



# The Medical Center of Central Georgia

Nursing Student Documentation  
Education Module





# Important Policy Information for Students

- Nursing Students when working directly with a Licensed Nurse have special inclusions in the Georgia Nurse Practice Act allowing them to perform functions normally only allowed with Licensure
- All nursing functions performed as a student REQUIRE that a Licensed Nurse co-sign all chart entries. This should generally be your School Clinical Instructor, but can be a MCCG Nurse.
- Please keep in mind that performing Nursing Functions is ONLY allowed when you are here as a Nursing Student. If you have another role as an employee with the hospital (Nurse Extern or Clinical Tech.) you are not granted the same permissions. You are considered an Unlicensed Assistant and can document a more limited number of items.
- You will have 2 separate Cerner Codes if you are both employed and a student and these codes MUST be used as appropriate to the role you are in.






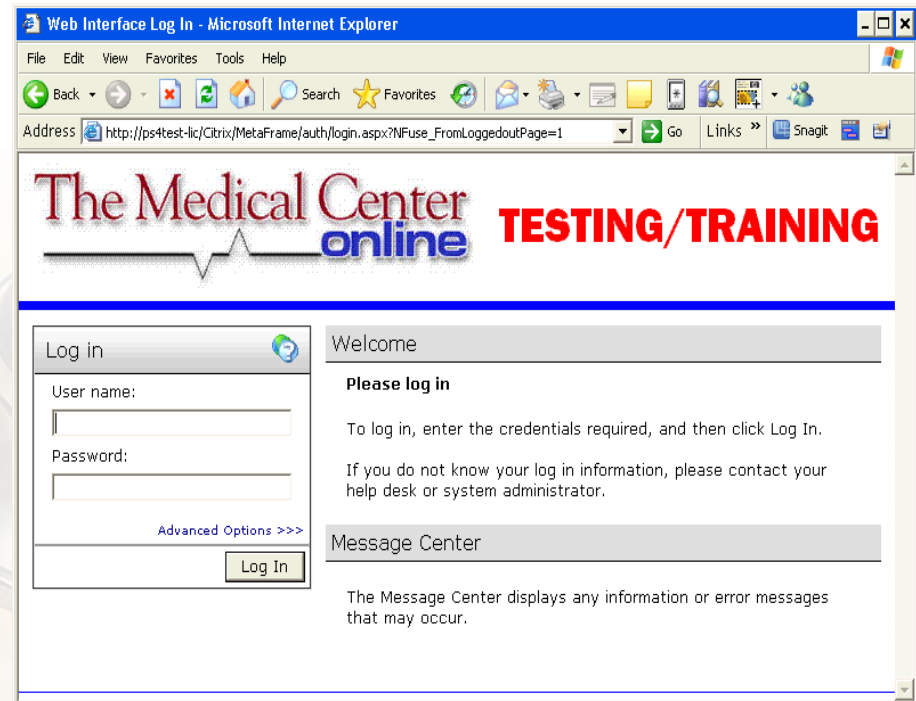
# Medical Record Documentation

- The Medical Center uses Cerner's Suite of Programs to enter information into the electronic medical record. It is also used to retrieve information that has been entered.
- At this time, MCCG has what we call a hybrid system of documentation. In active charts some documentation exists in the computer, and some exists on paper until discharge when all paper documentation is converted to an electronic format.
- Nursing documentation is 90% an on-line process with the notable exception of the Nursing Plan of Care consisting as a mostly paper process (there are a few other exceptions that you may or may not experience)
- Others who document on-line include: Respiratory Therapy, Physical Therapy, Occupational Therapy, Speech Therapy, some Physicians, Lab, Surgery Center and Radiology though this list is not all inclusive.

# Logging in to Cerner PowerChart

## To sign into the Charting system:

- Double Click  Icon
- Enter Network User Name and Password, 
- Double Click the  Icon
- Enter Cerner User Name and Password



Web Interface Log In - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Links Snagit

Address [http://ps4test-lic/Citrix/MetaFrame/auth/login.aspx?NFuse\\_FromLoggedoutPage=1](http://ps4test-lic/Citrix/MetaFrame/auth/login.aspx?NFuse_FromLoggedoutPage=1) Go

## The Medical Center online TESTING/TRAINING

### Log in

User name:

Password:

[Advanced Options >>>](#)

### Welcome

**Please log in**

To log in, enter the credentials required, and then click Log In.

If you do not know your log in information, please contact your help desk or system administrator.

### Message Center

The Message Center displays any information or error messages that may occur.

