



T | P SHEET Nursing Student and Nursing Instructor Guide

Student:

 Log into Epic into the department you are working today; and make sure to choose your nursing instructor. This is the individual from your school. This will allow the medication administrations to be sent to the instructors for <u>cosignature</u>.



- 2. You will open to your patient list workspace. This is where you will work with the staff RN to care for the patients. The two major activities are MAR and Flowsheets.
- 3. Go to the flowsheets now.

Epic -	Rannel Loonage III Ton	o Baard (ED)	undergen view El Cecanice, barra	lapori i	
Abertam, Ca Maie, 26 y.e., 2/ MITIN 23200000 CENY 10000128	Abertan, Carter ANBR arter-RNMGR 20/1992, 10 10 610	Current Facilit Unit: M38 Dect. TRN IPC Patient Locate	y Martio. Atomiting Whitecool, Walt Come Traver, Notes D Carter . Policet Cours, legativet on Notes	Altergrei, No Kno Int Code: Nation file Inc	ector: None My Virtue Inactive None Active Hume Care
+++	Flowsheets				
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Sammary	VIM Complex Acta	out mente	Tr'Assessment Cares/Safety Screening	s Blood Wound Asse	u/Care Best Practice Bundles
Charl Review Results Revi.	VTAL SDAS		Accordian Espanded View At	2/27/18	2/28/18
Work List	CREATE	+ 60 ₩	Vital Signs	1145	0826
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Notes Education Care Plan Navigators			Oxygen Therapy Chypen Therapy 5x02 Chypen Therapy Store Caphography Patient Actualy Sp02: Inco Counted (Sight Hand) Sp02: Pourtburdli & Hi Hand) Sp		
- Custorida			Acceptable Confort Level Numerics	1	





TIP SHEET

4. Afte	er documenting	in the flow	sheet, you	u will see y	our docum	entatio	on as pictu	red below.	
Flowshe	ets								
⊟ Pend	₽ _ ₽ _ Add <u>R</u> ows Add L[DA Cascad	e Add <u>C</u> o	n∔n ol <u>I</u> nsert Col	ංදි Data Validat	e Hide	o [©] Device Data	↓ mi L <u>a</u> st Filed	R
Vitals Con	nplex Assessment	I/O IV Ass	essment (Cares/Safety	Screenings	Blood	Wound As	sess/Care Best	t Pr
C	osign Report	Ac	cordion E	xpanded V	ïew All				
	Hide All Show	/ All					2/27/18	2/28/18	
VITAL SIGNS	*						1145	0839	
Vital Sign	S	Vita Vita	l Signs						
OXYGEN	*	BMI	(Calculated)				24.3		
PAIN	*	✓ Tem	р				37.8 (100)	36.7 (98)	
HEIGHT/WEIG	нт 🖌	✓ Tem	p Source				Oral	Oral	
OBSERVATION	IS v	Hear	t Rate			1	94	84	
	~	Hea	t Rate Sourc	ce				~	
		Resp)				18	20	
		BP				1	125/51	119/74	
		BP L	ocation					Right arm	
		BP N	1ethod					Automatic	
		Patie	nt Position					Lying	
		MAP	(mmHg)						

Within the flowsheets activity, you are able to document in a PENDED state. You will notice that in the top left corner of the workspace, there is a PEND button. Other users will have FILE stated here.

- 5. Navigate to the MAR. This is where you will document medication administration. Every administration will require a dual sign from the staff RN.
 - a. As you can see in the administration window below, you will see the MAR with Benadryl listed as able to be given soon.

×	ALL Scheduled PRN Continuous Respir Go to Now or Select Date: Image:	atory Due/Overdue Meds	Override Pulls Chemo	Running Infusions		Show I
Summary	Wednesday February 28, 2018					
Chart Review	▲ 0400 0500	0600	0700	0800	0900	1
Results Revi		1	1	10000	1	
	diphenhydrAMINE (BENADRYL) 25 mg in s	odium chloride 0.9 % 50 ml	IVPB : Dose 25 mg : 200	mL/hr : intravenous : Once		
Work List						
Ê.	Ordered Admin Amount: 25 mg					
MAR						





TIP SHEET

When scanning the patient and the medication, you will be brought to the medication administration window.

