amkai SOLUTIONS™
a subsidiary of Surgical Information Systems

AmkaiCharts

3.6 Features Document

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Contents

1 Introduction

Welcome to ***AmkaiCharts™ 3.6***. This release introduces many new features and functionality that will provide improved workflow and enhanced user interaction with the software. Please be sure to review this document in full so that you are aware of the new options as well as the modifications that may have been made to existing functionality.

Also, please be sure to make yourself and other staff familiar with the links under the HELP menu that will take you to ***AmkaiWiki***, ***AmkaiTracker***, and ***AmkaiCommunity***. If you have not yet registered for access to these great tools, please follow the instructions on the links for registering or contact Client Services for assistance.

As with all new release versions, administrators should be sure to check roles and permissions for new features as well as new reports that are added to the system with the upgrade and provide access to the staff that will make use of these enhancements. While this document is intended to inform users of all significant changes made to the software, all changes may not be reflected in the document. If you have questions, please do not hesitate to contact ***AmkaiSolutions™***.

2 New Features

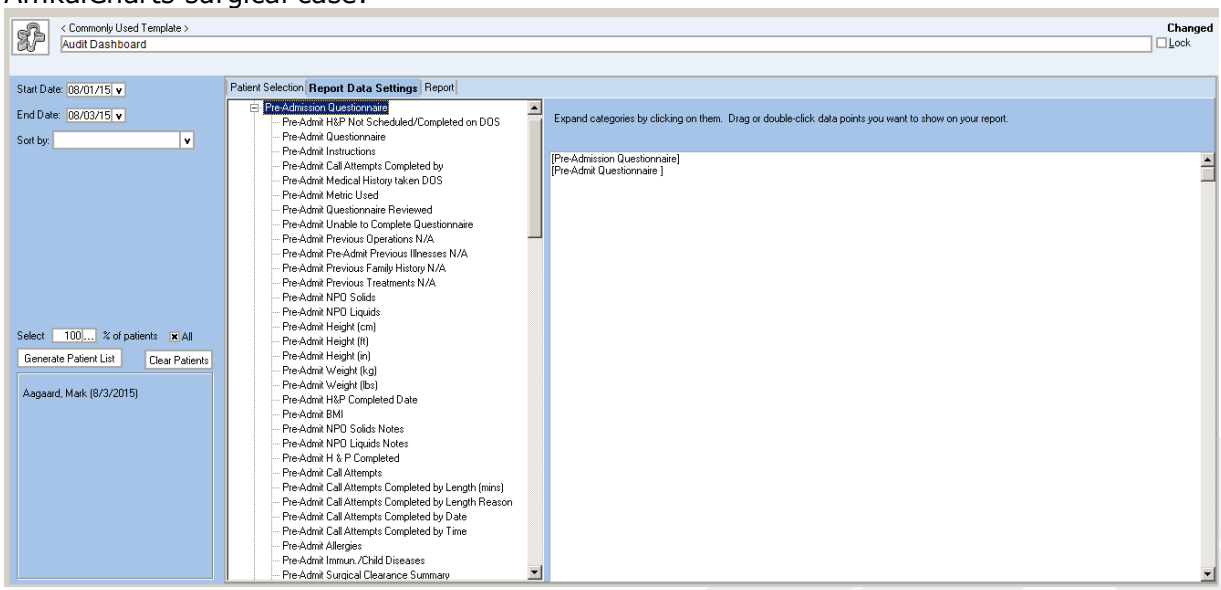
2.1 Features

2.1.1 Automated Case Documentation Management

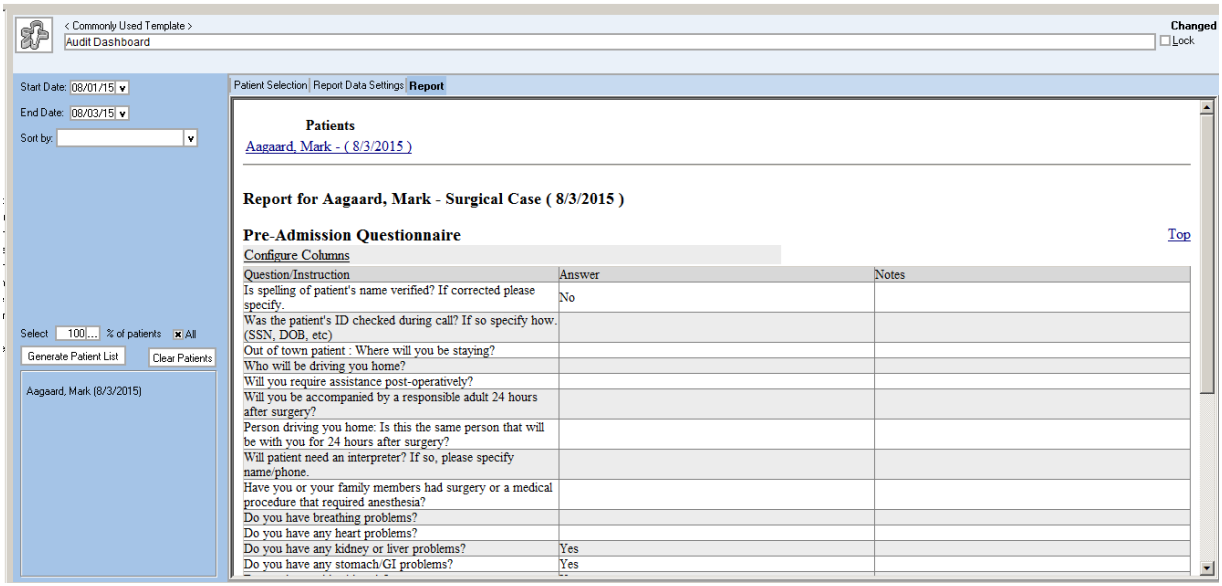
New preferences that will allow users to have the CDM automatically send out of AmkaiCharts at either or both during the patients discharge out of the facility and on electronic signing of the Surgical Case.
Automatically sending from recovery will not drop patients off of the CDM task lists. This intent is to get the discharge information out for billing ASAP while still allowing the case/department times to be verified afterward. There is a task list in AmkaiCharts "Discharge Patients Today" that can be used by a biller looking to update the CDM in AO as patients are being discharged throughout the day.
Users will still need to import the data in AO after this information has been sent from AC.

2.1.2 Customizable Audit Reporting Tool

There is a new form available in AC that can be created under the Commonly Used Templates section in AmkaiCharts called "Audit Dashboard". Users can customize an audit report to their liking by selecting data elements from everywhere in the AmkaiCharts surgical case:

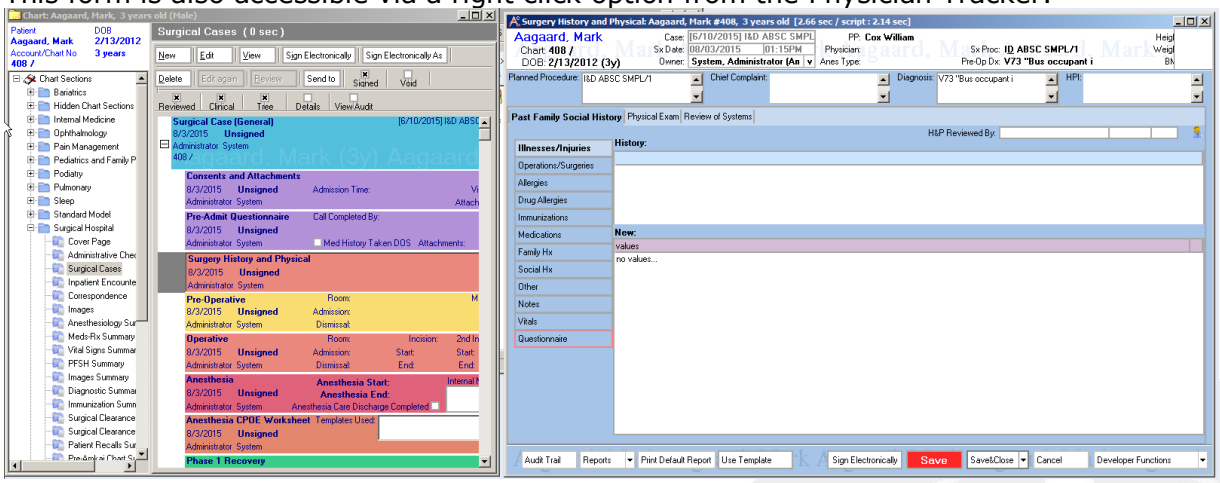


After selecting the data elements needed users can save the template and generate it whenever needed.



