

Advanced Clinical
Decision Support Software

TOOLS FOR NURSES



PowerForm Search

Why did we develop this software?

This software was developed to help nursing and ancillary personnel efficiently find and utilize the appropriate PowerForm for their needs.

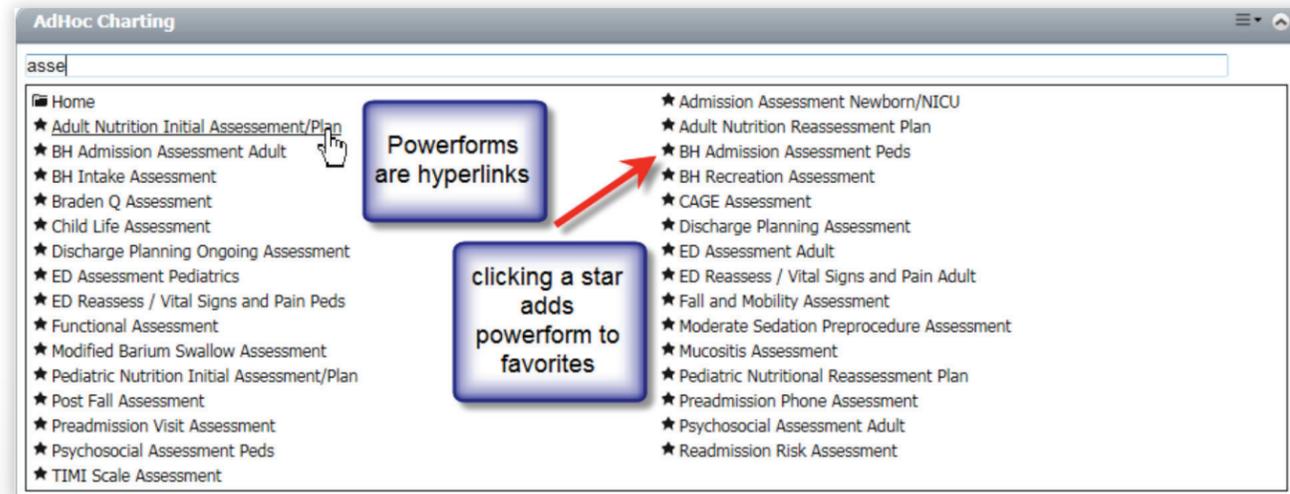
Value proposition

From nursing staff feedback, we learned that nurses found it challenging to find a PowerForm if they didn't know the name and location of the folder in which it was placed.

Nurses also wanted to more easily access and save commonly used PowerForms.

How is the PowerForm search different?

- PowerForm Search enhances searching capability for quicker searches.
- PowerForm Search lets nurses easily access and save commonly used PowerForms.
- Nurses now have the ability to save favorites.



Measurements Height / Weight / Allergy Advisor

Why did we develop this software?

In the interest of patient safety, height, weight and allergies must be entered into the EMR prior to medication administration. We found that these important fields were often not being entered in a timely manner, which caused delays in medication profiling by the pharmacy, and ultimately a delay in safe medication administration to the patient.

Value proposition

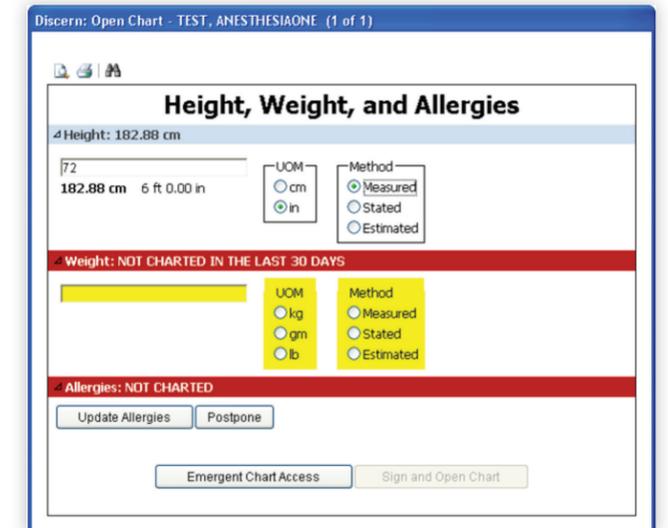
This custom advisor streamlines the entry of essential measurements to promote safer medication administration.

