



RESOURCE AND PATIENT MANAGEMENT SYSTEM

IHS Emergency Department Dashboard

(BEDD)

Addendum to User Manual

Version 2.0 Patch 2 September 2017

Office of Information Technology Division of Information Technology

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Preface

The purpose of this manual is to provide the user with the information required to use the IHS Emergency Department Dashboard (EDD).

1.0 Introduction

The EDD is a tool that electronically enables facilities to run and manage their emergency and or urgent care clinics. It is dependent on the Resource and Patient Management System (RPMS) Emergency Room System (ERS) in the AMER namespace. EDD was built on the ERS foundation to enhance patient flow and provider communication.

EDD can be set up to operate as a standalone icon on the staff computer or can be accessed from within the RPMS Electronic Health Record (EHR) application.

EDD gets its data and updates from one of four ways: ERS, Dashboard Edit, or EHR data or a combination of all three.

2.0 System Navigation

This section outlines a typical workflow for using the EDD. Be advised that some of these steps may be different for a given site.

- Admit a patient via the new BEDD IN option in the EDD or the RPMS AMER ADMISSION option, which will register the patient on the dashboard (in the Check-In section)
- Triage the patient which moves the patient into the **Triaged** section of the dashboard
- Assign the patient to a room
- Update various informational visit screens
 - Injury
 - General visit information
 - Emergency Department (ED) Consult Information
 - Procedure information
 - Diagnosis information
- Remove from room
- Discharge
- Run dashboard reports

2.1 Admitting the Patient to the EDD

A patient can be admitted to the EDD using the existing **AMER ADMISSION** option in RPMS or by using the new **BEDD IN** option in the EDD which was included in BEDD v2.0 Patch 2. The following sections describe these steps in further detail:

2.1.1 Admit Patient via AMER

In order to list a patient in the EDD, the patient must first be admitted to the ED. One option to do this is by utilizing the **AMER ADMISSION** menu option in RPMS as indicated in Figure 2-1.

```
Select OPTION NAME: AMER ADMISSION Admit to Emergency Room

ER SYSTEM Ver 3.0: ADMISSION TO EMERGENCY ROOM ^ = Back up ^^ = quit

Questions preceded by a '*' are MANDATORY. Enter '??' to see choices.
```

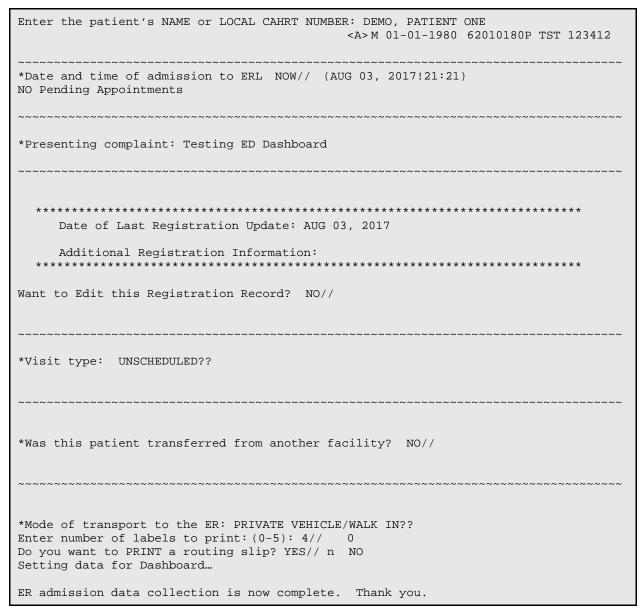


Figure 2-1 Sample AMER Admission

Please note that the information displayed above could differ across sites based upon the BEDD site setup options **Print Med Rec Worksheet**, **Print Patient Routing Sheet** and **Print Arm Band** that are described in Section 4.3.1.

After completing the AMER Admission process, the patient now appears in the EDD in the **Check-In** section as indicated in Figure 2-2.

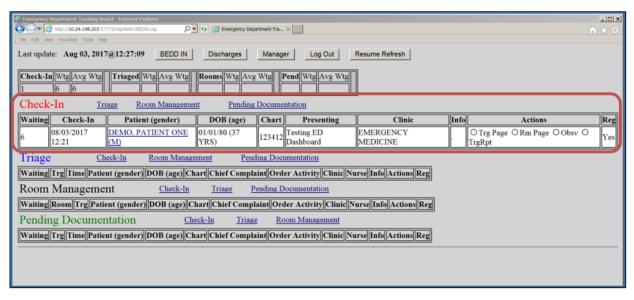


Figure 2-2: Patient in "Check-In" status

2.1.2 Admit Patient via BEDD IN

A second method used to admit a patient to the EDD that is now available (with the release of BEDD v2.0 Patch 2), is the new **BEDD IN** option.

Note: Unlike AMER, the short admit through the EDD BEDD IN button has limited functionality. It does not display patient flags or print wristbands with the current BEDD V2.0 Patch 2 release.

This new option is accessible from the main EDD display as shown in Figure 2-3.

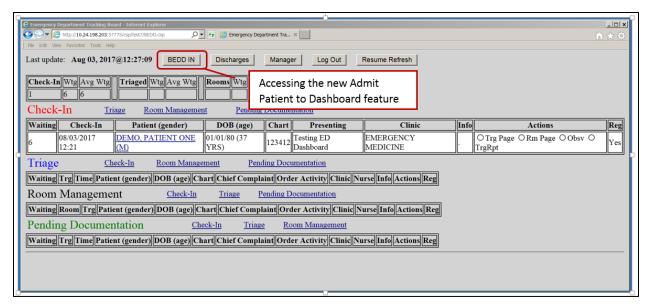


Figure 2-3 The BEDD IN button

By clicking the **BEDD IN** button on the main EDD display, users will be presented with the **Admit Patient to Dashboard** screen as shown in Figure 2-4.

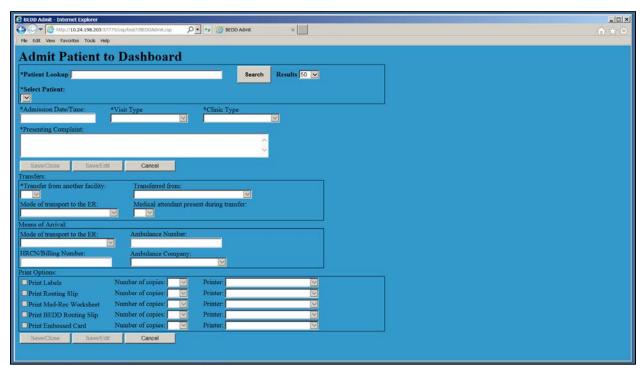


Figure 2-4 Sample Admit Patient to Dashboard Display

Note that the choice of available print options at the bottom is controlled by the EDD setup definition for the site (as explained in Section 4.3.1).

Admitting a patient to the EDD follows a process similar to the **AMER ADMISSION** process. Upon entering the **Admit Patient to Dashboard** screen, the user is prompted to look up the desired patient in the **Patient Lookup** field as shown in Figure 2-5. Patients can be located by entering their 'Last name, First name', their DOB, the first letter of their last name followed by the last four digits of their SSN, or their HRN. After entering the desired information, either click the **Search** button to perform the lookup or press the <TAB> key to perform the lookup and jump directly to the **Select Patient** listing.

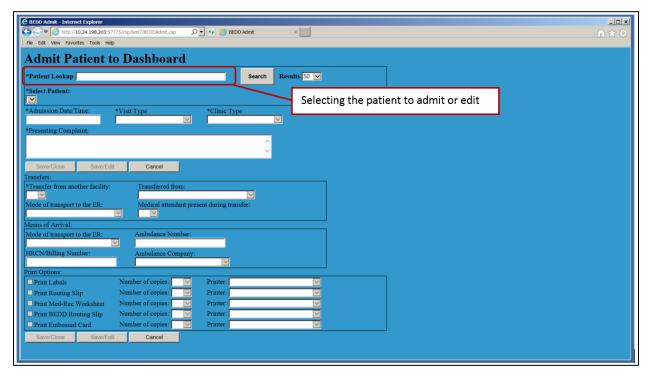


Figure 2-5 Selecting the patient to admit or edit

Once the lookup has been performed and the focus is on the **Select Patient** field, either click the dropdown button to display the list of results or hold down the <ALT> key and then press the <DOWN ARROW> to access the list of results using only the keyboard. The list of results will then display as shown in Figure 2-6.

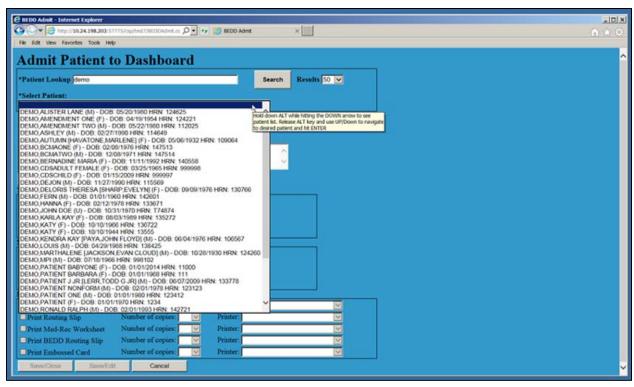


Figure 2-6 Patient Lookup search results

Use the <DOWN ARROW>/<UP ARROW> keys or the mouse to select the desired patient. If the patient is already admitted to the EDD, a screen (see Figure 2-7) will display asking whether the user would like to edit the existing patient visit. Selecting **OK** will load information already entered for the visit and allow it to be changed.

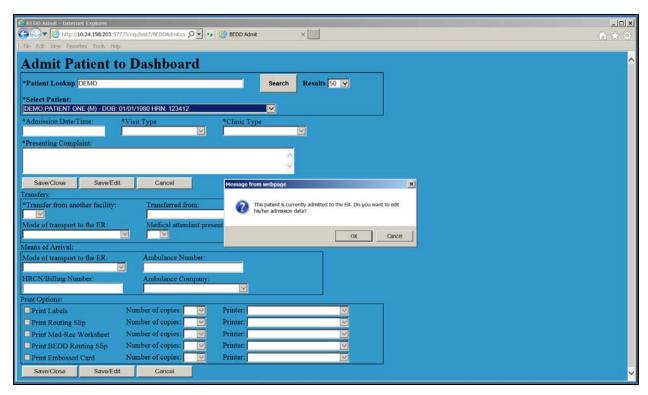


Figure 2-7 Existing ED Visit Message

If a new patient/visit is selected, the screen will become enabled for data entry. Several fields (**Visit Type**, **Clinic Type**, **Transfer from another facility**, **Mode of transport to the ER**) will be populated with default information. The print options will be enabled and populated as defined in Section 4.3.1. See Figure 2-8 for a sample screenshot of the initial admission information.

In order to save the patient admission record, some fields (Admission Date/Time, Visit Type, Clinic Type, Presenting Complaint and Transfer from another facility) must be populated.

