UHN DISCHARGE SUMMARY

PHARMACIST REFERENCE GUIDE

Version 4.0, October 2, 2017

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TIMELY DISCHARGE SUMMARY COMPLETION IS CRUCIAL FOR ALL INPATIENTS. THIS ENSURES CONTINUITY OF CARE, DECREASES HOSPITAL RE-ADMISSION RATES AND PREVENTS ADVERSE EVENTS POST-DISCHARGE.

UHN DISCHARGE SUMMARY & ELECTRONIC MEDICATION INFORMATION TRANSFER TOOL (EMITT) APPLICATION

THE APPLICATION WAS DEVELOPED IN COLLABORATION WITH UHN CLINICIANS, PATIENT PARTNERS, PRIMARY CARE, AND THE TORONTO CENTRAL LOCAL HEALTH INTEGRATION NETWORK. IT SUPPORTS COLLABORATIVE PRACTICE AND IMPROVED VALUE FOR PRIMARY CARE.

THIS GUIDE PROVIDES A GENERAL OVERVIEW OF MEDICATION RECONCILIATION AND EMITT FUNCTIONALITY WITHIN THE DISCHARGE SUMMARY APPLICATION

APPLICATION ACCESS

1

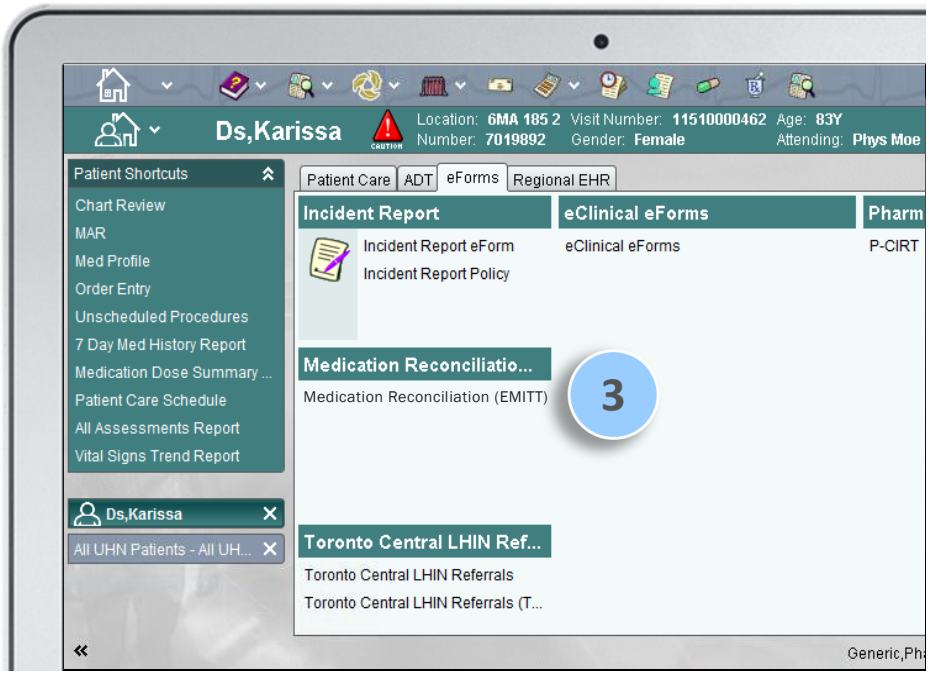
Log in to EPR using your EPR ID and password and **search** for the **patient**

2

Click on the patient's **electronic record** and then select the desired **inpatient visit**

3

Navigate to the **eForms** tab and then click on the **Medication Reconciliation (EMITT)** button

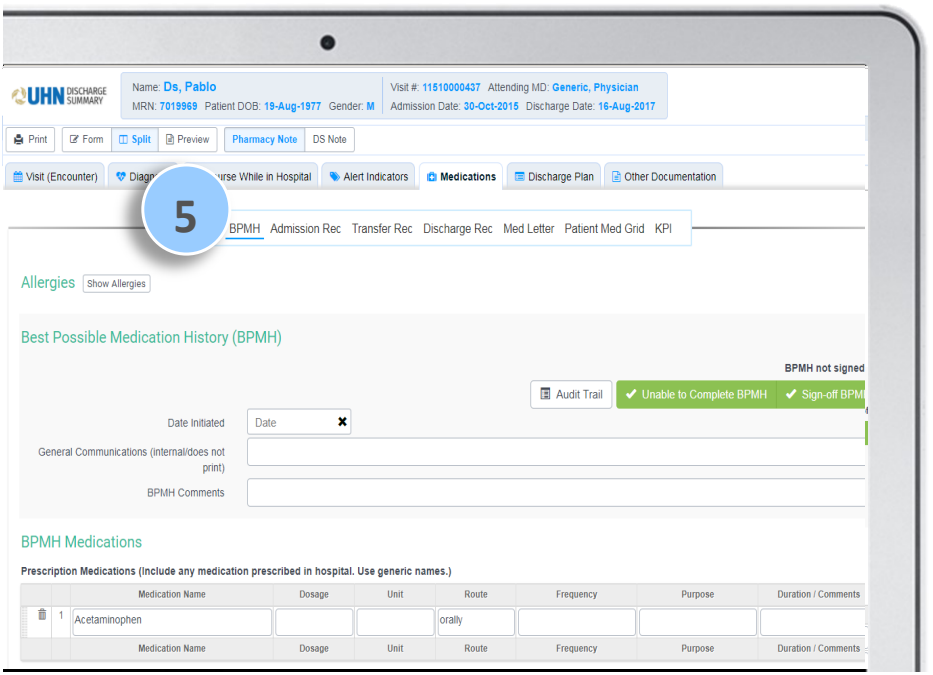


4

Upon clicking the Medication Reconciliation (EMITT) button you will be directed to the **integrated Discharge Summary/EMITT application**

