04.05.2017

MORNING CMO REPOR

FROM THE DESK OF: Anthony P. Weiss, MD, Chief Medical Officer, Associate Dean for Clinical Affairs, Upstate University Hospital

Diabetes Related Discharge Orders

Applies to All Physicians

Diabetes Informational Attached you will find a tip sheet to assist in finding the discharge order set and allow use of a new algorithm with instructions. If you have any questions, please contact Lori Gordon, RN, Diabetes Nurse Educator, Joslin, at 492-3542.

Save the Date – Transitions in Care Symposium

Applies to All Physicians



Dr. Boutwell is President of Collaborative Healthcare Strategies, a thought leadership and technical assistance firm that advises delivery system transformation efforts nationally. Dr. Boutwell advises several large-scale collaborative efforts aimed at system redesign to reduce readmissions and improve care across settings and over time. These include several federal initiatives funded by the Centers for Medicare & Medicaid Services (CMS), such as the Quality Improvement Organization "Care Transitions" Aim, the Partnership for Patients Hospital Engagement Networks, and the CMS Learning Systems for Accountable Care Organizations and

populations throughout the day!

Bundled Payments. Dr. Boutwell has also worked with the Massachusetts Health Policy Commission, in addition to statewide all-payer readmission reduction efforts in Massachusetts, Michigan, Washington, Maryland, and

Virginia; and the New York Medicaid Delivery System Reform Incentive Program "super utilizer" collaborative. Dr. Boutwell also advises providers, provider associations, state agencies, and health information technology and health information exchange agencies.

Continuing Education credits will be provided

EVENT INFORMATION AND ONLINE REGISTRATION WILL BE AVAILABLE IN MAY AT: WWW.UPSTATE.EDU/CON/PROGRAMS/CONT_ED

ALERT-Highest priority emergency communication; warrants immediate action or attention by the recipient.

HIGH ADVISORY-High priority does not warrant immediate action but recipients should be aware.

ADVISORY-Provides very important information for a specific incident or situation that does not require immediate action.

UPDATES TO ALERTS AND ADVISORIES-Provides updated information regarding an incident or situation; unlikely to require immediate action.

INFORMATIONAL MESSAGE-Provides timely information, important for review or serves as a reminder for an action that should be taken.

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Comments Informational

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FROM THE DESK OF: Anthony P. Weiss, MD, Chief Medical Officer, Associate Dean for Clinical Affairs, Upstate University Hospital

Outstanding Physician Comments

Applies to All Physicians

Each week we receive written comments from our patients regarding the care we provide within the Hospital. Below are this week's comments from grateful patients receiving care on the units and clinics at Upstate:

Center for Children's Surgery - Dr Stanger was wonderful.

Dr Ahmed explained in layman terms, and understood and addressed all my concerns.
 Dr Mortelliti and Dr Ahmed - very courteous and respectful. Answered all our questions =)
 Dr Mortelliti and his admitting nurse. Thank you from the bottom of my heart!
 Dr Wong - very friendly, positive, took her time, no rushing - treated grandson with respect and interest.
 Hepatobiliary Clinic - Dr Kittur, Dr Mark, Dr Jain - Great people every one of you! I Love You All- Thank You!! P.S. My only grand child said thank you for saving my papa!
 University Internists - Dr. Frechette – always so respectful and caring.

ALERT-Highest priority emergency communication; warrants immediate action or attention by the recipient.

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Tip Sheet

Chart Review

Results Review

Intake/Output

Problem List

=

Notes

210

Manage Orders

Charge Capture

Procedure

Surgical

Consult

Discharge

Discharge

DISCHARGE REVIEW

Pended D/C Orders

D/C Instructions

Unresulted Labs Allergies

Scheduled Appts BestPractice DISCHARGE ORDERS

Problem List Care Teams

Checklist

9

Cosign Orders **Discharge Orders**

DISCHARGE DOCUMENTATION

H & P Notes

Progress Notes Follow-Up Audit Trail AFTER VISIT SUMMARY

Patient Instructions

Preview AVS 10

Discharge Summ. Insulin Sliding Scale

IP-PROV: Ordering/Continuing Subcutaneous Insulin for Home

The following tip sheet outlines how to order / continue subcutaneous insulin for home at discharge in Epic. Insulin orders involved in this workflow are available using the *inpatient* order set titled Meal Consumption Based Insulin Sliding Scale.

