

RESOURCE AND PATIENT MANAGEMENT SYSTEM

# IHS Emergency Department Dashboard

(BEDD)

**User Manual** 

Version 2.0 Patch 7 July 2023

Office of Information Technology Division of Information Technology

# **Table of Contents**

1.0	Introdu	uction	1
2.0	System Navigation		
	2.1	Viewing/Adjusting the Main Dashboard Display	2
	2.1.1	Hiding ED Sections	3
	2.1.2	Reg Column Description	4
	2.2	Admitting the Patient to the EDD	5
	2.2.1	Admit Patient via AMER	5
	2.2.2	Admit Patient via BEDD IN	5
	2.3	Triage Patient and Triage Actions	10
	2.4	Primary Nurse/Assign Patient to Room	18
	2.5	Update Additional ED Data	19
	2.5.1	Injury Information	19
	2.5.2	Visit Information	21
	2.5.3	Additional Notes	
	2.6	Remove Patient from Room	
	2.7	Discharge Patient	
	2.7.1	Regular Discharge	
	2.7.2	LWOBS/DNA Discharge	
	2.7.3	5 1 5	
	2.8	ED Dashboard Reporting	
	2.9	Whiteboard Display	
	2.9.1	Logging into the Whiteboard	41
3.0	Package Management		
	3.1	Package Access	
	3.2	Controlling Nurse/Provider Role Selection Choices	43
	3.2.1	AMERZNURSE Security Key	43
	3.2.2	AMERZPROVIDER Security Key	
	3.3	Automatic Check-out from PIMS upon BEDD/AMER Discharge	43
4.0	Package Operation		
	4.1	Access the EDD Manager Options	44
	4.1.1	Login to the EDD Application	
	4.1.2	Go to the Manager Screen	44
	4.2	Add ER Room Location	45
	4.3	Access Setup and Configure Options	46
	4.3.1	Screen Timeout (in Seconds)	48
	4.3.2	Operate Dashboard Stand Alone	
	4.3.3	Use More than One Clinic	
	4.3.4	Show Daily Summary on Dashboard	
	4.3.5	Show Used Rooms	
	4.3.6	Show Provider	49

4.3.7	Show Nurse	49		
4.3.8	Show Consult	49		
4.3.9	Use AutoNote	50		
4.3.10	Use Comm Board	50		
4.3.11	Print Triage Report on Save	50		
4.3.12	Switch EHR Patient on Edit	51		
4.3.13	Triage Provider			
4.3.14	BEDD Nurse Display Preferences	52		
4.3.15	Custom Column Display	53		
4.3.16	Printing Preferences	53		
4.3.17	User-Specific Preferences	58		
	Whiteboard Display Settings	59		
	Varnings			
4.4.1	Setting up a New Warning	61		
4.4.2	Editing an Existing Warning			
4.4.3	Disabling or Deleting a Warning	66		
Appendix A Rules of Behavior				
A.1 A	All RPMS Users	67		
A.1.1	Access	67		
A.1.2	Information Accessibility	68		
A.1.3	Accountability			
A.1.4	Confidentiality	69		
A.1.5	Integrity	69		
A.1.6	System Logon	70		
A.1.7	Passwords	70		
A.1.8	Backups	71		
A.1.9	Reporting			
A.1.10	Session Timeouts			
A.1.11	Hardware			
	Awareness			
	Remote Access			
	RPMS Developers			
A.3 F	Privileged Users	73		
Glossary		76		
Acronym List				
	Contact Information			

# **Preface**

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

# 1.0 Introduction

Emergency Department Dashboard (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, 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.

- 1. Viewing the main dashboard display.
- 2. Admit a patient via the **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).
- 3. Triage the patient, which moves the patient into the **Triaged** section of the dashboard.
- 4. Enter chief complaint information.
- 5. Assign the patient to a room.
- 6. Update various informational visit screens.
- 7. Update injury information.
- 8. Update general visit information.
- 9. Update emergency department (ED) consult information.
- 10. Update procedure information.
- 11. Update diagnosis information.
- 12. Remove from room.
- 13. Discharge.
- 14. Run dashboard reports.

## 2.1 Viewing/Adjusting the Main Dashboard Display

After logging into the ED Dashboard, the user is presented with a listing of all patients currently being tracked. Figure 2-1 shows a sample ED dashboard display.

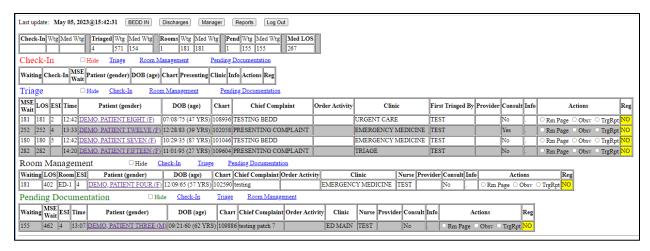


Figure 2-1: Main ED display

## 2.1.1 Hiding ED Sections

Users can customize their ED dashboard display by hiding sections they do not need to see. For example, someone overseeing Check-Ins may not need to see the patients in the Room Management or Pending Documentation areas. To hide a particular section during the user's current work session, click the appropriate **Hide** box as shown in Figure 2-2. Once the box has been checked that section will no longer appear. For example, in Figure 2-3, the Hide box in the Pending Documentation section has been checked.

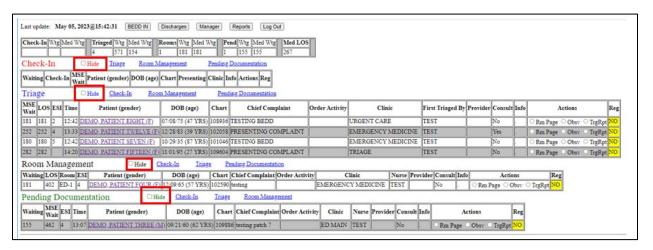


Figure 2-2: Hiding sections of the main dashboard

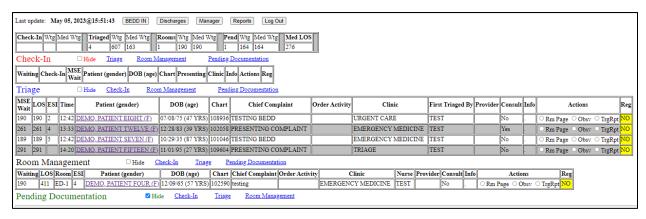


Figure 2-3: Hiding the Pending Documentation section

## 2.1.2 Reg Column Description

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 displays **No** with a yellow background as indicated in Figure 2-4.



Figure 2-4: Reg column

If a change is made, as in the case of modifying a street address, it displays a **Yes** with a white background as shown in Figure 2-5.



Figure 2-5: Updated registration

Finally, a check is performed on the patients 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 2-6.

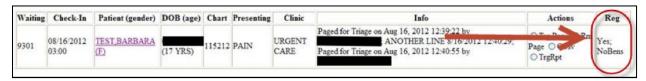


Figure 2-6: Non-Indian beneficiary indicator

## 2.2 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 **BEDD IN** option in the EDD. The following sections describe these steps in further detail.

#### 2.2.1 Admit Patient via AMER

In order to display 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 documented in the Emergency Room System (AMER) Version 3.0 Patch 13 User Manual.

## 2.2.2 Admit Patient via BEDD IN

A second method used to admit a patient to the EDD is the **BEDD IN** option.

Note: Unlike AMER, the short admittance process through the EDD BEDD IN button has limited functionality. For example, it does not display patient flags. With the release of BEDD v2.0 Patch 4 though, sites can now print wristbands directly from BEDD instead of having to print from the RPMS PPW option.

This new option is accessible from the main EDD display as shown in Figure 2-7.



Figure 2-7: BEDD IN button

Click the **BEDD IN** button on the main EDD window to display the **Admit Patient to Dashboard** screen as shown in Figure 2-8.

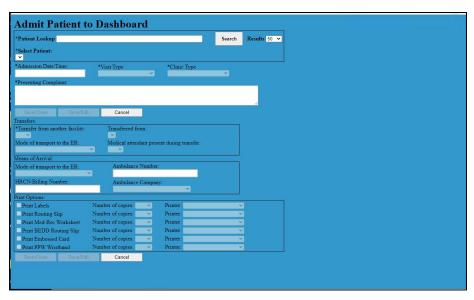


Figure 2-8: Sample Admit Patient to Dashboard display

Note that the choice of available print options at the bottom is controlled by the EDD setup definition for the site.

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 2-9. Patients can be located by entering their last name, first name, 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.

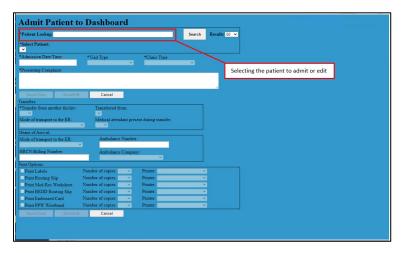


Figure 2-9: Selecting a patient to admit or edit

Once the lookup has been performed and the focus is on the **Select Patient** field, either click the drop-down button to display the list of results or press and hold the **Alt** key and then press the down arrow key to access the list of results using only the keyboard. The list of results displays as shown in Figure 2-10.

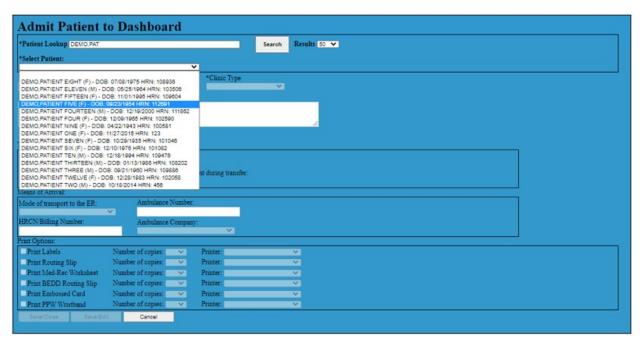


Figure 2-10: Patient Lookup search results

Use the down arrow and up arrow keys or the mouse to select a patient. If the patient is already admitted to the EDD, a screen (see Figure 2-11) displays asking whether the user would like to edit the existing patient visit. Select **OK** to load the information already entered for the visit and allow it to be changed.