5

The **Discharge Summary** for the patient will launch in a separate web browser and default to the **BPMH** sub-tab of the **Medications** tab



GENERAL LAYOUT

PREVIEW BUTTONS can be used to preview the note in full-screen or split-screen mode, or to hide the preview note

PRINT can be used to print the Discharge Summary or a medication-related document within the **Medications** sub-tabs

MEDICATIONS tab consists of seven sub-tabs; users are defaulted to the BPMH sub-tab

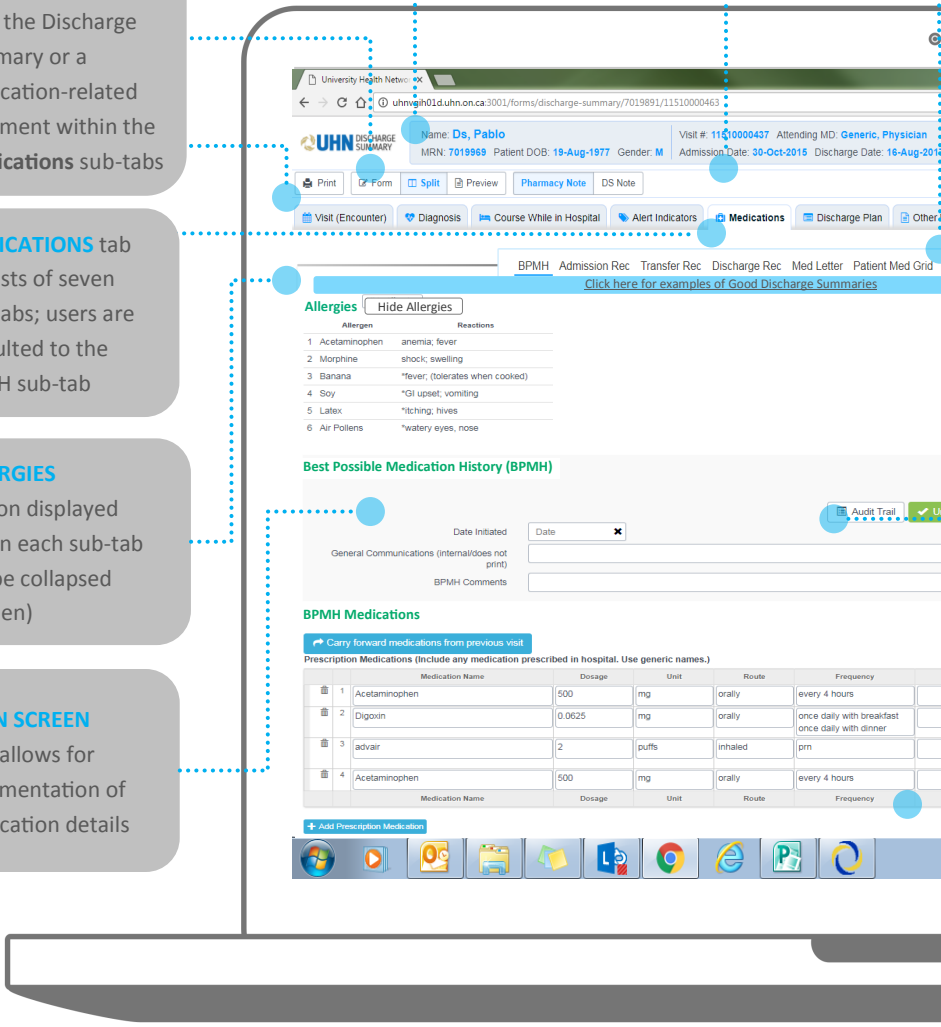
ALLERGIES section displayed within each sub-tab can be collapsed (hidden)

MAIN SCREEN area allows for documentation of medication details

PATIENT DEMOGRAPHIC INFORMATION is always indicated at the top of the screen

The **DISCHARGE SUMMARY** consists of six tabs — **Visit (Encounter), Diagnosis, Course While in Hospital, Alert Indicators, Medications** and **Discharge Plan**

COLOURED MESSAGES downtime and other notification



BANNER indicate reminders important

UNDO allows the user to remove the most recent changes saved to the note

opens Help and Support information; including eModules, guides and Help Desk contact information

