

# Epic PROVIDER

A Newsletter for Live Site Providers

**\*\*\*For RWJBH and Rutgers Providers Live on Epic\*\*\***

October 4, 2023



## Provider Top Stories

Attn: Physician Leaders and Practice

Managers! Share these key items in your  
meetings:



### Ambulatory and Inpatient Providers:

- Scanslated patient-friendly radiology reports in MyChart available, 10/5 (TOMORROW)!
- **Epic enhancements coming TOMORROW (10/5)!**
- **Android Users:** Haiku may crash unexpectedly when using integrated speech-to-text. Update your Haiku App today for resolution.

### Inpatient Providers:

- Planned Interface Downtime/Epic "Pause" on Sunday, October 8, 2:00 AM

- Exciting AM-PAC Updates!

## Ambulatory Providers:

- Helpful Tips for Outpatient Note Status

## Exciting Epic Enhancements

### Exciting Epic Enhancements!

- We are currently in a build freeze as we prepare for the Wave 5 Epic Go-Live on October 28, 2023.
- Epic Enhancements will be paused until the Wave 5 Command Center closes.
  - We have six last-minute Enhancements that will move to Production on Thursday, October 5, before the 10/6 Build Freeze.
- [Click here to learn more about these enhancements, including sneak peek screenshots in Epic.](#)
- [Click here to learn more about the Epic Enhancement Process and how to submit an Epic Enhancement request!](#)



- Thank you to the Epic Together Project Team for these amazing enhancements!
- We value you, Epic Together Team!

## Important Epic News

### Scanslated Patient-Friendly MyChart Radiology Reports Are Live Thursday, 10/5!

**Situation:** On Thursday, October 5, a third-party vendor, Scanslated, will enable RWJBH patients to view patient-friendly radiology reports through their RWJBH MyChart account.

**Background:** Patients receive radiology reports in their MyChart inbox. Often, patients aren't able to entirely understand the medical terminologies or digest what the report is saying and will often turn to "googling" words to find out what they mean. Additionally, when the physician calls to review the results, patients

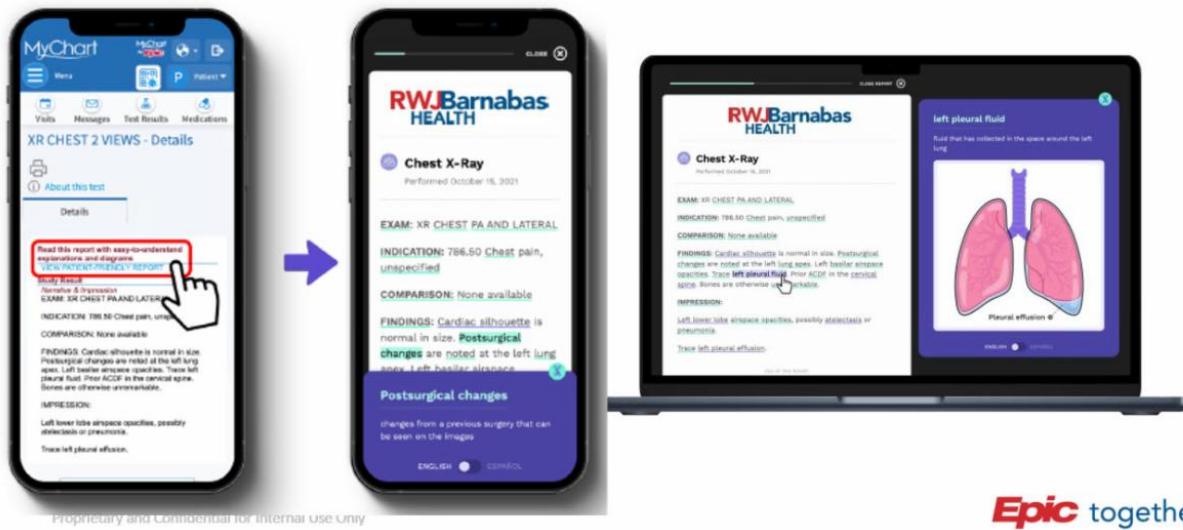
spend a lot of time asking questions about what various things in the report mean.

