## Future State: Perioperative - Medication Administration

Cerner Workflow ID: 583 (v. 11.0) Client Workflow ID: 110

Last updated by Anjanette Balboa, Mar 04, 2025 12:49pm (UTC -4 hours)

#### **Workflow Details:**

Workflow Name: Perioperative - Medication Administration

Workflow State: Future State
Workstream: Medication
Venue: Perioperative

Client Owner: Boichuk (Doan), Kristen Rachel

Cerner Owner: Chariton, Caitlin M

Standard: Yes

Related Workflow(s):

Tags:

# **Workflow Summary:**

Service Line:

Related Solution(s): Point of Care

Surgical Management

Project Name: Niagara Health System:OPT-0297674:NIAG\_CD Niagara HIS RFP

TestBuilder Script(s):

Cerner Workflow ID: 583 (v. 11.0)

Client Workflow ID: 110

Workflow Notes: The intent of this workflow is to define the basic steps involved in

documenting medication administration by the nursing staff throughout the perioperative venue. Further details regarding order set ordering, meds rec, etc., should be found within the broader Perioperative workflows (e.g. Scheduling, PAT, Preop, etc.).

Introduced By: WS 4 Validated By: WS 5

#### **Swim Lane:**

Role(s): Pre Procedure Nurse [Custom]

Department(s):

Security Position(s): Perioperative - Nurse

## **Work Step** [23747]

Description: Initiate Pre Procedure Phase of PowerPlan(s), if applicable

Method: PowerOrders

Comments: Preop orders are typically driven by the surgeon; however, some

facilities will include a Preop phase in the anesthesia order set, so there could be 1 or more order sets for the nurse to initiate.

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## **Decision** [23820]

Description: Is an order present for all necessary medications?

### **Decision** [23850]

Description: Are there any compound or non-stock meds ordered that require pre-mixing or

dispense by pharmacy?

## Work Step [23825]

Description: Retrieve appropriate medications to be administered in Pre Procedure Area

Comments: Ideally, Preop med orders will be verified by pharmacy prior to

administration. However, in the event that a medication needs to be given quickly, the med cabinets in Preop should either be nonprofiled, or be setup with an appropriate override list to ensure the clinicians have quick access to the necessary meds for Preop

care.

## Work Step [22214]

Description: Open the Medication Administration Wizard (MAW) and scan the patient's

wristband

Method: PowerChart Value Impact: Patient Safety

Comments: For state's that require dual verification, the nurse's badge

barcode can also be scanned.

## Work Step [23673]

Description: Scan medication barcode

Method: PowerChart Value Impact: Patient Safety

### Work Step [23801]

Description: Enter any additional required charting elements and sign documentation

Method: PowerChart

#### **Decision** [24046]

Description: Is this a high alert medication requiring an independent double check?

#### **Decision** [23803]

Description: Have all medications been scanned/documented?



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### Work Step [23973]

Description: Close the MAW

## **Work Step** [23975]

Description: End of Medication Administration Process

# **Work Step** [24093]

Description: Auto - verification applicable to orders that will NOT be active in an inpatient

environment

## Work Step [23823]

Description: Communicate with provider for add'l orders. Use verbal orders for co-signature in

emergencies or Telephone orders if necessary.

Method: PowerOrders

Comments: Instead, the provider needs to either add the order to their order

set, or give a verbal order to the nurse who will place the order

within PowerOrders.

## Work Step [24107]

Description: Submit a Medication Request to Pharmacy

Comments: Make a call to the pharmacy to ensure they receive the new order

that is not stock in the unit.

### Work Step [24048]

Description: Populate witness field with nurse's name and follow prompt to have independent

nurse signature

#### Off Page Reference [24094]

Workflow Link: Pharmacy - Pharmacist Order Verification

## **Off Page Reference** [24082]

Workflow Link: Phys Track- Acute Care - Verbal/Telephone Entry

#### Off Page Reference [24102]

Workflow Link: Pharmacy - Enhanced Medication Request with Pharmacy Patient Monitor

#### **Swim Lane:**

Role(s): Anesthesia



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Department(s):

Security Position(s): Physician - Anesthesiology

Perioperative - CRNA

## **Off Page Reference** [23849]

Workflow Link: Perioperative - Anesthesiology - Day of Surgery Overview

Method: Anesthesia Module

Comments: All medication administration steps for the anesthesia provider can

be found within the Anesthesiology - Day of Surgery Overview

workflow.

## **Decision** [24172]

Description: Is this a Procedural Sedation Case?

# **Off Page Reference** [24114]

Workflow Link: Perioperative - Procedural Sedation (Opthalmology/ Cataracts)

#### **Swim Lane:**

Role(s): OR Nurse [Custom]

Department(s):

Security Position(s): Perioperative - Nurse

#### **Decision** [24112]

Description: Is this a Procedural Sedation case?

## Work Step [23868]

Description: Retrieve medications to be administered intraoperatively

#### **Decision** [24202]

Description: Is this a non-formulary or surgical medication given within the sterile field?

Comments: Formulary medications such as heparin subcutaneous for DVT

prophylaxis or Intravenous Antibiotics given for Surgical

Prophylaxis ought to be documented on the MAR either by Anesthesia

or by the Nurse via the Create Order and Document functionality.

### **Decision** [23881]

Description: Is the patient ID Band accessible?

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## **Work Step** [23705]

Description: Open Medication Administration Wizard (MAW) and scan wristband

Method: PowerChart Value Impact: Patient Safety

## Work Step [24038]

Description: Click create order and document

## Decision [23791]

Description: Does medication require mixing by the Nurse?

## **Work Step** [23735]

Description: Scan medication barcode

Method: PowerChart Value Impact: Patient Safety

## Work Step [23680]

Description: Enter any additional required charting elements/update dosage totals and sign

documentation.

Method: PowerChart

Comments: Performed by field: Who is physically administering it

Witnessed by field:

Witness for certain medication classes

Comments: Use to denote who constitued the medication

if not the performing by.

#### **Decision** [24055]

Description: Is this a high alert medication requiring an independent double check?

### **Decision** [23716]

Description: Have all medications been scanned/documented?

# Work Step [23950]

Description: Close the MAW

### Work Step [23645]

Description: End of Medication Administration Process

Method: PowerChart



# Future State: Perioperative - Medication Administration

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## **Off Page Reference** [24199]

Workflow Link: Perioperative - Procedural Sedation (Opthalmology/ Cataracts)

## **Work Step** [24208]

Description: Document the Medication in Perioperative Document under the appropriate

segment.

## Work Step [23883]

Description: Open Medication Administration Wizard (MAW), bypass wristband scan and select

"Operating Room/Procedure"

Method: PowerChart

Comments: Ideally, the wristband should be scanned, but due to the difficulty

with gaining access to the band while the patient is draped, and given that the patient has already been positively identified during the Procedure Timeout performed within the room, the

wristband scan can be bypassed when necessary.

## **Off Page Reference** [24085]

Workflow Link: Phys Track- Acute Care - Verbal/Telephone Entry

#### Work Step [23794]

Description: Each medication/ingredient must be scanned separately as medication is mixed

Method: PowerChart

## Work Step [24054]

Description: Populate witness field with nurse's name and follow prompt to have independent

nurse signature

Comments: Performed by field: Who is physically administering itWitnessed by

field: Witness for certain medication classesComments: Use to denote who constitued the medication if not the performing by.

#### **Swim Lane:**

Role(s): Surgeon

**Proceduralist** 

Department(s): Security Position(s):



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#### Work Step [23957]

Description: Communicate medications with Verbal Order for Co Signature

## Work Step [23955]

Description: Administer Medications as planned communicating dose, route etc. with

Procedure/OR Nurse for documentation

# **Work Step** [23968]

Description: After procedure is complete: Co-Sign the Verbal Order

## Work Step [23970]

Description: End of Medication Administration Process

# **Work Step** [23954]

Description: Assess the need for Intraoperative Medications and inform OR Nurse (MAIN OR) or

leave planned orders (ENDO/APU)

Comments: Within the Main OR, Verbal Orders for Co-Sig can be used as the

Surgeon will often be scrubbed.

Within Endoscopy, orders MUST be placed before the procedure in a

planned state as a SURG phased PowerPlan.

### **Decision** [24182]

Description: Is this a Procedural Sedation Case?

### Off Page Reference [24180]

Workflow Link: Perioperative - Procedural Sedation (Endoscopy/ APU)

#### Swim Lane:

Role(s): ENDO/APU Procedure Nurse [Custom]

Department(s): Security Position(s):

#### Work Step [24147]

Description: Initiate Intraprocedure Phase of SURG/Endoscopy PowerPlan

### Work Step [24149]

Description: Retrieve appropriate medications to be administered

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## **Decision** [24194]

Description: Is this a non-formulary or surgical medication given within the sterile field?

Comments: i.e. DVT Prophylaxis such as subcutaneous doses of heparin or

Surgical Prophylaxis should be ordered by the Prescriber and

documented on the MAR whether that be through the MAR directly or through the Anesthesia Module on a Procedural Sedation Record to

populate to the MAR upon finalizing that record.

Local Anesthesia given into a

surgical site and not administered by the Nurse will be documented

in Perioperative Document by the Nurse (i.e. Ellevue, Joint

Cocktails, Medicated Surgical Irrigations etc.)

## Work Step [24156]

Description: Open the Medication Administration Wizard (MAW) and scan the patient's

wristband

Method: PowerChart

## Work Step [24154]

Description: Scan medication barcode

### **Work Step** [24159]

Description: Enter any additional required charting elements, (backtiming if necessary) and sign

documentation

## Decision [24166]

Description: Is this a high alert medication requiring an independent double check?

#### **Decision** [24160]

Description: Have all medications been scanned/documented?

## Work Step [24161]

Description: Close the MAW

### **Work Step** [24162]

Description: End of Medication Administration Process

## Future State: Perioperative - Medication Administration

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Last updated by Anjanette Balboa, Mar 04, 2025 12:49pm (UTC -4 hours)

## Work Step [24197]

Description: Document the Medication in Perioperative Document under the appropriate

segment.

Method: Perioperative Document

# **Work Step** [24167]

Description: Populate witness field with nurse's name and follow prompt to have independent

nurse signature

#### **Swim Lane:**

Role(s): Phase I Recovery Nurse [Custom]

Department(s):

Security Position(s): Perioperative - Nurse

# **Work Step** [23779]

Description: Initiate Phase I Recovery Phase of PowerPlan(s)

Method: PowerOrders

Comments: PACU orders are typically driven by the anesthesiologist; however,

some facilities will include a PACU phase in the surgeon order set, so there could be 1 or more order sets for the nurse to initiate.

### **Decision** [23834]

Description: Is an order present for all necessary medications?

# Work Step [23833]

Description: Retrieve appropriate medications to be administered in Phase I Recovery Area

Comments: Ideally, PACU med orders will be verified by pharmacy prior to

administration. However, in the event that a medication needs to be given quickly, the med cabinets in PACU should either be nonprofiled, or be setup with an appropriate override list to ensure the clinicians have quick access to the necessary meds for PACU

care.

#### **Decision** [24127]

Description: Are there any compound or non-stock meds ordered that require pre-mixing or

dispense by pharmacy?

## Future State: Perioperative - Medication Administration

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Last updated by Anjanette Balboa, Mar 04, 2025 12:49pm (UTC -4 hours)

## Work Step [22216]

Description: Open the Medication Administration Wizard (MAW) and scan the patient's

wristband

Method: PowerChart Value Impact: Patient Safety

## Decision [24185]

Description: Is there a medication barcode available to scan?

Comments: Medications given from a multi-dose syringe may not have the barcode

available for subsequent doses.

