

## Provider Workflow Guidelines for MV

### **PRIOR TO THE VISIT** – prepare for the visit by reviewing relevant information in the chart. Work in the “Provider View”.

- a. **Review the most recent primary care note by clicking “Documents”.** Add relevant portions of this note to your HPI
  - i. Update and insert in your HPI your one-liner summary: age, gender, relevant PMH and reason for visit
    - Ex: 48F with HTN, DM here for routine 3-month F/u of DM
  - ii. Summarize last PC visit note
    - Ex: Last seen 5/2021, started on Metformin 500mg BID and ordered A1c
- b. **Review other relevant notes and summarize this in your HPI**
  - i. Ex: Followed by Cardiology, last seen 4/2021, started on Aspirin 81mg qday and referred for exercise stress test, which was normal 5/2021
  - ii. Ex: Seen in ED 6/2021 for leg redness, diagnosed with cellulitis, started on Bactrim DS BID x 7 days
- c. **Update Diagnosis and Problem List**
  - i. In the “Provider View”, click on “Consolidated Problems”
  - ii. Update the Problem list by removing duplicate problems and resolving acute problems
  - iii. Add chronic medical conditions as needed by typing in the problem in the “Add Problem” section
    - When adding a problem, decide whether to select “This Visit” vs “Chronic” vs both
  - iv. To adjust the problem on the problem list, click on the problem name, then click “Modify” and make changes in the “Display As” field. This will show up in your note
    - Ex: Can change “Diabetes” to “Diabetes Type II with Retinopathy”
  - v. Click “This Visit” for problems you anticipate you will address at this upcoming visit
- d. **Review all labs and imaging**
  - i. Tag labs and imaging results (will pull into your note) or can use // to pull in specific labs of interest
- e. **Review Healthcare Maintenance and make note of what is due via the “Recommendations” tab**
- f. **Review and update immunizations**
  - i. Note what immunizations are needed so you can let your CMA know during your Huddle
  - ii. Your CMA can update immunizations done at outside facilities by importing data from CAIR

### **DURING THE VISIT**

- a. **Huddle with your assigned Certified Medical Assistant (CMA)**
  - i. Meet with your CMA for 2-3 min at the beginning of the session to:
    - Discuss healthcare maintenance requirements/immunizations and discuss patient prep needed/anticipated procedures
      - a. Ex: For patient one, can you please give Pneumovax, patient two needs foot exam so please have patient take socks/shoes off, patient three speaks Korean so please call interpreter, etc.
    - Review your future clinic availability so that you have a sense of how soon you can book F/U appointments
- b. **Review your schedule on the Ambulatory Organizer to see your patient list, appointment times and dispo:**
  - i. Blue=checked in; Green= vitals completed, patient ready to be called; Orange=MD working; Dark Gray = D/C; Light Gray = No show
- c. **Review yellow sticky note from CMA (on Ambulatory Organizer)**
- d. **To open a patient chart, click on the patient’s name; choose a relationship when prompted**
- e. **Review nursing intake (Click Documentation, Display: All). Review**
- f. **Take history from patient and take notes in the HPI, ROS, PE sections of the “Provider view”**
- g. **Update medication list by clicking “Home Medications” then “Document Medication by Hx”**
  - i. Ensure a preferred pharmacy is selected
- h. **Update Social/Family Histories as needed by clicking on the “Histories” tab**
- i. **As patient brings up new concerns, update the problems list by clicking “Consolidated Problems” and typing new concern/diagnosis into the “Add problem” section**
- j. **Present to your assigned attending**
- j. **Review with your attending and update Healthcare Maintenance by clicking the “Recommendations” tab**
- k. **Review Staying Healthy Assessment (SHA) forms (includes alcohol screening, Tobacco use, Depression screen, TB screen)**
- l. **Medication Refills**
  - i. Attending or licensed resident completes medication reconciliation and refills/orders new prescriptions.
    - Unlicensed residents should review meds with patient, remind their assigned attending to refill medications, do not propose meds
    - When appropriate, order meds for 3-month supply with 1-3 refills
    - Delete/discontinue duplicates and old meds
    - Ask patient to call pharmacy (818-904-5000) to activate meds, for refills and new prescriptions

### m. Place Orders

i. Click on the “General Medicine” tab to order:

- Visit Charge
  - i. F/U FTF visits: Established Return 99213, Established SHA 99395, 99396, 99397 based on age
  - ii. New FTF visits: New visits 99202, New IHA 99385, 99386, 99387 based on age
  - iii. Phone visits: Telephone/Electronic visit charge based on time spent on phone with patient.
- Clinic Follow up (located under “Specialty Request” tab)
  - i. If appointment request is for < 5 weeks, CMA or PAC will schedule appt
  - ii. If appointment request is for > 5 weeks, CMA/resident can instruct patient to call 818-627-3000 to schedule appt
  - iii. Be specific about who they are to f/u with and when (ie. Dr. Cheng in 5 weeks)
- Labs/Imaging
  - i. Associate with a problem on the problem list
  - ii. Click “Modify Details”
  - iii. Click calendar icon and select time window for labs/studies to be done (give appropriate range)
    - For labs to be drawn **in lab**, select: Nurse collect **NO**, Future order **YES** (even for same day lab draws)
    - For labs drawn **in clinic** (e.g. Pap Smear, UTox), select: Nurse Collect **YES**, Future Order **NO**
    - All labs Future order **Yes, On Exactly** for now or **In Approximately** for planned future lab (no need to adjust grace times)
    - Do not need to reorder labs if order already present from prior
    - All labs can be done at all facilities, patient just needs to notify lab (ie. can get OV ordered labs done at MV)
- Ambulatory Communication (Amb Comm) orders
  - i. CMA orders (EKG, hemacue, visual acuity, PHQ9, bladder scan, patient information)—please also verbally communicate time sensitive orders that affect disposition
  - ii. Tell CMA patient is ready for dispo either with amb com or verbally
- Specialty Requests only valid for Behavior Health at MV

### AFTER THE VISIT

#### a. Sign Note

- i. From “Admit/clinic” tab, click “Select Other Note”
  - Note Template:
    - i. “Ambulatory Office Visit Note” (for FTF visits) or “Phone Visit Note” (for phone visits)
  - Note Type:
    - i. “Adult Primary Care Outpt Provider Note” for follow up visits
    - ii. “Ambulatory IHA Provider Note” for IHA patients who have never before been seen in clinic
- ii. Select Sign/Submit and forward note to your assigned attending to sign
  - Can create a favorites tab with a list of primary care attendings

#### b. Refer to Sub-specialists as needed by placing an e-Consult – click “e-Consult” from Menu tab

#### c. No Shows

- i. Review patient chart with your attending at the end of the visit to decide next appropriate course of action
- ii. Send ORCHID message with subject line “No Show/Broken Appointment” (from drop down menu) to *your CMA for the session* with rescheduling instructions. CC your attending
- iii. Reorder labs/imaging as needed

### BETWEEN VISITS

- Residents are responsible for patient care in between clinic visits. Refer to “Resident Responsibilities” document for details
  - Residents are expected to check their inbox on a daily basis and address:
    - Labs/Imaging
    - Messages
  - Residents are expected to address e-Consult responses from specialists within 72 hours of email notification