

Slide	Caption(s)
Agenda	
4	<ul style="list-style-type: none"> • Activity View • Interactive View Basics • Intake and Output Basics • Managing the Documentation • Dynamic Group Documentation
Activity View	
7	<ul style="list-style-type: none"> • Here we are in Care Compass. I can tell by looking at the screen that the physician has entered the admission orders. How can I tell? <ul style="list-style-type: none"> ○ Check out the Plan of Care column. See how there are two items listed there? These are PowerPlans. ○ All Admission Orders are included in special PowerPlans. Ordered PowerPlans appear in the Plan of Care column on Care Compass. ○ This patient has two ordered. The first is the Ortho Trauma Admission/Transfer PowerPlan. This is the one containing the Admission orders. ○ The second is the Readmission Prevention PowerPlan. This is used at EMMC only, presently. • We can also see that there is an item in the Activity column. Let's take a look.
8	<ul style="list-style-type: none"> • The patient needs to have CSM Checks done. Let's go ahead and get started...
10	<ul style="list-style-type: none"> ○ Rather than launching a PowerPlan, this task launches what is called, "Activity View," in the Interactive View and I&O link of the patient's chart. • Activity View pulls together the various items (or lines) needed to document a particular assessment or task from throughout the various Interactive View and I&O bands. <ul style="list-style-type: none"> ○ Once signed, the data entered here will be distributed to those places in the bands. Once signed, the data entered here will be distributed to those places in the bands. Columns in Activity View display in intervals corresponding to the ordered frequency of the assessment.

- 10
- The leftmost time column will display with the current (or NOW) time. A nice thing about Activity View is the Now column opens automatically. Notice the checkbox at the top of the column.
 - This checkbox indicates that the column is open for documentation. This allows you to jump right in and enter the patient data.
 - When a section is opened for documentation, the first item will automatically open on-screen. The first item in this section is Carotid Pulse, Left. Note how the dropdown is open on-screen.
 - If appropriate, you could then just go ahead and start charting. If you don't need to document a carotid pulse you can press the TAB key on your keyboard to skip down to the item you would like to chart, or click into the desired cell with the mouse.
- 11
- This is an example of a single-select dropdown menu. Simply make your selection from the list.
- 12
- When you've made a selection from a single-select menu, the menu for the next item will automatically open.
- 13
- This is an example of a freetext field. If appropriate for the patient, you may type details into the field.
- 15
- Depending on the patient, the unit, and other clinical factors, it may or may not be necessary to document in all fields.
 - This patient has a fractured ankle. Therefore, it's probably not necessary to do all pulses with each hourly check. Perhaps the full assessment can be done with the change of shift.
 - Follow your unit's guidelines, directives, and procedures when documenting patient data.
- 18
- Notice that each selected result appears in purple font. Data will be purple until it has been signed.
 - When the information is purple, you still have the opportunity to easily correct the information, if needed, without having to amend the record.
 - As with PowerForms, the green checkmark in the upper left corner of the view window is used to sign the results when you are done.
 - The blue Cancel button can be used to close the open cells without saving the data.
 - I'm done and have confirmed that the data is correct, so I'm going to click the green checkmark now.
- 20
- The purple font changes to black, indicating that the results have been saved to the patient's record.

- 20 • Next, let's return to Care Compass to see what's changed there.
- 21 ○ The CSM task still shows in the Activity column. We need to refresh the screen. To do so, I will click the Minutes Ago button in the upper right corner of the window.
- 22 ○ Let's open the Activities window again...
- 23 • Great! The 15:00 CSM Check task has been removed, as expected. The task for the next hourly check is all that remains in the 2 hour view.

Checkpoint Scenario

- 25 You are caring for a patient who requires frequent neurologic checks. Access and document your neuro check using Activity View on the Interactive View and I&O link.
- 26 Scenario Details - Patient: TRAIN, EMHSIPPR16; Patient is drowsy as she is recovering from procedural sedation. Assessment largely unremarkable, except for: Voice is hoarse with reduced volume; She has reduced strength in bilateral lower extremities
- 27 • Please open the Activities window.
- 28 • Highlight the Current Neuro Check task.
- 29 • Click the Document button in the lower right corner.
- 30 • Click with your mouse to open the first cell in the Now column.
- 31 • This is a multi-select menu. You may select one or many answers, as needed. Make the appropriate selection based on the on-screen Scenario Reminder.
- 32 • HINT: When using multi-select menus, use the Tab key on your computer keyboard to skip to the next item. Do this with your left hand to keep your right hand free to type and use the mouse.
- This may take some getting used to, but once it becomes habit, it is the most time-efficient way to chart in the Interactive View and I&O link.
- Press the Tab key on your computer keyboard now.
- 33 • Make the appropriate selection based on the on-screen Scenario Reminder.
- 34 • Press the Tab key on your keyboard to continue.

