

EPIC NON-PROVIDER ENHANCEMENTS

January 16, 2024 Meeting

Ambulatory - Approved for Production: Move on 1/23/2024

Item Name	Description	ER #
Add Patient Supplied Field to Injection Note	Update the RWJBH Behavioral Health (BH) Injection Note with a smartlink that pulls in a comment from the MAR administration.	EPREQ0016961
Pelvic Health Intake Questionnaire	Add questionnaire to Pelvic Health intake symptoms data.	EPREQ0016634
Lymphedema Volume Calculation in Inpatient (IP) Setting	Allow IP therapists to access Lymphedema volume calculation documentation tools.	EPREQ0017640
STarT Back Screening Test for Physical Therapy (PT)	Add STarT Back Screening tool for Outpatient Physical Therapy.	EPREQ0015301

Acute - Approved for Production: Move on 1/23/2024

Item Name	Description	ER #
Room Service Assessment	Add Room Service section in Admission navigator for CBMC.	EPREQ0017484
Offshore HURC Access to Auth/Cert Link	Allow Offshore HURC access to Auth/Cert link in Payor Comm activity.	EPREQ0013450
Spiritual Care Note Service	Restrict non-applicable note services for selection.	EPREQ0014701
Spiritual Care Flowsheet	Spiritual Care Nursing Referral section now contains Cultural Requests and Spiritual Requests During Hospitalization.	EPREQ0014699
Update Feeding Tube LDA's	Add row to assessment for documenting free water bolus.	EPREQ0007597
Update to Neuro Checks Task	Update the task verbiage to clarify the workflow.	EPREQ0012073
Discharge Plan Status	IP Case Management: Discharge Plan Status flowsheet row and Patient List Column	EPREQ0016191
Update Medication Administration Rate of OG Tube/Orogastric	Add route of orogastric to meds, replace OG tube, and delete that route.	EPREQ0007574
Update Behavioral Health (BH) Nutrition Risk Assessment and BH Medical General Health Screening	Update the BH Nutrition Risk Assessment and BH Medical General Screening.	EPREQ0011625
Update to Suicide Risk Best Practice Advisory (BPA)	Quality Users will no longer see the Suicide Risk BPA popup when reviewing charts.	EPREQ0016408

Other (Ancillary, Access/Revenue, Digital, Data & Analytics) - Approved for Production: **Move on 1/23/2024**

Item Name	Description	ER #
None		

Ambulatory - PROVIDER

Approved for Production: Move on 1/23/2024

Item Name	Description	ER #
Physician Access to Edit Multi Provider Schedule Appointment Notes	Physicians and Residents request access to edit appointment/case notes.	EPREQ0014815
Eric B Chandler SmartPhrases	Note Template standardization Request for Eric B Chandler	EPREQ0013925
Lab Letter Templates for MyChart	Create letter for labs prior to appointment to be sent via MyChart.	EPREQ0010211

Acute - PROVIDER

Approved for Production: Move on 1/23/2024

Item Name	Description	ER #
Panel Availability	Making many standard order set panels available outside of the sets.	EPREQ0017120
Non-Emergent Involuntary Medication Note Template	Update Non-Emergent Involuntary Medication Administration Note Template.	EPREQ0017830
Nasogastric Tube (NGT) Placement Panel	Add new Panel including chest x-ray for verification.	EPREQ0017232

Other (Ancillary, Access/Revenue, Digital, Data & Analytics) - PROVIDER Approved for Production: **Move on 1/23/2024**

Item Name	Description	ER #
None		

AMBULATORY

Add Patient Supplied Field to Injection Note

EPREQ0016961

Add patient supplied field to RWJBH (Behavioral Health) BH Injection Note.

My Note
Injection Note

Sensitive Tag Share w/ Patient Details

Injection Note

Patient Name: Chip Zakaras
MRN#: 30102445
D.O.B.: 6/10/2005
Date: 01/11/24
Allergies:
Patient has no allergy information on record.
Reason for Visit:
Chief Complaint
Patient presents with
• Anxiety

Vitals:
There were no vitals taken for this visit.

Injection given by: Nurse Psychiatry, RN

Administrations This Visit

Admin Date	Action	Dose	Route	Site	Documented By
01/11/2024 07:59	Given	300 mg	intramuscular	Left Anterior Thigh	Psychiatry, Nurse, RN

Patient Supplied?: Yes
Comments: patient supplied

Response to Treatment:

Medication Education:

Pt. was instructed to re-contact the clinic with any questions and / or concerns prior to his / her next scheduled appointment.

Pelvic Health Intake Questionnaire

Application: Rehab
Owner: Silverio Derikito

EPREQ0016634

Affected users: PT OP
(Pelvic Health Navigator
Only)

Request: Add Pelvic
Health Intake
Questionnaire and add
this to PT EVALUATION
PELVIC FLOOR visit
type.

