THE PHC CERNER LEARNER

From the desk of Dr. Janet Simons

THANKS FOR YOUR PATIENCE

This is a combined Spring/Summer Edition of the *Learner* since Spring got a little away from me as I welcomed my own little one!

Thanks to all for your well wishes and understanding during this time. I'm back at it now and hope you are looking forward to some great new tips and tricks.

I'm also pleased to welcome Dr. Chris Murray of psychiatry to the Informatics team as Medical Director. As always, reach out directly to me (or Chris) via email or Signal chat with any concerns, questions, or requests for content!

~Janet

DIFFICULT DIAGNOSES

Your by physicians, for physicians source for CST Cerner information at PHC

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Those of you who like to be precise with your Active Issues names may have run into this issue:

P	CSTPET, DENTISTRY - Co	brivert – 🗖 🧾
CSTPET, DENTISTRY	DOB:02-Jan-2000 MRN-240011574 Code Status: Age:22 years Enc:740000024327 Conductsemble DNN: 0272693279 Docine Mtt 77 to 05-M01/30330	Process: Location:SPH 5CD CSSU: CSSL: 02 Disease: Enc TypeInpatient; Discharged trachinge: Attractions
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Term Code Periventricular Hemorrha, 3293	*Search: Cerebral infarction	Contains v Withine Terminology
L	Search by Name	Search by Code
	Terminologyt ICD-10-CA	Terminology Axis: <all axes="" terminology=""></all>
	Tem A	Code Terminology Terminology Avis
	Cerebral infarction due to cerebral venous thrombosis, nonpyogenic	I63.6 ICD-10-CA Diseases of the circulatory system
	Cerebral infarction due to embolism of cerebral atteries	IG3.4 ICD-10 CA Diseases of the circulatory system
	Cerebral infarction due to embolism of precerebral arteries II	I63.1 ICD-10-CA Diseases of the circulatory system
	Cerebral infarction due to thrombosis of cerebral arteries	IG3.3 ICD-10-CA Diseases of the circulatory system
	Cerebral infarction due to thrombosis of precerebral arteries II	IG3.0 ICD-10-CA Diseases of the circulatory system
	Cerebral infarction due to unspecified occlusion or stenosis of cerebral atteries	I63.5 ICD-10-CA Diseases of the circulatory system
	Cerebral infarction due to unspecified occlusion or stenosis of precerebral ateries	IE3.2 ICD-10.CA Diseases of the circulatory system
	Cerebral inferction, unspecified II	I63.9 ICD-10-CA Diseases of the circulatory system
	Other cerebral infanction II	I63.8 ICD-10-CA Diseases of the circulatory system
	Sequelae of cerebral inferction II	I69.3 ICD-10-CA Diseases of the circulatory system

This annoying window is an unfortunate consequence of using one set of more 'user friendly' diagnoses (called the IMO catalogue) on the front end of Cerner, while the backend is required to use the ICD-10 codes.

There are two ways to handle this pop-up. One is to manually do the conversion. This may be worthwhile if you frequently want to use that particular diagnosis. Step by step on how to do that is on page **three**.

For most of us though, it's likely more facile to choose a less descriptive diagnosis which is already properly mapped and then change the display name to properly reflect the patient's condition. A step by step for that is on page **two**!

PRE- (OR POST-) DATE YOUR DOCUMENTS

Prepping a Monday discharge on the Friday? Or perhaps you are finishing off a complex consult note you started early in the day and now the clock has ticked past midnight, but you want your note to reflect the day you actually saw the patient. You can modify the date of documents in Cerner on the sign/submit window. Just click the little calendar icon next to the date and you can change this to your heart's content. The date will impact the order in which the note displays in the documentation list, so a post-dated note will sit at the top, helpful for a pre-written discharge summary, so that everyone will see at the top of the documents list that the discharge documentation has been completed.