Next Slide



# PowerChart Documentation

- The First screen that will display is a screen that will ask what shift you are working. As a student, the time frames may not match exactly.
- Click the 7a-7p example below

The screenshot shows a 'Timeframe Selection' dialog box with a title bar containing a small icon and a close button. Inside the dialog, there are two radio buttons. The first, 'Select a Shift', is selected and has a list box below it containing the text '12 Hour Day Shift 7a - 7p (700 - 1859)'. The second radio button, 'Select a Time Range', is unselected. Below it are 'From:' and 'To:' labels, each followed by a date/time input field with a small calendar icon and a time selection dropdown. At the bottom are 'OK' and 'Cancel' buttons.

Timeframe Selection

☒ Select a Shift

12 Hour Day Shift 7a - 7p (700 - 1859)

☐ Select a Time Range

From:

To:

OK Cancel



# PowerChart Documentation

Click OK

**Timeframe Selection**

☒ Select a Shift

12 Hour Day Shift 7a - 7p (700 - 1859)

☐ Select a Time Range

From:

To:

OK Cancel





# PowerChart Documentation

- A screen will display to assign a relationship to all patients on the unit list. Due to HIPPA regulations you are not taking care of all patients on this list so you should only enter and assign relationships to those patients to whom you are assigned!
- Click on CLOSE button to close this screen

Establish Relationship

Select an appropriate relationship:

Patients without relationships:

<input checked="" type="checkbox"/> BTRAIN, PCVIC	<input checked="" type="checkbox"/> EMAR, TRAIN21
<input checked="" type="checkbox"/> EMAR, TRAIN3	<input checked="" type="checkbox"/> EMAR, TRAIN22
<input checked="" type="checkbox"/> EMAR, TRAIN2	<input checked="" type="checkbox"/> EMAR, TRAIN23
<input checked="" type="checkbox"/> EMAR, TRAIN9	<input checked="" type="checkbox"/> EMAR, TRAIN24
<input checked="" type="checkbox"/> EMAR, TRAIN4	
<input checked="" type="checkbox"/> EMAR, TRAIN11	
<input checked="" type="checkbox"/> EMAR, TRAIN10	
<input checked="" type="checkbox"/> EMAR, TRAIN5	
<input checked="" type="checkbox"/> EMAR, TRAIN14	
<input checked="" type="checkbox"/> EMAR, TRAIN6	
<input checked="" type="checkbox"/> EMAR, TRAIN16	
<input checked="" type="checkbox"/> EMAR, TRAIN15	
<input checked="" type="checkbox"/> EMAR, TRAIN7	
<input checked="" type="checkbox"/> EMAR, TRAIN19	
<input checked="" type="checkbox"/> EMAR, TRAIN8	
<input checked="" type="checkbox"/> EMAR, TRAIN20	
<input checked="" type="checkbox"/> EMAR, TRAIN12	
<input checked="" type="checkbox"/> EMAR, TRAIN13	
<input checked="" type="checkbox"/> EMAR, TRAIN18	
<input checked="" type="checkbox"/> EMAR, TRAIN1	
<input checked="" type="checkbox"/> EMAR, TRAIN17	

OK Close Apply



# PowerChart Documentation

- The Patient Access List or PAL will display but “No Relationship” will display on all patients (you will do this later).
- The PAL is basically a nursing clipboard that will display information about the patients on the list when a relationship becomes established
- To add a relationship to a patient click on Test, Darcy (your patient)

PowerChart Organizer for Test, EV Nursing School

Task Edit View Patient Chart Links Options Patient List Help

Patient Access List Patient List Multi-Patient Task List

Ad Hoc New Sticky Note View Sticky Notes Calculator Charges Charge Entry Exit Tear Off Attach Message Sender PM Conversation

TEST, DARCY Recent MRN Print ago

Patient Access List

Test Nursing Student List \*\*\*Encounter Specific\*\*\* December 31, 2009 2:36 PM - December 31, 2009 4:36 PM

Name	Room/Bed/Allergies	NPI	New Orders	Overdue	PRN/Conti Current	Adv Dir?	Contact Inf	Wt (kg)	Ht (cm)
TEST, DARCY									

Emergency

PROD | EVNJRSSCHOOL | December 31, 2009 | 3:42 PM





# PowerChart Documentation

- You will then be asked to assign a relationship because you are trying to enter a patient chart Choose “Nursing Student”

The screenshot shows a Windows-style dialog box titled "Establish Relationship". Inside the dialog, there is a label "Select an appropriate relationship:" followed by a dropdown menu. The dropdown menu is open, showing "Nursing Student" as the selected option. Below the dropdown, there is a list box containing a single entry: "TEST, DARCY" with a checked checkbox to its left. At the bottom right of the dialog, there are three buttons: "OK", "Close", and "Apply".

