

Clinical and Collaboratives News

June 23 Quarterly Release

This monthly communication highlights recent and upcoming Epic improvements to ambulatory and inpatient workflows and other clinical news. Please share with physicians, advanced practice providers (APPs) and your team.

Announcements

Epic quarterly upgrade

On Sunday, June 23, Epic will be upgraded to the February 2024 version.

The upgrade lockdown begins on **Tuesday, June 18, at 4 pm** and will prevent you from making changes to certain aspects of your workflows. Review the [tipsheet](#) on lockdown limitations.

You can see a complete list of the updates below:

- [Ambulatory](#)
- [Inpatient](#)
- [Haiku and Canto](#)
- [Lumens](#)

MyNM Patient Tools

Updates to MyNM allows patients to:

- Get care recommendations via the expanded Self-Triage tool.
- Opt to use a Spanish version of MyNM.
- Streamline their immediate care.

The redesigned mobile app is available now. Learn more in [Physician Focus](#).

Epic Urgent Care

Northwestern Medicine Immediate Care Centers (ICCs) will transition to a new Epic Urgent Care module in mid-July. This will replace the current Epic ASAP module in all ICCs. The Epic Urgent Care module will streamline the patient's visit experience and give our clinicians and staff tools specifically designed for immediate care workflows.

Visit the [Epic Urgent Care](#) training page on NM Interactive for tipsheets, exercises, video demos and more.

System Updates

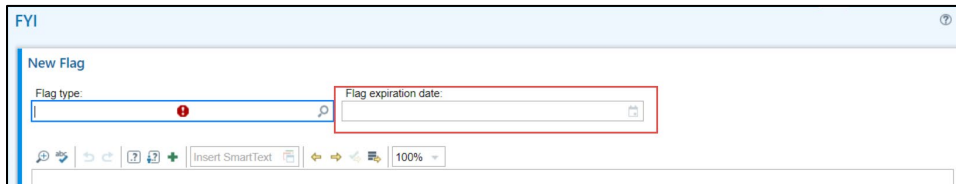
Chart Search renamed and moved to the Hyperspace toolbar

Chart Search has moved from Storyboard to the Hyperspace toolbar and is now called the Assistant Bar. You can still access it from the Epic menu as well.



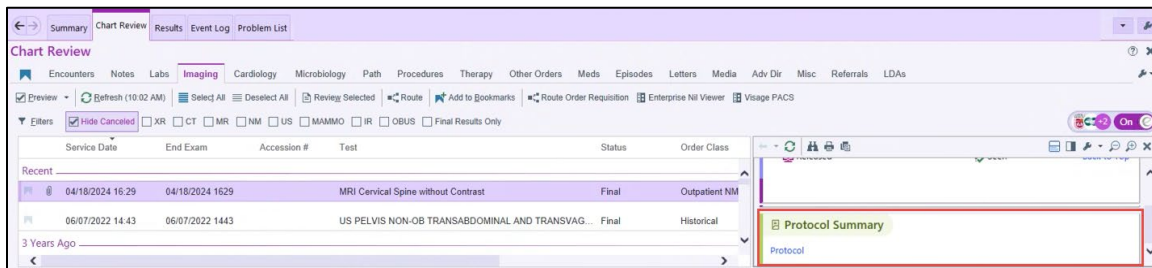
Set an expiration for FYI flags

You can now include an expiration date on FYI flags. It will be automatically removed when it's no longer relevant.



Protocol Summary Report in Chart Review

The Protocol Summary Report on the Imaging tab in Chart Review will now display as a hyperlink. Selecting the hyperlink will open the Protocol Summary Report. The Protocol Summary will only populate for patients who have a documented protocol.



