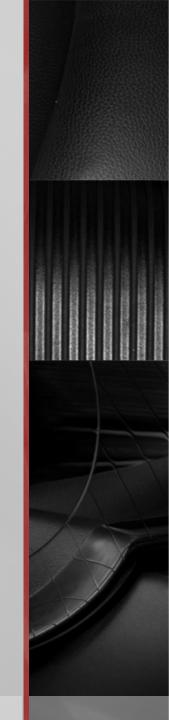
Homegrown EMR

Carol O'Kupniak



Why do we need an EMR?

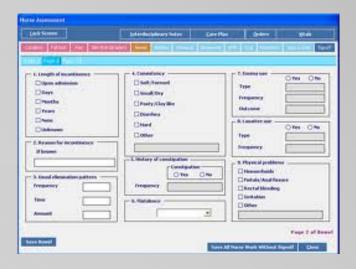


introducing EHR for curmudgeons, control freaks, paper lovers and luddites.

try it now for

Find out how easy EHR can be with WebChart.

Fidelity



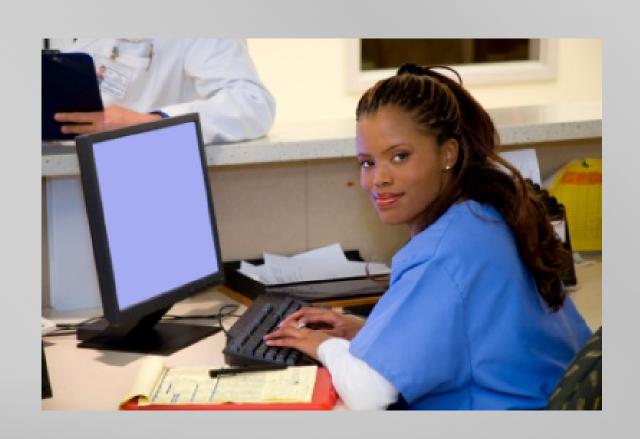






















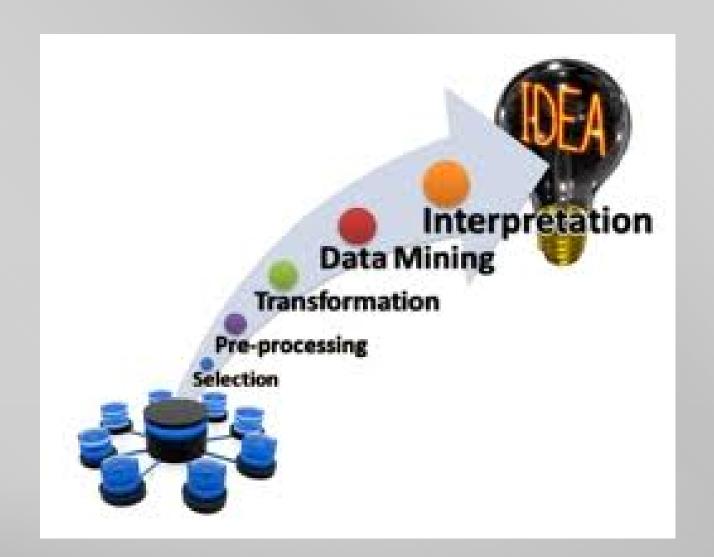




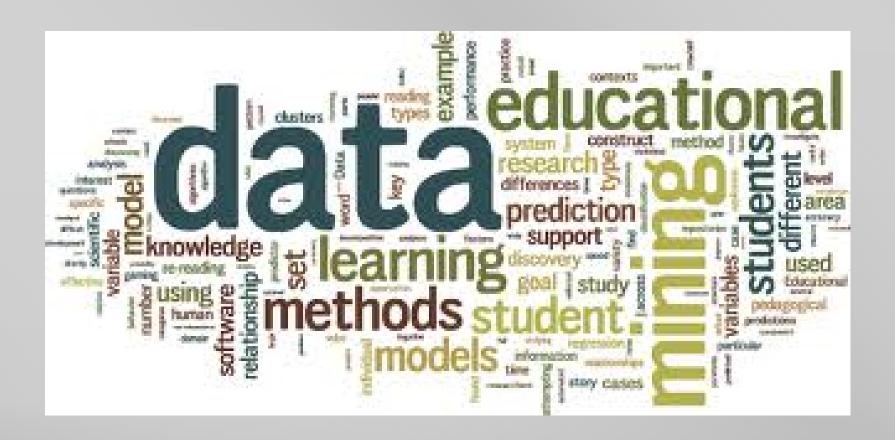
















Future Healthcare

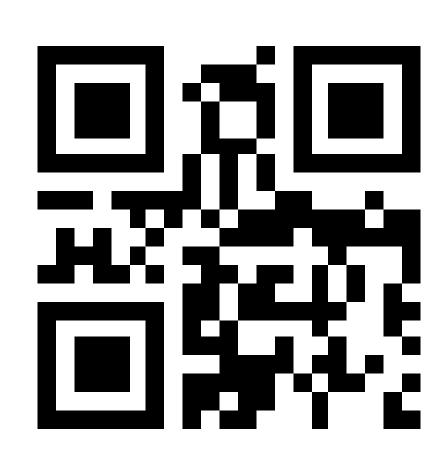
http://www.youtube.com/watch?v=oHL6R4kfWbk

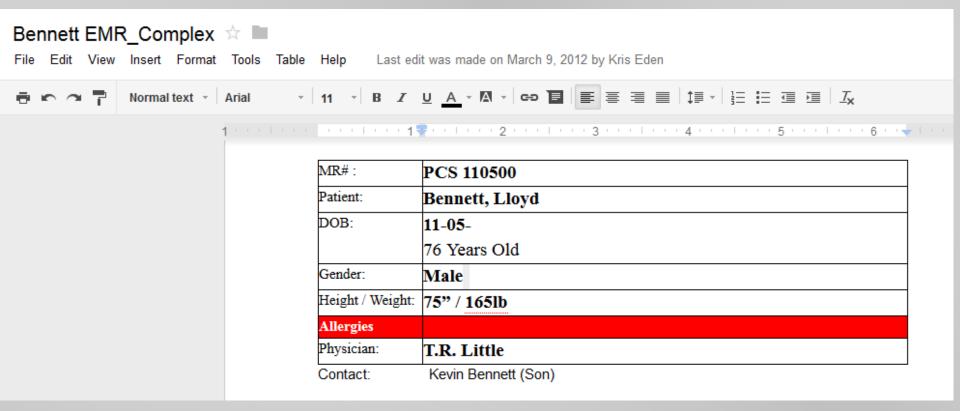
Homegrown EMR

- PDF Form
- Word-based GOOGLE Docs
- Access a true database
- PowerPoint excellent
- Excel SMILE[®] Simulated Medical Information Learning Experience

Word

Scan a QR Code





Access

- Platform for other educational-based EMRs
- Steep learning curve

PowerPoint

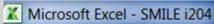
- Easy
- Quick
- Uni-directional
 - Info for students only

Excel

- Workbook chart
- Worksheet pages in the chart
- Bi-directional
 - Gives info
 - Student can also chart

SMILE

- S imulated
- M edical
- I nformation
- L earning
- E xperience





Simulated Medical Information Learning Experience

Last Name:	Bowman	First Name:		Jennifer	r DOB:	01/	21/	1979	Rel:	None
Sex: Femal	e MR#	123456789	Age:	32	Advanced Di	rectiv	es:		Do	es not have

Admission	Location	Allergy	Admission Diagnosis	Height	Weight	Code Status
Today	Sim 2-C	NKDA	R lower abd pain	54 in.	162 lbs	Full Code

Physician Service: Emergency Medicine



Past Medical History:

IBS

Torn Meiscus Right Knee Seasonal Allergies OB/GYN History G3P3

Voluntary Sterility

Past Surgical History:

Meniscus Repair R Knee 2008 Tubal Ligation 2008

Medications Taken at Home:

Claritin PRN Ibuprofen PRN

Insurance:

BC/BS NJ - #RBCY34195

Address:

742 School Lane Runnameade, NJ 08006 Telephone: 856 - 555 - 4321 Contact:

Daniel Bowman, Jr. Relationship: Husband 742 School Lane





Simulated Medical Information Learning Experience

Last Nan	ne:	Bowman	First Name:		Jennife	r DOB:	01/	21/	1979	Rel:	None
Sex:	Female	MR#	123456789	Age:	32	Advanced Dir	ective	s:		Do	es not have

Admission	Location	Allergy	Admission Diagnosis	Height	Weight	Code Status
Today	Sim 2-C	NKDA	R lower abd pain	54 in.	162 lbs	Full Code

Physician Service: Emergency Medicine



Past Medical History:

IBS

Torn Meiscus Right Knee Seasonal Allergies

OB/GYN History G - Gravida G3P3

P - Para

Voluntary Ste Terms associated with pregnancy. What do they mean?

Surgical History:

niscus Repair R Knee 2008 bal Ligation 2008

Medications Taken at Home:

Claritin PRN Ibuprofen PRN

▼ Microsoft Excel - SMILE i204



Simulated Medical Information Learning Experience

Last I	Name:	Bow	man Fi	rst Name:	Jenni	fer D	OB: 0	1/ 21/	1979 R	el: None
Sex:	Female	MR	# 1234	156789	Age: 32	Advance	d Direc	tives:		Does not have
	Admission		Location	Allergy	Admissio	n Diagnosi	s I	leight	Weight	Code Status
	Today		Sim 2-C	NKDA	R lowe	r abd pain		54 in.	162 lbs	Full Code

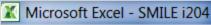
Physician Service: Emergency Medicine

Chief Complaint

"I've been having pain on my right side for the last week that comes and goes. Last night it got really sharp and it made me throw up. I couldn't sleep. IT felt like when I was n labor with my 1st son. I had to come into the emergency room."

History of Present Illness

32 year old, previously healthy caucasian femal, who presents to the ED today with one week history of intermittent RLQ abdominal pain for the last one week, which is markedly worse today. The pain was accompanied by dizziness, nausea, and vomiting. The pain during the episodes is 9 out of 10, stabbing, and radiating to her back. The patient reports a similar pain, not as severe, 3 years ago when she was diagnosed with an ovarian cyst. The pain went away spontaneously. She has not had a gyn follow-up since that episode. Patient reports she cannot find a comfortable position or stay still when the pain starts. She denies fever, chills, or sweats. She denies diarrhea, constipation, dysuria, hematuria, or





Simulated Medical Information Learning Experience

Last Na	me:	Bowman	First Name:		Jennife	r DOB:	01/	21/	1979	Rel:	None
Sex:	Female MR# 123456789		Age:	32	Advanced Directives:			Does not have			

Admission	Location	Allergy	Admission Diagnosis	Height	Weight	Code Status
Today	Sim 2-C	NKDA	R lower abd pain	54 in.	162 lbs	Full Code

Physician Service: Emergency Medicine

Physical Exam

General:

Patient is an average weight female. She is awake, alert, and appropriately oriented cannot lay still and appears moderately uncomfortable.

Head, Ears, Eyes, Nose, Throat:

There is no evidence of head trauma. Pupils are equil, round, and reactive from 6mm to 4 mm. Extraocular movements are fully intact. Ears are normal, there is no discharge, the tympanic membranes are lear, with good light reflex, no evidence of performation. No mucus membrane rashes, dryness, or swelling.

Skin:

Pale and mildly diaphoretic. No rashes, petchia, or purpura; no lesions.

Lungs:

Clear to auscultation without wheezes, crackles, or rales. Equal breath sounds bilaterally.

Abdamani

Admission	Location	Allergy	Admission Diagnosis	Height	Weight	Code Status
Today	Sim 2-C	NKDA	R lower abd pain	54 in.	162 lbs	Full Code

Physician Service: Emergency Medicine

Physical Exam

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Skin:

Pale and mildly diaphoretic. No rashes, petchia, or purpura; no lesions.

Lungs:

Clear to auscultation without wheezes, crackles, or rales. Equal breath sounds bilaterally.

Abdomen:

Bowel sounds hypoactive. Localized tenderness both lower quadrants R>L. Involuntary guarding and rebound tenderness is present R>L lower quadrants. Palpation suggests R lower quadrant mass and fullness above the pubic area.

What is another name for rebound tenderness?

Back:

No tenderness to palpation, no costovertebral angle tenderness.





Simulated Medical Information Learning Experience

Last Na	ame:	Bow	man F	irst Name:	Je	ennife	r DOB:	01/	21/	1979	Rel: None	
Sex:	Female	MR	# 123	456789	Age:	32	Advanced D	irective	es:		Does not have	
	Admission		Location	Allergy	Adm	ission	Diagnosis	Heig	ght	Weight	Code Status	
	Today		Sim 2-C	NKDA	RI	ower a	abd pain	54	in.	162 lbs	Full Code	

Physician Service: Emergency Medicine

Ph	vsician	Orders
	,	~, ~, ~,

- * Vital Signs every 1 hour
- * NPO
- * IV NSS @ 80 mL/hr

6/3/2013

Order Cancelled Order Completed Order Completed Order Completed

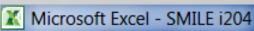
N/A

N/A N/A

Labs @ 08:50 6/3/2013

- * CBC
- * UA
- * Serum Beta HCG
- * Electrolytes
- * Blood Glucose
- * Creatinine
- * Amylase
- * Lipase
- * Type & Screen
- * Abdominal Ultrasound

Order Completed Order Completed Order Completed Order Needs Action Order Completed Order Completed Order Completed Order Completed Order Completed Order Completed





Simulated Medical Information Learning Experience

Last Name:	Bow	man Fi	rst Name:	Jennife	r DOB:	01/ 21/	1979 F	Rel: None		
Sex: Fema	le MR	# 1234	156789	Age: 32	Advanced Di	rectives:		Does not have		
Admissio	on	Location	Allergy	Admission	Diagnosis	Height	Weight	Code Status		
Today		Sim 2-C	NKDA	R lower	abd pain	54 in.	162 lbs	Full Code		
Physician Servi	ce: Emer	gency Medici	ne							
	Order S	ate:								
Physician Ord	Commor	n sets of			6/3/201	.3				
* Vital Signs e * NPO	with sin							Order Cancelled Order Completed		
* IV NSS @ 80		sis. Created cific						Order Completed		
	physicia	ans. Instead						Order Completed		

Labs @ 08:50

of entering

individual orders,

choose a "set" of

customized orders

and then remove any

within the set that do

physician can

* CBC

* UA

* Serum Beta Hnot appy.

* Electrolytes

6/3/2013

Order Completed

Order Completed Order Completed

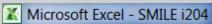
N/A

N/A

N/A

Order Needs Action

•	
Physician Orders	6/3/2013
* Vital Signs every 1 hour * NPO * IV NSS @ 80 mL/hr	Order Cancelled Order Completed Order Completed Order Completed N/A N/A
Labs @ 08:50	6/3/2013
* CBC * UA * Serum Beta HCG * Electrolytes * Blood Glucose * Creatinine * Amylase * Lipase * Type & Screen * Abdominal Ultrasound	Order Completed Order Completed Order Completed Order Needs Action Order Pending Order Cancelled Order Needs Action NA Order Completed Order Completed Order Completed Order Completed
Medication Orders	6/3/2013 N/A N/A N/A N/A





Simulated Medical Information Learning Experience.

Last Name:	Bowr	nan F	irst Name:	Jennife	DOB:	01/ 21/	1979 R	el: None
Sex: Female	MR#	f 123	456789	Age: 32	Advanced Di	irectives:		Does not have
Adestes		Lasation	Allanan	Advalaglas	Discourate and a second	Halaba	18/-1-1-	Ondo Otoboo
Admission		Location	Allergy	Admission	Diagnosis	Height	Weight	Code Status
Today		Sim 2-C	NKDA	R lower	aland and a	54 in.	162 lbs	Full Code

Physician Service: Emergency Medicine

	Medication Administration Record												
Medication	Dose	Frequency	Date	Date	Date	Date	Date						
		Initials/Site	Initials/Site	Initals/Site	Initials/Site	Initials/Site							