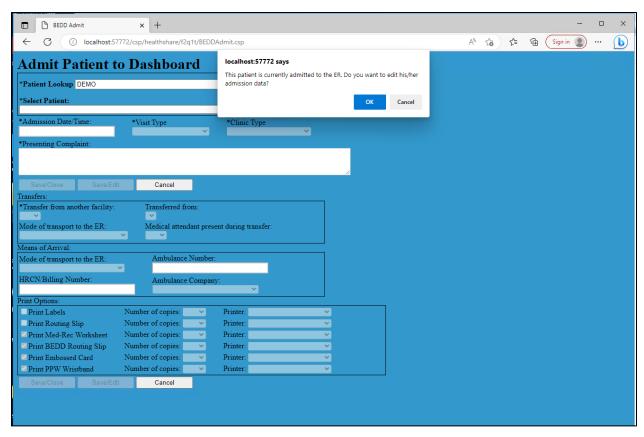


Figure 2-11: Existing ED visit message

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 4.3.16. See Figure 2-12 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.

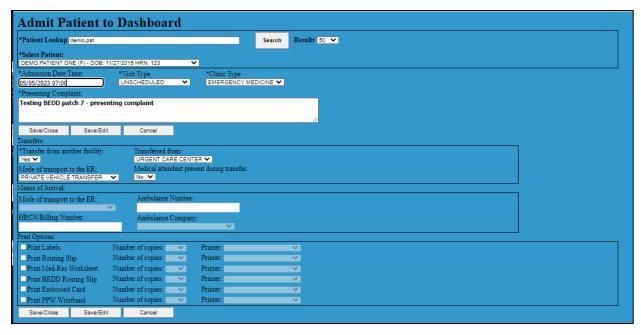


Figure 2-12: Default admission

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

- 1. 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.
- 2. 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.
- 3. If the Mode of transport to the ER field in the Means of Arrival section is enabled, and the user selects in the field that 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 users 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 unselected. To reprint, select the check 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.

## 2.3 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 patients name in the **Patient (gender)** column indicated in Figure 2-13, the user is taken to the **Patient Edit** screen as shown in Figure 2-14.

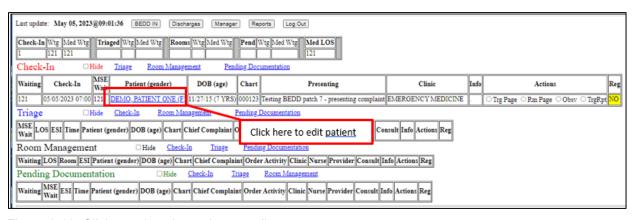


Figure 2-13: Click to select the patient to edit



Figure 2-14: Patient Edit screen

Triage information is entered into the Admission Information section of the Patient Edit screen which includes Presenting Complaint, Initial Acuity, Triage Nurse, Triage Nurse Date/Time, Triage Nurse, Clinic Type, Chief Complaint, the Triage Provider, and Triage Provider Date/Time fields (if enabled) as indicated in Figure 2-14.

To enter or edit **Chief Complaint** information, click the **Add/Edit Chief Complaint** button. You will be prompted to save any changes as shown in Figure 2-15. Press **OK** to continue the Edit Chief Complaint page, as shown in Figure 2-16.



Figure 2-15: Admission Information (Triage) and pop-up after clicking Add/Edit Chief Complaint button



Figure 2-16: Chief Complaint screen

The ED Chief Complaint page allows one or more chief complaints to be added to the patient visit. To add more than one chief complaint, enter the complaint in the complaint box and click **Save**. The saved complaint displays as shown in Figure 2-17.



Figure 2-17: Example of saved chief complaint

Existing chief complaints can be edited by clicking on the link for the complaint at the table at the top. To delete an existing complaint, click the appropriate complaint to remove in the table at the top and click the **Delete**. To return to the main edit page, click **Save/Close** if a complaint has been selected or click **Close**. Figure 2-18 shows how a saved chief complaint appears on the BEDD edit screen.

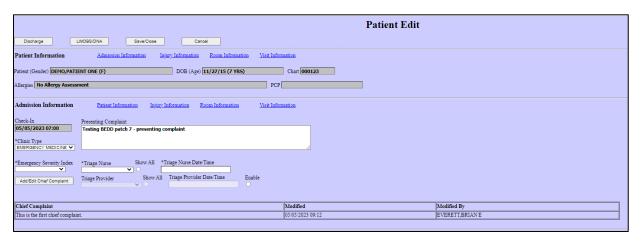


Figure 2-18: Example of edit screen showing an entered chief complaint

Enter additional triage information for the patient visit, including the emergency severity index, the triage nurse (and triage nurse date/time) and the triage provider (and triage provider date/time) if applicable as indicated in Figure 2-19.



Figure 2-19: Example of entering Emergency Severity Index, Triage Nurse Info and Triage Provider Info

A description of each field is as follows:

### **Clinic Type**

If your site has more than one clinic type defined (triage, urgent care, emergency medicine), then select the proper choice from the dropdown list.

### **Emergency Severity Index (ESI)**

Choose one of the choices from the dropdown list which best represents the patients ESI value. This is a required field for discharge.

### **Triage Nurse**

Select the name of the Triage Nurse which performed triage on the patient. The dropdown list will show any provider who has been assigned the AMERZNURSE security key. If you wish to select a user that is not in the list, check **Show All** to update a list with all providers. When a Triage Nurse has been selected, the current date/time will automatically be populated in the Triage Nurse Date/Time field. If more than one Triage Nurse was present during triage, they can be entered by selecting their name from the dropdown list. If a Triage Nurse was already on file for the patient visit, a message similar to Figure 2-20 displays. Press **OK** to enter the new triage nurse.



Figure 2-20: Adding an additional Triage Nurse to a visit

When a second Triage Nurse has been selected, the Triage Nurse Date/Time field will be populated with the current date/time and displays as shown in Figure 2-21.



Figure 2-21: Updated Triage Nurse Date/Time field after adding another Triage Nurse

In addition, the Provider History table at the bottom of the edit page will be updated to contain the original triage nurse information as shown in Figure 2-22.

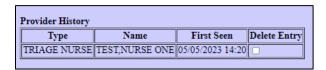


Figure 2-22: Provider History table after a second Triage Nurse was added to the visit

To remove an existing Triage Nurse from the Provider History, check the **Delete Entry** box next to the entry to remove. A confirmation message will prompt the user to confirm whether they want to delete the entry or not (Figure 2-23). Clicking **OK** will remove the Triage Nurse from the patient visit.



Figure 2-23: Delete confirmation message

#### **Triage Provider**

Depending on the Triage Provider setting described in Section 4.3.13, the Triage Provider field might not be visible, or it might be visible but disabled. If the Triage Provider is visible but disabled, check the **Enable** box next to the Triage Provider Date/Time field to allow a Triage Provider to be entered.

To enter a Triage Provider, select the name of the Triage Provider which performed triage on the patient. The dropdown list will show any provider who has been assigned the AMERZPROVIDER security key. If you wish to select a user that is not in the list, check the **Show All** box and the list will be updated with all providers.

When a Triage Provider has been selected, the current date/time will automatically be populated in the Triage Nurse Date/Time field. In addition, if a Medical Screening Exam Time (MSET) has not yet been populated for the patient visit, the MSET will also be set as the current date/time while the ED Provider field will be populated with the Triage Provider and the current date/time.

If more than one Triage Provider was present during triage, they can be entered by selecting their name from the dropdown list. If a Triage Provider was already on file for the patient visit, a message similar to Figure 2-24 displays. Press **OK** to enter the new triage nurse.



Figure 2-24: Adding an additional Triage Provider to a visit

When a second Triage Provider has been selected, the Triage Provider Date/Time field will be populated with the current date/time and displays as shown in Figure 2-25.



Figure 2-25: Updated Triage Provider Date/Time field after adding another Triage Provider

In addition, the Provider History table at the bottom of the edit page will be updated to contain the original Triage Provider information as shown in Figure 2-22.

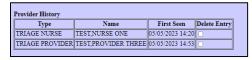


Figure 2-26: Provider History table after a second Triage Nurse was added to the visit

To remove an existing Triage Provider from the Provider History, check the **Delete Entry** box next to the entry to remove. A confirmation message will prompt the user to confirm whether they want to delete the entry or not (Figure 2-27 and Figure 2-23). Clicking **OK** will remove the Triage Nurse from the patient visit.



Figure 2-27: Delete confirmation message

To complete the Triage process, click the **Save/Close** button. The patient will then be moved to the Triaged section of the EDD as indicated in Figure 2-28.



Figure 2-28: Patient moved to Triaged section

#### **Using Auto Note Actions**

If the Auto Note box is checked in the setup definition (as documented in Section 4.3.9), 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 2-29.

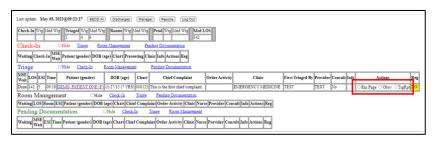


Figure 2-29: Auto Note Actions

Checking the various actions will auto-populate the notes section in the Info column. See Figure 2-30 and Figure 2-31 for the results of checking the **Rm Page** action.

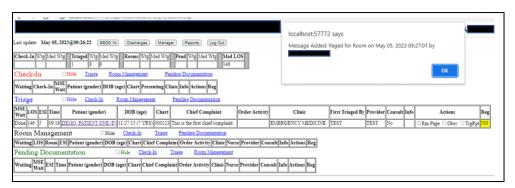


Figure 2-30: A pop-up displays after the user clicks the Rm Page button confirming added message

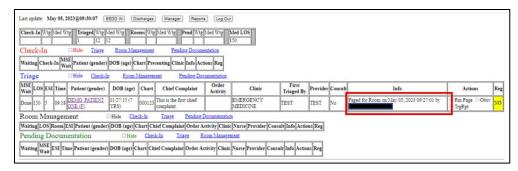


Figure 2-31: Room Page note displays in the Info section

Checking the **Obsv** button will post a note stating that the patient was observed as shown in Figure 2-32. The action will result in an entry getting placed in the **Info** box as shown in Figure 2-33.