**Assessment:** Scanslated translates medical terminology into laypersons' language. These report definitions have been peer-reviewed. This allows a patient to better understand what the report is saying and will generally ask better (or fewer) questions about their prognosis with their physician. This improves both patient and provider experience.

**Recommendation:** Physicians should be aware that patients now have access to review their radiology results with a better explanation of what key medical terms mean along with diagrams that present the information in a more meaningful way, in both English and Spanish.

[Click here to launch "How to view your patient friendly report in RWJBH MyChart \(scanslated.com\)."](#)

## Radiology reports designed for patients.



**Attn: Android Users - Haiku May Crash Unexpectedly When Using Integrated Speech-to-Text**



## **Update Haiku *TODAY* to prevent issues.**

- Providers using integrated speech-to-text with Haiku via Android devices may experience an issue with Haiku, preventing you from completing workflows in Epic via your Android device.
- To avoid this issue, update Haiku to version 10.6.2 or later **NOW**.
- This updated 10.6.2 version should be available in the Google Play App Store **NOW!**

## **Inpatient Provider Focus**

### **Inpatient Focus: Activity Measure for Post-Acute Care (AM-PAC)® Updates**

To promote a culture of mobility, reduce deconditioning, reduce inappropriate resource use (appropriate PT/OT referrals) and to optimize post-acute discharge planning, RWJBH uses the AM-PAC® tool:

- **Activity Measure for Post-Acute Care (AM-PAC)® & Johns Hopkins Highest Level of Mobility (JHHLM)® Goals:**
  - Evidence based tools in Epic assess patient's mobility and ability to complete activities of daily living.
  - A generated score is intended to guide the provider in discharge planning for placement needs.
  - Recommends evidence-based goals to optimize mobility.

### **AM-PAC Impact:**

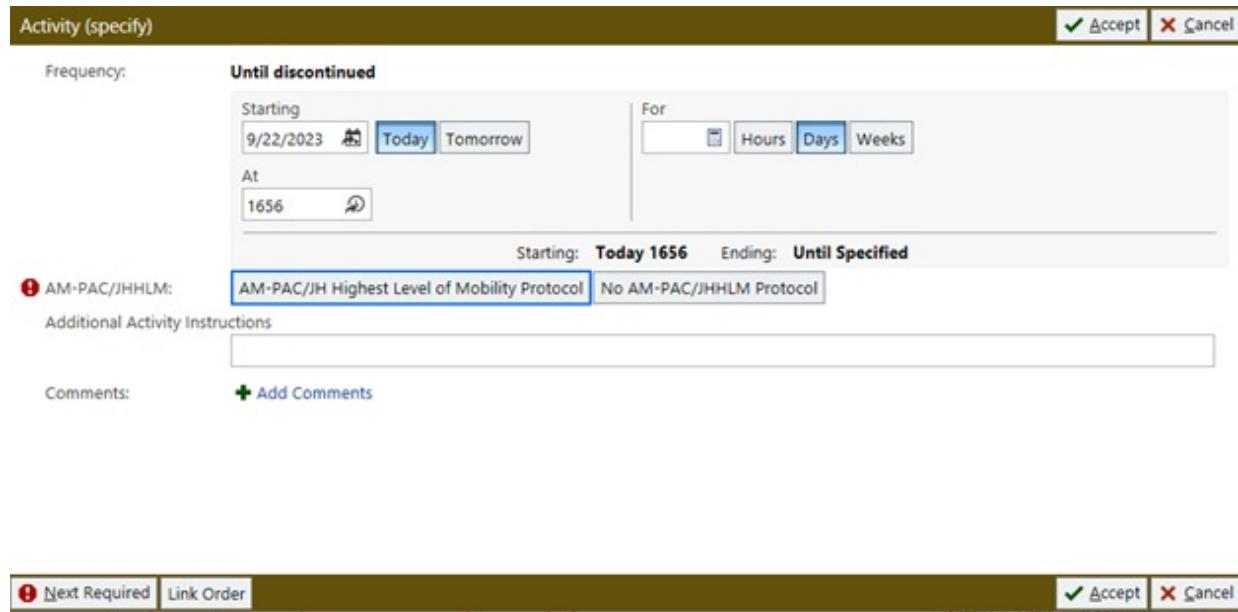
- **Wave 2 and Wave 3 Sites:** AM-PAC®/JHHLM® *Epic enhancements are coming* to your sites on October 28, 2023.
- **Wave 4 and Wave 5 Sites:** AM-PAC®/JHHLM® *will go live* at your sites on October 28, 2023.

