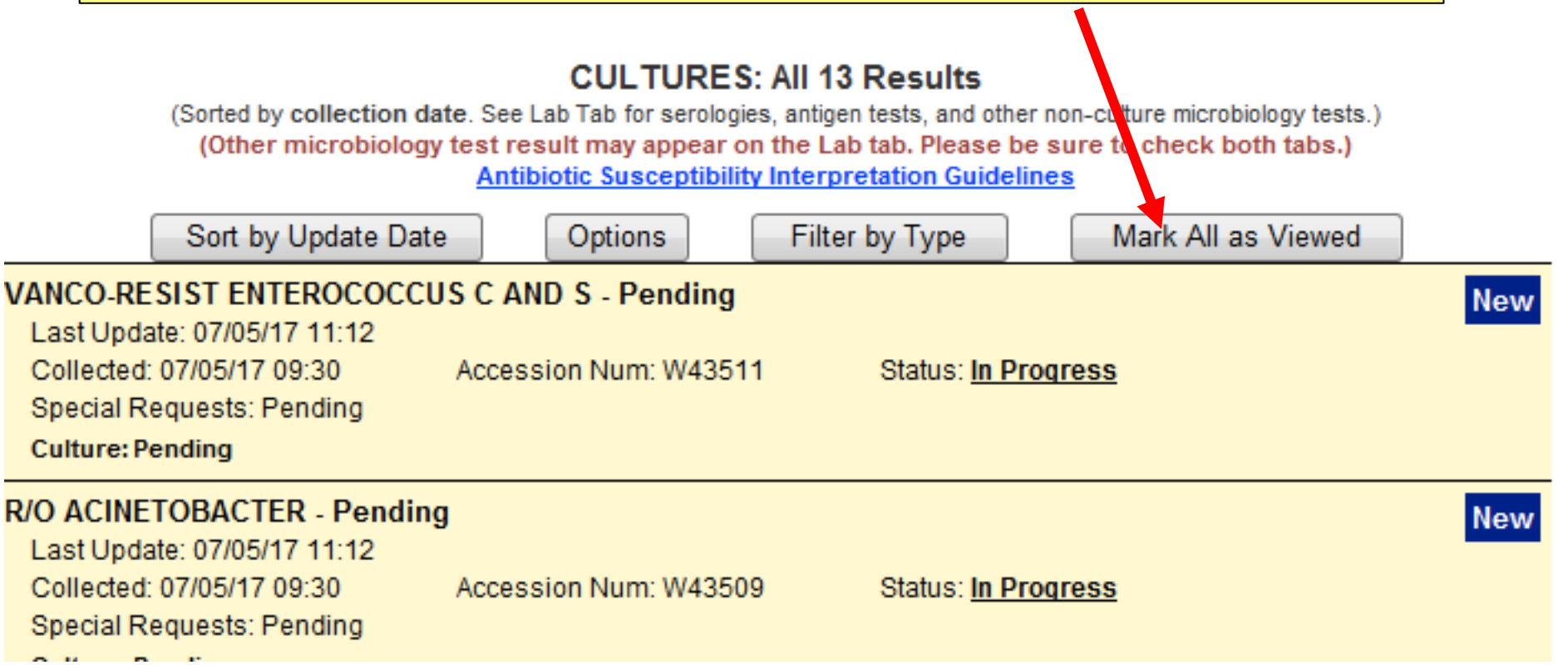


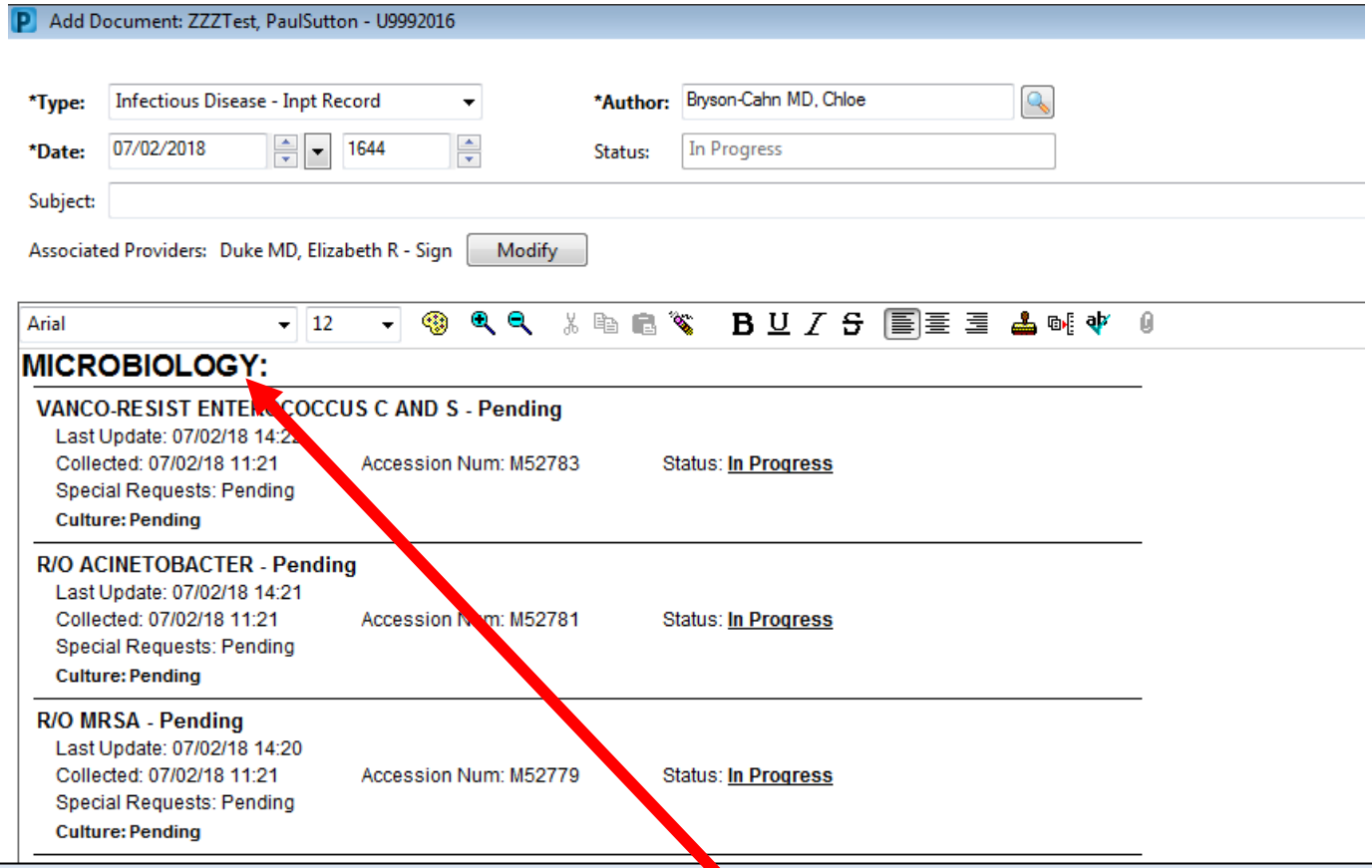
Scroll to a culture that looks useful. Choose the one you want to copy into your note.



On windows computers (like at the UW and HMC), you should use "Snipping Tool" from the start menu to cut out the culture you want and paste into your note. On Mac computers, you can use APPLE (command) + CTRL + SHIFT + the number 4 to do the same thing.

When you're finished looking at the cultures, click Mark All as Viewed button, which will make it clear when new results come because they'll turn peachish-orange like these are now.