Epic -	Patient Lookup 📔 Track Board 🔚 OR/Procedural Are	as 📔 Calculator 🔎 N	ly Reports					2	😌 🤌 🔒 Print 🕘 Log Ou
12 🕅 🗔	Abertam,Carter-RNMGR ×								ACE1 Q Search
Abertam, Cai Male, 26 y.o., 2/2 MRN: 232000001 CSN: 100001266	arter-RNMGR Current Facility: Marito Atte 27/1992, 1 Unit: M3S Car Bed: TRN IPCD Carter Pat 610 Patient Location: None	nding: Whitecoat, Walt e Team: None ent Class: Inpatient	Allergies: No Kno Code: Not on file	Infection: None Isolation: None	My Virtua: Inactive Active Home Care Episode: N	Admit Date: 02/27/2018 Length of Stay (Days): 1 Height: 1.88 m (6' 2") Weight: 85.7 kg (189 lb)	Core Measure: None Collection: Lab	Precaution: None PCP: None Last BSA: 2.12 m ²	Primary Ins.: None
+ $+$ $-$	MAR 📿 🗏 Report 💵 MAR Note 🧏 Messages	Legend 🎢 Show A	II Actions 📲 Cosigne	r 🕅 Lin <u>k</u> Lines					0 Z
-	Documented By: IP/ED, NURSING STUDENT		Schedu	ile Date/Time: 02/28	18 0830				Document for Another User
Summary	Infusion								
Chart Review	× diphenhydrAMINE (BENADR	YL) 25 mg in s	odium chlori	de 0.9 % 50	mLIVPB : Dose 25 mg :	200 mL/hr : intravenous	: Once		R,
Results Revi	9 !! =			Action		Date: Time:		Comment	
Work List	Ordered Admin Amount: 25 mg Frequency: Once Route: intravenous			New Bag Route:	~	2/28/2018	4	Enter Comment	
MAR .	Order Dose: 25 mg Ordered Infusion Rate: 200 mJ/hr Infused Over: 15 Minutes Administration Window: 60 minutes Priority: Routine Order ID: 581595	from the due time		intravenous Dose: 25 m	g	Rate: 200 mL/hr	Q	Infused Over: 15 Minutes	Q
2	Administrations Remaining: 0 (+1 in pro References: Lexicomp Pediatric Le	z/2//18 at 1215 gress) xicomp		Order Concer Request Cost	ntration: 0.5 mg/mL				
Flowsheets	Linked Line: Peripheral P	V 2/27/2018 Left Forearm	(This Admin)	INPATIENT	NURSE				
Intake/Output	Recent Actions 02/27 1215 Due								
Education	Mixture Components								
Education	Component diphenhydrAMINE 50 ma/mL soln	Type Medications	Amount 25 ma						
Care Plan	sodium chloride 0.9 % solp	Base	50 mL						
Navigators									
More +							You are documenting	1 administration. 🗸	Accept X Cancel
	N700								0.20.41

After administering the medication, there is a dual sign window. This is where the staff nurse you are working with that day will sign off on the administration.

Epic 1	Matient Lookup 1 🗮 Track Board 🔚 Okymrocedural Areas	B Calculator M My Ket	snoc					ピ VØ 4	🖌 🛱 Huut 🔸 🕞 nog Ont
4E 🖄 🗔	Abertam,Carter-RNMGR ×								ACE1 Q Search
Abertam, Can Male, 26 y.o., 2/2 MRN: 23200001 CSN: 100001266	rter-RNMGR Current Facility: Marito Attent Z7/1992, 1 Unit: M38 Care Be6: TRN IPCD Carter Patient Location: None	ding: Whitecoat, Wait Ali Team: None Co It Class: Inpatient	ergies: No Kno ode: Not on file	Infection: None Isolation: None	My Virtua: Inactive Active Home Care Episode: N	Admit Date: 02/27/2018 Length of Stay (Days): 1 Height: 1.88 m (6' 2'') Weight: 85.7 kg (189 lb)	Core Measure: None Collection: Lab	Precaution: None PCP: None Last BSA: 2.12 m ^a	Primary Ins.: None
+ $+$ $-$	MAR 😂 🗏 Report 💵 MAR Note 🧏 Messages	Legend 🥂 Show All Actio	ons 📱 Cosigner	🕅 Lin <u>k</u> Lines					0 r
-				Dual	Signoff Summary				
Summary	Documented By: IP/ED, NURSING STUDENT		Schedule	e Date/Time: 02/28/1	8 0830				
Chart Review Results Revi	diphenhydrAMINE (BENADRYL) 25 mg in sodiu	m chloride	0.9 % 50 m	L IVPB : Dose 25 mg : 20	0 mL/hr : intravenous :	Once		P _x
	9 !! III			Action:		Date: Time:		Comment:	
Work List	Ordered Admin Amount: 25 mg Frequency: Once			New Bag	\sim	2/28/2018 0830			
i 🔁	Order Dose: 25 mg Order Dose: 25 mg Ordered Infusion Rate: 200 ml/hr Infused Over: 15 Minutes Administration Window: 60 minutes fro	m the due time		Route: Intravenous Dose:		Site: Rate:		Infused Over:	
1	Priority: Routine Order ID: 581595 Order Start Time: Yesterday 02 Administrations Remaining: 0 (+1 in progr References: Lexicomp	27/18 at 1215 ess)		Order Concent	ration: 0.5 mg/mL	200 mL/nr		15 Minutes	
Flowsheets	Pediatric Lexi Geriatric Lexi	comp comp		Request Cosig	n by:				
Intake/Output	Linked Line: Peripheral IV	2/27/2018 Left Forearm (This	Admin)	IN AILINI,	NOROL				
Notes	02/27 1215								
Education	Mixture Components								
Care Plan	Component diphenhydrAMINE 50 mg/mL soln sortium chloride 0.9 % soln	Type A Medications 25 Base 50	mount 5 mg 3 mi						
Navigators		5000 00	5 m2						
More +							You are verifying 1 a	administration. 🗸 Sign Off	X Cancel Signoff

After the dual signature is notated in Epic, the MAR appears as below.