### ***How will AMPAC impact inpatient providers?***

- The Activity order will require the provider to identify if the patient should be on the AM-PAC®/JHHLM® protocol.
- If no activity order is placed, a Best Practice Advisory (BPA) will remind the provider.

[Click here to review the AM-PAC®/JHHLM® Job Aid.](#)

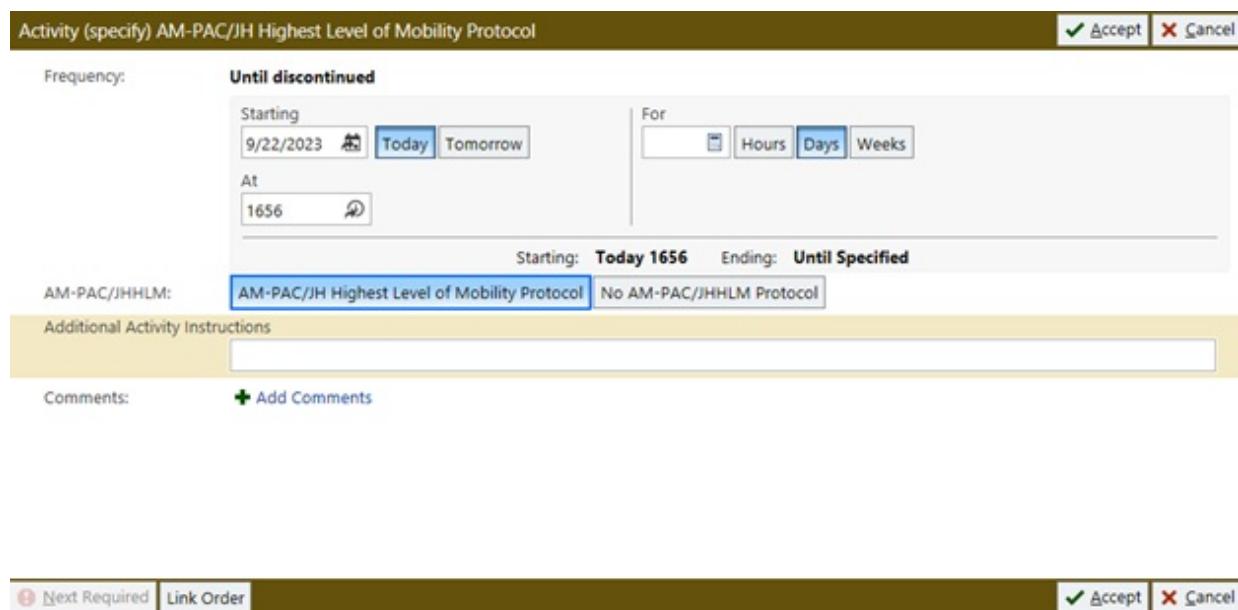
- Please view screenshots below for details of the newly updated AM-PAC®/JHHLM® Orders in Epic:



The screenshot shows the 'Activity (specify)' screen for creating an AM-PAC/JHHLM order. The top bar includes 'Accept' and 'Cancel' buttons. The form fields are as follows:

- Frequency:** Until discontinued
- Starting:** 9/22/2023 (dropdown menu showing Today, Tomorrow)
- At:** 1656 (dropdown menu showing a clock icon)
- For:** Days (selected in a dropdown menu)
- Starting:** Today 1656    **Ending:** Until Specified
- AM-PAC/JHHLM:** A dropdown menu with two options: 'AM-PAC/JH Highest Level of Mobility Protocol' (selected) and 'No AM-PAC/JHHLM Protocol'.
- Additional Activity Instructions:** An empty text input field.
- Comments:** A link to '+ Add Comments'.
- Buttons at the bottom:** 'Next Required' (disabled, shown in grey), 'Link Order', 'Accept', and 'Cancel'.

Pictured above is the AM-PAC®/JHHLM® Order with a selection needed.