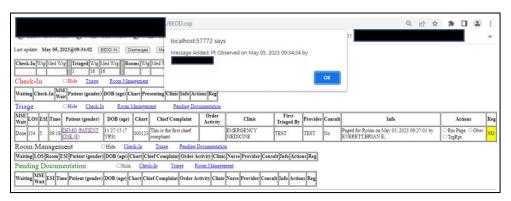


Figure 2-32: Message shown when Obsv button is clicked

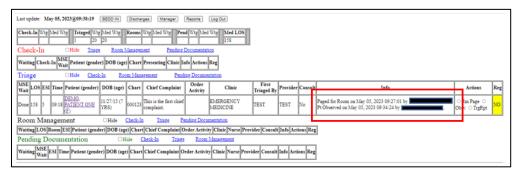


Figure 2-33: Info box after clicking the Obsv button

Selecting **TrgRpt** displays a triage report for the patient as indicated in Figure 2-34. Once the report is displayed, click the **Return to ED Tracking Board** link on the upper left of the triage report.

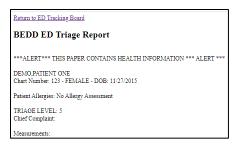


Figure 2-34: Sample Triage Report

If the user checks the **Rm Page** or **Obsv** action, the **General Information/Notes** section found on the patient edit page will also be populated with the actions taken. See Figure 2-35 for a sample display.



Figure 2-35: Actions recorded in the General Information/Notes section

## 2.4 Primary Nurse/Assign Patient to Room

To assign a Primary Nurse to the patient visit, on the Patient Edit page, in the Room Information section, select a **Primary Nurse** from the dropdown list. The list will be composed of all providers that hold the AMERZNURSE security key. If you wish to select a primary nurse that is not in the dropdown list, check the **Show All** button next to the field and a list of all providers will be generated.

Once a primary nurse has been entered in the Primary Nurse field, the Primary Nurse Date/Time field will automatically be populated with the current date/time. The time can be changed if necessary. Like the Triage Nurse/Provider fields, more than one Primary Nurse can be entered. Please follow the steps described for the Triage Nurse/Provider to add, edit, or remove additional Primary Nurses.

To assign a patient to a room, go to the **Patient Edit** page by clicking on the patients name on the dashboard and enter the room assignment in the Room Information section, then press the **Save/Close** button as indicated in Figure 2-36. The user is then returned to the main screen.



Figure 2-36: Assign patient to a room and assigning primary nurse information

The patient now displays in the **Room Management** section of the EDD as indicated in Figure 2-37.



Figure 2-37: Patient moved to Room Management section

## 2.5 Update Additional ED Data

Various 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 patients name anywhere on the EDDs 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 to the user as they move between sections and add data to the various injury, general visit, consult, and procedure and diagnosis sections.

## 2.5.1 Injury Information

Indicate that the visit was caused by an injury by checking the **Yes** field in the **Injury Information** section of the **Patient Edit** screen and clicking the **Add Injury Information** button (Figure 2-38). A pop-up will indicate that changes will be saved when the user clicks **OK** to continue or **Cancel**. Click **OK** to display the **Injury Worksheet** screen (Figure 2-39).



Figure 2-38: Injury Information section of Patient Edit screen

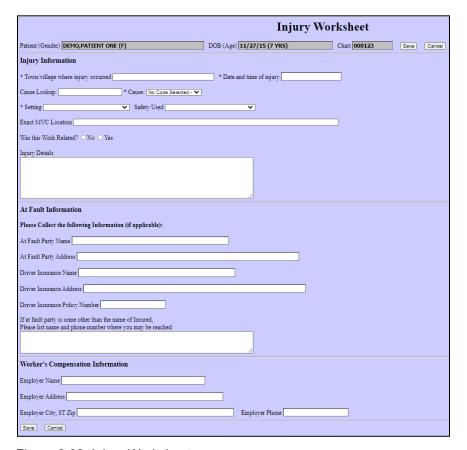


Figure 2-39: Injury Worksheet screen

Required data is indicated by fields identified with an asterisk (\*), which include the following:

- 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 press the tab key once. This will initiate an ICD10 lookup. Results will be returned in the Cause box. Select the appropriate ICD10 code from the list of results.
- **Setting**: The setting in which the injury occurred. This is set of pre-populated choices.

#### 2.5.2 Visit Information

General visit information is entered in the Visit Information section of the Patient Edit screen (Figure 2-40).



Figure 2-40: Visit Information section of the Patient Edit screen

#### 2.5.2.1 Visit Information Section Fields

The Visit Information Section of the Edit page allows the user to enter information such as the Medical Screening Exam Time, the ED Provider (and ED Provider Date/time), the Decision to Admit Time, ED Consults, Procedures, Visit Diagnosis, and whether a Code Blue occurred during the visit.

#### Medical Screening Exam Time

This field should be populated with the date/time that the patient was first seen by a provider. Populating this field will automatically populate the ED Provider Date/Time field if the ED Provider column is blank

#### **ED Provider**

This field should be populated with the ED Provider for the visit. If the patient sees more than one ED Provider, an additional provider (and ED Provider Date/Time field) can be added similar to how additional Triage Nurse/Provider and Primary Nurses are added.

#### **Decision to Admit Time**

This field should be populated with the date/time that the decision was made to admit the patient.

#### 2.5.2.2 ED Consults

By clicking on the **ED Consult Information** button in Figure 2-40, the user can enter consult information in the **ED Consult Worksheet** as indicated in Figure 2-41. The user can enter multiple consults.



Figure 2-41: ED Consult Worksheet screen

#### 2.5.2.3 ED Procedures

By clicking on the **Procedure Information** button in Figure 2-40, the user can enter procedure information in the **ED Procedure Worksheet** as seen in Figure 2-42. Multiple procedures can be entered.

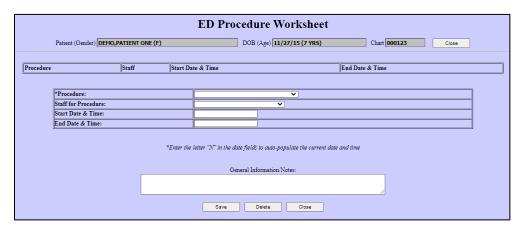


Figure 2-42: Procedure information

## 2.5.2.4 Diagnosis

By clicking on the **Diagnosis Information** button in Figure 2-40, the user can enter diagnosis information in the ED Diagnosis Worksheet as shown in Figure 2-43. The user can enter multiple diagnoses.

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.

Patient (Gender) DEMO, PATIENT ONE (F)

DOB (Age) 11/27/15 (7 YRS)

Chart 000123

Close

Code Diagnosis Diagnosis Narrative

Primary Diagnosis [Injury Related]

Search for Diagnosis:

222 000

\*Code:

Diagnosis:

1222 000

\*Diagnosis:

Uncoded diagnosis:

Diagnosis:

Pinagnosis Narrative:

\*Primary Diagnosis:

Injury Related:

No V

Save/Close Save Delete Close

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

Figure 2-43: ED Diagnosis Worksheet screen

#### 2.5.3 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 2-44) and clicking the **Save/Close** button.



Figure 2-44: General Information/Notes section of the Patient Edit screen

## 2.6 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 press the **Save/Close** button as shown in Figure 2-45. The patient will then appear in the Pending Documentation section of the dashboard as indicated in Figure 2-46.

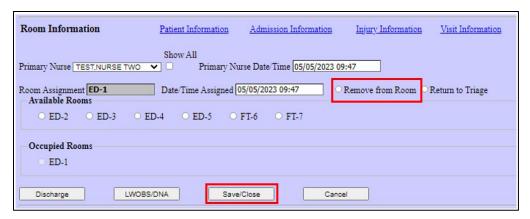


Figure 2-45: Removing from Room and Save button

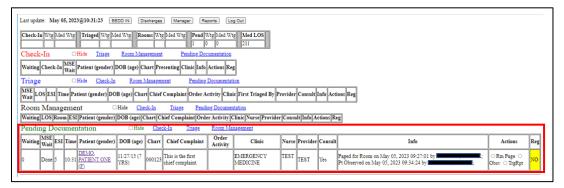


Figure 2-46: Patient moved to Pending Documentation section

## 2.5.1 Return Patient to Triage from Room

To return a patient, who is currently in a room, back to **Triage**, select the radio button under **Room Information** located on the **Patient Edit** screen then press **Save/Close** as seen in Figure 2-47. The patient will return to the **Triage** section on the **ED Dashboard**.

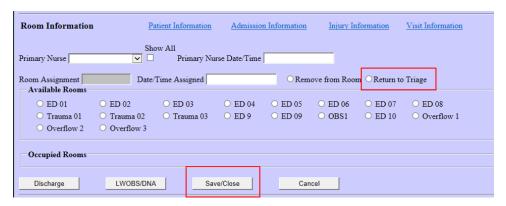


Figure 2-47: Patient moved from room back to triage

## 2.7 Discharge Patient

There are two ways to discharge a patient from EDD, through the standard discharge functionality and through the new **Left Without Being Seen/Did Not Answer** (LWOBS/DNA) discharge functionality. The LWOBS/DNA allows users to discharge patients where required patient information is not known, such as those who may have left without being seen or left against medical advice. Both discharges are described below.

## 2.7.1 Regular Discharge

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 2-48). If no additional data is needed, a confirmation pop-up message displays: Continue to Discharge (Any changes will be saved)? (see Figure 2-49). Then the patient discharge screen displays as shown in Figure 2-50.