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| 35 | <ul style="list-style-type: none">• Make the appropriate selection based on the on-screen Scenario Reminder. |
| 39 | <ul style="list-style-type: none">• Press the Tab key on your keyboard to continue. |
| 49 | <ul style="list-style-type: none">• Because you indicated that the patient's PERRL assessment was normal, it's unnecessary to address the Pupil Description or Reaction fields. Press the Tab key on your keyboard to skip this cell. |
| 53 | <ul style="list-style-type: none">• Type 3 into this pupil size field and then press the Tab key on your keyboard to continue. |
| 62 | <ul style="list-style-type: none">• Neither choice is appropriate, based on the on-screen scenario reminder. Press the Tab key on your keyboard to continue. |
| 69 | <ul style="list-style-type: none">• Notice that this field has a diamond/arrow icon beside it. This indicates that, depending on what you select, there may be additional items to address.• These are conditional fields and work similarly to sub-forms and conditional fields in PowerForms.• What you do in this particular item is select each answer that warrants further documentation. According to the on-screen Scenario Reminder, both of the patient's lower extremities are showing signs of reduced strength.• Make the appropriate selection. |
| 71 | <ul style="list-style-type: none">• The conditional fields are denoted by the open diamond icon. Make the appropriate selection. |
| 75 | <ul style="list-style-type: none">• The patient is able to move her legs as well as she could previously. She is at baseline. Make the appropriate selection. |
| 77 | <ul style="list-style-type: none">• Since you used the bilateral item, you have no need to document in the last two items. You are done, except for one step. Click the green checkmark to sign your work. |
| 78 | <ul style="list-style-type: none">• Please return to Care Compass by clicking the Care Compass button in the Actions tool bar in the upper left corner of this window. |
| 79 | <ul style="list-style-type: none">• Please refresh Care Compass. |
| 80 | <ul style="list-style-type: none">• Open the Activities window. |
| 81 | <ul style="list-style-type: none">• The task has been completed and removed from the Current section. |
| 82 | <ul style="list-style-type: none">• Great job! You have successfully documented in the Activity View band in Interactive View and I&O. |

Interactive View Basics**85 Adult Systems Assessment**

- 86
- Many times, you will need to document in the Interactive View and I&O link when there is no Activity View task.
 - Nursing support personnel, for instance, do not have Activity View tasks at all. There are also no tasks for basic nursing documentation, such as admission and shift assessments.
 - It's always a good idea to start from Care Compass, just in case there is a task.
 - A quick shortcut to the Interactive View and I&O link is available by right-clicking the patient line on Care Compass.
- 87
- As you can see, there are four available quick links. I'm going to choose Interactive View and I&O.
- 88
- The chart opens. We are looking at an example of the Interactive View and I&O link. This set-up is used by many nurses.
 - Depending on your position or work location, the navigator bands on the left will vary. For instance, most nursing support personnel see only a Quick View band plus Intake and Output.
 - The basics of how you document in and use this chart link are consistent for all staff, regardless of which bands are being used.
 - We are going to take a look at some of those basics now.
 - A Systems Assessment is, generally, the first band in the nurse's navigator. The actual band that appears will vary based on the patient's age and acuity.
- 89
- This is used to document the admission and shift assessments. Most system assessment bands are organized in a head-to-toe manner
- 90
- To help you to quickly identify where a new system assessment begins, each system has a divider in ALL CAPITAL LETTERS.
- 93
- The blue sections default open on-screen. You may find that the teal colored Show/Collapse All button in the menu in the upper left corner of the link can be helpful when you want to view only fields containing data.
- 95
- Use the click and drag function to adjust column widths, as needed.