The screenshot shows the 'Activity (specify) AM-PAC/JH Highest Level of Mobility Protocol' screen. The top bar includes 'Accept' and 'Cancel' buttons. The form fields are identical to the previous screenshot, but the 'AM-PAC/JHHLM' dropdown now shows only one option: 'AM-PAC/JH Highest Level of Mobility Protocol' (selected).

Pictured above is the AM-PAC®/JHHLM® Order with AM-PA/C®/JHHLM® selected.

Activity (specify) No AM-PAC/JHHLM Protocol ✓ Accept ✗ Cancel

Frequency:	<b>Until discontinued</b>		
Starting:	9/22/2023 <input style="width: 20px; height: 20px; border: 1px solid black; border-radius: 5px;" type="button" value="Today"/>	Today <input style="width: 20px; height: 20px; border: 1px solid black; border-radius: 5px;" type="button" value="Tomorrow"/>	For <input style="width: 20px; height: 20px; border: 1px solid black; border-radius: 5px;" type="button" value="Hours"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-radius: 5px;" type="button" value="Days"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-radius: 5px;" type="button" value="Weeks"/>
At:	1656 <input style="width: 20px; height: 20px; border: 1px solid black; border-radius: 5px;" type="button" value="Edit"/>		
Starting: <b>Today 1656</b> Ending: <b>Until Specified</b>			
AM-PAC/JHHLM:	<input style="width: 250px; border: 1px solid black; border-radius: 5px;" type="button" value="AM-PAC/JH Highest Level of Mobility Protocol"/> <input style="width: 250px; border: 1px solid black; border-radius: 5px;" type="button" value="No AM-PAC/JHHLM Protocol"/>		
Activity Level:	<input style="width: 150px; border: 1px solid black; border-radius: 5px;" type="button" value="No Restrictions"/> <input style="width: 150px; border: 1px solid black; border-radius: 5px;" type="button" value="Bed Rest With Exceptions"/> <input style="width: 150px; border: 1px solid black; border-radius: 5px;" type="button" value="Strict Bed Rest"/>		
Additional Activity Instructions <input style="width: 100%; height: 40px; border: 1px solid #ccc; border-radius: 5px;" type="text"/>			
Comments:	<input style="width: 200px; border: 1px solid black; border-radius: 5px; background-color: #f0e68c; color: black; font-weight: bold; padding: 2px 10px;" type="button" value="Add Comments"/>		

● Next Required Link Order ✓ Accept ✗ Cancel

Pictured above is the AM-PAC®/JHHLM® Order with No AM-PAC®/JHHLM® selected.

## Planned Interface Downtime/Epic "Pause" Sunday, October 8, 2:00

AM



- The Rhapsody and Openlink Interface Engines and the EMPI SmartIX will encounter a planned downtime on Sunday, October 8 starting at 2:00 AM.
  - **Rhapsody planned downtime** is estimated from 2:00 - 4:00 AM.
  - **Openlink and EMPI SmartIX planned downtime** is estimated from 2:00 AM - 3:00 AM.
- **Epic, CVIT, Lab, Rad and other clinical systems will be up and running.**
- **However, no registration messages/orders/results or charge information will pass to/from all ancillary systems** during this downtime.
  - **Please Note:** Brand new registration information on patients who arrive during the downtime will not have a Medical Record #, therefore downstream systems will not receive these patients during the downtime period.
    - MR#s will automatically process and reconcile when downtime concludes, therefore no actions are required by system users.
  - Order/Result messages will be placed in a hold status.

- Once the interface engines are back up, the held messages will be released and then pass to bring all systems current.
- *Please follow all documented downtime procedures (including STAT order downtime procedures) during the planned downtime.*

**IMPORTANT NOTE:** Epic Systems will encounter a corresponding 2-3 minute "Pause" during this same time (Sunday, October 8, 2:00 AM)!

