1. **AP/OR Workflow issues** – Beaker & Optime Teams are working on a process with the OR’s to develop a workflow around this concern.

2. **Blood bank workflow** – Review workflow - orders are sometimes not crossing to HCLL.

3. **Willow billing queue** – billing errors in willow continue to be in the 400s. Willow team is working on clearing out.

4. **Willow Ticket volume** – Ticket volume remains high; the team is working in a war room and making progress.

5. **Transport Paging** - Missing mode, priority, and comments in page, Pages are delayed.

6. **Misc. Bed Charges Accommodation Code** – ADT patient class and accommodation codes are mismatched on patient charts causing the wrong charges to drop. Issue is being worked on.

7. **Lab Specimen – Source & Collection**, the analyzer expects the information to cross in the interface. If the information is not entered in the system, the analyzer will stop. This is a workflow concern, not an issue with the analyzers.

8. **ASAP Charges** – ED / Infusion revenue flow; Facility charge calculator not working, manual entry.

9. **HAR’s** – A fix was in place, clean up was completed but an additional 37 were identified.

10. **Lab Charging** - The teams continue to monitor and work charging issues.

97% of our patients surveyed said they were satisfied with their experience and will use St Luke’s for future services.

“They had **all** the records – even my LVH records. When I called my St Luke’s PCP afterwards he had already received my records!”

“I was just telling my friends today what a great experience I had at St Luke’s!”

“St. Luke’s has always been my hospital and always will be!”

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**Attention End Users!**

If you see an alert, please make sure to Read and understand what the system is trying to tell you.

If the medication or blood product orders do not match during scanning or if there is any doubt about whether you are administering the correct product to the right patient **ASK QUESTIONS!**
Blood Administration Tips

The addition of barcode scanning prior to blood product administration is a new for all of us. This workflow not only provides for efficient documentation but when used correctly can greatly improve patient safety. Following a near-miss situation earlier today we would like to reinforce the following key points when administering blood products:

1. Prior to transfusion the patient and the blood product must be verified by two personnel, one of whom is a RN/MD/DO/PA
2. Using the patient ID bracelet the Patient Name, Medical Record Number and Date of Birth should be compared to the Unit Tag
3. Confirm ABO and Rh compatibility by comparing the Unit Tag and the Blood Product Label
4. Check bag labels for Expiration Date and Time
5. Resolve any discrepancies with the Blood bank prior to administration

Remember, barcode scanning provides an additional safety check but does not replace your responsibility to positively confirm the patient and the blood product. By following this process earlier today a safe experience was assured for our patient!

IMPORTANT END-USER COMMUNICATION:

- **Patient Movement** – Staff members in the Unit Clerk role remember to update the patient chart when there is patient movement. This will ensure patient documents are printed to the department the patient is located.

- **Mismatched Bed Accommodation Codes and Updating** – please reference this tip sheet in your Learning Home Dashboard to learn more about accommodation codes.

- **Dragon Training for Providers** - We will be starting up our Dragon training courses on 1/25 at St. Luke’s Center. You can register for class through myelearning.com Please work with your practice administrators.

- **Clinical EAD 2.0**: when you are leaving your workstation you MUST click on the red door. If you do not “red door out” of EAD it will cause issues when staff are transporting patients. (This is related to patient movement.)

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It’s quite clear that the many months of planning, collaboration, training and communications prepared us well for this Epic journey! We have a long history of supporting one another and this Epic implementation was an grand example of what a great team can accomplish when they are all focused on the same goal… implementing this state-of-the-art system that will bring many efficiencies to how we provide care, while continuing to provide excellent care and service to our patients, their families … and to each other!

*Morgan G. Mahl*

*Director of Human Resource Warren Campus*
New Tip Sheets on LHD:
See in red the important new tip sheets!

- Adding Reports to the Summary
- Admitting a patient in APU: Unit Clerks
- Bar CFaxing for AP: AP users
- Bar Code Scanning Tip (updated to reflect changes)
- Canceling a Case: Surgical Staff
- Capturing Pictures
- Creating Accommodation Codes after Discharge
- Charge One Time Supply and Implant (OpTime)
- Charge Poster One Time Supply and Implant
- Check in a Patient (CADENCE)
- Cosign a Note with and Attestation
- Daily Device Assessment Process
- Daily Round Activity
- Direct Admit (Orders)
- Discharge /Readmit & Direct Admit (Orders)
- Documenting Override Pull Medications in Epic: Nurses
- Electronic Signatures and scanning
- Entering Pre-Operative Orders from Paper (Willow)
- Faxing for AP: AP users
- Heparin (Willow)
- How to Look Up Supplies and Implants (OpTime)
- I/O Flow Sheet Documentation (ClinDoc)
- Infusions and Injections
- Lab Misc. Charge WQ (Lab)
- Medicare Number for IME (Pre Encounter Center)
- Micro Charging
- Mismatched Bed Accommodation Code and Updating
- Modify a Cases Length
- OB Discharge from Triage
- Payment Posting
- Payment Refunds (ADT/Cadence)
- PCA/PCEA and Medication Infusion Time Out
- Physicians assigning themselves to patient care-team: ED doctors and APPs.
- Printing Work Around ADT Labels
- Procedure Care Complete (OpTime)
- Reprinting Receipts (ADT/Cadence)
- Restraint Compliance
- RN review of Home Medications (PTA): RNs
- SLUHN Admit Patient in APU
- Sign In and Sign Out (ED Tech)
- Transferring a Patient
- Trauma Airway Note Documentation (ASAP)
- Trauma Evaluation Order Trauma (ASAP)
- Troubleshooting Rover
- Unit Charge Entry
- Using your In Basket ED Providers (ASAP)

Updated Tip Sheets on LHD:

- MEWS
- Add-on Tests: Lab Techs
- Barcode Scanning Tips
- Barcoding for medication and patient identification: Barcode scanner users
- Bloodwork – New Collection (esp. AM Blood Draws)
- Care Everywhere
- Changing Patient Accommodation Code (ClinDoc)
- Cosign/Attest ED Provider
- Legacy Insurance Registration – RTE Payer (Awaiting build & final review)
- Monitoring Packing Lists (Beaker)
- Ordering Bloodwork
- Rover (tap the plus sign) PCA and Nurse Managers
- Ticket to Ride
- Treatment Team Assignment for Trauma Providers
- Updated bar code scanning tips

Upcoming Tip Sheets (stay tuned!):

- Accudose PRN due times
- Advanced Dashboard: Customizing workspace
- SmartList to pull Labs for Providers
- Timed out RTE Responses
- Updating and Understanding Privacy Status
- Expiring Orders
- Modifier 25
- Private and Anonymous Patient encounters
- Lab Smart Links Policy
- Reviewing Old Data from OAS/3M
- Cancer Support Counseling Care
I am passing on my hearty congratulations and admiration for the remarkable success of our EPIC “Go Live”. The scope and complexity of this project was literally “mind boggling”. In that context, this past week was truly remarkable!!!!

Frank Ford—President of Allentown Campus