

LSU Ophthalmology – ILH EPIC User Guide

How to complete charting for Dr. Barron

- 1.) Patients who are ready to be seen will have a check-in paper in the box in the supply room (same place where charts were placed pre-EPIC)
- 2.) Log in to Pelican.
- 3.) Double click on patient's name
- 4.) You will enter the patient's chart under a "Visit Navigator" to chart today's visit
- 5.) The tech's will have already entered the chief complaint and a brief HPI, history, and base exam (Vision, Refraction, IOP, pupils)
- 6.) Review the eye medications and make any changes as necessary
- 7.) Perform your exam and chart under "Ophth Exam"
- 8.) Record the results of any ancillary testing (HVF, OCT, Last IOP, Schirmers, Hertel, etc) in the free text box under the "Addl tests" tab under "Ophth Exam"
- 9.) Enter all visit diagnoses under "Visit diagnosis"
 - a. Particularly, if a diabetic patient does not have retinopathy, that diagnosis should be entered as "diabetes mellitus without ophthalmic complications"
- 10.) Write A/P under "Progress Notes"
 - a. Click on "Create Note" and NOT "Create Note in Note Writer"
 - b. This is where you can enter smart phrases for commonly encountered diagnoses such as NVS cataracts or DM without retinopathy.
- 11.) Complete Level of Service and Follow-up
 - a. Click the wand next to "LOS" and select the appropriate billing level
 - b. Enter Dr. Barron's name in the "Auth prov" box
 - c. Type "gc" in the modifier box to enter that the patient was seen by a resident
 - d. Select appropriate follow-up time and enter if it is for a specialty clinic in the "For" box (retina, glaucoma, etc)
 - e. Residents cannot enter billing for procedures performed (OCT, Refraction, etc) so Dr. Barron will do that
- 12.) Make all necessary medication changes under the "Medications" tab
 - a. When refilling prescriptions, be sure to change the "Class" to "Print" so it will print in Dr. Barron's room
- 13.) Once you are done charting and ready to present to Dr. Barron, click the "X" next to the patient's name
- 14.) DO NOT CLOSE THE ENCOUNTER
 - a. Dr. Barron will complete his charting after he sees the patient and will close the encounter when the patient is ready to leave

How to order an OCT

- 1.) Click "Order entry" then "New Order"
- 2.) Search for "OCT"
- 3.) Be sure the "Meds to be given TODAY in clinic" box with the bed is checked and select "GDX/OCT/HRT" with the bed icon
 - a. If you select the one with the house icon, that is indicating it is a future order to be completed after today's encounter and it will not be done
- 4.) Click "Sign/Nav" on upper toolbar

How to order a Humphrey Visual Field

- 1.) Click "Order entry" then "New Order"
- 2.) Search for "Vis field"
- 3.) Be sure the "Meds to be given TODAY in clinic" box with the bed is checked and select "VF Extended" with the bed icon
 - a. If you select the one with the house icon, that is indicating it is a future order to be completed after today's encounter and it will not be done
- 4.) Click "Sign/Nav" on upper toolbar

How to sign up a patient for surgery

- b. Open patient's chart
- c. Complete charting for patient's visit as usual
- d. On upper navigation bar on the right, click on the down arrow next to "Helper Navigator"
- e. Click "Surgical Helper Navigator"
 - i. This will open a new navigator on the left titled "Surgical Consult." This essentially adds a few more options to the regular "Visit Navigator" tab from the clinic visit
- f. Complete the H&P
 - i. Click the arrow next to "H & P Notes"
 - ii. Click "Create Note" under the "H & P Notes" Header to the right
 - iii. In the "Insert Smart Text" box, type "sur gen pre" (or .OPHHP)
 - iv. Select "Sur Generic Pre-Op History and Physical" and click "Accept"
 - v. Click in the text of the template and click "F2"
 1. This will highlight the first wildcard, which is the chief complaint. For a cataract surgery, I would usually just type "blurred vision, glare, etc" or whatever their complaint was and then delete the rest of the paragraph.
 - vi. Delete yellow-highlighted text that says "{HPI:18514}"
 - vii. Hit F2 to highlight past history. Left click "Past medical history, Past surgical history, Family History, Social History, Current Medications, and Allergies" then "right click to stick"
 - viii. The Review of Systems will then be automatically selected. I usually just select "a comprehensive review of systems was negative" and then right click