Ultrasound procedure names

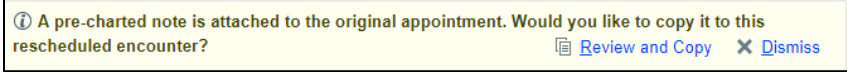
Several ultrasound orders will have the abbreviations of UE and LE removed. The abbreviations will be replaced with UPPER EXTREMITY and LOWER EXTREMITY. You can still use UE and LE in searches.

For example, Vasc US Venous Duplex LE Bilateral will become Vasc US Venous Duplex Lower Extremity Bilateral.

Ambulatory

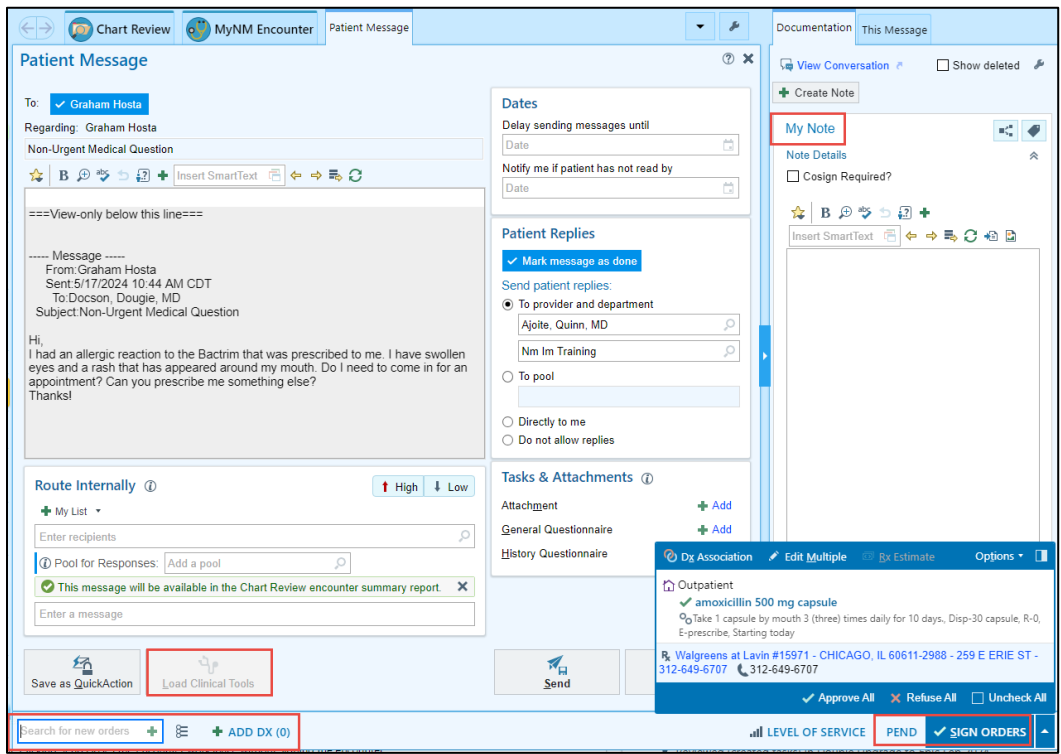
Copy Pre-Charted notes into rescheduled encounters

You will see a banner in the Notes activity of a rescheduled appointment with the option to copy the pre-charted note into the current encounter.