Establish Relationship

Select an appropriate relationship:

Nursing Student

☒ TEST, DARCY

OK Close Apply

# PowerChart Documentation

- The Patient Chart will display
- Note along the left side of the window, there is a **Menu** of items that in a “real” patient are clickable.
- This is your Navigation area where you move from one patient information display to another

EMAR, TRAIN3 - 098037267 Opened by Tatarka RN, Carol J

Task Edit View Patient Chart Links Notifications Task List Options Help

EMAR, TRAIN3 x

EMAR, TRAIN3 Age: 14 years Sex: Female  
DOB: 9/8/1995 MRN: 098037267

Menu

- Task List
- PowerOrders + Add
- Patient Information
- Demographics
- Form Browser
- History
- VIEW/IBO
- MAR
- MAR Summary
- Immunizations
- Patient Care Summary
- Medication List + Add
- Allergies + Add
- Problems and Diagnoses
- Reference Text Browser
- Results Review

Task List

Thursday, December 31, 2009 7:00:00 AM - Thursday, December 31, 2009

Scheduled Medications Scheduled Patient Care All PRN Tasks All Continuous Tasks

Task retrieval completed

Task Status	Scheduled Date and Time	Task Description	Order Details
Overdue	12/29/2009 10:00 AM EST	Nutrition Supplement (Special)	Start 12/29/09 10:00:00, Juven, 2 packet(s), Comments - Delivered from Nutrition ...
Overdue	12/29/2009 2:00 PM EST	Nutrition Supplement (Special)	Start 12/29/09 14:00:00, Juven, 2 packet(s), Comments - Delivered from Nutrition ...
Overdue	12/29/2009 6:00 PM EST	Nutrition Supplement (Special)	Start 12/29/09 18:00:00, Juven, 2 packet(s), Comments - Delivered from Nutrition ...
Overdue	12/29/2009 10:00 PM EST	Nutrition Supplement (Special)	Start 12/29/09 22:00:00, Juven, 2 packet(s), Comments - Delivered from Nutrition ...
Overdue	12/30/2009 6:00 AM EST	Nutrition Supplement (Special)	Start 12/30/09 6:00:00, Juven, 2 packet(s), Comments - Delivered from Nutrition S...
Pending	12/31/2009 10:00 AM EST	Nutrition Supplement (Special)	Start 12/31/09 10:00:00, Juven, 2 packet(s), Comments - Delivered from Nutrition ...
Pending	12/31/2009 2:00 PM EST	Nutrition Supplement (Special)	Start 12/31/09 14:00:00, Juven, 2 packet(s), Comments - Delivered from Nutrition ...
Pending	12/31/2009 6:00 PM EST	Nutrition Supplement (Special)	Start 12/31/09 18:00:00, Juven, 2 packet(s), Comments - Delivered from Nutrition ...

Next Slide



# FIRST DAY customization

- The first time you are in the hospital and enter the computer system, you will want to maximize the information available to you
- The attached Microsoft Word Document will open and display instructions for completing this process (it is a good idea to print this file to take with you on the first day of clinical).
- Follow instructions exactly
- Be sure that YOU create a custom list as the instructions tell you to do
- If you do not, and work instead from the Unit list, you will experience time delays (sometimes VERY long) when entering the system

**CLICK ON BELOW DOCUMENT:**



Microsoft Word  
Document

Next Slide



# Customizing your List and Assigning a Relationship

- Once you have created your custom list please remember that the only updates to it come from your actions. The hospital will not add or remove patients when they are admitted or discharged
- At the end of Clinical Day, you will want to remove all patient from your list so next week you start fresh. This will keep you from entering information in the wrong charts

The screenshot shows the 'PowerChart Organizer for Totarka RN, Carol J' window. The 'Patient Access List' is displayed, titled 'Jane's Nursing Student List' for the period 'December 30, 2009 11:03 AM - January 01, 2010 11:03 AM'. The list is a table with the following columns: Name, Room/Bed, Allergies, NPNI Status, A, New Ord, Overdue, PRN/Conti Current, Adv Dis?, Contact Info, Wt (kg), Ht (cm). The table is currently empty.