P	Sign/Submit Note	- 🗆 X
*Type: General Medicine Progress Note	Note Type List Filter:	
*Author:	Title:	
 Forward Options Create provider letter 	Progress Note	Q Jun ∨ 2023 ∨ Q
Favorites Recent Relationships	Q Provider Name	Su Mo Tu We Th Fr Sa

UPDATED LABS SECTION FOR PROGRESS NOTES

In an effort to reduce the dreaded 'note bloat,' the Enterprise Provider Working Group decided to make a change to the way that lab results are pulled into inpatient progress notes. Instead of pulling in every lab value reported in the last 24h (which may or may have relevance to your note, or may lack context of previous results), the Laboratory Results section of Progress Notes will now be **blank** by default.

If you do want to pull in common labs from the last 24 hours easily, there is a new lab autotext you can use:

"labscommonresultsINT24hours

It produces an output like this:

MOST RECENT WITHIN LAST 24 HO	URS:
HEMATOLOGY	CHEMISTRY
Hemoglobin: 140 g/L	Creatinine: 70 umol/L
Neutrophils: 3 x10^9/L	Glomerular Filtration Rate Estimated: 60 mL/min
Platelet Count: 300 x10^9/L	Potassium: 3.8 mmol/L
WBC Count: 5 x10^9/L	Sodium: 143 mmol/L

Additional labs and labs from previous days can be brought into the labs section by tagging the results. The hope is that this allows for cleaner, more specific documentation and promotes clinical thinking in our trainees. Any feedback on this change, please reach out! Currently this only affects the Progress Note template but if feedback is positive we will look to extend to the SOAP note template as well.

MODIFYING ACTIVE ISSUES DISPLAY

Regardless of what diagnosis you choose for an active issue, you can change the display name of this issue so that a more accurate or fulsome description of that issue will be pulled forward into your notes, including the Issues list in Progress Note and the Diagnosis list in Consult and Discharge notes. Here's how, it's as easy as 1, 2, 3:

- 1. Click the diagnosis you wish to update in Active Issues
- 2. Click Modify
- 3. Update the display name in the "Display as" field

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Classification	Medical and Patient Stated	Add as This Visit	✓ Add problem			Q	Septic shock	
Priority	Problem Name	Code	Onset Cla	ssification A	ctions		R57.2 (ICD-10-CA)	
1 🗸	Septic shock	R57.2 (ICD-10-CA)	Me	dical	V This Visit		Visit	Chronic
2 🗸	Renal mass	N28.88 (ICD-10-CA)	Me	dical	✓ This Visit ✓ Chronic Resolve		· · · · · · · · · · · · · · · · · · ·	
3 🗸	Schizophrenia	F20.9 (ICD-10-CA)	Me	dical	✓ This Visit ✓ Chronic Resolve		Condition type This Visit	Classification Medical
	Asthma, allergic	345.00 (ICD-10-CA)	Me	dical	This Visit Chronic		Diagnosis Type	Onset
	Acute asthma Acute nulmonary embolism		Me	dical	This Visit Chronic Resolve Chronic Resolve		Status	Confirmation
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		Ageila moli Elici7400						
	lergies: ciprofloxacin	Gender:UnkPHN: 98	73804776	Dosing W	t: 20 Isolatic	on:*Patient is iso	latAttendin	g:Provider, None
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Se	eptic shock	<i>\$</i> 4	Free Text		*D=4=	TestUser, Respire	der blogist-Physicia nto	۹
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MAPPING DIAGNOSES

Now, if you wish to go above and beyond and want to map some of the more specific diagnoses (such as "Periventricular Hemorrhagic Venous Infarct"), you can. This will stop the mapping window from popping up for you (and only you, unfortunately) in the future. I'd only bother to do this if you commonly use one of these less common diagnoses in your personal practice.

