

## Spring 2016 Implementing EHR into Class, Clinical and lab

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CNE  
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Rowan College at Gloucester  
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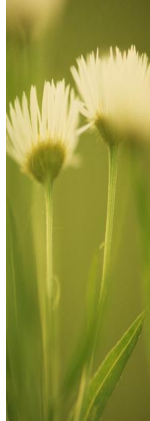
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## Disclosure

- G. Galosi and G. Turner do not have any financial relationship with education, healthcare or simulation products or companies.



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## Learning Outcomes

- Discuss the challenges in the educational setting affecting the use of EHR.
- Analyze current trends in nursing education leading to the expanded use of EHR.
- Explore innovative techniques for using EHR in the classroom, clinical and lab setting (provide example).



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### Changes in healthcare settings.

- Affordable Care Act
- Federal incentives
- Regulatory requirements
- Expectations of new graduates to be able to electronically document



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### Polling Question

- Kahoot.it
- Put in Gamepin
- (After I get it)



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### EHR in the Clinical Setting

- Documentation of individual patient assignments
- Alternate clinical assignments-
  - Review the chart and document expected findings
- Post conference-
  - One student gives report-other students document expected findings and then compare.



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## EHR in the Lab Setting

- Students document the skills
  - Performed in the lab
    - ADL's, V/S, Med pass, Assessments
  - Progress notes
    - Foley insertion and/or removals
    - V/S out of the expected findings (high B/P)




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## EHR in the Classroom




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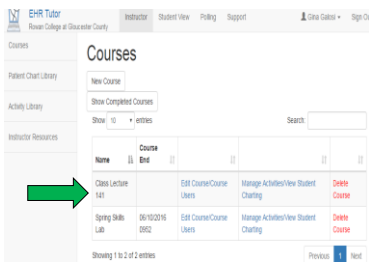
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- Students are instructed to sign in to EHRtutor and go to the class NUR 141 Intrapartum Class upon entering the classroom



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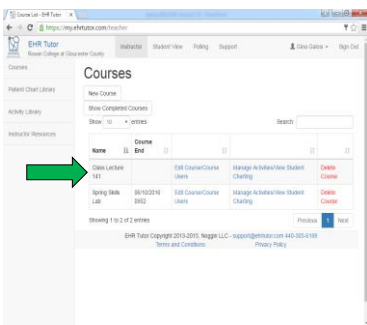
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## Go to the Course



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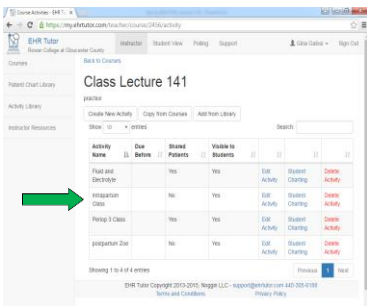
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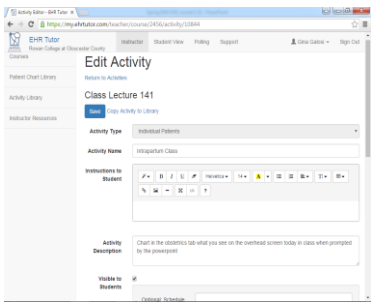
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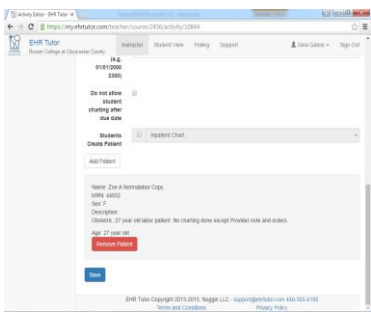
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Instructions for class




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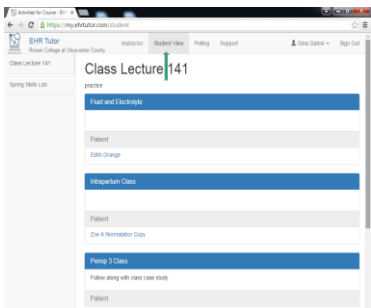
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Student View-Zoe normal labor




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## Go into the chart

**Patient Summary**

Principal Problem: possible rupture of membranes

The Patient Summary is read only. To add or edit data you must open another page by clicking the appropriate tab to the left.