## Work Step [23769]

Description: Scan medication barcode

Method: PowerChart Value Impact: Patient Safety

Comments: Each dose of administration should be scanned separately when

possible. If giving a subsequent dose of an already scanned product, it's possible to chart directly on the MAR, but scanning will help ensure the appropriate vial has been chosen for the

appropriate patient for each administration.

### Work Step [23775]

Description: Enter any additional required charting elements/update total amounts and sign

documentation

Method: PowerChart

## Decision [24066]

Description: Is this a high alert medication requiring an independent double check?

#### **Decision** [23787]

Description: Have all medications been documented?

## Decision [23909]

Description: Does patient have a Surgical PCA, Epidural, receive Spinal Morphine or have a

Continuous IV Infusion?

### Work Step [23977]

Description: Document initiation via the MAW



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## **Decision** [23997]

Description: Is there a clinical need for a rate/dose change on infusions?

## **Work Step** [24008]

Description: Chart nursing checks in the "Surgical PCA" section of the Periop Lines-Devices

band in iView and Bag changes on the MAR

## **System** [24019]

Description: Rate changes made update automatically to the MAR Summary

## Work Step [23984]

Description: Document initiation via the MAW

### **Decision** [23996]

Description: Is there a clinical need (and order) for a rate change on the epidural infusion?

## Work Step [24009]

Description: Chart rate changes can be made in the MAR. Document in the Epidural section

under Periop Lines-Devices band in continuous rate

Comments: Rate changes can be viewed in the MAR Summary.

### **System** [24018]

Description: Rate changes made update automatically to the MAR Summary

### **Decision** [24059]

Description: Is there a clinical need (and order) for clinician bolus or a bag change?

### Work Step [24060]

Description: Navigate to MAR, locate order, click green box to document administration of

bolus order. Enter additional details necessary

## Work Step [24096]

Description: Auto - verification applicable to orders that will NOT be active in an inpatient

environment

Comments: If patient is admitted to the floor and bed is not ready, PARR nurse

may initiate the inpatient orders but needs to place the patient on

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the virtual 99 beds through Capacity Management.

**IMPORTANT:** Ensure that

patient is transferred to 99 bed prior to initiating the inpatient

orders.

## Work Step [23832]

Description: Communicate with provider for add'l orders. Use verbal orders for co-signature in

emergencies or Telephone orders if necessary.

Method: PowerOrders

Comments: Instead, the provider needs to either add the order to their order

set, or give a verbal order to the nurse who will place the order

within PowerOrders.

# **Off Page Reference** [24087]

Workflow Link: Phys Track- Acute Care - Verbal/Telephone Entry

## Work Step [24135]

Description: Submit a Medication Request to Pharmacy

### Work Step [24188]

Description: Select the checkbox beside the medication order and select "Barcode Discarded

**During Preparation**"

## Work Step [24065]

Description: Populate witness field with nurse's name and follow prompt to have independent

nurse signature

### Work Step [23896]

Description: Close MAW

### **Start/Stop** [23919]

Description: End of Medication Administration Process

### Off Page Reference [23870]

Workflow Link: Pharmacy - Pharmacist Order Verification

Comments: The standard workflow should be that PACU medications are verified

by pharmacy. However, in the event that surgery is taking place during off-hours when a pharmacist is not available, the nurse



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should have the ability to document on un-verified meds.

## Off Page Reference [24136]

Workflow Link: Pharmacy - Enhanced Medication Request with Pharmacy Patient Monitor

## Work Step [24010]

Description: Document Single Dose Spinal Opioids Assessment Data per Policy on the "Spinal

Assessment" section in iView.

Method: Interactive View

# **Work Step** [23985]

Description: Document initiation via the MAW

## **Decision** [23915]

Description: Is there a clinical need for a rate/dose change on infusions?

## Work Step [23687]

Description: Chart titration changes or bolus doses in the Titratable Drips section of the Periop

Lines-Devices band in iView

Comments: If giving an additional bolus administration from a continuous

infusion bag, go to the IV Charting window from the MAR to chart a

bolus event. No additional scan is required for this action.