	PRN Medication Administration Record											
Med	Route	Date	Time	Initials	Date	Time	Initials					
Demerol	50 mg	q 4 hours	IV Push	4.9.12	8:35	co						
Tylenol Suppository 650 mg for pain or Temp >101 F not to exceed ? g'day	625 mg	q 4 hours	Per Rectum									



CRC with Diff

Simulated Medical Information Learning Experience

Last Na	me:	Bowman	First Name:		Jennife	DOB: 01/ 21/	1979	Rel: None	
Sex:	Female	MR#	123456789	Age:	32	Advanced Directives:		Does not have	

Admission	Location	Allergy	Admission Diagnosis	Height	Weight	Code Status
Today	Sim 2-C	NKDA	R lower abd pain	54 in.	162 lbs	Full Code

Physician Service: Emergency Medicine

LAB RESULTS

Specimen: Blood Collected: 6/3/2013 @06:18	CDC WIGH DIN		
	Specimen: Blood	Collected:	6/3/2013 @06:18

Name	Results	Reference Range
WBC NRBV	H 12.7	5.0 - 10.0
RBC	3.8	4.5 - 5.5
Hemoglobin Hematocrit	L 7.0 L 32.1	14 - 18 40.0 - 54.0
MCV MCH	83.6 L 27.7	80 - 100 28 - 32
MCHC RDW Platele MPV http://www.labtestso once to follow. Click a select this cell.	nline.org/ - Click and hold to	32 - 36 11.5 - 15.0 140 - 450 6.5 - 10.4
Granularcytes %	H 76.5	55 - 75
Lymph % Monocytes %	L 17.3 5.9	20 - 45 0 - 12
Eos %	L 0.2	2 - 6

Microsoft Excel - SMILE i204		_	
Blood Typing	O Negative	N/A	
Serum Beta HCG Specimen: Blood	Collected:	6/3/2013 @8:18	
Name	Results	Reference Range	
Beta Human Chorionic Gonadotrophin	478 mIU/mL	< 5 mIU/mL	
Electrolytes	Collected:	6/3/2013 @8:18	
Consideration of the said			
Specimen: Blood			_
Name	Results	Reference Range	
Name Sodium	141 mEq/L	135 - 145 mEq/L	
Name Sodium Bicarbonate	141 mEq/L 23 mEq/L	_	✓ What is the normal
Name Sodium Bicarbonate Calcium	141 mEq/L 23 mEq/L 9.8 mg/dL	135 - 145 mEq/L	What is the normal reference range of
Name Sodium Bicarbonate Calcium Chloride	141 mEq/L 23 mEq/L 9.8 mg/dL 102 mEq/L	135 - 145 mEq/L	reference range of calcium? Is this patient's
Name Sodium Bicarbonate Calcium Chloride Magnesium	141 mEq/L 23 mEq/L 9.8 mg/dL 102 mEq/L 1.8 mg/dL	135 - 145 mEq/L	reference range of
Name Sodium Bicarbonate Calcium Chloride Magnesium Potassium	141 mEq/L 23 mEq/L 9.8 mg/dL 102 mEq/L 1.8 mg/dL 3.8 mEq/L	135 - 145 mEq/L 22 - 26 mEq/L	reference range of calcium? Is this patient's
Name Sodium Bicarbonate Calcium Chloride Magnesium	141 mEq/L 23 mEq/L 9.8 mg/dL 102 mEq/L 1.8 mg/dL	135 - 145 mEq/L 22 - 26 mEq/L	reference range of calcium? Is this patient's

X	Microsoft Excel	-	SMILE	i20
		li		



Simulated Medical Information Learning Experience.

