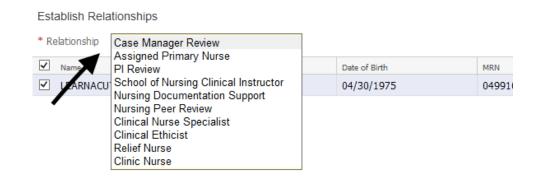
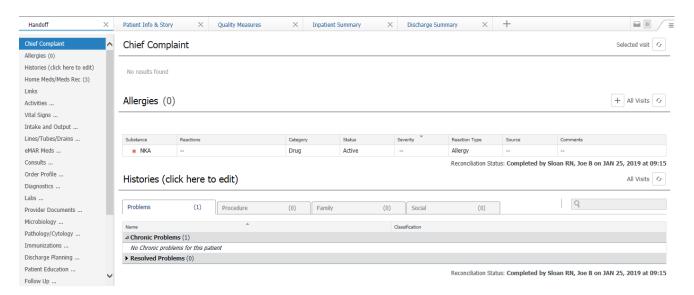
### **Cerner Helpful Hints/Tips**

- You must always select a relationship to the patient's chart you are trying to access.
- Choose your job title when selecting a relationship.
- Relief nurse is used when you are covering a group of patients for another RN



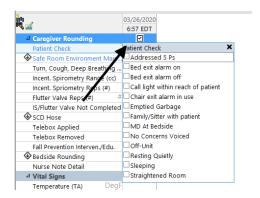
- Nurse Workflow page/Handoff is a great tool to use for obtaining patient information when pre-planning. The most important information throughout the chart can be found on one page.
  - Vital signs, labs, and radiology reports
  - Consults, progress notes, histories
- The menu to the left can be customized by clicking and dragging the order of what you believe is the most important.



- There is a toggle menu button on the top left side of your screen. When you
  hover over the menu button, the whole menu will pop out.
- This menu is used to navigate through different sections of the chart.



- iView/I&O is where the majority of documentation is done. (assessments, etc.)
- iView is an interactive flowsheet that can be customized for each patient.



- To chart in iView, you can individually double click on each box, or you can
  double-click on the blue bar of the section you are charting in to open up the
  entire section.
- You may use the mouse to click through the documentation, or the keyboard.
  - Tab=move between cells
  - Space bar will select in multi-select boxes
  - Arrow up or down to choose
  - Shift + Tab= reversing if you have tabbed too far.



Purple documentation is not saved.



- Use the GREEN arrow at the top left corner to save any documentation. Do this every time you document.
- Once saved, the documentation will turn black.



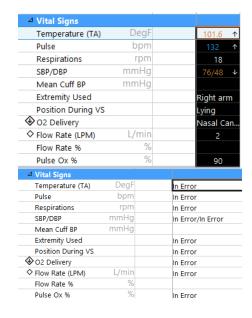
 There is a refresh button in the top right-hand corner of your screen. The screen can be refreshed by clicking on it. This will give you the most up to date information on the screen.



- Abnormal vital signs will show in different colors.
  - Orange = above normal range
  - Blue = below normal range
- Students should add a comment and notify the primary RN if vital signs are abnormal.
  - This can be done by right-clicking on the vital sign and select add comment.
  - This is where you would document who was notified. (example: Notified Heather Barker, RN)

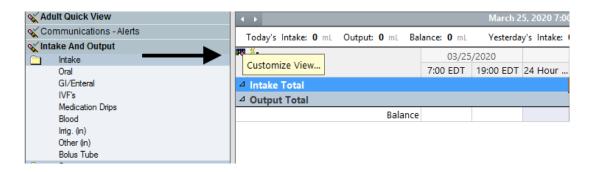
## **Deleting documentation**

Use this if you charted on the wrong patient.

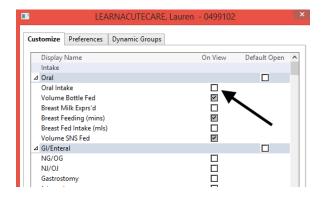


- Click and drag from the first documented vital sign to the last one you want to remove. (They must be in the same section, for example vital signs)
- 2. Right click
- 3. Choose Unchart
- 4. Pick a reason from the yellow drop-down menu.
- 5. Click OK.
- Vital signs will then be gone, but error will be in its place. (This is the same as marking a line through paper documentation)

## **Intake and Output**

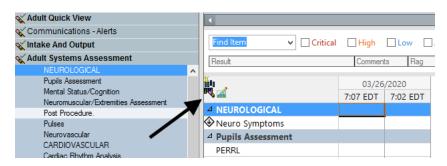


- When documenting intake and output, if there is something you need to add, such as foley catheter, ostomy, or drains, click on the customized view button. (middle/top left).
- Looks like a pencil eraser with a chart behind it.



- You can then scroll through the customize list and place check marks in the boxes of anything you need to add.
- This process is the same for any section in iView (physical assessment, lines & devices, education, etc.)

# **Physical Assessment Documentation**



- This is an example of the same button in the physical assessment section.
  - Drains, pressure ulcers, foley catheter, etc. can be added this way.