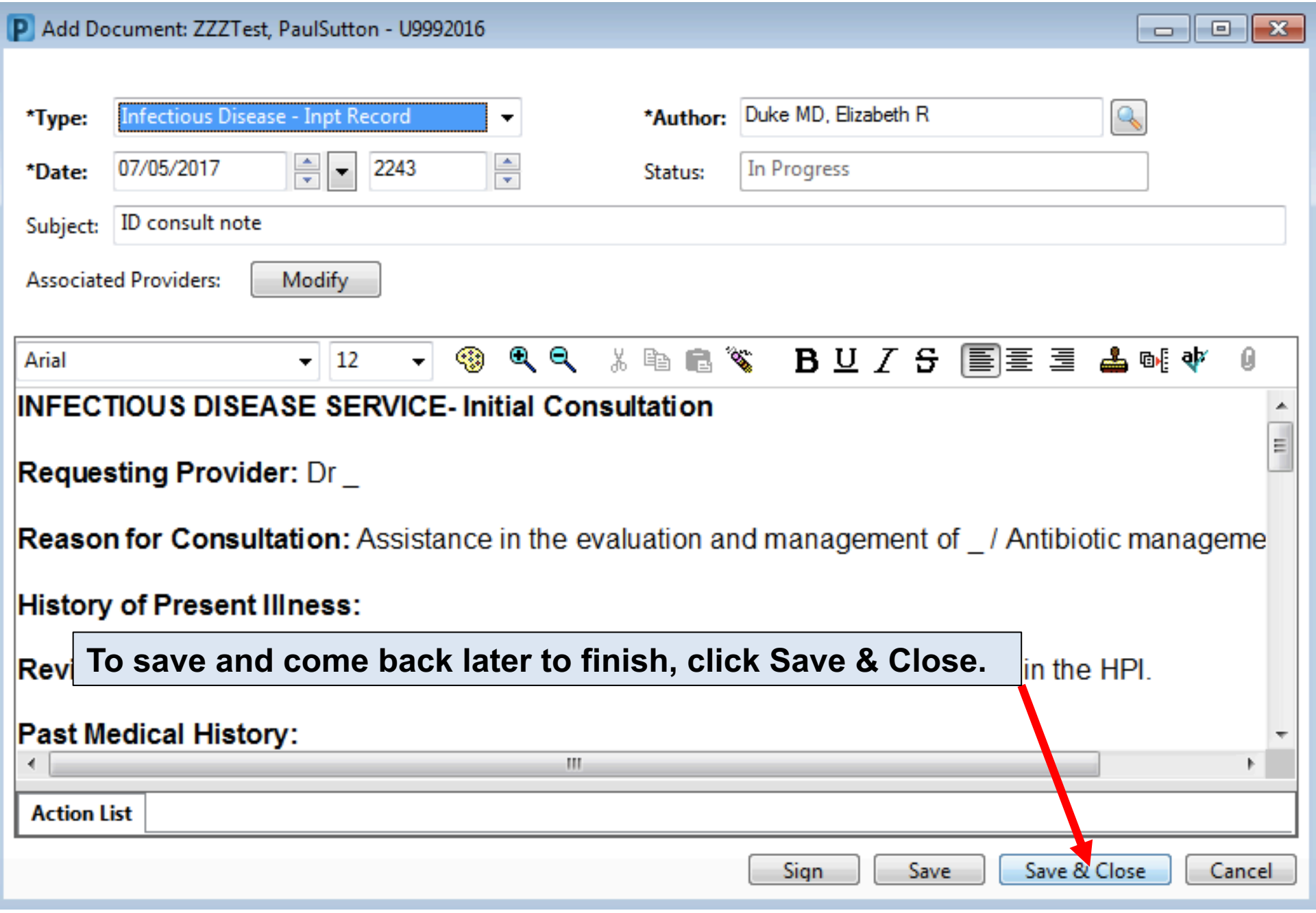


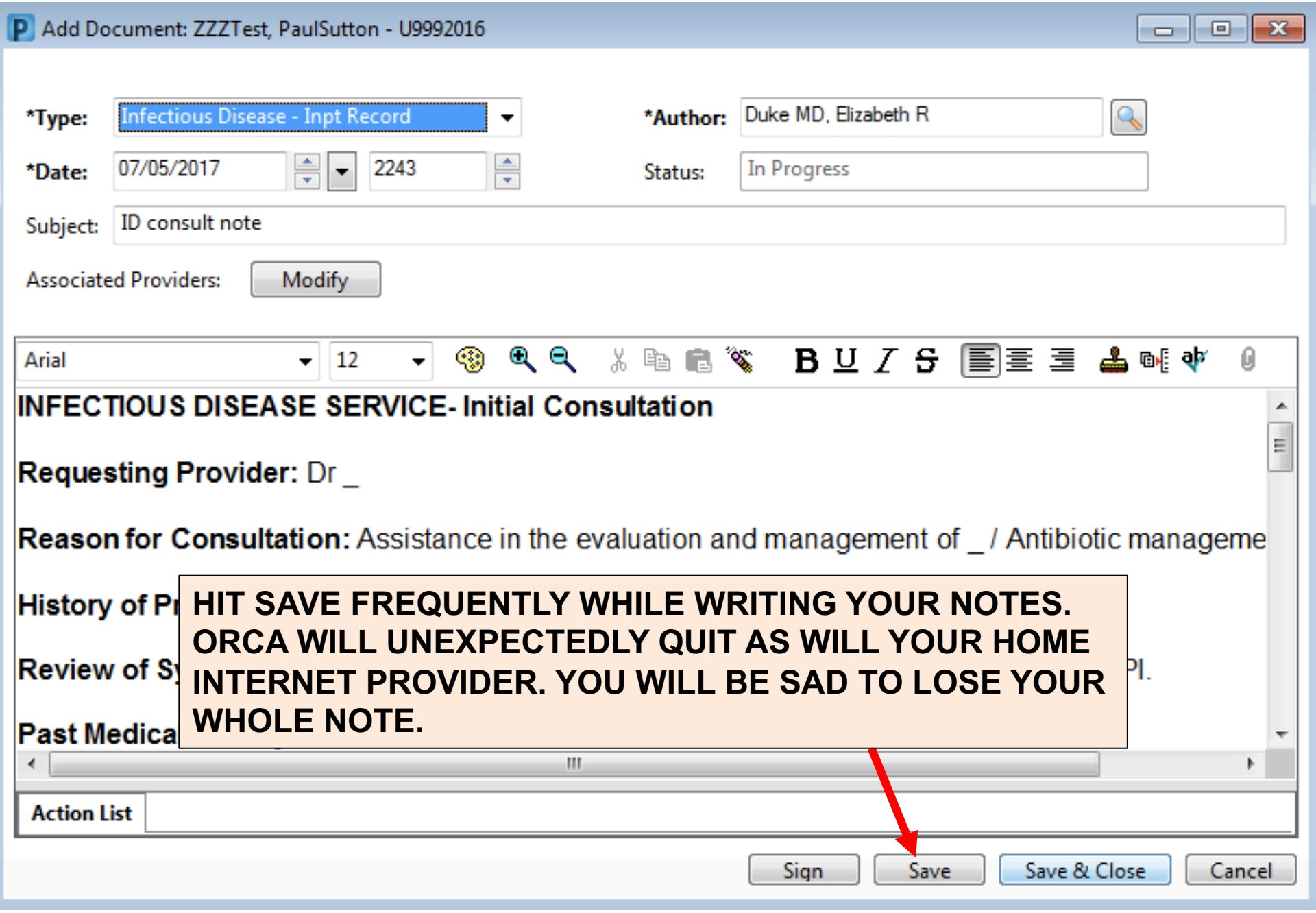
After you "snip/copy", paste in Micro section of your note. CTRL + v (on windows), APPLE + v (on Mac).

PROBLEMS / ASSESSMENT / PLAN:

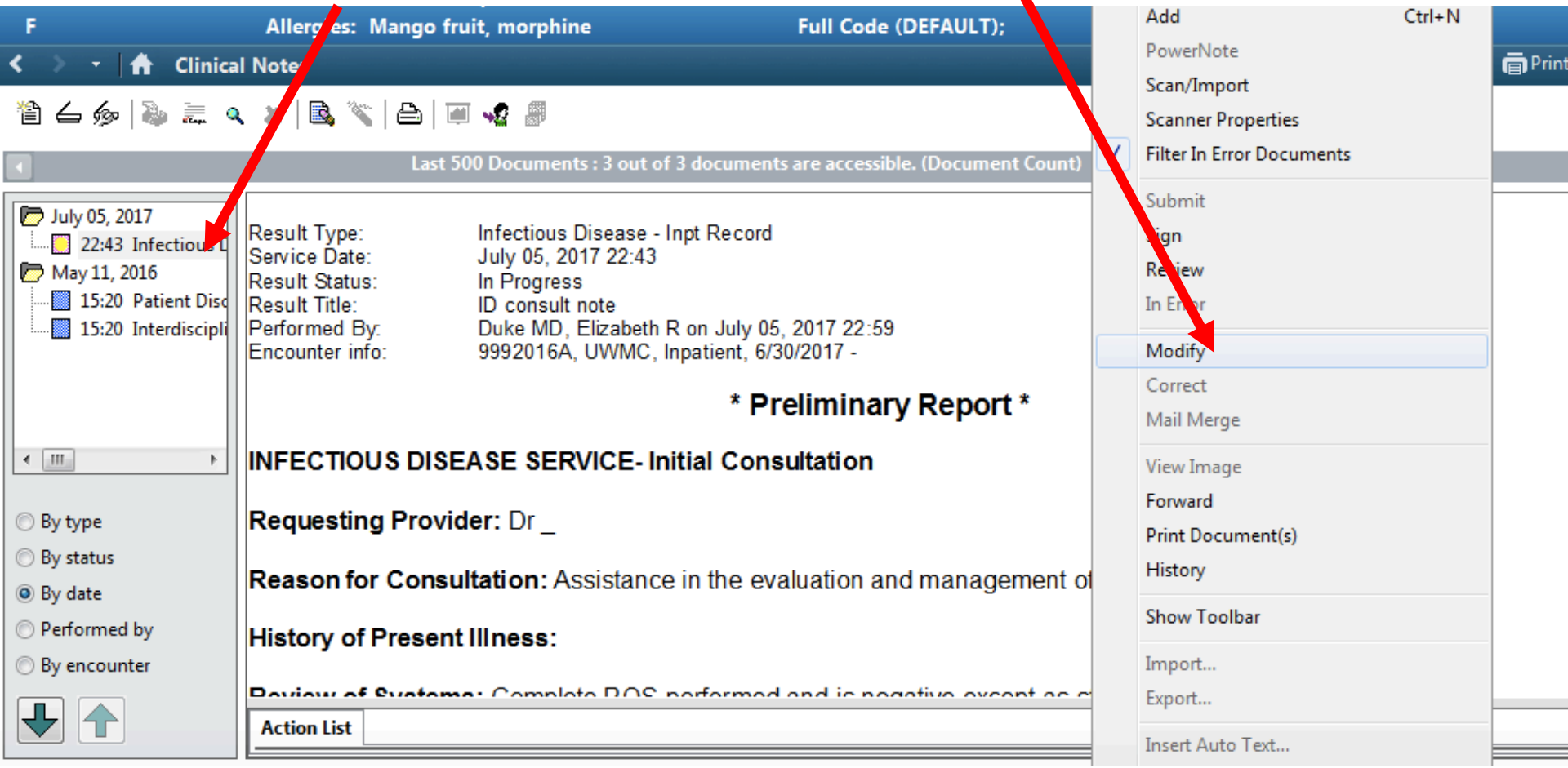
–

Thank you for the opportunity to participate in the patient's care. We will follow closely with you. Please call with any questions.


Add Document: ZZZTest, PaulSutton - U9992016
*Type: Infectious Disease - Inpt Record
*Author: Duke MD, Elizabeth R
*Date: 07/05/2017
2243
Status: In Progress
Subject: ID consult note
Associated Providers:
Modify
Arial
12
INFECTIOUS DISEASE SERVICE- Initial Consultation
Requesting Provider: Dr _
Reason for Consultation: Assistance in the evaluation and management of _ / Antibiotic manageme
History of Present Illness:
Rev
To save and come back later to finish, click Save & Close.
in the HPI.
Past Medical History:
Action List
Sign
Save
Save & Close
Cancel


Add Document: ZZZTest, PaulSutton - U9992016
*Type:
Infectious Disease - Inpt Record
*Author:
Duke MD, Elizabeth R
*Date:
07/05/2017
2243
Status:
In Progress
Subject:
ID consult note
Associated Providers:
Modify
Arial
12
INFECTIOUS DISEASE SERVICE- Initial Consultation
Requesting Provider: Dr _
Reason for Consultation: Assistance in the evaluation and management of _ / Antibiotic manageme
History of Pr
Review of Sy
Past Medica
HIT SAVE FREQUENTLY WHILE WRITING YOUR NOTES. ORCA WILL UNEXPECTEDLY QUIT AS WILL YOUR HOME INTERNET PROVIDER. YOU WILL BE SAD TO LOSE YOUR WHOLE NOTE.
Action List
Sign
Save
Save & Close
Cancel

See now that your note shows up in the column on the left. No one can see it but you. To start working on the note again, right click inside your note and choose modify.