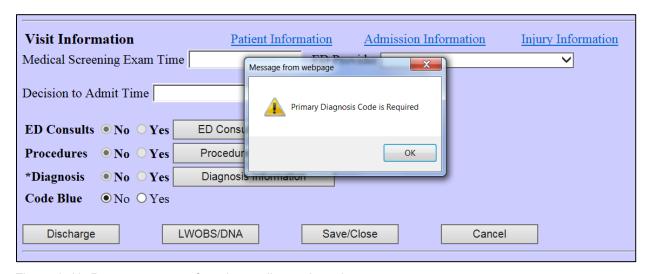


Figure 2-48: Pop-up message for primary diagnosis code

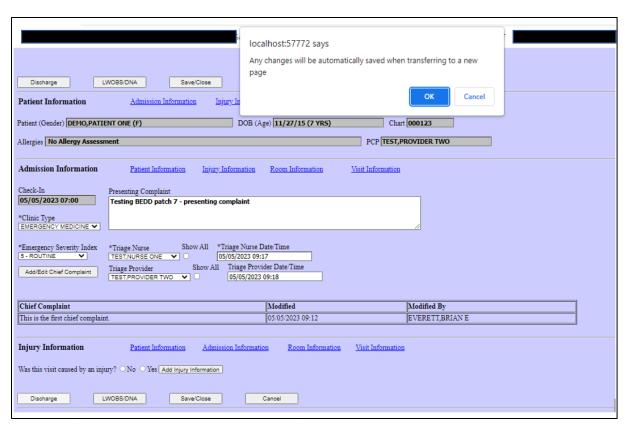


Figure 2-49: Changes will be automatically saved pop-up message



Figure 2-50: Patient Discharge screen

In order to discharge the patient, disposition information must be entered in the **Disposition Information** section in the **Discharge Patient** screen (Figure 2-51). Upon entering the information, click the **Complete Discharge** button to start the discharge process.

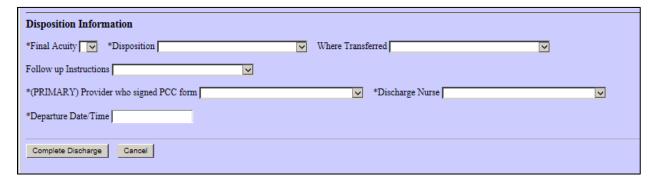


Figure 2-51: Disposition Information section of the Discharge page

The required discharge fields are:

- Final Acuity
- Disposition
- 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 2-52).

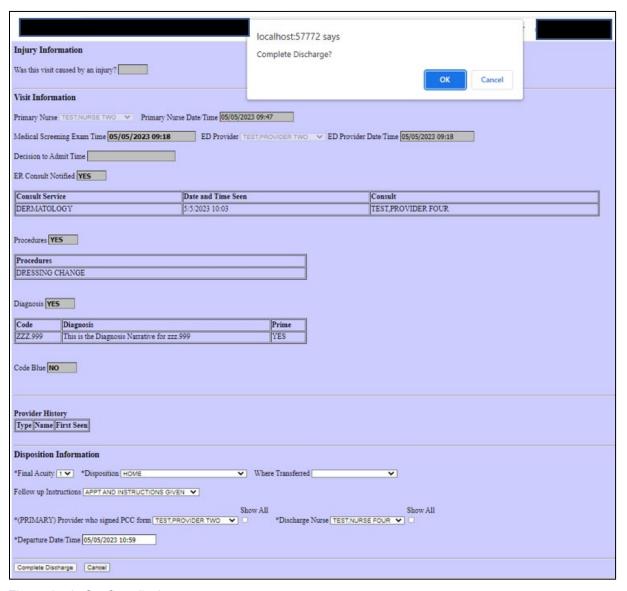


Figure 2-52: Confirm discharge

After clicking **OK**, the patient will be removed from EDD and AMER (Figure 2-53).

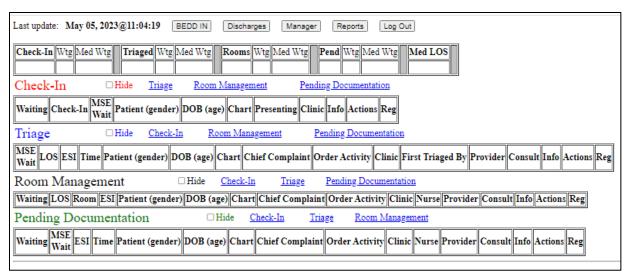


Figure 2-53: Patient removed from EDD and AMER

## 2.7.2 LWOBS/DNA Discharge

Patients who leave the ED without being seen or leave against medical advice can now be discharged from EDD using the new LWOBS/DNA functionality. On the **Patient Edit** screen, click the **LWOBS/DNA** button. The normal edit checks that get performed on a regular discharge will be bypassed, allowing the user to switch to the discharge screen. Upon clicking the **LWOBS/DNA** button, the screen shown in Figure 2-54 displays.

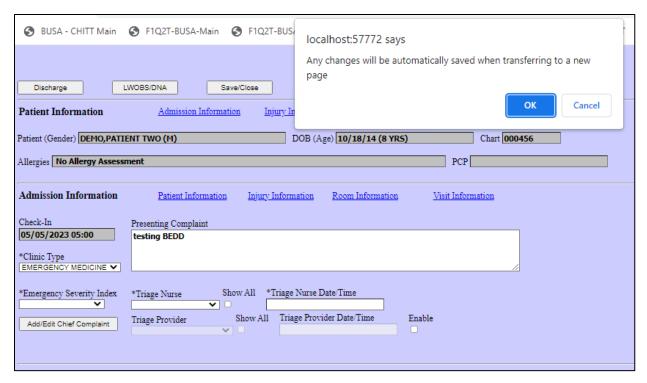


Figure 2-54: Selecting the LWOBS/DNA discharge button

Once the user clicks the **OK** button in the pop-up message, the patient discharge screen displays (Figure 2-55). This screen differs from the standard discharge screen as only the **Disposition** and **Departure Date/Time** fields are now required.

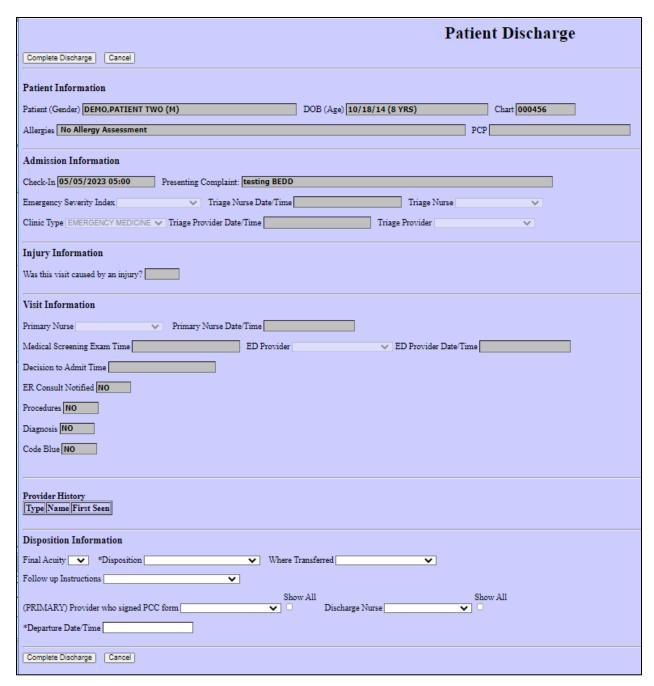


Figure 2-55: LWOBS/DNA Patient Discharge screen

The **Disposition** field also contains only those dispositions defined as being related to LWOBS/DNA (along with the REGISTERED IN ERROR disposition). This definition occurs in the AMER Facility Parameter setup option in the **Select LWOBS/DNA DISPOSITIONS** multiple entry. See Figure 2-56, which shows the LEFT WITHOUT BEING SEEN and AMA dispositions defined as LWOBS/DNA dispositions. Figure 2-57 shows the defined LWOBS/DNA dispositions (along with REGISTERED IN ERROR) in the discharge screen.

```
**********
                           Facility Setup Menu
                         Indian Health Service
                             Version 3.0
                 **********
                             2016 DEMO HOSPITAL
         Add/Edit ER CONSULTANT SERVICE list
  CNS
  LOC
         Add Local ER Facilities
  MGRP ER Alerts Mail Group Edit
  OPT ER Options Transportation-Disposition-Procedures
SET Facility Parameter setup
  FIX Run AMER Cleanup Utility
You have PENDING ALERTS
         Enter VA to jump to VIEW ALERTS option
Select Table and Parameter Setup <TEST ACCOUNT> Option: SET Facility Parameter
setup
Select ER PREFERENCES LOCATION: 2016 DEMO HOSPITAL
LOCATION: 2016 DEMO HOSPITAL//
DEFAULT HOSPITAL LOCATION: ED WALK-IN//
LABEL PRINTER NAME: PER//
QUEUE LABELS: YES//
CHART PRINTER NAME: PER//
SEND .9999 CODES TO PCC: YES//
DISABLE TRIAGE PROVIDER ENTRY: NO//
ENABLE AUTOMATIC CHECK-OUT: YES//
Select ER CLINIC: ED MAIN//
 ER CLINIC: ED MAIN//
 LINK TO HOSPITAL LOCATION: ED MAIN//
Select ER CLINIC:
DEFAULT ER CLINIC: EMERGENCY MEDICINE//
Select LWOBS/DNA DISPOSITIONS: LEFT WITHOUT BEING SEEN
        // ?
   Answer with LWOBS/DNA DISPOSITIONS
  Choose from:
  LEFT WITHOUT BEING SEEN
  AMA
  LWOBS
       You may enter a new LWOBS/DNA DISPOSITIONS, if you wish
       ONLY ALLOW DISPOSITION TYPE ENTRIES
 Answer with ER OPTIONS NAME
 Do you want the entire ER OPTIONS List?
```

Figure 2-56: AMER option to define LWOBS/DNA dispositions

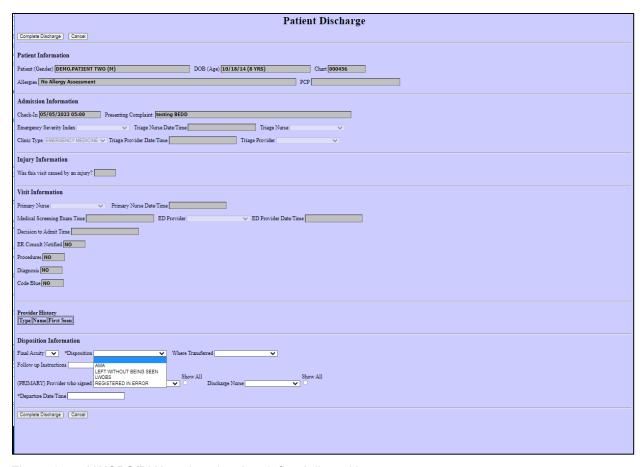


Figure 2-57: LWOBS/DNA option showing defined dispositions

Once the **Disposition** and **Departure Date/Time** fields (at minimum) have been entered, click the **Complete Discharge** button to complete the patient discharge. After clicking **OK** on the discharge confirmation pop up that then displays (see Figure 2-58), the patient will be discharged from the ED. Control will return to the main dashboard display and the patient will no longer display (see Figure 2-59).