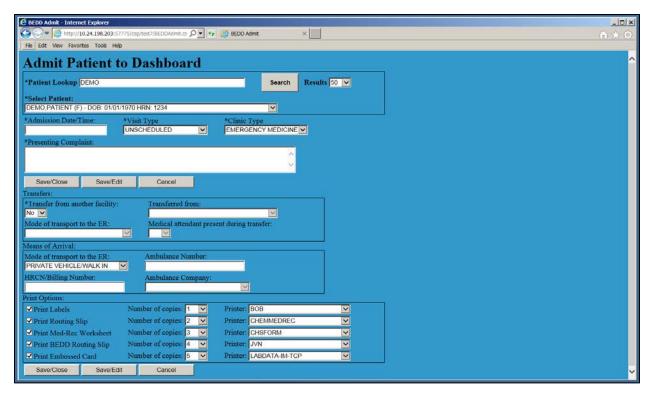


Figure 2-8 Default Admission Screen

The **Admit Patient to Dashboard** screen restricts data entry similar to how the **AMER ADMISSION** option does. Certain fields can only be edited if specific information is entered in other fields on the form. For example:

- If the Transfer from another facility field is set to 'No', the Transferred from, Mode of transport to the ER and Medical attendant present during transfer fields will be disabled. The Mode of transport to the ER field in the Means of Arrival section however will be enabled.
- If the Transfer from another facility field is set to 'Yes', the Transferred from, Mode of transport to the ER, and Medical attendant present during transfer fields will be enabled. In this situation, the Mode of transport to the ER field in the Means of Arrival section will be disabled.
- If the Mode of transport to the ER field in the Means of Arrival section is enabled, and a selection is made in the field which contains the word 'AMBULANCE' (all upper case) then the Ambulance Number, HRCN/Billing Number and Ambulance Company fields will be enabled. Otherwise the fields will remain disabled.

The **BEDD IN** feature provides the ability to print various documents relating to the patient admission. If the selected patient is already admitted to the ED, the print options will initially be unchecked. To reprint, check the box next to the desired document.

All documents that are checked for printing will print (the specified number of copies) to the selected printer for each document.

Upon completing data entry, the user can click the **Save/Close** button to save the admission information and return to the main dashboard or they can click the **Save/Edit** button to save the admission information and get transferred to the patient edit screen. Clicking **Cancel** will return the user to the main dashboard without saving any changed.

2.2 Triage Patient and Triage Actions

Once the patient is admitted, triage information can be added before or after assigning the patient to a room. By clicking on the patient's name in the **Patient (gender)** column indicated in Figure 2-9, the user is taken to the **Patient Edit** screen as shown in Figure 2-10.

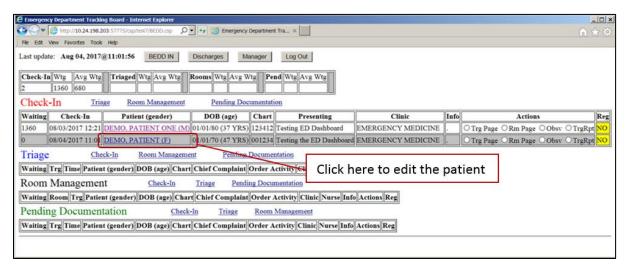


Figure 2-9: Click on patient to edit

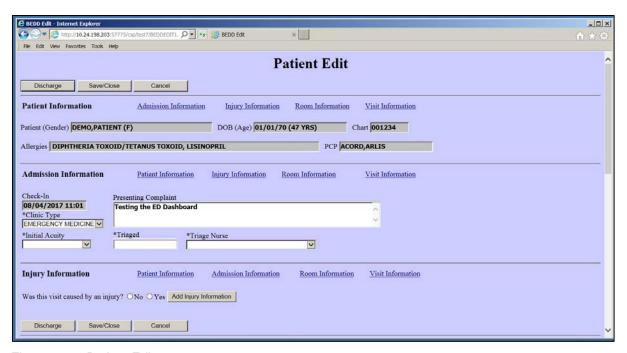


Figure 2-10: Patient Edit screen

Triage information is entered into the **Admission Information** section of the **Patient Edit** screen which includes **Presenting Complaint**, **Initial Acuity**, **Triaged Date/Time**, **Triage Nurse & Clinic Type** as indicated in Figure 2-11. After the information is entered, click the **Save/Close** button. The patient will then be moved to the **Triaged** section of the EDD as indicated in Figure 2-12.



Figure 2-11: Admission Information (Triage)

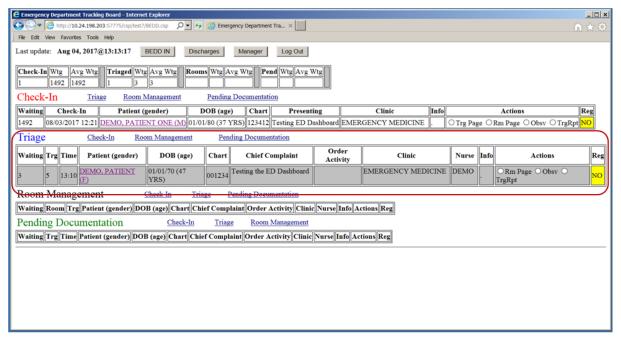


Figure 2-12: Patient moved to Triaged section

If the **Auto Note** box is checked in the setup definition (as documented in section 4.3.1.9), actions can also be performed such as **Room Page**, **Observation** and **Triage Report** for the patient listed in the **Triage** section as indicated in Figure 2-13.

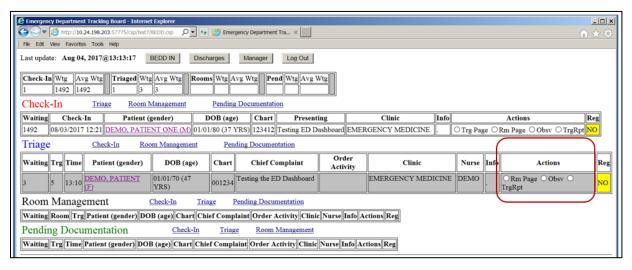


Figure 2-13: Auto Note Actions

Checking the various actions will auto-populate the notes section in the **Info** column. See Figure 2-14 and Figure 2-15 for the results of checking the **Rm Page** action multiple times.

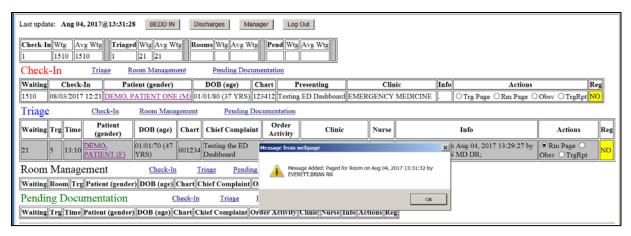


Figure 2-14: "Rm Page" button pressed results in a pop-up stating message was added

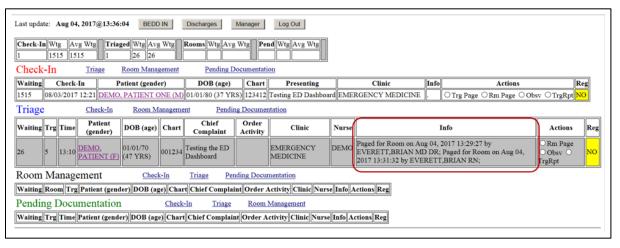


Figure 2-15: Room Page note appearing in the Info section

Checking the **Obsv** button will post a note stating that the patient was observed as shown in Figure 2-16. The action will place the entry in the **Info** box as shown in Figure 2-17.

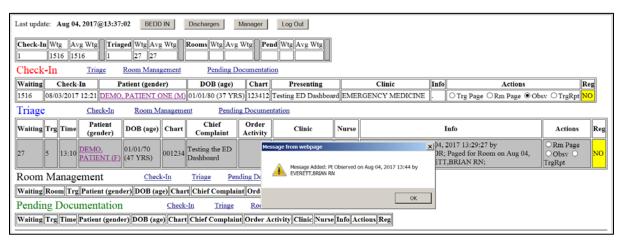


Figure 2-16 Message shown when Obsv button is clicked

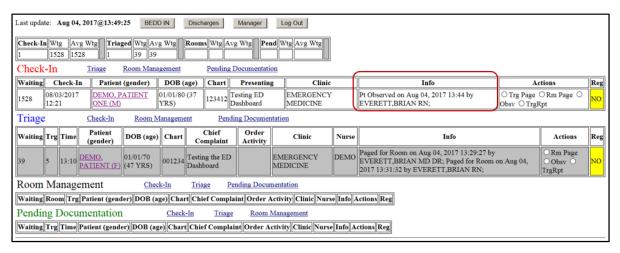


Figure 2-17 Info box after clicking Obsv

Checking the **TrgRpt** button will display a triage report for the patient as indicated in Figure 2-18. Once the report is displayed, click the **Return to ED Tracking Board** link on the upper left of the triage report (Figure 2-18.

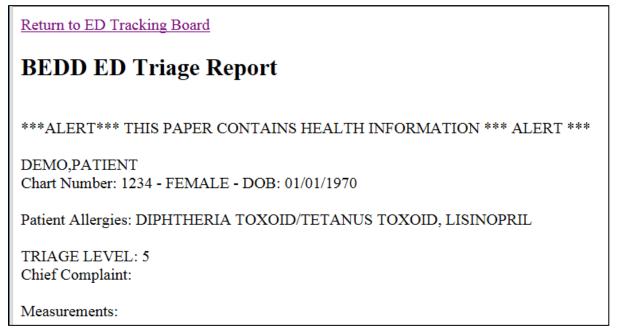


Figure 2-18 Sample Triage Report

If the user checks the **Rm Page** action or the **Obsv** action, the **General Information/Notes** section found on the patient edit page will also be populated with the actions taken. See Figure 2-19 for a sample display.

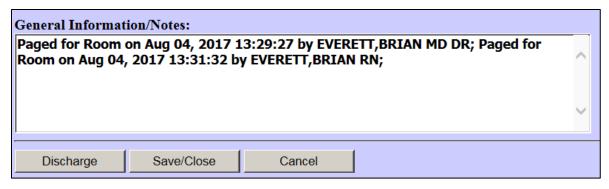


Figure 2-19 Actions recorded in the General Information/Notes section

2.3 Assign Patient to Room

To assign a patient to a room, go to the **Edit Patient** screen by clicking on the patient's name on the dashboard and enter the room assignment and Primary Nurse information in the **Room Information** section. Click the **Save/Close** button as indicated in Figure 2-20. The user is then returned to the main screen.



Figure 2-20 Assign patient to a room

The patient now appears in the **Room Management** section of the EDD as indicated in Figure 2-21.