Note Etiquette:

- **For billing, we fill out these templates (the new ones).**
- **For communication and out of respect for your fellow fellows, we ask that you do two things:**
  - **1) Keep an updated micro section**
  - **2) Keep an updated antimicrobial section (with start dates)**

MICRO:

CSF 3/30

-CrAg negative
-HSV negative, VZV P
-Gram stain without organisms, NGTD
-AFB smear negative, culture NGTD and TB PCR P

Blood

-3/31 AFB Blood NGTD
-3/30 NGTD

Sputum

-3/31 MTB PCR Negative (sputum sample poor per RT and all saliva), smear negative x 2

HIV 1 and 2 negative

ABX:

Rifampin 3/30 - P
INH 3/30 - P
Pyrazinamide 3/30 - P
Levofloxacin 3/31 - P

Prior: Ethambutol 3/30, Ceftriaxone 3/30-3/31, Vancomycin 3/30 - 3/31, Acyclovir 3/30

SIGN OFF NOTES AND OPAT

Go to eduke.org and download "ORCA_dot_phrases." At the top of the document, see OPAT templates. Add these 4 templates to your list of smart phrases. These are the OPAT notes you put at the bottom of your note and cc the note to the respective services.

*Type:

*Date:

Subject:

Associated Providers: Modify

Arial 12

Antimicrobials:

–

PE:

–

Mi

–

.opat
.opat_hmc
.opatseebelow

.op

General OPAT Etiquette

Please include:

- Indication/ dose/ duration/ start date
- Plan for transition to orals or long-term suppression
- Laboratory monitoring recommendations

SIGN OFF NOTES AND OPAT

1. Use the OPAT dotphrases at the bottom of your sign-off note

*Type:

*Date: 06/28/2018 1130 Status: In Progress

Subject:

Associated Providers: Modify

Arial 12

LABORATORY STUDIES: *(Most recent results in 24 hour range.)*
No CHEM 7 Results Found.

No CBC Results Found.

RADIOLOGICAL STUDIES:

–

PROBLEMS / ASSESSMENT / PLAN:

Recs:

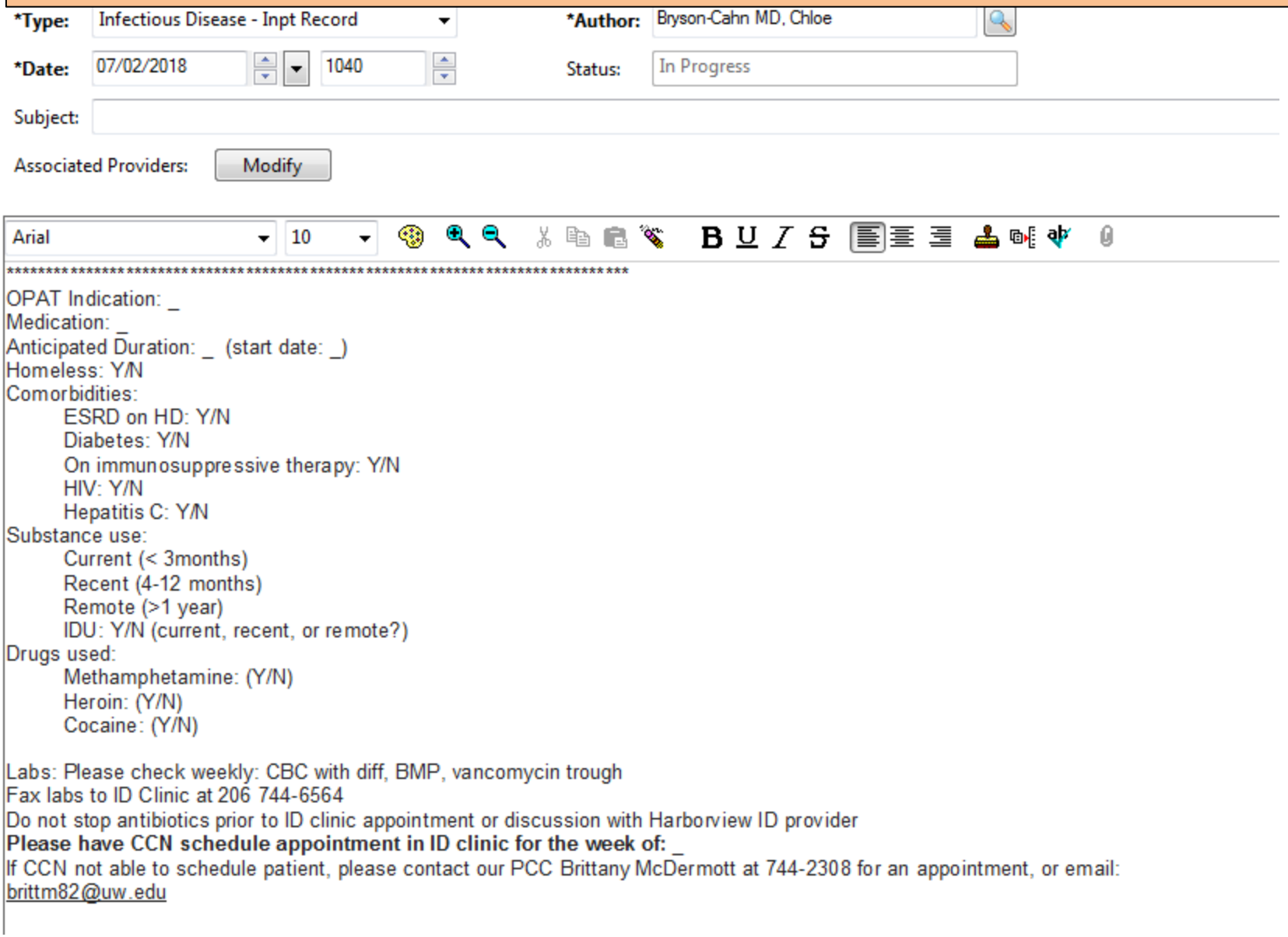
The patient was seen and discussed with Dr. Attending, attending physician. Thank you for involving us in the care of this patient. We will sign off and remain available for further questions.

..op

..opatHMC
..opatUWMC

SIGN OFF NOTES AND OPAT

1. **OPAT Note will look like this**
2. **F3 through all of the fields**



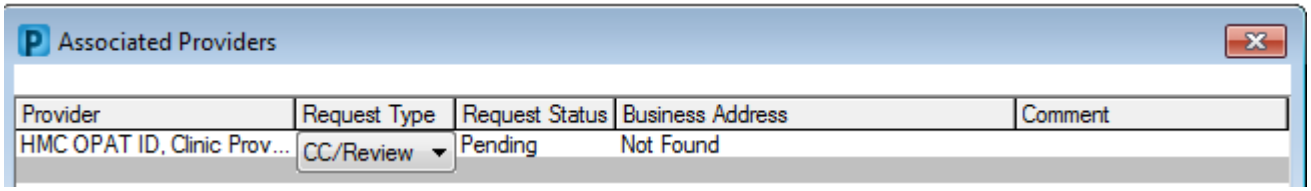
Harborview

Bottom of ID Consult Sign-Off Note

Who needs OPAT:

- Patient getting discharged with >1 week IV abx
- Patient receiving > 2 weeks of ORAL antimicrobials that need monitoring (fluconazole, TMP/SMX, FQ)
- Pts staying in the hospital on long-term abx

CC: HMC_OPAT_ID



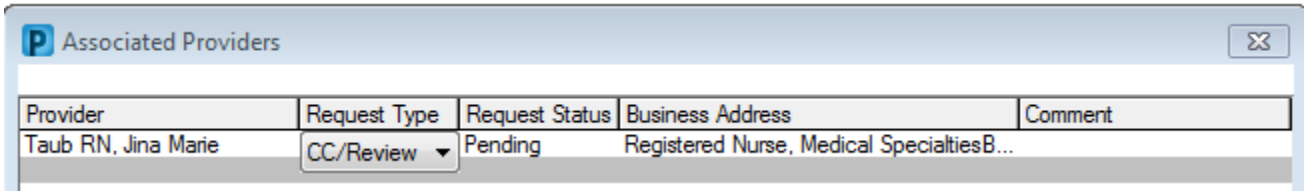
UWMC General ID

Bottom of ID Consult Sign-Off Note

Who needs OPAT:

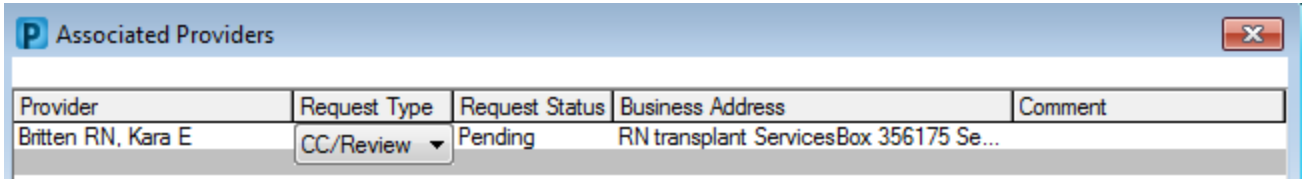
- Patient getting discharged with >1 week IV abx
- Patient receiving prolonged ORAL antimicrobials that need monitoring (fluconazole, TMP/SMX, FQ)
- Pts staying in the hospital on long-term abx

CC: Jina Taub



SOT

- Bottom of ID Consult Sign-Off Note
- Who needs OPAT:
  - All pts getting >1 week IV abx
- CC: Kara Britten



SCCA

Bottom of ID Consult Sign-Off Note

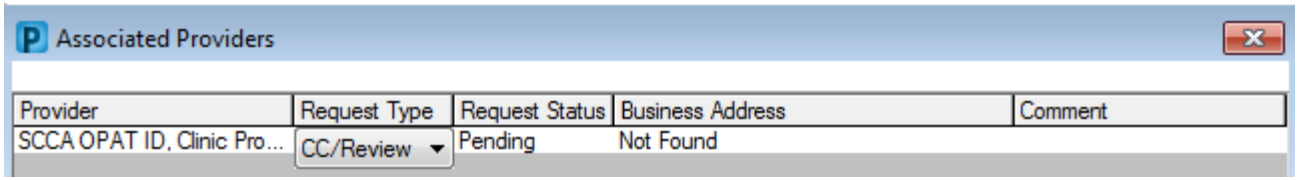
Who **needs** OPAT:

- Hospitalized inpt d/c'ed on **> 2 weeks** of IV abx:
  - Osteosarcoma service (e.g. prosthetic implant-associated infection)
  - Other solid tumors (e.g. endocarditis, osteomyelitis, etc)
  - Hematology-oncology

Not managed by OPAT (for now):

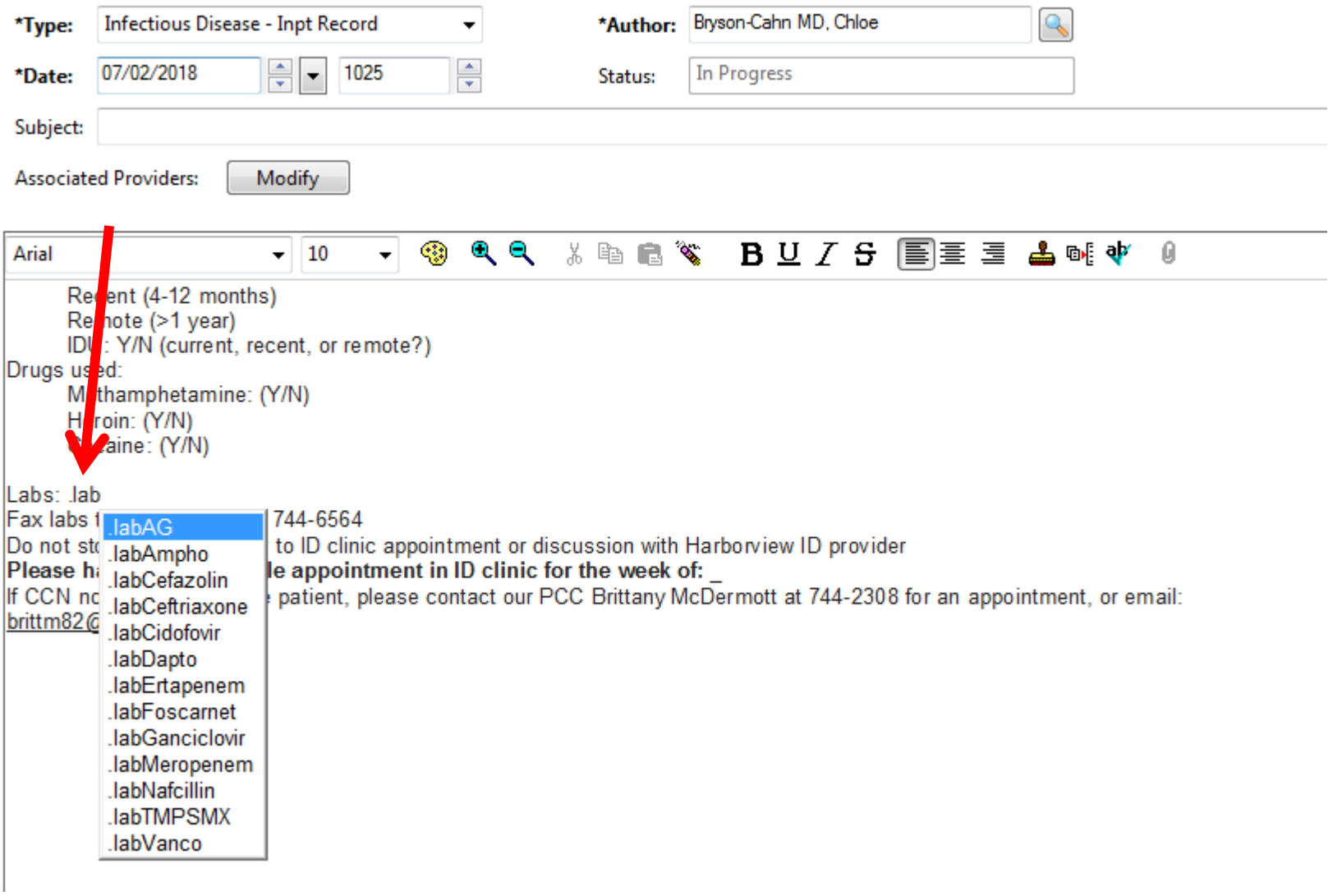
- BMT patients (have intensive follow-up already)
- Outpt receiving prolonged oral therapy (follow-up with ID clinic per routine)

CC: SCCA_OPAT_ID

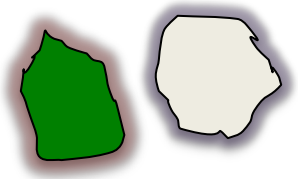


LAB Monitoring Dotphrases

1. From the “OPAT dotphrases” document, scroll to the last page
2. Create lab monitoring dotphrases for common antimicrobials
3. Can use these to customize your OPAT referrals

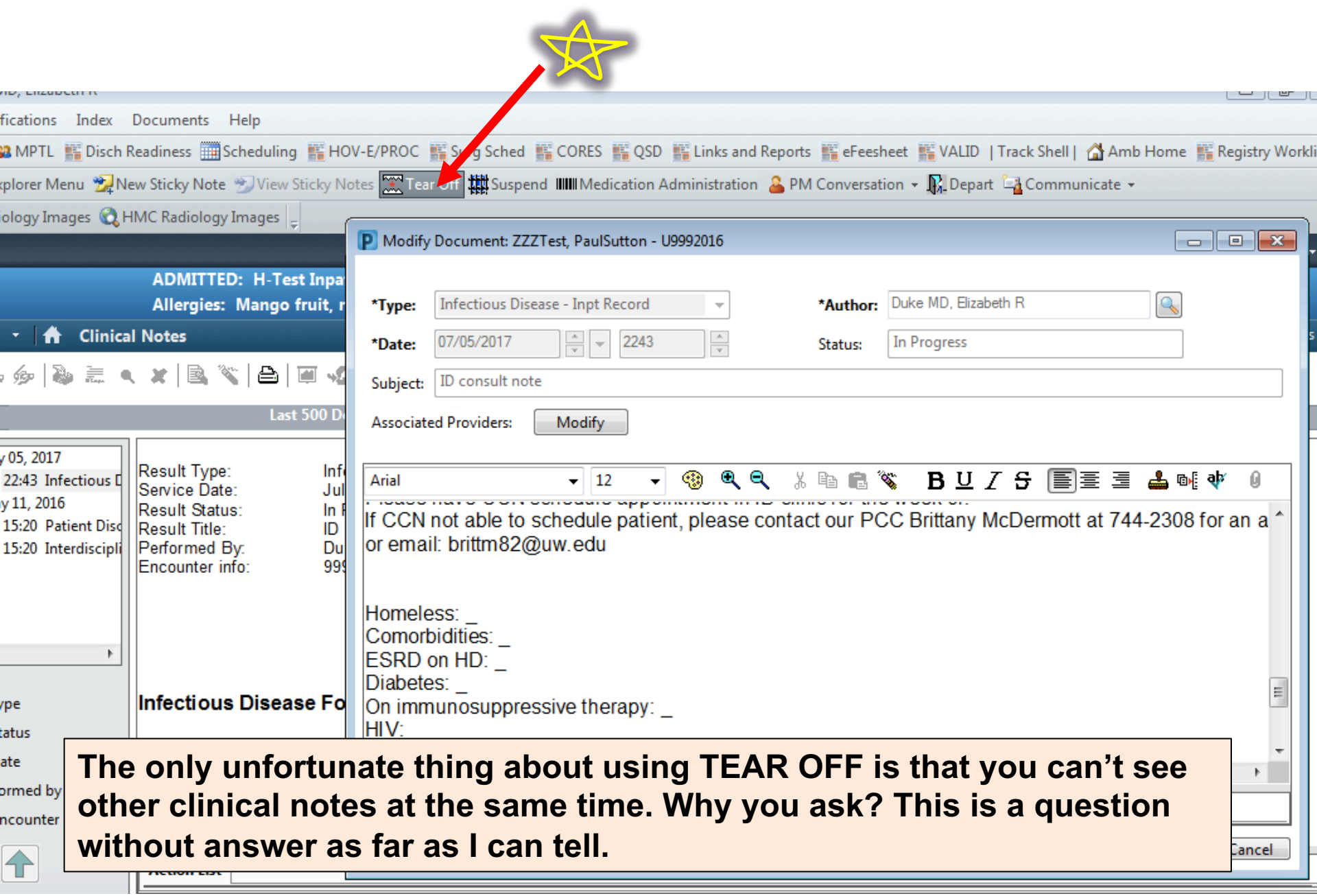


A FEW GEMS



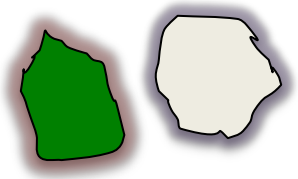
PROBLEM: you can't write on your note and look at labs or cultures or vitals at the same time.

SOLUTION: Either you can open two copies of ORCA . . . OR . . . You can use TEAR-OFF



The only unfortunate thing about using TEAR OFF is that you can't see other clinical notes at the same time. Why you ask? This is a question without answer as far as I can tell.

