

Clinic Epic Training

Where do I go?

-



What do I wear and bring?

- Business casual and your white coat
- Bring your stethoscope



Flow of a clinic visit

Review	(Review patient chart before visit)
Meet up	Meet up with your team: clinic administrators will assign you to rooms, talk with your team about game plan (team will consist of pharmacy students, PA students, PT students)
See	See your patient: perform interview and physical exam (we will practice)
Collaborate	Collaborate with your attending: go over orders and plan
Put in	Put in orders
Write up	Write up your note
Go	Go home

Preparation Information (to look up before clinic)

Why is patient coming for visit?

PMH?

When were they last seen?

What medications are they on? What needs to be refilled?

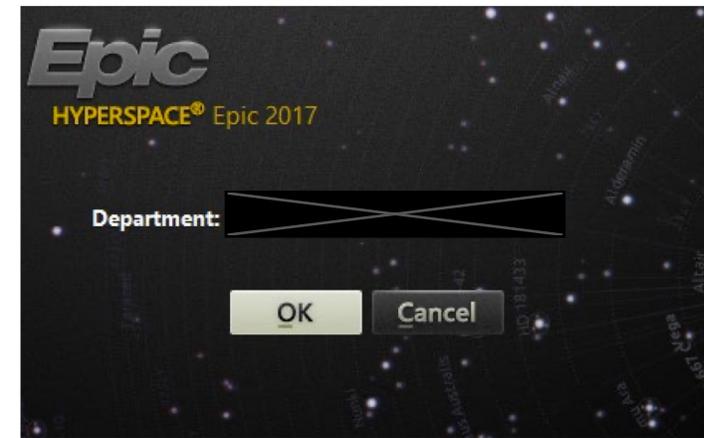
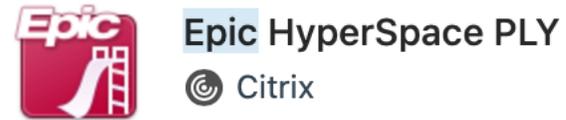
Possible labs to order?

Epic Login

- Today:

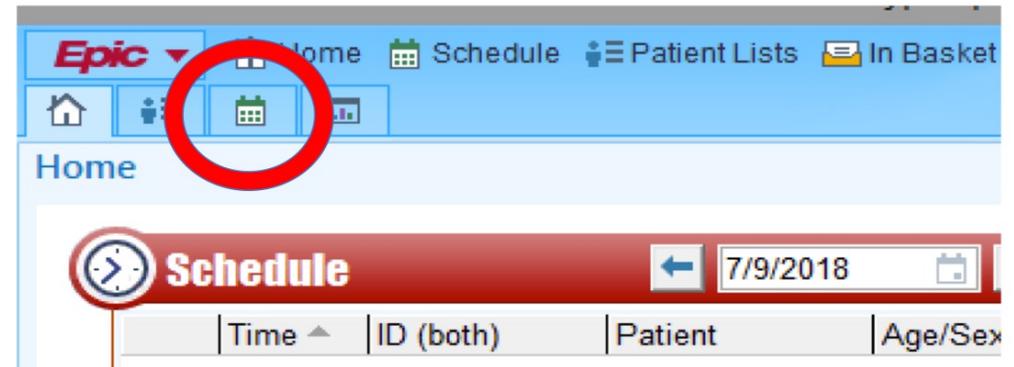
- User name: IM15
- Password: train
- Department: [REDACTED]
- Office visit: Fillipe Dubbubble

- In clinic: use our [REDACTED] and password, [REDACTED] clinic department name is [REDACTED]

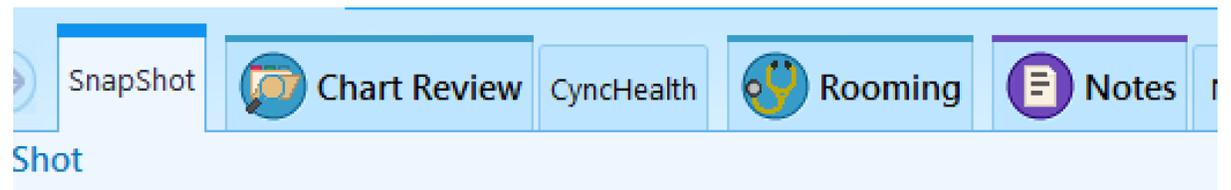


Let's get familiar with your patient

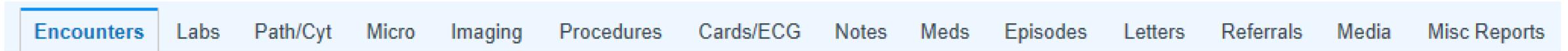
- Finding the schedule and your patient



- Reviewing PMH: snapshot and chart review



Even more familiar

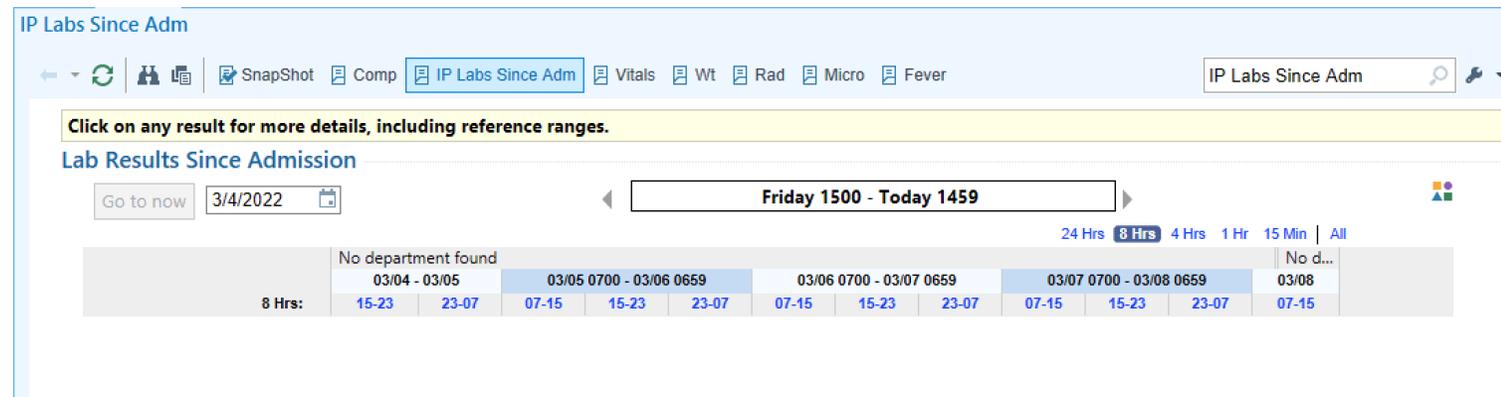


- Review last clinic note



- Review medications

- Review any pertinent lab/imaging history



Getting your patient checked in

- Collect vitals (if not done already)
- Enter vitals into encounter: open "Vital signs" tab in ROOMING
- Enter any screening if necessary (PHQ9):
- Update any PMH or family history (if applicable)

yncHealth Rooming Notes Notes Plan Wrap-Up
for OFFICE VISIT - TRN - Diabetes follow-up
Inquiry References Open Orders Care Teams Media Manager Orders for S

+ Vital Signs
+ New Set of Vitals
3/8/22 10:45 AM
BP 138/78 !
Pulse 74
Resp 22 !
Temp 37.1 C
Temp src Oral
Weight 195 lb (88.5 kg)
Height 5' 9" (1.753 m)

Contact Information Enter Message Visit Info Review Vital Signs Tra
History Answer Qnrs Questionnaires History SOGI History Foot Exam
t Visit Media Send Chart GAD-7

Medication Changes

- Medication review and updating medications: “Medications” tab

Medications & Orders + Comments

+ Patient-Reported 🔑

📌 **Placing a new order?**

Use the Visit Taskbar at the bottom of your screen to add, edit, and sign orders at any point during a visit. + Add Order Dismiss

Name ▲	Patient Sig	DC Reason	Adh	🔧
Outpatient and Clinic-Administered Medications				
🏠 atorvastatin (LIPITOR) 20 MG tablet	Take 1 tablet (20 mg total) by mouth daily.		?	🔧 🔄 ✕ ⌵
🏠 glucose blood test strip	Use as instructed		?	☐ 🔄 ✕ ⌵
🏠 hydrochlorothiazide (HYDRODIURIL) 25 MG tablet	Take 1 tablet (25 mg total) by mouth daily.	Med Hx: Alternate Therapy	?	☐ 🔄 ✕ ⌵
🏠 lisinopril (PRINIVIL,ZESTRIL) 10 MG tablet	Take 1 tablet (10 mg total) by mouth daily.		?	🔧 🔄 ✕ ⌵
🏠 metFORMIN (GLUCOPHAGE) 500 MG tablet	Take 1 tablet (500 mg total) by mouth 2 (two) times a day with meals.		?	🔧 🔄 ✕ ⌵
🗣️ metoprolol (LOPRESSOR) 50 mg tablet	Take 50 mg by mouth 2 (two) times a day.		?	☐ 🔄 ✕ ⌵

