ECW Update

1. **Lab views**: The lab views in ECW are, in my opinion, terrible – but it turns out we have a lot of flexibility in improving these views. If you recall the lab views in LMR, you had the option of looking at "ALL", or more selectively at hematology only, or chemistry only, or endocrine only, and so on. This function does exist in ECW, but PrimaCARE has not taken advantage of this. In the coming weeks, try flipping through various lab

COLLECTION DATE	10/23/2015	08/25/2015	08/03/2015	07/02/2015	05/28/2015	04/21/
Order Date	10/23/2015	08/25/2015	08/03/2015	07/02/2015	05/28/2015	04/21/
Result Date	10/23/2015	08/25/2015	08/03/2015	07/02/2015	05/29/2015	04/21/
Ordering Physician	Szal, Kate	Kney, Bradford	Kney, Bradford	Kney, Bradford	Kney, Bradford	Kney, Br
RBC	3.93 (3.93-5.22 MiL/uL)	4.55 (3.93-5.22 MiL/uL)	3.91 L (3.93-5.22 MiL/uL)	3.35 L (3.93-5.22 MiL/uL)	NR	NR
HEMOGLOBIN	11.3 (11.2-15.7 g/dL)	12.8 (11.2-15.7 g/dL)	10.9 L (11.2-15.7 g/dL)	9.6 Result confirmed by repeat analysis LL (11.2-15.7 g/dL)	NR	NR
HEMATOCRIT	35.0 (34.1-44.9 %)	41.0 (34.1-44.9 %)	34.4 (34.1-44.9 %)	31.1 L (34.1-44.9 %)	NR	NR
MCV	89.1 (82.0-100.0 fL)	90.1 (79.4-94.8 fL)	88.0 (79.4-94.8 fL)	92.8 (79.4-94.8 fL)	NR	NR
MCHC	32.3 (32.2-35.5 g/dL)	31.2 L (32.2-35.5 g/dL)	31.7 L (32.2-35.5 g/dL)	30.9 L (32.2-35.5 g/dL)	NR	NR
MCH	28.8 (25.6-32.2 pG)	28.1 (25.6-32.2 pG)	27.9 (25.6-32.2 pG)	28.7 (25.6-32.2 pG)	NR	NR

categories, and you may be pleasantly surprised. The screenshot above shows an example of our (very

dysfunctional) cumulative view. If you are looking for a particular type of lab – like a TSH, or A1c, or a sprue panel, currently you have to either open the cumulative view and scroll and scroll and scroll – or scroll through the "ALL" lab history view to find the specific test. We will be working to categorize labs into more intuitive subgroups over the next few weeks to make these searches a little easier.

This option also exists for DI – in the example to the right, I was able to search for only echocardiograms by selecting "ECHO". Again, we plan to work on both DI and Lab categories over the next few weeks to make this more functional for PrimaCARE.
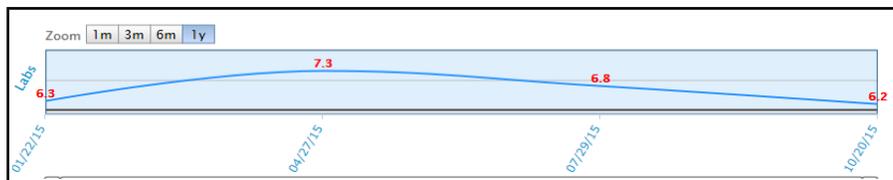

Name	08/25/2015	08/03/2015	07/02/20
Miscellaneous			
CMP-K	3.90	3.60	3.80
CMP-CL	96	103	101
CMP-CO2	30	96	28
CMP-CALCIUM	10.1	9.6	9.3
CMP-BUN	33	30	22
CMP-eGFR	62	64	68
CMP-CREATININE	0.93	0.90	0.85
CMP-BUN/CREAT RATIO			
CMP-GLUCOSE	108	117	100
CMP-TOTAL PROTEIN	7.8	7.1	6.8
CMP-ALBUMIN	4.6	4.3	3.9
CMP-A/G RATIO	1.4	1.5	1.3
CMP-TOTAL BILIRUBIN	0.6	0.7	0.5
CMP-ALKALINE PHOS	73	68	62
CMP-ALT (SGPT)	6	10	5
CMP-AST (SGOT)	19	15	16

We also have the option of setting up flowsheets that make looking at cumulative labs a little easier. This is a work in progress right now, but I hope to construct a few flowsheets that will make viewing cumulative labs more intuitive and functional. I do think the flowsheets offer the possibility of a more functional cumulative lab view – but there remain some glitches in this workflow. Flowsheets used to open very slowly, but this problem was fixed. I believe all the changes in lab interfaces over the last 6 months have broken a lot of mapping in the flowsheets. As we get some flowsheets set up, I will let you know. An added benefit – click on the magnifying glass next to the date of the lab, and the visit note from that date appears. Quite nice.