How-to:

1. Enter the diagnosis for a patient. The mapping window will pop up.

P			CSTPET, DENTISTRY - Co	onvert			×
CSTPET, DENTISTRY		DO8:02-Jan-2000 MRN:7400 Age:22 years Enc:740000 Gender:Female PHD: 02741	1574 Code Status: 0024327 182278 Doning Mit: 77 kg (05-MO)(-2022)		Process: Disease: Icolation:	Location:SPH 5CD CSSU; CSSL; 02 Enc Type:Inpatient; Discharged	
1. Select an item to map.		2. Select a target.	ozoro bosing warring (op wow zozo)		isolation.	Attenung.	
Term	Code	*Search: Periventricular Hemorrhagic V	enous infarct		Contains	Within: Terminology	×
Periventricular Hemorrha	32932453		Search by Name			Search by Code	
		Terminology: ICD-10-CA			erminology Axis: < All terminology axes]
		Tem ~ <no found="" matches=""></no>		Code	Terminology	Terminology Axis	
			•				

2. Clear the search bar and enter what you think the proper ICD-10 code is, click search.

P				CSTPET, DENTISTRY -	Convert				-	• ×
CSTPET, DENTISTRY Allergies: No Known Allergie		DOB:02-Jan-2000 MRN:740011574 Code Status: Age:22 years Enc:7400000024327 Gender-Semale PHN: 9274882378 Dosing WR: 77 kg (05-MOU			Process: Disease:			Location:SPH 5CD CSSU; CSSL; 02 Enc Type:Inpatient; Discharged Attending:		
1. Select an item to map.		2. Select a target.	7	······					*	
Term Periventricular Hemorrha	Code 32932453	*Search: Cerebral infarction	Search	by Name		Contains	s	Within: Terr	ninology	Y
		Terminology: ICD-10-CA				Terminology Axis:	<all axes="" terminology=""></all>			
		Tem A Cembral inflaction due to co Cembral inflaction due to en Cembral inflaction due to en Cembral inflaction due to th Cembral inflaction due to un Cembral inflaction due to un	rebral venous thrombosis rbolam of cerebral attein nbolam of precentral attein rombosis of cerebral attein rombosis of precentral at specified occlusion or st specified occlusion or st isot ion	, nonpyogenic 4 antes tese teses mossis of centoral atoms mossis of precentoral atoms mossis of precentoral atoms	Code 163.6 163.4 163.1 163.3 163.0 163.5 163.2 163.9 163.8 169.3		Teminology ICD-10CA ICD-10CA ICD-10CA ICD-10CA ICD-10CA ICD-10CA ICD-10CA ICD-10CA ICD-10CA ICD-10CA ICD-10CA		Terminology Axis Diseases of the circulatory system Diseases of the circulatory system	

3. Select the proper ICD-10 match, then at the bottom select "map for all patients" and click OK.

P					CSTPET, DENTIS	TRY - Convert			-	×
CSTPET Allergies	, DENTISTR : No Known A	(Y Allergies	DOB:02-Jan-2000 Age:22 years Gender:Female	MRN:740011574 Enc:7400000024327 PHN: 9874882378	Code Status: Dosing Wt: 77 kg (05-NOV-:	2022)	Process: Disease: Isolation:		Location:SPH 5CD CSSU; CSSL; 02 Enc Type:Inpatient; Discharged Attending:	
1. Select a	n item to map.	-	2. Select a target.							
Term		Code	*Search: Cerebral infa	rction			Contains	v w	ithin: Terminology	
∎ ^E Perive	entricular Hemo	orrha 3293245	3							
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			Terminology: ICD-10)-CA			Terminology Axis:	<all axes="" terminology=""></all>		
			Term 🔺			Code		Terminology	Terminology Axis	
			Cerebral infarction du	e to cerebral venous thrombosis	, nonpyogenic	163.6		ICD-10-CA	Diseases of the circulatory syster	m
			Cerebral infarction du	e to embolism of cerebral arterie	\$	163.4		ICD-10-CA	Diseases of the circulatory syster	m
			Cerebral infarction du	e to embolism of precerebral arte	eries	163.1		ICD-10-CA	Diseases of the circulatory system	m
			Cerebral infarction du	e to thrombosis of cerebral arteri	ies	163.3		ICD-10-CA	Diseases of the circulatory system	m
			Cerebral infarction du	e to thrombosis of precerebral a	rteries	163.0		ICD-10-CA	Diseases of the circulatory system	m
			Cerebral infarction du	e to unspecified occlusion or ste	enosis of cerebral arteries	163.5		ICD-10-CA	Diseases of the circulatory system	m
			Cerebral infarction du	e to unspecified occlusion or ste	enosis of precerebral arteries	163.2		ICD-10-CA	Diseases of the circulatory system	m
			Cerebral infarction, un	nspecified		163.9		ICD-10-CA	Diseases of the circulatory system	m
			Other cerebral infarcti	on		163.8		ICD-10-CA	Diseases of the circulatory system	m
			Sequelae of cerebral	infarction		169.3		ICD-10-CA	Diseases of the circulatory system	m
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		F	eriventricular Hemorrhagic Veno	us Infarct - 32932453						
									ОК	Cancel