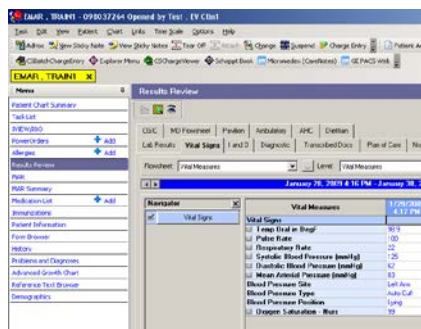
Name	Room/Bed	Allergies	NPNI Status	A	New Ord	Overdue	PRN/Conti Current	Adv Dis?	Contact Info	Wt (kg)	Ht (cm)
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Next Slide

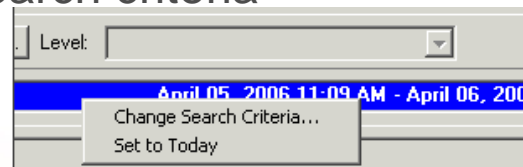


# Checking Labs, Radiology Reports and other Results

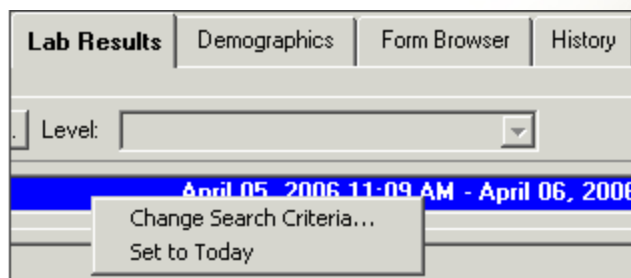
- Results Review on the Menu



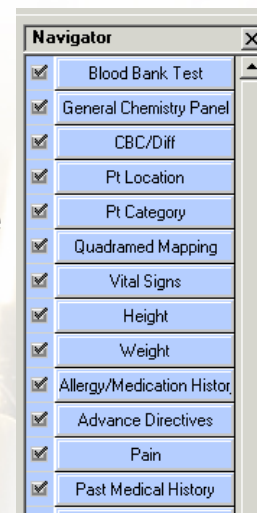
- The date/ time bar can be adjusted as needed by right-click >change search criteria



- The different Tabs will display information you might need



- The Navigator is a short cut to get to different areas of the chart. This saves time you would spend scrolling



Next Slide



# Checking Labs, Radiology Reports and other Results

- Click the Critical Result to open a "Result Details" window..

General Chemistry Panel	
<input type="checkbox"/> K	* C 8.5
<input type="checkbox"/> MG	H 4.0
CBC/Diff	
<input type="checkbox"/> WBC	6.00
<input type="checkbox"/> RBC	L 4.00
<input type="checkbox"/> HGB	L 6.3
<input type="checkbox"/> HCT	L 19.0
<input type="checkbox"/> MCV	98.0
<input type="checkbox"/> MCH	27.0
<input type="checkbox"/> MCHC	H 36.0
<input type="checkbox"/> RDW	L 11.0
<input type="checkbox"/> PLT	300
<input type="checkbox"/> MPV	9.0





# Checking Labs, Radiology Reports and other Results

- Click “Comments” to see the attached comments

**Result Details - EMAR, TRAIN3 - Potassium Level**

Result History

Value	Valid From	Valid Until
8.5	5/20/2009 11:23 AM	Current

Result | Specimen | **Comments** | Action List

**K 8.5 mEq/L (CRIT)**  
Normal Low 3.5 Normal High 5.0  
Critical Low 2.5 Critical High 6.5  
Date/Time **May 19, 2009 6:00 PM**  
Contributor System **PowerChart**  
Accession Number **000002009139000048**  
Service Resource **MCCG DL 2000**  
Status **Auth (Verified)**

1478044399 Print... Close



# Checking Labs, Radiology Reports and other Results

- Click Close when finished

**Result Details - EMAR, TRAIN3 - Potassium Level**

Result History

Value	Valid From	Valid Until
8.5	5/20/2009 11:23 AM	Current

Result Specimen Comments Action List

**1.) (Medium Importance) Result Comment by Test , EV PH**  
**Med Tech on May 20, 2009 11:23 AM**  
Results called to Nurse Susie by tmw on 5/20/2009 11:19 AM.

1478044399

Print... Close



# Checking Labs, Radiology Reports and other Results

- Click on \*Port Chest Routine to bring up Radiology interpretation

Navigator		Diagnostic Results	
<input checked="" type="checkbox"/>	Diagnostic Radiology	<b>Diagnostic Radiology</b>	Port Chest Routine
		12/30/2009 9:03 AM	* In Progress
		11/10/2009 7:53 AM	
		11/6/2009 2:02 PM	* In Progress
		5/20/2009 10:56 AM	* Port Chest Routine



# Checking Labs, Radiology Reports and other Results

- Click OK when finished

Port Chest Routine - EMAR, TRAIN3 - 098037267

Result Type: Port Chest Routine  
Result Date: Wednesday, May 20, 2009 10:56 AM  
Result Status: Auth (Verified)  
Performed By: Bouchard, Jonathan on Wednesday, May 20, 2009 10:56 AM  
Verified By: Test, EV Radiologist on Wednesday, May 20, 2009 11:30 AM

**\* Final Report \***

**Reason For Exam**  
Abnormal posture

**Portable Read (Verified)**  
Heart size and contour normal. The lungs are probably clear. However, the left lower lobe is partly obscured by the heart and for this reason, a parenchymal process in the left base cannot be excluded. Slight widening of the upper mediastinum is consistent with brachiocephalic vessel dilatation. There is no evidence for pneumothorax or pleural effusion.