Encounter tools available in a MyNM patient message

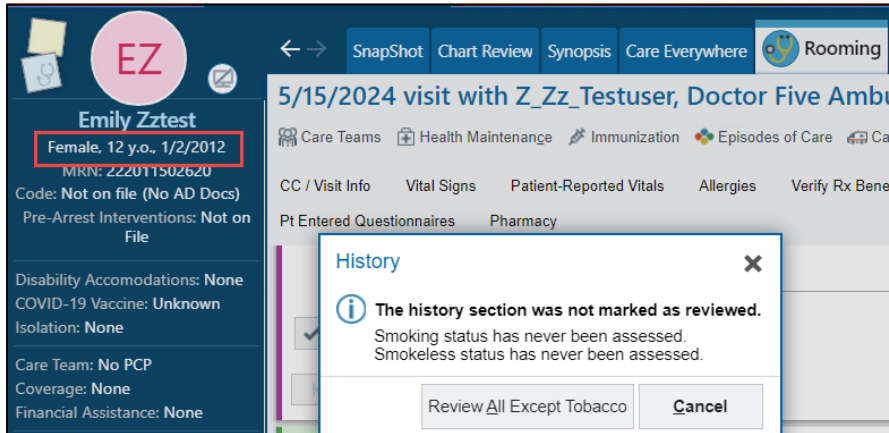
You can select the Load Clinical Tools button to show encounter tools in the patient message. From here, you can add orders and diagnoses, sign or pend orders, and write a note.



Tobacco use warnings now apply to patients 12 and older

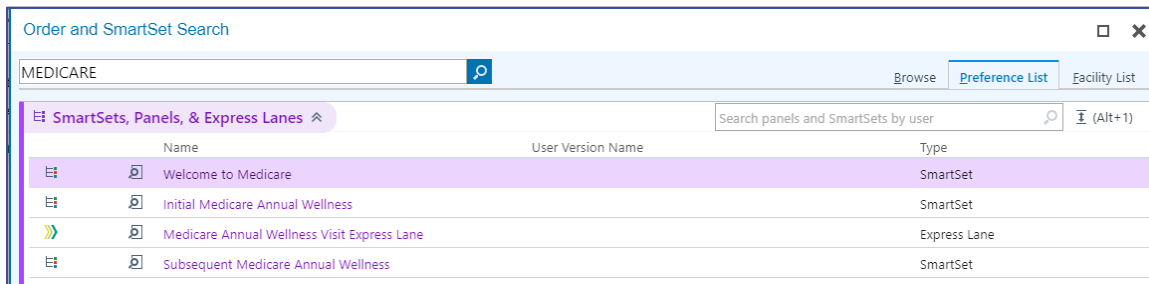
You will now see a reminder for all patients 12 years and older if you mark the Tobacco Use section as reviewed without first documenting whether the patient smokes or uses smokeless tobacco. Previously,

the warning appeared only for patients 18 years and older.



Open SmartSets and Express Lanes from the Visit Taskbar

You can save time by ordering SmartSets or Express Lanes directly from the Visit Taskbar. They will open in the SmartSet or Express Lane activity.



Best Practice Advisory (BPA) for positive PHQ score

A new acknowledgement button for **Continue current treatment** has been added to the PHQ BPA. You can use this when a patient screens positive but is in active treatment, such as therapy and

pharmaceutical interventions.

Ambulatory Quality – Other Screening (1)

Consider documenting follow-up plan for positive PHQ-2 / PHQ-9 depression screening score:

Please select the appropriate acknowledgement button, or use the Depressed Mood SmartSet for follow-up treatment options.

PHQ-2 score of 3+ indicates a positive screen and may require follow-up. You can review the PHQ-2/9 screening questions by clicking the link below.

PHQ-9 Total Score	Depression Severity
0-4	None-minimal depression
5-9	Mild depression
10-14	Moderate depression
15-19	Moderately severe depression
20-27	Severe depression

@REVFS(268:1:1)@

Depression Screening (from current progress note)	@ED@
PHQ-2 Total Score (range: 0-6)	@CUIENC(EPIC*56097)@
PHQ-9 Total Score (range: 0-27)	@CUIENC(EPIC#34494)@
Thoughts that you would be better off dead, or of hurting yourself in some way	@CUIENC(EPIC#34490)@

Open SmartSet Do Not Open DEPRESSED MOOD [Preview](#)

[Link to PHQ-2 / PHQ-9 Screening](#)

Acknowledge Reason

Discussed results with patient Referred or in counseling Not clinically indicated Patient declines **Continue current treatment**

Add blood pressure instructions to the AVS

Patient instructions on how to monitor blood pressure at home are available for you to add to the After Visit Summary (AVS). The guidelines are available in English and Spanish. They will be automatically included on the AVS if you order the MyChart BP Flowsheet.