Product description

The alert is embedded into the clinical workflow, providing streamlined data presentation and facilitating immediate documentation of height, weight and allergies.

The Measurements Height / Weight / Allergy Advisor includes:

- Dynamic display of age-appropriate measurements and age-based out-of-range checking
- Flexible data entry (in metric or imperial), stored in metric form
- Alerts for any weight value that deviates more than 20% from the previously entered weight

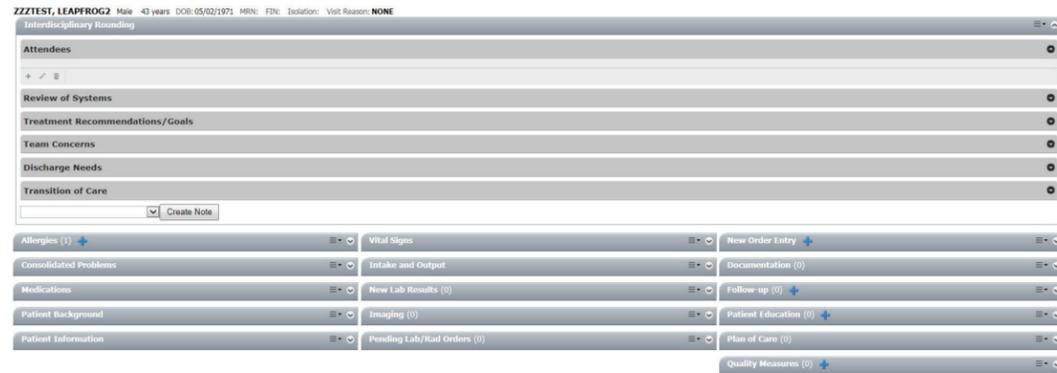


Measurements					
Last 30 days for the selected visit					
	Next	Birth	Latest	Previous	Change
Daily Weight	30 kg		2kg	2kg	0.00
	66.14lb		23 hrs	23 hrs	
Dosing Weight			4.0kg	4.5kg	11.11%
			3 wks	3 wks	
Length	50 cm		50cm	50cm	0.00
	1ft 7.69in		23 hrs	23 hrs	
Head Circumference	6 in				
Abdominal Circumference	11 in				
	27.94cm				
Chest Circumference	7 in				
	17.78cm				
BMI	16kg/m2		16kg/m2	16kg/m2	0.00
			23 hrs	23 hrs	
BSA	0.24m2		0.24m2	0.24m2	0.00
			23 hrs	23 hrs	

Interdisciplinary Rounding

Why did we develop this MPage?

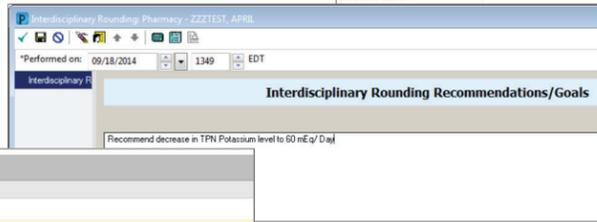
The Interdisciplinary Rounding Mpage facilitates comprehensive documentation of team rounding and transitional care planning. It was developed to enhance communication between disciplines and to reduce adverse events such as hospital-acquired conditions and readmissions.



Value proposition

We have found this tool useful in critical care, ICU, and rehabilitation settings where it helps focus the treating team on the goals and needs for discharge.