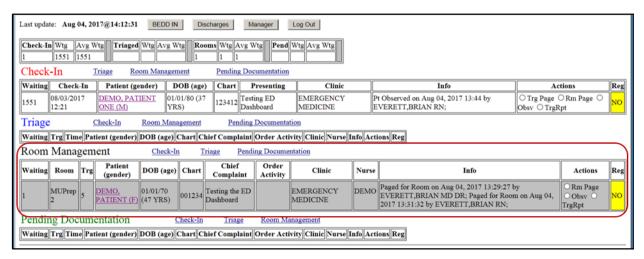


Figure 2-21 Patient moved to Room Management section

2.4 Update Additional ED Data

Additional informational elements exist that can be entered and tracked via the ED Dashboard. These include injury, general visit, consult, procedure and diagnosis information.

Each of these elements is accessed by clicking on the patient name anywhere on the EDD's main screen, which takes the user to the **Patient Edit** screen.

Please note that a pop-up dialog indicating that a **Save** will be performed, appears as the user moves between sections and add data to the various injury, general visit, consult, and procedure and diagnosis sections.

2.4.1 Injury Information

To inidicate that the visit was caused by an injur, check the **Yes** field in the **Injury Information** section of the **Patient Edit** screen, and click the **Add Injury Information** button (Figure 2-22). A pop-up will indicate that changes will be saved when the user clicks **OK** to continue or **Cancel**. Clicking **OK** will display the **Injury Worksheet** screen (Figure 2-23).

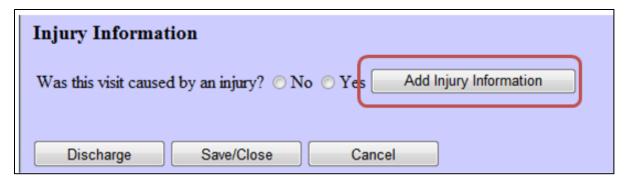


Figure 2-22: Injury Information section of Patient Edit screen



Figure 2-23 Injury Worksheet screen

Required data is indicated by fields identified with an asterisk, which include:

- **Town/village where injury occurred** This is a free text field.
- **Date and time of injury** This date and time must be prior to the admission date and time.

- Cause To enter a cause, type a search string in the Cause Lookup field and then type the tab key once. This will initiate an ICD10 lookup. Results will be returned in the Cause dropdown box. Select the appropriate ICD10 code from the list of results returned.
- **Setting** The setting in which the injury occurred This is a set of pre-populated choices.

2.4.2 Visit Information

General visit information is entered in the **Visit Information** section of the **Patient Edit** screen (Figure 2-24).

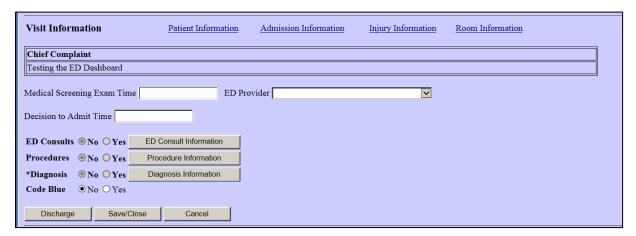


Figure 2-24: Visit Information section of the Patient Edit screen

2.4.2.1 Visit Information – Chief Complaint, Date/Time & Provider information

Chief Complaint (display only), Decision to Admit Time, Medical Screening Exam Time and ED Provider information is entered here.

2.4.3 ED Consults

By clicking on the **ED Consult Information** button in Figure 2-24, the user can enter consult information in the **ED Consult Worksheet** as indicated in Figure 2-25. Multiple consults can be entered.

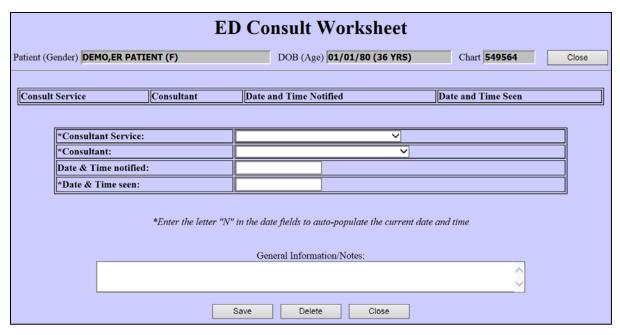


Figure 2-25 : ED Consult worksheet

2.4.4 ED Procedures

By clicking on the **Procedure Information** button in Figure 2-24, the user can enter procedure information in the **ED Procedure Worksheet** as seen in Figure 2-26. Multiple procedures can be entered.

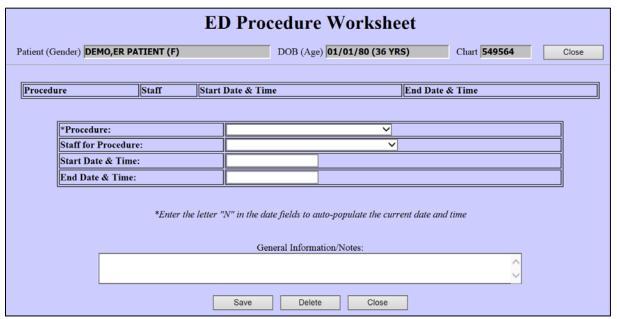


Figure 2-26: Procedure Information

2.4.5 Diagnosis

By clicking on the **Diagnosis Information** button in Figure 2-24, the user can enter diagnosis information in the **ED Diagnosis Worksheet** as shown in Figure 2-27. Multiple diagnoses can be entered.

Please note that a diagnosis is required. If no diagnosis entry is on file yet for the visit, a **ZZZ.999 UNCODED DIAGNOSIS** entry will be filled in. The narrative will need to be filled in by the user and the entry will need to be saved.

To enter a diagnosis, type a string to search on in the column to the right of the **Search for Diagnosis** label and press the tab key once. This will initiate an ICD10 lookup. Results will be returned in the dropdown box located below the **Search for Diagnosis** label. Select the appropriate code from the list.

One entry (and only one entry) must be listed as a primary diagnosis.

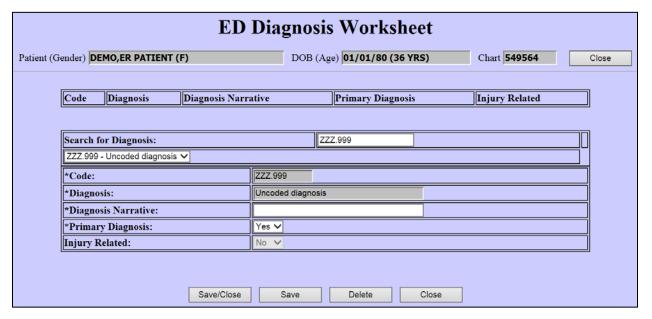


Figure 2-27: ED Diagnosis Worksheet

2.4.6 Additional Notes

Additional general notes can be added on the **Patient Edit** screen by entering free-text notes in the **General Information/Notes** section (Figure 2-28) and clicking the **Save/Close** button.

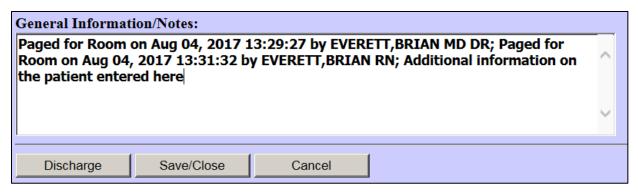


Figure 2-28: General Information/Notes section of the Patient Edit screen

2.5 Remove Patient from Room

The user can elect to remove the patient from the room before actual discharge in order to free up the room for another patient. This step is completely optional if the patient is being discharged, as the patient will be removed from the room in the event of performing the discharge step.

To remove the patient from a room, check the **Remove from Room** radio button in the **Room Information** section of the **Patient Edit** screen and click the **Save/Close** button as shown in Figure 2-29. The patient will then appear in the **Pending Documentation** section of the dashboard as indicated in Figure 2-30.

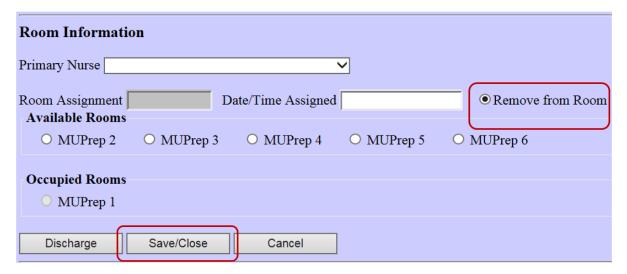


Figure 2-29: Remove from Room

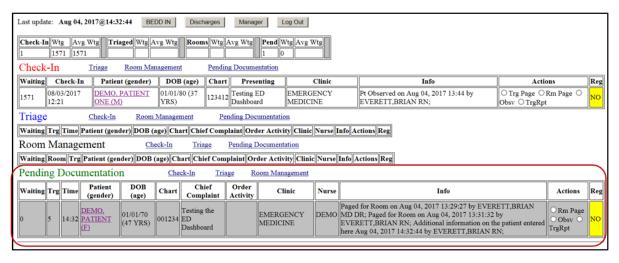


Figure 2-30: Patient moved to "Pending Documentation" section

2.6 Discharge Patient

On the **Patient Edit** screen, click the **Discharge Button**. The EDD will validate that information required before proceeding with a discharge action has been entered. If any information is missing, the user is notified with one or more pop-up messages that additional information is required (Figure 2-31). If no additional data is needed, a confirmation "Continue to Discharge (Any changes will be saved)?" pop-up message Figure 2-32 and then the patient discharge screen will appear as indicated in Figure 2-33.

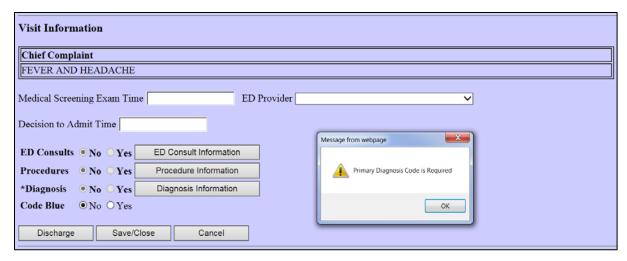


Figure 2-31: Pop-up dialog stating Primary Diagnosis is required before proceeding with discharge

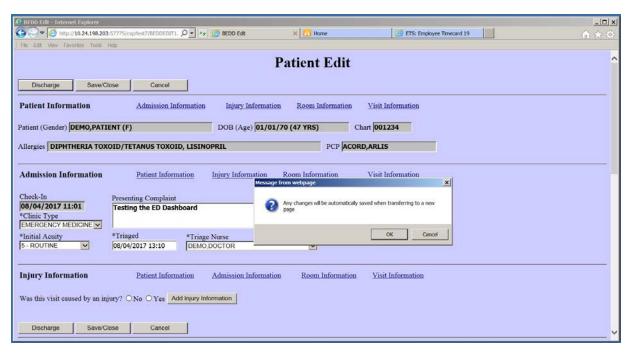


Figure 2-32: "Continue to Discharge (Any changes will be saved)?" pop-up message

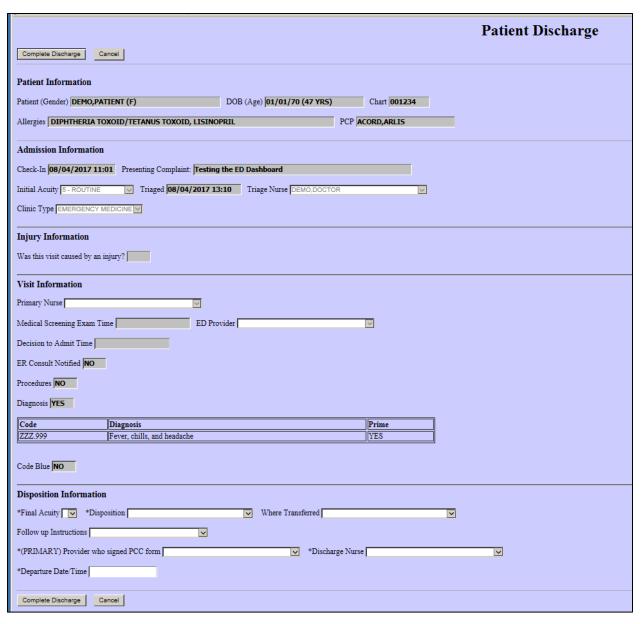


Figure 2-33 : Discharge Patient screen

In order to discharge the patient, disposition information must be entered in the **Disposition Information** section in the **Discharge Patient** screen (Figure 2-34). Upon entering the information, click the **Complete Discharge** button to start the discharge process.