Impression: No focal or acute process demonstrated, although there is incomplete evaluation of the left lower lung.

**Signature Line**  
Dictating Radiologist Signature: Test, EV Radiologist

Transcriptionist Initials: ET

History Forward Image Print OK



# Documenting Forms

**Nursing Students will no longer document on forms outside the Student Nursing Folder that they see when clicking the ADHoc Button**

Instead, they will document using the **Nursing Student Systems Assessment form**

Additional forms that might be necessary are available to the Nursing instructors and should be used only when the Licensed Nursing Instructor opens them with their code.

It is the Nursing Student's responsibility to notify the Nursing Instructor or their Preceptor if they have completed any documentation forms to ensure that the co-sign takes place!!

Next Slide

# Documenting Forms

- To open a new form, click the ADHoc button

EMAR, TRAIN3 - 098037267 Opened by Tatarka RN, Carol J

Task Edit View Patient Chart Links Notifications Time Scale Options Help

Patient Access List Patient List Staff Assignment CSBatchChargeEntry Explorer Menu CSChargeViewer Scheduler

New Sticky Note View Sticky Notes Tear Off Attach Charges Charge Entry Exit Calculator Message Sender **AdHoc** PM Conversation Communicate

EMAR, TRAIN3 x

**EMAR, TRAIN3** Age: 14 years Sex: Female Location: A4W, A473: 03 \*\* Allergies \*\*  
DOB: 9/8/1995 MRN: 098037267 Fin#: 0980372678066 Inpatient [3/6/2008 11:4...

Menu

- Task List
- PowerOrders + Add
- Patient Information
- Demographics
- Form Browser
- History
- VIEW/I&O
- MAR
- MAR Summary
- Immunizations
- Patient Care Summary
- Medication List + Add
- Allergies + Add
- Problems and Diagnoses
- Reference Text Browser
- Results Review

Results Review

Transcribed Docs IV/Vasc Dietitian Ambulatory Respiratory Microbiology

Flowsheet Lab Results Vital Signs Nsg Doc Phys Assmnt Referrals MD Flowsheet Pavilion Plan of Care **Diagnostic**