- Epic users should anticipate this very short system pause - **No change in user workflow is anticipated due to the short duration.**

*Epic's Downtime Resources are available below; however, since this pause is only 2-3 minutes in duration, you won't need these resources!*

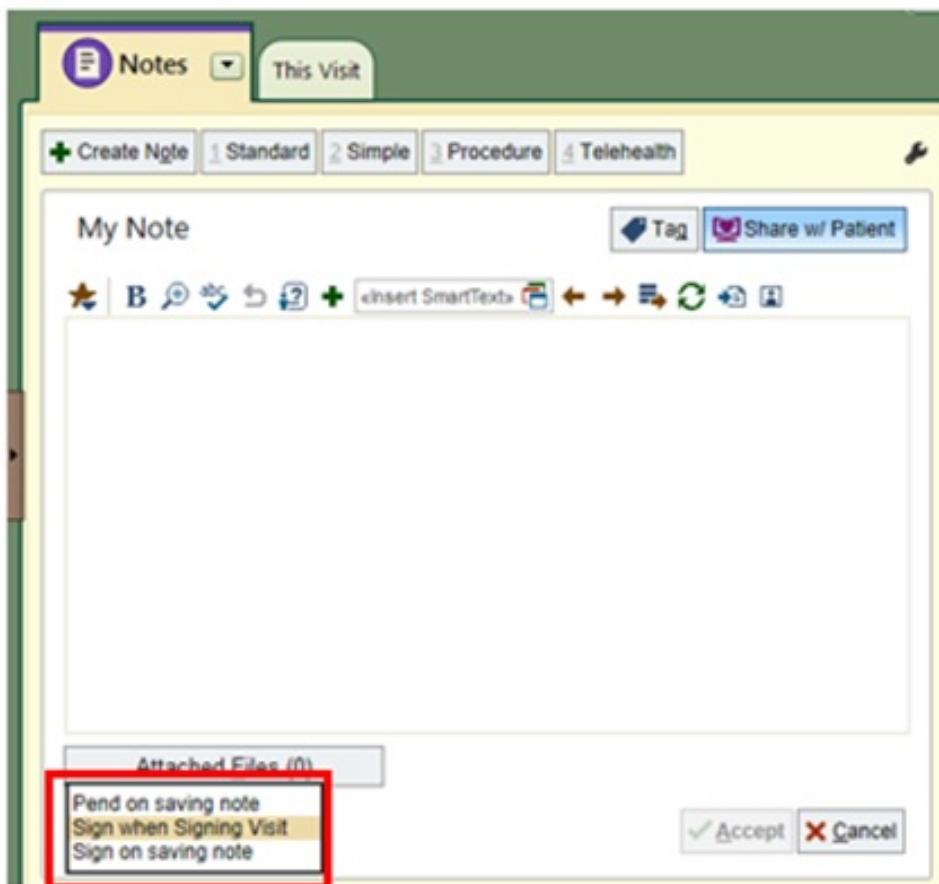
- [EpicTogether Downtime BCA resources \(if required\):](#)
- [epictogethernj.org/epic-downtime-bca/](http://epictogethernj.org/epic-downtime-bca/)



## Ambulatory Provider Focus

### **Ambulatory Focus: Helpful Tips on Outpatient Note Status**

- The note status is found at the bottom left of the sidebar where the note is being edited as indicated in the screenshot below.
- The note status is specific to actions for a progress note and is not related to orders.
- Visit and Encounter are two terms with the same meaning.
- There are 3 possible statuses that may be selected for Notes:



### ***It is important to understand that:***

- A **Visit** or **Encounter** may contain more than one **Note**.
- **Saving the note** corresponds to clicking on the “Accept” button at the lower right of the screen. This will also **sign** the note only if the “**Sign when saving note**” status is selected.
- **Signing the Note** refers to finalizing the note so it can no longer be edited.
- **Signing the Visit** means closing the entire encounter which will automatically sign any unsigned notes in the encounter.

### ***Pend on saving note (saving note = clicking the Accept button)***

Using this status means that the note is not finished, and clinical decisions should not be made based on its contents.

