

Epic Updates

Epic Upgrade

UnityPoint Health has kicked off another Epic upgrade project which will bring advancements in the way we serve patients in our communities. There will be visual changes to Epic, but we are not expecting mandatory classroom training. We will share information and education with you as it becomes available. The Upgrade **Go-Live** has been set for September 8, 2019.



Matthew McMahon, DO
CMIO/UPC - Cardiology

Updates to Diabetes Intuitive Clinical Guidance in the General Admission Order Set

Due to provider feedback received since the March 12th go-live, changes have been made to the Diabetes Intuitive Clinical Guidance build in the General Admission Order Set. The following changes went live April 30th:

- Decreasing the female carb limit to 180g and the male to 225g in each of the carb-controlled diets
- Changing the pre-selected correction insulin for Type 2 patients from the 1:12 panel to the 1:18 panel
- For patients >120kg, capping their daily basal insulin dose at the dose for a patient of 120kg.

Verbiage has also been added to the Correction Insulin panels to encourage providers to deselect the preselected order to see the other dosing options.

Morphine Equivalent Daily Dose (MEDD) Tools

Knowing a patient's daily opioid intake helps clinicians prescribe safe and effective doses of medications and assess the risk of dependency or abuse. Clinicians can now see the MEDD calculation for a patient directly within the order composer when placing an order for an opioid medication. This amount changes dynamically when the dose or frequency is changed within the order composer.

HYDROMORPHONE (DILAUDID) 2 MG tablet

Reference: 1. MicroMedex
Links:
Product: **HYDROMORPHONE HCL 2 MG PO TABS** [View Available Strengths](#)
Sig Method: **Specify Dose, Route, Frequency** [Use Free Text](#)
Dose: 2 mg **2 mg** 4 mg 8 mg
Prescribed Dose: 2 mg
Prescribed Amount: 1 tablet
Maximum MEDD: 64 mg MEDD
Route: Oral [Oral](#)
Frequency: [EVERY 3 HOURS PRN](#) **Q3H PRN** Q4H PRN Q6H PRN

Epic Support

Please contact one of the people below for Epic assistance or 1:1 training sessions (order sets, preference lists, smart phrases, etc.) to make Epic easier for you to use.

Matthew McMahon, DO, CMIO
Office: 319-364-7101
Matthew.McMahon@unitypoint.org

Rose Hedges, Provider Informatics Specialist
Cell: 319-538-8089
Rosetta.Hedges@unitypoint.org

Mary Henry, Physician Liaison
Cell: 319-361-1866
Mary.Henry@unitypoint.org

Call center for IT issues – 319-369-8181

Epic Updates -- Continued

Did you Know? – Radiology Result Smart Links

Many feel compelled to “pull in” imaging reports into their notes. The commonly used SmartLinks that display imaging results are often lengthy and include much text that is really not appropriate for a progress note, H&P, consult etc. These SmartLinks typically display both the “Narrative” and the “Impression” from the radiologic result.

Result Date: 4/17/2019
EXAM: DX CHEST 2 VIEWS CLINICIAN'S HISTORY: Shortness of breath - HISTORY REPORTED TO TECHNOLOGIST: Pt states he has fluid around his heart and lungs, leg edema, chronic shortness of breath worsening recently. Pt states he had rheumatic fever in 1960 which affected his left lung. Hx of colon cancer treated with surgery Jan 2019. COMPARISON: PA and lateral chest radiographs dated April 1, 2019. TECHNIQUE: PA and lateral chest radiographs are presented. FINDINGS: There is stable cardiomegaly. There is no pulmonary vascular congestion. There is a new elliptical consolidative density of the lingular segment, left lung, new since the previous study. There are stable small bilateral pleural effusions. Stable mild right perihilar infiltrates..

1. New elliptical density of the inferior left lingula. Given the short interval for development is likely due to focal atelectasis or possibly infectious process. 2. Stable mild right perihilar infiltrates. Electronically signed by: [REDACTED], MD - 4/17/2019 12:54 PM

There are SmartLinks that will display only the Impression limited to a user selected look back period. That look back period is renewed each time a new note is generated.

.UPHRADRSLT36HR	(looks back 36 hours) best for Inpatient use
.UPHRADRSLT2DAY	(looks back 2 days)
.UPHRADRSLT7DAY	(looks back 7 days)
.UPHRADRSLT180DAY	(looks back 180 days)
.UPHRADRSLT365DAY	(looks back 365 days)

Impression only using the above SmartLinks:

Xr Chest 2 Views

Result Date: 4/17/2019
1. New elliptical density of the inferior left lingula. Given the short interval for development is likely due to focal atelectasis or possibly infectious process. 2. Stable mild right perihilar infiltrates. Electronically signed by: [REDACTED] - 4/17/2019 12:54 PM

Presenting lists of outdated, irrelevant or useless information indicates a less than carefully considered assessment of your patient and is disrespectful of your reader. Don't contribute to the accumulation of meaningless information in your note. Use carefully selected limited SmartLinks when necessary, not always. Note Bloat is everybody's problem. Reach out to your St. Luke's hospital informaticists, physician liaison office or me for help.

Nice to Know

Ideal Body Weight Added to Sepsis SmartPhrase – The patient's ideal body weight has been added to the .SEPSISBMIBOLUS SmartPhrase. The sepsis bolus statement is used within the sepsis order to clarify why a bolus was given to the patient.

Difference in Recorded Weight – There is now an additional row in the Height/Weight flowsheet group that will show the difference in recorded weights in kilograms as well as grams.

Reason for Exam Selection Update for Echos – The diagnosis list in the "Reason for Exam" field has been pared down for the following orders: Echo 2D Comp (ECH10) Echo Ltd (ECH11)
TEE w/ Poss Cardioversion (ECH15) TEE/Echo Transesophageal (ECH01)

New Infusion Therapy Plans Available – The following new therapy plans have been added:

- Cyclophosphamide (CYTOXAN) Infusion Therapy Plan - Fixed Dose Regimen
- Cyclophosphamide (CYTOXAN) Infusion Therapy Plan - Weight Based Dosing
- Migraine Headache Infusion Therapy Plan (Not DHE)
- Pegloticase (KRYSTEXXA) INFUSION THERAPY PLAN
- Reslizumab (CINQAIR) Infusion Therapy Plan
- Tocilizumab (ACTEMRA) Infusion Therapy Plan