

Franciscan Epic FAQ for Physicians and Providers

Common Questions about CPOE and Documentation

- Q: I don't have time to enter orders myself so I plan to call back to the floor and give telephone orders after I leave the unit. Is this OK?**
- A:** No, providers are required to use CPOE unless there is an emergency situation which prevents it. Epic provides metrics to track the use of Verbal and Telephone orders and these will be monitored to be sure we are all in compliance with VMFH policy and medical staff regulations.
- Q: I just refer patients to VMFH for labs or X-rays. Surely I'm not required to use CPOE?**
- A:** Any provider who has privileges at VMFH is required to use CPOE unless there is an emergency situation which prevents it. *See Epic Expectations for providers on p. 2.*
- Q: I just see patients in the Outpatient Dialysis Center and I don't want to learn another EHR. How do I handle my orders and notes?**
- A:** Any provider who has privileges at VMFH is required to use CPOE and encouraged to document in Epic. Dictation/transcription will still be available for some period of time while VMFH develops a plan to transition it out. *See Epic Expectations for providers on p. 2.*
- Q: What about those order sets like the Electrolyte Protocol that I just check a box on the admission order set right now on paper. How will that work in Epic?**
- A:** You must open and accept the Electrolyte protocol as an additional order set along with the admission order set. Once signed, all of the orders from the Electrolyte Protocol will then be automatically included in the patient's admission orders. You can also save that order set as a personal Favorite so it is easier to use next time.
- Q: What if I am called at home? Am I still expected to use CPOE?**
- A:** Providers are expected to use CPOE when they have access to the VMFH Epic system. Telephone order with readback may be used in emergency situations and when access to Epic is not technically feasible (for example, while driving between office and hospital or in the middle of the night while on call). If Epic is accessed from home to review a patient's record, it will be far more efficient to enter orders via CPOE than to call in a telephone order, therefore CPOE in this situation will be expected.
- Q: The HUCs always used to transcribe my orders so why can't I just have them do the same now?**
- A:** One of the patient safety goals with Epic is to have the clinician best prepared to understand the full scope of the patient's condition enter orders and handle any alerts during the ordering process. The provider is uniquely prepared to safely do this. The HUCs will not have access to order entry.
- Q: Who is responsible for doing Medication Reconciliation?**
- A:** Providers are responsible for medication reconciliation, indeed for managing all the patient's care to best meet the patient's needs. The ED provider would reconcile medications on ED patients including those who are discharged from the ED. When there are multiple providers involved in the care of the patient the Attending is ultimately responsible for medication reconciliation. When patients transfer between services or levels of care it is the Receiving provider who will reconcile medications and other orders. It is important to remember that a patient cannot be discharged until the Discharge Medication Reconciliation is completed.

Epic Expectations for Franciscan Active Staff, Referring Staff and Providers Not on Medical Staff

Medical Staff Category	Order Entry	Documentation	Other Comments
Active Staff	CPOE Required	Structured documentation (including partial dictation) required	
Referring Staff	Limited orders accepted. See comments.	Notes not accepted	See Item 3 below, and Only diagnostic test orders and some non-invasive treatments, such as PT/OT/ST, are accepted
Providers Not on Medical Staff	Limited orders accepted. See comments.	Notes not accepted	See Item 3 below, and Only diagnostic test orders and some non-invasive treatments, such as PT/OT/ST, are accepted

Key Points to Remember:

1. All Active Staff are required to complete Epic training, demonstrate competency, and routinely use CPOE.
2. Providers who are not on the medical staff but routinely see patients in VMFH locations must make arrangements to become Active staff members.
3. Epic provides functionality for Referring and Non-staff providers to access Epic. This functionality is called EC Link and will be implemented in the near future but won't be available at go-live. The policy of accepting written orders and notes may be modified once EC Link is available.