

# Overview: Guide to EMR Downtime Medications Management

## Administration

	Downtime Medication Report	Relevant paper form
Administration documentation	Yes - Used in the first instance for documenting administration	Transcribe to relevant paper form if: <ul style="list-style-type: none"> <li>changes or</li> <li>new order or</li> <li>inadequate space for ongoing documentation</li> </ul>
Blood administration	No - Order can be accessed from Downtime view "patient care results "	Yes - Transcribe at beginning of downtime on to relevant paper forms (2 nurse signature)

- If orders are unreadable or require clarification staff can access the Medication Transfer Report from the desktop icon of the downtime viewer. It is not recommended that this is printed to prevent dual orders

## Ordering

	Downtime Medication Report	Relevant paper form
New orders	No new orders to be documented on the Downtime Medication Report	All new orders to be prescribed on relevant paper order forms
Changing orders	Mark as 'ceased' on Downtime Medication Report	Document changed order on relevant paper order forms

- Medication History and discontinued medications can be accessed in the Downtime Viewer as required
- Orders can be verified by accessing the Medication Transfer Report from the desktop icon of the downtime viewer. It is not recommended that this is printed to prevent dual orders.
- Please see the downtime coordinator if you need to access the Downtime viewers to print additional information

## Patient Movement

	Downtime Medication Report	Relevant Paper Forms
Inter-ward or department transfer	Yes – remain in end of bed chart	If in use – remain in end of bed chart
Patients transferred out of theatre	Yes – remain with patient	If in use remain with patient including: <ul style="list-style-type: none"> <li>print out report from SAA anaesthesia (if req)</li> <li>Other forms if in use</li> </ul>
Inter-hospital transfer	Yes – photocopy to be sent with patient	Yes – photocopy to be sent with patient
Discharge	Scanned post discharge	Scanned post discharge (if req)

Paper PBS script pads to be used for prescriptions for discharged patients or OPD script requirements

## Detailed: Guide to EMR Downtime Medications Management

<b>Discontinued medications prior to downtime</b>	<ul style="list-style-type: none"> <li>• Accessible from the Downtime Viewer and printable if required.</li> <li>• See Downtime Coordinator to print</li> </ul>
<b>Administration: PRN Medication Administration</b>	<ul style="list-style-type: none"> <li>• PRN medications orders can be administered from the Downtime Medication Report however where multiple doses are required there is the option to transcribe order on to paper</li> <li>• These orders must be marked as “transcribed to paper” on the report with the date and a 2 nurse initial</li> </ul>
<b>Access to Medication Orders</b>	<ul style="list-style-type: none"> <li>• Print the Medication Downtime Report upon commencement of Downtime</li> </ul>
<b>Allergies: existing</b>	<ul style="list-style-type: none"> <li>• A list of patient allergies can be seen on the Downtime Medication Report</li> <li>• An allergy sticker should be placed on the Downtime Medication report if an allergy is identified</li> </ul>
<b>Allergies: new or unidentified</b>	<ul style="list-style-type: none"> <li>• Can be written on the Downtime Medication Report or relevant paper forms.</li> <li>• An allergy sticker should also be placed on the relevant form</li> </ul>
<b>Blood &amp; blood products Administration</b>	<ul style="list-style-type: none"> <li>• From commencement of downtime all blood related orders should be transcribed and managed on the <b>Fresh Blood Component Transfusion Prescription and Administration Record</b>.</li> <li>• These new orders should state “downtime order transcribed” , with 2 nurse initial</li> <li>• Staff can continue to refer to the Routine Transfusion form as required</li> </ul>
<b>Blood &amp; blood products Ordering</b>	<ul style="list-style-type: none"> <li>• From commencement of downtime all new blood related orders should be documented on the <b>Fresh Blood Component Transfusion Prescription and Administration Record</b>.</li> <li>• Nb Order blood products on Pathology Queensland Transfusion Request form</li> </ul>
<b>Changing existing Medication orders</b>	<ul style="list-style-type: none"> <li>• New orders must be documented on the relevant paper form.</li> <li>• If changing an existing order the downtime report must be ‘CEASED’ (with initial and date)</li> </ul>