**Vital Signs**

	03/23/16 0907
Heart rate	90
Blood Pressure	138/72
Respirations	22
Temperature	98.9 (Oral)
SpO2 (%)	99%
Pain	4




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## Orders/Summary

**Patient Summary**

Principal Problem: possible rupture of membranes

The Patient Summary is read only. To add or edit data you must open another page by clicking the appropriate tab to the left.

**Vital Signs**

	03/23/16 0907
Heart rate	90
Blood Pressure	138/72
Respirations	22
Temperature	98.9 (Oral)
SpO2 (%)	99%
Pain	4

**Orders**

Start Date	Order	Details	Status
03/23/16 0907	Complete Blood Count (CBC) with differential and urinalysis Frequency: Once		Active
03/23/16 0907	GET TOGON IN UNIT TO LR IN ML Frequency: 2 Once-See Administration Instructions. There is a 10-minute wait time for the first dose. Start Date: 03/23/16 0907		Active




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## Flowsheets (editable)

**Flowsheets**

**Vital Signs**

Temp	Date/Time	Reaction
POC	03/23/2016	None

**Orders**

Start Date	Order	Details	Status
03/23/2016 0907	Complete Blood Count (CBC) with differential and urinalysis Frequency: Once		Active
03/23/2016 0907	GET TOGON IN UNIT TO LR IN ML Frequency: 2 Once-See Administration Instructions. There is a 10-minute wait time for the first dose. Start Date: 03/23/2016 0907		Active




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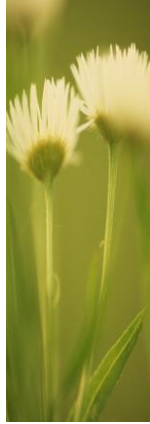
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## OB Specific Charting

The screenshot shows a patient summary for 'Patient: 10101111'. It includes vital signs (Temp 99.6, Pain 4), allergies (PCN), and orders. The orders table is as follows:

Start Date	Order	Details	Status
03/22/2016	Complete Blood Count (CBC) with differential	Initial order Frequency: Once	Active
03/22/2016	OXYTOCIN 10 UNIT/10 LR 100 ML	Initial order Dose/Frequency: 2 Unit/See Administration Instructions. Please specify in Administration Instructions	Active




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- PCN Allergy and order for Ancef
- Students instructed to investigate a problem




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## Fetal Assessment Documentation

The screenshot shows a 'Fetal Assessment' form. Key fields include:

- Maternal Activity/Position:** Click to begin typing for list
- Monitor Rate:** [Dropdown menu]
- Fetal Heart Rate:** [Dropdown menu]
- Baseline Fetal Heart Rate:** [Dropdown menu]
- FHR Variability:** Acceleration/Normal/Deceleration/Noisy
- FHR Accelerations:** Intermittent/EFM/Continuous when EFM/Continuous when EFM
- FHR Decelerations:** [Dropdown menu]
- Monitoring Status:** Click to begin typing for list
- Type of EFM:** [Dropdown menu]
- FHRSD: by when:** [Dropdown menu]
- Fetal Appearance:** Click to begin typing for list
- Amount of fluid:** [Dropdown menu]




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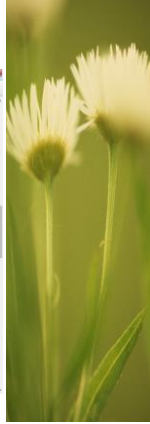
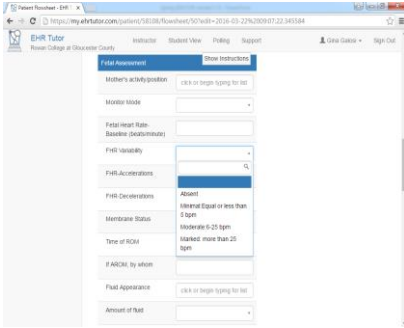
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## Uterine Activity Documentation