- ix. The physical exam selections will then be automatically selected. The “normal” findings are pre-selected. I usually just change the eye exam to reflect the patient’s exam. Complete the physical exam.
- x. The assessment will automatically pre-populate with the diagnosis from your clinic/consult note.
- xi. Complete the plan with the risks of surgery.
- xii. For the wildcard under number 2, I would usually type what surgery was planned and on what date
- xiii. Erase the rest of the note, including the attending attestation.
- xiv. Click “Sign”
- g. Complete the surgical orders and case request
 - i. Click “Visit Navigator” on left-most column
 - ii. Click “Smartsets” and type “oph” in search bar
 - iii. Select “LSU OPH CORNEA SERVICE ADMISSION PRE-OP”
 - 1. There is no cataract smart set. Go figure
 - iv. Click “Open Smart sets”
 - v. Click the blue text under “Case request”
 - vi. Primary Provider: Barron
 - vii. Department: ILH OR Periop Services
 - viii. Procedure Date: Date of surgery
 - ix. Patient Class: Hospital Outpatient Surgery
 - x. Procedure: Phaco, Vitrectomy, etc
 - xi. Laterality: Left/Right
 - xii. Operating Region: Eye
 - xiii. Anesthesia: MAC/General/Local
 - xiv. Questions: Skip unless not being discharged home after surgery
 - xv. Status: Future -> Expected: Date of surgery
 - xvi. Change “Diet NPO time specified” date to day of surgery and unselect “POCT glucose” if patient is not diabetic. Leave the rest of the boxes checked and unchanged.
 - xvii. Medications Tab
 - 1. LSU Intravenous Fluids: Select Saline Flush
 - 2. DVT Risk: Select Low Risk
 - 3. Vitreo-Retinal Procedure Medications
 - a. Mydriatics Pre-Op
 - i. Select Tropicamide and Phenylephrine
 - ii. Under each, select eye, change date to date of surgery, and type “60” for wildcard under “Admin. Inst.”
 - iii. Click Accept
 - xviii. Additional Smartset Orders
 - 1. You must order a BMP, CBC, and EKG on every patient. This is the place to do it
 - 2. Click “Add Order”
 - 3. Order above tests. Click Accept.
 - xix. Click Sign

- xx. Associate all orders with eye diagnosis with the exception of the labs, ekg, and cxr. Add a diagnosis called “pre op testing” and associate the labs, ekg and cxr with that diagnosis and click accept
- xxi. Phases of care:
 - 1. Case request must be “Procedure Scheduling Request”
 - 2. CBC, BMP, and EKG must be “Pre-Admission Testing” which you usually have to add on bottom left
 - 3. Remaining orders can be “Pre-Op”
 - 4. Click Accept
- h. Have patient sign consent form. Robin must witness it before it is scanned.
- i. Complete lens order (found in cabinet near Dr. Barron) form and fax to OR
- j. Have patient meet with nurse so they can schedule their outpatient pre-op appointment in EAC on 3rd floor at ILH

How to Pre-op Patients on day of surgery

- 1.) After logging in to EPIC, click on “ORs at a glance” on the top toolbar
- 2.) Select today’s date and double click on your patient’s name in the schedule (should be in OR 07)
- 3.) Select Pre-op Navigator on left side bar
- 4.) Complete H&P Interval note
 - a. I usually just write “No changes to H&P since note dated ___” and sign it
- 5.) Mark patient
- 6.) Confirm consent has been signed under “Media” tab under chart review tab

How to Discharge Patients home on day of surgery

- 1.) After completing surgery, log in to EPIC and click on “ORs at a glance” on the top toolbar
- 7.) Select today’s date and double click on your patient’s name in the schedule (should be in OR 07)
- 2.) Select Post-op Discharge Navigator on left side bar
- 3.) Complete Brief Op note
- 4.) Complete Op Note
 - a. You can dictate but Dr. Barron has several Smart Set templates that he will likely prefer you use
- 5.) Complete discharge orders
 - a. Click on Med Reconciliation
 - b. Choose which medications to continue or discontinue and click next
 - c. Open Gen Discharge to Home order set and complete orders
 - d. Add post-op drops to Additional orders and change the start date to POD 1
 - e. Sign orders
- 6.) Complete discharge summary
 - a. Every patient needs a discharge summary, even if they have outpatient surgery

- b. To do a D/C summary, click on “notes” on the side navigator, then D/C Summaries, then new note
 - c. Complete the D/C summary. There is a Smart Set template titled “Gen Medicine IP Discharge” or something similar that I use.
 - d. I have not figured out how the D/C summary is linked to that stay, but Dr. Barron is looking in to it. This outline can be updated once that is figured out.
- 7.) Give the drops to the patient’s family to bring to clinic tomorrow.

Pre-saved templates

.OPHHP

.OPHCATOPNOTE

.OPHDISCH

.OPHCONSULT

Pre-OP H&P

Cataract OP note

OR Discharge summary

Useful for inpatient/ER consults