Treatment Recommendations/Goals	
	Comment
Physician	
Pharmacy	Recommend decrease in TPN Potassium Level to 60 mEq/ Day
Nursing	
RESPIRATORY	
Case Management	Planning for LTAC placement on discharge
Social Work	
Physical Therapy	
Occupational Therapy	
Speech Therapy	
Dietary	Recommend to place PEG tube
Spiritual	
Wound Care	



Team Concerns	
	Risk
VTE Prophylaxis	Patient is high risk
Readmission Risk	
Discharge Needs	Readmit Lives Alone/No Support: Yes Readmit ADL Assist Needs: Yes Readmit Medication Knowledge Deficit: Yes Readmit Polypharmacy: Yes Readmit High Risk Meds: Yes Readmit Depression/Mental Health Hc: Yes Readmit Acute/Chronic Wound or Ulcer: Yes Readmit Incontinent: Yes Readmit Multiple Diagnosis: Yes Readmit Hospital stay in last 60 days: Yes Readmit O2 or Neb Management Assist: Yes Readmit Risk Score: 19
Transition of Care	
Working Diagnosis	
Anticipated Date of End of Life	
Discharge Planning	
PCP	No, Referring Doctor MD
Follow-Up Appointments	
Referrals Needed	

Transition of Care		
		Comment
Working Diagnosis	IDR working dx test	This is the DX that is put into the ADT order
Anticipated Date of Discharge	07/18/2014	dependent on cardiologist follow up today
End of Life	Hospice	arrangements made
Discharge Planning	Home with family care	arrangements made
PCP	No pcp no family, Dr MD	Family states Dr. John Doe is PCP, sent order to update
Follow-Up Appointments	Scheduled	no further appointments needed at this time
Referrals Needed	Previously Addressed	no further appointments needed at this time
Education	Diagnosis, Treatment, Medication	all addressed
Education Responsible Learner	Jane Doe, Sister	Sister present for education on ????
Readmit Lives Alone/No Support		arrangements made for home health; neighbor will check in on patient daily
Readmit ADL Assist Needs		
Readmit High Risk Meds		
Readmit Condition Knowledge Deficit		
Readmit Cognitive Impairment		
Readmit End Stage Condition		
Readmit Multiple Diagnosis		
Readmit O2 or Neb Management Assist		arrangements made with O2 Speciality Care; approved by insurance for 6 months

Table of Contents

What does the Table of Contents component provide?

The Table of Contents is provided as an MPage, so it allows for enhanced alerting and navigation functions for our advanced clinical decision support. Special features also include the ability to change colors, incorporate hovering functionality, icons and non-disruptively alerts for significant clinical events, including pending discharge or an abnormal lab value. It also allows for efficient navigation to advisors and other actions directly from the table of contents.

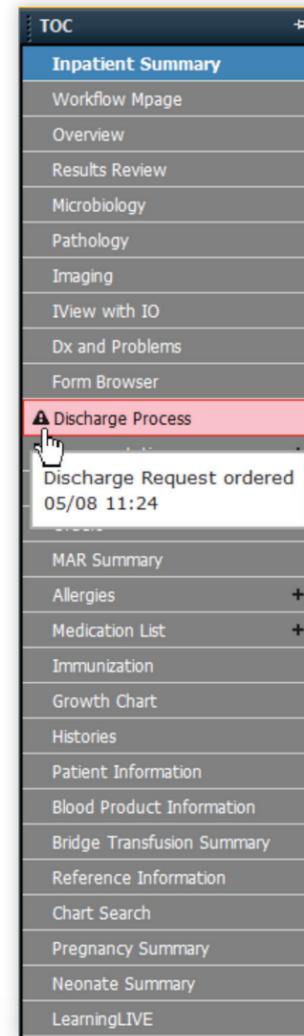
The Table of Contents also allows for custom advisors, such as the electrolyte advisor and others.

Value proposition

The Table of Contents is built as an MPage, a web-based platform that enables us to create custom workflows, with the ability to access real-time data.

What makes this different?

Using the MPage platform, we can provide an infrastructure that supports advanced alerting and enhanced navigation.