USER EDITING indicates other users working concurrently

NAME indicates the user logged into the application

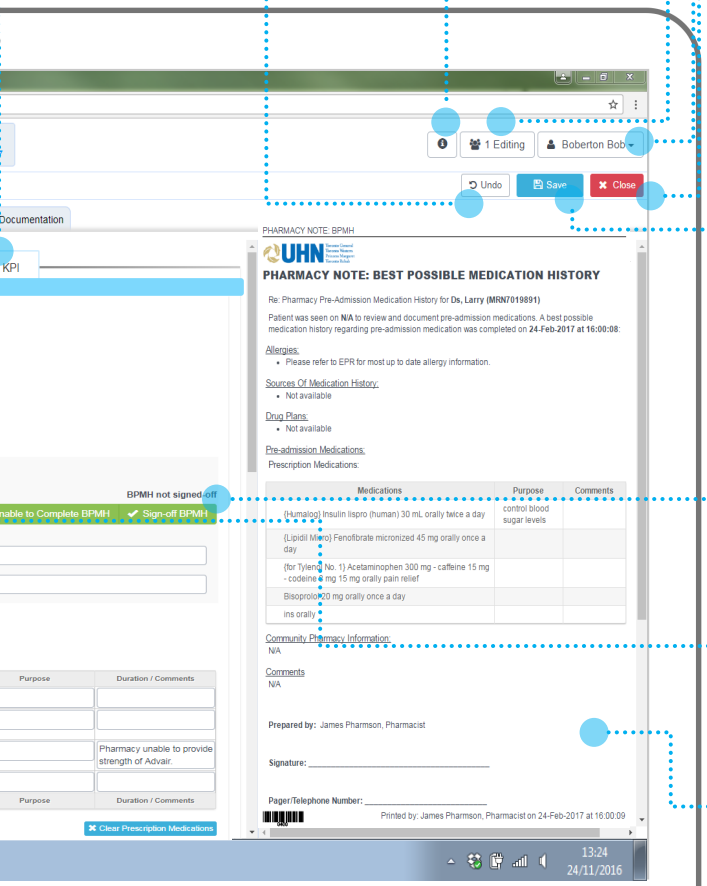
CLOSE allows the user to save and log out of the application

SAVE allows the user to save all work and exit the application; the application also auto-saves each time a field is completed

COMPLETION/ SIGN-OFF allows the user to indicate completion or cancel completion in each **Medication** sub-tab

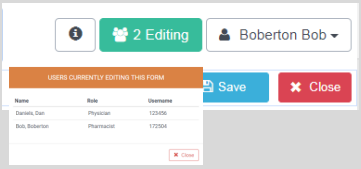
AUDIT TRAIL indicates sign-off history of a note

PREVIEW area displays the note being updated and how it appears when printed

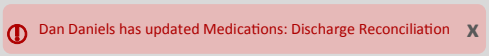


FEATURES & FUNCTIONALITIES

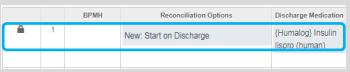
Enhanced inter-professional collaboration through:



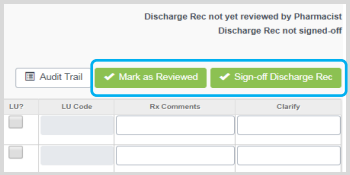
The ability to **concurrently contribute** to the same note, with an **indicator** in the upper-right corner showing the **number of users editing**



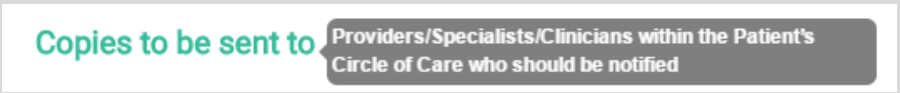
User notifications when another clinician has edited a part of the Discharge Summary



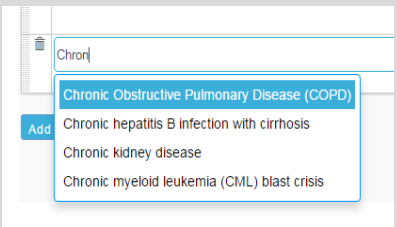
Fields that lock if another clinician is updating them, to prevent accidental overwriting of information



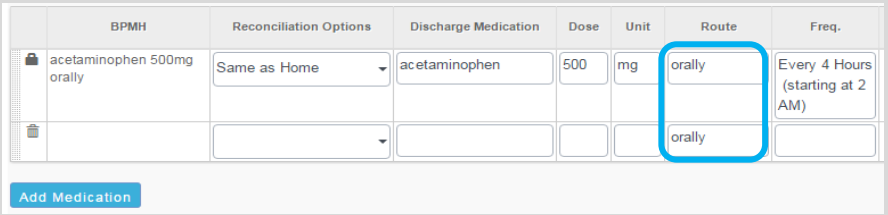
Completion/Sign-Off buttons allow the user to indicate completion or cancel completion in **Medication** sub-tabs; the **Review** button allows Pharmacists to indicate review of the section; sign-off/review is only possible when no one else is editing the same table



Hovering over a heading/button displays its definition and/or explains its functionality

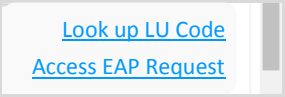


Type-ahead drop-downs require a minimum of three characters entered into the field for a list of matching options to be displayed; the list narrows down as more information is entered. Selecting a provided option optimizes data entry and ensures consistent use of terminology

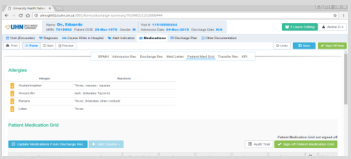


The medication route **auto-populates to 'orally'** for added medication rows, and can be edited if needed

Buttons to **pull Pharmacist/Prescriber and Drug Plan coverage information** into subsequent sub-tabs reduce the need to re-enter information



A number of **hyperlinks** to important information or supplementary forms are available within the application, including LU Codes and EAP Requests



Pharmacists can now **view** the entire Discharge Summary, and **edit** the **Medications** and **Discharge Plan** tabs

TABLE/GRID USABILITY FEATURES

ICON/BUTTON	FUNCTION
	Dotted edges along the left-side of a cell indicates that by clicking and dragging, a **row can be moved up or down, and a column can be moved left or right** (or deleted by dragging out of the table)
	A garbage can icon on the left-side of a row **can be clicked to delete the row**
	A lock icon on the left-side of a row indicates that the **row cannot be moved or deleted**
atorvastatin	A greyed-out cell in a table indicates that a **value cannot be entered or changed**
Add Discharge Medication	Clicking this button **adds an additional row** to a table in order to enter additional medications
Add Column	Clicking this button **adds an additional column** to a table (or re-add a previously deleted column)
Align BPMH Medications	Clicking this button **pulls signed-off BPMH medications into the table** being edited, aligns to matching medications (if exists), and adds to data in the table
Update Discharge Medications from EPR	Clicking this button **pulls the most recent medications from EPR into the table** being edited, aligns with BPMH (if available), and overwrites data in the table
Carry forward from previous visit	Clicking this button **pulls medication information from the most recent visit** where the Discharge Reconciliation or BPMH was signed-off (within the past 6 months)
Clear Discharge Medications	Clicking this button **clears the entire medication table above;** this change can be reversed using the Undo button

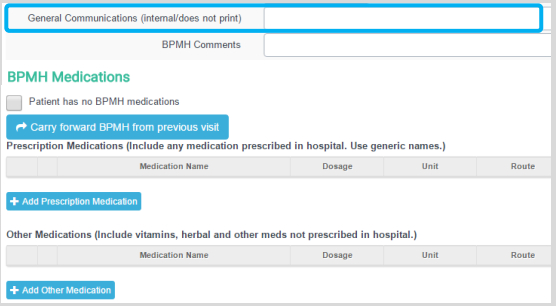
To move more easily within tables press **Tab to move ahead by one cell and Shift+Tab to move back by one cell**

MEDICATION RECONCILIATION

BEST POSSIBLE MEDICATION HISTORY (BPMH)

BPMH can be **populated from a signed-off Discharge Reconciliation or BPMH from a patient's previous inpatient visit** (within the last 6 months)

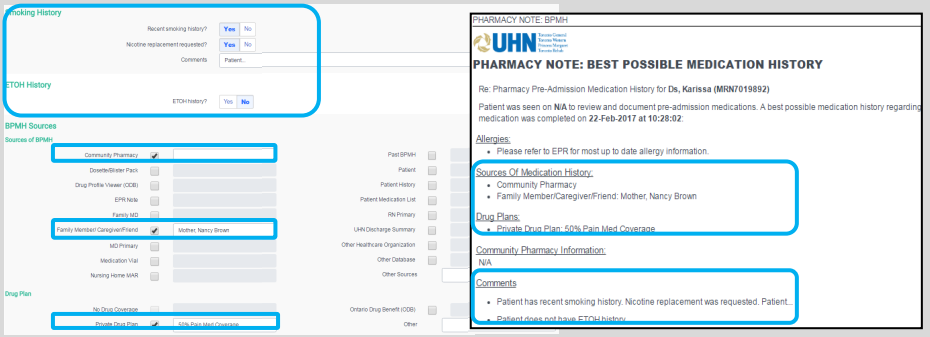
BPMH completed while a patient is an emergency patient is preserved when the visit is converted and the patient is admitted as an inpatient



The **General Communications** field is for internal Pharmacist communications and does not print onto any notes

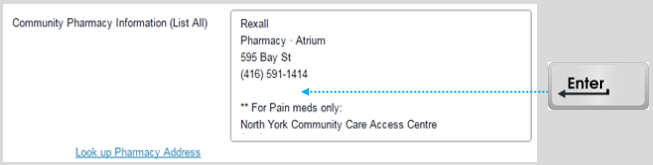
Prescription and **non-prescription medications** are documented in separate tables

Signed-off BPMH prescription medications **auto-populate and align within the admission, transfer and discharge reconciliation tables**



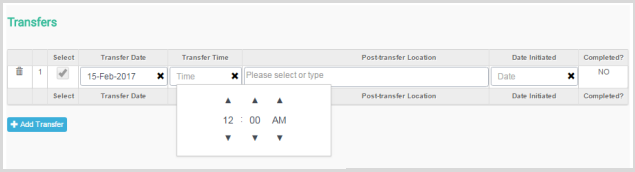
Smoking and **ETOH History** information is printed in the comments area of the BPMH

