

The background features several circular gauges and arrows, suggesting a process or cycle. The gauges have numerical scales, with one prominent gauge on the left showing values from 140 to 260. The overall color scheme is a gradient of dark blue and purple.

PLACING ORDERS FOR POST DISCHARGE CARE

HELP YOUR CM IN THE DISCHARGE PROCESS AND ENSURE THAT PATIENTS
GET WHAT THEY NEED

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AY 23-24

PLACING A CASE MANAGEMENT CONSULT IS NOT ENOUGH

- CM consult-good place to start
- **Provider must place the actual orders**
- Not all members on CM team are nurses , those that aren't can't help with orders (verbal orders etc)

The screenshot displays a medical software interface for a patient named ZZZTEST, GOODY SAM. The patient's information includes MRN:36666, Code Status:DNR/DNAR, and various clinical details. The main window is titled "ZZZTEST, GOODY SAM - Add Order". On the left, there is a "Diagnoses & Problems" section with a table of diagnoses and a "Problems" section below it. The search bar on the right contains the text "case management". A dropdown menu is open, showing a list of search results for "Case Management Consult" with various reasons for consult, such as "Reason for Consult Abuse", "Reason for Consult Advanced Directives", etc. The search results are filtered by "All Orders".

Diagnosis (Problem) being Addressed this Visit	Code
Extrinsic asthma with acu...	J45.901
Pneumonia	B44.9
Rheumatic CHF (congesti...	I09.81
Chronic depression dfnsm...	F33.9
Essential (primary) hypert...	I10
Paranoid schizophrenia i...	F20.0
acute systolic chf	I50.21
Diabetes insipidus	E23.2
CHF due to valvular disea...	I50.9

DO NOT USE SPECIAL CHARACTERS IN CERNER

THE 'DEPART' IS CRITICAL

Post acute patients-this is the ONE document that nurse is guaranteed to get on arrival, assume that if it isn't on the depart, your patient won't get it

Patients discharging home-this is the document that instructs the patient on EVERYTHING they need to do

The screenshot displays a patient's profile and a checklist for discharge instructions. The patient's name is ZZZTEST. GOODY SAM, with an age of 27 years, DOB of 03/13/1994, and language of English. Allergies listed are Contrast Dye. The checklist is titled 'DISCHARGE Outpatient Instructions' and includes the following items:

- Open Chart
- Physician Discharge Diagnosis
- Medication Reconciliation
- Discharge Prescriptions
- Discharge Instructions/Recommendations
- Hospital Visit Summary
- DME/Non Med Orders/Work or School Note
- Follow-up Appointments
 - Follow up with primary care provide
- Patient Education
 - Controlling Asthma Triggers: Irritant
 - _Discharge Instructions (Custom)
 - BH Action Plan - COPD, COPD Acti
 - BH Book Ostomy (Custom)
 - BH Book Heart Failure (Custom)
 - BH Action Plan - COPD, COPD Acti
 - Anesthesia Options for Labor
 - What Is Pneumonia?
 - Pneumonia in Children
 - BH Basic Diabetes Education (Surv
 - After Kidney Transplant
 - Using a PCA Pump
 - BH Difficult Airway Patient Letter (C
 - BH Difficult Airway Patient Letter (C
 - Do You Have Diabetes?

At the bottom of the checklist, there is a link for [more...](#) and a button for **Order Discharge**.

ACUTE CARE DC (SNF, ACUTE INTENSIVE REHAB) MUST HAVE COVID TEST 24-48 HOURS



MO SAYS USE “ADMISSION RESPIRATORY (FLU/COVID)”

“Admission Respiratory (FLU/COVID + PEDS RSV


Admission Respiratory (FLU/COVID) + PEDS RSV [pp] (Planned Pending)

Laboratory


Influenza and COVID Combo Testing:

<input checked="" type="checkbox"/>	 	Influenza A/B and COVID19, QL, Rapid Real-Time PCR	Nasopharyngeal Swab, Timed Stu
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For discharge to home or non-urgent testing:

<input type="checkbox"/>		SARS-CoV-2 RNA (COVID-19) and Influenza A and B, QUAL, NAAT SQL	Nasopharyngeal Swab, Timed Stu
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Other

<input checked="" type="checkbox"/>		Effective Date	12/12/2022, Respiratory (FLU/COV
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PHYSICIAN DISCHARGE DIAGNOSIS