You can also add the instructions to the AVS manually by using the following SmartPhrases:

- .BPHOMEMONITORING
- .BPHOMEMONITORINGSPANISH

How to Take Your Blood Pressure at Home

A member of your care team has asked that you check your blood pressure at home. You will send the readings to your care team. The readings will give your care team better information to help you manage your blood pressure.

Use a validated, calibrated blood pressure monitor

If you do not have one, you can buy a home blood pressure monitor at a store, at a pharmacy or online. View a list of recommended monitors at validatebp.org.

Follow the manufacturer guidelines to ensure you are using the correct cuff size.

If you have concerns about the accuracy of your monitor, bring your blood pressure monitor to your next appointment.

Note: Your care team will review your blood pressure readings at your next office visit. They might not monitor readings between appointments. If you have concerns about your blood pressure before your next appointment, contact your care team.

How to take your blood pressure

To watch a video on how to take your blood pressure, scan the QR code with the camera on your mobile device:



or visit healthsheets.healthclips.com and enter prescription code: **8944E**

Please note any of the following can raise your blood pressure. At least **30 minutes before** checking your blood pressure:

- o Do not exercise.
- o Do not drink anything with caffeine, such as coffee, tea, or soda.
- o Do not drink alcohol.
- o Do not smoke.

Inpatient

Order set updates

You can review the [Order Set Update communication](#) for a detailed summary of updates to the following order sets. Order sets revised this month with a summary include:

Order set update	Change summary
Admission	Duplicative activity orders removed. Use the Activity/positioning with Mobility order.
Post-Op – Gastric Bypass/Gastric Sleeve	Updates based on clinical research or to help standardize patient care.

Order set update	Change summary
Blood Administration – Inpatient Massive Transfusion Protocol Massive Transfusion Protocol: Peds – CDH, Delnor, Kishwaukee, Valley West, Huntley, McHenry and Woodstock Cath Lab: Post Procedure Impella Protocol for Purge Solution Management Cath Lab: Nitroprusside Challenge Test – NMH, LFH, Grayslake Outpatient Center, Huntley, McHenry, Woodstock and Palos Cath Lab: Post-Procedure – Temporary Pacemaker Insertion Cath Lab: Catheter Directed Thrombolysis for PE – NMH, LFH, Huntley, McHenry and Woodstock Clinical Research Unit (CRU) Admission Orders – NMH	Content review completed for the following specialties based on clinical research to help standardize patient care: <ul style="list-style-type: none"> • Blood Administration/MTP • Cath Lab • Clinical Research Unit

For more information related to customizing order sets, view the [Personalization Reference Guide](#) on the [Enterprise Training Site](#) and the latest [order set inventory](#).

Brain Death Navigator and documentation updates

The Brain Death Navigator has been retired and will be replaced with an updated .braindeath SmartPhrase. The documentation of vital signs and blood gas results must be manually entered to ensure proper timing.

The SmartPhrase was updated to reflect a new systemwide policy for Brain Death/Death by Neurologic Criteria in Adults. Modifications of the SmartPhrase or the creation of individual documentation templates are discouraged.

Pediatrics are currently out of scope for the Brain Death SmartPhrase. A pediatric version may be developed at a later date.