A FEW GEMS

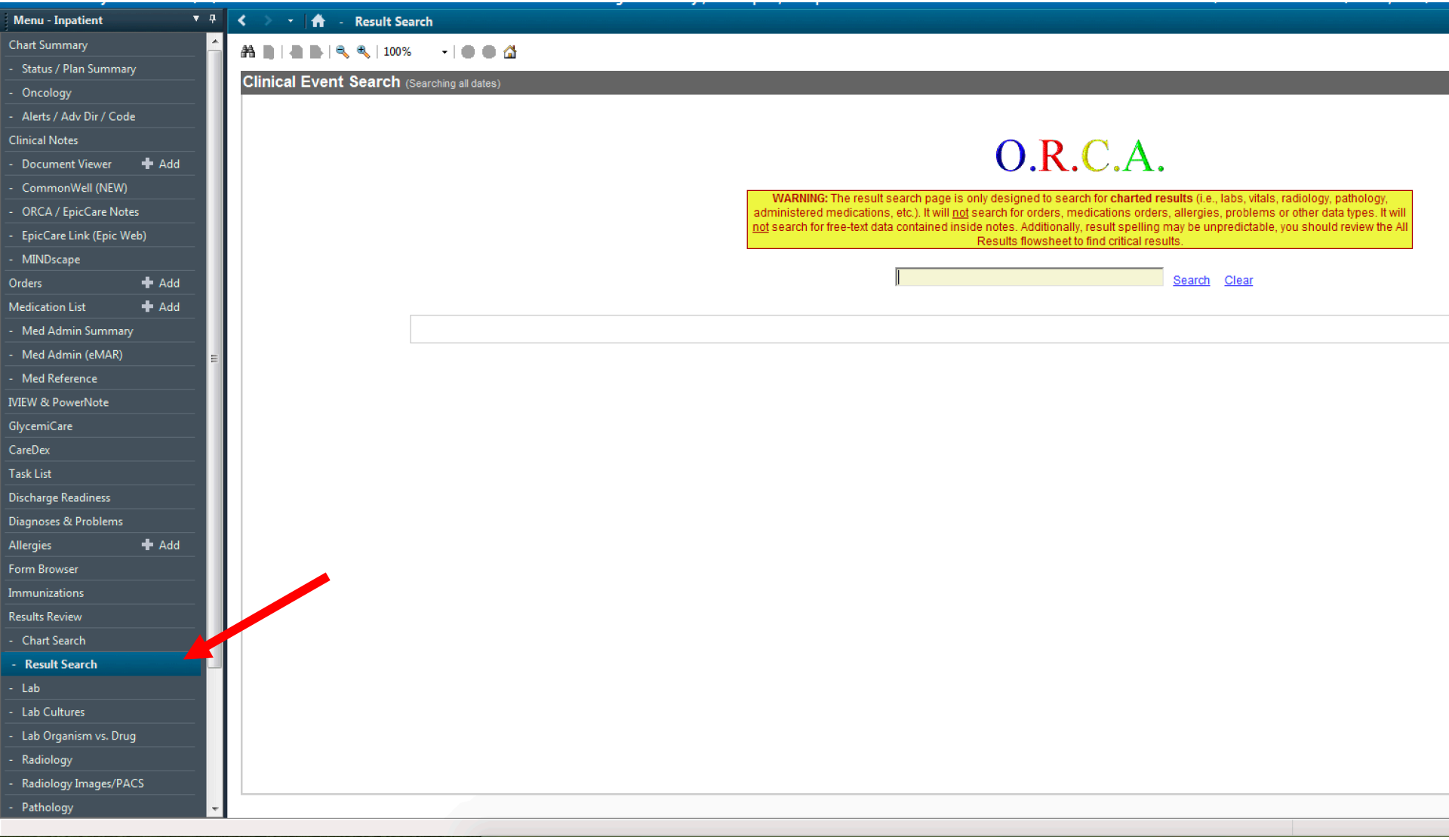


PROBLEM: Ajit Limaye asks you suddenly if a CrAg has been checked on someone or what their VZV serology was. You don't know the answer, and it may have been checked 5 years ago. What do you do?

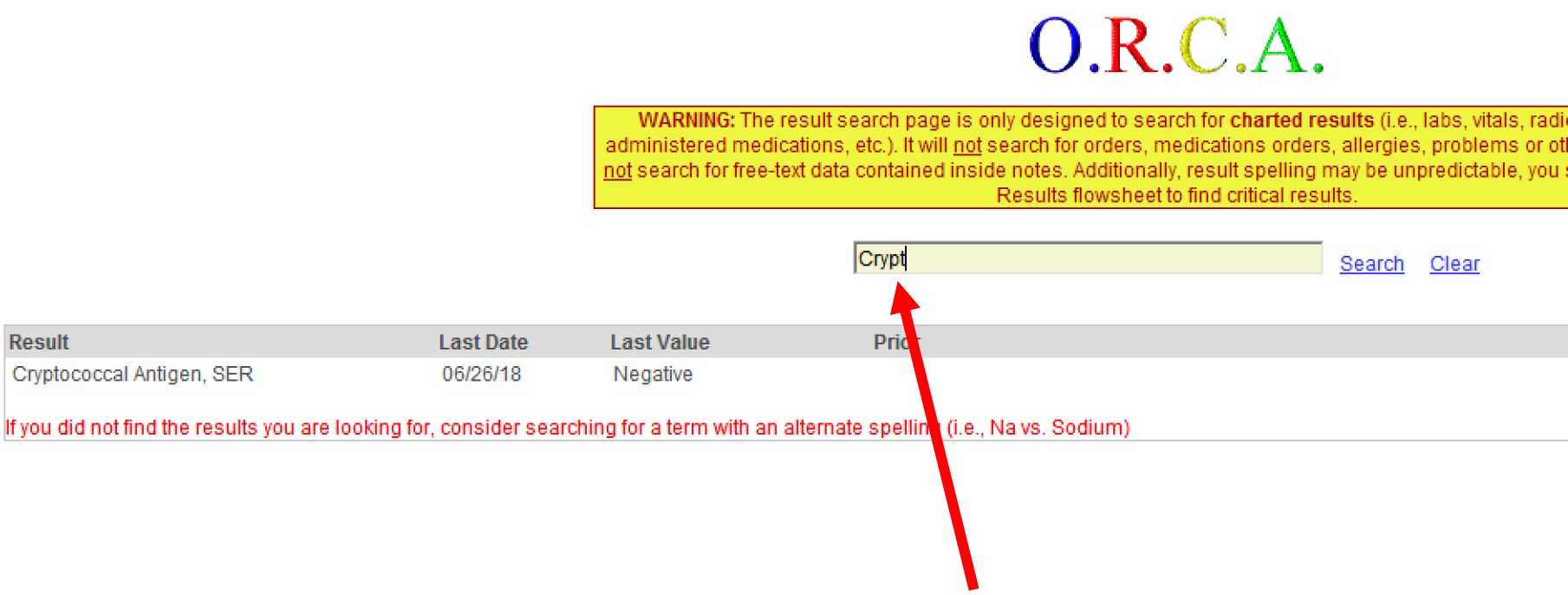
SOLUTION: RESULTS SEARCH.

In any chart, on the L hand column, choose Results Search.

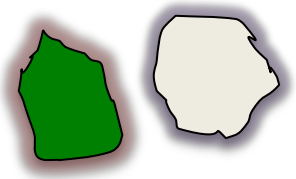
This is a google-type search engine for lab results (and medications).



Be flexible here. Sometimes abbreviations work. Sometimes they don't. You can use parts of words. For example, CrAg does not work, but crypt does. On the other hand, VZV works but Varicella does not.



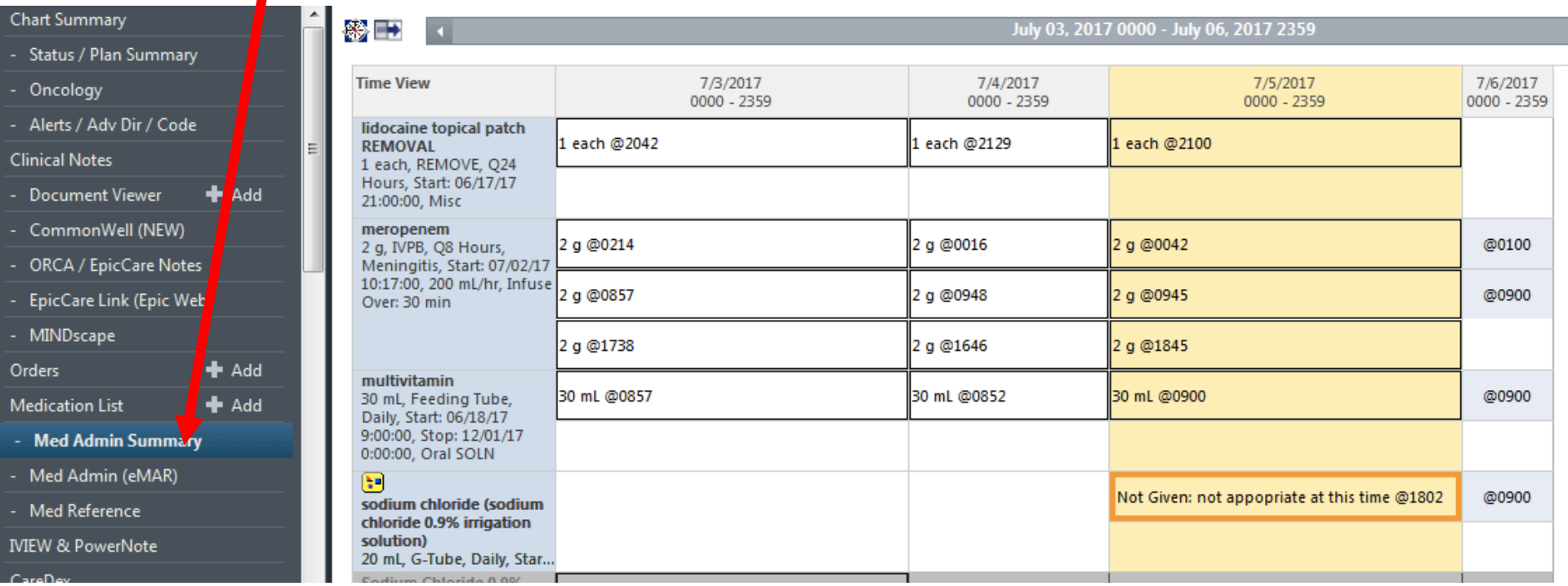
A FEW GEMS



PROBLEM: It's very hard to find all the dates someone has been on antibiotics.