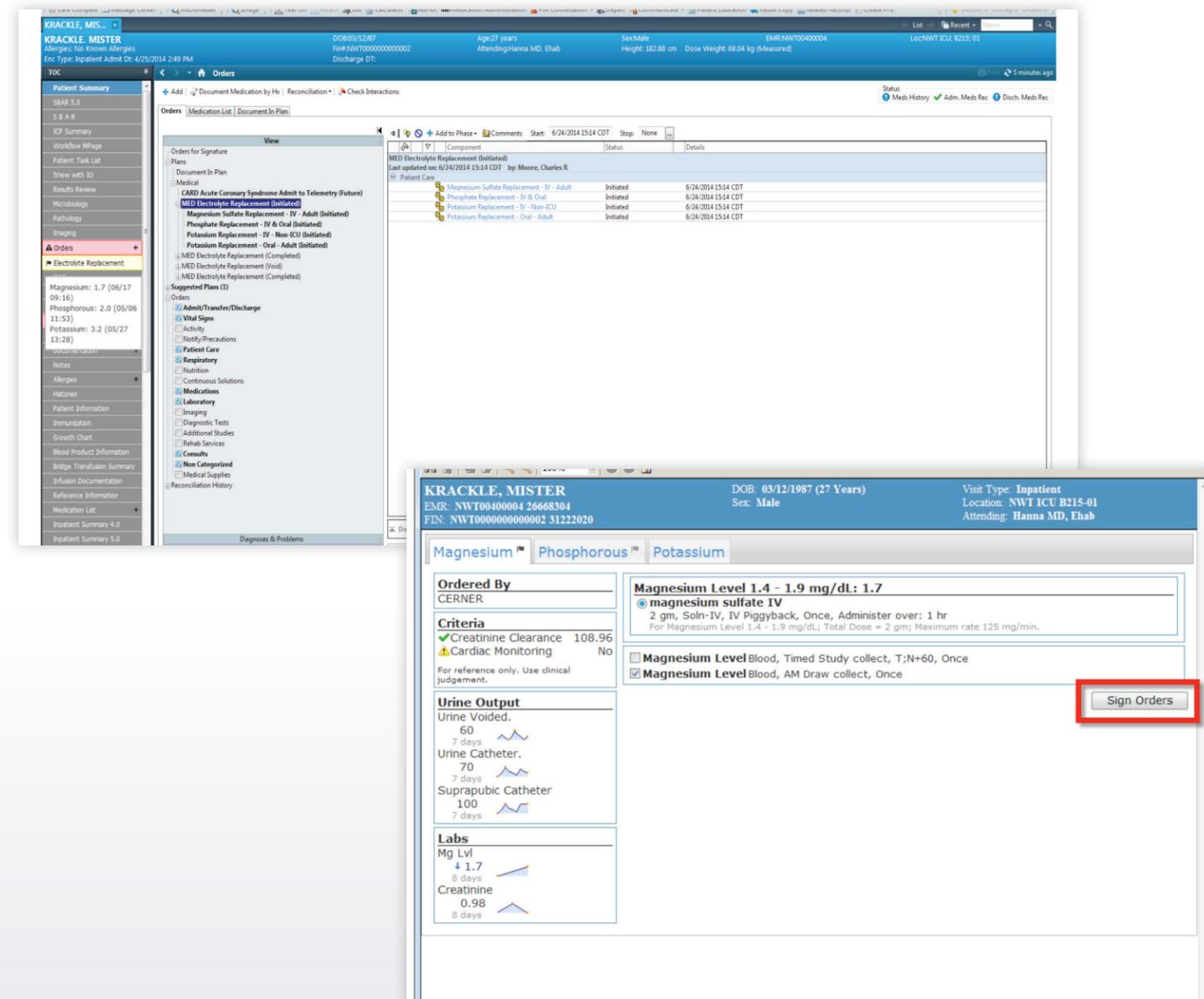


How can the Electrolyte Advisor help you?