### ***Reasons the pended note status is used:***

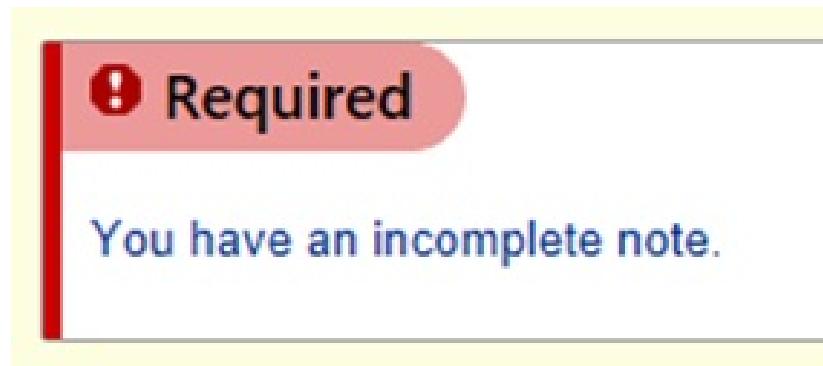
- The system automatically saves the note. This can happen if the system times out, or if the user closes the workspace or logs out with an incomplete (unsigned) note open in an encounter.
- The author is drafting the note and wants to put it on hold to finish later but doesn't want it to trigger actions like a BPA or route to MyChart or if orders that should be reflected in the note are not signed at the time the note is

written.

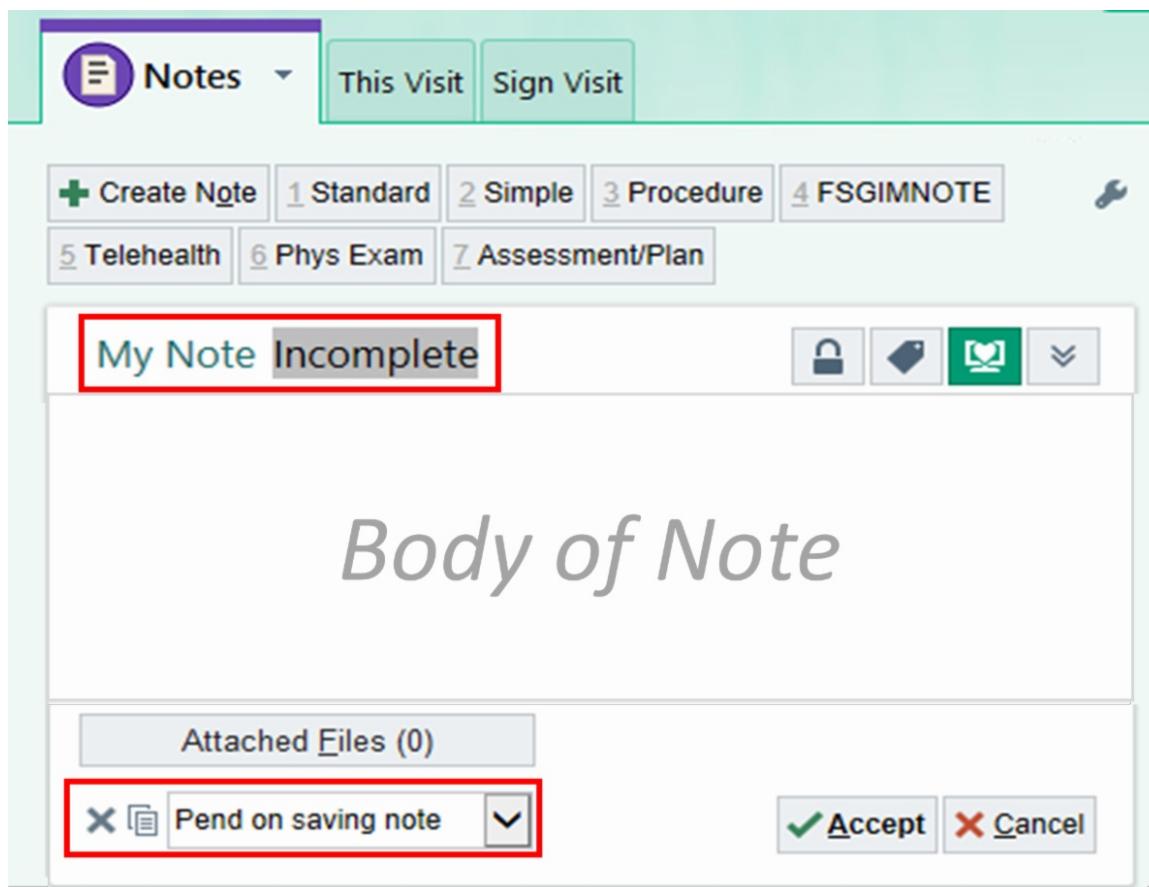
- An incomplete note can usually be viewed and edited only by its author.
- Users with appropriate security points can view incomplete notes. For example, attending providers can view incomplete notes composed by students or residents.