Any **Sources of BPMH** and **Drug Plan** checkboxes selected, along with information entered in the accompanying field, will be printed into Pharmacy Notes

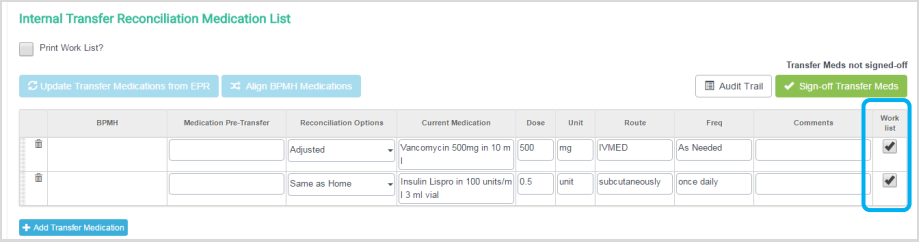


Press the Enter key to **format Community Pharmacist information** to separate lines

TRANSFER RECONCILIATION

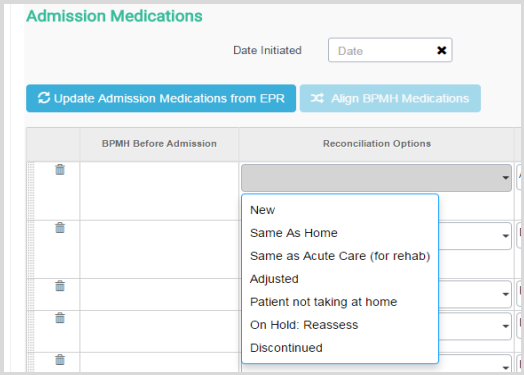


Transfer Date and **Time** must be entered for all transfers in order to pull medications from EPR for the specified period of time



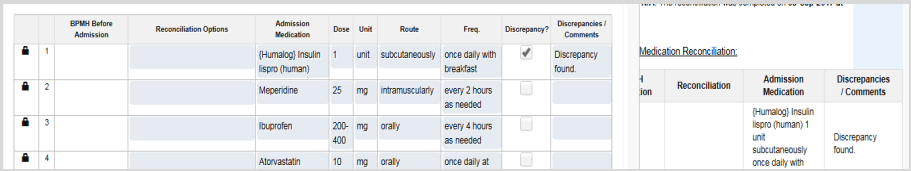
By clicking the **Work List** checkbox beside each medication (if appropriate), users can generate and print a list of medications requiring follow-up

ADMISSION RECONCILIATION



Improved Reconciliation options are available in the Admission Medications table, including **New, Same As Home**, **Same as Acute Care (for rehab)**, **Adjusted**, **Patient not taking at home**, **On Hold: Reassess**, and **Discontinued**

When the reconciliation option **Same as Home** is selected for a BPMH medication, **details are auto-populated into subsequent fields**

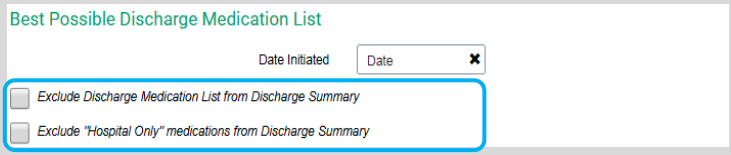


By clicking the **Discrepancy?** checkbox, "Discrepancy found" will appear in the **Comments** field; all information in the Comments field will print onto the Pharmacy Note

MEDICATION RECONCILIATION

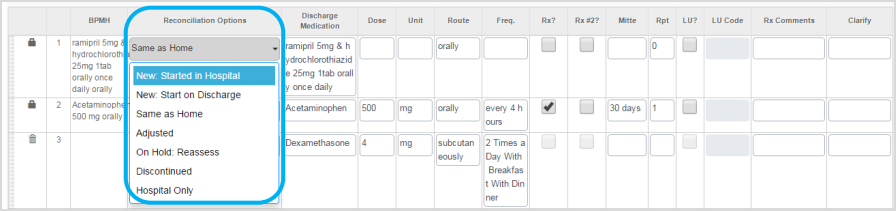
DISCHARGE RECONCILIATION

Information entered into the **Best Possible Discharge Medication List** will flow into the **Medication Letter** and **Patient Medication Grid;** it can also be a source of BPMH if the patient is readmitted



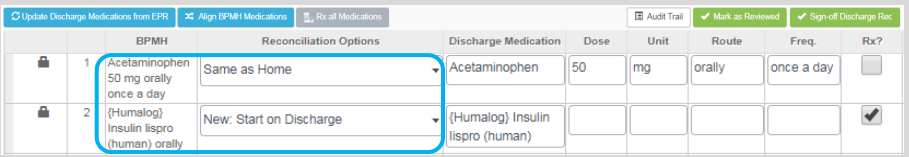
Select **Exclude "Hospital Only" medications from Discharge Summary** to omit medications reconciled as "Hospital Only" from the Discharge Summary output

Select **Exclude Discharge Medication List from Discharge Summary note** to sign-off on the Discharge Summary without completing medication reconciliation; only the **Discharge Medication Comments** will appear in the **Discharge Summary printout** (if a patient's Discharge Disposition is set to Deceased, this checkbox is auto-selected)