Flowsheet: Diagnostic Results Level: Diagnostic Results Table Group List

Last 999 Results

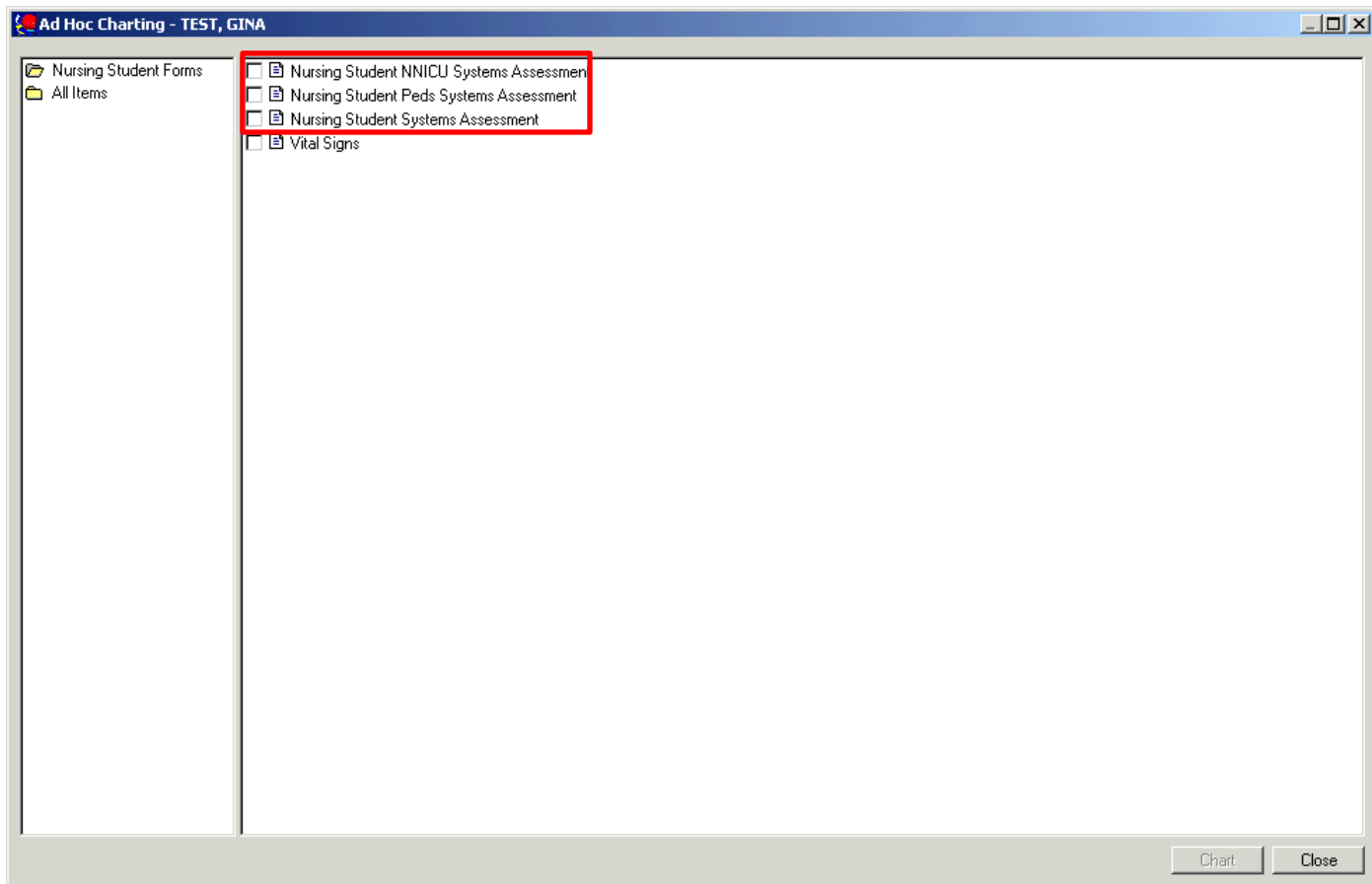
Diagnostic Results		
<b>Diagnostic Radiology</b>	Port Chest Routine	Port Tibia Left
12/30/2009 9:03 AM	* In Progress	
11/10/2009 7:53 AM		* In Progress
11/6/2009 2:02 PM	* In Progress	
5/20/2009 10:56 AM	* Port Chest Routine	





# Documenting Forms

Click on the Focused Body System Re-Assessment Adult form





# Documenting Forms

- Note that there are “Normal” definitions as defined by MCCG, if any of these items does not apply then you will click the “Not WNL” area of each body system.
- Click “Not WNL” in the Neurological Assessment

**Focused Body System Reassessment - EMAR, TRAIN3**

✓ [Icons] [Icons] [Icons] [Icons] [Icons] [Icons] [Icons] [Icons]

\*Performed on: 12/31/2009 [Time: 1335]

**Physical Assessment**

**Physical REassessment**

System	Not Assessed	WNL = Within Normal Limits	Norms
<b>Neurological</b>	<input checked="" type="radio"/> NA	<input type="radio"/> WNL <input type="radio"/> Not WNL	Alert, oriented X3; PERRLA; MAEE; sensation intact, speech appropriate; denies complaints
<b>HEENT</b>	<input type="radio"/> NA	<input type="radio"/> WNL <input type="radio"/> Not WNL	Face symmetrical; no swelling or lesions in oral cavity; no difficulty swallowing; sensation, movement, vision & hearing intact; tongue w/o swelling or deviation; denies complaints
<b>Pulmonary</b>	<input type="radio"/> NA	<input type="radio"/> WNL <input type="radio"/> Not WNL	Chest symmetrical; clear breath sounds; no cough; regular rate, depth, rhythm; denies complaints
<b>Cardiovascular</b>	<input type="radio"/> N/A	<input type="radio"/> WNL <input type="radio"/> Not WNL	Regular rhythm; capillary refill 2-3 sec; nail beds & mucous membranes pink; distal pulses equal & palpable; denies complaints
<b>Gastrointestinal</b>	<input type="radio"/> NA	<input type="radio"/> WNL <input type="radio"/> Not WNL	Abdomen soft, non-distended; bowel sounds present; denies complaints
<b>Genitourinary</b>	<input type="radio"/> NA	<input type="radio"/> WNL <input type="radio"/> Not WNL	Bladder non-distended; urine clear & amber; denies complaints
<b>Musculoskeletal</b>	<input type="radio"/> NA	<input type="radio"/> WNL <input type="radio"/> Not WNL	Moves all extremities equally with normal strength; denies complaints
<b>Integumentary</b>	<input type="radio"/> NA	<input type="radio"/> WNL <input type="radio"/> Not WNL	Skin warm, dry, intact; no swelling; no redness, rash or bruising noted; denies complaints