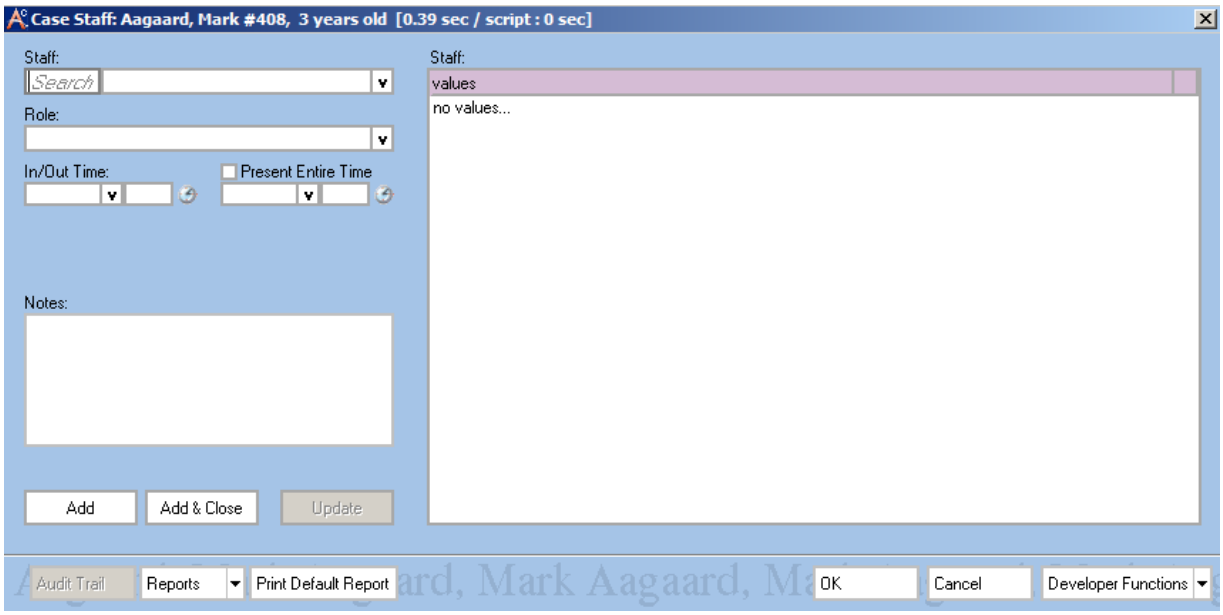
2.1.3 Same Day History and Physical

Users now have the ability to create a History and Physical inside of the AmkaiCharts surgical case packs. To create templates for the new History and Physical users can go to Commonly Used Templates -> New -> "Surgery History and Physical". These templates can be assigned per case pack and there is also now a section on the Default Surgical Preferences for global preferences that apply to this form.
This form is also accessible via a right click option from the Physician Tracker.



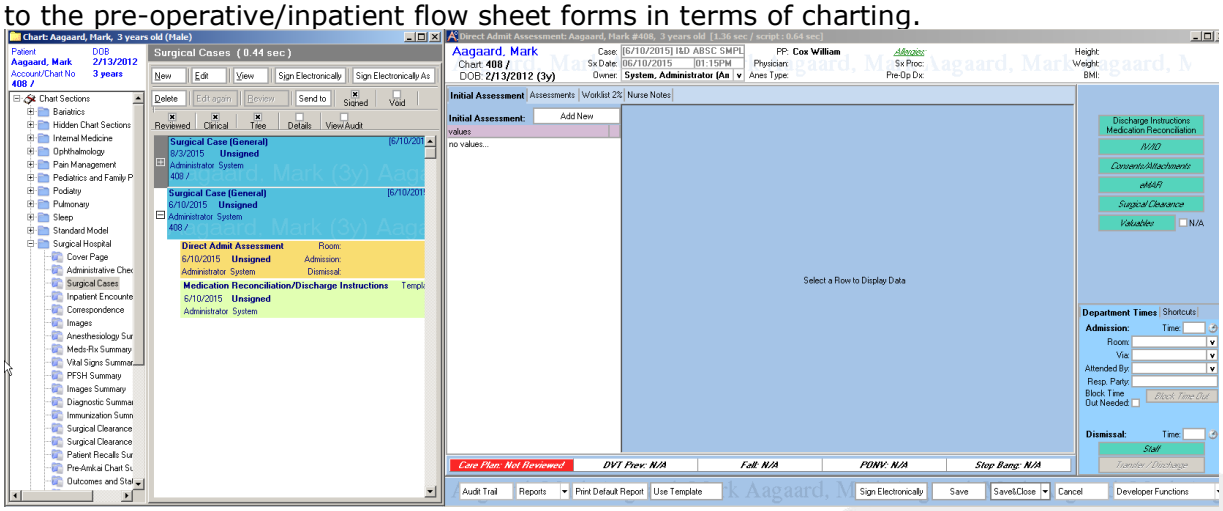
2.1.4 Staff Entry Improvements

There is a new console for adding staff in all areas of AmkaiCharts that allows users to quickly navigate through both Physician/Staff lists to add users applicable to a case.
The user who is doing the charting will have their name auto-populate into this console upon opening the staff button for the first time.



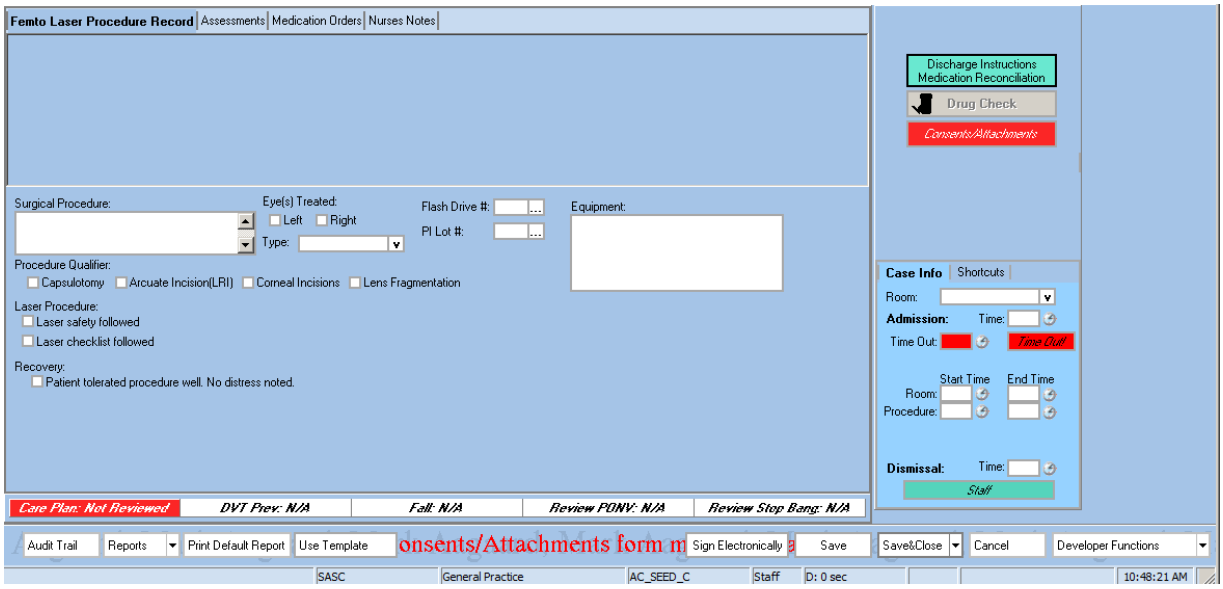
2.1.5 Direct Admit Encounter

There is a new Direct Admit encounter that is a part of the Surgical Case chart pack that can be used by Surgical Hospitals who accept direct admit patients. It is similar to the pre-operative/inpatient flow sheet forms in terms of charting.