Patient Facing

Pelvic Health Symptom Questionnaire
Attached to a message from Silverio D received 1/10/2024
Please indicate your appropriate symptom, bladder habits, bowel habits and fluid intake

Symptom Questions

Do you have Bladder Leakage?

Yes No

Protection worn
Select all that apply.

None Panty Shield Minipads Maxipads Diapers Other (comment)

per day (diapers)

Leakage cause
Select all that apply.

Vigorous activities Coughing/sneezing/laughing Changing positions Walking to toilet

When experiencing strong urge to urinate Intercourse or sexual activity Constant leakage without cause

After emptying bladder Urgency Other (comment)

Rate severity of the problem (0-10)

0/10 1/10 2/10 3/10 4/10 5/10 6/10 7/10 8/10 9/10 10/10

What are you not able to do because of your current problem?
Select all that apply.

Housework Grocery shopping Gardening/yard work Work/volunteer activities Lifting Sports

Community activities such as banking, church/worship, appointments, MD visits Other (comment)

Pelvic Health Intake Questionnaire, continued

Application: Rehab
Owner: Silverio Derikito

EPREQ0016634

Affected users: PT OP
(Pelvic Health Navigator
Only)

Request: Add Pelvic
Health Intake
Questionnaire and add
this to PT EVALUATION
PELVIC FLOOR visit
type.

Patient Facing

Bladder Habit Questions

of voids per day

of voids per night

Toileting Position

Do you empty bladder frequently before you have the urge to urinate?

Able to stop urine flow on the toilet?

Do you strain to urinate?

Do you have a sense of urgency to urinate?

Do you have a slow or hesitant stream?

Do you have difficulty initiating urine stream?

Do you have pain with urination?

Do you have the feeling your bladder is still full after urinating?

How long can you delay the need to urinate (minutes)?

How long can you delay the need to urinate (hours)?

Have you been instructed in Pelvic Floor Muscle strengthening in the past?

Did you perform the exercises at least 30 days?

Pelvic Health Intake Questionnaire, continued

Application: Rehab
Owner: Silverio Derikito

EPREQ0016634








Affected users: PT OP
(Pelvic Health Navigator
Only)

Request: Add Pelvic
Health Intake
Questionnaire and add
this to PT EVALUATION
PELVIC FLOOR visit
type.

Patient Facing

Stool Habits

Please indicate the stool type that applies regarding your bowel movements on the average

Type 1 	Type 2 	Type 3 
Type 4 	Type 5 	Type 6 
Type 7 		

of bowel movements per day

of bowel movements per week

Do you currently strain when you defecate?
 Yes No

Do you ignore the urge to defecate?
 Yes No

Do you have fecal Leakage?
 Yes No

Difficulty Emptying Bowels?
 Yes No

Fluid Intake

How many glasses of fluid do you drink per day?

How many of these glasses are water only?

How many caffeinated beverages do you drink per day?

How many caffeinated beverages do you drink per week?

Do you drink any alcoholic beverages?
 Yes No

How many cups of coffee/tea do you drink per day?

How many cups of coffee/tea do you drink per week?

Allow Lymphedema Volume Calculation in the Inpatient (IP) Space

Application: Rehab
Owner: Silverio Derikito

EPREQ0017640

Affected users: PT IP

Request: Need Lymphedema Volume calculation in the IP Space.

- Sections added
- Limb Vol UE
- Limb Vol LE
- Other Lymphedema assessments



The screenshot displays the 'Limb Vol UE' assessment form in the Epic application. The form is titled 'Limb Vol UE' and includes a 'Time taken' field set to 1/8/2024 1549. The 'Upper Extremity' section is active, showing 'Involved Arm' set to 'Right' and 'Dominant Arm' set to 'Right'. The 'Segment Length (cm)' is 4, and the 'Measured Arm Length (cm)' is 15. The 'Patient Position' is set to 'Supine'. The 'Measurement comments for session' table shows data for segments from 0 cm to 12 cm, with 'Right Volume (mL)' and 'Left Volume (mL)' columns. The 'Right Total Volume (mL)' is 23.88 and the 'Left Total Volume (mL)' is 23.88. A red box highlights the 'Limb Vol UE' section in the left-hand navigation menu.

Add STarT Back Screening Tool in the Outpatient (OP) Space

Application: Rehab
Owner: Silverio Derikito

EPREQ0015301

Affected users: PT OP

Request: Would like to have the STarT Back Screening Tool and we use it very often.

Outcome Measures

The STarT Back Screening Tool

Responsible Create Note Show Row Info Show Last Filed Value Show Details Show All Choices

The STarT Back Screening Tool

1. My back pain has spread down my leg(s) at some time in the last 2 weeks
0=Disagree taken today
0=Disagree 1=Agree
2. I have had pain in the shoulder or neck at some time in the last 2 weeks
0=Disagree taken today
0=Disagree 1=Agree
3. I have only walked short distances because of my back pain
0=Disagree taken today
0=Disagree 1=Agree
4. In the last 2 weeks, I have dressed more slowly than usual because of back pain
1=Agree taken today
0=Disagree 1=Agree
5. It's not really safe for a person with a condition like mine to be physically active
1=Agree taken today
0=Disagree 1=Agree
6. Worrying thoughts have been going through my mind a lot of the time
0=Disagree taken today
0=Disagree 1=Agree
7. I feel that my back pain is terrible and it's never going to get any better
1=Agree taken today
0=Disagree 1=Agree
8. In general I have not enjoyed all the things I used to enjoy
1=Agree taken today
0=Disagree 1=Agree
9. Overall, how bothersome has your back pain in the last 2 weeks?
1=Very much taken today
0-Not at all 0-Slightly 0-Moderately 1-Very much 1-Extremely

Outcome Measures

The STarT Back Screening Tool (Total Score)
5 taken today
5

Total Score: All 9

The STarT Back Screening Tool (Sub Score Q5-9)
4 taken today
4

Sub Score (Q5-9)

STarT Back Tool Scoring System (Interpretation)
High Risk taken today
High Risk

The STarT Back Tool Scoring System

```
graph TD
    TotalScore[Total score] --> ThreeOrLess[3 or less]
    TotalScore --> FourOrMore[4 or more]
    ThreeOrLess --> LowRisk[Low risk]
    FourOrMore --> SubScoreQ59[Sub score Q5-9]
    SubScoreQ59 --> ThreeOrLessSub[3 or less]
    SubScoreQ59 --> FourOrMoreSub[4 or more]
    ThreeOrLessSub --> MediumRisk[Medium risk]
    FourOrMoreSub --> HighRisk[High risk]
```

Restore Close Cancel Previous Next

ACUTE

Offshore HURC Access to Auth/Cert Link

Application: Clinical Case Management

Owner: Leslie Fernandez

EPREQ0013450

Allow Offshore HURC access to Auth/Cert link in Payor Comm activity.

- Approved by Epic Legal on 1/5/24.

This screenshot shows the Epic Payor Comm activity for patient Twentyninea, Adtrn. The 'Auth/Cert' section is active, displaying 'Auth/Cert Information' with a link to 'Create auth/cert for hospital account 1011000018834'. A red arrow points to this link. A 'Referral Entry' dialog box is open, displaying the error message: 'You do not have security to create a referral in this department.' The 'Auth/Cert' link in the top navigation bar is not highlighted.

Before

This screenshot shows the same Epic Payor Comm activity after the change. The 'Auth/Cert' section is still active, but the 'Referral Entry' dialog box is no longer present. A red arrow points to the 'Auth/Cert 27958' link in the top navigation bar, which is now highlighted. Below the 'Auth/Cert Information' section, a new button labeled 'Launch Auth/Cert activity' is visible.

After

[Return to Agenda](#)

Epic together.

Room Service Assessment

Application: ClinDoc
Owner: Leslie Fernandez

EPREQ0017484

Add Room Service section in Admission navigator for CBMC.