Figure 2-58: Complete Discharge confirmation message

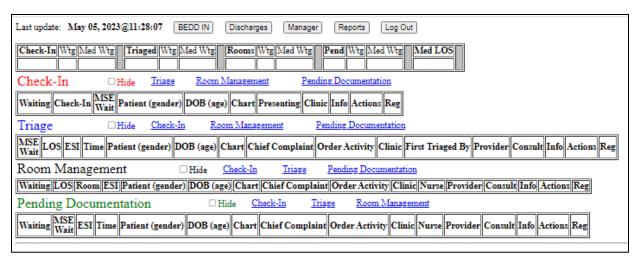


Figure 2-59: Main dashboard display showing the patient has been discharged

### 2.7.3 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 2-60) and the user is presented with the **Emergency Department DISCHARGES** screen as indicated in Figure 2-61.

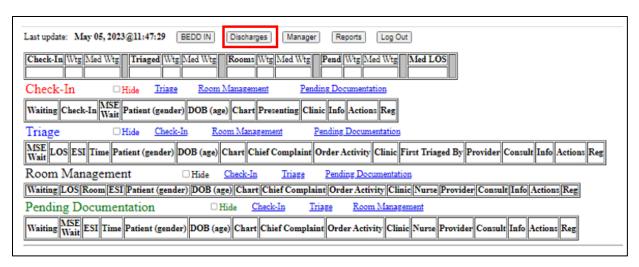


Figure 2-60: Discharges button

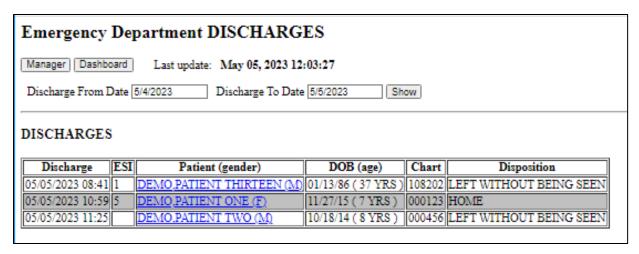


Figure 2-61: Emergency Department DISCHARGES screen

Enter the date range that you want to report on and click the **Show** button as indicated in Figure 2-62.

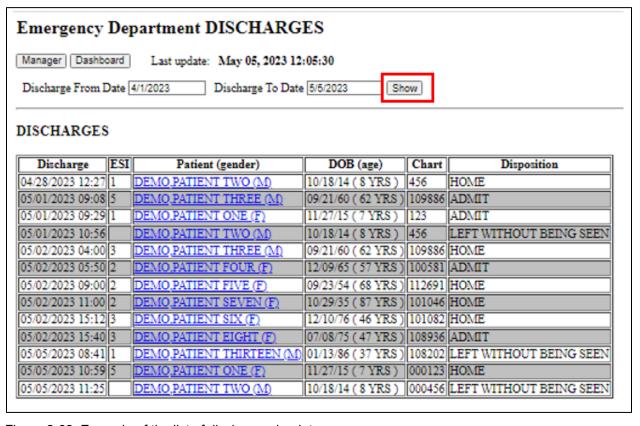


Figure 2-62: Example of the list of discharges by date range

Select a visit by clicking on the **patient's name**. This will bring up a discharge summary of the visit (Figure 2-63). Click the **browser back button** to return to the discharge listing.

Bax	Discharge Summary
Patient Information	
Patient (Gender) DEMO, PATIENT ONE (F) DOB (Age) 11/27/15 (7 YRS) Chart 000123	
Allergies No Allergy Assessment PCP TEST, PROVIDER TWO	
Admission Information	
Check-In 05/05/2023 07:00 Clinic EMERGENCY MEDICINE	
Presenting Complaint Testing BEDD patch 7 - presenting complaint	
Visit Type UNSCHEDULED Transport Mode PRIVATE VEHICLE TRANSFER Medical Attendant Present NO	
Emergency Severity Index 5 Triage Nurse Date Time 05/05/2023 09:17 Triage Nurse TEST, NURSE ONE	
Triage Provider Date Time 05/05/2023 09:18 Triage Provider TEST, PROVIDER TWO	
Room Information	
ER Room ED-1 ER Room Assigned 05/05/2023 09:47	
Injury Information	
Injury Related NO	
Occupation Related	
Visit Information	
Primary Nurse TEST, NURSE TWO Primary Nurse Time 05/05/2023 09:47	
Medical Screening Exam Time 05/05/2023 09:18 Decision to Admit Time	
ED Provider TEST, PROVIDER TWO ED Provider Date Time 05/05/2023 09:18	
ER Consult Notified YES	
Consult Service Date and Time Seen	Consult
DERMATOLOGY 05/05/2023 10:03	IEST, PROVIDER FOUR
Procedures  DRESSING CHANGE	
Diagnosis Provider Narrative	
ZZZ, 999 This is the Diagnosis Narrative for zzz. 999	
Code Blue	
Code Ditte	
Provider History	
Type Name First Seen	
Disposition Information	
Final Acuity 1 Disposition HOME	
Follow Up Instructions APPT AND INSTRUCTIONS GIVEN	
(PRIMARY) Provider who signed PCC form TEST, PROVIDER TWO Discharge Nurse TEST, NURSE FOUR	
Departure Time 05/05/2023 10:59	
Technical Use Only: Objid 234 Dfn 7207 Vieu 247233 AmerVsit 230	

Figure 2-63: Patient Discharge Summary

# 2.8 ED Dashboard Reporting

A number of management reports can be generated, provided the user has access to the Reports Button. To access the report screen from the EDD main page, click on **Reports** (Figure 2-64). The ERS/BEDD Reports screen will be shown (Figure 2-65), then select **Run Report** after selecting a specific report to process (Figure 2-66).

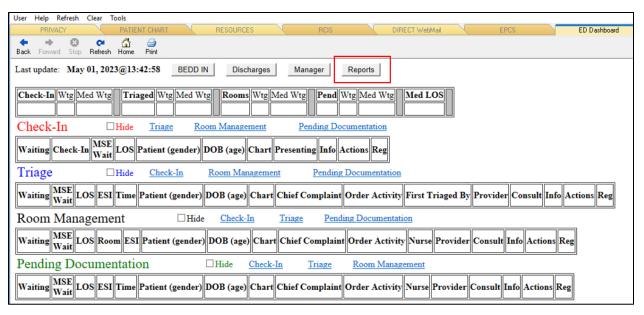


Figure 2-64: Reports button

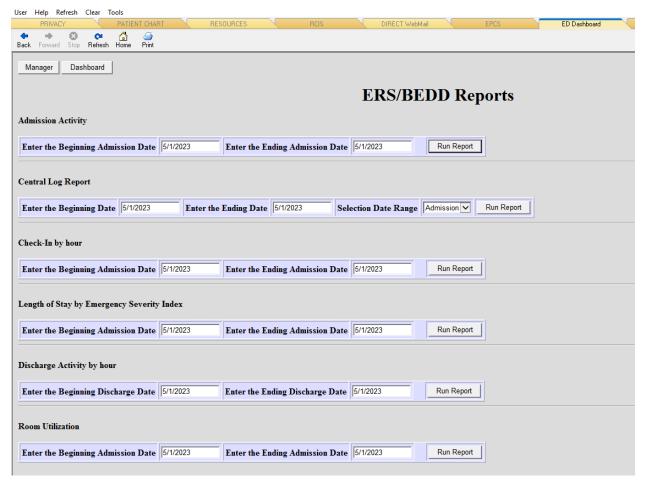


Figure 2-65: ERS/BEDD Reports



Figure 2-66: Run Reports button

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 as follows:

• Admission Activity (Figure 2-67)

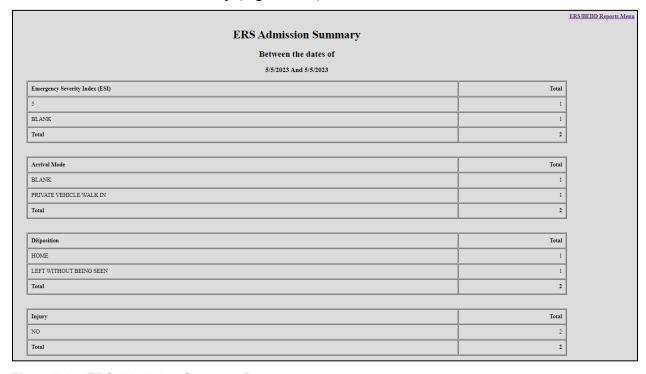


Figure 2-67: ERS Admission Summary Report



Figure 2-68: Central Log Report

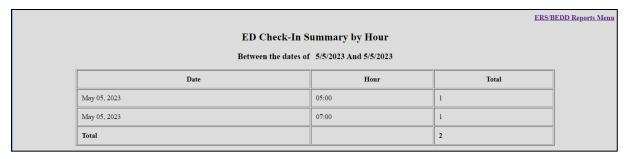


Figure 2-69: ED Check-In Summary by Hour

• Length of Stay by Emergency Severity Index (Figure 2-70)



Figure 2-70: Length of Stay by Emergency Severity Index

• Discharge Activity by hour (Figure 2-71)



Figure 2-71: ED Discharge Summary by Hour

• Room Utilization (Figure 2-72)

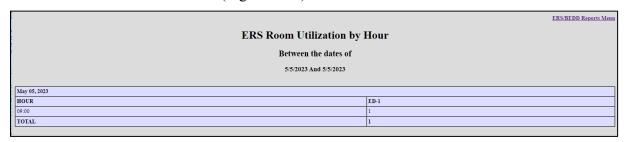


Figure 2-72: ERS Room Utilization by Hour

## 2.9 Whiteboard Display

The BEDD application 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 nurse's station (where more information could be displayed).