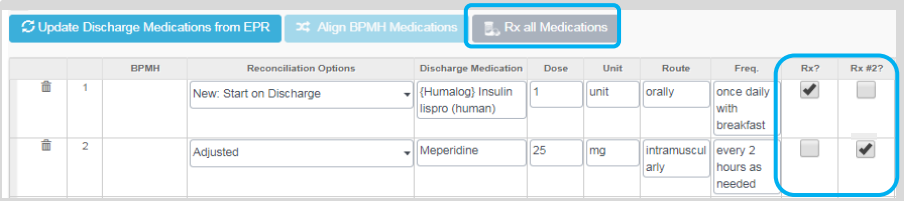
Within the **Best Possible Discharge Medication List**, **Reconciliation Options** include **New: Started in Hospital, New: Start on Discharge, Same as Home, Adjusted, On Hold: Reassess, Discontinued,** and **Hospital Only**

When the reconciliation option **Same as Home** is selected, details in the BPMH column (if available) **are auto-populated into subsequent fields;** when **New: Start on Discharge** and **New: Started in Hospital** are selected, medication name is populated into subsequent fields and Rx? is auto-selected



To Sign-Off/Mark as Reviewed, a **Reconciliation Option** is required

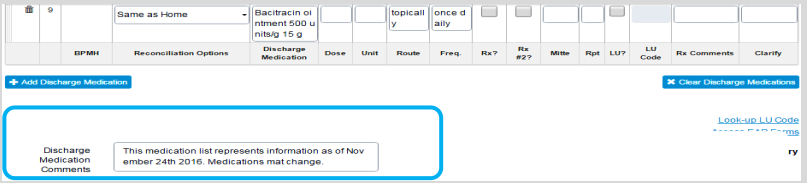
To sign-off on a prescription, the **Medication Name, Dose, Unit** for oral medications, **Route, Frequency, Mitte** and **Rpt** (repeats) are also required



Rx all Medications allows Users to prescribe **New, Adjusted** and **Same as Home** medications with one click

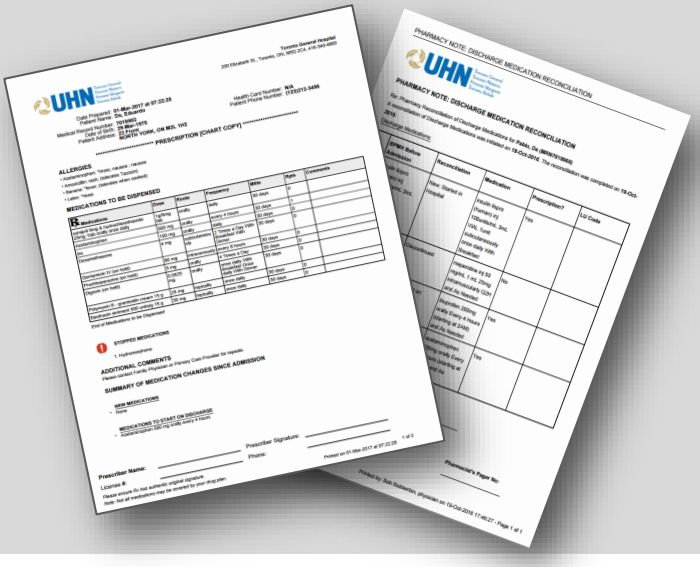
Up to **two** separate **Prescriptions** can be generated to support Prescribers with limited sign-off authority on medications (e.g. scope of practice does not include sign-off on narcotics) or Patients that have multiple dispensaries

Prescribers with limited sign-off authority can print both prescriptions, but have the other prescriber sign-off the second prescription if needed



Discharge Medication Comments documented in this sub-section will appear in the **Discharge Summary printout** and the **Pharmacy Note** (only **Rx Comments** print on the prescription)

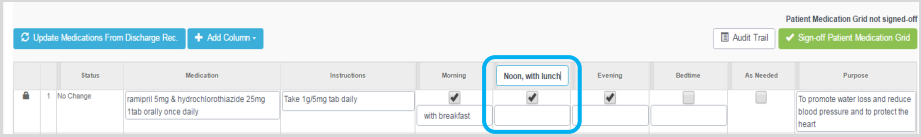
Up to **two Prescriptions**, a **Pharmacy Note** and the **Discharge Summary** can be generated from the **Discharge Reconciliation** sub-tab



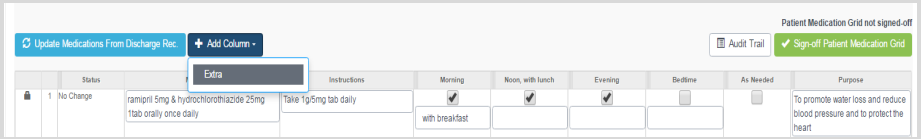
MEDICATION RECONCILIATION

PATIENT MEDICATION GRID

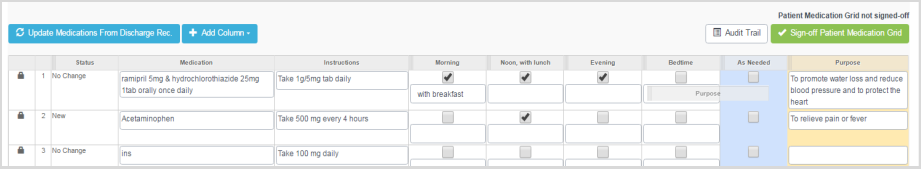
In order to sign-off on the **Patient Medication Grid,** the Discharge Reconciliation must be 'Marked as Reviewed' and/or 'Signed-off'
Within the **Patient Medication Grid**, the **Instructions** field must be filled out and checkboxes in that row need to be selected to appear in the grid