2.1.6 Femtosecond Procedure Record

There is now a Femtosecond Procedure record for Eye Specialty facilities that offer these procedure to their patients. This encounter can be enabled under the Pre-Operative section of the Default Surgical Preferences:



2.1.6 Scheduling Grid Enhancements

Users can now see if a case pack has been created for a patient's case when viewing the appointment grid on the desktop of AmkaiCharts.

2.1.7 Restricted Charts Improvements

Users can now configure roles so that people trying to access restricted charts will receive notifications that the current chart is restricted before opening.
Users can now run audit reports on any restricted charts accessed within a given time frame.

2.1.8 Ability to Default GI Procedure checkbox on OR Templates

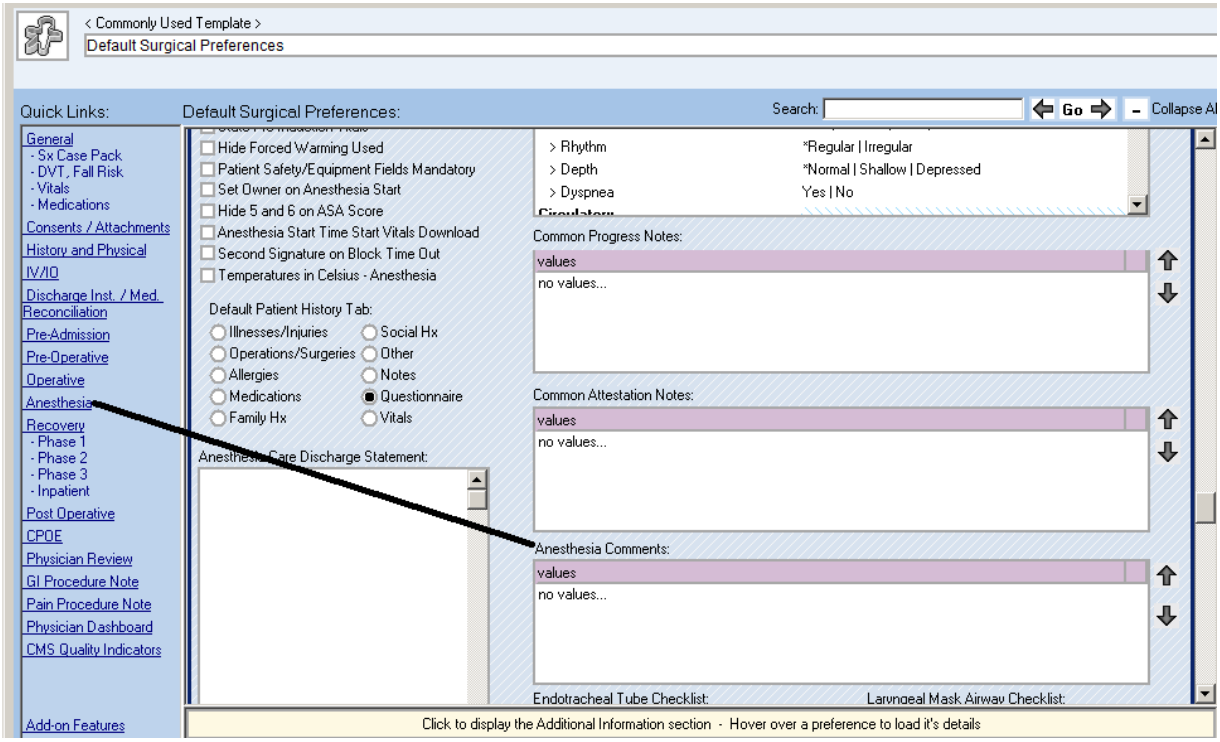
When creating operative templates the GI Procedure checkbox is now available to be set on the template side.

2.1.9 Ability to Default Laser OR templates on Case Pack Template

Users can now set an OR Laser template to be defaulted into the case pack during its creation.

2.1.10 Ability to Template Comments for Anesthesia on the DSP

Users can right click on the comments field on the anesthesia record and choose from a template list of comments to automatically fill the comments box so users don't have to manually enter the same comments every time.



2.1.11 Ability to Reconcile Questions into a Recalled Questionnaire

If any new questions have been added to the default question source (preference form or template) since the DOS of the questionnaire being recalled, users will have an option to append these new questions to the end of the recalled questionnaire.

2.1.12 Ability to Search when Using Templates

There is now a search feature built into the use template screen on the AmkaiCharts Nursing/Physician records.

2.1.13 Add Medications to Nursing Record Templates

Users can now add Medications to the Nursing Record Templates. These templates will not require a signature and will not flow to any unsigned orders task lists. This feature is useful for medications administered in the OR by a Physician that do not require a Physician Signature.

2.1.14 Add OR Work List Free Text Item to flow to Physician Review

There is a new OR panel hidden by default on the Operative Work List template. When data is added to it in OR, running reports on Physician Review will replace the tag "<Op Note from OR>" in the dictation text.

2.1.15 New EMAR Frequencies

Surgical Hospitals utilizing the EMAR encounter can now use Twice Weekly and Once per Week as supported frequencies for scheduling.

2.1.16 Ability to Handle Multiple Inbound HL7 Lab results on Specimen Tracker

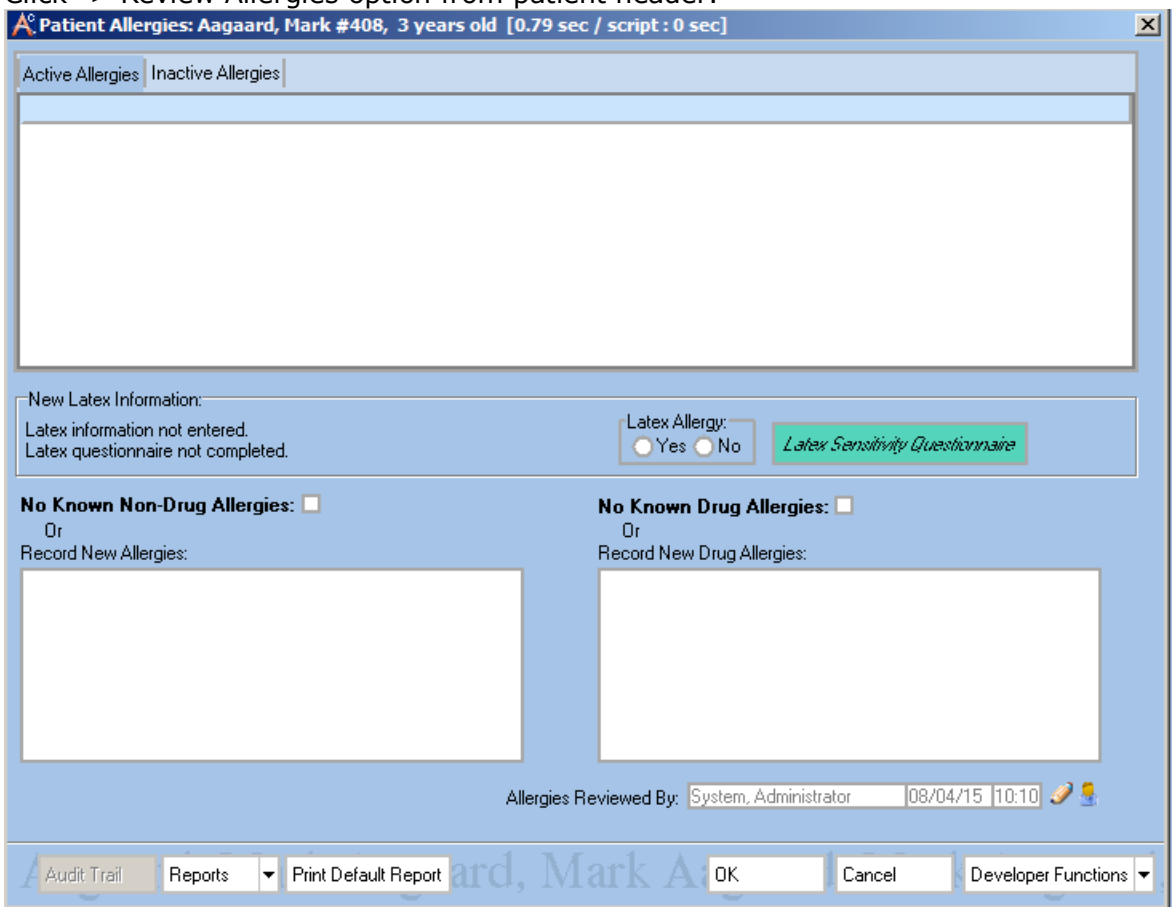
Multiple hl7 attachments can now be incorporated as lab results for Specimen Tracking

