## Northern Light Health

## Attributes display pertinent information about a patient or a bed location at a glance.

## Modifying Patient Attributes

Patient Attributes can be modified within the Patient List or the Bed Board.
STEP 1: Select the desired patient, then select the Modify Patient Attributes icon $\square$
STEP 2: The Modify Patient Attributes window will open. Multiple attributes may be selected by clicking in the box next to the attribute.

- Some attributes automatically populate based on various orders in the patient's chart.

Automatic attributes will display at the bottom of the window.

| -I. Modify Patient Attributes |  |  |  |  | $\times$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
| TESTING, PROD2 Male 15 years Birth Date: 4/30/06 MRN: 624544 FIN: 323471284Current Location: 5BLA-B579, 01 Altending Physician: TEST, PROVIDERDischarge Diagnosis: Allergic rhinitis, Post covid-19 condition, unspecified, Post-COVID-19 condition |  |  |  |  |  |
| Patient Attributes |  |  |  |  |  |
| $\square 24 \mathrm{HR} \mathrm{EEG}$ Monitoring | $\square 1$ to 1 | $\square$ Airborn/Contact | $\square$ Airborne Precautions |  |  |
| $\square \mathrm{C}$ - Diff | $\square$ Chemo Patient | $\square$ Chest Tube | $\square$ Complete Registration |  |  |
| $\square$ Contact/Droplet | $\square$ Contact Enteric | $\square$ Contact Precautions | $\square$ Continuous Pulse Ox |  |  |
| $\square$ COVID-19 PuI | $\square$ Currently Working | $\square$ Cystic Fibrosis | $\square$ Dialysis |  |  |
| $\square$ Droplet Precautions | $\square$ Elopement | $\square$ Enteric | $\square$ Fetal Demise |  |  |
| $\square$ Hazardous Drug Precautions | $\square$ Hearing Impaired | $\square$ Hospice | $\square$ Interpreter Required |  |  |
| $\square$ Isolation | $\square$ Lead-Lined | $\square$ Modified Contact | $\square$ Modified Contact/Droplet |  |  |
| $\square$ Near Nurse Station | $\square$ Negative Pressure | $\square$ Neutropenic Precautions | $\square$ No Pregnant Personnel |  |  |
| $\square$ Partial Restriction | $\square$ Patient Arrived | $\square$ Pediatric | $\square$ Region Patient |  |  |
| $\square$ Rehab | $\square$ suicide precaution | $\square$ Suicide Precaution | $\square$ Swing Bed |  |  |
| $\square$ TAVR Patients | $\square$ Total Joint | $\square$ Total Restriction | $\square$ Violence Precaution |  |  |
| $\square$ Visually Impaired |  |  |  |  |  |
| Patient Attributes (Automatic) |  |  |  |  |  |
| V Falls Risk (Order-4980137563) |  |  |  |  |  |
| $\checkmark$ Hearing Impaired (Order-urn:cerner:mid:orders.order.p108.east_me.cernerasp.com:5051003993) |  |  |  |  |  |
| $\checkmark$ Telemetry Monitoring (Order-5025107875) |  |  |  |  | $\checkmark$ |
|  |  |  |  | OK | Cancel |

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## Attributes

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## Manual Attributes

The below attributes can only be added manually to a patient and are not associated with documentation or order placement.


## Automatic Patient Attributes

Automatic Patient Attributes populate when specific orders or documentation are active in a patient chart.

| Attribute \& Icon | Order(s) | Documentation |
| :---: | :---: | :---: |
| 1 to 1 | Decision to Admit <br> Admission Order <br> Admission Order (DX) <br> Transfer Level of Care <br> Transfer Pending <br> Conversion <br> Discharge (DX) <br> When Special Placement Needs $=1: 1$ <br> Coverage | Adult Quick View Band Environmental Safety Implemented =1:1 <br> Observation |
| Comfort Care | Comfort Measures (order) |  |
| DNR | Code Status and Treatment Restrictions: <br> Resuscitation Status = DNR <br> (aggressive care unless restricted) <br> OR <br> $>$ DNR with Comfort Care Only |  |
| Hearing Impaired |  | Admission History Adult Form <br> Sensor Deficits <br> (Hearing Deficit Left or Right Ear) <br> Sensory Compensatory <br> Devices (Hearing Aid <br> Left, Right, or Bilateral) <br> Items at Bedside <br> (Hearing Aid Left, <br> Right, or Bilateral) |


