

Referral to NEDS (New England Donor Services)

Referrals to NEDS are now automated through documentation in iView.

Nursing should **always** submit an eReferral **first** prior to calling New England Donor Services (NEDS). An eReferral is documentation of a heart beating or asystolic referral in the **Patient Expiration** band in iView. Upon signing the documentation, the referral is electronically sent to NEDS, and a follow-up phone call is then placed.



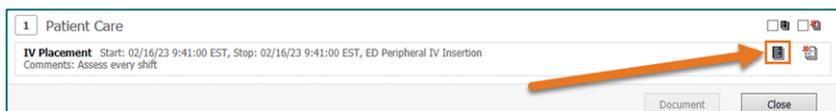
Click [here](#) for additional information on the Patient Expiration iView band and the automated referral workflow

Labor & Delivery Referrals

For fetal demise referrals to New England Donor Services (NEDS), do NOT make the eReferral in the mother's chart in iView if a chart **has not** been made for the infant. Instead, place a phone call to NEDS. If the baby does have a chart at time of referral, documentation should occur in the **Patient Expiration** band in iView which sends an electronic referral to NEDS from the baby's medical record. Guidelines for fetal demise referrals are included in the reference text attached to the DTA **Send Referral and All Updates to NEDS**.

IV Placement

The IV Placement task in LaunchPoint was updated to allow nurses to document that the task was done. Previously, the option to select **Done** was dithered out and staff were selecting **Not Done** and **Already Documented**. Now, charting done takes the nurse into iView to document that the IV was started.



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COMFORT Behavior Assessment

The COMFORT Behavior Assessment section was added back to the PICU Systems Assessment Navigator Band. The assessment continues to be in the Sedation and Delirium Assessment in the PICU Liberation Bundle Band and ICU Liberation Bundle Band. Documentation flows across these sections

Telemetry Necessity Form Update

The **Telemetry Necessity** form was updated to include **Other** in the **Patient Receiving** options. If **Other** is selected, a free-text box opens to be completed with the necessity reason. This assists clinical staff with adding a reason for telemetry necessity when the option is not available on the designated list.

PCA Documentation

Documentation of a patient's PCA is done within the Interactive View and I&O. The PCA Dynamic Group is located within the Lines Devices Procedures iView band. If the PCA section is not in view, pull it in using **Customize View**. For complete step-by-step directions, including documenting in the Intake and Output Band, please refer to this [flyer](#).

NOTE: Documentation of PCA volumes is not completed on the IV Medication Drips PowerForm. This form is for standard continuous medication infusions.

Cerner Patient Observer (Virtual Patient Observation) Reminders

Patients with C-Diff are excluded from being observed with the camera.

The camera should be cleaned between uses with Sani-Cloth wipes. **NO BLEACH** products or wipes containing bleach can be used on the camera.

The cameras **MUST** be stored plugged in so the camera can receive updates.

- Onboarding a patient will take longer with cameras that have not been plugged in during storage because the camera takes updates when the camera is turned on.

DO NOT turn the camera around when **privacy** is needed for the patient.

- Wave in front of the camera to get the monitor technicians attention and ask for Privacy Mode. The technician will usually keep the audio on during privacy mode so they can hear you when you tell them you are all done.
- If the monitor technician is trying to redirect a patient, they may not respond immediately because they can only talk into one room at a time. It is okay to proceed with your care and the monitor technician will change the camera to Privacy Mode. (The monitor technician is in a closed room.)
- When care is completed, wave at the technician to let them know you are all done.
- When in Privacy Mode, the technician sees a white background with an outline of the furniture and people in the room – sort of like an Etch-a Sketch drawing.

Click [here](#) for additional information on cleaning the camera.

Click [here](#) for additional information on nursing workflow for the camera.

Social Determinants of Health (SDoH)

The **Social Determinants of Health** PowerForm was updated to include an **Attestation** at the bottom of the PowerForm. **Nine questions** must be answered in addition to the **abuse/neglect** questions found in the **Social History** section that need to be completed annually.

The **SDoH & Abuse/Neglect social history questions, completed today** section which is at the bottom of the PowerForm need to be answered: **Yes**, along with the date entered at the top. **SDoH Questions 1-9 Completion date** field is what satisfies the recommendation to populate SDoH due date in one year.

Remember that completing the SDoH PowerForm **annually** is a requirement for all **Inpatient** and **Ambulatory** patients.

Click here to review the system policy for Social Determinants of Health: [NL System Policy for SDoH](#) (page 17).

Problem List Diagnosis Assistant Tool

Reminder: Diagnosis assistant tool can be used to further specify the unspecified problems and change how the diagnosis displays on the problem list.

- STEP 1:** Click the icon on the Problem List.
- STEP 2:** Click **box** for code.
- STEP 3:** Click **Select from list**.
- STEP 4:** Select a **diagnosis** from pop-up window.
- STEP 5:** Click **Save**.

The display on the problem list will change.

Priority	Problem Name	Code	Onset	Classif...	Actions
1	(HCC) Angina pectoris, variant	I20.1 (ICD-10...	--	Medical	<input type="checkbox"/> This Visit <input type="checkbox"/> Chronic <input type="button" value="Resolve"/>

Medication Clinical Decision Support (mCDS) Updates – *effective 02/22/23*

Sorting

In the mCDS window, interactions are automatically sorted in the respective interaction sections by severity and alphabetically.

Allergy

With the enhancement, section headings in the mCDS window will display (0) if no interaction is found.

Duplicate Therapy

If an interaction is selected to be discontinued from mCDS and the same order qualified for other drug-drug or duplicate interactions, the other rows for the interactions are updated with the information for the discontinue action.