

# Anesthesia Documentation

Quick Reference Guide



**SurgNet**  
*Anesthesia*



# Introduction

SurgiNet Anesthesia provides automatic methods to capture and report information as well as access to patient records and test results. This streamlines the anesthesia care process by allowing complete access to the information necessary to adequately prepare for cases, and accurately complete anesthesia documentation.

## Security

Patient confidentiality has always been a priority at AdventHealth (CFDS). By complying with HIPAA standards, we ensure the security of electronic information and protect patient privacy. AdventHealth (CFDS) closely tracks any user who has accessed a patient's chart. Always follow these steps to help ensure we do so:

- Never share your User ID or Password or use anyone else's
- Log-Off the computer before walking away – for any time period
- Do not access any charts that do not apply to your current caseload

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## Airway Management

Mask Airway Management	O2 Supplementation
LMA	Suctioning
Intubation	Bronchoscopy
Fiberoptic Intubation	Surgical Airway
ET Intubation w/Lung Isolation	Jet Ventilation

## Billing

Billing Modifiers

## Compliance

Attending Interval Notation	Disclaimer Note
Care Model/ Compliance	OR VAP Bundle
Clinician Handoff	PQRI

### End of Case

Extubation/Cont'd Airway Support	O2 Supplementation
Neuro Evaluation	Transport/Emergence

### Notes/Observations

Awareness Under Anesthesia	Other Occurrence
Freetext Note	Observation Outcomes

### O/B

Central Neuraxial Block	Pain Score
Delivery Time - Baby A	PCEA Change
Delivery Time - Baby B	PCEA Initial
Delivery Time - Baby C	Placenta Delivery
Delivery Time - Baby D	Position: Sitting L & D
Epidural Blood Patch	Pre-Existing Epidural
Epidural Catheter Disposition	Progress of Labor
Left Uterine Displacement	Uterine Incision Time

## Patient Care

Eye Protection	Monitors / Safety
Fetal Monitoring	Nerve Stimulator
Hemodynamic Acknowledgment	Neuro Evaluation
Intermittent Ventilation	NG/OG Tube Placement
Labs Drawn/Reviewed	Vital Sign Inaccurate Note
Laser Precautions	Warming Measures

## Perioperative Events

ACLS	Broncho/Laryngospasm
Air Embolism	Case Cancellation
Allergic Reaction	External Cardioversion / Defib
Aspiration	Hemodynamic Acknowledgment
Asystole	Internal Cardioversion/ Defib
Bradycardia	Intraoperative Death



## **Perioperative Events, cont'd**

Major Hypotension

Surg Compression of the Heart

Malignant Hyperthermia Guide

Surgical Airway

Chest Compressions (RPM:100)

Transfusion Reaction

Local Anesthetic Toxicity

## **Positioning**

Positioning: Any

Position: Multiple Positions

Position: Beach Chair

Position: Prone

Position: Lateral Decubitus

Position: Sitting

Position: Lithotomy

Position:Supine

## **Procedures**

Arterial Line Placement

Peripheral IV Placement

Central Venous Catheter

Pulmonary Artery Catheter

## Regional/Neuraxial Anesthesia

Block Attestation Note

Caudal Block

Central Neuraxial Block

Epidural Blood Patch

Epidural Catheter Disposition

IV Regional Block

Lumbar Drain Insertion

Pain Score

Pre-Existing Epidural

PCEA Initial

PCEA Change

Regional Anesthesia Block Note

## Reminders

Anes Provider Must Sign Record  
Associate Blank Record to Case  
Confirm Banner Anesthesia Type  
Confirm Banner ASA Class  
CRNA Sign Record  
Document Antibiotic  
Document Dose of Furosemide  
Document Dose of Mannitol  
Document Sensory Level

Document Urine Output  
Execute Macro for Hand-Off Doc  
Redose Antibiotics  
Sign In / Premeds Charted  
Administer Methylprednisolone  
Check Blood Availability  
Enter PACU Orders  
Place Defibrillator Pads

## Special Monitoring

Basic TEE

Basic TEE - Post CBP

Comprehensive TEE

Comprehensive TEE Post- CBP

Fetal Monitoring

Lumbar Drain Insertion

Evoked Potential Monitoring

## Start of Case

Monitors / Safety

Induction Evaluation

Induction

Eye Protection

Pre-Existing Devices

Pre-Existing Peripheral IV

Pre-Induction Assessment

O2 Supplementation

## Times

Active Cooling

Active Rewarming

Anesthesia Start

Anesthesia Stop

Cosmetic Start

Cosmetic Stop

Surgery Start

Surgery Stop

Patient in Room

Patient Out of Room

Block Start

Block Stop

Burst Suppression

Cannulation of Aorta

Cannulation of Vena Cava

CBP - On

CBP - Off

Circulatory Arrest Start

Circulatory Arrest Stop

Controlled Hypotension Start

Controlled Hypotension Stop

Controlled Hypothermia Start

Controlled Hypothermia Stop

Dialysis Start

Dialysis Stop

Delivery Time - Baby A

Delivery Time - Baby B

Delivery Time - Baby C

Delivery Time - Baby D

## Times cont'd

ECMO Off

ECMO On

Magnet Applied

Magnet Removed

Neuro Evaluation

Organ Reperfusion

PACU Arrival Time

Retrograde Autologous Prime

Single Lung Ventilation Start

Single Lung Ventilation Stop

Throat Pack In

Throat Pack Out

Tourniquet Deflated

Tourniquet Inflated

Uterine Incision Time

Venovenous Bypass Start

Venovenous Bypass Stop

Vascular Clamp/Shunt On

Vascular Clamp/Shunt Off

<b>ACTION</b>	<b>CATEGORY</b>	<b>ACTION</b>	<b>CATEGORY</b>
ACLS	Perioperative Events	Anesthesia Stop	Times
Active Cooling	Times	Arterial Line Placement	Procedures
Active Rewarming	Times	Aspiration	Perioperative Events
Administer Methylprednisolone	Reminders	Associate Blank Record to Case	Reminders
Air Embolism	Perioperative Events	Asystole	Perioperative Events
Allergic Reaction	Perioperative Events	Attending Interval Notation	Compliance
Anes Provider Must Sign Record	Reminders	Awareness Under Anesthesia	Notes/Observations
Anesthesia Start	Times	Basic TEE	Special Monitoring

<b>ACTION</b>	<b>CATEGORY</b>	<b>ACTION</b>	<b>CATEGORY</b>
Basic TEE - Post CBP	Special Monitoring	Burst Suppression	Times
Billing Modifiers	Billing	Cannulation of Aorta	Times
Block Attestation Note	Regional/Neuraxial Anesthesia	Cannulation of Vena Cava	Times
Block Start	Times	Care Model/ Compliance	Compliance
Block Stop	Times	Case Cancellation	Perioperative Events
Bradycardia	Perioperative Events	Caudal Block	Regional/Neuraxial Anesthesia
Broncho/ Laryngospasm	Perioperative Events	CBP - On	Times
Bronchoscopy	Airway Management	CBP - Off	Times



<b>ACTION</b>	<b>CATEGORY</b>	<b>ACTION</b>	<b>CATEGORY</b>
Central Neuraxial Block	OB	Comprehensive TEE	Special Monitoring
Central Neuraxial Block	Regional/Neuraxial Anesthesia	Comprehensive TEE Post- CBP	Special Monitoring
Central Venous Catheter	Procedures	Confirm Banner Anesthesia Type	Reminders
Check Blood Availability	Reminders	Confirm Banner ASA Class	Reminders
Chest Compressions (RPM:100)	Perioperative Events	Controlled Hypotension Start	Times
Circulatory Arrest Start	Times	Controlled Hypotension Stop	Times
Circulatory Arrest Stop	Times	Controlled Hypothermia Start	Times
Clinician Handoff	Compliance	Controlled Hypothermia Stop	Times

<b>ACTION</b>	<b>CATEGORY</b>	<b>ACTION</b>	<b>CATEGORY</b>
Cosmetic Start	Times	Delivery Time - Baby C	Times
Cosmetic Stop	Times	Delivery Time - Baby D	OB
CRNA Sign Record	Reminders	Delivery Time - Baby D	Times
Delivery Time - Baby A	OB	Dialysis Start	Times
Delivery Time - Baby A	Times	Dialysis Stop	Times
Delivery Time - Baby B	OB	Disclaimer Note	Compliance
Delivery Time - Baby B	Times	Document Antibiotic	Reminders
Delivery Time - Baby C	OB	Document Dose of Furosemide	Reminders