### 2.9.1 Logging into the Whiteboard

To log into the Whiteboard, in Standalone Mode, click the **Dashboard** desktop icon just as if you were going to log into the regular dashboard. The screen shown in Figure 2-73 displays. 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 with which users can log on. 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 2-74 displays (actual column shown will vary depending upon the Whiteboard custom settings – see Section 4.3.24 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 2-73: ED Dashboard login screen

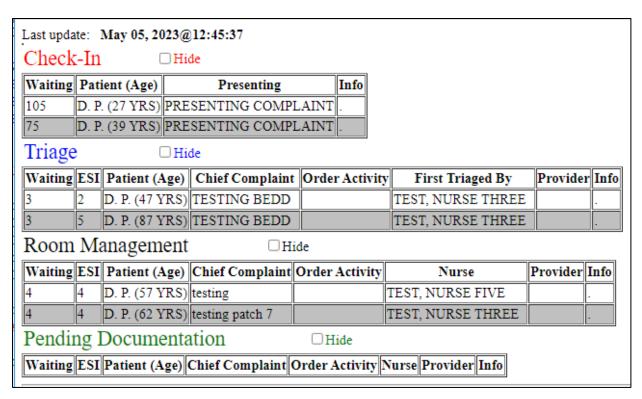


Figure 2-74: Sample Whiteboard display

# 3.0 Package Management

### 3.1 Package Access

User access to the EDD is controlled by RPMS security keys. The BEDD application includes six security keys, AMERZPROVIDER, AMERZNURSE, AMERZPARA, BEDDZWHITEBOARD, BEDDZMGR and BEDDZDASH. These keys are documented in Section 3.4 of the *IHS Emergency Department Dashboard Technical Manual*.

# 3.2 Controlling Nurse/Provider Role Selection Choices

The ED Dashboard relies on the following AMER security keys to control what personnel appear in the nurse/provider dropdown selection lists.

### 3.2.1 AMERZNURSE Security Key

Personnel holding the AMERZNURSE security key will show up in the dropdown lists in the BEDD Triage Nurse, Primary Nurse, and Discharge Nurse fields. If a user wishes to select someone other than a holder of the AMERZNURSE security key, they have to check the **Show All** box next to the dropdown list to generate a list of all providers.

### 3.2.2 AMERZPROVIDER Security Key

Personnel holding the AMERZPROVIDER security key will show up in the dropdown lists in the BEDD Triage Provider, ED Provider and (PRIMARY) Provider who signed PCC form fields. If a user wishes to select someone other than a holder of the AMERZPROVIDER security key, they have to check the **Show All** box next to the dropdown list to generate a list of all providers.

# 3.3 Automatic Check-out from PIMS upon BEDD/AMER Discharge

The AMER/BEDD applications can be set up to check-out patients from their PIMS appointments when they are discharged from AMER/BEDD visits. For instructions on how to turn on (or off) this functionality please see Section 3.1.5 of the *Emergency Room System User Manual* released with AMER v3.0 Patch 13.

# 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 this point, the BEDD login screen should display. Provide the users **RPMS ACCESS/VERIFY** information (Figure 4-2). If accessing via the EHR, the users' 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.



Figure 4-2: 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 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 4-4, the user's particular site will not have rooms defined yet and that definition will be performed in the next step.

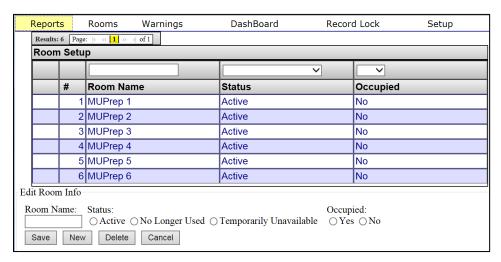


Figure 4-4: Room definition screen

### 4.2 Add ER Room 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**. Press the **Save** button and the room will be added as in Figure 4-5.

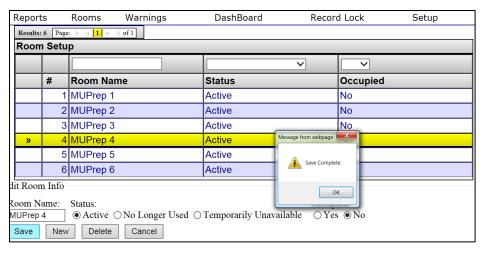


Figure 4-5: Add ER room

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 and Configure Options

After the bed locations are added and while still in the room definition screen shown in Figure 4-4, click on **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.

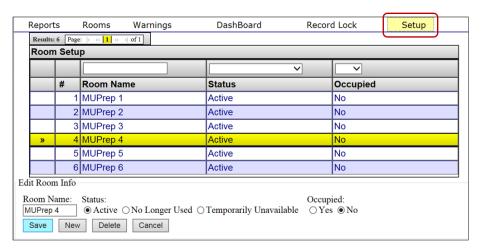


Figure 4-6: Room definition screen — Setup button

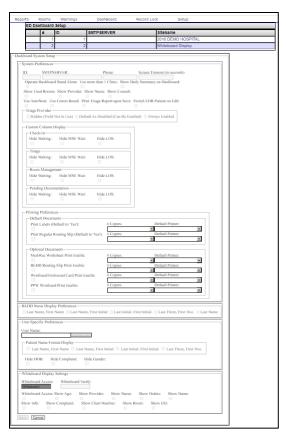


Figure 4-7: The BEDD Manager Setup Screen

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.

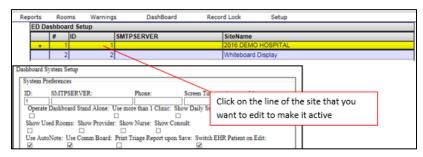


Figure 4-8: Site settings

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 EDDs main page.

### 4.3.1 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.

### 4.3.2 Operate Dashboard Stand Alone

Not implemented

#### 4.3.3 Use More than One Clinic

For sites that use multiple clinic areas (for triage, urgent care, etc.), checking this property displays the **Clinic** column in the dashboard under the **Triaged**, **Room Management** and **Pending Documentation** sections as indicated in Figure 4-9.

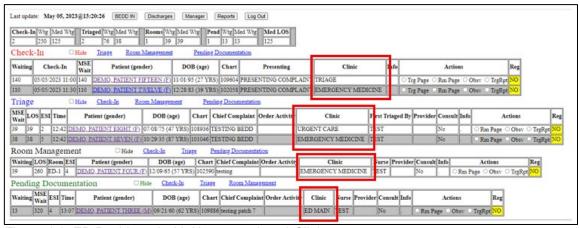


Figure 4-9: ED Dashboard with Use more than 1 Clinic property set

### 4.3.4 Show Daily Summary on Dashboard

Not Implemented

#### 4.3.5 Show Used Rooms

Not Implemented

#### 4.3.6 Show Provider

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

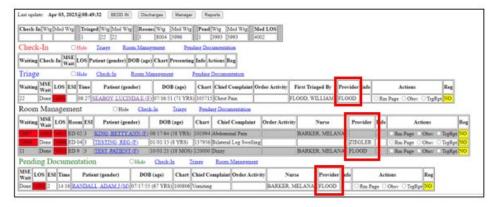


Figure 4-10: Provider column

#### 4.3.7 Show Nurse

Display the **First Triaged By** column under the **Triage** section and the **Nurse** columns in the dashboard under the **Room Management** and **Pending Documentation** sections as indicated in Figure 4-11.

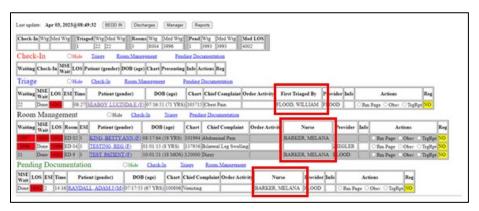


Figure 4-11: Nurse column

#### 4.3.8 Show Consult

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

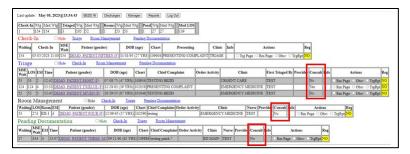


Figure 4-12: Consult column

#### 4.3.9 Use AutoNote

Checking the Use AutoNote property will cause the **Actions** column to be displayed in the ED Dashboard **Check-In**, **Triaged**, **Room Management** or **Pending Documentation** sections.

The Actions properties allow the notes field to be auto-populated when the **Trg Page** (Triage Page), **Rm Page** (Room Page) or **Obsv** (Patient Observed) options are checked. See Figure 4-13 for an ED Dashboard with the **Actions** Column set to display. These actions are described in Section 2.3.

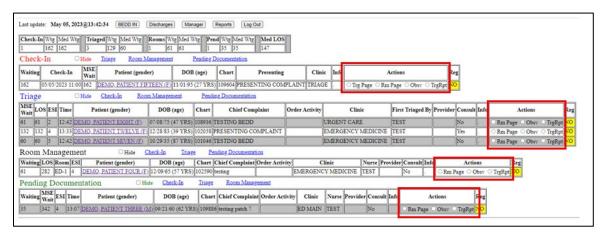


Figure 4-13: AutoNote actions

#### 4.3.10 Use Comm Board

Not Implemented

### 4.3.11 Print Triage Report on Save

Not Implemented

#### 4.3.12 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.

### 4.3.13 Triage Provider

On the Setup screen there is the ability to hide, disable, or enable the Triage Provider field under Edit Page Admission Information section. Users can set up this function in the Dashboard System Setup screen by selecting the preferred radio button as shown in Figure 4-14. For sites that never use a triage provider this setting can be set to **Hidden**.