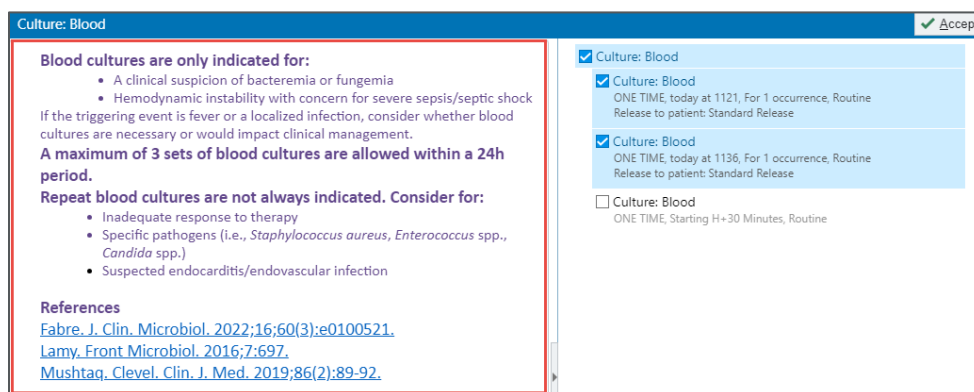
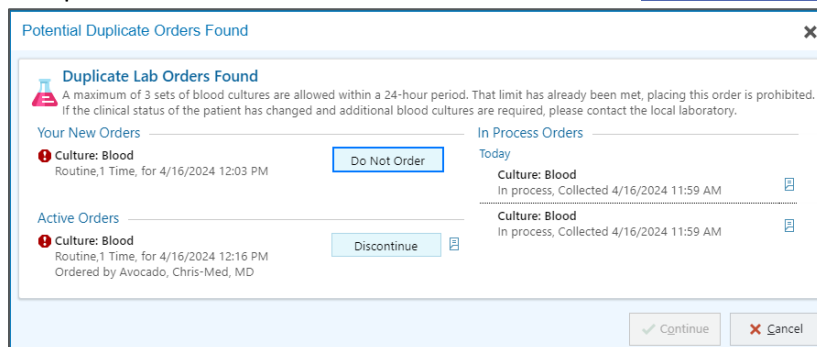
Admission order set activity orders

Duplicative activity orders for Up with Assistance and Activity as Tolerated have been removed from the Admission [2883] order set to eliminate inconsistent activity ordering. Use the Activity/Positioning with Mobility order within the order set to specify activity orders.

Diagnostic stewardship: blood culture order support

To align with guidance from the Infectious Diseases Society of America, duplicative order warnings have been created to limit the collection of Blood Cultures [O5234] to a maximum of three sets within a 24-hour period. An order sidebar has been created to provide decision support for blood culture ordering

best practices. You can view more information in the [Blood Culture Order Support](#) communication.



Order updates for *N. gonorrhoeae*, *C. trachomatis*, *T. vaginalis*

The following referred orders will no longer be available for inpatient ordering:

- CHLAMYDIA TRACHOMATIS RNA, TMA, UROGENITAL [LAB14042]
- CHLAMYDIA/N GONORRHOEAE/T VAGINALIS RNA, QUAL [LAB91448]
 - Exception: external to NM ambulatory orders
- GC/CHLAMYDIA RNA, TMA [LAB9077]
 - Exception: external to NM ambulatory orders

Available replacements include:

- CHLAMYDIA TRACHOMATIS, SWAB [LAB950]
- CHLAMYDIA TRACHOMATIS/NEISSERIA GONORRHOEAE, SWAB [LAB2001]
- TRICHOMONAS VAGINALIS, SWAB (NMH/LFH/NWR/SOUTH) [LAB15255]
- CHLAMYDIA TRACHOMATIS, URINE [LAB9889]
- CHLAMYDIA TRACHOMATIS/NEISSERIA GONORRHOEAE, URINE [LAB9887]
- NEISSERIA GONORRHOEAE, URINE [LAB9888]

Defer functionality enabled for certain BPAs

You will have the option to defer a BPA in the following scenarios:

- The patient has active restraints documented, but no active restraint order.
- A restraint order is present, but no active restraint documentation exists.
- There is no cosigned status order.

Important (1)

ⓘ This patient has active restraints documented without an active order. Please enter the below order, or document discontinuation of the restraints.

Order Do Not Order Non-Violent Restraints

Non-Violent Restraint Flowsheet

Acknowledge Reason

Not Primary Caregiver Defer

Accept

When you defer a BPA, a banner will appear on the Storyboard. The banner will appear only for the clinician who deferred it. You can hover to view the details of the deferred BPA or double-click to act on the BPA.

SOCIAL DETERMINANTS

Some not on file

COVID-19 Vaccine: Unknown

ⓘ Missing Nursing Braden Orders

ⓘ Telemetry Review Needed

ⓘ Non-violent Restraints

Chest tube to Continuous Suction Order

To conform to patient safety standards at NM, updates have been made to the Chest tube to Continuous Suction order.

- Process instructions have been added
- Chest Drainage System Suction settings are now required
- A field has been added to indicate instructions for During Transport or Ambulation

Chest tube to continuous suction Accept Cancel

Priority: Routine Routine

Frequency: UNTIL DISCONTINUED Until D/C

Starting: 5/31/2024 Today Tomorrow For: Hours Days Weeks

At: 0931

Starting: Today 0931 Ending: Until Specified

Process Instructions: Wall Suction Set Up:
 - Attach chest drainage system directly to wall suction with connection tubing.
 - Increase wall suction to -80 mm Hg or higher.
 - Optimal wall suction is identified when the vacuum indicator is illuminated and/or the bellow/float is operating according to manufacturer instructions.

ⓘ Chest Drainage System Suction: -10 cmH2O -15 cmH2O -20 cmH2O -30 cmH2O -40 cmH2O Greater Than -40 cmH2O Other - See Comments

During Transport or Ambulation: Chest Tube to Gravity / Water Seal Chest Tube to Portable Suction Confirm with Provider

Comments: + Add Comments

CC Results: + My List + PCP + Other

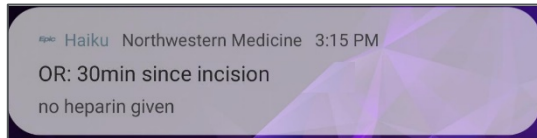
Enter recipients

Mobile notifications for cardiac surgeons (NMH Pilot)

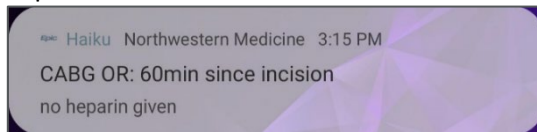
Cardiac surgeons at NMH who have downloaded and configured the Haiku app (for iOS or Android) or Limerick (for Apple Watch), will begin receiving Haiku notifications for cardiac bypass cases when the criteria below is met, signifying a certain phase during the procedure has exceeded a reasonable time duration.

Start of a Case Notification

- For general cardiac cases with bypass, a notification will be sent if anesthesia has not clicked heparin on their macro within 30 minutes of the Initial Case Start time.

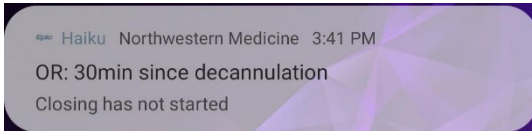


- For CABG with arterial graft cases, a notification will be sent if anesthesia has not clicked heparin on their macro within 60 minutes of the Initial Case Start time.



End of a Case Notification

- For general cardiac cases with bypass or CABG with arterial graft cases, a notification will be sent if the nurse has not documented closing start within 30 minutes of the documented Decannulation event.



Learn more in the [Mobile Notifications for Cardiac Surgeons](#) communication.

Pulmonary Embolism Response Team Order Panel (Kishwaukee)

The Pulmonary Embolism Response Team Order Panel (PERT) is now available at Kishwaukee Hospital.

Upcoming Epic Releases

- Monthly release: July 30
- Monthly release: August 27
- Monthly release: October 1

Find additional Epic resources on the [Epic Enterprise Training page](#). If you have questions, please contact [MyNM Service Center](#) or call 312.926.4357 (HELP).

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