# Documenting Forms

- In a real chart the body system opens for you to enter details of your assessment.
- Some areas are single select
- Some areas are multi select
- Some areas are fill in the blank
- Some are charts that you have to enter something in each column
- Some are charts that change to and “X” if you click the fields
- Use “comments” area if there is no other place to document the item for that body system
- Some answers trigger other required forms or sections to open

Neurological - EMAR, TRAIN3

## Neurological Assessment

**LOC**

☒ Lethargic  
☐ Alert  
☐ Sedated  
☐ Comatose  
☐ Lethargic  
☐ Semicomatose  
☐ Other:

**Neuro Symptoms**

☐ Confusion/Disorientation  
☐ Dizziness  
☐ Drooling  
☐ Drowsiness  
☐ Fainting  
☐ Headache  
☐ Receptive Aphasia

☐ Seizure Like  
☐ Tinnitus  
☐ Vertigo  
☐ Visual Changes  
☐ Weakness  
☐ Other:

**Characteristics of Speech**

☐ Appropriate for age  
☐ Hoarse  
☐ Stutters  
☐ Sturred  
☐ Inappropriate Speech  
☐ Incomprehensible Sounds  
☐ Expressive Aphasia

☐ Receptive Aphasia  
☐ Incoherent  
☐ Nonverbal  
☐ ET/Trach  
☐ Other:

**Mental Status**

☐ Anxious  
☐ Restlessness/Agitation  
☐ Irritable  
☐ Confused  
☐ Disoriented  
☐ Uncooperative

☐ Withdrawn  
☐ Combative  
☐ Unresponsive  
☐ Other:

**Disoriented to:**

☐ Person  
☐ Place  
☐ Time  
☐ Event  
☐ Does not recognize caregiver

**Reflexes**

	Absent	Diminished
Cough		
Corneal		
Gag		

**Pupil Assessment**

	Pupil Description	Pupil Reaction
Pupil, Left	<MultiAlpha>	<Alpha>
Pupil, Right	<MultiAlpha>	<Alpha>

Pupil Size, Left  mm

Pupil Size, Right  mm

## Glasgow Coma Score

**Eye Opening Response**

☐ Spontaneously 4  
☐ To Verbal Command 3  
☐ To Pain 2  
☐ No Response 1

**Motor Response**

☐ Obeys Commands 6  
☐ Localizes Pain 5  
☐ Flexion-Withdrawal 4  
☐ Abnormal Flexion 3  
☐ Abnormal Extension 2  
☐ No Response 1

**Verbal Response**

☐ Oriented and Converses 5  
☐ Disoriented and Converses 4  
☐ Inappropriate Words 3  
☐ Incomprehensible Sounds 2  
☐ No Response 1

**Glasgow Coma Score**

**Is Patient Response Affected by?**

☐ Anesthesia  
☐ Paralytics  
☐ Sedation

**Comments**

Next Slide



# Late Entries of Documentation

- The computer system has a “Performed On” time that can be adjusted. It tracks all dates and times associated with documentation including when you actually documented it
- Nursing students will follow the MCCG processes for documentation of Late Entries
  - If the entry is considered Late, the Student will identify the late entry by typing Late entry somewhere on the PowerForm comment area.
  - They may include a reason why the documentation was late
  - They understand that they cannot add information to a Deceased patient chart or a Discharged patient chart beyond the end of the shift where the patient expired or discharged
  - If the patient is still admitted in the hospital, the student may enter documentation up to 24 hours past the time that the item needed to be written or was performed / discovered
  - Nursing Instructors must co-sign all late entries

Next Slide



# Medication Administration and Medication Documentation Policies

- All nursing students will administer medications according to policy/protocol under the direct supervision of their school of nursing instructor.
- School of Nursing Instructors will document medications administered by nursing students electronically at the bedside using the Hand Held scanner whenever possible. If handheld system is down, eMAR PC view is also acceptable for documenting
- Nursing instructors will ensure that they and the student abide by all policy and procedure guidelines when administering and documenting medications.
- Nursing students directly under the supervision of a Medical Center Nurse without their school of nursing instructor present on site may administer medications under the direct supervision of the Nurse. The MCCG Nurse is responsible for documentation of medications electronically.

Next Slide



# Medications and IVIEW/I&O Documentation

- All IVP, IVPB, and Gastric Routes such as PO, NG, JJ, etc. medication routes will document the Intake volume associated with them when the Nursing Instructor/Preceptor scans and signs them into the Patient Chart.
- Nursing Students use the I&O tracking sheet in the patient room to document I&O. The MCCG Nurse/CT will be responsible for entering the totals into the electronic chart
- Totals can be viewed in the Patient Record under the Menu Item called IVIEW/I&O.
- No Nursing Student will document volumes directly in the IVIEW/I&O area
- If in the Critical Care Area, Nursing Students will document ONLY items that a Clinical Tech would be allowed to document. These still require Nurse co-signature.