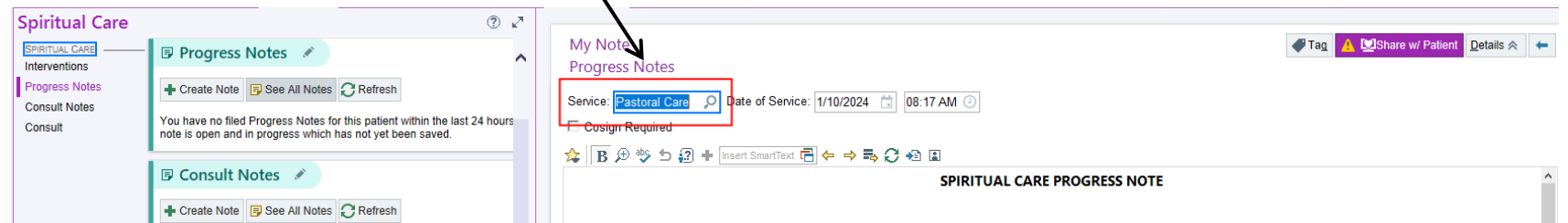
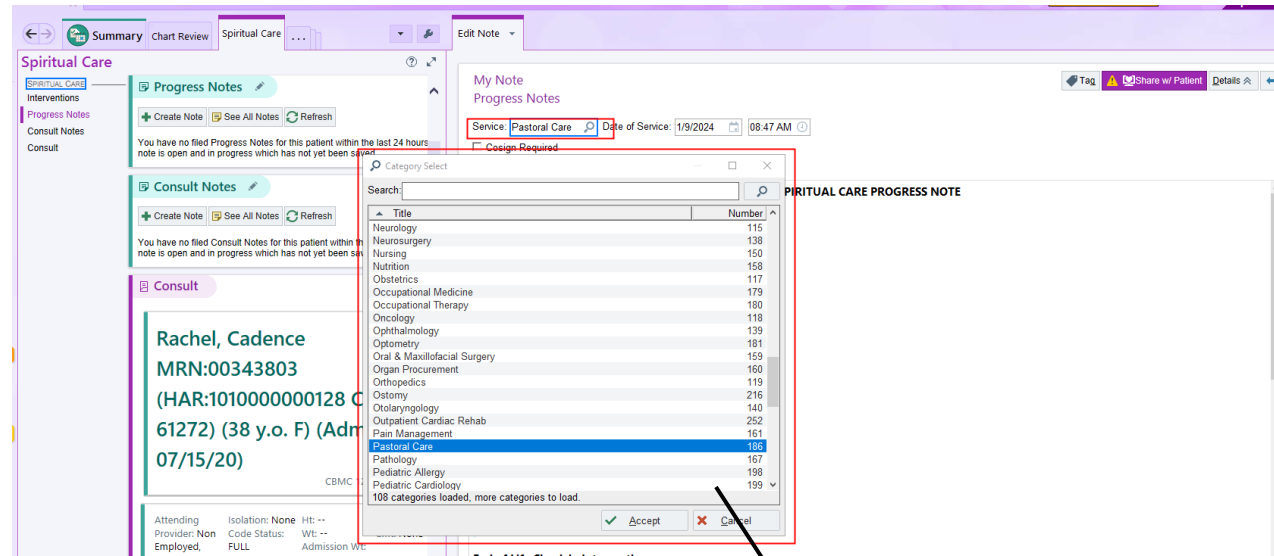
The screenshot displays the Epic Hyperspace interface for a patient named 'Testing Burn'. The patient's legal name is 'Testing Burn', male, 39 years old, born 2/18/1984, with MRN 40000038 and room B2102-A. The patient is currently in the 'Admission' state. A red arrow points to the 'Room Service' option in the 'ASSESSMENTS' section of the left-hand 'Navigators' pane. A dialog box titled 'Room Service?' is open, asking 'Can patient participate in room service?'. The dialog has three buttons: 'Room Service Appropriate', 'Room Service Appropriate with Assist', and 'Not Appropriate for Room Service'. Below the dialog, there are sections for 'Activities of Daily Living Screening' and 'Four Eyes'.

Spiritual Care Note Service

Application: ClinDoc
Owner: Kamla Ramlakhan

EPREQ0014701

Restrict non-applicable note service selection in Spiritual Care Progress Notes and Consult Notes. Pastoral Care is now the only selection.



Spiritual Care Flowsheet

Application: ClinDoc
Owner: Kamla Ramlakhan

EPREQ0014699

Within the Spiritual Care Interventions flowsheet template, the nursing referral section now displays additional flowsheet rows that nursing documents as part of their admission assessment for values and beliefs. The Cultural Requests and Spiritual Requests During Hospitalization have been added to this group.

Epic Hyperspace - CBMC SPIRITUAL CARE - Proof of Concept Environment (POC) - SPIRITUAL I.

Summary | Chart Review | Flowsheets | Education | Care Plan | Religion | Spiritual Care | FYI

Flowsheets

File | Add Rows | LDA Avatar | Add Col | Insert Col | Last Filed | Reg Doc | Graph | Go to Date | Resp

Spiritual Care Interv... | IV Assessment | Oncology Assessment | Toxicity Assess | Fall Risk | I/O | Home Infusion | Engineer

Search (Alt+...) | Accordion | Expanded | View All | 1m 5m 10m 15

Admission (Current...)
1/10/2024
0800

Interpreter Information (If Applicable)

Information interpreted	
Interpreter provider service	
Interpreter name and ID number	

Spiritual Care Nursing Referral

Cultural Requests During Hospitalization	
Spiritual Requests During Hospitalization	
Spiritual Care Consult Needed	
Advance Directive	

Clinical Encounter Type

Visited With	
Routine Visit	
Visit Type	
Referral From	
Referral To	
Continue Visiting	
Time Spent	

Add Free Water Bolus to Feeding Tube Assessment

Application: ClinDoc
Owner: Rafael Portales

EPREQ0007597

Add ability to document free water bolus separately from the tube feeding in the feeding tube assessment and Intake/Output (I/O).