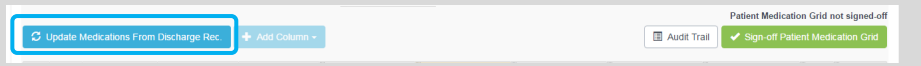
Columns in the grid can be **renamed** by clicking on their title and editing the field



An extra **column can be added** to the grid to accommodate an additional medication time by using the blue **Add Column** drop-down button above the grid



Columns can be **rearranged** by clicking the column header and dragging it to the desired slot, and **removed** by dragging the column out of the grid



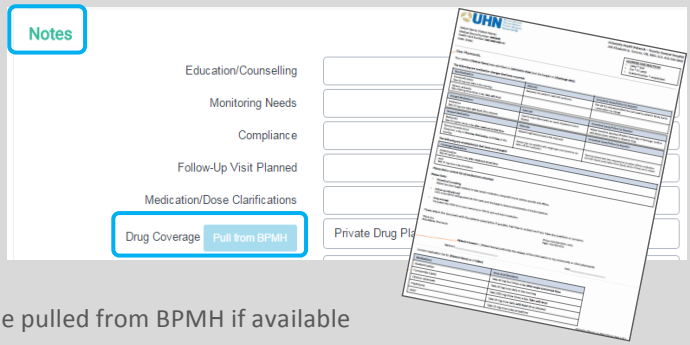
Users will be prompted to update the Patient Medication Grid if any changes have been made to the Discharge Reconciliation; only medications modified in the Discharge Rec will be updated in the grid. Customizations made to medication name, instructions, schedule checkboxes and purpose for all other medications will be preserved.

Most patients prefer the vertical grid over the horizontal grid

MEDICATION LETTER

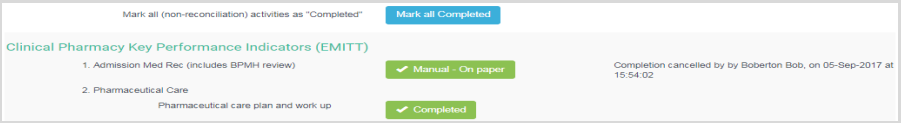
Medications in this sub-tab are populated from the Discharge Reconciliation sub-tab and are categorized based on their reconciliation status

Fields under the Notes heading are not mandatory; only fields containing information will appear in the Medication Letter



Drug coverage can be pulled from BPMH if available

KEY PERFORMANCE INDICATORS



Activity Sign-off/Completion is tracked in this sub-tab; the **Completed** button automatically updates when the associated sub-tab is signed-off

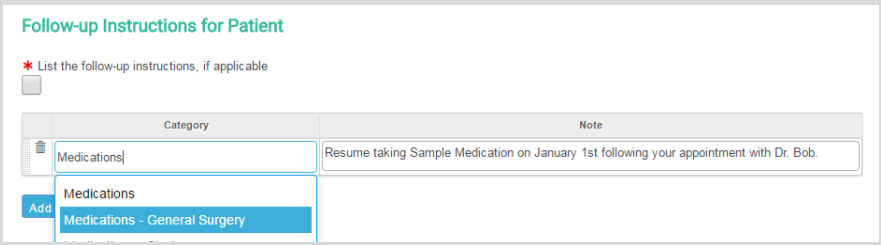
Manual—On paper is used to indicate items completed on paper; all tables in corresponding medication sub-tab must be blank

Selecting the **Mark all Completed** button will indicate all activities (excluding medication reconciliation) have been completed, with one click

DISCHARGE PLAN

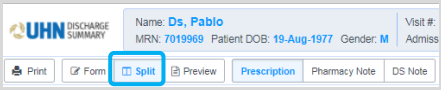
According to UHN policy, the Most Responsible Provider is responsible for the review and sign-off of a Patient's Discharge Summary

Patient follow-up instructions to be included in the Discharge Summary can now be documented within the **Discharge Plan** tab, under **Follow-Up Instructions for Patient**

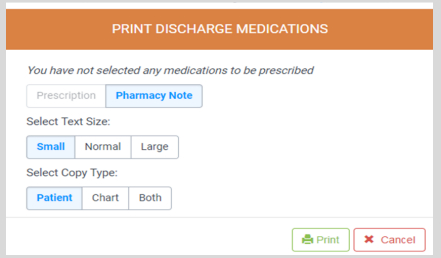


Pre-populated follow-up instructions can be selected and further modified if needed

PRINTING

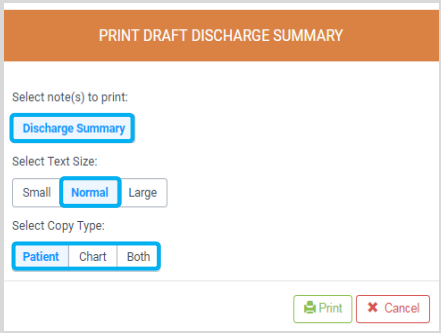


Clicking **Split** in a **Medications sub-tab** allows Users to select a note output to preview or print



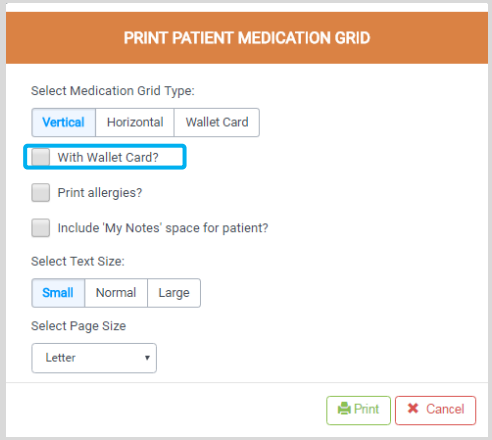
Clicking **Print** allows Users to view print options specific to the sub-tab, and generate a PDF to be printed; sub-tabs with multiple output options will default to printing what is currently being viewed

Clicking the **Print** button on any other tab enables printing of the **Discharge Summary**



Patient/Chart/Both copies of the Discharge Summary and Medication tab outputs can be printed, with the **copy type indicated in the header** of each printout

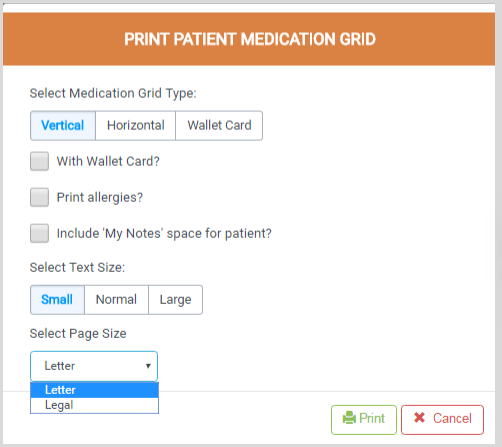
Printouts can be generated in **small, normal or large-text format** based on the patient/user preference; medication outputs default to print in small text

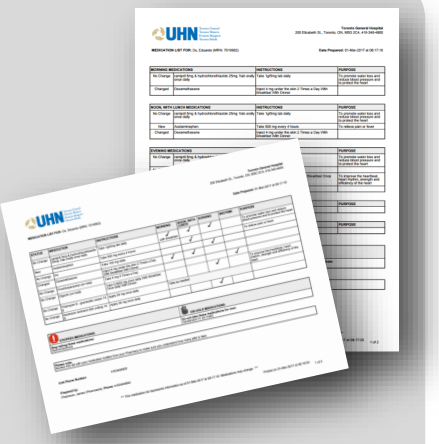


Wallet Cards for patient medications can be printed for some Medication sub-tab outputs by checking the **Wallet Card checkbox**

Wallet Cards print on a separate page

Users also have the option to **include allergies** and/or **provide a space for patient notes**





The Patient Medication Grid can be printed in **horizontal** or **vertical** versions, with additional options of printing on **letter** or **legal-sized** paper

PRINT OPTIONS

SECTION	PRINTOUTS	FORMATS
BPMH	• BPMH Summary	
Admission Rec	• Admission Rec Summary	
Discharge Rec	• Pharmacy Note • Up to two Prescriptions	• Patient or Chart copy
Med Letter	• Medication Letter	• Patient or Chart copy • (With) Wallet Card
Patient Medication Grid	• Patient Medication Schedule (Vertical & Horizontal) • Wallet Card	• Legal or Letter-size • With Allergies • With Space for Patient Notes
Transfer Rec	• Transfer Rec Summary • Work List	
All Tabs	• Discharge Summary • Prescription	• Patient or Chart copy

DOWNTIME

GENERAL INFORMATION

- If EPR is down, the application will also be unavailable
- If a source system (labs, radiology, or medications) is down, the application will function, but source data will be unavailable

PLANNED DOWNTIME

- Scheduled outside core business hours (2 - 6 hours)
- Email communication sent in advance and a banner message in the application to indicate downtime

UNPLANNED DOWNTIME

- May involve the entire application or a source system
- Email communication sent and an overhead pager announcement made
- Users may wait until the application is restored
- If documentation is needed urgently:
  - Admission medication reconciliation can be documented in the **patient chart** (TG/TW/PM) or using the **form B-0011** (TR)
  - Discharge Prescriptions can be issued using **Prescription form 2113**
  - Medication Schedule can be completed using **form D6979** (TG/TW/PM) or **D6979T** (TR)

RECOVERY PROCESS

- No additional reconciliation required
- Copies of paper Prescriptions and Medication Schedules must be placed in the patient's paper chart

SUPPORT

Technical	Ext. 4357	help@uhn.ca
Education	https://www.uhnmodules.ca/DischargeSummary	
Change Requests	Medical.Informatics@uhn.ca	

UHN DISCHARGE SUMMARY

PHARMACIST REFERENCE GUIDE