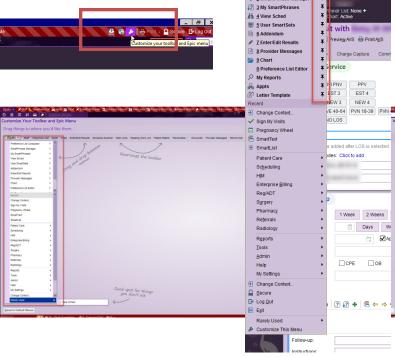


#### Personalization



The wrench in the top red bar will let you place shortcuts from the Epic button on to your top bar. Good options for clinicians: Staff (to send reminders), Telephone Call (to start a new telephone encounter), Chart (to review), Enter/Edit results (if you frequently do this), Web Links (if you want to get in to UpToDate from your home computer). Other items that you use can be "pinned" to the top of the dropdown menu. Other items that you rarely use can be put in the rarely used folder.

Hint: it's easy to click on a button, and if you have to open a menu to find something, the shorter and cleaner it is, the quicker to find what you need.



🖁 Appts 🏓

ndr List: N

with

PNV PPV

eview AVS 🖶 Print AVS

EST 4

NEW 4

added after LOS is s

1 Week 2 Weeks

? ? + 6 + 4

CPE

Days W 🗎 🗹 Ap

OB

Charge Capture

erence List Com + 2 SmartPhrase Mana

# Navigator Activities sit with 1/25/18

Within each navigator, you can adjust the left side-bar menu. You can have which buttons show, if they're fat or thin (not applied to all buttons), and for the activities that you don't use, put them in rarely used. The system also has information on the right-hand side of the page about what activities you use the most.

Hint: This has to be done for each type of encounter (office visit 1, telephone encounter, post-op, ob check, etc). This is why we want to limit the number of navigators that you use.

LINE Office Visit INVE LINE Total Activity UP

	Within an Activity				
'≊, ⊜, €, ← ⇒ ▼	Interp: No Last Not Documen Pt Rmndr List: None + Lang: English BP: n MyChart: Active Pulse		-	⊙     ♪     Notes       ♥     ♪       ♥     Progre	Reports ss Notes 4
	Vitals from encounters over the past 540 days     Orowth Chart     P     Relevant Encou     Date     Type     Choose the Order You Prefer to Work     Cick and trap sech section to the spot you prefer. Click the Reset button     at the bofts or sectore the organia settings. Changes that you make here     will apply to similar encounters.     AH_AMB_WS_T_CTC_OB_QUICK_REV_TAB     Reviewable Topic     GOB/Gyn History	tters (Maximum of S vields) * Department	Provider Description	ption	⑦     Notes     Roborts     Stan Vlat       *     Show Card Colors     *     *       *     Show Card Colors     *     *       *     Customize Your Navigator     *     *       ?     View Keyboard shortcasts for navigators     *     *       ?     View Keyboard shortcasts for navigators     *     *       ?     Pre-op     \$     See All Notes     C Retesh       No notes of this type filed.     *     *     *

Sometime, they can be tricky and hide the wrench in the symbol for the drop down menu. You can arrange the order of the activity in to what works best for you.

Hint: you cannot move an activity from pane to pane, you can only adjust order within a given pane.



exam

exam

 Prenatal Vitals Genetic History

 Results Console OB Episode Notes

 History 📼 Dating

 $\mathbb{R}$ 

You can make buttons for

	.OS Follow-up	Charge Capture		1						
I	🕫 Level of Ser	vice								
	EST2 ES NEW 2 NE PVE 18-39 PVE 4 PO FU NO 1 LOS:	N3 NEW4 4044 [PM153] PM4544 005 66d ahr L08 is selected	k k	)						
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L	bining area. Parc in	warowoc jo								
T	🛱 Follow-up			ï						
	Return in: (from 2/1/2019)	1 Week 2 Weeks 3 Weeks 4 Weeks 3 Months 6 Months 1 Year								
	Return on:	Approximately	· · · ·							
	PRN:		•							
	For	CPE 08 thu media thu US IUD check PP visit pessary che	ick 🗌 vag cuff check 🖉							
	Collapse ♠ Check-out note:	- Send Charl Upon Closing Workspace								
	£9 ∜5 kn na	? 2 + E ← → ≤ = Recipient Modifier	Abor or							
			Add My List 👻							
			Build My Lists							

your common LOS, time for next follow-up, and reason for follow-up



You can make buttons for the most common note templates that you use.

Hint: name them something short and sweet, that you'll remember, to save space and keep it tidy.

## Pre-Charting. What can and cannot be done...

male, Not Documen Pt Rmndr List: None + MyChart: Active	Interp: No Lang: English	Weight: 98.9 kg Alle Last BMI: 37.42 kg/m <sup>2</sup> BP: none Pulse: None	argies: (	es. Codeine
Pre-Charting				😳 🕐 💦 Notes 👻 Reports
Alew arrived. In this situation, you will click on "St Start the Visit button may only be clicked wh Notes written during pre-charting are access If the patient never arrives, any notes or uns forward to a rescheduled visit. Signing of orders within this activity by clinic:	art the Visit", however this will not arriv en the patient is in front of you! bible to you and other clinicians when i igned orders are deleted by the system al nursing staff is limited to only those	e the patient for the visit. within this activity. In Chart Re n 30 days after the appointmen orders that have been reviewe	eview, ti nt date ed with	m room and you open the encounter and the pre-charting activity opens, please alert the front desk that the patient needs to be w, the notes are only viewable by the note author; other clinical start will not be able to view these notes elsewhere in the chart. alex: Within that 30 as timeframe, the author of the note can view any previously within notes on the patient and copy there will the provider and are necessary to be completed prior to seeing the patient (if e. pre-visit us, pre-visit x-ray). All other orders we shart the visit.
Problem List Visit Diagnoses BestPractice				Meds & Orders
	<ul> <li></li></ul>	lx √Resolve 🕞 lx √Resolve 🕞 👻	*	Medications & Orders Patient-Reported Outpatient and Clinic-Administered Medications Cutation thereported Patient-Reported Patient-Repo
Common post-op Menorrh Cont couns Cystor	ele Uterine prolapse bladder IUD check	ie F		Last Reviewed by on 11/J/2018 at 8-45 AM

#### You can...

Review and edit problem, including A/P notes

Review and add visit diagnosis

Review and refill or d/c any meds (just don't sign your cart until the patient is seen and those actions are confirmed)

Start a progress note, H&P, or procedure note—can use all of your normal tools

**Reconcile Outside Information** 

Please new orders (imaging, labs, medications) - again, do not sign until the patient is seen and the need for these are verified

**Review BPAs** 

# You cannot...

Place LOS

Place a f/u recommendation

Insert patient instructions

(essentially, you can't do anything that will indicate to the system that the patient is arrived and checked in)

#### Q. Why should I spend my time pre-charting. How could it possibly help me?

**A.** You can likely get a lot more done in 30 minutes of focused, uninterrupted time than during any amount of time in the middle of clinic. Clinic brings a lot of distractions...patient questions, peer comments, nursing questions, phone calls, emails, etc. Getting yourself prepped and set up for the day will allow the day to run more smoothly once you're in the middle of it. Additionally, reviewing your schedule before will allow you to have staff make adjustments as needed to ensure a smooth day.