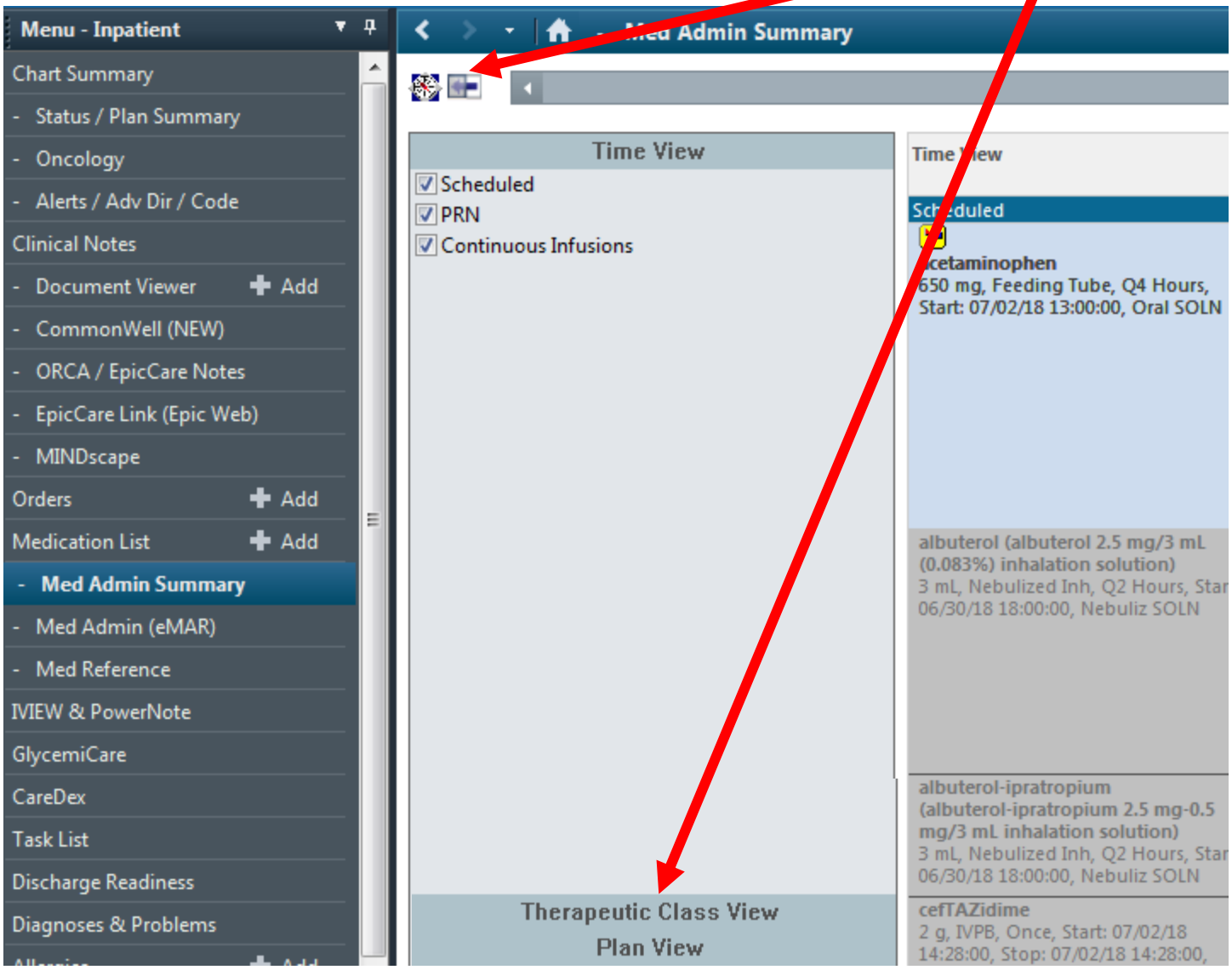
SOLUTION: Either you can also use the Med Admin Summary or if you know the drug of interest, you can use a sneaky lab way.

FIRST: MED ADMIN SUMMARY



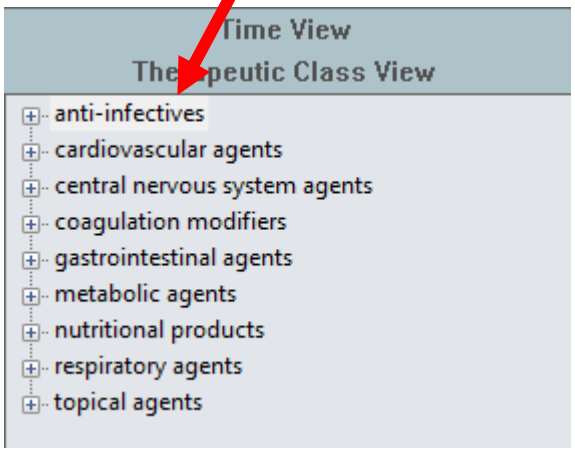
THE UPSIDE IS THAT YOU CAN SEE EVERY MEDICINE THAT THEY'RE ON AND WHEN THEY GOT IT. THE DOWNSIDE IS THAT IT TAKES FOREVER TO LOAD WHEN YOU GO BACKWARDS IN TIME.

FIRST: MED ADMIN SUMMARY
Can narrow to antimicrobials by clicking here and here

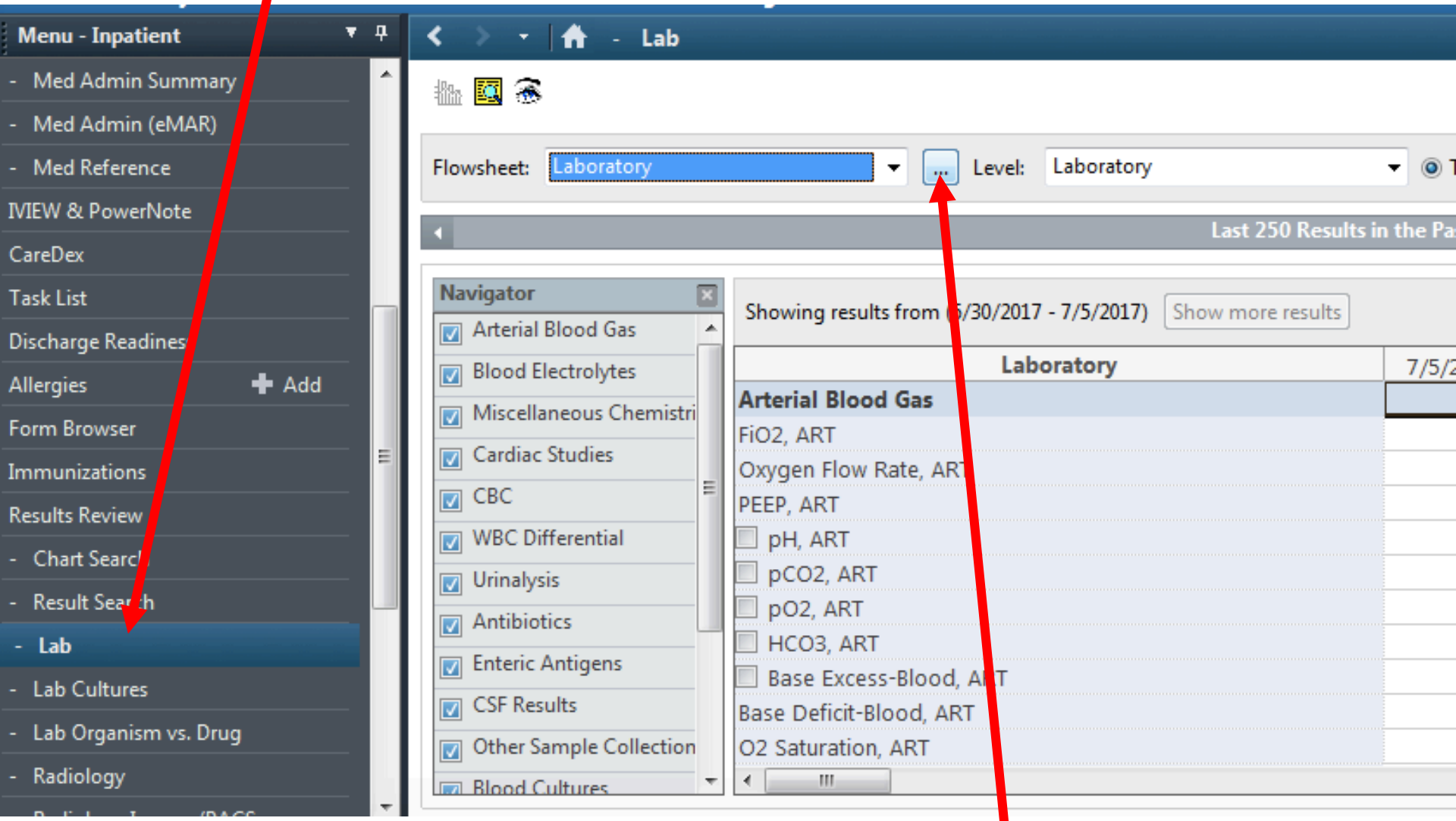


WARNING: Sometimes you'll miss things this way.