The Electrolyte Advisor streamlines all aspects of inpatient electrolyte management.

Value proposition

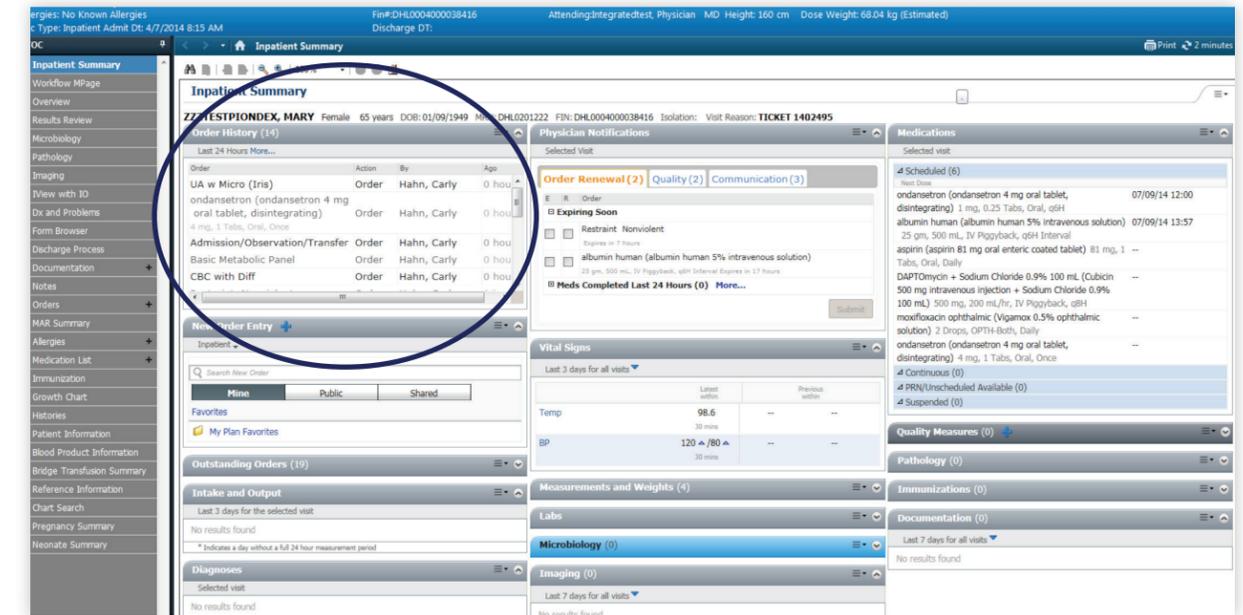
The Advisor alerts clinicians to electrolyte deficiencies (potassium, magnesium and phosphorus) and guides appropriate electrolyte replacement and monitoring.



Why is Order History important to you?

This widget was designed at the request of physicians who wanted the ability to see past orders, like they can do when they look through the Orders section in a paper chart.

Physicians want to see new orders placed since the last time they saw the patient, particularly if they didn't round over the weekend. They also want to be able to identify significant clinical events and familiar ordering patterns, such as the combination of STAT orders for Lasix IV and a Chest Film for suspected fluid overload, or cultures and Tylenol in response to fever spikes.



Value proposition

This software component tells the patient's story because it provides a review of the sequence of orders placed for a patient.

User-friendly

Because the Order History was developed using the MPage platform, it:

- is viewable on the inpatient summary landing page so physicians and nurses can view orders in reverse chronological order.
- allows physicians to expand the search by 24-hour increments to accommodate weekend and holiday workflows.
- is easy to hover over an order to display details.
- excludes non-clinically relevant order actions.

Crossings Healthcare Solutions provides custom developed, Advanced Clinical Decision Support Software leveraging the Cerner Millennium System. Our award-winning MPages & Advisors are seamlessly integrated into clinical workflow, facilitating enhanced usability, efficiency and communication.

For more information about our healthcare solutions, please contact us at **610-994-2200** or at **info@crossingshealthcare.com**.



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