- -Fill in diagnoses here,
- -use patient friendly terms
- ***pt going to post acute (SNF or AIR aka acute inpatient rehab) complete TB status

TB status Negative by CXR Negative by PPD [Required for post-acute placements](#)

Enter diagnoses in patient friendly language for discharge instructions

test

BEHAVIOR HEALTH TRANSFERS

Physicians will need to put it patient transfer order request

Drop down menu: reason for transfer and transfer priority

2nd tab -order comments: if pt. medically clear or if CPR consult is needed

CPR=crisis preparation and recovery

Details for Patient Transfer Services Request Behavioral Health

Details | Order Comments | Diagnoses

*Order Date/Time: 02/08/2023 0842 MST

Facility Type Needed: Behavioral Health Facility

Medical Service Needed: Behavioral Health

Level of Care: Non-specified

*Reason for Transfer: Continuity of care

*Transfer Priority: Routine

Order comments: need to specify if pt. is medically clear vs. CPR consult needed

Services Request Beha... MST Use for Behavioral Health transfer requests only; Call the Tr

Details for Patient Transfer Services Request Behavioral Health

Details | Order Comments | Diagnoses

Order comments

Use for Behavioral Health transfer requests only; Call the Transfer Center for all other transfers -- pt. is medically clear to transfer or consult CPR -- pt. needs to be petitioned

Banner Transfer Services helps with all behavioral placement – to check on status call: 602 839 2020

MEDICINE RECONCILIATION

- Ensure that medications are correct—eliminate duplicates
- Ensure that they are sent to correct pharmacy—any prior auths should be sent to Banner Family Pharmacy (and CM consult placed)
- **If patient sent somewhere other than home-CONTROLLED substances must be sent to the specific pharmacy that the facility uses (you can get this from CM)**
- order IV antibiotics and home O2 (specify concentrator AND portable in order as well as continuous, exertional, or nocturnal and what liter flow) here. Set these orders not to print, if you send to Banner Family Pharmacy, they will be calling you

IV ANTIBIOTICS

- YES, ALWAYS order through medicine reconciliation in depart
- ID may be following but NOT all ID docs are willing to write the orders for abx if patient is going to post acute facility—it is the hospitalists responsibility to ensure that the order is placed (either by ID or ordered by hospitalist)
- Ordering in med rec is the BEST way to ensure that the post acute facility knows that IV abx are needed
- Ordering in the med rec will also ensure that it appears in the discharge summary if you use the discharge summary template—if you don't, abx won't appear in the discharge summary so then it appears that IV abx weren't prescribed
- HH abx require additional information placed in DME/Non Med orders section of depart (covered later in presentation)
- Abx to be administered at infusion clinic require additional paper forms to be filled out (CM will help with this) but you should still place the order in depart med rec

PRIOR AUTHORIZATIONS

- Order the medication in the depart medicine reconciliation section-**MANDATORY**
- Send to Banner Family Pharmacy (so CM can help with prior auth—do not send to patient’s preferred pharmacy, you can change where it is sent after it is approved)
- Place case management consult
- Ensure that the indication for medication is clear in progress notes
- **many long acting narcotics need prior auth
- **if you have never discharged someone on a particular med before, be concerned that prior auth needed

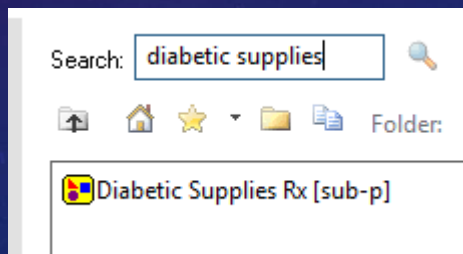
MEDICATION LIST-NOT ALL INCLUSIVE		
Arixtra	Entresto	Sivextro
Brilinta	Lidocaine patch	Sovaldi
Bystolic	Lovenox	Tobramycin inh
Creon	Oxycontin	Vancomycin (oral)
Colchicine	Pradaxa	Vinpat
Daptomycin	Ranexa	Xarelto
Difcid	Rifaximin	Xopenex
Effient	Samsca	Zyvox
Eliquis/DOAC	Sildenafil	Prasugrel
Methadone	Tolvaptan	Pravastatin
SGLT 2 inhibitor	Montelukast	