Then select anti-infectives

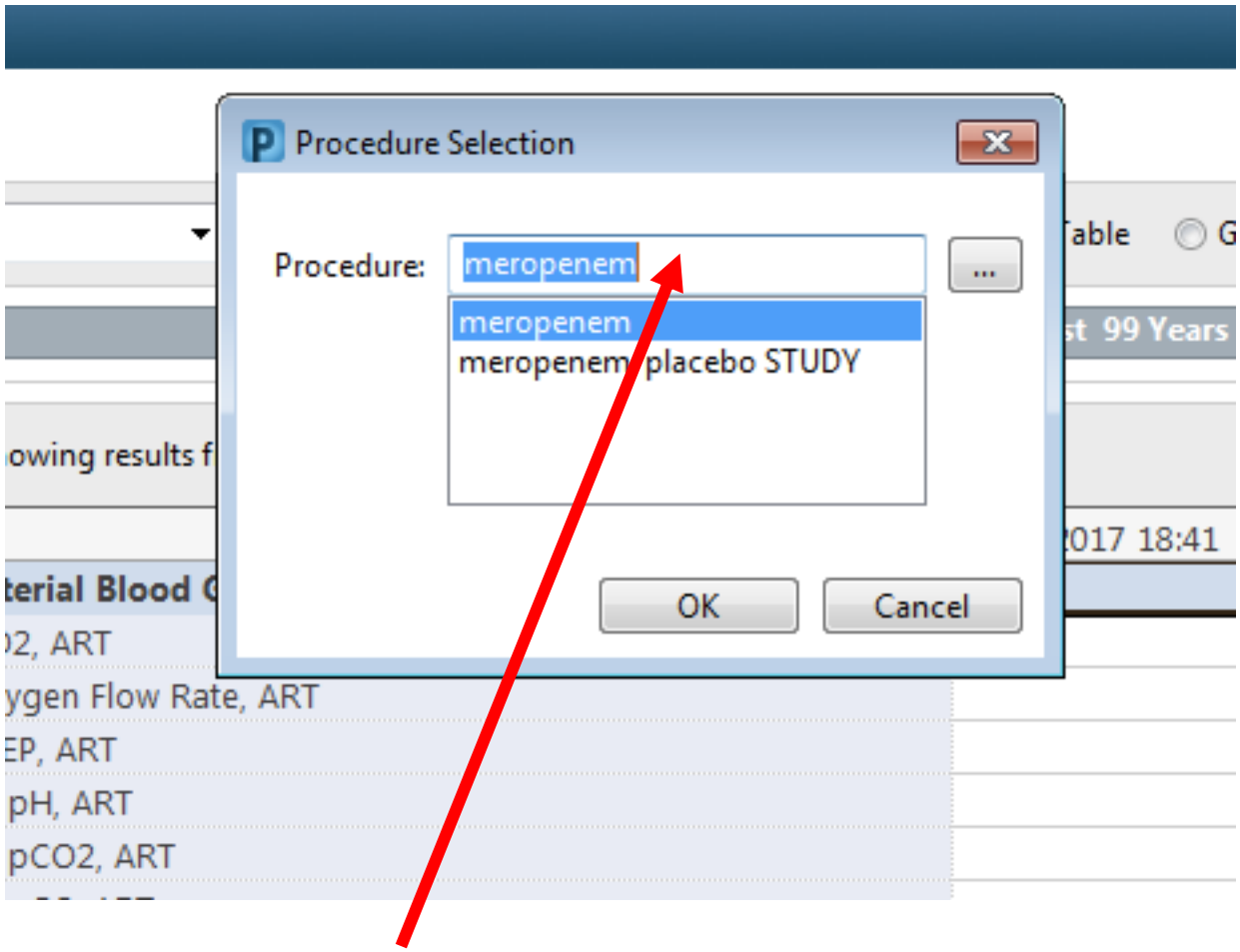


SECOND: SNEAKY LAB WAY



GO TO THE LAB TAB AND THEN CLICK THE MAGIC BOX

SECOND: SNEAKY LAB WAY

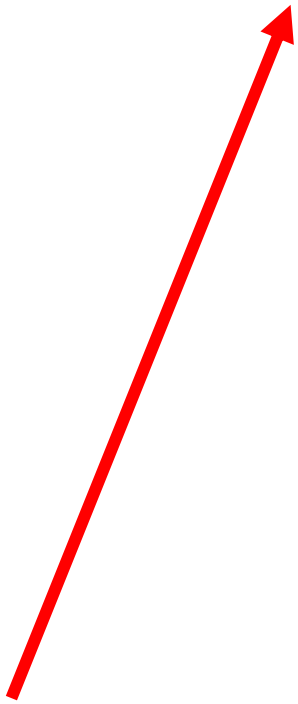


TYPE ANTIBIOTIC OF INTEREST AND SAY OK.

SECOND: SNEAKY LAB WAY

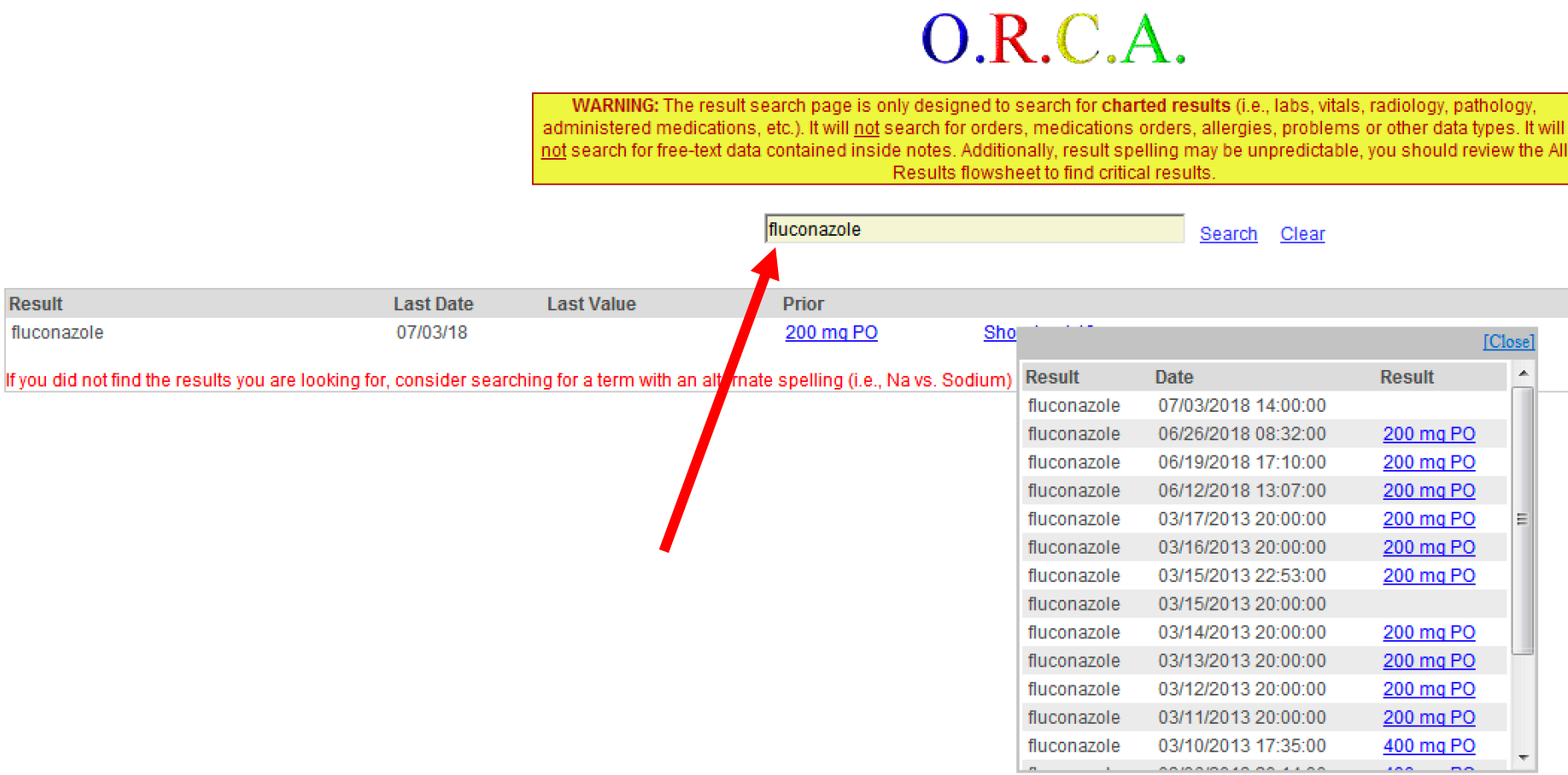
Showing results from (7/2/2017 - 7/5/2017) Show more results

meropenem	7/5/2017 18:45	7/5/2017 9:45	7/5/2017 0:42	7/4/2017 16:46	7/4/2017 9:48	7/4/2017 0:16	7/3/2017 17:38	7/
meropenem	2 g	2 g	2 g	2 g	2 g	2 g	2 g	2 g

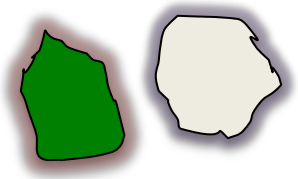


THE DATES AND TIMES OF ADMINISTRATION APPEAR MAGICALLY BEFORE YOUR EYES.

OR YOU CAN USE RESULTS SEARCH LIKE FOR LABS.



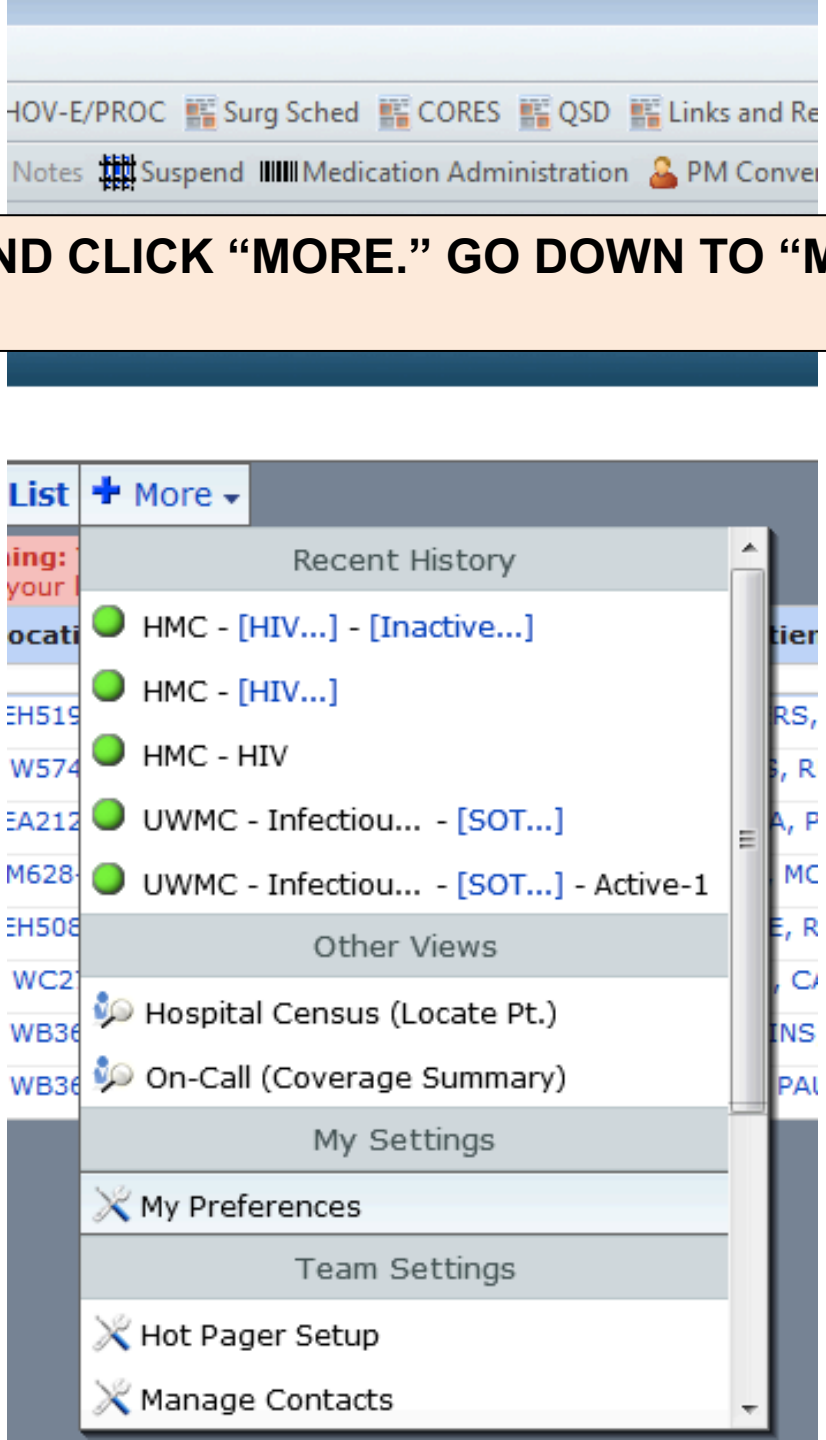
A FEW GEMS



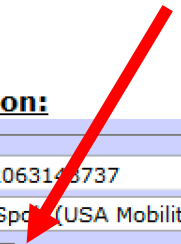
PROBLEM: FOR SOME REASON, TEXT PAGING ISN'T AUTOMATICALLY SET UP FOR YOU.