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## Case Study

- Instruction on first slide upon entering for students to sign in to EHRtutor, 141 lecture/class, then familiarize themselves with Zoe-normal labor.
- Students are encouraged to bring laptops and instructions to bring laptops were added to the lessonplan




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## Meet Zoe




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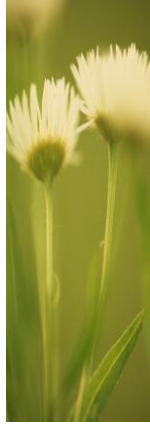
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## They are told to review orders

Review the orders based on the information in the last slide.

1. Do you have any questions?
2. What is your first priority concern?
3. What will you do at this time?




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## Report:

- On admission, her vital signs are T-98.2 O, 82, 20, 128/68, 99%.
- Her pain scale is 3/10 with mild contractions
- She was previously in triage yesterday but sent home because she was told she had “false” labor
- Chart the vital signs above for Zoe in class lecture 141 in EHRtutor
- List 3 ways to educate Zoe on false vs true labor




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## Student Charting (name removed)

**EHR Tutor**  
 Patient Summary: Zoe A. Normandale Clay (F.), 27 year old, Allending, Male Lender MD

Vital Signs	03/20/2014 10:13	03/20/2014 10:16
Heart rate	80	82
Blood Pressure	138/72	128/68
Respiration	22	20
Temperature	98.3 (Oral)	98.2° (Oral)
SpO2 (%)	99%	99%
Pain	4	3




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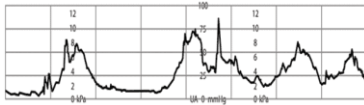
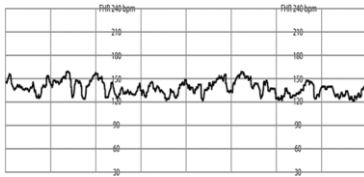
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## EFM Tracing




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## EFM Tracing

- Chart what you see on the monitor tracing
- What is the frequency of contractions (ctx)?
- What is the duration of contractions (ctx)?
- What is the fetal heart rate variability?
- What is the fetal heart rate or range of heart rate?

**Chart this in EHR for this time in the obstetrics tab.**




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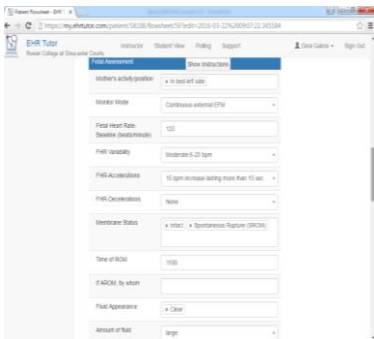
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## Student Charting of EFM




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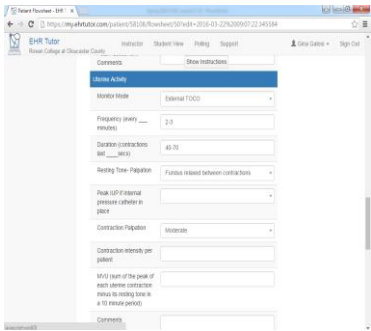
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### Student Charting EFM




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### According to Gardner & Jones (2012), the biggest barrier to implementation of EHR's in nursing education.....faculty

- Unsure how to integrate into curriculum
- Unfamiliar with educational EHR's
- Cost factor
- Kahoot.it

Gardner, C. and Jones, S. (June 2012). Utilization of academic electronic medical records in undergraduate nursing education. Online Journal of Nursing Informatics (OJNI), vol. 16 (2). Available at <http://ojni.org/issues/?p=1702>




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