100	<ul style="list-style-type: none"> I recommend that you open any additional sections you would like to chart in before starting to chart.
100	<ul style="list-style-type: none"> Doing so makes for a more streamlined and efficient charting experience. I'm going to open Pain Interventions now.
101	<ul style="list-style-type: none"> A major difference between charting in the "normal" Interactive View and I&O bands versus Activity View, is that the Now column does not open automatically. You will need to activate a column, section, or cell for charting when you are ready. Very often, you will want to activate an entire time column when documenting a patient assessment. To open an entire column for charting, you will need to double-click the cell containing the time for which you would like to chart.
102	<ul style="list-style-type: none"> I would like to chart in the Now column, so I'm going to double-click the cell containing "14:44 EST."
103	<ul style="list-style-type: none"> I could scroll down to confirm that all of the sections open on-view are now open for charting. Another way to show this to you is to collapse the sections. To collapse a section, you may click the carrot icon to its left.
105	<ul style="list-style-type: none"> Here we go... You can see now that there are checkmarks in the Vital Signs, Measurements, and Pain Assessment sections. These confirm that the sections are open for charting. Were I to continue, all of the sections highlighted in blue within the navigator would also have checkmarks in the view area. They are all open for charting in the Now column.
106	<ul style="list-style-type: none"> To start charting, you could simply click into the first appropriate field and begin as we did in Activity View.
107	<ul style="list-style-type: none"> Documentation in the column is the same as that we saw in the Activity View section. Use the Tab key to improve efficiency and address the fields pertinent to your patient. We are going to look at the Adult Quick View band next. You cannot switch between bands with unsigned results. Since I haven't charted anything, I'm going to click the blue Cancel button.
109	<ul style="list-style-type: none"> I'm going to select "Yes." I want to clear all unsigned results.

112 Adult Quick View

- 113
 - The Quick View bands are used by nurses and nursing support personnel. Nurse techs/CNAs generally see this band as the first in their navigator.
 - The actual band that appears will vary based on the patient's age and acuity.
- 113
 - This band has many sections for recording daily care, hourly rounding, and patient handoff activities.
 - As noted in the Patient Chart View eCourse, this and most other navigator bands default open in the Actual Time Scale view. This means that columns will appear for the times data was entered for the patient.
 - The default Timeframe is the Last 12 Hours. When the Actual Time Scale is used, the leftmost column is the Now column. This is where you will be able to concurrent to patient care activities.
 - It's very common to want only to chart a particular activity in this band. For example, patient rounding activities or the application of an ice pack.
 - To open a section for documentation, double-click on the blue-cell corresponding to the section you want to open.
 - Let me demonstrate with the Caregiver Rounding section. To open the section, I need to double-click the cell highlighted on-screen.
- 114
 - A checkmark now appears in that cell, confirming that the section is ready for charting.
 - The first item in the section will open automatically.
 - The Positioning Addressed item has a single-select menu. As soon as I make my selection, the next field opens.
- 115
 - Unsigned results appear in purple font. As long as results are purple, they are not part of the patient's permanent record.
- 116
 - If you reach an item that is not applicable or outside your scope of practice, the most efficient way to skip it is to press the Tab key on your keyboard to proceed.
- 122
 - When you reach the end of the opened section, you can either proceed with opening an additional section or sign the results.

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| 122 | <ul style="list-style-type: none"> • I'm going to go ahead and document some vital signs. Remember, to open the Vital Signs section, I simply double-click its corresponding blue cell. |
| 123 | <ul style="list-style-type: none"> • The Associate Monitor Check item is used on units with Bedside Monitor Dynamic Interface (BMDI) functionality. BMDI is available on many critical care-type units, as well as, certain other units with telemetry monitoring. <ul style="list-style-type: none"> ○ Association of the monitor with the patient is a critically important nursing responsibility that is done according to unit directive/policy. |
| 123 | <ul style="list-style-type: none"> ○ General requirements are that it is done upon admission, with each change of shift, and each time the patient is reconnected to the monitor (for example, upon return to the floor from a procedure). ○ Please be sure to reference available flyers, your unit's policies, and obtain your unit-based training if you are going to be using BMDI in your work area. ○ The Associate Monitor Check item has only one possible response, "Done." If you do not work on a unit with BMDI, you will want to use the Tab key on your keyboard to skip it. |
| 124 | <ul style="list-style-type: none"> • Anytime you make a selection in error, please remember that you can right-click the cell and select Clear to remove the result. |
| 126 | <ul style="list-style-type: none"> • Most measurement fields are numeric only. The units of measure display in the first column. Remember to use metric when entering data. |
| 128 | <ul style="list-style-type: none"> • Blood pressure cells are divided in two for systolic and diastolic measurements. Use the Tab key on your keyboard to quickly move between fields. |
| 131 | <ul style="list-style-type: none"> • You will find many Calculated fields throughout the Interactive View and I&O link. These are denoted by the calculator icon to the left. <ul style="list-style-type: none"> ○ Once the required data has been added, the calculated field will display a result. Note how the Cuff MAP Estimated now shows a result. |
| 132 | <ul style="list-style-type: none"> ○ Hover with the mouse over the item in the first column to see the formula used to calculate the result. |
| 133 | <ul style="list-style-type: none"> • In addition, anytime you see blue font, you may click to open a Reference Text window with more information. |
| 134 | <ul style="list-style-type: none"> ○ This can be particularly helpful if you are documenting findings on a scale that you are not familiar with, etc. Click the OK button to close the window. |