REPLACED RADIOLOGY EXAMS

As a follow up to the issue of 'lost' Radiology orders in the last Edition of *the Learner*, one of the root causes which came out of that investigation is that many people are unaware of how to check the Orders Profile to see whether an exam was cancelled or replaced, and the reason for that change. Our Provider Informatics team has put together this explainer on how to check the status of an exam.

HAS MY EXAM BEEN REPLACED?

- 1. Check the "Status Column" for status: "Canceled (Exam Replaced)" (inpatient orders) or "Canceled" (outpatient orders)
- 2. Check the **"Reason"** under the **"Details"** column. The original reason written when the order was placed should be transcribed to the new order. In this case "See *Requisition, Special Instructions: 2023 April 13"* was transcribed to the new order.
- 3. Check the start and stop times of these two orders, if the stop time of the original order matches the start time of the new order, it is likely to have been replaced.

Order Name 🔺	Dose Details 2		Status 1	Start	Stop	3
	-		-			
MRI Thigh w/o Contrast Left	24-Apr-2023 07:15 PDT, Routine,	Reason: See requisition, Special Instructions: 2023 April 13	Completed	03-May-2023 09:10 PDT	03-May-202	23 09:10 PDT
MRI Tibia Fibula w/ + w/o Contrast Left	24-Apr-2023 07:15 PDT, Routine,	Reason: See requisition, Special Instructions: 2023 April 13	Canceled (Exam Replaced)	03-May-2023 09:07 PD1	03-May-20	23 09:10 PDT

4. Open the order information window by right clicking your cancelled order and clicking "Order information..."

•	L	Sodium ar		
•	🔲 店	Ure 4 1 (Order Information
▶	L	CBC and [-	Comments
▶	L	Sodium ar		Pecults
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▶	L	CBC and [Reference Information
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		CBC and [Advanced Filters
⊿ Diagnostic Tests				Customize View
⊿ Today			~	Disable Order Information Hyperlink
	66	CT Head 2	Area	is w/o Contrast Car

- 5. The "Additional Info" tab will display a department status "Exam Replaced" (inpatient orders) or "Canceled" (outpatient orders)
- 6. The "History" tab will display a "Cancel Reason" of "Exam Replaced"

Details	Additional Ir	fo History	Comments	Validation	Results	Ingredients	Pharmacy	History	Comm	ents	Validation	Results	Ingredients	Pharmacy	
								7:13 PDT							
Ordere	d As	MRI Tibia Fi	bula w/ + w/o	Contrast Lef	ť			r-2023 07:0	5 PDT	Ca	ncel 24-A	pr-2023	07:13 PDT		
Start D	ate/Time	24-Apr-2023	07:15 PDT					07:01 PDT							
Stop D	ate/Time	24-Apr-2023	07:13 PDT					15:38 PDT		Sta	atus	After		Before	
Access	ion Number	107-MR-23-	0002228					:49 PDT		Or	der Status	Cano	celed	Ordered	
Order I	D	1611154135								De	partment Stat	us Exam	n Replaced	Exam Started	
Depart	ment Status	Exam Replac	ed			5				De Ca	t ails ncel Reason	Exam	n Replaced	6	

7. If, at this point, you are still unsure whether your order has been replaced, please follow up with the MI department directly for clarification.

BOOKMARK THIS!

The **CST Cerner Help** website has a ton of useful information and step by steps. If you love the content of *the Learner*, you'll find more great stuff on CST Cerner Help. It's hard to find though as the page is not indexed on Google. Save yourself some time and bookmark the site: <u>cstcernerhelp.healthcarebc.ca</u>