2.1.17 Add "Induction Time" to Intubation Area in Anesthesia

There are new fields for "Induction Time" in the intubation area and "Extubation Time" in the extubation area.

2.1.18 Allergies Document who Reviewed

There is a new field on the Allergies form that will display who reviewed the allergies per record. This will be filled in when opening the allergies form or by using the Right Click -> Review Allergies option from patient header.

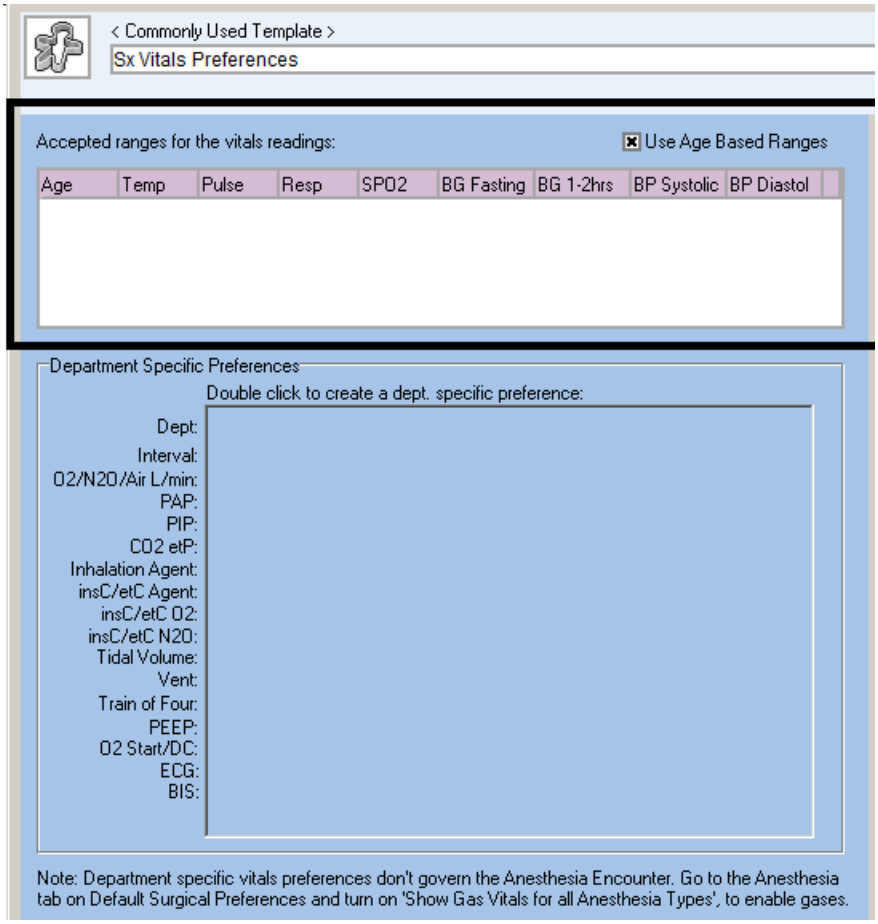


2.1.19 Allergy Display on patient header to Show All Pertinent Allergy Information First

The scrolling text for allergies at the top of each encounter will now always show allergies first before using any "No Known" verbiage. For example, if you chart an allergy to cats and then No Known Drug/Latex Allergies – The Scrolling text will just show the allergy for cats. If you open the Allergies form you can see the comprehensive information containing anything charted as "No Known".

2.1.20 Allow Acceptable Vital Signs Ranges for Pediatric Cases

Added the ability to customize vitals range preferences for any desired data range.



2.1.21 Allow Users to Acknowledge Allergies without Opening Allergy Form

Users can now right click on the scrolling allergy text and click a review option instead of being forced to open the form.

2.1.22 Anesthesia Needs Ability to Remove an Item from Patient History

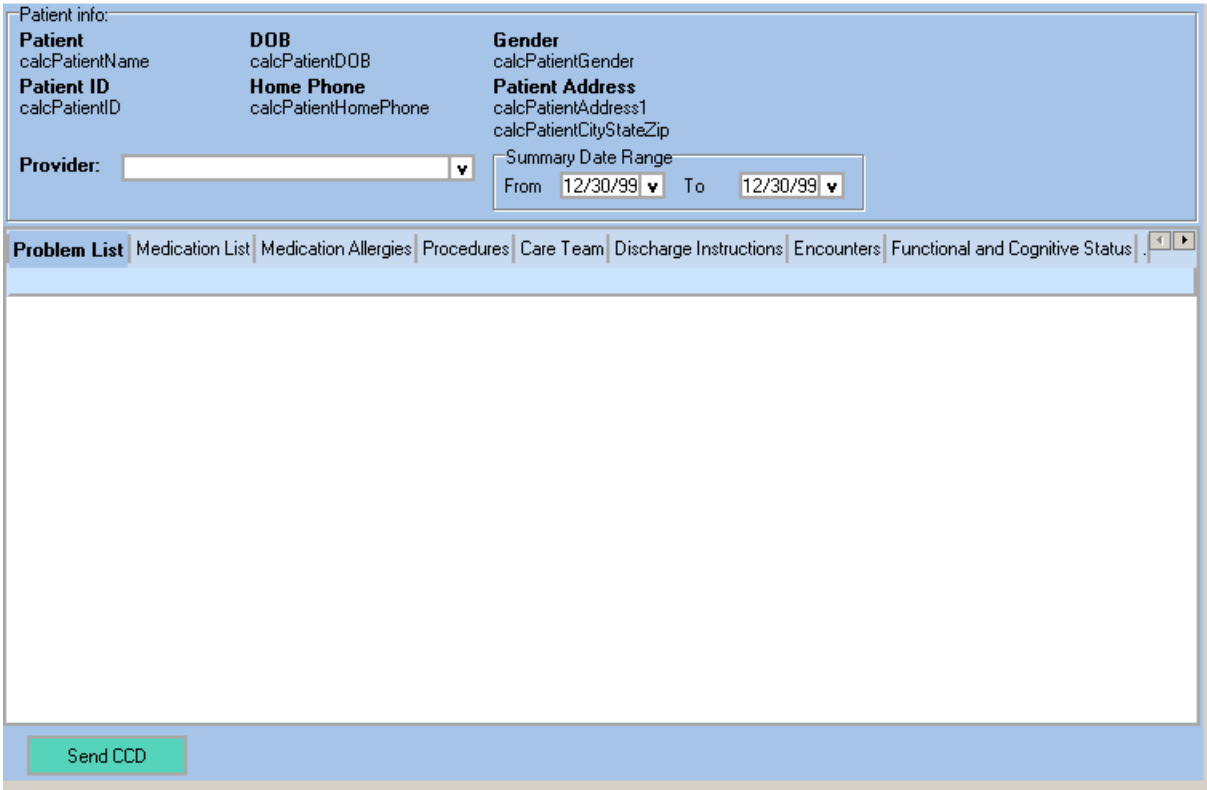
The Inactivate/Activate options are now available on the Patient History section of Anesthesia.

2.1.23 Automatically Pull Orders into Inpatient from Recovery

There is a new preference that will allow orders from phase 1 and phase 2 recovery to copy directly into the EMAR encounter for observation patients that are transferred to Inpatient.

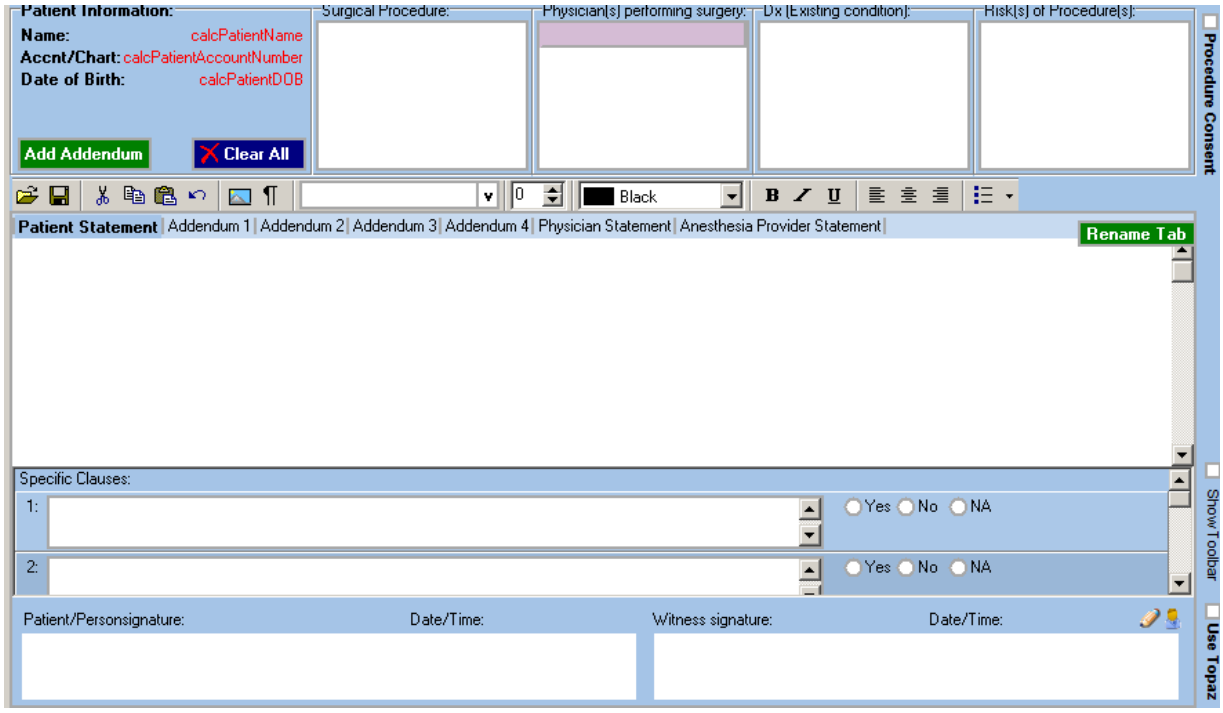
2.1.24 Outpatient CCDA Interface

There is a new CCDA encounter embedded into the surgical case that will send clinical data to AO that summarizes the patients stay so that AO can send an HL7 to an external facility. Please refer to Outpatient CCDA white paper for more information.



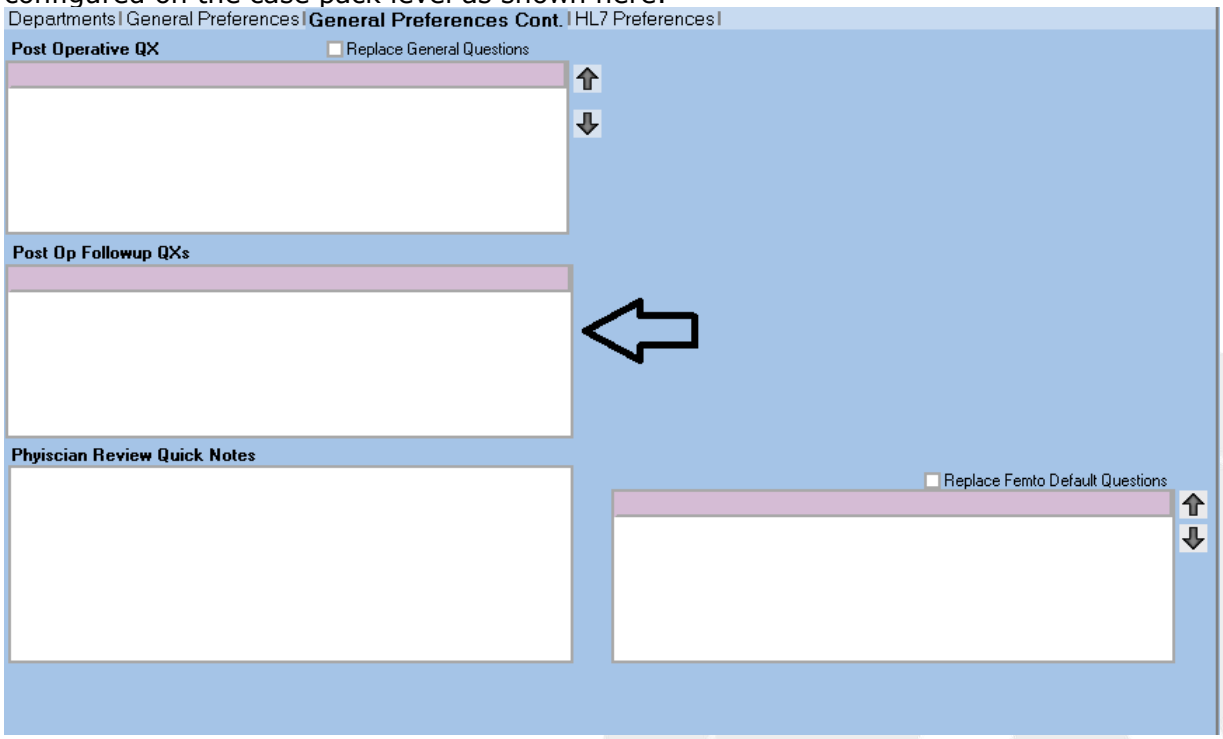
2.1.25 Consents with RTF Toolbar Formatting

You can now customize consent templates at creation or on the fly using the new Rich Edit toolbar. This will work for any text field on the consents form and will allow for features such as bold, italics, underline, colors, and more. You will need Microsoft® Word installed on the machine launching the AmkaiCharts client for the formatted text to print on reports.



2.1.26 Customizable Follow-up Questionnaires

Users can now create customizable 30/60/90 day follow up questionnaires for patients that require additional post-operative follow-ups. These preferences are configured on the case pack level as shown here:



The form is similar to the Surgical Post-Operative questionnaire and is created after the operative form is saved after an incision time is present.

There are task lists available to manage these labeled 30/60/90 days.

2.1.27 Inpatient Site Assessment Needs to Document who did the Assessment

There is now a field that will story and display who charted an Sx Site/Recovery assessment.