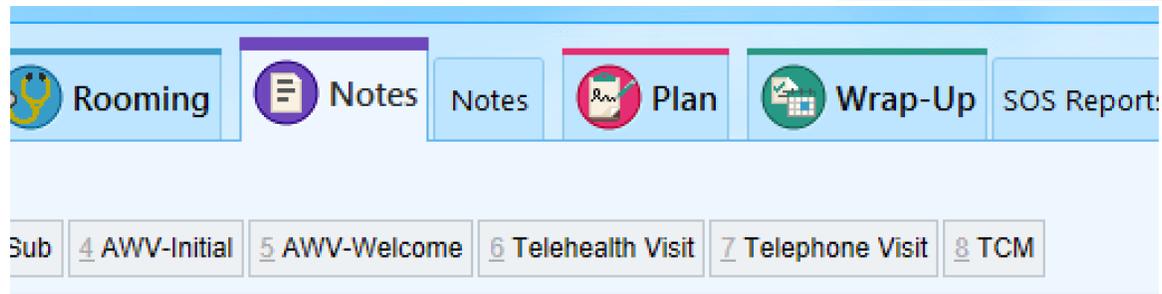
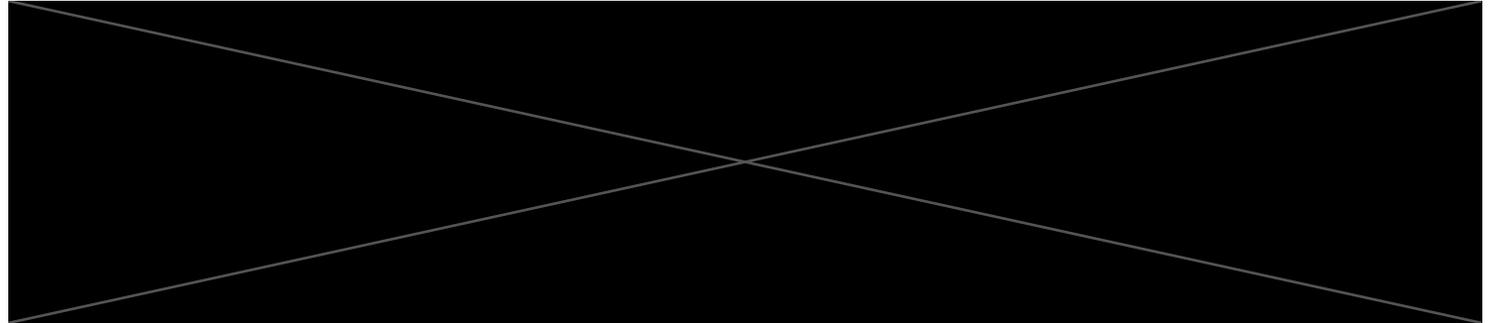
✓ **Mark as Reviewed** Last Reviewed by Diana McQueenie, MD on 2/26/2021 at 9:18 AM

📍 **Hy-Vee, Center St, Omaha, NE - Omaha, NE - 5150 Center** 📞 402-553-4143

🔗 **Associate Signed Orders** 👤 **Providers** 🔄 **Current Interactions**

Starting your note

- “Notes” tab



Visit diagnoses and problem list

- “Plan” folder
 - Update “Visit Diagnoses”
 - If visit diagnoses is in problem list: click “resolve” which will add it to visit diagnoses
- Clean up problem list: should contain chronic diagnoses
- Visit diagnoses are for acute issues discussed during visit

The screenshot displays two main sections: 'Visit Diagnoses' and 'Problem List'. The 'Visit Diagnoses' section at the top has a header circled in red and contains a search bar, an 'Add' button, and a grid of diagnosis tags such as 'HIV disease', 'Human immunodeficiency...', 'HIV (human immuno...', 'Essential hypertension', 'Osteomyelitis', 'Chronic hepatitis C...', 'Medication manage...', and 'Human immunodefici...'. Below this, it states 'No visit diagnoses.' The 'Problem List' section below it also has a header circled in red. It includes a search bar, an 'Add' button, and a 'Show: Past Problems' option. The list is organized by system, with 'Cardiovascular and Mediastinum' and 'Endocrine' visible. Under 'Cardiovascular and Mediastinum', there is a 'Hypertension' entry with a 'Resolve' button circled in blue. Under 'Endocrine', there is a 'Type 2 diabetes mellitus with renal manifestations' entry with a 'Resolve' button.