DIABETES MEDS AND SUPPLIES

Use **Diabetic Supplies Rx power plan** in regular order section of cerner to order syringes needles, test strips, lancets, and/or glucometers

IF YOU DO NOT ORDER SYRINGES, PATIENT CANNOT DRAW UP INSULIN FROM VIAL

Order the generic lancets, glucometer, test strip if you don't know what brand is covered by their insurance



Order insulin in Medicine Reconciliation portion of depart

ReliOn insulin and supplies (Wal Mart brand) are cheapest

Insulin Regular, NPH, or 70/30 \$25/vial

ReliOn Novolog \$73/vial

Relion Novolog pens \$86 (5 prefilled FlexPens with 300 units)

ReliOn test strips 20=\$10 50=\$19 100=\$36

If ordering PENS: Lantus Solostar and Humalog Kwikpen as these are usually covered and don't forget to order the pen needles

WHAT SYRINGES OR NEEDLES DO I ORDER?

Insulin syringes

- In general, use the 31G syringe
- Mm refers to the length of the needle
- .5 mL if dose is <50 units
- 1 mL if dose > 50 units
- Syringes come with needles

Pen needles

- Most patient prefer smaller needles
- Recommend 32G with 4-6 mm
- Ask patients about length preference
- Autosheild needle rarely used
- Recommend BD or Novofine needles
- Ignore DME (InPen Smart Pen Device)
- Fancier needles get prescribed by endocrine or pcp in outpatient setting

Component	Status	Details
Insulin syringe - Needle U-100 (BD Insulin Syr Ultrafine...)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 31 gauge x 8 mm (5/16"), 0.5 mL, Supply
Insulin syringe - Needle U-100 (BD Insulin Syr Ultrafine...)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 31 gauge x 8 mm (5/16"), 1 mL, Supply
Insulin syringe - Needle U-100 (BD Insulin Syr Ultrafine)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 29 gauge x 12 mm (1/2"), 0.3 mL, Supply
Insulin syringe - Needle U-100 (BD Insulin Syr Ultrafine)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 29 gauge x 12.7 mm (1/2"), 0.5 mL, Supply
Insulin syringe - Needle U-100 (BD Insulin Syr Ultrafine)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 29 gauge x 12.7 mm (1/2") 1 mL, Supply
Insulin syringe - Needle U-100 (BD Insulin Syr Ultrafine)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 30 gauge x 12.7mm (1/2"), 0.3 mL, Supply
Insulin syringe - Needle U-100 (BD Insulin Syr Ultrafine)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 30 gauge x 12.7mm (1/2"), 0.5 mL, Supply
Insulin syringe - Needle U-100 (BD Insulin Syr Ultrafine)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 30 gauge x 12.7 mm (1/2"), 1 mL, Supply
Insulin syringe - Needle U-100 (BD Insulin Syr Ultrafine)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 31 gauge x 6 mm (15/64"), 0.3 mL, Supply
Insulin syringe - Needle U-100 (BD Insulin Syr Ultrafine)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 31 gauge x 6 mm (15/64"), 0.5 mL, Supply
Insulin syringe - Needle U-100 (BD Insulin Syr Ultrafine)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 31 gauge x 6 mm (15/64"), 1 mL, Supply
DME (BD U-500 Insulin Syringe Ultra-Fine)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 31 gauge x 6 mm (15/64"), 0.5 mL, Supply
Insulin syringe - Needle U-100 (BD Veo Insulin Syringe)		1 EA, SubCutaneous, 90 days, EA, 31 gauge X 6 mm (15/64"), 0.3 mL, Supply
Insulin syringe - Needle U-100 (BD Veo Insulin Syringe)		1 EA, SubCutaneous, 90 days, EA, 31 gauge X 6 mm (15/64"), 0.5 mL, Supply
Insulin syringe - Needle U-100 (BD Veo Insulin Syringe)		1 EA, SubCutaneous, 90 days, EA, 31 gauge X 6 mm (15/64"), 1 mL, Supply
Insulin syringe - Needle U-100 (Insulin Syringe)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, Supply
Pen Needle, Diabetic (BD Ultra-Fine Pen Needle)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 31 gauge X 5 mm (3/16"), Mini., Supply
Pen Needle, Diabetic (BD Ultra-Fine Pen Needle)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 31 gauge X 8 mm (5/16"), Short., Supply
Pen Needle, Diabetic (BD Ultra-Fine Pen Needle)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 32 gauge X 4 mm (5/32"), Nano., Supply
Pen Needle, Diabetic (BD Nano 2nd Gen Pen Needle)		1 EA, SubCutaneous, 90 days, EA, 32 gauge X 4 mm (5/32"), Supply
Pen Needle, Diabetic (BD AutoShield Duo Pen Needle)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 30 gauge X 5 mm (3/16"), Supply
Pen Needle, Diabetic (Novo Fine Pen Needle)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 30 gauge X 8 mm (1/3"), Supply
Pen Needle, Diabetic (Novo Fine Pen Needle)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 32 gauge X 4 mm (5/32"), Supply
Pen Needle, Diabetic (Novo Twist Pen Needle)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 32 gauge X 5mm (1/5"), Supply
Pen Needle, Diabetic (Pen Needle)		1 EA, SubCutaneous, 90 days, EA, Substitution Allowed, 31 gaugeX 6 mm (1/4"), Supply
DME (InPen Smart Pen Device (Fiasp))		See Instructions, # 1 EA, # Refills: 0, For use with Fiasp U100 PenFills and pen needles, use as directed, Supply
DME (InPen Smart Pen Device (NovoLog))		See Instructions, # 1 EA, # Refills: 0, For use with NovoLog U100 PenFills and pen needles, use as directed, Su...
DME (InPen Smart Pen Device (Humalog))		See Instructions, # 1 EA, # Refills: 0, For use with Humalog U100 Cartridges and pen needles, use as directed, ...