Any other bolus administrations not from an existing continuous infusio

n should follow the standard order & scanning process.

### **System** [23767]

Description: Rate changes made update automatically to the MAR Summary

#### **Swim Lane:**

Role(s): Phase II Recovery Nurse [Custom]

Inpatient Nurse

Department(s):

Security Position(s): Perioperative - Nurse

### Work Step [23781]

Description: Initiate Phase II Recovery Phase of Power Plan(s)

Method: PowerOrders

Comments: Phase II orders are typically driven by the surgeon; however, some



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facilities will include a Phase II phase in the anesthesia order set, so there could be 1 or more order sets for the nurse to initiate.

## **Decision** [23844]

Description: Is an order present for all necessary medications?

# **Work Step** [23846]

Description: Retrieve appropriate medications to be administered in Phase II recovery

Comments: Ideally, Phase II med orders will be verified by pharmacy prior to

administration. However, in the event that a medication needs to be given quickly, the med cabinets in Phase II should either be nonprofiled, or be setup with an appropriate override list to ensure the clinicians have quick access to the necessary meds for Phase II

care.

### Work Step [23699]

Description: Open the Medication Administration Wizard (MAW) and scan the patient's

wristband

Method: PowerChart Value Impact: Patient Safety

Comments: For state's that require dual verification, the nurse's badge

barcode can also be scanned.

# Work Step [23806]

Description: Scan medication barcode

Method: PowerChart Value Impact: Patient Safety

#### **Work Step** [23811]

Description: Enter any additional required charting elements and sign documentation

Method: PowerChart

### **Decision** [24077]

Description: Is this a high alert medication requiring an independent double check?

#### **Decision** [23813]

Description: Have all medications been scanned/documented?



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## Work Step [23943]

Description: Close the MAW

### Work Step [23945]

Description: End of Medication Administration Process

### Work Step [24099]

Description: Auto - verification applicable to orders that will NOT be active in an inpatient

environment

Comments: If patient is admitted to the floor and bed is not ready, PARR nurse

may initiate the inpatient orders but needs to place the patient on

the virtual 99 beds through Capacity Management.

IMPORTANT: Ensure that patient is

transferred to 99 bed prior to initiating the inpatient orders.

## **Work Step** [23845]

Description: Communicate with provider for add'l orders. Use verbal orders for co-signature in

emergencies or Telephone orders if necessary.

Method: PowerOrders

Comments: The Phase II Recovery area requires pharmacy verification and

therefore ad hoc scanning is not appropriate. Instead, the provider needs to either add the order to their order set, or give a verbal order to the nurse who will place the order within PowerOrders.

### Off Page Reference [24090]

Workflow Link: Phys Track- Acute Care - Verbal/Telephone Entry

### Work Step [24075]

Description: Populate witness field with nurse's name and follow prompt to have independent

nurse signature

### Off Page Reference [23872]

Workflow Link: Pharmacy - Pharmacist Order Verification

Comments: The standard workflow should be that phase II medications are

verified by pharmacy. However, in the event that surgery is taking place during off-hours when a pharmacist is not available, the nurse should have the ability to document on un-verified meds.



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#### **Facilities:**

Facility Name: Niagara Falls Site

Status: Approved

Facility Cerner Owner: Kearns, Caitlin M

Facility Client Owner: Boichuk (Doan), Kristen Rachel

Authorize Date: Mar 04, 2024

Facility Comments:

Facility Name: St. Catharines

Status: Approved

Facility Cerner Owner: Kearns, Caitlin M

Facility Client Owner: Boichuk (Doan), Kristen Rachel

Authorize Date: Mar 04, 2024

**Facility Comments:** 

Facility Name: Welland

Status: Approved

Facility Cerner Owner: Kearns, Caitlin M

Facility Client Owner: Boichuk (Doan), Kristen Rachel

Authorize Date: Mar 04, 2024

**Facility Comments:** 