New meds and orders

- Click “+” tab on bottom left corner
 - Each new order must be associated with a visit diagnoses
 - Note: attending providers will sign your pended orders
- Med refills: click on circular arrow next to meds that patient is currently taking, you will get a “reorder” option

+ ADD ORDER  + ADD DX (0)

- **Labs may need to be ordered at the beginning of visit depending on availability of lab staff**

Appendix B

Physical Exam checklist

- Wash hands
- Recheck vitals if needed (ex. if blood pressure high initially)
- General: general appearance of patient (cooperative/pleasant, uncooperative/agitated, uncomfortable/in pain)
- Eyes: eye movements (H test), pupillary reflex
- Ears: otoscope
- Nose and throat: look in nose and mouth
- Neck: thyroid (from behind patient and have swallow), check for lymphadenopathy
- Heart: listen to heart
- Lungs: check if patient having increased work of breathing, listen to 4-6 areas of lungs (wheezes, crackles, etc)
- Abdomen: palpate in all 4 quadrants with light and deep pressure
- Back: CVA tenderness, check for spinal asymmetry, skin check (moles, lesions)
- MSK: arm and leg muscle strength, gait
- Extremities: leg edema
- Feet (diabetics and vascular disease): monofilament test, check pulses in both feet, check feet for foot ulcers/wounds

General Physical Exam Tips

- Go from head to toe to help from forgetting things
- Tailor physical exam to chief complaint
- Make sure to help patient to exam table

Appendix C

Interviewing Checklist

- Introduce yourself
- Wash hands/hand sanitizer
- Chief complaint - "What brings you in today?"
- Ask open ended questions to obtain HPI
 - OLDCARTS - onset, location, duration, characteristics, aggravating factors, relieving factors, treatments (and responses), severity
- Set agenda - "Is there anything else you wanted to talk to your doctor about today?"
- Review of systems (good idea to bring a list of review of systems into room with you)
 - General – fevers, chills, fatigue, weight changes
 - Head – headaches, injury
 - Eyes – vision changes, blurry vision, eye pain
 - Ears – hearing loss, ear pain, ringing, dizziness
 - Nose – runny nose, congestion
 - Mouth/throat – dry mouth, sore throat
 - Neck – lumps, swollen glands
 - Cardiac – chest pain, palpitations, lightheadedness, leg edema
 - Respiratory – shortness of breath, difficulty breathing, wheezing, cough
 - GI – abdominal pain, nausea, vomiting, reflux, constipation, diarrhea, blood in stool
 - GU – difficulty urinating, dysuria, increased frequency or urgency, blood in urine
 - MSK – joint or muscle pain, joint swelling
 - Skin – rashes, lesions
 - Neuro – neuropathy, weakness, numbness
 - Psych – anxiety, depression/SI, sleeping changes
- Review chart/verify with patient
 - Medications - listed in chart vs what patient actually tells you they're taking at home, medication adherence, any OTC meds or supplements
 - Vaccines - flu, covid, tetanus, pneumonia
 - New medical or family history

- Social history - tobacco (ask about smoking at each visit and discuss cessation), drinking, recreational drugs
- Summarize HPI
- Ask patient if they have any questions

Interview Tips:

- If patients have HTN, ask patient if they have been taking BP readings at home and what those numbers have been
- If patients have DM2, ask patient if they have any home blood sugar readings
- Always ask about diet and exercise

Presentation to attending

- Patient is a (age) year old (female/male) with PMH of (insert prominent history) presenting to clinic today for (3 month diabetes check, med check, acute visit).
- Give brief summary of HPI (vital information only)
- ROS and medications relevant to visit
- Vitals and PE findings (even if normal include heart and lungs)
- Any prior labs or imaging important to visit
- Assessment and Plan
 - List differential diagnosis.
 - Any medication changes, labs, vaccines, imaging, referrals, etc.