Another feature of flowsheets is the "Graphical View". This can be used during a visit to help show improvement (or not) in various lab values.

Grid View	Graphical View			
BDK A1c	New Flowsheet Enc			Notes
Name	10/20/2015	07/29/2015	04/27/2015	01/22/2015
− A1c				
Hemoglobin A1C	6.2	6.8	7.3	6.3
Miscellaneous				

Zoom 1m 3m 6m 1y

7.3   6.8

6.3   6.2

01/22/15   04/27/15   07/29/15   10/20/15

This option to graph results also exists when viewing the lab itself – by clicking on the name of the lab itself (rather than the paperclip), the box shown at right opens – if you click "Display Graph", it will generate a graph similar to the one above.

Order Date	Coll. Date	Hemoglob	HEMOGLO	TSH		
10/23/2015	10/23/2015	6.5				
07/13/2015	07/13/2015	7.1				
04/16/2015	04/16/2015	7.4				

Assessments: Show Specify   Notes: Addendum
☐ I10 Essential (primary) hypertension
☑ E11.42 Type 2 diabetes mellitus with diabetic polyneur
☐ E78.2 Mixed hyperlipidemia
Clinical Info: Internal Notes:

Custom   Reports   Print ▼   Midmark ECG   Display Graph   Options ▼
OK   Cancel

2. **N Jellybean**: This is the jellybean used by offices that dictate using Scribe (I believe). There is an area in "My Settings" that looks like it allows you to choose which jellybeans you see – but I have altered my settings, and all it does is put an "X" through the N jellybean.

N 0   E 0   S 0   D 0   R 0   T 5   L 0   M 1

We asked Damian during our weekly conference call with ECW if we could hide jellybeans for individual providers. Unfortunately, this is not possible – the setting is PrimaCARE-wide. So even if you don't use the N jellybean, it is there to stay.

3. **Practice specific alerts**: One of the glitches that has plagued our practice specific alerts for many months has been fixed. We should be able to roll out many new alerts in the next few weeks. These have been discussed at two EMR Committee meetings. I am attaching the proposed alerts to this email. In the coming weeks, you will see these

Name	Last Done	Freq	Due Date	Status	Orders	
Cervical cancer screening	03/10/2014	36 M	03/10/2017	✓	CDSS Pap	
Cholesterol control (genl pop)	07/29/2015	6 M	01/29/2016	✓		✗
Cholesterol screen (genl pop)	07/31/2014	60 M	07/31/2019	✓	CDSS Cholest	✗
Influenza vaccine (over 50)	10/15/2015	6 M	04/15/2016	✓	CDSS FLU	✗
Smoking status	10/23/2015	12 M	10/23/2016	✓	CDSS Smokin / Smoking Ces:	✗

Generic Practice Alerts						
Fecal Occult Blood (FIT) Prima CARE		1 Y	10/24/2015	○	H	✗
Flexible Sigmoidoscopy		5 Y	10/24/2015	○	H	✗
Glucose	07/31/2014	5 Y	07/31/2019	✓	H	✗
Hepatitis C Screening		100 Y	10/24/2015	○	H	✗
LIPID PROFILE (Prima Care)	07/29/2015	5 Y	07/29/2020	✓	H	✗
MAMMOGRAM SCREENING	10/01/2015	2 Y	10/01/2017	✓	H	✗
Screening Colonoscopy		10 Y	10/24/2015	○	H	✗
Screening Colonoscopy		10 Y	10/24/2015	○	H	✗
THINPREP TIS PAP AND HPV mRNA E6/E7 REFLEX HPV 16,18/45 (WOMAN 30 Y ABOVE)		3 Y	10/24/2015	○	H	✗

appear in the right panel as well as when you select "CDSS" from the Hub or from the top of a progress note. Remember that you can easily fulfill an alert by using an appropriate scanned document (for

example, for a mammogram done at another institution) – I will attach the updated "How To" about this workflow to this email. You should see the choices in this area change quite a bit over the next few months. CDSS is being retired – focus on the "Generic Practice Alerts", not on CDSS.