act I	Name:	Bowm	an Ei	rst Name:		Jennife	٥.	DOR:	01/	21/	1070	Rel:	None
Sex:	Female	MR#			Age:	32		nced Di			19/9		oes not have
	· cinare	1					- Irear			-			oes not nave
	Admission		Location	Allergy	Ad	missior	n Diag	nosis	Heig	ht	Weigh	t	Code Status
	Today		Sim 2-C	NKDA	R	lower	abd p	ain	54 ii	n.	162 lb	s	Full Code
Physician Service: Emergency Medicine													
шуы	ciali Sei vice.	Emerg	ency Medici	iie									
	· p:												
L. N	ursing Dia	gnosis	6										
				Docur	ment w	here you	i found i	the evide	nce for th	nis info	rmation.		
In	terventio <u>ns fo</u>	r your N	lursing Diag	gnosis									
	1												
	2												
	3												
2. N	ursing Dia	gnosis	5										
		•		Docum	ment wi	here uou	found	the evide	nce for th	nis info	rmation		
				1	HOLK W	11010 900	rround.		1100 101 4		madon.		
le.	terventions for	r morur N	lureina Disc	moeie									
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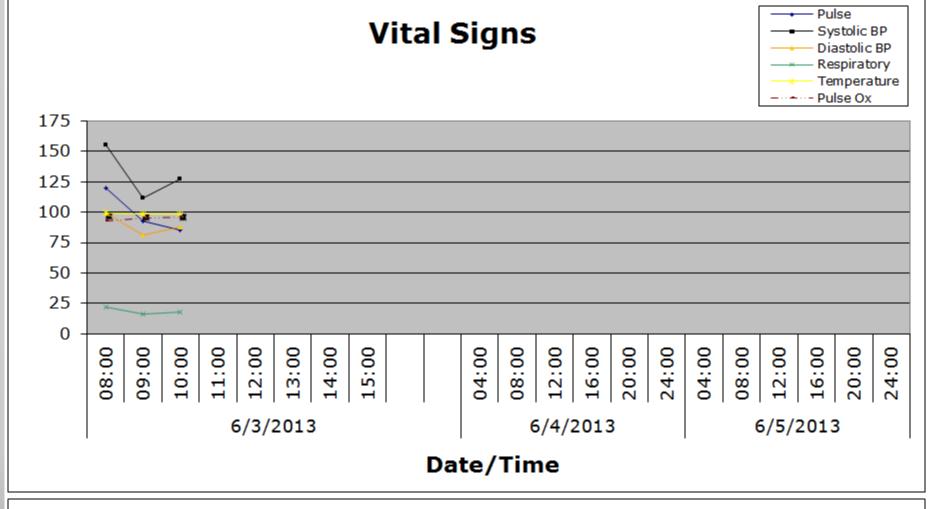
Simulated Medical Information Learning Experience.

Last Name:	Bowman	First Name:		Jennifer	DOB: 0	01/	21/	1979	Rel:	None
Sex: Female	MR#	123456789	Age:	32	Advanced Direct	ctive	es:	Does not have		

Admission	Location	Allergy	Admission Diagnosis	Height	Weight	Code Status
Today	Sim 2-C	NKDA	R lower abd pain	54 in.	162 lbs	Full Code

Physician Service: Emergency Medicine

Date	Time	Pulse	Systolic BP	Diastolic BP	Respiratory	Temperature	Pulse Ox
6/3/2013	08:00	120	155	99	22	99.4	93
	09:00	93	112	81	16	98.7	95
	10:00	85	127	88	18	98.4	96
	11:00						
	12:00						
	13:00						
	14:00						
	15:00						



Heart Rate

Microsoft Excel - SMILE i204



Simulated Medical Information Learning Experience.

Last Name: Bow		rst Name:	Jennife		: 01/ 21/	1979 Re		None				
Sex: Female MR	# 1234	456789 A	ge: 32	Advanced D	irectives:		Does not have					
Admission	Location	Allergy		Diagnosis	Height	Weight		Status				
Today	Sim 2-C	NKDA	R lower	abd pain	54 in.	162 lbs	Full	Code				
Physician Service: Emergency Medicine												
Respiratory - Cardiac - Bowel Assessment Drop-Down Menu												
Respirartory Assess	sment	R Lung		Upper Lobe	Clear	▼ L Lung	Upper Lobe	Clear				
Cardiac Assessmo	ent	Normal Sinus Rh	hythm	Middle Lobe Lower Lobe	Clear Rales Rhonchi Wheezes Stridor Pleural Friction Rub Diminished		Lower Lobe	Diminished				
Bowel Assessme Respiratory - R Lung - Upper Lobe		Hypoactive Clear										