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| 137 | <ul style="list-style-type: none"> • I can't stress enough how helpful it is to get into the habit of using the Tab key on your computer keyboard to skip non-pertinent cells when documenting. • Use the Tab key on the left with your left hand to keep your right hand available for the mouse and entering data. • This may feel strange at first, but persevere. It will be worth it! |
| 145 | <ul style="list-style-type: none"> • The Cardiac Rhythm multi-select menu is divided into folders which can be opened by clicking the plus-sign icons. |
| 146 | <ul style="list-style-type: none"> • Let's say this patient has Normal Sinus Rhythm with a Bundle Branch Block. First I select the primary rhythm then I can add details. |
| 149 | <ul style="list-style-type: none"> • I will press the Tab key on my keyboard to proceed. |
| 156 | <ul style="list-style-type: none"> • Comments fields like this one allow you to type any additional information you'd like to convey. I don't really have anything to add, so I'll just click the Tab key to proceed. |
| 163 | <ul style="list-style-type: none"> • We are going to look at the Intake and Output band next. We cannot switch to another band as long as there are unsigned results. |
| 163 | <ul style="list-style-type: none"> <ul style="list-style-type: none"> ○ If we wanted to cancel charting, we could click the blue Cancel button. |
| 164 | <ul style="list-style-type: none"> <ul style="list-style-type: none"> ○ To sign the results, we simply click the green checkmark. |

Intake and Output Basics

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| 168 | Charting an Entire Time Column |
| 169 | <ul style="list-style-type: none"> • This is the Intake and Output band. Unlike most of the other clinical bands that utilize the Actual Time Scale, Intake and Output uses an Interval Time Scale. • Hourly columns appear and can be used to document patient data. • In the Interactive View Basics section of this eCourse, we looked at how to chart a section at a time. • We are also going to take at how to chart an entire time column and a single result at a time. • All three methods can be used in any band in the Interactive View and I&O link. |

- 169
- Let's imagine that we want to chart this patient's ins and outs for the 16:00 hour.
 - To open all sections on-view in the band, double-click the time at the top of the desired column.
- 170
- Checkmarks appear to confirm that all sections on-view are open and ready for documentation.
- 171
- Press the Tab key on your keyboard to skip items that are not pertinent or outside your scope of practice.
- 180
- Click the green checkmark to sign the results.
- 182
- Customize View**
- 183
- The sections that open in the view window by default for each band were selected based on the frequency of their use for all nursing areas.
 - There will be times when you will need to pull in additional items for documentation. I'm going to demonstrate how to do that here, but you can use the same method in any navigator band.
 - Let's imagine that this patient has vomited. Emesis is not open on-screen. What I recommend is to click to open the section in which you'd expect the item you need to appear.
 - I'm going to click to open GI.
- 184
- The GI section appears in the view area, but contains no items.
 - In the upper left corner of the view window, there is a button called, Customize View. It is highlighted on-screen.
 - This button is where you can go to manage what sections and items are seen on a particular navigator band for all people taking care of the patient using that band.
 - Changes made here are patient-specific, not user-specific. This also means you won't see added items for all of your patients, only this one.
- 185
- Let's take a look...
- 186
- Since we selected the section we expect to contain the item we need, the tool opens right to that section. You can always skip that step; you'll just have to find it in the list. I think this is faster.
 - So here we are. You can see that we have a couple options for documenting Emesis. You'll want to select the one that best meets the needs of the patient.

- 186
 - If this patient weren't on strict I&O, perhaps it would be enough to choose Emesis Count (where you just add 1 each time the patient vomits).
 - I'm going to choose Emesis, though. This will allow me to enter the volume.
- 187
 - Choosing Emesis will allow anyone to see emesis documentation by clicking GI in the navigator. However, it does not cause it to automatically appear in the view window.
 - I'm going to go ahead and put a checkmark in the Default Open column, so that it will be there face-up when anyone accesses this navigator band.
- 188
 - Click the OK button to apply the changes.
- 189
 - Emesis now appears on-screen.
- 191 **Charting a Single Result**
- 192
 - To chart a single result, simply double-click the cell.
- 194
 - You can repeat in additional cells, if needed. However, if you need to document on a number of items, it's usually best to use the entire column or section methods. These are far more efficient.
- 194
 - Click the green checkmark to sign the result.
- 196 **More on Customize View**
- 197
 - There will likely be times when you are looking for a section or item and cannot find it. The Customize View tool contains all sections and items within the given band.
 - This can be helpful when you are having trouble finding something.
- 198
 - At the bottom of the Customize View window is a button called, Collapse All. Click this button to reduce scrolling.
- 201
 - There is also a search field near the bottom of the window.
- 202
 - Type a search term into the field, if desired.
- 204
 - Or scroll through the list to find the item in question.
- 205
 - If you don't find what you are looking for, the item may be in a different band.