There are 3 ways to add data to satisfy an alert:

1. Automatically: By far, the easiest way. If you order a mammogram at PrimaCARE, or do a Pap smear at PrimaCARE, or order an A1c at PrimaCARE – the alert should be automatically updated. This feature was not functioning properly until last week. I have been able to do only a little testing thus far, but it appears to be working. So, your work will be done for you (and Rich will by happy) if you order everything through PrimaCARE.
2. Scanned documents: If you scan in a mammogram or Pap smear, and use the "Manage Alerts" feature in the scanning box, the alert will be satisfied. The "How To" published in 8/15 goes through this workflow.
3. Using the "H" button: As shown to the right, this patient is not up to date on her Pap smear – however, I did do a Pap smear in 6/14 – but at

that time, the automatic function mentioned above was not working. If I choose the "H" button, the screen to the left opens. I can enter the correct date, with a result – and click OK. You can see here that the Pap smear alert has been satisfied.

Just a brief note about one-time screens like hepatitis C – ECW doesn't have an option for screening once, so you will see that the repeat screening date is set as 100 years – essentially suppressing it forever. You do have the option for suppressing ANY alert forever if it is not appropriate for that patient (one wouldn't order a colonoscopy or mammogram for someone with a life expectancy of only a few years). In this example, I put the date in for the hepatitis C test – and then suppressed it forever. For the hepatitis C screen, you don't have to bother with this additional step – but I offer this just as an example of how to suppress an alert forever.
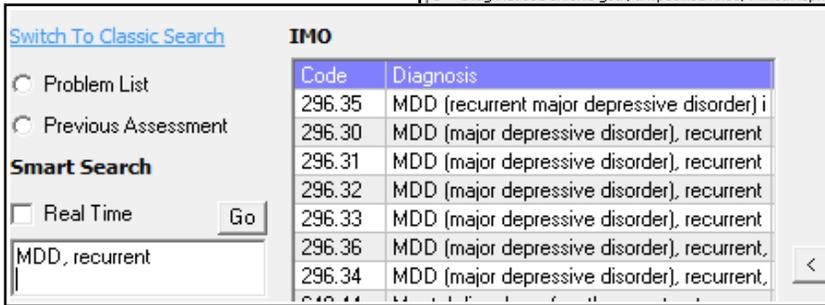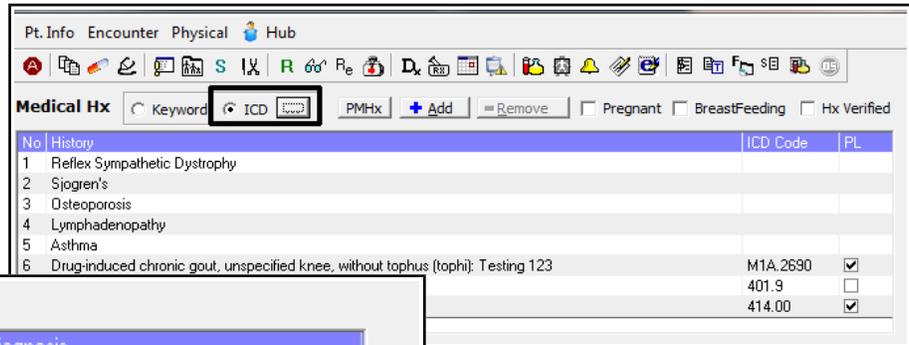

Be aware that when you do enter something like a Pap smear in the alert system – when the Pap was done at PC in the past – a second entry will appear. I don't know anyway around this – but I don't see it as a problem. Note that you do see the comment in the alert entry (if you hold the mouse over the "Negative" seen to the right of the entry, it will display the entire comment). If you double-click on the entry, you will also see the full comment.

4. **Drug-Allergy alerts**: I have NOT encountered any new problems with the drug-allergy alerts in the past week. I personally update the allergies for all patients scheduled for the upcoming day on the evening prior. This doesn't usually require more than about 10-15 minutes of work (fortunately, many patients do have any allergies). I do think this is important for all offices to be working on – if we all pull together, the task will be much lighter. Within 6 months, most of the patients we see should have updated/functioning allergies in their charts. If you are not sure what I am talking about, please review the "How To" on entering/updating allergies in the charts. This can be found at http://www.drkney.com/html_pages/ecw.htm. Remember to use "Browse Rx..." AND choose ONLY MedispanRx when entering a new allergy.

5. **Medical History**: For those of you trying to add ICD-10 codes from the "Medical Hx" screen – we are aware of the problem. The "ICD" button shown in this screenshot pulls up the Smart Search – but pulls only ICD-9 codes. We are working with ECW to correct this glitch.

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