ORDERING SLIDING SCALE INSULIN ON DISCHARGE

- YOU MUST SPECIFY (SPELL OUT SPECIFICS) of sliding scale. Just typing 'low resistance sliding scale' WILL NOT put the actual scale in depart
- YOU must add the actual scale in the depart
- If you need help the diabetic educators can help you (they are here Mon to Fri)
- Step 1 open depart
- Step 2 select patient education
- Step 3 type diabetes under all education section
- Step 4 select "BH Diabetes Adult Discharge Instructions (Custom)"
- Step 5 Delete pre-written text and paste (from your own document) in sliding scale or type in sliding scale
- This will now print off in patient's discharge papers

- Step 1 open depart
- Step 2 select patient education

Depart Process

zzztest. Resident1
Age:31 ye... DOB:02/02/1992
Language: Weight:
Allergies: Allergies Not Recorded

MRN:38154378
Gender:Fe... PCP:
Encounter:inpatient FIN: 3548794321 Reg Dt: 02/07/2023 12:54:29 MS...
Location:01 Test OP ONLY

Code Status:
Advance Directive:
FIN: 3548794321 Reg Dt: 02/07/2023 12:54:29 MS...
Location:01 Test OP ONLY

HealthLife Portal:
Insurance Division:
Clinical Research:
No XDocs

Templates: DISCHARGE Outpatient Instructions

- Open Chart
- Physician Discharge Diagnosis
- Medication Reconciliation
- Discharge Prescriptions
- Discharge Instructions/Recommendations
- Hospital Visit Summary
- DME/Non Med Orders/Work or School Note
- Follow-up Appointments
- Patient Education**
- Order Discharge

DISCHARGE

PATIENT EDUCATION INFORMATION

Additional Comments for verbalizing understanding of instructions **Comment:**

Electronically Signed By:

Patient/Parent/Guardian/Legally Authorized Representative verbalizes understanding of discharge instructions

Print/Sign Save/Sign

Immunizations
View Forecast

Print 3 minutes ago

Selected Visit

All Visits

Complete Reconciliation

All Visits

Import Outside Records

View Details

Sign

All Visits

- Step 3 type diabetes under all education section
- Step 4 select “BH Diabetes Adult Discharge Instructions (Custom)”

zzztest. Resident1 MRN:38154378 Code Status: HealthLife Portal:
 Age:31 years DOB:02/02/1992 Gender:Female PCP: Advance Directive: Insurance Division:
 Language: Weight: Encounter:Inpatient FIN: 3548794321 Reg Dt: 02/07/2023 12:54:29 MST Disch Dt: <No - Dis... Clinical Research:
 Allergies: Allergies Not Recorded Location:01 Test OP ONLY No XDocs

