



Future State: Perioperative - Medication Administration

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

Last updated by Kristen Boichuk (Doan), Mar 22, 2024 10:43am (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 non-profiled, 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/documentated?

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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: The preop 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. *** NOT SURE THIS IS APPROPRIATE***

Work Step [24107]

Description: Submit a Medication Request to Pharmacy

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 (Ophthalmology/ 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

Comments: For state's that require dual verification, the nurse's badge barcode can also be scanned.

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 constituted 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/documentated?

Work Step [23950]

Description: Close the MAW

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Work Step [23645]

Description: End of Medication Administration Process

Method: PowerChart

Off Page Reference [24199]

Workflow Link: Perioperative - Procedural Sedation (Ophthalmology/ 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 it
Witnessed by field: Witness for certain medication classes
Comments: Use to denote who constituted the medication if not the performing by.

Swim Lane:Role(s): Surgeon
Proceduralist

Department(s):

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Security Position(s):

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 PowerPlan

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Work Step [24149]

Description: Retrieve appropriate medications to be administered

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/documentated?

Work Step [24161]

Description: Close the MAW

Work Step [24162]

Description: End of Medication Administration Process

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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 non-profiled, 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?

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Work Step [22216]

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.

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?

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Work Step [23977]

Description: Document initiation via the MAW

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

Method: Interactive View

System [24019]

Description: Rate changes made update automatically to the MAR

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 and epidural assessment in the "Epidural" section of the Periop Lines-Devices band in iView

Method: Interactive View

System [24018]

Description: Rate changes made update automatically to the MAR

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

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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: The PACU 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 [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 should have the ability to document on un-verified meds.

Off Page Reference [24136]

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

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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

Method: Interactive View

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 infusion should follow the standard order & scanning process.

System [23767]

Description: Rate changes made update automatically to the MAR

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 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.

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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 non-profiled, 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/documentated?

Work Step [23943]

Description: Close the MAW

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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

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.

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:

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

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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: