CRIS Hot Spots

Tuesday, August 24, 2004

WOO HOO!! We've been up for more than 48 hours! Nurses, you are doing a fantastic job! While we continue to identify issues that require attention, we have heard and observed that you are settling in and learning the CRIS.

Kudos to the CRIS Team for their continued support and guidance.

Here is a recap of the issues being addressed today:

1. **Medical Orders are Auto-Completing . . . Patient Safety Issue**
   - Last night, we learned pre-admit orders are auto-completing approximately 4 hours after the patient's inpatient admission . . . this is a technical problem being actively tested.
   - Please know that while you may have a Medical Care Plan printout with active orders, in some instances we have observed that orders have disappeared from CRIS. This means meals and drugs will not be sent, bar code labels for scheduled labs may not print, etc.
   - RNs should regularly review on-line the orders of their admitted patients. Notify the CRIS Café immediately if you no longer see orders or, you receive an empty Medical Care Plan.
   - ANYTIME you expect to see a medical order on a printout or on-line but don't, please help us and call the CRIS Café immediately.

2. **Protect your CRIS electronic signature**
   - Please log off CRIS before you walk away from a monitor. While CRIS has an automatic log-off feature after 5 minutes of inactivity, we have observed instances where the auto log-off did NOT occur. It is possible for a healthcare provider to unintentionally enter documentation into the medical record using your electronic signature.

3. **Print-Outs**
   - CRIS' Automatic Print-out feature has been temporarily turned off. This means that if you need a Medical Care Plan, Nursing Unit Worksheet, or a Medication Due Work List, you will have to manually request a print-out. Please refer to written instructions distributed to all PCUs last evening (8/23/2004).
   - If the manual request of printouts becomes burdensome, please let us know through your nurse manager.
   - Alternatively, consider viewing your patient's medical orders, medications due, and other tasks on-line.

4. **CRIS Interface Function**
   - The CRIS and MIS Interface is working inconsistently. An example of this is inaccurate reports of patient census on some PCU's.
   - For at least the next 48 hours, charge nurses will be asked to complete an "Emergency Preparedness Data Sheet" one (1) hour before the end of each 8-hour shift (0600, 1400, and 2300). ACs will pick up the sheets after 0600 and 2300. Nurse Managers will bring the Data

Sheets to their 1400 bed meeting. The Data Sheet will be used to validate the census interface between CRIS and MIS.

5. **Periodic CRIS Down-times**
   - Periodic planned down-times for CRIS systems checks are planned and will be announced overhead (as always done when MIS went down).

6. **More PCs are coming!**
   - In the next 24 hours, 7 additional Sun Rays will be deployed to PCUs who are in desperate need. DCRI staff are also reconfiguring wireless laptops . . . deployment of the laptops may take a little longer but they're coming!

7. **Ordering Take-Home Meds**
   - Ordering Take-Home Meds is a 3-step process. A prescriber:
     - Selects the "Take-Home Medications" session type BEFORE ordering the take-home drug. If a take-home med order is not sessioned accurately, the order should be discontinued and reordered.
     - Selects the drug, dose, route, and frequency
   - Completes "Take Home Medications" fields on the order form (e.g., number of units to dispense, child-proof safety caps needed, to whom the prescription can be released, etc.).
   - Take-Home Medication orders are verified by a pharmacist per usual. If timely discharge of the patient is critical, you can call the Pharmacy to request more rapid verification.

8. **Med/IV Replacement -** If you have dropped a drug on the floor or IF a drug bag has failed and you want to order a replacement, please complete a service requisition by following these steps:
   - Select your patient.
   - Click on Order Entry (clipboard icon)
   - Type in "Med/IV Replacement Therapy and open the Worksheet
   - Complete the required fields and submit.

9. **Medication Documentation**
   - Medications administered by a Respiratory Therapist are documented by an RT. You will find these drugs on the Medical Care Plan/Respiratory Therapy.
   - We learned that when a parenteral drug is ordered for administration more than daily (e.g., Vancomycin BID), only 1 drug product label prints out in the Pharmacy. This is being corrected. Until it is corrected, RNs should label parenteral drugs with a "Medication Added" label that includes the patient's first & last name, DOB, date/time of preparation, initials of the nurse preparing the admixture, drug name, and drug dose to the parenteral solution.
   - Meds Due List – carefully read your Meds Due list. When it prints out, it should contain a list of medications due to be administered on your shift as well as though drugs that have been documented against by the previous shift. You should consider following up with the previous nurse to resolve undocumented medications.

10. **Pass Orders** – must be entered as a conditional order; NOT as an active order.
    - When entered as an active order, a message is sent to Nutrition Services that the patient is on pass and nutrition trays will NOT be sent. This could be a problem is the patient has not yet left on their pass.
    - When patient has left on pass, release the pass order, document the patient is on pass, and suspend all active orders.

11. **Lab Issues**
    - Bar Code and Order Requisitions
        - Gentle reminder that the placement of the Bar Code label is critical for accurate processing of a specimen. If the label is crooked, backwards, or wrinkled, the lab machine cannot read the label. Review your "Laboratory Specimen Collection" poster for details.
        - If you cannot interpret the test name or the tube type on the Bar Code label, consider using the DLM website's search engines. When you type in a code, DLM site will locate the name of the test and/or the tube. If available, pictures of tubes will also appear.
        - Before sending down your specimen, check to see if the Order Requisition should accompany your specimen. Review your poster, "CRIS Test Name" for details
        - If you are an inpatient PCU collecting specimens from outpatients, remember to coordinate with the OP Clinic the sending of Order Requisitions and Bar Code Labels.
    - To validate that a specimen has been received in DLM, simply check the status in CRIS. If the specimen status has changed to "Specimen Received by Performing Department," be assured it has been received and is being processed. Results will post when completed.

12. **General Documentation**
    - Icons –
        - CRIS Icons (pencil, H, I, others) are fully defined in the CRIS Manual located on each inpatient, outpatient, and day hospital. Let us know if you cannot locate your manual.
        - Alternatively, you get help from CRIS by clicking on the "?" in the tool bar and then clicking on the icon in question. You should get a pop-up message describing the icon.

13. **Flags** – Remember to turn on your flags. If you do not turn on your flags at the start of your shift, you cannot be notified electronically of any new orders or lab results. You will know that your flags are turned on if an X appears in the "Flags Column" of Patient Lists.