2.1.28 Preference to make Staff Button Mandatory in Nursing Records

There is now a preference that will make the staff button mandatory for all nursing records (Pre-Operative, Operative, Phase 1, Phase 2)

2.1.29 Option to Chart Warming Unit # as a Dictionary

The warming unit # can now be charted via an associated dictionary list as well as freehand.

2.1.30 NPO Solids Date to Show on Operative form

NPO Solids will now display inside the Operative Work List.

2.1.31 Need Existing Patient Implants field in Operative form

The Existing Implants field that is normally charted in the pre-admission questionnaire is now also available to be charted in the Operative Work List.

2.1.32 Preference to not Mark Call Completed when Patient Portal Interfaces Import

There is a new preference that will not mark the call as completed after a patient portal file comes over from our supported vendors.

2.1.33 Preference for OR Work list 100% Mandatory

With new "OR Work list 100% Mandatory" preference on, the OR will need to be 100% complete before being signed.

2.1.34 Preference for Anesthesia Care Discharge Time to Auto Populate Anesthesia End Time

Users can enable a preference to copy the anesthesia care discharge time to the anesthesia department end time.

2.1.35 Preference for Medication Reconciliation Approval Mandatory

There is a new preference to make physician approval mandatory for medication reconciliation.

2.1.36 Preference for Recovery Care to say "Extended Care" on Transfer/Discharge

You can now choose to have "Recovery Care" display as "Extended Care" when transferring to that department.

2.1.37 Preference for Combo Based Consent Clauses

Facilities can choose between using free text fields or drop down menus for special consent clauses.

2.1.38 Preference for Default Prep Dry Time

Users can now default a time in minutes for the "allowed to dry" field when charting prep.

2.1.39 Preference to add Medications Administer/ASA Score to GI Procedure Note Report

There is a new preference that will display all medications administered in the OR and also the ASA Class to the GI Procedure Note Report.

2.1.40 Preference to Hide Care Plan Button

There is a new preference that will allow users to globally or per case pack hide the care plan button throughout the nursing records.

2.1.41 Preference to Hide Add Medication Button in Pre-op/Recovery Areas

There is a new preference that will hide the new Add Medication button in pre-op/recovery for facilities that will only ever be using Orders/Verbal Orders in these areas.

2.1.42 Preference to Hide Inactive Orders on CPOE Reports

There is a new preference for the CPOE that will hide inactive orders that normally show up with a strike through the row on printed reports (Chart Note, Full Case Report, etc.).

2.1.43 Preference to Un-sign Med Rec Physician Signature as Non-Clinical User

Staff is now able to un-sign a physician signature in the Discharge Instructions when the preference is enabled.

2.1.44 Preference to Un-sign Physician Review Physician Signatures as Non-Clinical User

Users that have a staff role are now able to clear a physician's signature on the Physician Review encounter when the preference, 'Allow Staff to Clear Physician Signature,' is enabled.

2.1.45 Preference to make Reaction for Entered Allergies Mandatory

There is a new preference that will make the reaction data mandatory when charting a patient allergy.

2.1.46 Preference to make Vitals Mandatory for Anesthesia Care Discharge

Vitals Selection Mandatory to Sign Care Discharge has been added to the preference form. You'll get a warning if you try to sign until a vitals assessment is selected.

2.1.47 Preference to not pull Anesthesia Type from/to anywhere

There is a new preference that will prevent Anesthesia Type from defaulting to Scheduled Info and OR. Used for users who would like each Nurse/Provider to manually select Anesthesia Type for their cases.

2.1.48 Preference to not pull ICD9 Code in Diagnosis Fields

There is a new preference that will not pull in the diagnosis code for any form where the diagnosis is pulled from AO scheduling. With this preference enabled it will only pull the name of the diagnosis.

2.1.49 Preference to not pull Post-Op Dx to GI OP Note from Nursing Record

There is a new preference for the GI Procedure Note that will prevent the OR Post Op DX from pulling in to the record leaving the field blank for the Physician to modify.

2.1.50 Preference to print only Last Administered for Medications on Patient Handouts

Added a preference that will display the medications administered during stay on medication reconciliation with only the last time it was administered, a checkbox for discontinued (to write in), and comments (to write in).

2.1.51 Preference to remove "Report from Anesthesia" hard stop in Recovery

Users can define the fields 'Report from Anesthesia' and 'Report from Nurse' as mandatory or not mandatory in the Default Surgical Preferences.

2.1.52 Preference to remove Sign Electronically button

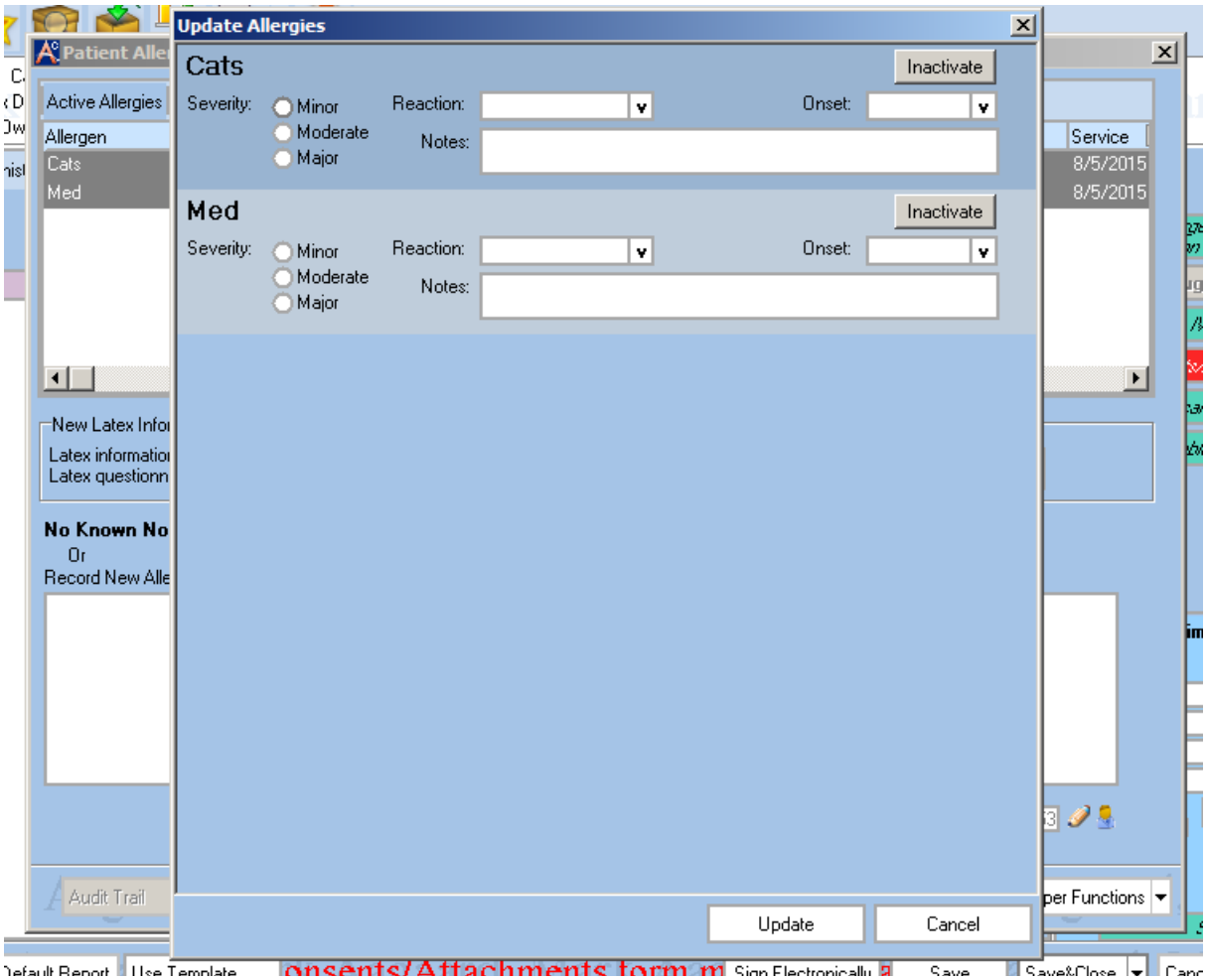
There is a new preference available in the General area of the Default Surgical Preferences that will hide the Sign Electronically button for all forms.