208 Charting a Second Result in a Cell

- 209
- There are times, particularly with I&O, when you will want to document a second result into a cell already containing one.
 - Example: When a patient has a can of soda within the same hour as one already charted.
- 210
- To add a result, right-click the cell and select Add Result.
- 213
- Click the green checkmark to sign the result.
- 214
- In Intake and Output, the cell displays the sum of the results. Other bands display the most recent result.
 - Each result is still saved separately. To see the details of this, right-click the cell and select View Result Details.
- 217
- The results will display, along with the date/time they were charted.

Learning Checkpoint

- 220
- You obtain orthostatic vital signs for your patient. After obtaining the vitals, the patient voids 500 mL urine. Document the patient's orthostatic vitals in the Adult Quick View band and then document the urine output in the Intake and Output band.
- 221
- Patient: TRAIN, EMHSIPPRN46 - Supine B/P: 144/82; Supine Pulse: 76; Sitting B/P: 142/80; Sitting Pulse: 82; Standing B/P: 128/76; Standing Pulse: 94; Cuff Location: Right arm; No reported symptoms; Urine out: 500 mL; Urine count: 1
- 222
- Click to select the Orthostatic Vitals section in the navigator.
- 223
- Since you will be documenting data into multiple lines of a single section, the best approach is to open the Orthostatic Vitals section for documentation. To do this, double-click the blue cell corresponding to the section.
- 224
- Type the systolic pressure and then press the Tab key on your computer keyboard to proceed.
- 225
- Type the diastolic pressure and then press the Tab key on your keyboard to continue.
- 226
- Enter the pulse and then press the Tab key on your keyboard.
- 233
- Choose the correct cuff location.
- 234
- The patient reports no symptoms. It's time now to document the urine output. There's something that must be done before switching bands, though. Do you remember what this is?

- 234 • You must sign the results. Go ahead and sign the results now.
- 235 • Good job! Click to open the Intake and Output band now.
- 236 • For the sake of trying out the different ways of doing things, please double-click into the cell corresponding to Urine Voided in the 12:00 EST column. (Use the single-cell method of charting.)
- 237 • Type the urine output and then press the Tab key on your keyboard to proceed.
- 238 • Since you only opened the one cell for charting, you have to double-click into the Urine Count cell to open it. Please do so.
- 239 • Type the Urine Count value.
- 240 • Please click the green checkmark to sign your work.
- 241 • Great job! You have successfully documented in the Adult Quick View and Intake and Output bands.

Managing the Documentation

- 244 **Insert Date/Time**
- 245 • Thus far, we have documented in existing columns. Sometimes, you will need to document results in the past.
 - In the Intake and Output band, you would just find the hourly column and document there. In the other bands, however, you will need to create a column.
 - Let's enter some documentation in the Isolation section using the Add Date/Time feature. First, I'll skip down to that section.
- 246 • To add a column, right-click the time at the top of any of the existing columns.
 - 247 ○ Select Insert Date/Time.
 - 248 ○ Type the correct time into that field. (If necessary, update the date, as well.)
 - (Please note that future charting is not allowed.)
- 249 • You can now proceed with charting in the new column. Just double-click the time at the top to open the entire column, double-click the blue cell corresponding to a section to chart there, or double-click into a cell to document a single result.

- 253
- Click the green checkmark to sign the results.

256 **Change Date/Time**

- 257
- It's always best to make sure you are charting with the correct date and time before you sign results. However, if you make a mistake and chart in the wrong time, all is not lost.
 - For this portion of the eCourse, let's document in the Provider notification section.
- 258
- This is where you can document interactions with the patient's physician, APN, or PA. I'm going to open the section for documentation by double-clicking the blue cell in the Now column.
- 268
- If you get multiple matches, click the binoculars button.
- 269
- Make your choice from the listed results.
- 270
- Click OK to close the window.
- 275
- Click the green checkmark to sign the results.
- 276
- Each function I'm about to show you can be done with a single result or with a range of results. I'm going to show you with a range, because it's more common to document several results at once than not.
 - Plus, handling several results at once is a little trickier. Let's imagine that the conversation with this physician occurred 10 minutes ago, but I forgot to use the Insert Date/Time feature.
 - To change the date/time of the results, first I will highlight them. You may use click and drag with the mouse to do this, or a combination of the mouse and Shift key or mouse and Ctrl key.
- 278
- Once the results are highlighted in black, right-click on any cell within the selected range containing a value. (Do not right-click an empty cell, as you will not see the menu.)
- 279
- Select Change Date/Time.
- 280
- Update the time field and, if needed, the date field.
- 284
- Click the OK button to change the date/time.
- 285
- The cells where the data originally appeared now contain notes stating that there was a Date/Time Change.
 - The results appear in the correct time column. Each result also has a blue delta symbol in the lower right corner.