Microsoft Excel - SMILE i204



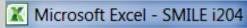
Simulated Medical Information Learning Experience

Last Name: Bowman		nan Fi	First Name: Jennifer		r DOB:	01/ 21/	1979 Re	l: None		
Sex:	Female	MR#	1234	56789	Age: 32	Advanced Di	rectives:	Does not have		
	Admission		Location	Allergy	Admission	Diagnosis	Height	Weight	Code Status	
	Today		Sim 2-C	NKDA	R lower	abd pain	54 in.	162 lbs	Full Code	

Physician	Service:	Emergency	Medicine
-----------	----------	-----------	----------

		×	
Date/Time	Note		i
	Patient admitted to ED bay Sim 1 B, husband with patient. Physician notified. IV started,	ľ	ŀ
7:56	20 g, R Forearm.ID band placed on L wrist. Patient instructed to remain NPO		f
	CO		9
			1
6/3/2013			5
			1
			0
			ı
6/2/2012		L	

Progress Notes
Completed by all
health care
professionals caring
for the patient.
Chart by exception chart only what is
not on flow
sheets.Timed. Can
read ongoing report
on patient's
condition from
multiple disciplines.





Simulated Medical Information Learning Experience

10

Last N	Last Name: Bowman		man Fi	First Name: Jennifer		r [DOB:	01/ 2	1/ 1979	Rel: None			
Sex:	Female	MR	MR# 123456789		Age:	32	Advanced Directives:				Does not have		
					_								
	Admission		Location	Allergy	Adr	nission	Diagnos	sis	Height	Weight	Code Status		
	Today		Sim 2-C	NKDA	R	lower a	abd pain		54 in.	162 lbs	Full Code		

Physician Service: Emergency Medicine Pain Assessment is considered one of the "Vital Signs". If patient reports pain and an intervention is given for that paint, a reassessment should always be performed. Pain Assessment is Considered one of the "Vital Signs". If patient reports pain and an intervention is given for that paint, a reassessment should always be performed.

Date	Time	0-10 Scale	Quality	Relief	Reassess	Scale
6/3/2013	08:00	9	Throbbing	Demerol IV	08:35	7

Microsoft Excel - SMILE i204



Simulated Medical Information Learning Experience.

Lock Money			et.			Janual Com		DOD:	01/ 2		4070	D. I.	No	
Last Name:		wman		rst Name:		Jennifer	_	DOB:		21/	1979		No	ne
Sex: Fo	emale M	IR#	1234	56789	A	ige: 32 /	٩d	vanced D	irectives:			Doe	s not have	
Admi	ission	Loc	ation	Allergy	,	Admission () i	agnosis	Height		Weight		Code Sta	atus
			1 2-C	NKDA								Full Co		
100	day	Sin	12-0	INNUA		R lower al	UC	ı pain	54 in.		162 lbs		Full Co	ue
Dhysisian C	Physician Service: Emergency Medicine													
Physician Service: Emergency Medicine														
	Intake Output													
	•		•									_		
Date/Time	PO(mL)	Source	IV 8	Source	Oth	ner(mL) /Source		Urine(mL) /Source		Drains(mL) /S	ource	Other(mL) /Source
6/3/2013														
10:48														
	500													
	500													
Total:	1000	mL	0	mL		0 mL		(0 mL		0 ml	L		0 mL
	.500							,	- · · · -		5	_		-
	Intake Total: 1000 mL								Output Total: 0 mL					
						.322								
			In	take							Outpu	t		
				i i i i i i i i i i i i i i i i i i i			Ш				Остра	`		

✓ Microsoft Excel - SMILE i204



Simulated Medical Information Learning Experience.

Last N	Name:	Bowman	Fir	st Name:		Jennife	er C	OB:	01/	21/	1979	Rel:	None
Sex:	Sex: Female MR# 1234567		56789	Age:	32 Advanced Directives:			:	Does not have				
	Admission	Loc	cation	Allergy	Adı	mission	n Diagnos	sis	Helg	ht	Weight	t	Code Status
	Today	Sir	n 2-C	NKDA	R	lower	abd pain		54 ir	1.	162 lbs	s	Full Code

Physician Service: Emergency Medicine

Ultrasound



Advanced Directive -

Directive to Physicians

Directive made this day of in the year.