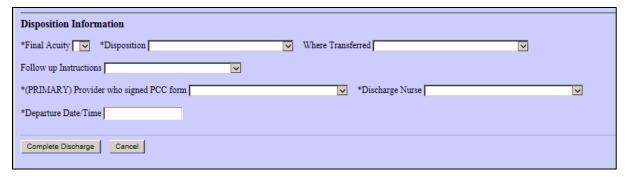


Figure 2-34: Disposition Information section of the Discharge page

The required discharge fields are:

- Final Acuity
- Disposition
- Follow up Instructions
- Primary Provider who signed PCC form
- Discharge Nurse
- Departure Date/Time

After clicking the **Discharge** button, the **Complete Discharge** verification is presented asking the user to complete the discharge (Figure 2-35).

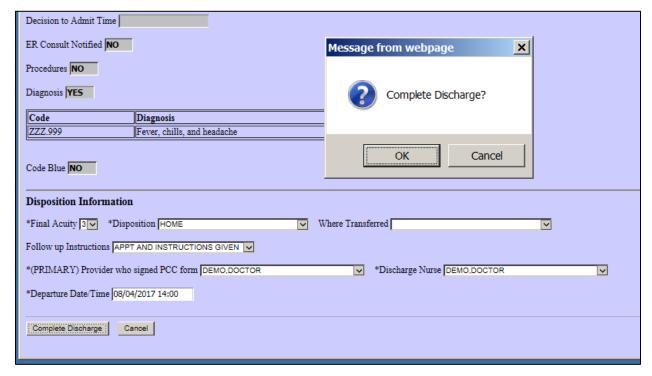


Figure 2-35: Confirm discharge action

After clicking **OK**, the patient will be removed from EDD & AMER (Figure 2-36).

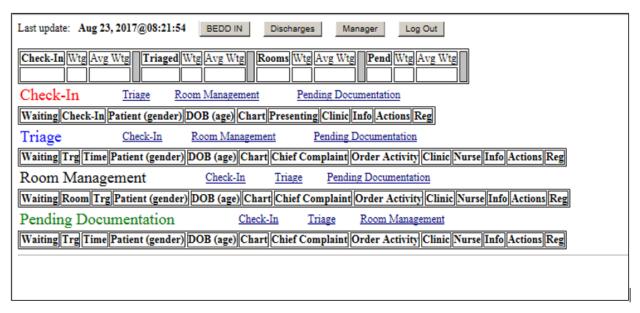


Figure 2-36: Patient removed from EDD and AMER

2.7 Discharge Reporting

To display a list of discharges by date from the EDD screen, press the **Discharges** button at the top of the dashboard (Figure 2-37) and the user will be presented with the **Emergency Department DISCHARGES** screen as indicated in Figure 2-38.

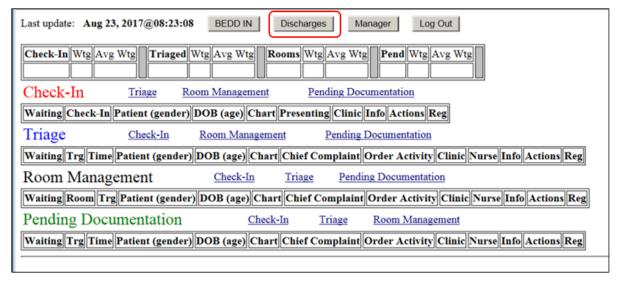


Figure 2-37: Discharges button

Emergency Department DISCHARGES Last update: Aug 23, 2017 14:04:41 Manager Dashboard Discharge From Date 8/4/2017 Discharge To Date 8/4/2017 Show DISCHARGES Discharge Trg Patient (gender) DOB (age) Chart Disposition 08/04/2017 14:00 5 DEMO, PATIENT (F) 01/01/70 (47 YRS) 001234 HOME

Figure 2-38: Emergency Department DISCHARGES screen

Enter the date range that you want to report on and click the **Show** button as indicated in Figure 2-39.

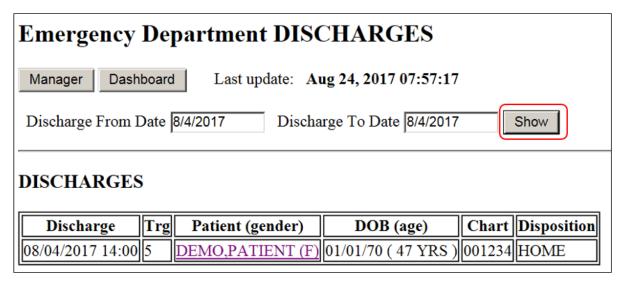


Figure 2-39: Example of the list of discharges by date range

Select a visit by clicking on the patient name. This will bring up a discharge summary of the visit (Figure 2-40). Click the browser back button to return to the discharge listing.

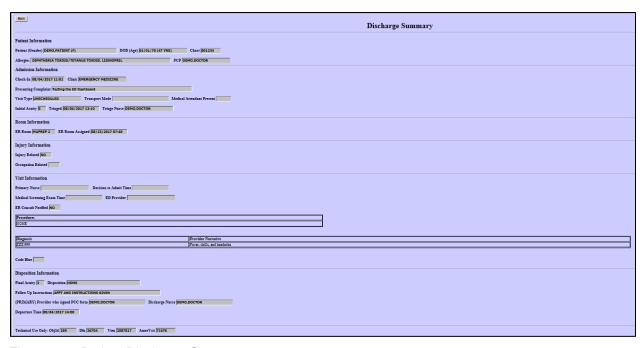


Figure 2-40 Patient Discharge Summary

2.8 ED Dashboard Reporting

A number of management reports can be generated, provided the user has access to the Manager screen. To access the report screen from the EDD main page, click on **Manager** (Figure 2-41), click on **Reports** (Figure 2-42), and the **ERS/BEDD Reports** screen will be shown (Figure 2-43).

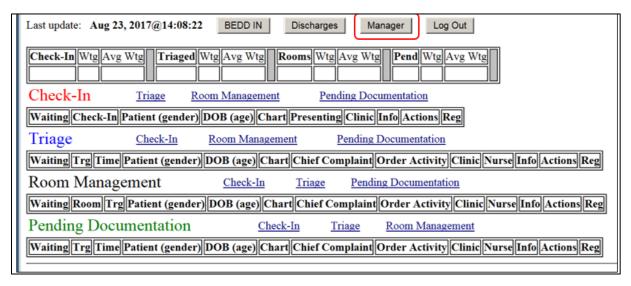


Figure 2-41: Manager Button

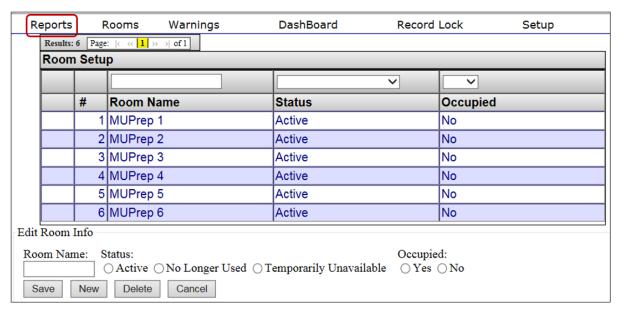


Figure 2-42: Reports link



Figure 2-43: ERS/BEDD Reports

For each of the reports listed, select the appropriate beginning and ending date for each and click the corresponding **Run Report** button. The browser will then display the requested report. To return to the manager screen, click the **ERS/BEDD Reports Menu** link in the upper right corner of any report.

Current reporting options are:

• Admission Activity (Figure 2-44).

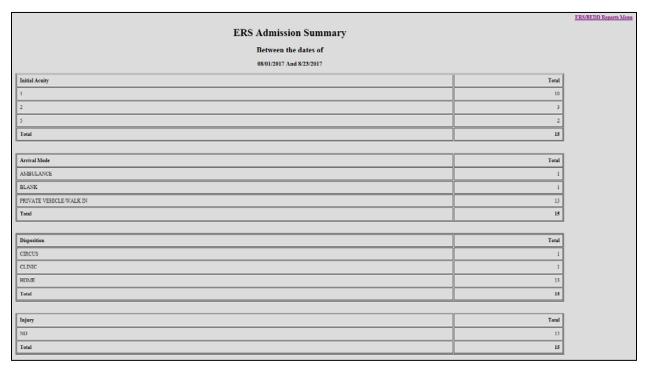


Figure 2-44: ERS Admission Summary Report

• Central Log Report (Figure 2-45).



Figure 2-45: Central Log Report

• Check-In Summary by hour (Figure 2-46).

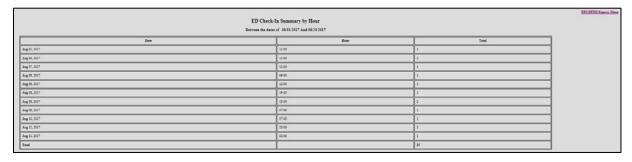


Figure 2-46: ED Check-In Summary by Hour

• Length of Stay by Acuity (Figure 2-47).

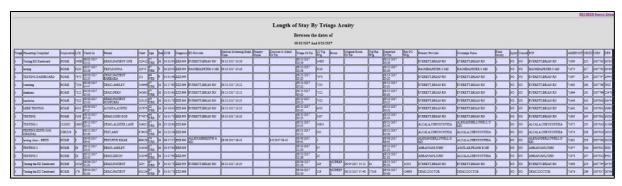


Figure 2-47: Length of Stay by Triage Acuity

• Discharge Activity by hour (Figure 2-48).