- 285 • You will see this icon anytime a result has been changed after signing.

287 **Modifying a Result**

- 288 • I need to Modify the time I used to record the conversation, as well. To do this, I will right-click the cell and select Modify.
- 290 • Update the data.
- 293 • Finish by clicking the green checkmark to sign the result.

296 **Uncharting Results**

- 297 • If the wrong data is entered or if data is entered on the wrong patient, you can Unchart it. First, select the data.
- 300 • Right-click and select Unchart.
- 302 • You must choose a Reason when Uncharting. You can do this individually for each item, if desired.
- 302 • The same reason usually applies to all selected items, so it's quicker to use the dropdown near the bottom of the pop-up window.
- 303 • Choose a reason from the dropdown list. If none of the pre-formed sentences apply, you may choose Other. Other will require you to type a reason into an additional field.
- I'm going to choose "Charted on incorrect patient."
- 305 • Click the Sign button to complete the process.
- 306 • The cells will now display an In Error message.

308 **Adding Comments**

- 309 • Comments can be added before signing (this is the preferred method) or after. To add a comment before signing, first enter the result into the field. Then right-click.
- 310 • Select Add Comment.
- 312 • Type your comment and then click OK.
- 314 • Sign the result(s).
- 315 • Comments can also be added after signing. Simply right-click the result.

- 316 • Then select Add Comment.
- 317 • Type the comments.
- 318 • Then click the OK button.
- 319 • When comments have been added to a result, a black triangle will appear in the cell's upper right corner.
- When a comment is added after a result is signed, the cell will also contain the blue delta symbol.
- 320 • To view the comments, right-click...
- 321 • ...And select View Comments.
- 322 • The comments will display in a pop-up window. Click Close when done.

324 **Flagging Results**

- 325 • Result flagging draws attention to important patient data. Flagged results appear on the Flagged Events component on the Patient Summary link.
- Feel free to use result flagging whenever you document or locate documentation that is of particular significance to the patient.
- Important: Result flagging does not replace normal communication practices. Always follow your organization's protocols for reporting values/responses to the appropriate caregivers.
- As with Comments, results can be flagged before or after signing.
- 327 • This patient has an elevated temperature. Notice how the Temperature Fahrenheit does not update automatically, even though it is a calculated field based on the charted Temperature (in Celsius).
- You will see this occur whenever you use the single-cell documentation method instead of opening a section. This is important to keep in mind - especially when charting scale results.
- It's usually better to open the section so that the calculated result appears automatically. To get it to populate now, all I need to do is double-click the cell.
- 328 • To flag a result, right-click and select Flag. (Flag with Comment is also available.)
- 330 • A yellow flag icon will appear in the cell. Click the green checkmark to sign the results.

333	Duplicating Results
334	<ul style="list-style-type: none"> The Duplicate Results function can be used to copy forward charted results, when appropriate. Please refer to your organization's policies to ensure that the use of this functionality is permissible.
334	<ul style="list-style-type: none"> At the time of production, Inland Hospital prohibits use of this feature. At organizations where this function is allowed, it is extremely important to ensure that all data copied forward is accurate.
	<ul style="list-style-type: none"> Please be sure to follow the steps as outlined here. You may duplicate results at the sub-section, section, or column levels.
	<ul style="list-style-type: none"> It is best to use the lowest level possible to capture the results you wish to duplicate. For instance, when you choose to duplicate an entire column, ALL results in that column get duplicated.
	<ul style="list-style-type: none"> This means you would need to make sure all sections containing results in that column are reviewed before signing.
	<ul style="list-style-type: none"> PowerChart will allow you to duplicate your own documentation, or data documented by others. Once you have signed the duplicated results, those are attributed to you. So be very careful to check all duplicated data for accuracy.
	<ul style="list-style-type: none"> To duplicate results, start by left-clicking with the mouse on the blue-cell corresponding to the section or sub-section and time column you wish to copy.
	<ul style="list-style-type: none"> (For a column, you would do this on the cell containing the time.)
335	<ul style="list-style-type: none"> Then, right-click.
336	<ul style="list-style-type: none"> Select Duplicate Results.
337	<ul style="list-style-type: none"> Enter the date and time for the new documentation.
338	<ul style="list-style-type: none"> The results will appear in a new column with the selected date and time. Notice that they are in draft format (denoted by the purple font.)
	<ul style="list-style-type: none"> Review the data and make any corrections and additions. Clear any unwanted results.
342	<ul style="list-style-type: none"> When you are done, click the green checkmark to sign the results.

