Instructions for Placing Order for CHPS Research Echocardiogram or Research Stress Echocardiogram

Please note that these instructions only apply if the images and report should be linked to the patient's EMR. See FAQ at end of this document for instructions if the report and images should be deidentified.

These orders CANNOT be used for echoes that will be performed through the clinical echo lab.

Follow your usual workflow for creating an encounter and navigating to the Order Entry activity.

- 1) Find the order(s):
 - The routine research echo order is "RESEARCH TRANSTHORACIC ECHO (TTE) COMPLETE" (Procedure Code CVECH80).
 - The research stress echo is "RESEARCH ECHOCARDIOGRAM STRESS TEST" (Procedure CVECH81).

RESEARCH ECHO P ference List	Eacility List	atabase
E Panels (No results found)		^
Yedications (No results found)		
☐ Procedures ≈		
Name Px Code Type Available Resulting Agencies		
RESEARCH ECHOCARDIOGRAM STRESS TEST CVECH81 Stress Echo		
Image: Market Research TRANSTHORACIC ECHO (TTE) COMPLETE CVECH80 Echo		
Image: Market Search TEE (NON-BILLABLE) (aka ECHO) CVTEE30 Echo		

You must search in the database to find them the first time (redbox).

2) Favorite the Echo order: This will allow it to appear in your personal preference list going forward, and will set your defaults (repeat this step for the Research Stress Echo if your studies use it).

Click on the STAR icon next to the remove button (blue box)

+ -	Place orders (Enc Date: 12/20/2018) - Wt: (Not entered for this visit) Ht: 5' 2" (1.575 m)	0 r
Chart Review	⊘ > E ✓ ✓ ✓ ✓ Association New Order Derived and Order Derived and Order Sine Order Sine Order	
Care Everywh	Association Material contractions relating formers correspond observations and the second statements	
MedView	New order: Search	Next Edit Multiple
Review Flows	Order mode: Per Protocol;Cosign Required 🔽 New order defaults Not using defaults	Love Contraction
Results Review	Procedures (1 Order)	
Synopsis	Research Transthoracic Echo (TTE) Complete 📕	🔕 🍬 🏠 🛛 Remove
Demographics	Ancillary Performed, Expected: 12/20/2018 Approximate, Expires: 12/19/2019, Routine 🛃 Expected Date: 12/20/2018	

There are 2 places to fill in expected date (red boxes) – please complete BOTH with the date the echo is scheduled. EPIC will allow you to place the order if blank, but it creates a major problem for us.

It is STRONGLY recommended that you set defaults for both fields in your preferences so that you do not leave them blank accidentally. In general, Laney's advice is to place the orders the day before the visit, so the default expected dates are for "S+1" (i.e. tomorrow) but you can choose any default that makes sense for your workflow.

Please set an expected time of 6am (green box) for all orders. If the patient reschedules for a different date after your order is signed, we will still be able to use the original order as long as it hasn't expired (blue box) – please note the order expected date on

the calendar so that the techs and reader can find it more easily.

Put "DO NOT BILL – CHPS RESEARCH ECHO" in the Comments section (black box)

Add To Preference List							
Orderable:	Research Transthoracic Echo (TTE) Complete [CVECH80	Pref <u>L</u> ist:	Orders	Ģ	>		
<u>D</u> isplay name:	Research Transthoracic Echo (TTE) Complete	Section:	Existing	₽ <u>N</u> ew	1		
⑦ Note Blank values will re	emain blank when this order is selected from your preferen	ce list.			^		
Expected Date: Expected Time: Status: Norm	S+1 06:00 AM mal Standing Future						
Expe Expir	ected Date: S+1 Today Tomorrow 1 Week a	2 Weeks 1 Mon	th 3 Months 6 Months Months 1 Year 15 Mo	s 🗹 Approx.	ļ		
Class: Ancill Priority: Routi Comments: DO	ary Pe Clinic Performed Ancillary Performed Hospit ine Routine STAT Image: State Sta	tal Performed E	(ternal		~		
			Accept	<u>C</u> ancel			

3) To Place the order

SEARCH ECH	0	Q				
					Bowse Preference List Eac lity List	t <u>D</u> ataba
Panels (No results found)					
Medication	ns (No results found)					
Procedures	s 🛪					
1	Name	Px Code	Туре	Pref List	Available Resulting Agencies	
<u>ث</u> ۱	Research Echocardiogram Stress Test	CVECH81	Stress Echo	SMITH, AMANDA M.'		
	Research Transthoracic Echo (TTE) Complete	CVECH80	Echo	SMITH, AMANDA M.'		

Once you have favorited the order, you will be able to select it from your individual preference list (red box). EPIC will remember your defaults.

New order: rese	Search		
Order mode: Per Protoco	tCosign Required ✓ New order defaults Not using defaults		Next Edit Multiple
Procedures (1 Order)			~
Research Transtho	acic Echo (TTE) Complete 📕	✓ <u>A</u> ccept <u>X</u> _ancel	Remove
Expected Date:			
Status:	Normal Standing Entry		
ototos			
	Expected Date: 12/20/2018 Today Tomorrow 1 Week 2 Weeks 1 Month 3 Months 6 Months Approx.		
	Expires: 12/19/2019		
Class:	Ancillary Pe D Clinic Performed Ancillary Performed Hospital Performed External		
Priority:	Routine 🖓 Routine STAT		
Comments:			
	DO NOT BILL - CHPS RESEARCH ECHO		
Sched Inst:	Click to add text		
CC Results:	Recipient Modifier Add PCP v		
	Add My List 🗸		
	Build My Lists		
	Ciear All		
Modifiers: Pick up to 4			~
Active Treatment Plans	CHEMOTHERAPY PLAN	Level of sector	Edt
> Diagnoses Associate		Level of service:	Edit

Double check that your default expected dates make sense for the individual patient. You can add recipients under "CC Results" (green box) to have the report routed to them as soon as it is completed.