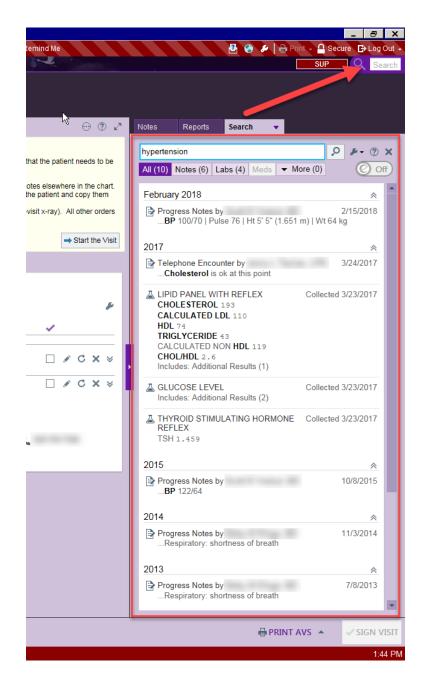
# **Chart Review**

Notes/Trans Imaging I	Lab Medicat	ions Encounters	Procedu	ures Surgeries Co	nsents Media Cardiac Dx I	etters Episodes Other Orders	Misc Reports LDAs			Ju -
Refresh (1:36 PM)	Add to	Bookmarks Mor	e <del>•</del>							
Filters Exclude	Me 🗌 Obst	etrics Gynecolo	Aurora	Obstetrics G	Consult Notes 🗌 Procedure Note	es 🗌 Provider Notes 🗌 Adv Di	r Notes 🗌 ob			
Department Specialty	Author			Date of Service	File Date	Туре	Author		Encounter Type	Cosigner
Encounter Date Encounter Department	Author Typ Service	De	Recent	Visits						
Encounter Type	Tags		_							
Туре	Tag Creat	or		11/09/2018	11/09/2018 10:28	Progress Notes		ů	Office Visit	
Episode Status	Diagnosis Author Sp	ecialty		11/09/2018	11/09/2018 08:43	Progress Notes		ů	Office Visit	_
epartment Specialty contains		+		10/09/2018	10/09/2018 13:34	Progress Notes		ů	Office Visit	
Department Specialty	Count	Last Date		10/09/2018	10/09/2018 12:59	Progress Notes		ů	Office Visit	
Emergency Medicine	9	08/29/2017	6 Mon	ths Ago				_		
Family Practice	10	10/09/2018		07/31/2018	07/31/2018 10:00	Patient Instructions		ů	Office Visit	
Laboratory	1	09/16/2013		07/31/2018	07/31/2018 10:06	Progress Notes		ů	Office Visit	
Neurology	19	07/31/2018		07/31/2018	08/07/2018 08:05	Progress Note/Visit Note		ů	Office Visit	
Obstetrics & Gynecology	49	12/01/2017		04/26/2018	04/26/2018 14:13	Progress Notes		ů	Office Visit	
] Ophthalmology	15	11/09/2018		04/26/2018	04/26/2018 13:51	Progress Notes		ů	Office Visit	
Orthopedics	11	01/25/2017	1 Year	Ago				_		_
Rehabilitation Services	8	01/18/2017		01/11/2018	01/11/2018 09:41	Patient Instructions		å	Office Visit	
Surgery	6	12/28/2016		01/11/2018	01/17/2018 18:20	Progress Note/Visit Note		ů	Office Visit	
Urgent Care	24	06/18/2017		12/01/2017	12/01/2017 14:30	Progress Notes		0	Office Visit	
] <unknown></unknown>	13	11/18/2016	R	12/01/2017	12/01/2017 12:47	Progress Notes		0	Office Visit	
				10/05/2017	10/05/2017 15:15	Progress Notes		ů	Office Visit	
Save this Filter for Qu		Lator	<b>1</b> •	10/05/2017	10/05/2017 09:42	Patient Instructions		ů	Office Visit	
Save this Filter for Qu Select filter criteria or apply			<b>N</b>	10/05/2017	10/09/2017 12:32	Progress Note/Visit Note		ů	Office Visit	
save.			1	09/14/2017	09/14/2017 11:09	Telephone Encounter		¢	Telephone	

# <u>Tips:</u>

- Use Filters. You can filter any of the tabs by a plethora of options. You need to take 10 minutes to
  play around with it to see what works for you. Examples: all encounters associated with a given diagnosis; all medications every prescribed from a certain pharmaceutical class; all the lab results for a
  specific lab. Click the filter button to make that window appear and disappear
- 2) **Personalize (the wrench).** You can change what order the tabs are in, and the first tab will be the default that the window opens to every time. You can change the color coding on the tabs. You can adjust the short-cuts to filters.

### Remember, the most useful box in the world...



#### **Chart Search**

This box will search a patient's chart for anything that has that given word. For instance, in this case I searched hypertension. The results are going to be any progress notes with the word hypertension anywhere in them, any labs ordered with an associated diagnosis of hypertension, any medications with an associated diagnosis of hypertension, and procedures associated with hypertension, etc. Any document that can be "read" by Epic will show up.

Hint: What will not show up? Documents that have been scanned in to Epic, usually under the media tab. Those come in as a picture, therefore are unable to be "read" by the search engine.