Learning Checkpoint

- 345 You have documented the application of an ice pack for the wrong time. Using the Change Date/Time function, move the results into the correct time column.
- 346 Scenario Details - Patient: TRAIN, EMHSIPPR46; The data entered in the Ice Pack Application section of the Adult Quick View band is all accurate, except for the time. The ice pack was actually applied at 13:30.
- 347 • Click to highlight the cell containing the word "Hand."
- 348 • Press the Shift key on your keyboard and then click the cell containing the word "Well."
- 349 • Right-click in one of the highlighted cells.
- 350 • Select Change Date/Time.
- 351 • Click into the time field.
- 353 • Type the correct time into the field (numbers only, military). Then click the Sign button.
- 354 • The results now appear in the correct column. Nice job!

Dynamic Group Documentation**357 Creating a Dynamic Group**

- 358 • We are now going to take a look at Dynamic Group documentation. Unlike regular sections, that are static in nature, dynamic groups can be created, used, and inactivated as things change with the patient.
- They are commonly used for things like lines, tubes, drains, and wounds. The Lines Devices Procedures bands are age-specific and provide a multitude of dynamic group options.
- We are going to take a look at one of the most commonly used dynamic groups - the Peripheral IV.
- Notice the icon highlighted on-screen. This opens the tool used to create a new dynamic group. I'm going to go ahead and click it now.
- 360 • The window that opens is often referred to as the "Label Maker." This is where you can enter basic information about the new group to help differentiate it from others.

- 360
 - A new group should be created for each additional line, tube, or drain. When used properly, there will be a group for each line the patient has and these will be easy to tell apart because of the descriptive label used for each one.
- Yellow denotes required fields. Be sure to be accurate when making your selections. Once created, the label cannot be changed.
- This is a peripheral catheter in the forearm.
- 362
 - Use the scroll bar on the right to address all fields in the window.
- 364
 - Some fields are multi-select. This field, for instance allows you to indicate laterality and additional descriptors.
- 365
 - Next, I'll choose the gauge.
- 366
 - If appropriate, indicate the catheter length. Click OK when complete.
- 367
 - The label will appear at the top of the new group. Adjust the width of the first column to see obscured information.
- 369
 - This is the time to identify if something is incorrect or missing in the label. If not corrected prior to signing the documentation, the only way to fix it is to Unchart the entire group and create a new one.
 - Do yourself a favor and make sure the label is correct before moving on with your documentation. If you find that the label needs to be corrected, simply left-click the label to re-open the label maker window.
- 370
 - Make the necessary changes and then click OK.
- 373
 - Once created, documenting in a dynamic group is pretty much the same as any Interactive View section.
- 373
 - To document the insertion, double-click the blue-cell corresponding to the new group. You may also use the Insert Date/Time feature, if documenting retrospectively.
- 374
 - The Activity item allows you to indicate whether you are inserting, assessing, or discontinuing the selected line. Depending on your response, different additional conditional fields will appear for charting.
 - I'm going to choose "Insert."
- 376
 - Insertion related conditional fields appear, as expected.
- 379
 - Unsuccessful attempts can be documented here, as well.

400 Using a Dynamic Group to Chart

- 401
 - Once a dynamic group has been created, it acts like a regular section and can be used for ongoing documentation.
- 407
 - Skip fields that are not pertinent at the time of documentation.
- 423
 - Click the green checkmark to sign the results.

425 Discontinuation Documentation

- 426
 - When it's time to discontinue the line, you will need to document the removal in the dynamic group.
- 430
 - Conditional items will appear when "Discontinued" is selected in the Activity field.
- 434
 - Remember to make use of available Reference Text resources if you come across a something you are unfamiliar with in this link.
- 434
 - I'm going to click to open the Infiltration Removal Score reference text.
- 435
 - Click OK to return to the documentation.