- I, being of sound mind, willfully and voluntarily make known my desire that my life shall not be artificially prolonged under the circumstances set forth in this directive.
 - If at any time I should have an incurable or irreversible condition caused by injury, disease, or illness certified to be a terminal condition by two physicians, and if the application of life-sustaining procedures would serve only to artificially postpone the moment of my death, and if my attending physician determines that my death is imminent or will result within a relatively short time without the application of life-sustaining procedures. I direct that those procedures be withheld or withdrawn, and that I be permitted to die naturally.
 - In the absence of my ability to give directions regarding the use of those life-sustaining procedures, it is my intention that this directive be honored by my family and physicians as the final expression of my legal right to refuse medical or surgical treatment and accept the consequences form that refusal.
 - 3 If I have been diagnosed as pregnant and that diagnosis is known to my physician, this directive has no effect during my pregnancy.
 - 4 This directive is in effect until it is revoked.
 - 5 Lunderstand the full import of this directive and Lam emotionally and mentally competent to make this directive.
 - 6 Lunderstand that I may revoke this directive as any time.
 - 7 I request that only comfort care be provided to me, no antibiotics, no artificial nutrition, mechanical ventilation, and no hydration. It is my strong preference to be allowed to die outside of a care facility if possible, even if that preference is determined by my physician to shorten my period of dying. The only condition under which I desire these

SMILE 2.0

Microsoft Excel - SMILE 4.6.13 **Drexel University Hospital** Date of Birth 9/15/34 Sex Name Dee, Joseph Age 78 Male m/d/vv Last, First MRN 987050398 Allergies PCN, ASA, Sulfa, Jelly, Rhino Horn **Admission Diagnosis** Code Status Otitis Media Unknown **Primary Care Practice** Weight lb Religion Height N/A



Past Medical History

Past Surgical History

in

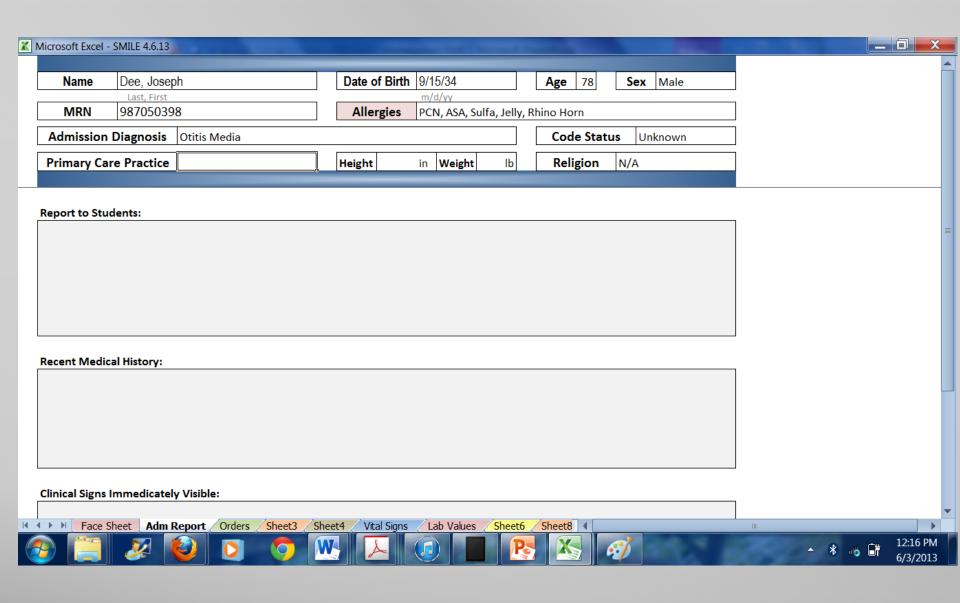
Medications Taken at Home

Address: 2759 Whiniepopo Street

Philadelphia, PA 19138

Telephone: 215-555-0983

Cell Phone: N/A Mark Dhana. NI/A



Thank you!

co33@drexel.edu