For sites that occasionally use a triage provider, the second option of **Default As Disabled (Can be Enabled)** should be used. For sites that frequently use a triage provide, the **Always Enabled** selection should be used.

Note: The AMER application has its own setting to control whether a triage provider should be prompted for or not. Please see Section 3.1.5 of the Emergency Room System (AMER) User Manual for directions on how to adjust that setting.

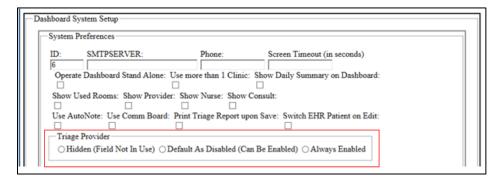


Figure 4-14: The Triage Provider setting

Figure 4-15 displays the user view in the Patient Edit screen if the **Triage Provider Always Enabled** radio button was selected.



Figure 4-15: Triage Provider section shown as enabled on Patient Edit screen

### 4.3.14 BEDD Nurse Display Preferences

A nurse's name can be displayed in multiple formats on the ED Dashboard main page. The format of the nurse display can be changed to include just the last name or a combination of the first and last names.

This can be useful in sites with many staff having similar names. See Figure 4-16 for the available nurse's name display formats. The nurse's name displays in the chosen format in the Triage, Room Management, and Pending Documentation section. Figure 4-17 shows an example of the complete nurse's name showing on the ED dashboard main page.

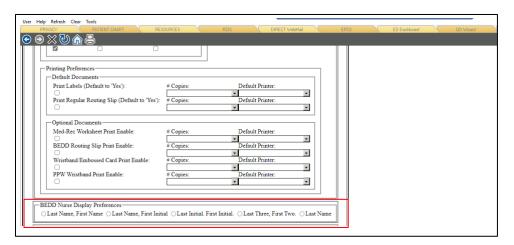


Figure 4-16: BEDD Nurse Display Preferences section



Figure 4-17: BEDD Displaying Nurse Name

### 4.3.15 Custom Column Display

Each of the sections displaying on the dashboard can be configured to hide some information that staff may not need to view. This can make the dashboard easier to read, especially when a large number of patients are present. Each section (Check-in, Triage, Room Management, and Pending Documentation) can be customized to Hide Waiting, Hide MSE (medical screening evaluation) Wait Time, Hide LOS (length of stay).

All of these can be viewed or hidden on the dashboard by checking the appropriate box as shown in Figure 4-18.

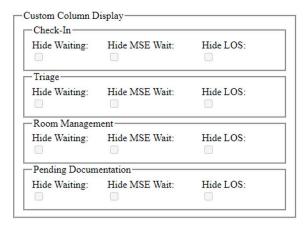


Figure 4-18: Custom column display setting

### 4.3.16 Printing Preferences

The **BEDD IN** option allows users to print various documents associated with the visit. 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.

### 4.3.16.1 Print Labels (Default to Yes)

Checking or unchecking the **Print Labels (Default to Yes)** check box as shown in Figure 4-19 will cause the **Print Label** option in BEDD IN to default to printing turned on or 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 4-20 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.

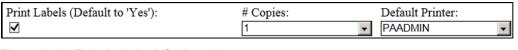


Figure 4-19: Print Labels default settings



Figure 4-20: Print Labels option in BEDD IN display

### 4.3.16.2 Print Regular Routing Slip (Default to Yes)

Checking or unchecking the **Print Regular Routing Slip (Default to Yes)** check box as shown in Figure 4-21 will cause the **Print Regular Routing Slip** option in BEDD IN to default to printing turned on or 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 4-22 to see how these settings affect the Print Regular Routing Slip settings in BEDD IN. In this example, the check box is not checked, so in BEDD IN the routing slips will not default to print on any new patient visit.

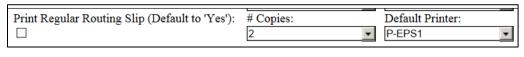


Figure 4-21: Print Regular Routing Slip check box and default settings



Figure 4-22: Print Routing Slip check box in BEDD IN display

#### 4.3.16.3 Med-Rec Worksheet Print Enable

Checking the **Med-Rec Worksheet Print Enable** check box as shown in Figure 4-23 will control whether the **Print Med-Rec Worksheet** option will be available in **BEDD IN** and the **AMER ADMISSION** option.

If the box is checked, the print option appears 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 check box is 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 displays but will not be checked to print.

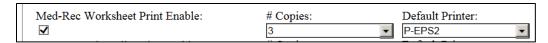


Figure 4-23: Med-Rec Worksheet Print Enable default settings

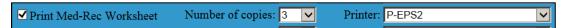


Figure 4-24: Med-Rec Worksheet print enable settings in BEDD IN display

In 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 4-25 for an example of this option.

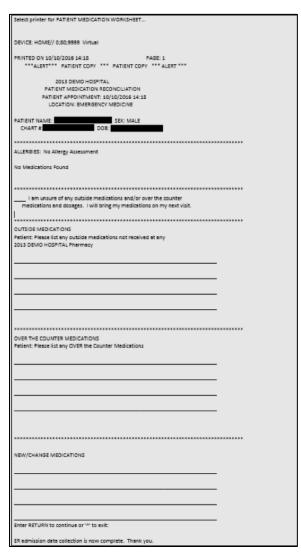


Figure 4-25: AMER ADMISSION excerpt for Med Rec Worksheet print

#### 4.3.16.4 BEDD Routing Slip Print Enable

Checking the **BEDD Routing Slip Print Enable** check box as shown in Figure 4-26 will control whether the **Print BEDD Routing Slip** option will be available in the **BEDD IN** and **AMER ADMISSION** options. If the check box is checked, the print option appears in BEDD IN, and any values saved in the # **Copies** field and **Default Printer** fields will be defaulted in once a patient is selected (see Figure 4-27).

In this example, the check box is 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 displays but will not be checked to print.

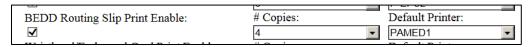


Figure 4-26: BEDD Routing Slip Print Enable default settings



Figure 4-27: Print BEDD Routing Slip settings in BEDD IN display

From 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 4-28 for an example of this option.

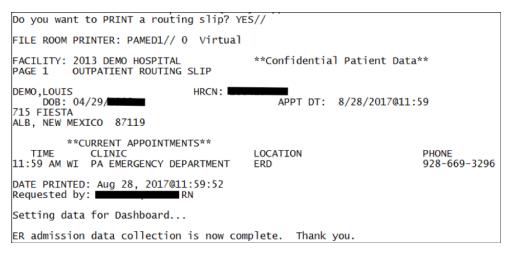


Figure 4-28: AMER ADMISSION excerpt for Print BEDD routing slip

#### 4.3.16.5 Wristband/Embossed Card Print Enable

Checking the **Wristband/Embossed Card Print Enable** check box as shown in Figure 4-29 will control whether the Print Embossed Card option will be available in the **BEDD IN** and **AMER ADMISSION** options.

If the check box is checked, the print option appears in BEDD IN and any values saved in the # Copies field and Default Printer field will be defaulted once a patient is selected (see Figure 4-30). In this example, the check box is 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 displays but not be checked to print.

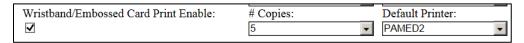


Figure 4-29: Wristband/Embossed Card Print Enable check box and default settings

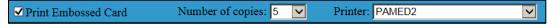


Figure 4-30: Print Embossed Card check box in BEDD IN display

In the **AMER ADMISSION** option, if the check box is checked, the user will be prompted to print an embossed card as part of the **AMER ADMISSION** option. See Figure 4-31 for an example of this option.



Figure 4-31: AMER ADMISSION excerpt for wristband/embossed card printing

#### 4.3.16.6 PPW Wristband Print Enable

Checking the **PPW Wristband Print Enable** check box as shown in Figure 4-32 will control whether the **PPW Wristband Print Enable** option will be available in BEDD IN.

If the check box is checked, the print option displays in BEDD IN and any values saved in the # Copies field and Default Printer field will be defaulted once a patient is selected (see Figure 4-33). In this example, the check box is checked, so in BEDD IN the Print PPW Wristband option will be available for printing. For a new visit, the option will default to print, while for an existing visit, the option displays but not be checked to print.

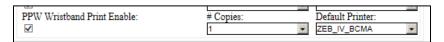


Figure 4-32: PPW Wristband Print Enable Default Settings



Figure 4-33: Print PPW Wristband in BEDD IN display

### 4.3.17 User-Specific Preferences

#### 4.3.17.1 User Name

Select the desired user for whom to change preferences.

#### 4.3.17.2 Patient Name Format Display

Setting that determines how patient name is displayed in dashboard. The following 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)

#### 4.3.17.3 Hide DOB

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

#### 4.3.17.4 Hide (Chief) Complaint

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

#### 4.3.17.5 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.

### 4.3.18 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 (just below the 2016 Demo Hospital below) shown in Figure 4-34.

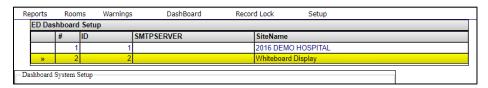


Figure 4-34: Select the Whiteboard Display

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 display as shown in Figure 4-35.

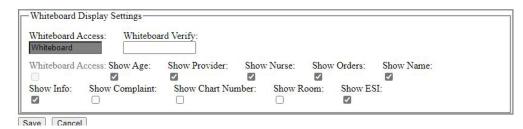


Figure 4-35: Whiteboard Display Settings

#### Whiteboard Access

The standard whiteboard access code value displays. The value cannot be changed.