2.1.53 Q1 and Q2 Hours for EMAR

Users can now chart Q1 and Q2 frequencies by selecting the correct frequency and then checking the PRN check box.

2.1.54 Right Click Update for Patient Allergies Form

You can now select any number of active allergies and right-click "update selected allergies" to inactivate or update information for the selected items.



2.1.55 New Anesthesia Chart Note without Graph

There is a new report available from the Anesthesia Record called "Chart Note (No Graph)" which will run the full chart note without the graph at the end of the note.

2.1.56 Scroll Bar for Pre/Post OP Eval Categories

You can now add as many categories as needed to the patient evaluations in Anesthesia and the H&P Form. It will create a scroll bar to navigate to categories lower in the list.

2.1.57 Verbal Orders button in CPOE Mandatory

There is a new preference that makes signing Verbal Orders mandatory on the CPOE forms before being able to electronically sign off on the record.

2.1.58 Way to Track Urine Output as Foley in IV/IO Tracking

There is now a checkbox when charting an output to classify as a foley.

2.1.59 eMAR 24 Hour Chart Check

There is now a feature for inpatient users to perform a 24 hour chart check.

2.1.60 eMAR Ability to document a PCA Pump Order

There is now a feature for charting PCA Pump orders that will flow from the CPOE to inpatient medication administration record.

2.1.61 Total Fluids Infused now show on IV/IO Ribbon
The IV/IO ribbon will now display the total fluids infused for checking at a glance.

2.2 Reports

2.2.1 Add Scheduled Procedure to Laser Log Reports
When running the laser log reports the Scheduled Procedure from AmkaiOffice will now show.

2.2.2 Sx Cases by DOS Needs Batch for Regional Anesthesia
You can now select to run a batch report on the Regional Anesthesia Procedures report when using the Sx Cases by DOS.

2.2.3 Add All Signed Orders Column to Audit Report
A new column is available on the Audit Report which will show a percentage of all orders signed for a case (verbal and CPOE).

2.2.4 Add Attachments to the Medical Records – Surgical Cases (Upcoming Week) task list
There is a new column for the Medical Records – Surgical Consults task list that will show the attached documents and signatures from the consents/attachments encounter.

2.2.5 Add Medication Filter to Sx Meds Administered by DOS Report
A new report is now available that includes this filter called "Sx Meds Administered by DOS by Med".

2.2.6 CDC NHSH Monthly Reporting
A new report can be found under the surgery folder called "CDC NHSH Monthly Report". This report will show the CDC relevant information. To see the correct diabetes status column details you must have a custom question in the pre-admission work list with the text of "Diabetes and/or high blood sugar?".

2.2.7 Normothermia Report for ASCA Benchmarking Survey
There is a new report under the Administrative folder of the AmkaiCharts reports module that is available for running Normothermia CMS regulation reporting.

2.2.8 CPOE Orders Reports need Date Range Filters
We added reports that can be filtered by a set date range for the following task lists:
CPOE Unsigned Verbal Orders by DOS
CPOE verbal Orders Not Reade Back by DOS

If these task lists have become unmanageable because of the result size these reports can be used to grab certain date ranges as an alternative when searching through unsigned and not read back orders.

2.2.9 Add DOS Column to SX Cases by DOS Signed within 30 days
The SX cases by DOS Signed within 30 days report now shows a column for the date of surgery.

2.2.10 Physician Tracker (All Cases Next Week) Task List
There is now a Physician Tracker task list that will show all of the cases for the following week.

2.2.11 Sx Post-Operative Incomplete Questionnaires (Last Two Weeks) Task List
There is now a task list that will show any incomplete post-operative questionnaires starting at the current day back two weeks.

2.2.12 Remove Cancelled Cases from Surgical Cases by DOS Report
Surgical Cases by DOS no longer shows canceled cases.

2.2.13 Report by DOS displaying amount of attachments in Pre-Admission Questionnaire encounters
A new report is available which will show the number of pre-admit attachments. It can be found under the Reports by DOS > Pre-Admit Attachments by DOS.

2.2.14 Report by DOS listing detail for all Previous Illnesses/Injuries
There is now a report by sx DOS range in the surgery folder which will show all previous Illnesses/Injuries.

2.2.15 Sx Pre-Admission Task Lists Show Most Recent Call Attempt First
Contact Attempted By column now shows who made most recent attempt first.

2.2.16 Unsigned Encounters Task Lists Enhancements
We have removed cancelled cases from showing up on the Unsigned Encounters Mine and All task lists.

2.2.17 Unsigned Pain Procedure Notes Task List
Added new task list Unsigned Pain Procedure Notes. Shows Unsigned Pain Procedure Notes in descending order by DOS. Ability to right click and Sign Electronically from task list available.

3 Improvements

3.1 Overall System Improvements

3.1.1 User Interface Performance Enhancements
Performance enhancements made to CPOE/Medication forms that will reduce server side load. This will improve the overall feel of the system as case packs are being created throughout the day.
Default Surgical Preferences are now cached on the Application level. This change saves 1-2 seconds of client side load on all forms depending on the size of the facilities default surgical preferences form. **(Note: This means if you make changes to the default surgical preferences, we advise going forward that adjustments made to preferences be performed with the intent they are in effect on the next business day.)**
Performance improvements made on big queries that run throughout the facilities day.

Performance enhancements made for downloading user lists in Nursing Records. Enhancements should be more apparent in Physician Review, Medication Reconciliation forms load times and also on CPOE/Physician Trackers when signing orders.
Performance improvements made to History and Physical and Medication Reconciliation encounters when a lot of medications are present in the encounter.
Performance improvements to loading BMI and Patient Picture on patient header. Expect slight improvements to client side load on all forms.

3.1.2 'Administered By' Field Remains Sticky in Nursing Records until New User is Present in the Encounter

This feature will be seen when there are circulating nurses administering medications in the Pre-Op, Phase 1, and Phase 2 records. If a new user starts charting medications administered in any of these records, it will over-ride the last user charting and enter the new current users name in the 'Administered By' Field.

3.1.3 Case Snapshot Added to Discharge Instructions

The Case Review Snapshot is now available for review on the Discharge Instructions/Medication Reconciliation encounter.

3.1.4 Add Fluid Status (IVIO Totals) to Full Case Report

You can now see the IV/IO total patient input on the IV/IO Chart Note and Full Case Report in AmkaiCharts.

3.1.5 Add Immunizations to Inpatient Flow sheet

Surgical Hospital users can now chart immunizations on the Inpatient Flow sheet during the course of the inpatient stay.

3.1.6 Add Normal Button for STOPBANG Assessment

Uses can now hit a normal button on the STOPBANG assessment that will chart all of the default values as no.

3.1.7 Add Patient History to Full Case Report

The patient history section of the Anesthesia Record now prints with the Surgical Case Full Case Report.

3.1.8 Add Patient History to Questionnaire and Medication Reconciliation Report

The Questionnaire and Medication Reconciliation Report that prints from the Pre-Admission Questionnaire encounter now has the patient history charted in the questionnaire.

3.1.9 Add Tourniquet Time to Progress Record

The Physician Review encounter will now display the tourniquet times on the Progress Record page.

3.1.10 Add Verified and Instructions Given to Patient Portal Task Lists

The Pre-Admission questionnaire patient portal task lists will now display values for "Verified" and "Instructions Given".