447 Inactivating a Dynamic Group

- 448
 - The great thing about dynamic groups is that they can be created as needed and inactivated when they are no longer necessary.
 - This keeps the band from being clogged with old, outdated lines and tubes that are no longer pertinent to current patient care.
 - Once you have documented the discontinuation of the item in question, you will need to Inactivate the group. To do this, simply right-click the group label...
- 449
 - And select Inactivate.
- 450
 - The dynamic group will become dithered (grayed out) and can no longer be used for documentation. It will remain in the view for as long as the selected Timeframe (in the gray bar at the top of the window) allows.
 - After that, it will be available via the Results Review link. It can also be viewed here, if the Timeframe is expanded to pull it in.

452 Reactivating a Dynamic Group

- 453
 - In the event that you inactivate the group before completing all documentation, it's a simple maneuver to reactivate it.
 - Simply right-click the label and select Activate.
- 455
 - Then update the documentation, as needed. Don't forget to inactivate it again, if needed, when you are done.

457 Uncharting a Dynamic Group

- 458
 - In the event that you need to Unchart an entire dynamic group (say, the label was incorrect and all data must be recharted in a corrected group) you must first Unchart all data within the group.
 - If the dynamic group has been used for a significant time, this might mean you will have to expand the Timeframe to find all data.
- 458
 - Best practice is to create the new dynamic group and rechart all corrected data into the new group before Uncharting the incorrect group.
 - For demonstration purposes, I'm going to focus in on the process of Uncharting the group, since we just reviewed how to create a new group.
 - As demonstrated in the Managing Documentation section of this eCourse, you can select the range of data to be Uncharted.
- 460
 - Next, right-click on any cell within the highlighted range containing a result.
- 461
 - Select Unchart.
- 462
 - Choose a reason in the dropdown near the bottom of the pop-up window.
- 466
 - If Other is selected, be prepared to add a reason in the freetext field to the right.
- 468
 - Click the Sign button to complete the process.
- 469
 - The results will be marked In Error. Now, to Unchart the dynamic group, itself, right-click the label and select Unchart.
- 471
 - Select a Reason.

- 474 • Click the Sign button when done.
- 475 • The dynamic group will become dithered (grayed out) and all contents will be marked In Error.
- 477 **Preprocedure Time-Out**
- 478 • Not all sections in the Lines Devices Procedures bands are dynamic group driven. There are regular sections, as well.
- It's good to know that there is a section available for documenting a preprocedure Time-Out. Use this to document universal protocol safety measures observed for invasive and/or high-risk bedside procedures...
- 479 • ...Such as the insertion of Central Lines.

Learning Checkpoint

- 481 You have inserted an indwelling urinary catheter in order to obtain accurate output measurements. Create a dynamic group and document the insertion incorporating the use of the Insert Date/Time function.
- 482 Scenario Details:
 - Patient: TRAIN, EMHSIPPR46
 - 16 Fr. indwelling urethral catheter inserted at 14:30 by TEST, USER
 - Indication: accurate I&O
 - Sterile field maintained; hands washed & sterile gloves worn
 - Balloon inflated to 5 mL; Leg strap; dependent drainage bag below bladder & off floor
 - Specimen sent to lab
 - Tolerated well by patient; No unexpected events; No complications; 1200 mL out
- 483 • Click to select Urinary Catheter in the navigator.
- 484 • Click the icon to add a urinary catheter dynamic group.
- 485 • Starting at the top of the label maker window, make the correct selections and then click OK.

- | | |
|-----|---|
| 489 | • Since the insertion was at 14:30, you need to use the Insert Date/Time feature. Right-click the time at the top of the column and make your selection. |
| 491 | • Type the time into the field and then press the Tab key on your keyboard to proceed. |
| 492 | • Open the new section for documentation. |
| 498 | • Type the last name of the person performing the procedure as noted in the on-screen scenario reminder (Test) and then click the magnifying glass button. |
| 500 | • Choose the correct person in the list and then click the OK button. |
| 503 | • Type the balloon inflation volume as noted in the on-screen Scenario Reminder and then press the Tab key on your keyboard to continue. |
| 507 | • Make the first appropriate selection based on the on-screen Scenario Reminder. |
| 508 | • Make the next appropriate selection. |
| 512 | • Type how the patient tolerated the insertion into this field and then press the Tab key on your keyboard to continue. |
| 516 | • Type the output as noted in the Scenario Reminder and then press the Tab key on your keyboard. |
| 517 | • Sign the results. |
| 518 | • Nicely done! You have created a dynamic group AND used the Insert Date/Time feature. |
| 520 | • You have reached the end of this eCourse! In the next eCourse, we are going to look at patient education resources and documentation. I'll see you there! |