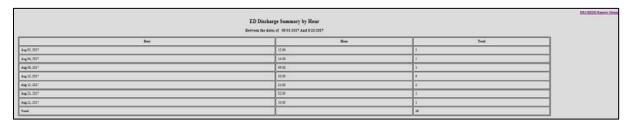


Figure 2-48: ED Discharge Summary by Hour

• Room Utilization (Figure 2-49).



Figure 2-49: ERS Room Utilization by Hour

2.9 Whiteboard Display

The BEDD Patch 1 release contains a new way of displaying the ED Dashboard called the Whiteboard. The Whiteboard is a customizable display of the ED Dashboard which allows non-PII information to be displayed. This is useful if a site wishes to set up a display in a public area (which would require minimal information to be displayed) or in a nurses station (where more information could be displayed).

2.9.1 Logging into the Whiteboard

To log into the Whiteboard, in Standalone Mode, click on the Dashboard desktop icon just as if you were going to log into the regular dashboard. The screen shown in Figure 2-50 will appear. Any user with regular EDD access can log into the Whiteboard by typing in their Access/Verify information and clicking the Whiteboard Login button. A special Whiteboard account has also been created which users can log on with. The Access Code for the special account is 'Whiteboard'. The Verify Code initially comes set as null. A new Verify Code can be entered or modified by entering a new value in the Whiteboard Verify field in the Whiteboard Display Settings section of the Setup menu. To log in using this new account, enter 'Whiteboard' for the Access Code, the Verify Code (if one has been defined) and then click the Whiteboard Login button. A display similar to Figure 2-51 will display (actual column shown will vary depending upon the Whiteboard custom settings – see 4.3.4 - Whiteboard Display Settings for further details).

Welcome to the BEDD Emergency Room Dashboard		
Standalone/Whiteboard Login		
Access Code:		
Verify Code:		
Select the Site		
Login Whiteboard Login		
Integrated Dashboard/EHR users must re-launch the Dashboard from EHR to re-establish the link with EHR		

Figure 2-50: ED Dashboard Login Screen

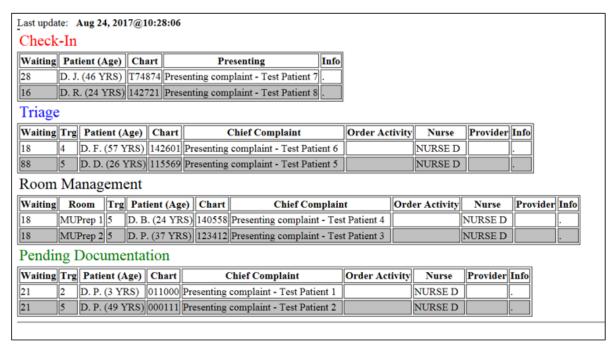


Figure 2-51: Sample Whiteboard Display

3.0 Package Management

User access to the EDD is controlled by RPMS security keys. The BEDD application includes three security keys, BEDDZWHITEBOARD, BEDDZMGR and BEDDZDASH. These keys are documented in Section 3.4 of the *Addendum to the Technical Manual*.

4.0 Package Operation

Before using the EDD application, it must be set up to meet the needs of the site with respect to clinic information, and how the application will behave while admitting, processing and discharging patients.

Someone with EDD Manager Access is required to set up bed locations, site information and other settings before the application is used.

4.1 Access the EDD Manager Options

4.1.1 Login to the EDD application

Double-click the icon on your desktop to access the EDD, or enter the dashboard via the appropriate EHR tab. Based on the user settings at the site, you may first be presented with an initial login screen as shown in Figure 4-1. If the login screen shows up, enter your credentials for logging onto the Ensemble server and click the Login button.

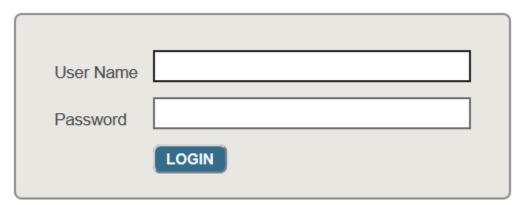


Figure 4-1: Ensemble Login Screen

At tis point the BEDD login screen should appear. Provide the user's **RPMS ACCESS/VERIFY** information (Figure 4-2). If accessing via the EHR, the user's credentials may already have been entered with the initial login to RPMS via the current EHR session, and the user may not see the screen in Figure 4-2.

Welcome to the BEDD Emergency Room Dashboard
Standalone/Whiteboard Login
Access Code:
Verify Code:
Select the Site ✓
Login Whiteboard Login
Integrated Dashboard/EHR users must re-launch the Dashboard from EHR to re-establish the link with EHR

Figure 4-2: Welcome to the BEDD Emergency Room Dashboard Login screen

4.1.2 Go to the Manager screen

After the user logs in, the user will see the main EDD screen in Figure 4-3. The user should then click on the **Manager** button on the top right as indicated below in Figure 4-3.

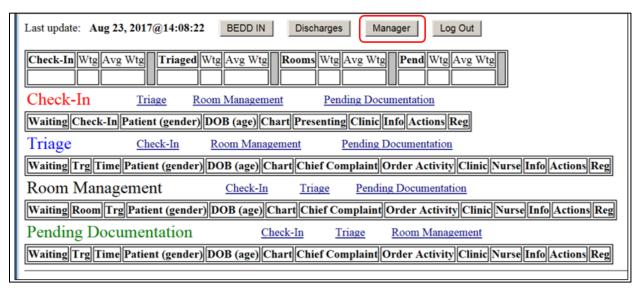


Figure 4-3: Main EDD screen – Manager Button

The first screen to appear is the Manager screen, and it will default to the **Rooms** definition page as seen in Figure 4-4. Note that unlike Figure 4-3, the user's particular site will not have rooms defined yet and that definition will be performed in the next step.

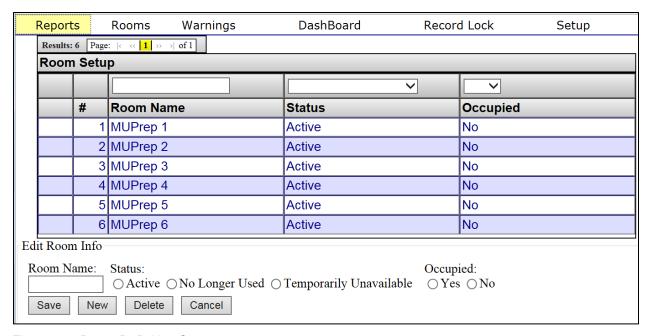


Figure 4-4: Room Definition Screen

4.2 Add ER location

In the screen defined in Figure 4-4, the user enters the room name being added into the **Room Name** label at the bottom. In the **Status** section select **Active**, and under **Occupied** section select **No**. Click the **Save** button and the room will be added as in Figure 4-5.

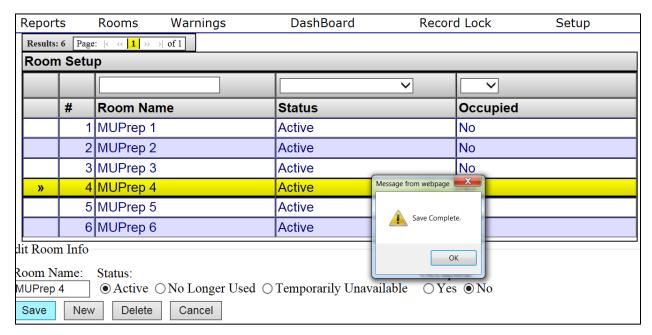


Figure 4-5: Add ER Room

Note that when adding or changing a room, it can be flagged as **No Longer Used** or **Temporarily Unavailable**. The user can also update the room to be listed as **Occupied**, preventing any patients from being assigned the location.

4.3 Access Setup & Configure Options

After the bed locations are added and while still in the room definition screen shown in Figure 4-4, click **Setup** in the upper right corner as indicated in Figure 4-6 and the user will be taken to the site **Setup** screen in Figure 4-7.

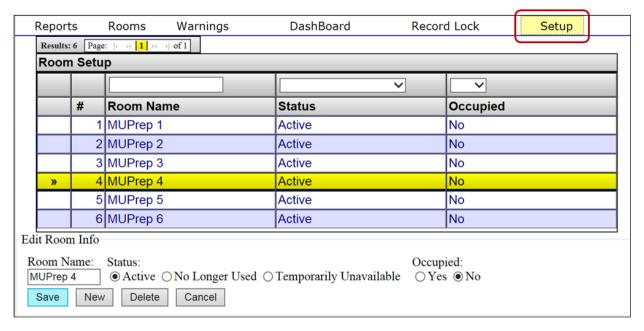


Figure 4-6: Room Definition Screen - Setup button

4.3.1 System Preferences

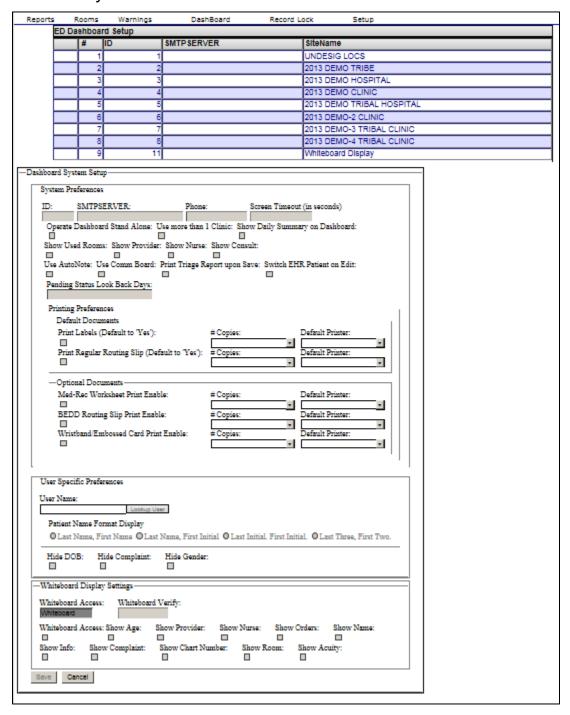


Figure 4-7: Main Setup

In order to make modifications to a site that is displayed, click the site name in the **ED Dashboard Setup** section to make it active as indicated in Figure 4-8.