3.1.11 Add Date of Surgery to Physician Trackers

All Physician Tracker flavors now show a column for Date of Surgery.

3.1.12 Add Orders Percentage to CPOE Ribbon
You can now see a percentage of orders signed per department on the CPOE ribbon without having to open the encounter.

3.1.13 Preference to Allow Anesthesia Care Discharge Date/Time to be changed
There is a new preference so that users can now manually edit the date/time field associated with the Anesthesia Care Discharge form.

3.1.14 Board Tracker Patients should Fall Off when Discharged from Facility
The board tracker task lists will now have patients drop from the list after they are discharged from the Facility.

3.1.15 Board Trackers need column for Anesthesia Pre-Op Eval Completed
The board tracker pre-op, GI, and OR task lists now have a column to show if the Anesthesia Pre-Op Eval has been completed.

3.1.16 New Physician Trackers that drop Discharge Patients
There are two new task lists for Physicians who would like cases to fall off their Physician Tracker as patients are being discharged:

Physician Tracker (My Cases Today without Discharge)
Physician Tracker (All Cases Today without Discharge)

3.1.17 Change "Sign All" to "Approve All" on Physician Trackers
The Physician Trackers now read "Approve All" and "Approve / Cancel" instead of using the word "Sign".

3.1.18 Default PONV Assessment based on Patient Gender
The first item in the PONV assessment is asking if the patient is female which will now be defaulted based on the patients AO demographics.

3.1.19 Adding Equipment Items Improvements
The Equipment form will not automatically pop up unless there is a relevant questionnaire that needs to be filled out.

3.1.20 Edit Again Reason Should Allow users to Bypass
You will not be forced to provide a reason for un-signing an encounter when using this preference.

3.1.21 Equipment Used Window Resizable
The equipment used field in the Operative work list will now automatically re-size if there are enough items to cause a scrollbar to appear.

3.1.22 Physician Tracker open to Chart and not Surgical Case
The physician tracker will now open to a patients chart when a row is double clicked instead of opening all the way up to the patient's surgical case.

3.1.23 Increase Size of Physician and Staff entry fields
The size of the staff list now fits 14 entries that are visible to the user and the Physician list will support 8. Anything after this will create a scroll bar. Useful for facilities that have large lists of staff circulating departments.

3.1.24 Increase size of Staff Window in CDM Preview
The staff field on the operative panel of the update CDM preview window is now much larger to support more staff members before having to scroll.

3.1.25 Make Consents Form Resizable
The consents form is now resizable and will be liquid with the size of the users screen.

3.1.26 Make Time and Date of Block Time Out Signature Editable
The date and time fields of the Block Time Out can now be changed after being signed.

3.1.27 Med-Rec Panel Needed on Physician Tracker when No Home Medications used
You can now sign off on the medication reconciliation from the Physician tracker if the No Home Meds checkbox was used.

If nothing was charted, it will not show up with a medication reconciliation panel. It requires that something was explicitly charted on this page, but now Physicians can sign off on the fact that no home meds were given.

3.1.28 Update to Outbound Physician Review Interface
Outbound Physician Review HL7 Interface will now send both the progress record and dictionary textgen to AO.

3.1.29 Physician Tracker should Open Both GI OP Notes when applicable
Right click option on physician trackers now open both GI OP Notes if two have been created.

3.1.30 One Medical Passport (OMP) Patient Portal Interface Handle both Yes and No questions
When released with 3.5 this interface only handled questions answered as yes with the intent to trim the size of the questionnaire and only show pertinent information. We have changed this to now import all questions from OMP files regardless of the Yes or No answer.

3.1.31 OMP or Simple Admit Patient Portal Interface to Pull Clinically Sensitive checkbox flag
The OMP/Simple Admit patient portal interface now supports the use of the clinically sensitive checkbox that is in AmkaiCharts.

3.1.32 OMP or Simple Admit Patient Portal Discrete Data for Height/Weight/BMI
The Height/Weight/BMI now appears on the top of the Pre-Admission questionnaire as discrete date when imported via the OMP/Simple Admit patient portal interface.

3.1.33 OMP or Simple Admit Patient Portal Discrete Data for Latex Allergy
Importing latex allergies from either patient portal vendor will now write discrete data to the allergies form in AmkaiCharts

3.1.34 OMP Patient Portal Handle Free Text Home Medications
The OMP patient portal interface will now write free text home medications to the medication reconciliation form in AmkaiCharts.

3.1.35 OMP Patient Portal Drug Allergy Categories
Drug Allergy Categories used on the OMP patient portal interface will now write as discrete data to the allergy section of the AmkaiCharts pre-admission questionnaire.

3.1.36 OMP/Patient Portal Alcohol/Tobacco/Drug Use
Alcohol/Tobacco/Recreational drug use data sent down from the patient portal is now written to the corresponding fields in the Pre Admission Questionnaire in AmkaiCharts.

3.1.37 OMP Patient Portal: Past Illnesses/Injuries Mapping
Illnesses and Injuries sent down from the portal will now appear in the questions labeled "Newly Recorded Illnesses" and "Newly Recorded Injuries".

3.1.38 OMP or Simple Admit Existing Patient Implants Mapping
Existing patient implants sent down from the patient portal is now written to the hard coded panel in the Pre-Admission Questionnaire for existing patient implants.

3.1.39 OMP or Simple Admit Patient Portal Family History Mapping
Family history questions from the patient portal are now written to the field for "Newly Recorded Family History" in the Pre-Admission Questionnaire in AmkaiCharts.

3.1.40 Pre-Admission Attachments Available for Anesthesia Attachment Flagging
Attachments that are added to the pre-admission questionnaire form can now be flagged using the "Anesthesia Attachment" checkbox to have this flow to the Anesthesia Tracker and Anesthesia record for review.

3.1.41 PreOp Dx Code for Lab Requisition Form
Diagnosis code from Amkaioffice now pulls to the Pre-op DX on lab requisition that print outs from the Operative record.

3.1.42 Change to SSC Prompt in Operative
If users are not using the SSC Mandatory preference users are no longer prompted to complete the Safe Surgery Checklist when they chart an admission time in the OR. If the SSC Mandatory preference is turned on, there will still be a warning pop up every time the user clicks the OR admission advising to fill out the SSC.

3.1.43 Ability to edit Referring Physician on GI OP note
Users can now manually edit the referring physician on the GI Op Note if the information from AO is not correct.

3.1.44 Refresh Orders Button Enhancements
In the past the refresh orders button would only update new signatures applied to orders. This was confusing for users who were trying to go back and Un-sign/Change/Re-sign existing CPOE orders that were already loaded into the nursing record.
We updated the Refresh Orders functionality to sync all changes made to orders in the CPOE so now users can Un-sign/Edit/Re-sign orders and see these changes pull into the Nursing Record.

3.1.45 Remove "CPT" from All Labels in AmkaiCharts
The words CPT have been removed from all labels in AmkaiCharts.

3.1.46 Remove "Patient:" and "Address:" from Post Op Letter
Removed the "Patient:" and "Address:" lines from the post op letter with logo report.

3.1.47 Rx Report Needs Page Breaks
The Rx Report on Medication Reconciliation now prints one Rx per Page.

3.1.48 Lab Requisition Needs to check Physician Roles
The requesting Physician on the Lab Requisition report which pulls from the staff button in the OR will now check for a role that is either surgeon or physician.

3.1.49 Show Block Time Out Time Field on Regional Anesthesia Notes
We have added the time that the block time out was performed to the area on the Regional Anesthesia Note that shows who did the block time out.

3.1.50 Sx Site Assessment Values Only Editable by Original User
Sx Site Assessments will now work similar to how vitals and nurses notes work where only the original user entering the assessment can change what they charted.

3.1.51 Home Medication Column Change
The column name in the medication history field used is titled 'Take(n) DOS' now says 'Med Instructed/Taken Pre-Op'.