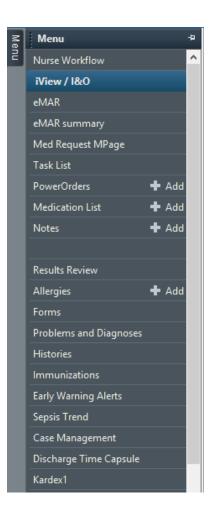
### **Task List**



Thursday, March 26,							
Nurse Collect Labs		Scheduled Patien	t Care P	RN Tasks	Notify/Communication		;
Task retrieval completed							
		Scheduled Date and Time		Mnemor	Mnemonic		Order Details
%€	Overdue	01/28/2019 7:0	19 7:01 EST		CBC with Automated Differential		Blood, AM Draw (Inpatie

- Nurse Collect labs will have any lab required for nursing to collect.
  - Urine specimen
  - Stool specimen
  - Nurse-collect blood draws
- Scheduled Patient Care includes forms for additional required daily charting.
  - Falls
  - Plan of care
  - Braden
  - Order entry details
- Communications tab
  - Information the provider wants to communicate with nursing staff
    - Obtain medical records
    - Notify provider of certain vital signs

# **Navigating the Chart**



The menu bar to the left of the screen helps to navigate through the chart.

- eMAR and eMAR summary are where medication administration times and doses can be located.
- **Task List** has reminders for other required documentation.
- PowerOrders is where you will find all the orders placed on that patient.
- Results Review is also a flowsheet that includes any results for the patient.
  - Lab, radiology, physician notes, etc.
- Sepsis trend will be used when documenting the sepsis review every shift.
- Kardex also contains patient information such as:
  - Family member contact
  - Diet
  - o Vitals

### **Care Compass View**

- If an **orange** box is around the patient's name while on the Care Compass screen, that means there are new orders/results on that patient.
- If a red box is around the patient's name while on the Care Compass screen those orders are stat.

E501 - A

LEARNACUTECARE, Scottie

44yrs | M | NO CODE - DO... | No Known Aller...

E502 - A

LEARNACUTECARE, Lauren

44yrs | M | NO CODE - D... | No Known All...

44yrs | M | -- | NO Keiationship Exists

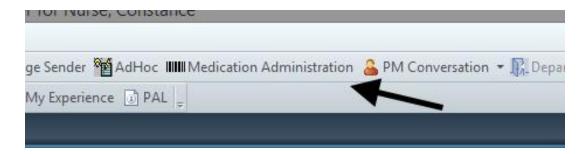
E502 - A

LEARNACUTECARE, Lauren

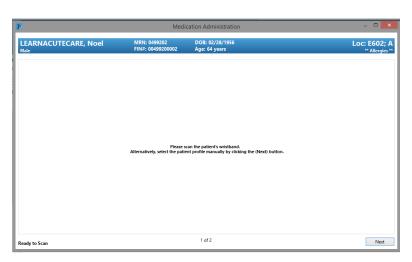
44yrs | M | NO CODE - D... | No Known All...

## **Medication Administration**

To administer medications click on the Medication Administration button in the toolbar at the top of the screen. The location of this button may vary between logins.



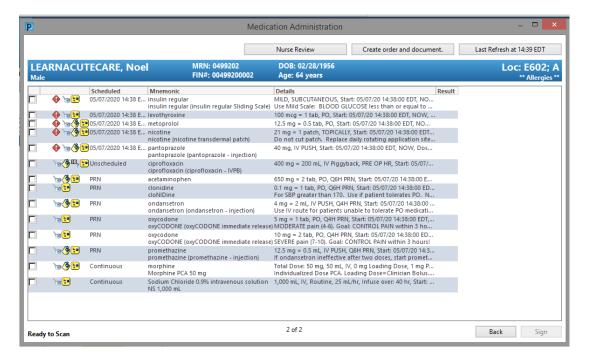
After clicking the Medication Administration button a window should pop up.



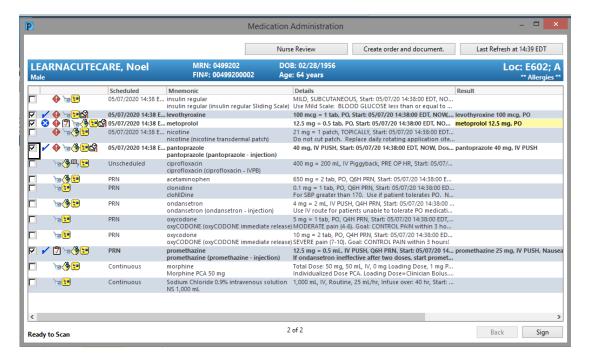
•

Once you see this window, the patient's armband must be scanned.

Be sure to scan the small QR code square and not the bigger barcode.



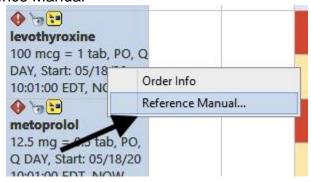
The above window should appear after the armband is scanned. This includes all the medications available to the patient at the time (scheduled and PRN).



- As medications are scanned, blue check marks appear next to the medication when the dosage is correct.
- A blue X means more information is needed, such as vital sign, pain score, etc.
- Once all medications are scanned, click the sign button at the bottom of the window to complete the medication administration process.

#### **Medication Information**

- To look up medication information for patient education, right click on the medication in the eMAR summary.
- Click on Reference Manual



 The education leaflet tab is great to use for patient education and can be printed from this screen.