## **In-Basket Management**

My Messages	≶ 🟠։	the second second	In Basket > Results 3 unread, 4 total				Sg	ort & Filter 🚽 🗐
Attached In Baskets	§ QuickActions	- X Done 🕌 Pat Si	rch 🔸 🐛 Telephone Call 🎽 Chart 🗙 Dn Ris	📷 Ris Act 📑 Result Note 🕞 QuickNote Other Actions 🕞				
1 In Basket	/2 /3 Status	Visit	Patient	Test	Resulted	A Rsit Date	MyAHChart	
Results (1)	t ? Read	01/30/2019	Second Second	BMP; UA MAN MICRO CULT INDICATED	3 of 3	01/30/19	Declined	
Canceled Ord (1)	t ? New	01/30/2019	Contract of the local division of the local	LIPID PANEL	2 of 2	01/30/19	Code Exp	
In Basket	+! ? New	01/30/2019	contraction of	ABO Group/Rh; TREPONEMA PA; HIV ANTIGEN/ANTIBODY; HEP C AB	7 of 8	01/31/19	Active	
Chart Completion (33)	? New	01/30/2019	Sector Sector S	URINE CULT	Inpatient	01/31/19	Active	3
Results						4		-
Charts (56)						-	-	
Studies to Sign (1)								
In Basket								
Results (3)								
Canceled Ord (2)								
Charts (1)								
My Unsigned Orders								
Outside Messages								
Staff Message								
In Basket								
D								
Results (1)								
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CC'd Charts Follow Up Charts (1)	<				5			
CC'd Charts Follow Up Charts (1)			Demog 😕 Pt Info 🚊 Meds/Probs 📄 Vitals/La	bs 🗄 MyLastNote 🗄 Help 🛛 🔁 1 Normal result 🗔 2 Normal papHPV 🗔 2 Norm	5 on! Manage C	luickActions		
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CCG Couris Follow Up Charts (1) Patient Call	Result     Need Interp. N     Language: Eng     Allergies     Panicillins     Sufix Antibiot     Patient Portal:     lext Appt With	t P AHC Results D C	BASIC METABOLIC PANEL Status: Final result: Visible to patient: No Fasting Status Sodium Potassium Chloride Chloride Carbon Dioxide Anien Gap Glucose	(Inaccessible in Patient Portal) Dx: Dysmenorrhea: Endometriosis; Preop ex Ref Bange & Units 1 hrs 2 135 - 145 mmol/L 2 34 - 51 mmol/L 2 49 - 107 mmol/L 2 10 - 20 mmol/L 2 6 - 99 mg/dL 2 2 - 20 mg/dL 2 - 2 - 20 mg/dL 2 - 2 - 20 mg/dL 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	1d ago 2.0 141 3.7 104 31 10 110 ^	lyr ago 2.5 140 4.0 104 28 12 72		
CCI Charis Follow Up Charis (1) Patient Call	Result     Need Interp. N     Language. En     Penticilins     Suife Antibiot     Patient Portal:     Next Appt With     Last Appt With	t P AHC Results D C	BASIC METABOLIC PANEL Status Final result Visible to patient: No Fasting Status Sodium Potassium Choride Carbon Dioxide Anion Gap Glucose BUN	(Inaccessible in Patient Portal) Dr. Dysmenorrhea: Endometriosis; Preop ex Ref Bange & Units 1 135 - 145 mmol/L 1 34 - 5.1 mmol/L 2 98 - 107 mmol/L 2 10 - 20 mmol/L 2 10 - 20 mmol/L 2 6 - 90 mg/dL 1 0.1 - 0.05 mg/dL 0	ld ago 2.0 141 3.7 104 31 10 110 0	1yr ago 2.5 140 104 28 12 72 13 0.59		
CCd Charis Follow Up Charts (1) Patient Call	Result     Need Interp. N     Language: Eng     Allergies     Panicillins     Sufix Antibiot     Patient Portal:     lext Appt With	t P AHC Results D C	BASIC METABOLIC PANEL Status: Final result Visible to patient: No Fasting Status Sodium Potasium Chioride Carbon Dioxide Anion Gap Glucose BUN Creatinine GrR Estimate, African American	(Inaccessible in Patient Portal) Dr. Dysmenorrhea: Endometriosis; Preop ex Ref Bange & Units 1 135 - 145 mmol/L 1 34 - 5.1 mmol/L 2 98 - 107 mmol/L 2 10 - 20 mmol/L 2 10 - 20 mmol/L 2 6 - 90 mg/dL 1 0.1 - 0.05 mg/dL 0	1d ago 2.0 141 3.7 104 110 110 .61	lyr ago 2.5 140 4.0 104 28 12 72 13		