<b>Discharge during downtime</b>	<p>Discharge scripts will be completed on the paper PBS script pads and dispensed from Pharmacy.</p> <ul style="list-style-type: none"> <li>Document in <b>Progress Note</b> "Patient discharged at (x) hours. Refer to paper documentation including downtime report. Downtime was commenced at (y) hours"</li> </ul>
<b>Discontinued medications prior to downtime</b>	<p>Accessible from the Downtime Viewer and printable if required</p>
<b>Epidural and Regional Infusions</b>	<p>Epidural &amp; Regional Infusion orders are viewable on the Medication Downtime Report</p> <ul style="list-style-type: none"> <li>If bag changes, boluses given or changing orders is required this should be documented on the <b>IV Patient Controlled Analgesia Orders Form</b> (2 nurse witness)</li> <li>If an order from the Downtime Report requires clarification, information can be accessed and verified from the <b>Medication Transfer Report</b>, which is accessible from all DTV PC desktops.</li> <li>It is not recommend the Medication Transfer Report is printed.</li> </ul>
<b>Heparin Infusions</b>	<p>Heparin orders are viewable in the Medication Downtime Report. Refer to Pathology order for APTT due.</p> <ul style="list-style-type: none"> <li>If syringe change, rate changes or APTT taken documentation should be transcribed on to the <b>Heparin Intravenous Infusion Order and Administration</b> form.</li> </ul>
<b>Insulin Infusions</b>	<ul style="list-style-type: none"> <li>Infusion order viewable on Medications Downtime Report</li> <li>Ongoing documentation can be performed on the <b>Insulin Intravenous Infusions Order and Blood Glucose Record</b>, (2 nurse initial transcription of order)</li> <li>BGLs should also be recorded on this form</li> </ul>
<b>Inter hospital transfer during downtime</b>	<ul style="list-style-type: none"> <li>The Downtime Report and any paper documentation to be photocopied for transfer.</li> <li>It is the task of the transferring RN to ensure all orders are legible and handed over .</li> <li>Document in Progress Note "Patient transfer to (insert facility) at (x) hours. Refer to paper documentation including downtime report. Downtime was commenced at (y) hours"</li> <li>Standard scanning post discharge to occur</li> </ul>
<b>Medication administration of existing orders (all routes)</b> <i>Except: s/c insulin, insulin infusion</i>	<ul style="list-style-type: none"> <li>Documented and signed for the downtime report</li> <li>PRNs suitable for first dose however transcription on to paper may be required</li> </ul>
<b>New Medication Orders</b>	<p>All new medication orders placed during a downtime are to be documented on to the relevant paper form.</p>

<p><b>NIKI Pump Infusions</b></p>	<p>NIKI Pump orders are viewable in the Medications Downtime Report</p> <ul style="list-style-type: none"> <li>• If syringe change or order change is required this should be documented on the <b><i>Subcutaneous Medication Infusions Device Chart</i></b>.</li> <li>• If an order from the Downtime Report requires clarification, information can be accessed and verified from the <b><i>Medication Transfer Report</i></b>, which is accessible from all DTV PC desktops.</li> <li>• It is not recommend the Medication Transfer Report is printed.</li> </ul>
<p><b>Patient Controlled Analgesia (PCA)</b></p>	<p>PCA orders are viewable on the Medication Downtime Report</p> <ul style="list-style-type: none"> <li>• If bag changes, boluses given or changing orders is required this should be documented on the <b><i>IV Patient Controlled Analgesia Orders Form</i></b> (2 nurse witness)</li> <li>• If an order from the Downtime Report requires clarification, information can be accessed and verified from the <b><i>Medication Transfer Report</i></b>, which is accessible from all DTV PC desktops.</li> <li>• It is not recommend the Medication Transfer Report is printed.</li> </ul>
<p><b>Subcutaneous Insulin Administration</b></p>	<ul style="list-style-type: none"> <li>• Insulin order viewable on Medication Downtime Report</li> <li>• Ongoing documentation can be completed on the <b><i>Insulin Subcutaneous Order and Blood Glucose Record</i></b>, (2 nurse initial - transcription)</li> <li>• BGLs should also be recorded on this form</li> </ul>
<p><b>Transfers within the hospital</b></p>	<p>The Downtime Report and any paper documentation are to remain with the patient in the end of bed chart.</p> <ul style="list-style-type: none"> <li>• It is the task of the transferring RN to ensure all orders are legible and handed over</li> </ul>
<p><b>Variable dose administration</b></p>	<p>Document administration and sign on the downtime report</p>