

Outpatient Nurse Workflow

Scan the QR code to access the training website:



Thing You Want to Do		What Is it Called?	* Pro Tip
1	See Appointment Schedule, Schedule Appointment, Start Client's Service	Staff Calendar and/or Appointment for Today widget on Provider's Dashboard	Save Staff Calendar as a quick link to easily access your and other providers'/offices' calendars. "Appointment for Today" will autopopulate if a client is assigned to you as the primary provider.
2	Send/Review Messages	Messages/Alerts or New Messages/Alerts widget on Provider's Dashboard	<p>Providers can view incoming new messages from other providers and respond by clicking on the widget's hyperlink.</p> <p>Can also search all messages/alerts under Message/Alert screen.</p> <p>Can attach a document by going to the completed document PDF and sending it as part of a message.</p> <p>Nurses can be added as a proxy to answer messages for physicians.</p>
3	Look up Client	Person Search Icon	<p>The Person Search icon will autofilter when you type in the first 3 letters and or medical record number.</p> <p>For a more extensive search, under Person Search icon, select "Client Search."</p>
4	Review Previous Services/Notes	Services/Notes [Client] and/or Documents [Clients]	Filter "Complete" in Services/Notes screen. Click hyperlink under "Document" to access a specific note. You can also filter by "Signed" in Documents screen. If within a note's PDF, use forward or backward arrow to see notes.
5	Review Previous and Current Programs	Programs [Client]	Filter by "Enrolled" for current programs. Remove date range to see all current enrollments.
6	Review Labs	<p>Lab Result widget on client/provider dashboard: A quick view of recent labs. Can toggle between providers.</p> <p>Lab Result Review screen: Complete list of client lab orders, if outside lab results have an appropriate interface with the EHR, and information will pull in automatically for review. To mark that labs have been reviewed, select "Reviewed" vs. "Nurse Reviewed," and assign to a prescriber if needed.</p>	Label as "Lab Results" and write name of the test (eg CBC, TSH, Urine tox screen). This name will populate when search/filtering within Document.
7	Review Diagnoses	Diagnosis Document [Client] and Client Clinical Problems	<p>Of note, when clinicians enter problems in their notes, information will go into Client Clinical Problems. As nurses, can add on Client Clinical Problems list. For diagnoses entered by physicians, search within Psychiatric Notes and/or Diagnosis Document.</p> <p><i>This is in development for merging together.</i></p>
8	Review/Document Vitals	Flow sheet [Client], choose "Meaningful Vitals" from dropdown and select "New" if you want to input new vitals.	Using a flow sheet allows you to view recorded data in graph format to track trends.

Outpatient Nurse Workflow, continued

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9	Choose Procedure Code/Note	Select Service/Notes [Client] and/or click from Calendar or Appointments Today if the service is assigned to you already. Under "Service" tab to access note, switch from "Scheduled" to "Show." This will autopopulate with pre-selected note template.	Common Nurse Procedure Codes based on RN role: <ul style="list-style-type: none"> • Nursing Evaluation (T1001) • Crisis Intervention/Mobile Crisis (H2011) • Medication Training and Support (H0034) • Medication Injection (96372) • TCM/ICC (T1017)-Targeted Case Management • Brief Contact Note (Non-billable) • Team Case Conference, Client/Family present (99366) • Team Case Conference, Client/Family absent (99367)
10	Add to the Client Clinical Problems	Client Clinical Problems screen and/or within the Progress Note. Please note this is shared list with non-psychiatrist roles and not used for billing but to provide transparency of which problems a patient has that are being addressed by different team members.	If your note is a "Progress Note" it will have this functionality. This is different from the Diagnosis Document, which will autofill the Billing Diagnosis, but currently is under development to directly fill the Client Clinical Problems.
11	Confirm the Primary Diagnosis to the Service	Once in the note, select "Billing Diagnosis" tab	You may need to change the order of the diagnoses so that the primary/payable diagnosis for your service is in the #1 spot.
12	Order Labs	Quick Orders [Client]. The list of labs should be uploaded from your 3rd party lab vendor. Any POCT can be added manually by your administrative team.	When you order a lab, it will automatically be sent to the lab. To notify your prescriber, then add as co-signer. If you are only queuing the lab order, then switch the author to your prescriber's name; if you are proxy, enter your password to send order to prescriber to sign.
13	Order Outpatient Medications for Your Prescriber	Medication Management (Rx) [Client] --> Queue Orders / Verbal Order read-back	Can "Queue Order" if you need a prescriber to sign before sending. If you have permission to directly send to a pharmacy, then select your prescriber's name and click "Prescribe." You can checkbox the verbal order read-back to acknowledge that you did this verbally. Can add your prescriber to be co-signer, but the order will be live.
14	Wrap up a Visit	Sign Button on Upper Right	You will get validation pop-up with direction of where an error is if you cannot sign. After care instructions are pending development.
15	Send a Note to Be Cosigned	Click on + button on the upper right corner of a signed document, and can assign a co-signer	If notes are written on behalf of a prescriber, assign nurse to be a proxy within the set up role for a specific prescriber.
16	Assessments	Within Client quicklinks --> Assessment/ Screening Tools to find full list of other available tools	
17	Reconcile Outpatient Medications Within Programs/Systems	No SmartCare Functionality	This is in development for medications ordered within an internal system. For external medication: Medication Management (Rx) --> "Add medications."
18	Record Allergies	Medication Management (Rx) [Client] --> Allergies/ Intolerance/Failed Trials	This will autopopulate the system.