Future

Tube Feeding Flush Amount (mL)	Residual Amount (mL)
<input type="text"/>	<input type="text"/>
Intake (mL)	Free Water Bolus (mL)
<input type="text"/>	<input type="text" value="100"/>
Output (mL)	
<input type="text"/>	

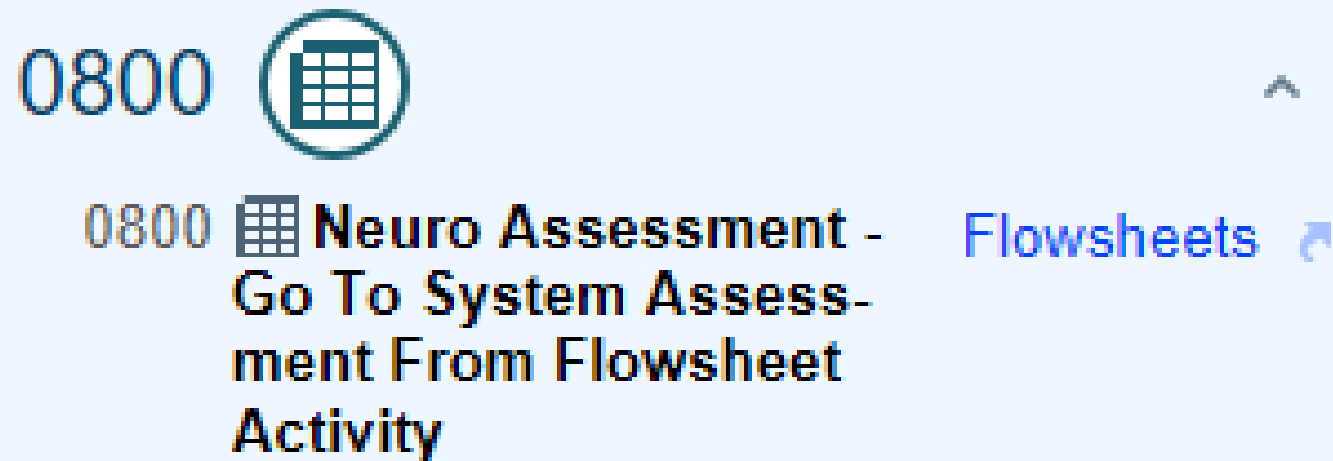
Feeding Tube Left nare		
Feeding Tube Properties	Show all properties	
Placement Verification		
Surrounding Skin		
Tube Feeding Frequency		
Tube Feeding		
Tube Feeding Strength		
Tube Feeding Method		
Tube Feeding Bag Changed		
Feeding Tube Flushed With		
Tube Feeding Flush Amount (mL)		
Residual Amount (mL)		
Intake (mL)		
Free Water Bolus (mL)		100
Output (mL)		


Update to Neuro Checks Task


Application: ClinDoc
Owner: Rafael Portales

EPREQ0012073

Unable to have the task bring the nurse directly to the template due to the complexity and high maintenance requirements. Instead, change the verbiage of the task to direct the nurse to the system assessment flowsheet.



0800  ^

0800  **Neuro Assessment - Go To System Assessment From Flowsheet Activity** Flowsheets ↗

IP Case Management: Discharge Plan Status

Application: ClinDoc/CCM
Owner: Melissa Nguyen

EPREQ0016191

A new "Discharge Plan Status" row has been added to the CM Discharge Assessment flowsheet.

The "CM Discharge Plan Status" column can be added to Patient Lists to display the most recently documented value.

*Approved by CM Workgroup
 1/10

Flowsheets

File Add Rows LDA Avatar Add Col Insert Col Last Filed Reg Doc Graph Go to

CM Discharge Assessment Vitals Basic Assessment Daily Cares/Safety I/O Screenings Adult/OB Interv

Accordion Expanded View All 1m 5m 10m 15m 30m 1h 2h 4h 8h

Admission (Current) from 2/24/2023 in NBR 2E OR
 12/19/2023 1/5/2024
 Search (Alt+Comma) 1235 1300

Discharge Plan

Actual Discharge Plan
 Alternative Discharge Plan
 Barriers to Discharge
Discharge Plan Status
 Discharge Planning Assessment Completed

Awaiting discharge recommendations
 Education/list provided
 Choices received
 Referrals sent
 Pending authorization
 Bed Available
 Services Confirmed
 Other (Comment)

Next Row

My Patients 19 Patients

Patient	Admission Info	Patient Class	CM Discharge Plan Status
Beck, Joseph 62 y.o. / M	E201/E201-A NBR NIC Omani type s...	Inpatient	Awaiting discharge recommendations
Cherry, Katie 20 y.o. / F	37/37 SDS15 None	Emerg...	Bed Available; Services Confirmed

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Epic together.