There are so many things to say about the in-basket, so in order to not overwhelm, we'll just provide a few key tips:

1 & 2) Use the tabs on the left side of the screen to navigate between your inbasket, any in-baskets you are attached to, and your sent/completed work.

3) Use the wrench. First, click "report on bottom." That will orient you in the manner that the above photo shows. This is a much better configuration for a laptop. Then, you can play around with various setting to show or hide different columns. Only show the ones that you need—it's easier to see things in a less-muddled page.

4) Example of a useful column. Shows the patient's myChart status.

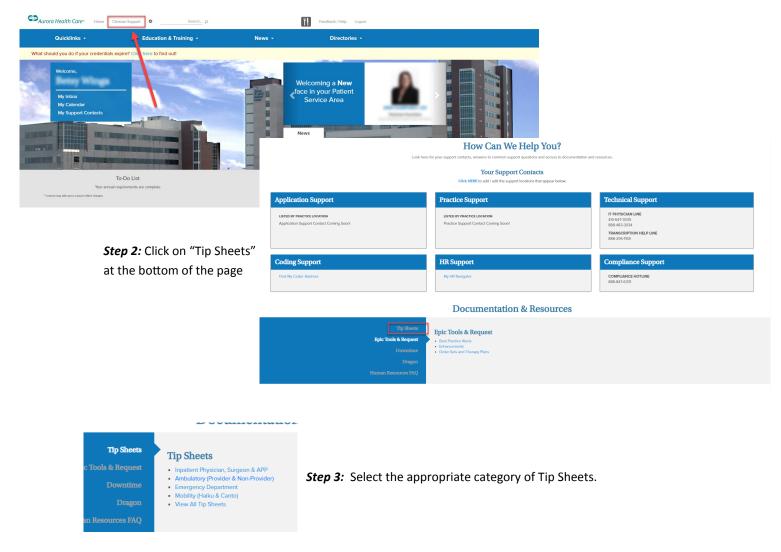
5) Quick actions can help you be more efficient with repetitive result notes.

Hint: Each section of the in-basket will need to be adjusted as noted above. That means, until you have something in your "cosign charts" folder, you cannot set it to show "report on bottom." There is no "apply all" button. Each folder is individualized. Check out the wrench in each folder to make it the most efficient for you.



## Where to Find Extra Help

Step 1: go to the Portal and click "Clinician Support"



*Step 4*: Search with key words for any applicable Tip Sheets. Push CTRL+F, then type in the key word.

#### Hint: There are directions at the top of the page if you forget how.

← → C A https://iconnect.aurora.org/DotNetNuke/Default.aspx?tabid=22216			💿 🖈 🔤 O ♀
an a	1 C	char 1/21 ^	~ X Oth
		1	
Ambulatory (Provider & Non-Provider)			SMART CHART
Did you know you can search this site using keywords? Follow these steps: 1. Press CTRL + F on your keyboard. 2. Type in the search hord. 3. Press EMTER on your keyboard to search. The first instance of your search word will be highlighted. To see the next instance of your search press ENTER again. 4. To discontinue your search, press ESC on your keyboard.			HOME     Clinic Informatics Support List     Training     Resources     Operations     Pront/Workque
ADVANCE DIRECTIVES     ANTICOAGULATION     BEST PRACTICE ADVISORY (BPA)     CARDIAC DEVICE IMPLANTS     CRART REVIEW     DIRAGNOST     DIRAGNOSTION NOTES     DOCUMENTION NOTES     DOCUMENTION NOTES     COCUMENTION NOTES     COCUMENTION NOTES     COCUMENTION NOTES     LETTERS     MEDICATION     OPARERS     PATENT LISTS     PRACTERENCES     DOLUMENTIC			Clurity Table Miscolaneous is