| Hospice | Discharge Order \& Discharge (DX) <br> Discharge Status $=$ Disch/trans to hospice - med facility |  |
| :---: | :---: | :---: |
| Interpreter Required |  | Admission History Adult Form <br> Translator Required $=$ Yes |
| NPO | Diet Order <br> Diet Type = NPO |  |
| Rehab RHB | Discharge Order \& Discharge (DX) <br> Order <br> Discharge Status = Rehab |  |
| Restraints | > Non Behavioral Restraint Order <br> > Behavioral Restraint Order |  |
| Seizure Precautions | Precautions Order <br> Precautions = Seizure Precautions | Adult Quick View Band Environmental Safety Implemented > Precautions Observed $=$ Seizure |
| Suicide Precaution (no icon) | Precautions Order <br> Precautions = Suicide Precautions | Adult Quick View Band Environmental Safety Implemented > Precautions Observed $=$ Suicide |
| Visually Impaired |  | Admission History Adult Form <br> Sensory Deficits (Blind Left or Right Eye, Uncorrected Visual Impairment) Sensory Compensatory Devices (Glasses, Contacts) Items at Bedside (Glasses, Contacts) |
| Admission Order Active $\square$ <br> 目 $\qquad$ | Admission Order (NL Acadia) <br> Admission Order (DX) |  |
| Patient Placement: <br> <Location> | Decision to Admit: Patient <br> Placement = <Location> <br> $>$ Transfer Level of Care: Patient <br> Placement = <Location> <br> $>$ Admission Order \& Admission Order (DX): Patient Placement = <Location> |  |
| Airborne Precautions | Decision to Admit Order when <br> Isolation $=$ Airborne <br> > Transfer Level of Care Order when Isolation $=$ Airborne <br> $>$ Transfer Pending order when Isolation = Airborne | Adult Quick View Band Isolation > Isolation Activity and Type = Airborne |

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Patient \& Location Attributes

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|  | > Conversion order when Isolation $=$ Airborne <br> $>$ Precautions Order <br> > Nsg Precaution = Airborne |  |
| :---: | :---: | :---: |
| Contact Precautions STOP | Decision to Admit Order when <br> Isolation $=$ Contact <br> > Transfer Level of Care Order when <br> Isolation $=$ Contact <br> $>$ Transfer Pending order when <br> Isolation $=$ Contact <br> > Conversion order when Isolation $=$ <br> Contact <br> > Precautions Order <br> $>$ Nsg Precaution $=$ Contact | Adult Quick View Band Isolation > Isolation Activity and Type $=$ Contact |
| Droplet Precautions S00 | $>$ Decision to Admit Order when <br> Isolation $=$ Droplet <br> > Transfer Level of Care Order when <br> Isolation = Droplet <br> > Transfer Pending order when <br> Isolation $=$ Droplet <br> > Conversion order when Isolation $=$ <br> Droplet <br> $>$ Precautions Order <br> > Nsg Precaution = Droplet | Adult Quick View Band <br> Isolation > Isolation <br> Activity and Type $=$ Droplet |
| Neutropenic <br> Precautions | > Decision to Admit Order when <br> Isolation $=$ Neutropenic <br> > Transfer Level of Care Order when <br> Isolation = Neutropenic <br> > Transfer Pending order when <br> Isolation = Neutropenic <br> > Conversion order when Isolation $=$ <br> Neutropenic <br> $>$ Precautions Order <br> $>$ Nsg Precaution = Neutropenic | Adult Quick View Band Isolation > Isolation Activity and Type = Neutropenic |
| C-Diff | Decision to Admit Order when <br> Isolation $=$ C-Diff <br> > Transfer Level of Care Order when <br> Isolation = C-Diff <br> > Transfer Pending order when <br> Isolation $=$ C-Diff <br> > Conversion order when Isolation $=$ C-Diff <br> > Precautions Order <br> $>$ Nsg Precaution $=$ C-Diff | Adult Quick View Band Isolation > Isolation Activity and Type $=$ Contact Bleach |


| Isolation | Decision to Admit Order when Isolation $=$ Airborne/Contact or Contact/Droplet <br> Transfer Level of Care Order when Isolation $=$ Airborne/Contact or Contact/Droplet Transfer Level of Care Order when Transfer Reason = Isolation Transfer Pending order when Transfer Reason = Isolation Precautions Order when Precaution = Isolation |
| :---: | :---: |

## Location Only Attributes

Certain attributes may be applied to display information pertaining to the bed location.
STEP 1: Navigate to the Bed Board.
STEP 2: Select the desired room and click Location Attribute, then click Custom.

STEP 3: The Custom Location Attribute window will populate. Select the desired attributes and then click OK.
$>$ CABG Patients (no icon)
$>$ Ceiling Lift (no icon)
$>$ Certified (no icon)
$>$ Dialysis (no icon)
$>$ Handicap Bathroom (no icon)
> Hallway
$>$ Hospital (Acadia Only) (no icon)
$>$ Licensed (no icon)
$>$ Ligature Risk $P$
$>$ Neuro (no icon)
$>$ Obstetrical (no icon)
$>$ Oncology (no icon)
$>$ Orthopedic (no icon)