Update Medication Administration Rate of OG Tube/Orogastric

Application: Willow IP
Owner: Sue Faust

EPREQ0007574

Medications are not able to be ordered via correct route, requesting to add OG as orderable enteral routes in Epic.

While making these changes, I realized that there were duplicated routes in Epic, both OG Tube & orogastric.

Orogastric was added to the meds where it was requested & OG tube was replaced & deleted.

Route:

Frequency:

Title	Number
g-tube	86
j-tube	89
nasogastric tube	35
OG tube	119
oral	15

Route:

Frequency:

Title	Number
g-tube	86
j-tube	89
nasogastric tube	35
nasojejunal tube	118
oral	15
orogastric	128

Meds that orogastric route was added to:	
Acetaminophen	Levetiracetam
Amoxicillin	Levothyroxine (tab)
Caffeine citrate	Medium chain triglycerides
Calcitriol	Morphine sulfate 0.4 mg/mL
Calcium carbonate	Phenobarbital
Chlorothiazide	Poly vi sol
Cholecalciferol	Poly vi sol with iron
Dexamethasone	Potassium chloride
Famotidine	Propranolol
Furosemide	Sodium chloride
Hydrochlorothiazide	Sodium phosphate
Hydrocortisone (tab)	Spironolactone
Lansoprazole	

Update Behavioral Health (BH) Nutrition Assessment and BH Medical General Health Screening

Application: Behavioral Health
Owner: Jen Berry

EPREQ0011625

Update BH Nutrition Risk Assessment with an Eating Disorder Assessment and BH Medical General Health Screening to include additional questions around dental health/visits to align with their current workflow.

These items are documented by the nurse/social workers and is available to the providers.

The screenshot displays two overlapping forms in the Epic EHR system. The top form is titled "Medical General Health Screening" and contains the following elements:

- Buttons: Responsible, Create Note, Show Row Info, Show Last Filed Value, Show Details, Show All Choices.
- Section: Medical General Health Screening
- Question: "Is the Client Under the Care of a Physician for a Medical Problem?" with Yes/No radio buttons.
- Text input fields: "Current Physician's Name/Phone Number" and "Current Pharmacy Name/Phone Number".
- Question: "Has Client Completed a Health Screen & Seen a PCP in the Last 12 months?" with Yes/No radio buttons.
- Section: "Had a dental visit in the last 12 months?" with Yes/No radio buttons.
- Text: "If yes, please provide information on the referral provided".
- Question: "Have any dental problems?" with Yes/No radio buttons.
- Buttons: Restore, Close, Cancel.

The bottom form is titled "Nutritional Risk" and contains the following elements:

- Buttons: Responsible, Create Note, Show Row Info, Show Last Filed Value, Show Details, Show All Choices.
- Section: Nutrition Screen
- Question: "Do you have any food allergies?" with Yes/No radio buttons.
- Text: "If 'Yes' document in Allergies section".
- Question: "Do you have any difficulty swallowing?" with Yes/No radio buttons.
- Text: "Recent appetite change?" with Yes/No radio buttons.
- Text: "Have you either gain or loss (10 pounds in the last 3 months)" with Yes/No radio buttons.
- Section: Eating Disorder Behavior Assessment
- Text: "Primary Eating Disorder Behavior(s)"
- List of checkboxes: Binging, Restricting, Laxative, Purging, Diuretic, Over exercise, Diet pills, Other.
- Buttons: Restore, Close, Cancel.

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[Return to Agenda](#)
Epic together.

Update to Suicide Risk Best Practice Advisory (BPA)

Application: ClinDoc
Owner: Daniel Garofalo

EPREQ0016408

Users that are currently logged in to Quality Departments will no longer see the Suicide Risk BPA pop up while reviewing charts.

Critical (1) ⬆

!! Screening indicates patient is HIGH risk for suicide

Screening indicates patient is high risk for suicide:

- Place patient on 1:1 until Physician/LIP is consulted.
- Notify the Physician/LIP that the patient is high risk for suicide .
- Remove belongings from patient and place patient in hospital provided attire.
- Perform room & environmental checks.

! Acknowledge Reason _____

Safety maintained / will notify Physicia...

✓ Accept

AMBULATORY - PROVIDER



Physician Access to Edit Multi Provider Schedule Appointment Notes

Application: Ambulatory
Owner: Jose Aponte-
Lopez/Amy Byers

CMT: T100-77298

Workfront Reference
Number: N/A

Enhancement Number:
EPREQ0014815

Requestor: Pavan Bang,
MD.