#### 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.

#### Whiteboard Access (Check Box)

Not implemented for Patch 1.

#### 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.

#### Show Provider

Show the provider column in the dashboard under the triaged, room management, and pending documentation sections.

#### **Show Nurse**

Show the nurse column in the dashboard under the triaged, room management, and pending documentation sections.

#### **Show Orders**

Show the order activity column in the dashboard under the triaged, room management, and pending documentation sections.

#### **Show Name**

Show the patient column in the dashboard under the check-in, triaged, room management, and pending documentation sections.

#### **Show Info**

Show the info column in the dashboard under the check-in, triaged, room management, and pending documentation sections.

#### **Show (Chief) Complaint**

Show the chief complain column in the dashboard under the triaged, room management, and pending documentation sections.

#### **Show Chart Number**

Show the chart column in the dashboard under the check-in, triaged, room management, and pending documentation sections.

#### **Show Room**

Show the nurse column in the dashboard under the room management sections.

### **Show Emergency Severity Index (ESI)**

Show the ESI column in the triage, room management, and pending documentation sections on the whiteboard.

### 4.4 Warnings

The dashboard display allows the display of warnings to alert staff of patients who may have been waiting for excessive times. These can be customized by the site to display distinct colors and/or symbols for the following time period measurements:

- Check in Wait Time The number of minutes the patient has remained in the check-in area without being triaged.
- Triage Wait Time The number of minutes the patient has been waiting for a room since the time that they were triaged.

- LOS (total time) The total number of minutes the patient has been in the ED since they first checked-in.
- **Medical Exam Time** The number of minutes the patient has been waiting to be seen by a provider.
- Room Management Wait Time The number of minutes the patient has been in a room.

To set warnings navigate to the manager menu and click the link for warnings as shown in Figure 4-36.



Figure 4-36: Link to the Warnings definitions

The warnings screen includes the list of current warnings for the system as well the ability to edit or add new warnings, enable, or disable any warnings, change the color or symbol, or change the time before a warning appears. Instructions are on the screen.

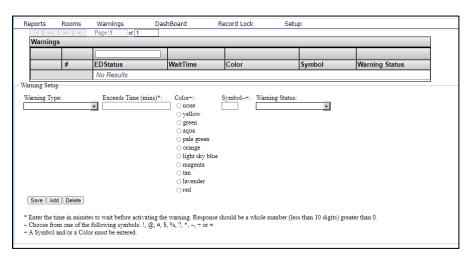


Figure 4-37: Sample Initial Blank Warnings Display

## 4.4.1 Setting up a New Warning

To set up a new warning, please perform the following steps:

1. Click **Add** at the bottom of the warnings page as shown in Figure 4-38.

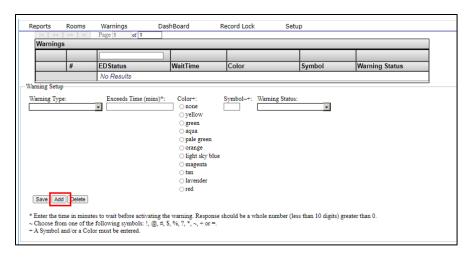


Figure 4-38: Clicking Add to create a new warning

2. In the Warning Type property, select the appropriate warning from the dropdown list as shown in Figure 4-39.

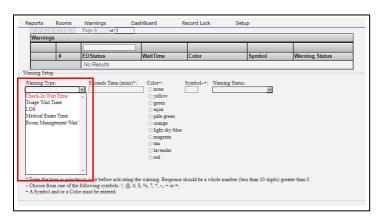


Figure 4-39: Selecting the Warning Type

3. In the Exceeds Time (mins) property, enter the **number of minutes** to wait before activating the warning. For example, when entering the number 60, the warning displays after 60 minutes. In the following example (Figure 4-40), a warning period of 300 (minutes) was entered.

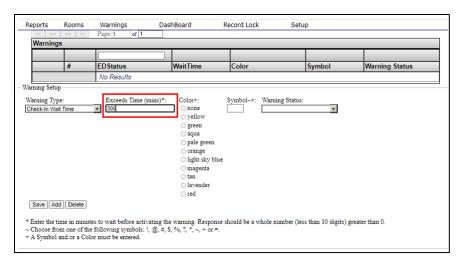


Figure 4-40: Entering the Exceeds Time (mins) value

4. Select a **Color** from the available choices (Figure 4-41). In this example, a color of yellow was selected.

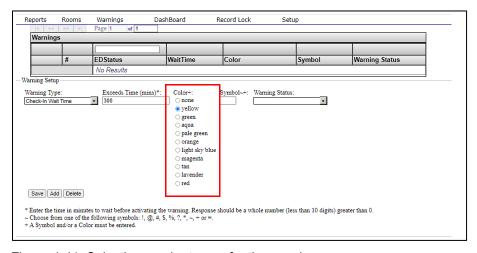


Figure 4-41: Selecting a color to use for the warning

5. Select a **Symbol** to use for this warning. The allowable symbols are displayed at the bottom of the page. A symbol and/or a color must be entered. They cannot both be blank. In the example an asterisk (\*) was chosen (Figure 4-42).

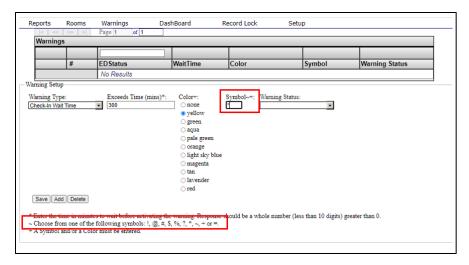


Figure 4-42: Selecting a symbol to use for the warning

- 6. Select **Enabled** from the Warning Status dropdown and click **Save** to save the new warning.
- 7. The warning appears as shown on the main dashboard display (Figure 4-43).

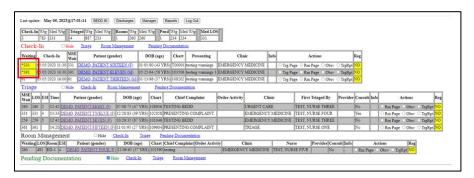


Figure 4-43: Sample display of a Check-In warning over 300 minutes

### 4.4.2 Editing an Existing Warning

1. On the **Warnings** page, in the table at the top, select the warning that you wish to edit (Figure 4-44).

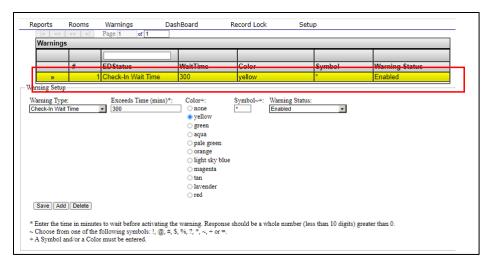


Figure 4-44: Selecting the warning to edit

2. Make the desired changes to the selected warning (Figure 4-45).

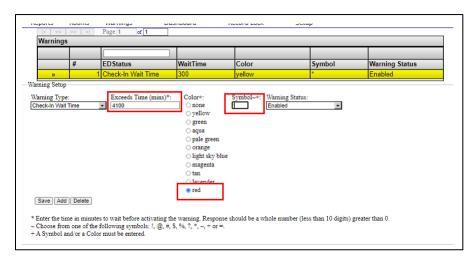


Figure 4-45: Editing an existing warning

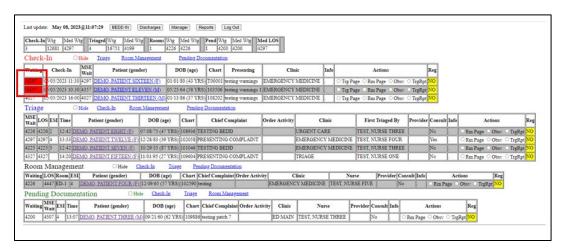


Figure 4-46: Updated warning display

### 4.4.3 Disabling or Deleting a Warning

- 1. To disable or delete an existing warning, select the warning in the table at the top.
- 2. To disable an existing warning, change the warning status value to **Disabled** and click **Save** to save (Figure 4-47). The warning will no longer be applied on the main dashboard page. To re-enable the warning, select **Enabled** from the Warning Status dropdown, and click **Save**.

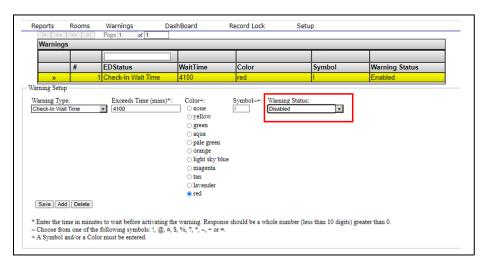


Figure 4-47: Disabling an existing warning

3. To delete an existing warning, after selecting the warning from the table at the top, click **Delete**. You will be prompted to confirm whether you want to delete the warning or not. Press **OK** to delete the warning (Figure 4-48).

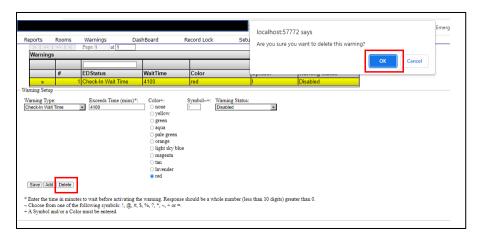


Figure 4-48: Deleting an existing warning

# 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: <a href="https://security.ihs.gov/">https://security.ihs.gov/</a>.

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 anothers 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 programmers' 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 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 users 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. not 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
DOB	Date of Birth
ED	Emergency Department
EDD	Emergency Department Dashboard
EHR	Electronic Health Record
ER	Emergency Room
ERS	Emergency Room System
HHS	Health and Human Services
HRN	Health Record Number
IHS	Indian Health Service
LWOBS/DNA	Left Without Being Seen/Did Not Answer
OIT	Office of Information Technology
RPMS	Resource and Patient Management System

# **Contact Information**

If you have any questions or comments regarding this distribution, please contact the IHS Service Desk.

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