Instructors:

As instructors, you will be co-signing documentation and medication administrations from the cosign report located in two places.

- 1. Log into epic to the unit where you are checking in with your students.
- 2. Enter the patient's chart by double clicking on the patient's name.
- 3. From the Summary activity, select the COSIGN report in the summary activity. You made need to use the magnifying glass to search for the cosign report and then using the wrench, add it as a button in your toolbar.
 - a. This report will give you all flowsheet and medication administrations that need to be cosigned by you, the nursing instructor.

+ + -	Summary								?∡
-	← C P E	Overview 🗏 Patient	Story 📃 Active C	Orders 📃 Chart Check/H	andoff 🗏 Blood	Transfusion More -	Cosign	ہ 🤉	۵
	lacktrian All Flowshe	eet Data Needing	Cosian						
Summary			<u>-</u>						
Chart Review	Cosign Request	or: Nursing Student	Ip/Ed						*
Results Revi	Vital Signs								
		02/28	/18						
Work List	Row Name	1501							
	Vital Signs	(0) 26 4 8	C /07						
	Temp	(P) 36.1 ° °F)	C (97						
	Temp src	(P)Oral							
T	Pulse	(P) 88							
MAR	Heart Rate Sou	rce (P)Monit	or						
	Resp	(P)16							
	BP	(P)110/7	0						
	BP Location	(P) Right	arm						
Flowsheets	BP Method	(P) Autor	natic						
	Patient Position	n (P) Lying							
Intake/Output									
	& Administra	tions with Cosign	Requests					Cosign all administrat	tionsl
Notes	- Automation	dons with cosign	nequests					cosign an administrat	lionsj
Education	Nursing Student I	ip/Ed						[Cosign all from this	user]
Care Plan	pneumococo	al polysaccharide (P	NEUMOVAX 23)	25 mcg/0.5 mL vaccir	ie		[C	osign all for this or	rder]
Care r han	0.5 mL								
0.1	Status: Comple	ted	2.1				D		
Orders	Action	Dose 0.5 ml	Kate	intramuscular	Site Left Deltoid	11me 02/28/18 1501	Requested Cosigner	IC.	sign
•	Given	0.0 1112		muamusculai	cert Denoid	02/20/10 1001	bebora nom, na	[00	agin





TIP SHEET

4. From the Flowsheets activity, this is how it will appear to all nursing instructors and staff RNs who have not validated the data put in by the student nurse.

Flowsheets								?
∏ <u>F</u> ile Ado	‡_ ੋ d <u>R</u> ows AddLDA	Cascade Add C	n∔n ol <u>I</u> nsertC	് Col Data Validate	∾ Hide Device Data	Last Filed Reg	a Doc Graph	Mor
Vitals Comp	lex Assessment I/C	IV Assessment	Cares/Saf	ety Screenings	Wound Assess/	Care 🛛 Best Practic 🕨	Vitals	2
Cos	ign Report	Accordion	Expanded	View All				
	Hide All Show All	< 1	.m 5m	10m 15m	30m 1h 2ł	n 4h 8h 24h	Based On: 0700 Re	eset Now
VITAL SIGNS	≈ 🗸				Admission (Cu	rrent) from 3/8/2		
Vital Signs	\checkmark				2/	/28/18		
OXYGEN	⇒ 🗸				1200	1501	Last Filed	
PAIN	⇒ 🗹	Vital Signs						-
HEIGHT/WEIGHT	× 🗸	Temp				36.1 (97)	37.2 (99)	
OBSERVATIONS	× 🗸	Temp Source				Qral	Oral	
	• —	Heart Rate				88	70	
		Heart Rate So	urce			Monitor	Popliteal	
		Resp				16	16	
		BP				110/70	130/60	
		BP Location				Right arm	Right arm	
		BP Method				Automatic	Automatic	
		Patient Positio	n			Lying	Lying	
		MAP (mmHg)						

5. You can validate the data in a few ways:

appears.

- a. Select the file button in the top right hand corner
- b. Highlight all of the cells with the slashed through them (indicating this information was pended by another user), and then right click > file selected
- c. Use the COSIGN report in the top of the table of contents in the flowsheet template.
 - i. This only appears is there is data within the flowsheet that needs to be cosigned.
 - ii. If this is how you would like to validate your data, select the report and the window below

II Flowsheet D	Data Needing Cosign —
osign Requestor	r: Nursing Student Ip/Ed
Vital Signs	
Row Name	02/28/18 1501
Vital Signs	
Temp	(P) 36.1 °C (97 °F)
Temp src	(P) Oral
Pulse	(P) 88
Heart Rate Source	(P) Monitor
Resp	(P)16
BP	(P)110/70
BP Location	(P) Right arm
BP Method	(P) Automatic
Patient Position	(P) Lying