Background: Request for Physicians and Residents access to edit MPS appointment/case notes from the schedule column. Currently, MAs, LPNs, RNs are the only ones with access to edit the comment notes.

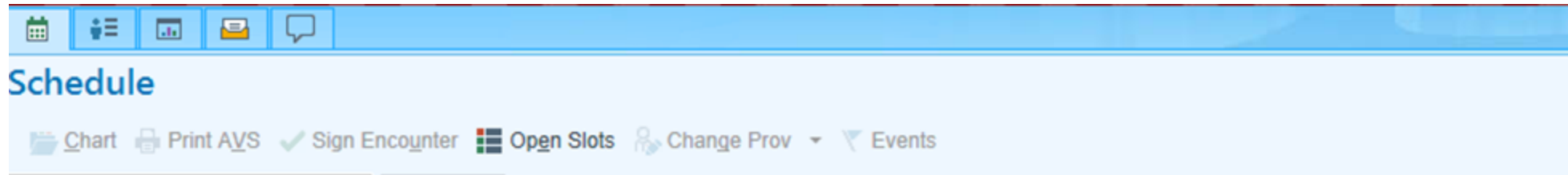
Impact: Ambulatory Physicians and Residents

Solution: Add Item "AMB_IT_EDIT_APPTNOTES_SA" to Menu (E2U) "MODEL_AMB_MT_MULTI_PROV_SCHED_MD"

Physician Access to Edit Multi Provider Schedule Appointment Notes, cont.

Application: Ambulatory
Owner: Jose Aponte-Lopez

❑ Before (Current State)



❑ After (Future State)



Eric B Chandler SmartPhrases

Application: Ambulatory
Owner: Jose Aponte-
Lopez/Amy Byers

CMT: T100-76263

Workfront Reference
Number:

N/A

Enhancement Number:

EPREQ0013925

Requestor:

Steven Levin, MD.

Background: To promote consistency and comprehensiveness in data gathering for residents and medical students, Dr. Levin requests creation of system level Smart Phrases for Eric B Chandler Office Visit documentation.

Impact: Physicians, Residents and Medical Students at Eric B Chandler.

Solution: Create list of Smart Phrases as systemwide and make them only accessible when logged into Eric B Chandler departments.

EBCHC SmartPhrases/SmartTexts

Application: Ambulatory
Owner: Jose Aponte-Lopez

□ After (Future State)

SmartPhrase

1. EBCHCVISITADULT [105746]
2. EBCHCLABBMP [105747]
3. EBCHCLABCBC [105748]
4. EBCHCLABHGBA1C [105749]
5. EBCHCLABHIV [105750]
6. EBCHCLABIRON [105751]
7. EBCHCLABLIPIDS [105752]
8. EBCHCLABLIVER [105753]
9. EBCHCLABMICRAL [105754]
10. EBCHCLABTHYROID [105755]
11. EBCHCLABS [105756]
12. EBCHCAVSGAD [105757]
13. EBCHCVISITPHONE [105758]
14. EBCHCVISITVIDEO [105759]

SmartText

1. EBCHCLABBMP [25709]
2. EBCHCLABCBC [25710]
3. EBCHCLABHGBA1C [25711]
4. EBCHCLABHIV [25712]
5. EBCHCLABIRON [25713]
6. EBCHCLABLIPIDS [25714]
7. EBCHCLABLIVER [25715]
8. EBCHCLABMICRAL [25716]
9. EBCHCLABTHYROID [25717]
10. EBCHCVISITPHONE [25721]
11. EBCHCVISITVIDEO [25723]
12. EBCHCAVSGAD [25741]

Notes (2) This Visit

+ Create Note 1 Standard 2 Bleeding Disorder 3 Hem General 4 Procedure 5 Telehealth

My Note Tag Share w/ Patient

HPI ROS Physical Exam

{Visit type:34901::"This visit was conducted in person."}
{Preferred Language (Optional):34300::"Skin Biopsy Protocol"}
{Mode of Interpretation (Optional):34301}

Subjective

Patient ID: Abby Test is a 57 y.o. female.
DOB: 6/6/1966
No LMP recorded.
No chief complaint on file.

HPI

Past Medical History:

Diagnosis	Date
• Anemia	
• History of creation of ostomy (CMS/HCC)	2016
• Free text	
• History of transfusion	
• Hypertension	

Past Surgical History:

Attached Files (0)

Sign when Signing Visit

Accept Cancel

New Letter to be Sent Via MyChart

Application: Ambulatory
Owner: Stephanie Krusas/Amy Byers

**Enhancement
Number:**

EPREQ0010211

Requestor: Amanda Guerrero, Manager

Date Reviewed:
12/3/23

Existing process? Yes

Build Required? Yes

Background: CINJ GYN ONC would like to have a letter created to be sent out with bulk communication via MyChart for blood work.