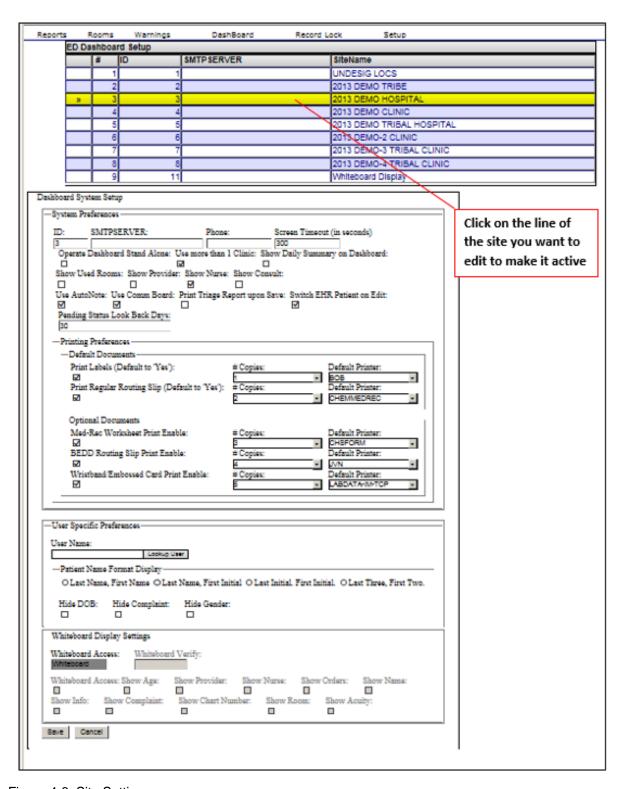


Figure 4-8: Site Settings

Please note that the site data is automatically populated with INSTITUTION file (#4) entries which are pointed to by the MEDICAL CENTER DIVISION file (#40.8), and new sites can only be added by clinic or hospital management. If the appropriate sites are not displaying, please contact the RPMS system administrator for this installation.

The following options on the site setup screen are available to configure the behavior of the EDD application. Screen shots, where appropriate, will indicate how the setting affects the display of the information in the EDD's main page.

4.3.1.1 Screen timeout (in seconds)

This value affects how long users can remain on a screen before it times out when they are logged into the EDD application. For example, if the screen timeout is set at 300 seconds and a user opens up a patient in edit mode, the screen will exit the patient edit page and return to the main EDD page after 300 seconds of being opened. The property also controls how long a patient will remain locked, if a user edits a patient and then closes their browser while still in edit mode. The EDD will automatically unlock the patient for editing at a time of 30 seconds, plus whatever value is stored in the Screen Timeout property.

4.3.1.2 Operate Dashboard Stand Alone

Not implemented

4.3.1.3 Use More than 1 Clinic

Display the clinic column in the dashboard under the Check-In, Triaged, Room Management and Pending Documentation sections as indicated in Figure 4-8.

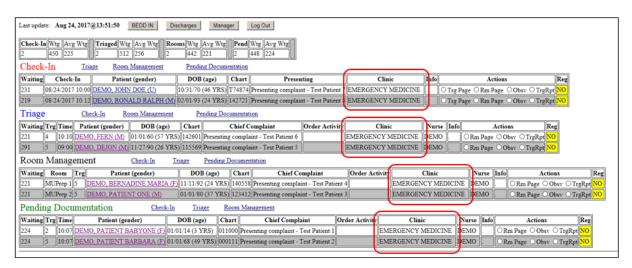


Figure 4-9: Clinic column

4.3.1.4 Show Daily Summary on Dashboard

Not implemented

4.3.1.5 Show Used Rooms

Not Implemented

4.3.1.6 Show Provider

Display the **Provider** column in the dashboard under the **Triaged**, **Room Management** and **Pending Documentation** sections as indicated in Figure 4-10.

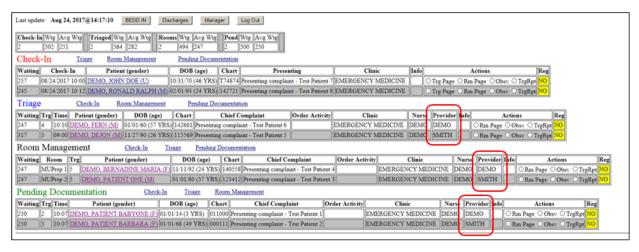


Figure 4-10: Provider column

4.3.1.7 Show Nurse

Display the **Nurse** column in the dashboard under the **Triaged**, **Room Management** and **Pending Documentation** sections as indicated in Figure 4-11.

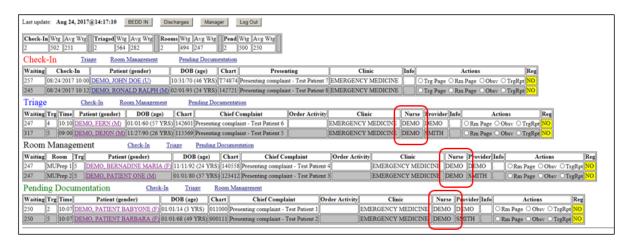


Figure 4-11: Nurse Column

4.3.1.8 Show Consult

Display the **Consult** column in the dashboard under the **Triaged**, **Room Management** and **Pending Documentation** sections as indicated in Figure 4-12.

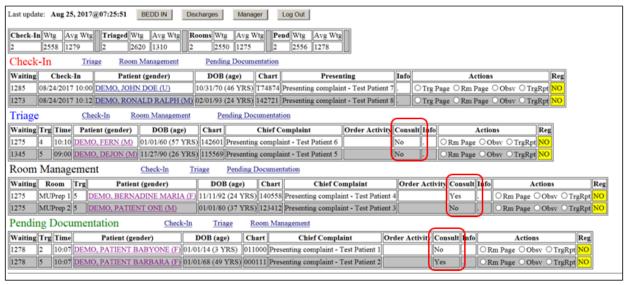


Figure 4-12: Consult Column

4.3.1.9 Use AutoNote

Auto-update the notes field when **Trg Page** (Triage Page), **Rm Page** (Room Page) or **Obsv** (Patient Observed) options are checked on a patient in the dashboard in the **Check-In**, **Triaged**, **Room Management** or **Pending Documentation** sections. See an example of **Trg Page** being used to page for triage as indicated in Figure 4-13 through Figure 4-15.

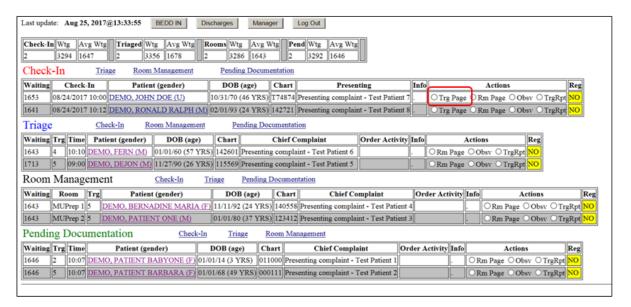


Figure 4-13: Click "Trg Page" action

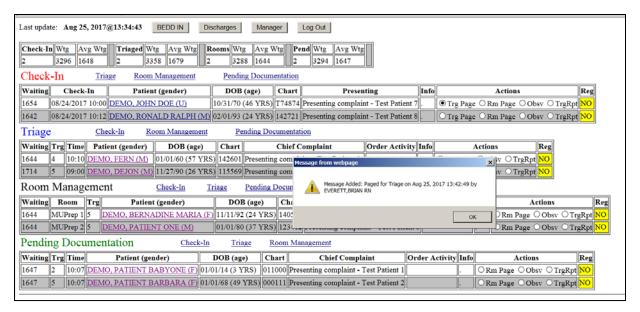


Figure 4-14: Pop-up indicating a Triage Page was requested

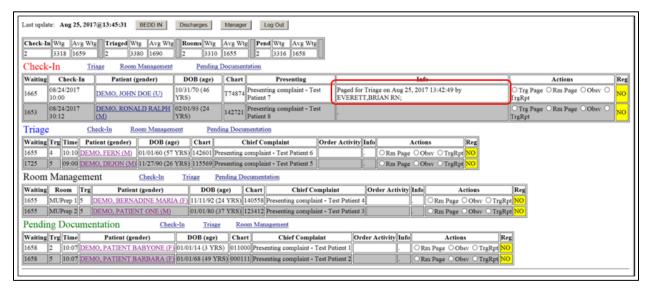


Figure 4-15: Info field containing Triage Page note

4.3.1.10 Use Comm Board

Not Implemented

4.3.1.11 Print Triage Report on Save

Not Implemented

4.3.1.12 Switch EHR Patient on Edit

If this box is checked, when utilizing the dashboard within EHR, whenever a patient is edited on the dashboard, the EHR patient and visit will automatically switch to the patient and visit being edited in the dashboard. If the box is not checked, the switch will not occur. Note that this setting only applies to EHR mode. When utilizing standalone mode, the patient/visit will not switch upon a patient edit.

4.3.1.13 Pending Status Look Back Days

This feature determines the number of days (between 5 and 30) to look in the past for patients that should display on the EDD. For example, if the property is set to look back five days, then any patient admitted to the ER greater than five days in the past that has not yet been discharged will drop off of the EDD. The setting is important as it controls how far back to look for patients. The higher the property setting is, the more patient data must be reviewed every time the EDD page refreshes. Keeping the setting as low as possible will require less system processor time and the EDD will refresh more quickly.

4.3.2 Printing Preferences

The BEDD IN option allows various documents associated with the visit to be printed. The following settings control the printing of these documents and also provide the ability to populate default device choices and the number of copies to print.

4.3.2.1 Print Labels (Default to 'Yes')

Checking or unchecking the Print Labels (Default to 'Yes') box as shown in Figure 4-16 will cause the Print Label option in BEDD IN to default to printing turned on/off for the labels for any new patient visit. Defaulting to print as well as the values of the # Copies field and Default Printer field will be populated once a patient is selected. See Figure 4-17 to see how these settings affect the Print Label settings in BEDD IN. In this example, the chosen setting will default the Print Labels option in BEDD IN to print the labels on any new patient visit.

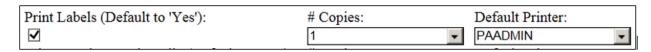


Figure 4-16: Print Labels Default Settings

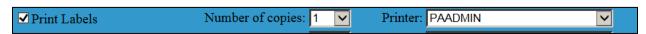


Figure 4-17: Print Labels in BEDD IN display

4.3.2.2 Print Regular Routing Slip (Default to 'Yes')

Checking or unchecking the Print Regular Routing Slip (Default to 'Yes') box as shown in Figure 4-18 will cause the Print Regular Routing Slip option in BEDD IN to default to printing turned on/off for the routing slips for any new patient visit. Defaulting to print as well as the values of the # Copies field and Default Printer field will be defaulted in as well once a patient is selected. See Figure 4-19 to see how these settings affect the Print Regular Routing Slip settings in BEDD IN. In this example the box was not checked so in BEDD IN the routing slips will not default to print on any new patient visit.

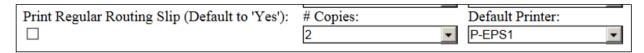


Figure 4-18: Print Regular Routing Slip Default Settings



Figure 4-19: Print Regular Routing slip in BEDD IN display

4.3.2.3 Med-Rec Worksheet Print Enable

Checking the Med-Rec Worksheet Print Enable box as shown in Figure 4-20 will control whether the Print Med-Rec Worksheet option will be available or not in BEDD IN and the AMER ADMISSION option. If the box is checked, the print option will appear in BEDD IN and any values saved in the # Copies field and Default Printer field will be defaulted in once a patient is selected (see Figure 4-21). In this example the box was checked so in BEDD IN the Med-Rec will be available for printing. For a new visit, the option will default to print while for an existing visit, the option will display but will not be checked to print.