Try It Out

- 1. Within the patient chart, go to the **Discharge** activity tab.
- 2. In the table of contents, select **Discharge Orders** to complete Discharge Order Reconciliation.
- 3. For Review Orders for Discharge, locate the insulin order and select Prescribe.
- 4. For New Orders, complete this step per usual workflow.

scharge Ord Rec					-
Review Orders for Discharge 2. New Orders 3. Review and Sign				J.	?)
OPTIONAL- Prescription Routing- Set Discharge Medication	ons to "Print" or "Do Not Print o	or E-Prescribe		→	1
Time taken: 1347 11/28/2016 Values By		Sho	W: Row Info Last Filed	Details	
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					1
Reconcile Meds for Discharge					1
Reconcile Meds for Discharge Review all prior to admission medications and current inpatient medications to	o determine the medications the patient shoul	d take after dischar	ge.		1
Reconcile Meds for Discharge	o determine the medications the patient shoul Mark All Prescribe Mark All Don't Prescribe	d take after dischar Mark All Resume	ge. Mark All Stop Taking	Next	
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D	ischarge Ord Rec	
1	. Review Orders for Discharge 2. New Orders 3. Review and Sign 5	? 🎝
	Review and Sign	+
	Providers DX Association Phases of Care	() <u>N</u> ext
	Pharmacy No Pharmacy Selected	
	New on Discharge	
	A insulin lispro (HUMALOG) 100 UNIT/ML injection HIGH DOSE INSULIN patients 1-22 units Patient Instructions: Please effect to Insulin Sliding Scale Instructions in the Discharge Instructions. Disp-1990 Units, R-11	
	This ordes was created, from insulin lispro (HUMALOG) injection HIGH DOGE INSU/LIN matients 1-22 units 5-22 Units	
	Pend Sin	n Cancel

6. Next, from the table of contents in the Discharge navigator, select Insulin Sliding Scale.





#### Continued...

- To use the Insulin Sliding Scale Instructions SmartText, press F2. From the list, select the appropriate SmartText based on the type of insulin.
- 8. The scale will appear in the Insulin Sliding Scale Instructions note.
  - a. *Note*: Values can be changed by simply typing in the appropriate value in place of an existing one.
- 9. Click **Sign** and enter your **password** at the prompt.



Insulin Sliding Scale Instr	uctions (F3 to enlarge)							†∔
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8	8 HIGH Dose Insulin Patient Scale							
Blood Glucose (mg/dl)	Blood Glucose (mg/dl) Eats Breakfast, Lunch & Dinner (not with snacks)							_
< 70	<ul> <li>Have 15 grams of carbohydrates such as: 4 ounces of juice, 8 ounces of milk, 4 glucose tablets</li> <li>Wait 15 minutes, check blood glucose again</li> <li>If blood glucose is still less than 70, have an additional 15 grams of carbohydrates</li> <li>If you won't be having a meal for 2-3 hours have a small snack</li> </ul>							=
71 - 90	6 units							
91 - 130	8 units							
131 - 150	10 units	-						
201-250	12 dilits 14 units	$\dashv$						~
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Restore Close	F9 × Cancel			1	Previous F	7	Next	F8

10. To **view these instructions** and how they will appear to your patient on their AVS (After Visit Summary), go to the **Preview AVS section of the Discharge navigator**.

Alexa Maile Commence				2 Oliver M				
Alter visit summary				f Close X				
Choose Documents to Print								
Inpatient AVS	The following information is missing or r							
HOD AVS	Reason	naj neca jour automon	Required?					
Large Font Inpatient AVS	Discharge order reconciliation is not cor	nplete for this contact.	Yes					
Prenatal AVS	Discharge Order Required [ADT8]		Yes					
Important Message From Medicare	Patient has unacknowledged orders.		No					
Discharge Notice Letter (Private In	Patient is missing follow-up provider		NO					
V Discharge Houce Letter () Hate III								
h h	npatient AVS							
	Insulin Sliding Scale Instruction	IS						
	Insulin Sliding Scale Instructions by Emily B Albert, MD at 11/28/2016 1:52 PM							
	Author: Emily B Albert, MD Service: General Medicine Author Type: Physician							
	Filed: 11/28/2016 1:54 PM Date of Service: 11/28/2016 1:52 PM Status: Signed							
	Editor: Emily B Albert, MD (Physician)							
	HIGH Dose Insulin Patient Scale							
	Blood Glucose (mg/dl)	Eats Breakfast, Lunch & Dinner (not w	vith snacks)					
		<ul> <li>Have 15 grams of carbohydrates such as: 4 ounces of</li> </ul>	juice 8 ounces of milk 4					
		glucose tablets	Juice, o ounces of milk, 4					
		<ul> <li>Wait 15 minutes, check blood glucose again</li> </ul>						
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		· If you wont be having a mean of 2-5 hours have a sma	an shack					
	71 - 90	6 units						
	91 - 130	8 units						
	151 - 200	10 units						
	201-250							
	251 - 300	16 units						
Print Language: English	301 - 350	18 units						
	351 - 400	20 units						
Print All Checked		If blood sugar is greater than 401 call your physician fo	r instructions on how much	~				