Impact: All ambulatory clinicians.

Solution: Create letter for CINJ.

New Letter to be Sent Via MyChart, continued

Application: Ambulatory
Owner: Stephanie Krusas



Please get your blood work and labs done one to two days before your treatment appointment to help us reduce wait times.

Blood work and labs can be completed at one of the following locations:

RWJ Laboratory Services – 866-476-2522

(No appointment necessary at any location)



RWJUH New Brunswick locations:

Rutgers Cancer Institute, 195 Little Albany St. (1st Floor) Monday- Friday
7:30am-4:30pm

*Valet Parking available

Clinical Academic Building, 125 Paterson St. (3rd Floor) Monday-Friday
8am-5pm

*Metered street parking/deck parking/valet available

Monument Square, 317 George St. (Suite 101) Monday-Friday
7am-5pm

*Public Parking available

Plum Street, 10 Plum Street (3rd Floor) Monday- Friday
8am-12pm

*Free parking during testing

East Tower, 1 Robert Wood Johnson Place East Tower (9th Floor) Monday-Friday
7:30am-4pm

Other locations (free parking):

Dayton

12 Stults Road (Suite 122) Monday-Friday 8am-4pm

East Brunswick

557 Cranbury Road (Suite 22B) Monday- Friday 8am-4pm

Monroe

18 Centre Drive (Suite 205) Monday-Friday 8am-4pm

Hillsborough

331 Route 206 North (Suite 2C) Monday- Friday 8am-4:30pm

Somerville

Steeplechase Cancer Center Monday-Friday 8am-5:30pm
Saturday 7am-11am

LabCorp

Find a location near you at

www.labcorp.com/wps/portal/findalab



CINJ AMB NB LAB PRIOR TO APPT

ACUTE - PROVIDER



Panel Availability

Application: Orders
Owner: Bjorn Vanberg

Many panels were only available in order sets forcing users to either place one-off orders or open order sets and deselect all unnecessary orders.

We are making many standard panels available for one-off ordering.

Available Panels

- ❑ Anti-Emetic Medications
- ❑ Pain Management
- ❑ Smoking Cessation
- ❑ Bowel Management
- ❑ BH – PRN Medications ages 18-65
- ❑ BH – PRN Medications ages 65-85
- ❑ BH – PRN Medications ages 85+

Update Non-Emergent Involuntary Medication Administration Note Template

Application: Behavioral Health
Owner: Dave Atlas

EPREQ0017830

Request to update Behavioral Health Non-Emergent Involuntary Medication Administration note template to add default Smartlist which would allow providers to document if the patient appealed the decision. In current state, the patient's appeal is a separate note template. Having this embedded within one note template will streamline the provider's workflow.

My Note

Sensitive Tag Share w/ Patient Details ^

Type: Service: Behavioral Health Date of Service: 1/12/2024 02:03 PM

Cosign Required

abc

I have found that this patient has a psychiatric illness and as a result of that illness, poses a substantial risk of serious harm to self, others, or property if psychotropic medication is not administered. I have met with the patient regarding his/her diagnosis, symptomatology, and treatment options, recommended medications including purpose, dose, and route, expected benefits, possible side effects, and potential risks. The patient has had an opportunity to ask questions and receive answers as well as offer further information and continues to refuse the administration of medication(s).

{Did the patient appeal the decision?:1543041060}

Yes: {RWJBH BH INVOLUNTARY MED ADMIN APPEAL:TXT,1540000005}
No

Yes: **Patient Appeal:**

Has the Patient appealed the Review Committee {yes/no:28786}

Date and Time of the Medical Director Review of Appeal {Date:1602301401} at **:**

Committee Decision: Review Upheld {yes/no:28786}

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Epic together.

Nasogastric Tube Placement Panel

Application: Orders
Owner: Bjorn Vanberg

New Nasogastric tube insertion panel includes a held chest x-ray to confirm placement.

The nurses receive a task to release the imaging order once the tube is placed so that the imaging tech only arrives after the tube has been placed.

Nasogastric Tube Insertion ✓ Accept

- Nasogastric tube insertion**
Until discontinued, Starting today at 1731, Until Specified
Scheduling/ADT, Sign
- Release chest x-ray order once nasogastric tube placed**
Once, today at 1731, For 1 occurrence
Please released the signed and held chest x-ray to confirm correct NGT placement, Scheduling/ADT, Sign
- XR Chest 1 View For NGT/OGT**
STAT, Once, today at 1731, For 1 occurrence
Portable? Yes
Reason for Exam: Confirm NGT placement, Phase II/On Unit, Sign and Hold

Next Required ✓ Accept