SOLUTION: THE NEXT SLIDE.

GO TO CORES AND CLICK “MORE.” GO DOWN TO “MY PREFERENCES”



CHECK THE BOX



Personal Contact Information:

Pager Number: 2063148737

Pager Carrier: Spr (USA Mobility)

Enable Text Paging: ☑ *(when this box is checked and your pager is verified, you will be able to receive text pages sent from PowerChart)*

Additional Contact Info:

Characters remaining: 250

Help Info:
Your 'Pager Number' and 'Additional Contact Info' will be published to the chart and will be accessible by other PowerChart users.

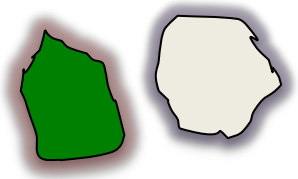
When text paging is enabled, users will be able to send you text pages directly from PowerChart.

Default Settings:

Default View: Team Patient List (which page you will open to first)

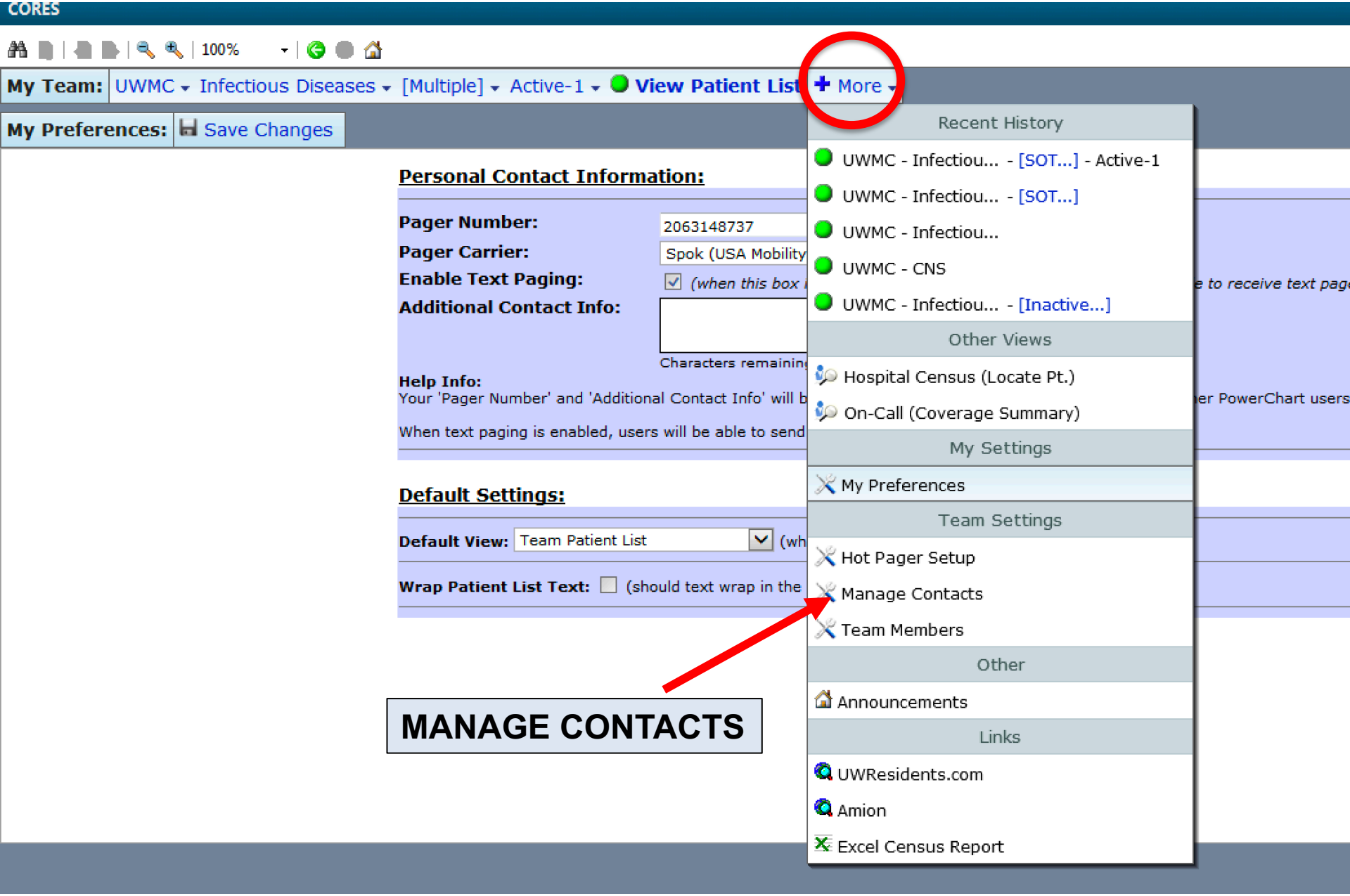
Wrap Patient List Text: ☐ (should text wrap in the patient list... will take up more space on the page)

A FEW GEMS



PROBLEM: when you print the cores lists for rounding, they include contact information for the team, BUT it doesn't update the rotating fellows' information.

SOLUTION: Update it on the first day of each rotation using "Manage Contacts," also found in CORES under the MORE tab (next slide).


CORES
100%
My Team: UWMC Infectious Diseases [Multiple] Active-1 View Patient List
More
My Preferences: Save Changes
Personal Contact Information:
Pager Number: 2063148737
Pager Carrier: Spok (USA Mobility
Enable Text Paging: (when this box
Additional Contact Info:
Characters remaining
Help Info:
Your 'Pager Number' and 'Additional Contact Info' will b
When text paging is enabled, users will be able to send
Default Settings:
Default View: Team Patient List (wh
Wrap Patient List Text: (should text wrap in the
to receive text page
er PowerChart users
Recent History
UWMC - Infectiou... - [SOT...] - Active-1
UWMC - Infectiou... - [SOT...]
UWMC - Infectiou...
UWMC - CNS
UWMC - Infectiou... - [Inactive...]
Other Views
Hospital Census (Locate Pt.)
On-Call (Coverage Summary)
My Settings
My Preferences
Team Settings
Hot Pager Setup
Manage Contacts
Team Members
Other
Announcements
Links
UWResidents.com
Amion
Excel Census Report
MANAGE CONTACTS

CORES

100%

My Team: UWMC | Infectious Diseases | [Multiple] | Active-1 | View Patient List | More

Manage Contacts: Save Changes

Now Managing Contacts for: Infectious Diseases - Active | Infectious Diseases - Active | Infectious Diseases - Active-1 | Infectious Diseases - Active-2 | Infectious Diseases - Inactive | Infectious Diseases - Inactive | Infectious Diseases - Inactive | Inf

Public Contacts:
This contact information will be published to the patient chart and will be used by other groups trying to contact your team about a patient. This is a good place to publish team hours, hot pagers or other information that other groups should know.

DON'T FORGET TO SAVE

Characters remaining: 2000

Private Contacts:
This contact information will be printed on your teams rounding reports and should be used for private team contacts intended for external circulation.

Attendings:
Rakita o:8-9455 p:540-2497 c:491-5430
Limaye p: 663-2366; c: 601-7639; o: 598-2649; h: 206-417-3914
John Scott: p: 986-1316, cell: 518-4080
Erika Lease 314-1069 cell 919 491 9591 office 81409
Cindy Fisher c: 410-336-6445, o: 8-9149
Fellows:
Liz Gilliams, p:205-540-2902, c: 443-812-6705
Michelle Sabo, P: c:

Room 221-7529 (S), 2213576 (E) fax 616-3892

Pharm:
Glenn Kuz, transplant pharm 598-5192
Rupali Jain p 5400656 o 84416
Doug Black 685-2714

Copiers 6NE-0138 5NE-5221 7NE-9712
7NE Fax: 206 598 7035

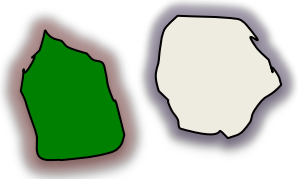
All med rooms 9710*

SOT ID number to make an appt: 84052
SOT ID coordinator: Kara Britten 80468, kbritten@uw.edu,
ID RN's (for ID f/u appt scheduling): Jeanne Wolf (8-7750, jeannet@uw.edu), Josette Pierre-Antoinne (8-8788, josettep@uw.edu)
Infx Control 84306:
SOT Fax: 206-598-5028
Tu 11-1pm 2271 Surg Pavillion
Fellows Room Fax 206-616-3892

CT surg res phone 88756
Cards Txplnt RN Carrie Ann Boom p: 540-8204
Nicola Kaye 680-2006
Amanda Brown (LVAD pts) 314-3173
Monica Morrison 85104, p986-0329

Page operator 86190
Micro lab: 86147
Blood Bench: 82180
Gen Lab: 86224
Virology: 6858037
HMC Retrovirus: 897-5210
HMC Microlab: 744-5858
SCCA Molecular: 685-6656
Respir. panel viral: 685-6040
UW Molecular: 85735
Path: 86400
Cocci titers (Davis): 530-752-1757
Palo alto toxo testing:
650-853-4828
Long distance Code: 3731190#
https://max.amc.washington.edu/max.asp
Susan Butler-Woo: 8-5449

MedCon 206-897-9898(for vmail); #6166432; code 234567; 1 to listen



I’VE POSTED THIS PDF ON MY WEBSITE:

eduke.org

THE CHIEFS KNOW HOW TO DO ALL OF THIS, SO FEEL FREE TO ASK.

FEEL FREE TO EMAIL OR CALL ANY OF US.