Instructions Follow Up

Search: diabetes contains Language: English **BH Custom** Suggested Departmental Personal **All**

<ul style="list-style-type: none"> [-] Patient Education <ul style="list-style-type: none"> Ambulatory Anatomy & Physiology Cardiology Coronavirus Cosmetic Surgery Custom Dental Health Dermatology (Common Skin Disorders) Dermatology (Rashes) Dermatolog (Skin Cancer) 	<ul style="list-style-type: none"> 24-Hour Urine Protein Albumin (Urine) Antidiuretic Hormone Before You Start Your Diabetes Exercise Plan BH Book Diabetes: Gestational Diabetes (Custom) BH Book Diabetes: Living Well with Diabetes For Adults (Custom) BH Book Diabetes: Living Well with Diabetes for Children and Teens (Custom) BH Diabetes Adult Discharge Instructions (Custom) BH Diabetes Blood Sugar Log (Custom) BH Diabetes Healthy Meals for Diabetes or Pre-Diabetes (Custom) BH Diabetes How to Check Your Blood Sugar (Custom) BH Diabetes Hyperglycemia Adult Guidelines (Custom) BH Diabetes Hypoglycemia Adult Guidelines (Custom) 	<ul style="list-style-type: none"> BH Diabetes Ketoacidosis (DKA) (Custom) BH Diabetes Medication (Custom) (Custom) BH Pediatric Diabetes Discharge Summary (Custom) Blood Glucose Screening During Pregnancy Cardiac Procedures Concerns When Pregnant with Multiples C-Peptide (Blood) Diabetes and Drinking Alcohol Diabetes and Heart Disease Diabetes and High Blood Pressure Diabetes and Kidney Disease Diabetes and Periodontal (Gum) Disease Diabetes and Periodontal Disease: An Increased Risk 	<ul style="list-style-type: none"> Diabetes and Peripheral Arterial Disease (PAD) Diabetes and Sensitive Topics Diabetes and Your Child: Checking Blood Sugar Diabetes and Your Child: Considering an Insulin Pum Diabetes and Your Child: Giving Insulin Injections Diabetes and Your Child: Low Blood Sugar Diabetes and Your Child: Safe Exercise Diabetes and Your Child: Tests and Vaccines Diabetes and Your Child: The A1c Test Diabetes and Your Child: Understanding Type 1 Diabetes and Your Child: Understanding Type 2 Diabetes Autoantibody Panel Diabetes- Measuring Glucose at Home
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Selected Instructions

Arial 10

- Step 5 Delete pre-written text and paste (from your own document) in sliding scale or type in sliding scale

The screenshot shows a medical software interface with a search bar containing 'diabetes'. The search results are displayed in a grid, with 'BH Diabetes Adult Discharge Instructions (Custom)' selected. Below the search results, the 'Selected Instructions' pane shows the content of the selected instruction, which is a 'High Resistance Insulin Scale'.

High Resistance Insulin Scale

Check your glucose before each meal and bedtime

Take insulin according to this scale

If glucose is	Take this much Humalog insulin
151-175	1 unit
176-200	2 units
201- 225	3 units
226-275	5 units
276-325	7 units
Over 325	9 units

- Take insulin within 15 minutes of eating your meal.
- If your glucose is over 300 for 2 tests in a row in the same day, call your doctor.
- If your glucose is over 200 for several days in a row, call your doctor.
- If you have more than 1 low blood glucose (less than 70) in the same week, call your doctor.

WANT TO PUT IN YOUR OWN CUSTOM INFORMATION?

Use the BH Custom-Blank (Custom)(Custom)

The screenshot shows a patient record for 'zzztest. Resident2' with details: Age: 29 years, DOB: 03/03/1993, Gender: Male, MRN: 3, PCP: , Encour: . Allergies: Allergies Not Recorded. The 'Follow Up' tab is active. A search bar contains 'contains' and 'Language: English'. A dropdown menu is open, showing search results. The first two results, '2. BH Custom - Blank (Custom) (Custom)' and '3. BH Custom - Blank (Custom) (Custom)', are circled in purple. Other results include 'BH 3-hour Oral Glucose Tolerance Test (Custom)' and 'BH Action Plan - COPD - COPD Action Plan (Custom)'. A 'BH Custom' button is visible on the right.

zzztest. Resident2
Age: 29 years DOB: 03/03/1993 Gender: Male MRN: 3
Language: Weight: PCP: Encour: Allergies: Allergies Not Recorded

Instructions Follow Up

Search: contains Language: English

- [-] Patient Education
 - [-] Custom
 - 2. BH Custom - Blank (Custom) (Custom)
 - 3. BH Custom - Blank (Custom) (Custom)
 - BH 3-hour Oral Glucose Tolerance Test (Custom)
 - BH Action Plan - COPD - COPD Action Plan (Custom)

DISCHARGE INSTRUCTIONS/RECOMMENDATIONS

The screenshot shows a software interface with a toolbar at the top containing icons for save, print, and other functions. Below the toolbar, there is a header area with the text '*Performed on: 01/27/2022' followed by two dropdown menus, one containing '1246' and the other 'MST'. The main content area is divided into two columns. The left column is titled 'Patient Care Discharge Instructions' and has a sub-header 'Instructions WILL print on depart documents'. The right column is titled 'Recommendations to Provider' and has a sub-header 'Recommendations DO NOT print on depart documents'. On the far left, there is a vertical sidebar with the text 'Instructions/Rec' and 'Version IT Use Or'.

- Subsections: activity, diet/nutrition, case management/social services, nursing, physical therapy, occupational therapy, speech language pathology, cardiac rehabilitation, pulmonary rehabilitation, central line/PICC line, wound ostomy, respiratory care, diabetes educator, pharmacy, other
- Many services will put their comments in patient care discharge instructions on the right hand side: recommendations to provider
- YOU can add information to the 'patient care discharge instructions'—it will print in the continue care section of the printed depart (which is after the instructions to follow up with the physicians listed and pending tests)

ADDING INFORMATION TO DISCHARGE INSTRUCTIONS/RECOMMENDATIONS

- Copy and paste from clinical notes-NUTRITION (most other can also be found in form browser)
- Use form browser—can filter by date, form, etc
- Types of notes in form browser: PT/OT, wound, diabetes education, speech, nutrition, transition planning, acute rehab liaison
- Open document and copy desired text which can be pasted into discharge instructions/recommendations on depart
- Also good to paste this into your discharge summaries

The screenshot displays a medical software interface for a patient named ZZZTEST, GOODY SAM. The patient's information is shown in a yellow header bar: MRN:36666, Age:27 years, DOB:03/13/1994, Gender:Female, PCP:PHYSICIAN DO, X, Language:English, Weight:65.00 kg (D) 11/06/2020, Encounter:inpatient, and FIN: 529201588. The interface includes a menu on the left with options like Acute View, Results Review, Orders, Documentation, and Form Browser. The Form Browser section is active, showing a list of forms sorted by date. A dropdown menu is open over the 'Form' entry, listing options like 'Form', 'Status', 'Encounter - Date', and 'Encounter - Form'. The list of forms includes various medical notes and assessments, such as '12:00 MST Continuous Medication Infusion' and '13:21 MST Physician Attestation Form'.

DME/NON MED ORDERS/WORK OR SCHOOL NOTE

- Use the drop down arrows, they will guide you through what information is needed
- Place DME orders here (walkers, wheelchair, hooyer lift, feeding pumps etc)
- Home health orders (PT/OT, nursing orders)
- FOR PT/OT DO NOT USE 1D1, PRN X 4 for disease process complication and care intervention—use EVAL AND TREAT
- For nursing care (wound care) you SHOULD use the 1D1, PRN X 4 for disease process complication and care intervention
- Some things require orders under nursing care section of this form AND other sections (eg wound care supplies)

DME SECTION-ORDERING HOME INFUSIONS (TPN/ABX)

- For nursing IV infusion, do NOT use 1D1, PRN x4,
- use 'drug, dose, frequency & duration'—OK to delete those words and put in actual medication (eg ceftriaxone 1gram IV QD until ____ date)
- Next box: select line care for type of line patient has (eg PICC line care per protocol and Cathflo PRN)
- Next box: indicate if central line can be dc upon completion of abx (in most cases the answer is yes unless ID or another specialty tells you otherwise)
- Next box: weekly therapeutic drug level, BMP, CMP, CBC, ESR, CRP, CPK (if medication administered > 1 week). Fax results to _____
- You can change what labs you want ordered but you MUST indicate who results will be called to
- For TPN, the specifics of the formula won't fit in the 'drug, dose, frequency & duration' so COPY from the nutrition note and enter into discharge instructions/recommendations nutrition section OR into a Home Health order (will be covered in another slide) order must say NEED >90 DAYS

DME SECTION-ORDERING ENTERAL FEEDS

- Must order portable feeding pump/pole under top section in DME
- Must order NURSING enteral tube feeding under Home Health Orders Section (which immediately follows the DME section)
- Need to put in specifics, order 1D1 PRN x 4, AND MUST include specifics of TF (Bolus feeds: name of formula, bolus amount, frequency, Continuout pump: rate, number of hours for pump)
- Box is too small here to enter this use the Home Health order in regular order section of chart (covered later in presentation)
- Order must say NEED >90 DAYS
- BEST if you include comment under formula type that substitution of equivalent formula is permitted
- Food/supplies and/or pump must be at home prior to start of care

WOUND CARE ORDER

- Need to put in specifics, order 1D1 PRN x 4, AND MUST include specifics wound
- Wound location, wound dressing type, frequency for wound care, if daily wound care is ordered—who will be learning the wound care
- HH care company will supply dressing change materials, if patient is doing dressing changes without HH, patient will need to purchase dressing supplies

DME SECTION-OUTPATIENT ORDERS

- Outpatient lab draws-ensure that you input the name and contact number for the physician who will follow up on results
- OT/PT, orthotics/prosthetic, SLP, cardiac rehab, pulmonary rehab

DME SECTION-SUPPLIES

- Use 1D1, PRN X 4
- Wound—negative pressure wound therapy=VAC, additional paper form to be completed for VAC, ask CM for form so you can complete
- Ostomy
- Trach
- OFTEN TOO COMPLEX/TEDIOUS TO PLACE ALL THE ORDERS THAT ARE NEEDED HERE due to specifics needed (wound size, location, supplies, etc)
- Note that not all supplies will be covered by DME company
- Can use home health orders (covered in next slide)

USING HOME HEALTH ORDERS—YOUR NEW BEST FRIEND!

-in regular order section of the chart
(not in depart)

Copy and paste into ORDER
COMMENTS

-nutrition notes—all the specifics of
TF or TPN (to include flushes)

-wound care and ostomy notes for
wound locations, dressing supplies,
instructions for wound care, etc

-will also work for antibiotics etc
**BUT YOU MUST HAVE ALL THE
INFORMATION CM NEEDS!!!!**

ZZZTEST. GOODY SAM MRN:36666 Code Statu
Age:27 years DOB:03/13/1994 Gender:Fem...PCP:PHYSICIAN DO, X Advance D
Language:English Weight:65.00 kg (D) 11/0... Encounter:Inpatient FIN: 529201588
Allergies: Contrast Dye Location:0

Diagnoses & Problems

Diagnosis (Problem) being Addressed this Visit

+ Add ↔ Convert | Display: All

Search:

Folder:

[Home Health](#)

Other Home Health Order 01/27/2022 13:32 ... 01/27/2022 13:32 MST

Details for Home Health

Details Order Comments Diagnoses

Order comments

WOUND VAC ORDER

- 1D1 4 PRN
- Foam color
- Pressure setting (mmHg)
- Continuous or intermittent suction
- How often wound vac needs to be changed
- Fill out additional wound vac form (can be done by medicine, wound care, surgery)

TRACH ORDERS-EXAMPLE

Order for Home Health Skilled Nurse: Trach care and teaching. 1D1, PRNx4 for disease process complications and care interventions

DME: Trach Supplies (30 Day Quantities needed)

1 replacement Trach - Shiley Size 6 Non-fenestrated (this is an example. Make sure size and trach type are correct for patient)

Shiley Size 6 inner cannulas (1x/day = 30 total)

1 back-up trach, (half a size smaller in case they decannulate and struggle getting their trach back in, the smaller one is available)

Trach ties (1x/day = 30 total)

1 Suction machine

Suction catheters size 14 Fr (2x/day = 60 total)

2 Yankauer suction tips

Suction tubing (1x/day = 30 total)

Cannisters (1x/week = 4 total)

Trach cleaning kit (1x/day = 30 total)

Saline bullets (2x/day = 60 total)

Drainage sponges (1 box/week = 4 boxes)

If Humidification Needed: Humidifier kit: (2 kits/day – 60 total kits) and Sterile Water (1 bottle/day = 30 total)

1 Compressor (must specify heated or cooled)

If Home O2 needed: need Home O2 Rx from MD and still needs qualifying documentation and lung dx

HOW CAN I TELL IF HOME HEALTH ORDERS HAVE BEEN PLACED?