Accept the order

Associate the order with diagnosis code Z00.6 (black box, you may choose additional diagnosis codes, but must always use this one). There are many diagnoses with that same code – as long as the code is correct, it does not matter which you choose, but be aware that the diagnosis and diagnosis code both appear on the echo report, which patients will be able to view in MyPennMedicine.

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Associate the order with your research study, and follow your usual procedure for routing the order to be signed.

4) <u>Update the Research Echo Core Lab (for Ground Rhodes) or Presby CTRC Echo (PPMC EMU) calendar in Outlook</u> By the time you bring a patient down for echo, the calendar entry should include the following:

Full name (exactly as it appears in EPIC)					•	
MRN: 9 digit HUP MRN	Subject:	CCT10000 JD v15				
UID: 10 digit EPIC ID (red box, used in	Location:					
Syngo)						
Accession #: 8 digit number associated	Start time:	Thu 12/20/2018	-	8:00 AM	✓ All day event	
with specific order (green box). The	End time:	Thu 12/20/2018	-	9:00 AM	•	
accession number will not populate until	Jane Doe					- Co
the order is signed.	MRN 999	999999				
See FAQ for what to do with patients who	UID: 1999	9999999				
will be consented day of echo	Accession	#: 12345678				
	Patient Select				x	
Search Criteria Name/MRN: Zztest						
Legal Birth Date Address SSN HUP	MCP PAH	CCH PPM	IC UID	6426		
			846348	4808		
			844486	7071		
← → ▼ Chart Review						
SnapShot Encounters Labs Imaging Procedures	Cardiology Med	dications Other Orders	Episodes I	_e		
Chart Review → CRefresh (3:08 PM) Elect All Deselect All	Revie <u>w</u> Selecter	d 📃 Master Report 🛛 🐺 La	ab Flowsheet 🛛 🐺 F	lo		
MedView T Eilters Hide Canceled						
Date Description		Status	Accession	S		
Today TRANSTHORACIC ECHO (TTE) FELLO	W PERFORMED	Tech Complete				

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Frequently Asked Questions:

1) Does the order need to be signed by the PI?

The echo lab needs the accession number and the accession number is not generated until the order is signed. The order <u>MUST BE</u> <u>SIGNED</u>, but depending on your study-specific workflow, it may not have to be signed by the PI. If you have a research nurse or co-Investigator who is able to sign orders for a particular study, then they can also sign the echo order.

The accession number is generated when a research nurse signs the order and does not need to wait for a physician to co-sign.

2) What if the order hasn't been signed when I am bringing the patient to the echo lab?

Please make every effort to have the order signed prior to arriving in the echo lab. However, we understand that that may not always be possible. If you absolutely cannot have the order signed before the patient arrives, we can still perform the echo. You will still need to provide the tech with the patient's name (exactly as it appears in epic) and with the UID.

In this case, the images will be stored in Syngo under your patient's record but will not be linked to your patient's chart in EPIC. The report will appear in the EPIC once generated, but <u>absolutely cannot be generated until the order is signed</u>. Please keep this in mind, especially for studies where you need a clinical read within a specific time-frame.

3) What do I do if the echo should not be linked with the patient's EMR (deidentified reports)?

If your protocol requires that the echo and report be created without PHI and not entered into the EMR, then you should not place an order in the chart. Continue to follow the current process of creating the Outlook calendar entry. The echo tech will create a record for your patient in Syngo under their study identifiers. Dr Ky will generate a report using only the study identifiers and will share the report with the appropriate study personnel.

4) What do I do if the patient won't sign consent until the day of the echo?

We will always strive to be respectful of your patients' expectations of privacy and rights under HIPAA, and we understand that the period between when a patient indicates willingness to participate in a study and when they actually sign consent. If you will not obtain consent until the day of the echo, there are 3 options listed below. Please discuss with your study team to determine which is most appropriate for your particular study, and reach out to Dr. Ky and/or Laney with questions. Allow time to sign the orders between obtaining consent and the start of the echo – this is the preferred option, but requires a research nurse or investigator who is able to sign orders on short notice.

• Associate the patient with your study in EPIC using the "Pre-Consent Screening" status. This is an active status, so you will be able to place the order and associate it with the study as usual. Indicate on the outlook calendar that pt has not yet signed consent, have the patient's name, MRN, UID, and accession number to give to the tech at the time of the echo, and update the calendar as soon as consent is signed.

Please be aware that once an order is signed, it advances automatically to the research tech and reader worklists, so anyone with access to those lists will be able to see that that patient has a research echo order. The techs won't be able to tell which study the Instructions for Placing Order for CHPS Research Echocardiograms V3.0 Prepared by: Laney Smith 12/19/18 Reviewed and approved by: Bonnie Ky

patient is on; it would not be immediately obvious to the readers, but they could find out if they went looking. If your patient declines consent after the order is placed, the only way to get rid of the order is to put in a ticket with IS to have it deleted – you and your study team would need to determine if that is necessary for a particular study or patient.

• If neither of the above is feasible, we can follow the procedures for question (2) – "What do I do if the order hasn't been signed when I am bringing the patient to the echo lab?"

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