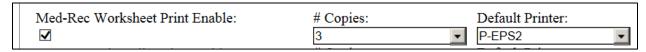


Figure 4-20: Med-Rec Worksheet Print Enable Default Settings



Figure 4-21: Med-Rec Worksheet Print Enable settings in BEDD IN display

Concerning the AMER ADMISSION option, if the box is checked, the user will be prompted to print a Med-Rec Worksheet as part of the AMER ADMISSION option. See Figure 4-22 for an example of this option.

Select printer for PATIENT MEDICATION WORKSHEET
DEVICE: HOME// 0;80;9999 Virtual
PRINTED ON 10/10/2016 14-18 PAGE-1 ""ALERT"" PATIENT COPY "" PATIENT COPY "" ALERT ""
2013 DEMO HOSPITAL
PATIENT MEDICATION RECONCILATION PATIENT APPOINTMENT: 1/01/01/02/15 14:18 LOCATION: EMERGENCY MEDICINE
PATIENT NAME: 84CA,ANGEL J SEX: MALE CHART #: 143390 DOB: 08/05/1959
ALLERGIES: No Allergy Assessment
No Medications Found
I am unsure of any outside medications and/or over the counter medications and dosages. I will bring my medications on my next visit.
OUTSIDE MEDICATIONS Patient: Please list any outside medications not received at any 2013 DEMO HOSPITAL Pharmacy
OVER THE COUNTER MEDICATIONS
Patient: Please list any OVER the Counter Medications
NEW/CHANGE MEDICATIONS
Enter RETURN to continue or '^' to exit:
ER admission data collection is now complete. Thank you.

Figure 4-22:AMER ADMISSION excerpt for Med Rec Worksheet print

4.3.2.4 BEDD Routing Slip Print Enable

Checking the BEDD Routing Slip Print Enable box as shown in Figure 4-23 will control whether the Print BEDD Routing Slip option will be available or not in BEDD IN and the AMER ADMISSION option. If the box is checked, the print option will appear in BEDD IN and any values saved in the # Copies field and Default Printer field will be defaulted in once a patient is selected (see Figure 4-24). In this example the box was checked so in BEDD IN the Print BEDD Routing Slip option will be available for printing. For a new visit, the option will default to print while for an existing visit, the option will display but will not be checked to print.

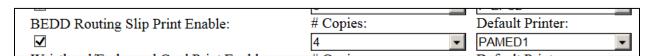


Figure 4-23: BEDD Routing Slip Print Enable Default Settings



Figure 4-24: Print BEDD Routing Slip Enable settings in BEDD IN display

Concerning the AMER ADMISSION option, if the box is checked, the user will be prompted to print a BEDD Routing Slip as part of the AMER ADMISSION option. See Figure 4-25 for an example of this option.

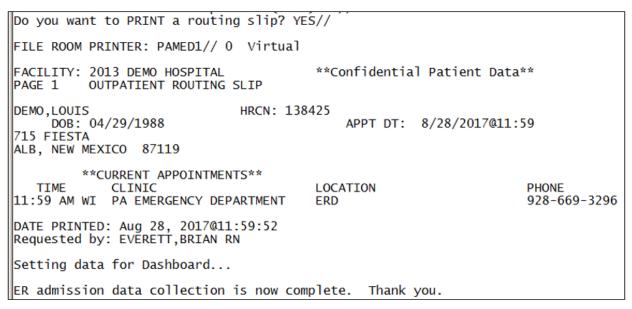


Figure 4-25: AMER ADMISSION excerpt for Print BEDD Routing Slip

4.3.2.5 Wristband/Embossed Card Print Enable

Checking the Wristband/Embossed Card Print Enable box as shown in Figure 4-26 will control whether the Print Embossed Card option will be available or not in BEDD IN and the AMER ADMISSION option. If the box is checked, the print option will appear in BEDD IN and any values saved in the # Copies field and Default Printer field will be defaulted in once a patient is selected (see Figure 4-27). In this example the box was checked so in BEDD IN the Print Embossed Card option will be available for printing. For a new visit, the option will default to print while for an existing visit, the option will display but will not be checked to print.

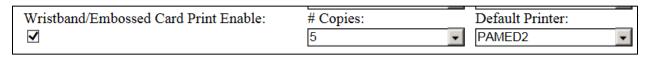


Figure 4-26: Wristband/Embossed Card Print Enable Default Settings



Figure 4-27: Print Embossed Card in BEDD IN display

Concerning the AMER ADMISSION option, if the box is checked, the user will be prompted to print an Embossed Card as part of the AMER ADMISSION option. See Figure 4-28 for an example of this option.

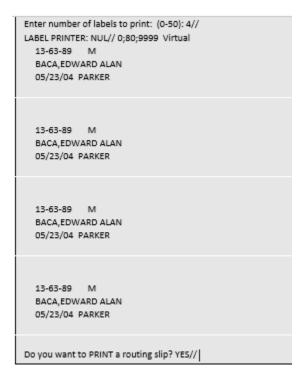


Figure 4-28: AMER ADMISSION excerpt for Wristband/Embossed card printing

4.3.3 User Specific Preferences

4.3.3.1 User Name

Select the desired user to changes preferences for.

4.3.3.2 Patient Name Format Display

Setting that determines how patient name is displayed in dashboard. Four options are available:

- 1. Last Name, First Name
- 2. Last Name, First Initial
- 3. Last Initial, First Initial
- 4. Last Three (characters), First Two (characters)

4.3.3.3 Hide DOB

Hide the DOB column in the dashboard under the Check-In, Triaged, Room Management and Pending Documentation sections.

4.3.3.4 Hide (Chief) Complaint

Hide the Chief Complaint column in the dashboard under the Triaged, Room Management and Pending Documentation sections.

4.3.3.5 Hide Gender

Hide the Gender information, displayed in the Patient column, in the dashboard under the Check-In, Triaged, Room Management and Pending Documentation sections.

4.3.4 Whiteboard Display Settings

The Whiteboard Display Settings can be accessed by clicking on the 'Whiteboard Display' entry in the table at the top of the setup screen. All users with the BEDDZMGR security key can view the Whiteboard settings. However, only users holding the BEDDZWHITEBOARD security key are able to change those settings. The Whiteboard settings appears as shown in Figure 4-29.

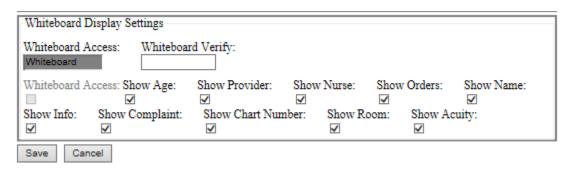


Figure 4-29: Whiteboard Display Settings

4.3.4.1 Whiteboard Access

The standard Whiteboard Access Code value will appear here. The value cannot be changed.

4.3.4.2 Whiteboard Verify

The Verify Code to be used to login to the Dashboard in Whiteboard mode. On initial installation, this field is set to null. A code can be added (or changed) as desired.

4.3.4.3 Whiteboard Access (Checkbox)

Not implemented for Patch 1.

4.3.4.4 Show Age

Show the Age information, displayed in the Patient column, in the Whiteboard under the Check-In, Triaged, Room Management and Pending Documentation sections.

4.3.4.5 Show Provider

Show the Provider column in the dashboard under the Triaged, Room Management and Pending Documentation sections.

4.3.4.6 Show Nurse

Show the Nurse column, in the dashboard under the Triaged, Room Management and Pending Documentation sections.

4.3.4.7 Show Orders

Show the Order Activity column, in the dashboard under the Triaged, Room Management and Pending Documentation sections.

4.3.4.8 Show Name

Show the Patient column, in the dashboard under the Check-In, Triaged, Room Management and Pending Documentation sections.

4.3.4.9 Show Info

Show the Info column, in the dashboard under the Check-In, Triaged, Room Management and Pending Documentation sections.

4.3.4.10 Show (Chief) Complaint

Show the Chief Complain column, in the dashboard under the Triaged, Room Management and Pending Documentation sections.

4.3.4.11 Show Chart Number

Show the Chart column, in the dashboard under the Check-In, Triaged, Room Management and Pending Documentation sections.

4.3.4.12 Show Room

Show the Nurse column, in the dashboard under the Room Management sections.

4.3.4.13 Show Acuity

Show the Initial Acuity in column in the Triage, Room Management, and Pending Documentation sections on the Whiteboard.

4.3.5 Reg column on main display

The **Reg** column on the main display is used to indicate whether the patient's registration file was updated on the current date. For example the user would have accessed RPMS Patient Registration (AG) and edited one of the patient's fields. If an edit was not made, it will display **No** with a yellow background as indicated in Figure 4-30.



Figure 4-30: Reg Column

If a change is made, as in the case of modifying a street address, it will display a **Yes** with a white background as indicated in Figure 4-31.



Figure 4-31: Updated Registration

Finally, a check is performed on the patient's AG Tribe of Membership field (AG page 2). If the tribe is **NON-INDIAN BENEFICIARY**, **NoBens** is attached as a suffix to the value in the Reg column as indicated in Figure 4-32.

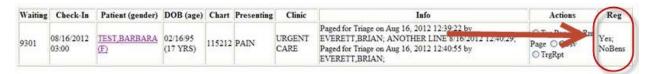


Figure 4-32: Non-Indian Beneficiary Indicator

Appendix A: Rules of Behavior

The Resource and Patient Management (RPMS) system is a United States Department of Health and Human Services (HHS), Indian Health Service (IHS) information system that is *FOR OFFICIAL USE ONLY*. The RPMS system is subject to monitoring; therefore, no expectation of privacy shall be assumed. Individuals found performing unauthorized activities are subject to disciplinary action including criminal prosecution.

All users (Contractors and IHS Employees) of RPMS will be provided a copy of the Rules of Behavior (RoB) and must acknowledge that they have received and read them prior to being granted access to a RPMS system, in accordance IHS policy.

- For a listing of general ROB for all users, see the most recent edition of *IHS General User Security Handbook* (SOP 06-11a).
- For a listing of system administrators/managers rules, see the most recent edition of the *IHS Technical and Managerial Handbook* (SOP 06-11b).

Both documents are available at this IHS Web site: http://security.ihs.gov/.

The ROB listed in the following sections are specific to RPMS.

A.1 All RPMS Users

In addition to these rules, each application may include additional RoBs that may be defined within the documentation of that application (e.g., Dental, Pharmacy).

A.1.1 Access

RPMS users shall

- Only use data for which you have been granted authorization.
- Only give information to personnel who have access authority and have a need to know.
- Always verify a caller's identification and job purpose with your supervisor or the entity provided as employer before providing any type of information system access, sensitive information, or nonpublic agency information.
- Be aware that personal use of information resources is authorized on a limited basis within the provisions *Indian Health Manual* Part 8, "Information Resources Management," Chapter 6, "Limited Personal Use of Information Technology Resources."