- Use the case management Mpage
- HH and DME orders can be seen here



WHO PUTS IN HOME HEALTH ORDERS?

- On teach service, residents should put in home health orders
- **HOWEVER**, some HH agencies require PECOS (Medicare certification)/ROPA (Medicaid certification), so attending may have to put in orders

DISCHARGING PATIENTS IF HOME HEALTH HAS NOT BEEN SET UP

- Ok if PT, OT, speech if care team and patient agree
- **DO NOT** send home without HH set up if nursing care is needed (antibiotics, tube feeds, wound care etc) or supplies that patient cannot wait for

FOLLOW UP APPOINTMENTS

- Important to list who patient should see and when
- Assume that this document is the only one that the facility or pcp will see in a timely manner
- List instructions on what provider should follow up on

With:	Address:	When:
PAUL KELLY	726 N Greenfield Rd Ste 117 Gilbert, AZ 85234 (480) 685-9696 Business (1)	Within 1 - 2 weeks
Comments: Follow up on -echocardiogram 1/14/21: LVEF normal, left atrium enlarged, fusiform aneurysm proximal ascending aorta 4.3 cm. -Mobitz type I heart block, heart rate as low as 70, seen by cardiology in hospital, consider cardiology follow up -hemoglobin a1c 1/9/21 8.3 -psychiatry referral for suicidal ideation while hospitalized		

CHECKLIST FOR SNF DISCHARGES

- 3 midnight stay if patient has traditional medicare
- Line for long term IV access (if needed)
- Recent CXR is done and read (so you can sign off TB status)
- TB status is checked off (in Depart under Physician Discharge Diagnosis)
- DEPART IS UPDATED (ACCURATE), medications are reconciled on date of transfer to SNF (IV Abx must be ordered through depart med rec)
- Prescriptions for controlled substances have been sent to SNF pharmacy
- Covid results within 24-48 hours of discharge
- PT/OT/SLP notes within 24 hours of discharge

CHECKLIST FOR NEW OUTPATIENT DIALYSIS

- Also applies if your patient is going to SNF as a new HD start
- Nephrology consulted
- Patient has appropriate HD access- tunneled HD catheter, OR fistula, AV graft that can be used
- CXR
- Hepatitis B results: Hep B Sab, Hep B Sag, Hep B core total
- Patient is ambulatory (can stand and pivot to transfer/use wheelchar), can sit for duration of HD

USE OF CONDITIONAL DISCHARGE ORDERS

- Use when you are waiting on something specific (pending labs, cardiologist clearance etc)
- Physicians should order covid swab if they know patient will be discharging within 24-48 hours
- Use when patients will be discharging to: SNF, acute rehab, home with home health, or outpatient serviced (example infusion clinic)
- Conditional discharges gives care coordination heads up to work on referrals (remember that many things also require insurance approval even if a facility accepts)
- **cannot be used if you need patient psych, use patient transfer order and patient must be medically clear
- **you do not need to put in a conditional discharge order every day—unless there are changes on medications or discharge plan..
- That being said, if you patient is no longer ready for discharge, you must cancel the conditional discharge order → in the order section, right click on the order and you can cancel it like any other order

WHEN YOU TALK TO FAMILIES...DOCUMENT!

- Who you called
- what number you used
- What you talked about, especially in regards to post hospital care (need for SNF, HH etc)
- Please date conversations
- This really helps our case managers

HOW DO I CONTACT THE CARE COORDINATION TEAM?

* WEB
PAGING/CCMS,TCA *
CHECK DAILY COVERAGE

- #1. Intranet- click University Medical Phoenix
- #2. Click Case management BUMCP
- #3. Click coverage
- #4. Click on the day you need

Contact Us: (602) 839-6989

Care Coord Directory

Daily Coverage

Monday 1/24/2022

Saturday 1/22/2022

Sunday 1/23/2022