If the note is not signed, the signing provider will not be able to sign the visit.

***When signing an encounter, you may see this uninformative warning:***

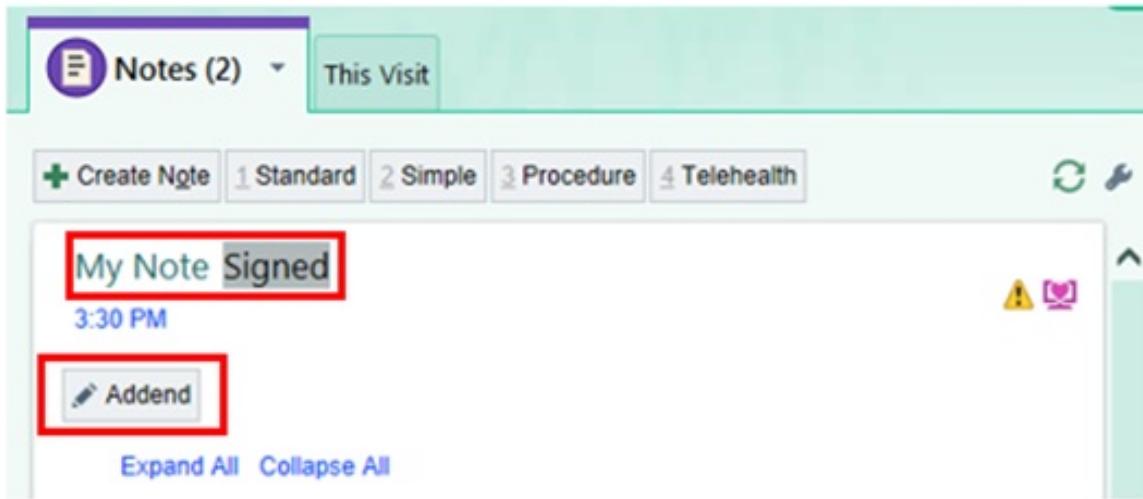


If you see this warning, when trying to sign a visit, a status of "**Pend on saving note**" might be the reason.



To sign the visit, change the note status to "Sign when Signing Visit" and click

the **Accept** button. Then you can sign the visit. After the visit is signed with status “Sign on saving Visit”, the note may not be edited again but may be addended by clicking on the **Addend** button to do so.



### Note Status Recommendation

- Do not change the default status from “Sign when Signing Visit” unless there is a specific need to do so.
- If the status is changed by the clinician, the changed status becomes the new default status for the current encounter until the provider changes the status again.

## Helpful Tips and Tricks

### Date and Time Shortcuts in Epic

- Use the Date and Time shortcuts below to efficiently update information in Epic.



### Date & Time Shortcuts in Hyperspace!

Time Shortcut	Example
N for Now	N is the time right now
T for Today	T-1 is yesterday, T+1 is tomorrow
W for Week	W-2 is 14 days ago, W+1 is 1 week in the future
M for Month	M-1 is this day last month
MB for Month Begin	MB-1 is the first day of last month
ME for Month End	ME-1 is the last day of last month
Y for Year	Y-40 is this day forty years ago

## Good Humor

Heartfelt thanks to **Dr. Frank Sonnenberg** for this week's Good Humor!



## Epic: How to Get Help

### Review the **Epic How to Get Help Flyer!**



- The "Epic How to Get Help" Flyer includes instructions to:
  - Open a Help Desk Ticket
  - Check The Status of an Open Ticket
  - Reopen a closed ticket
  - Enter an Epic Enhancement Request
- [Click here to view the Epic: How to Get Help flyer!](#)

## Live Site Epic Provider Print Edition!

- [Click here for a printable PDF of this week's Live Site Epic Provider Newsletter.](#)



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Our cell numbers are available below.  
Please call with any questions or concerns.

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