RPMS users shall not

- Retrieve information for someone who does not have authority to access the information.
- Access, research, or change any user account, file, directory, table, or record not required to perform their *official* duties.
- Store sensitive files on a PC hard drive, or portable devices or media, if access to the PC or files cannot be physically or technically limited.
- Exceed their authorized access limits in RPMS by changing information or searching databases beyond the responsibilities of their jobs or by divulging information to anyone not authorized to know that information.

A.1.2 Information Accessibility

RPMS shall restrict access to information based on the type and identity of the user. However, regardless of the type of user, access shall be restricted to the minimum level necessary to perform the job.

RPMS users shall

- Access only those documents they created and those other documents to which
 they have a valid need-to-know and to which they have specifically granted
 access through an RPMS application based on their menus (job roles), keys, and
 FileMan access codes. Some users may be afforded additional privileges based on
 the functions they perform, such as system administrator or application
 administrator.
- Acquire a written preauthorization in accordance with IHS policies and procedures prior to interconnection to or transferring data from RPMS.

A.1.3 Accountability

RPMS users shall

- Behave in an ethical, technically proficient, informed, and trustworthy manner.
- Log out of the system whenever they leave the vicinity of their personal computers (PCs).
- Be alert to threats and vulnerabilities in the security of the system.
- Report all security incidents to their local Information System Security Officer (ISSO)
- Differentiate tasks and functions to ensure that no one person has sole access to or control over important resources.
- Protect all sensitive data entrusted to them as part of their government employment.

• Abide by all Department and Agency policies and procedures and guidelines related to ethics, conduct, behavior, and information technology (IT) information processes.

A.1.4 Confidentiality

RPMS users shall

- Be aware of the sensitivity of electronic and hard copy information, and protect it accordingly.
- Store hard copy reports/storage media containing confidential information in a locked room or cabinet.
- Erase sensitive data on storage media prior to reusing or disposing of the media.
- Protect all RPMS terminals from public viewing at all times.
- Abide by all Health Insurance Portability and Accountability Act (HIPAA) regulations to ensure patient confidentiality.

RPMS users shall not

- Allow confidential information to remain on the PC screen when someone who is not authorized to that data is in the vicinity.
- Store sensitive files on a portable device or media without encrypting.

A.1.5 Integrity

RPMS users shall

- Protect their systems against viruses and similar malicious programs.
- Observe all software license agreements.
- Follow industry standard procedures for maintaining and managing RPMS hardware, operating system software, application software, and/or database software and database tables.
- Comply with all copyright regulations and license agreements associated with RPMS software.

RPMS users shall not

- Violate federal copyright laws.
- Install or use unauthorized software within the system libraries or folders.
- Use freeware, shareware, or public domain software on/with the system without their manager's written permission and without scanning it for viruses first.

A.1.6 System Logon

RPMS users shall

- Have a unique User Identification/Account name and password.
- Be granted access based on authenticating the account name and password entered.
- Be locked out of an account after five successive failed login attempts within a specified time period (e.g., one hour).

A.1.7 Passwords

RPMS users shall

- Change passwords a minimum of every 90 days.
- Create passwords with a minimum of eight characters.
- If the system allows, use a combination of alpha-numeric characters for passwords, with at least one uppercase letter, one lower case letter, and one number. It is recommended, if possible, that a special character also be used in the password.
- Change vendor-supplied passwords immediately.
- Protect passwords by committing them to memory or store them in a safe place (do not store passwords in login scripts or batch files).
- Change passwords immediately if password has been seen, guessed, or otherwise compromised, and report the compromise or suspected compromise to their ISSO.
- Keep user identifications (IDs) and passwords confidential.

RPMS users shall not

- Use common words found in any dictionary as a password.
- Use obvious readable passwords or passwords that incorporate personal data elements (e.g., user's name, date of birth, address, telephone number, or social security number; names of children or spouses; favorite band, sports team, or automobile; or other personal attributes).
- Share passwords/IDs with anyone or accept the use of another's password/ID, even if offered.
- Reuse passwords. A new password must contain no more than five characters per eight characters from the previous password.
- Post passwords.
- Keep a password list in an obvious place, such as under keyboards, in desk drawers, or in any other location where it might be disclosed.

• Give a password out over the phone.

A.1.8 Backups

RPMS users shall

- Plan for contingencies such as physical disasters, loss of processing, and disclosure of information by preparing alternate work strategies and system recovery mechanisms.
- Make backups of systems and files on a regular, defined basis.
- If possible, store backups away from the system in a secure environment.

A.1.9 Reporting

RPMS users shall

- Contact and inform their ISSO that they have identified an IT security incident and begin the reporting process by providing an IT Incident Reporting Form regarding this incident.
- Report security incidents as detailed in the *IHS Incident Handling Guide* (SOP 05-03).

RPMS users shall not

Assume that someone else has already reported an incident. The risk of an
incident going unreported far outweighs the possibility that an incident gets
reported more than once.

A.1.10 Session Timeouts

RPMS system implements system-based timeouts that back users out of a prompt after no more than 5 minutes of inactivity.

RPMS users shall

• Utilize a screen saver with password protection set to suspend operations at no greater than 10 minutes of inactivity. This will prevent inappropriate access and viewing of any material displayed on the screen after some period of inactivity.

A.1.11 Hardware

RPMS users shall

- Avoid placing system equipment near obvious environmental hazards (e.g., water pipes).
- Keep an inventory of all system equipment.

• Keep records of maintenance/repairs performed on system equipment.

RPMS users shall not

• Eat or drink near system equipment.

A.1.12 Awareness

RPMS users shall

- Participate in organization-wide security training as required.
- Read and adhere to security information pertaining to system hardware and software.
- Take the annual information security awareness.
- Read all applicable RPMS manuals for the applications used in their jobs.

A.1.13 Remote Access

Each subscriber organization establishes its own policies for determining which employees may work at home or in other remote workplace locations. Any remote work arrangement should include policies that

- Are in writing.
- Provide authentication of the remote user through the use of ID and password or other acceptable technical means.
- Outline the work requirements and the security safeguards and procedures the employee is expected to follow.
- Ensure adequate storage of files, removal, and nonrecovery of temporary files created in processing sensitive data, virus protection, and intrusion detection, and provide physical security for government equipment and sensitive data.
- Establish mechanisms to back up data created and/or stored at alternate work locations.

Remote RPMS users shall

Remotely access RPMS through a virtual private network (VPN) whenever
possible. Use of direct dial in access must be justified and approved in writing and
its use secured in accordance with industry best practices or government
procedures.

Remote RPMS users shall not

 Disable any encryption established for network, internet, and Web browser communications.

A.2 RPMS Developers

RPMS developers shall

- Always be mindful of protecting the confidentiality, availability, and integrity of RPMS when writing or revising code.
- Always follow the IHS RPMS Programming Standards and Conventions (SAC) when developing for RPMS.
- Only access information or code within the namespaces for which they have been assigned as part of their duties.
- Remember that all RPMS code is the property of the U.S. Government, not the developer.
- Not access live production systems without obtaining appropriate written access, and shall only retain that access for the shortest period possible to accomplish the task that requires the access.
- Observe separation of duties policies and procedures to the fullest extent possible.
- Document or comment all changes to any RPMS software at the time the change or update is made. Documentation shall include the programmer's initials, date of change, and reason for the change.
- Use checksums or other integrity mechanism when releasing their certified applications to assure the integrity of the routines within their RPMS applications.
- Follow industry best standards for systems they are assigned to develop or maintain, and abide by all Department and Agency policies and procedures.
- Document and implement security processes whenever available.

RPMS developers shall not

- Write any code that adversely impacts RPMS, such as backdoor access, "Easter eggs," time bombs, or any other malicious code or make inappropriate comments within the code, manuals, or help frames.
- Grant any user or system administrator access to RPMS unless proper documentation is provided.
- Release any sensitive agency or patient information.

A.3 Privileged Users

Personnel who have significant access to processes and data in RPMS, such as, system security administrators, systems administrators, and database administrators, have added responsibilities to ensure the secure operation of RPMS.

Privileged RPMS users shall

- Verify that any user requesting access to any RPMS system has completed the appropriate access request forms.
- Ensure that government personnel and contractor personnel understand and comply with license requirements. End users, supervisors, and functional managers are ultimately responsible for this compliance.
- Advise the system owner on matters concerning information technology security.
- Assist the system owner in developing security plans, risk assessments, and supporting documentation for the certification and accreditation process.
- Ensure that any changes to RPMS that affect contingency and disaster recovery
 plans are conveyed to the person responsible for maintaining continuity of
 operations plans.
- Ensure that adequate physical and administrative safeguards are operational within their areas of responsibility and that access to information and data is restricted to authorized personnel on a need-to-know basis.
- Verify that users have received appropriate security training before allowing access to RPMS.
- Implement applicable security access procedures and mechanisms, incorporate appropriate levels of system auditing, and review audit logs.
- Document and investigate known or suspected security incidents or violations and report them to the ISSO, Chief Information Security Officer (CISO), and systems owner.
- Protect the supervisor, superuser, or system administrator passwords.
- Avoid instances where the same individual has responsibility for several functions (i.e., transaction entry and transaction approval).
- Watch for unscheduled, unusual, and unauthorized programs.
- Help train system users on the appropriate use and security of the system.
- Establish protective controls to ensure the accountability, integrity, confidentiality, and availability of the system.
- Replace passwords when a compromise is suspected. Delete user accounts as quickly as possible from the time that the user is no longer authorized system. Passwords forgotten by their owner should be replaced, not reissued.
- Terminate user accounts when a user transfers or has been terminated. If the user has authority to grant authorizations to others, review these other authorizations. Retrieve any devices used to gain access to the system or equipment. Cancel logon IDs and passwords, and delete or reassign related active and backup files.

- Use a suspend program to prevent an unauthorized user from logging on with the current user's ID if the system is left on and unattended.
- Verify the identity of the user when resetting passwords. This can be done either
 in person or having the user answer a question that can be compared to one in the
 administrator's database.
- Shall follow industry best standards for systems they are assigned to, and abide by all Department and Agency policies and procedures.

Privileged RPMS users shall not

- Access any files, records, systems, etc., that are not explicitly needed to perform their duties
- Grant any user or system administrator access to RPMS unless proper documentation is provided.
- Release any sensitive agency or patient information.

Glossary

Emergency Room System

Refers to the RPMS ERS application (in the AMER namespace). The EDD is integrated with the ERS application so information gets transferred back and forth between the two applications.

RPMS Patient Care Component

Refers to functions within RPMS as a clinical data repository, storing visit-related data about a patient

Acronym List

Acronym	Meaning
AG	Patient Registration
ED	Emergency Department
EDD	IHS Emergency Department Dashboard
EHR	Electronic Health Record
ERS	Emergency Room System
HHS	Health and Human Services
IHS	Indian Health Service
RPMS	Resource and Patient Management System

Contact Information

If you have any questions or comments regarding this distribution, please contact the OIT Help Desk (IHS).

Phone: (888) 830-7280 (toll free)

Web: http://www.ihs.gov/helpdesk/

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