Next Slide





# MAR Summary

- Medication administration information is vital for many aspects of patient care. Having clear, concise information readily available is a key to making good clinical decisions. Because of this need, clinicians need a view of the Medication Administration Record (MAR) to see more medication information, including both pending and given administrations, more concisely.
- The MAR Summary is a separate Component within PowerChart that condenses medication administration data. This view starts at a high level and displays order information, with corresponding task and result information. MAR Summary creates time intervals (time buckets) in which to display task and result information; therefore, one column can have multiple tasks and/or results with exact times specified. The user can customize the time frame, time columns, sections, and IV Events according to his/her individual needs. This tool is currently display-only; so, users cannot chart from this view.

Next Slide



# MAR Summary

- This screen cannot be documented on, it is for View ONLY purposes

**Menu**

- Task List
- Patient Chart Summary
- VIEW/I&O
- PowerOrders [+ Add](#)
- Allergies [+ Add](#)
- Results Review
- MAR
  - MAR Summary**
  - Medication List [+ Add](#)
- Immunizations
- Patient Information
- Form Browser
- History
- Problems and Diagnoses
- Reference Text Browser
- Demographics

**MAR Summary** Print 0 minutes ago

**May 07, 2009 0000 - May 10, 2009 2359**

	5/7/2009 0000 - 0359	5/7/2009 0400 - 0759	5/7/2009 0800 - 1159	5/7/2009 1200 - 1559	5/7/2009 1600 - 1959	5/7/2009 2000 - 2359	5/8/2009 0000 - 0359	5/8/2009 0400 - 0759
<b>Scheduled</b>								
<b>citalopram (Celexa)</b> 20 mg, IVPB, BID, Routine, Start 05/04/09 22:26:00			20 mg @0900					
<b>citalopram (Celexa) (Citalopram 20 mg tab)</b> 20 mg, tab, PO, BID, Routine, Start 05/08/09 21:00:00, Dispense from Robot								
<b>furosemide (Lasix) (Furosemide 40 mg tab)</b> 40 mg, tab, PO, Q Day, Start 05/04/09 21:51:00, Stop 05/08/09 0:00:00, Dispense from Robot			40 mg @0900					
<b>furosemide (Lasix) (Furosemide 40 mg tab)</b> 40 mg, tab, PO, Q Day, Start 05/08/09 17:02:00, Dispense from Robot								
<b>piperacillin-tazobactam (Zosyn) (Zosyn)</b> 3.375 g, / 50 mL, IVPB, Q6HR, Start 05/05/09 10:00:00, Stop 05/09/09 9:59:00, over 30 min, Dispense from Central ...			3.375 g @1000					
<b>piperacillin-tazobactam (Zosyn) (Zosyn)</b> 3.375 g, / 50 mL, IVPB, Q6HR, Start 05/08/09 18:00:00, over 30 min, Dispense from Central Pharmacy								
<b>PRN</b>								
<b>insulin regular (Novolin R) (Insulin Human Regular (U-100) Dose)</b> (BS - 100) / 40 = # UNITS, inj, SC, PRN, PRN, Start 05/09/...								
<b>meperidine (Demerol) (Meperidine 100 mg/1 mL Inj)</b> 100 mg, inj, IM, Q4H, PRN, Start 05/05/09 9:45:00, for 3 Days								

**furosemide: 40 mg PO**  
Date/Time: 5/7/2009 0900  
Performed By: Test, EV Clin1

[Details](#)

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# More Detailed Information

- At any time, more detailed information may be accessed at the Medical Center on any computer by the following click string
  - Go to the Hospital Intranet Site
  - Locate the center GO Menu on the Home Page
  - Click the pull down arrow and choose “Online Documentation”
  - Click the “Education” word link located below the Online Doc header on this page
  - Locate the EV Nursing Manual
- This Manual should not be printed as it is quite long but is always available to you when you are in the hospital.



# Quick Reference Guide

- Click the following attached item to display and print the Nursing Student Quick Reference Guide that can be used to help when you need a quick answer for PowerChart Documentation



Microsoft Word  
Document



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# Test

- Please open the Adobe “test” document by clicking on it below
- Complete the test
- Re-Check your answers if necessary because you must Score 100% when it is given to your instructor or you will be required to complete the information again
- Be sure you write your name and the date on the Test and give to your instructor for your education file.



Adobe Acrobat  
Document

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**Bella says:  
“You are Done  
Good Job!”**