<b>ACTION</b>	<b>CATEGORY</b>	<b>ACTION</b>	<b>CATEGORY</b>
Document Dose of Mannitol	Reminders	Epidural Catheter Disposition	OB
Document Sensory Level	Reminders	Epidural Catheter Disposition	Regional/Neuraxial Anesthesia
Document Urine Output	Reminders	ET Intubation w/ Lung Isolation	Airway Management
ECMO Off	Times	Evoked Potential Monitoring	Special Monitoring
ECMO On	Times	Execute Macro for Hand-Off Doc	Reminders
Enter PACU Orders	Reminders	Extubation/Cont'd Airway Support	End of Case
Epidural Blood Patch	OB	External Cardioversion / Defib	Perioperative Events
Epidural Blood Patch	Regional/Neuraxial Anesthesia	Eye Protection	Patient Care

<b>ACTION</b>	<b>CATEGORY</b>	<b>ACTION</b>	<b>CATEGORY</b>
Eye Protection	Start of Case	Induction Evaluation	Start of Case
Fetal Monitoring	Patient Care	Intermittent Ventilation	Patient Care
Fetal Monitoring	Special Monitoring	Internal Cardioversion/ Defib	Perioperative Events
Fiberoptic Intubation	Airway Management	Intraoperative Death	Perioperative Events
Freetext Note	Notes/Observations	Intubation	Airway Management
Hemodynamic Acknowledgement	Patient Care	IV Regional Block	Regional/Neuraxial Anesthesia
Hemodynamic Acknowledgement	Perioperative Events	Jet Ventilation	Airway Management
Induction	Start of Case	Labs Drawn/Re-viewed	Patient Care

<b>ACTION</b>	<b>CATEGORY</b>	<b>ACTION</b>	<b>CATEGORY</b>
Laser Precautions	Patient Care	Major Hypotension	Perioperative Events
Left Uterine Displacement	OB	Malignant Hyperthermia Guide	Perioperative Events
LMA	Airway Management	Mask Airway Management	Airway Management
Local Anesthetic Toxicity	Perioperative Events	Monitors / Safety	Patient Care
Lumbar Drain Insertion	Regional/Neuraxial Anesthesia	Monitors / Safety	Start of Case
Lumbar Drain Insertion	Special Monitoring	Nerve Stimulator	Patient Care
Magnet Applied	Times	Neuro Evaluation	End of Case
Magnet Removed	Times	Neuro Evaluation	Patient Care

<b>ACTION</b>	<b>CATEGORY</b>	<b>ACTION</b>	<b>CATEGORY</b>
Neuro Evaluation	Times	Other Occurrence	Notes/Observations
NG/OG Tube Placement	Patient Care	PACU Arrival Time	Times
O2 Supplementation	Airway Management	Pain Score	OB
O2 Supplementation	End of Case	Pain Score	Regional/Neuraxial Anesthesia
O2 Supplementation	Start of Case	Patient in Room	Times
Observation Outcomes	Notes/ Observations	Patient Out of Room	Times
OR VAP Bundle	Compliance	PCEA Change	OB
Organ Reperfusion	Times	PCEA Change	Regional/Neuraxial Anesthesia

<b>ACTION</b>	<b>CATEGORY</b>	<b>ACTION</b>	<b>CATEGORY</b>
PCEA Initial	OB	Position: Multiple Positions	Positioning
PCEA Initial	Regional/Neuraxial Anesthesia	Position: Prone	Positioning
Peripheral IV Placement	Procedures	Position: Sitting	Positioning
Place Defibrillator Pads	Reminders	Position: Sitting L&D	OB
Placenta Delivery	OB	Position: Supine	Positioning
Position: Beach Chair	Positioning	Positioning: Any	Positioning
Position: Lateral Decubitus	Positioning	PQRI	Compliance
Position: Lithotomy	Positioning	Pre-Existing Devices	Start of Case









<b>ACTION</b>	<b>CATEGORY</b>	<b>ACTION</b>	<b>CATEGORY</b>
Pre-Existing Epidural	OB	Retrograde Autologous Prime	Times
Pre-Existing Epidural	Regional/Neuraxial Anesthesia	Sign In / Premeds Charted	Reminders
Pre-Existing Peripheral IV	Start of Case	Single Lung Ventilation Start	Times
Pre-Induction Assessment	Start of Case	Single Lung Ventilation Stop	Times
Progress of Labor	OB	Suctioning	Airway Management
Pulmonary Artery Catheter	Procedures	Surg Compression of the Heart	Perioperative Events
Redose Antibiotics	Reminders	Surgery Start	Times
Regional Anesthesia Block Note	Regional/Neuraxial Anesthesia	Surgery Stop	Times



<b>ACTION</b>	<b>CATEGORY</b>	<b>ACTION</b>	<b>CATEGORY</b>
Surgical Airway	Airway Management	Uterine Incision Time	OB
Surgical Airway	Perioperative Events	Uterine Incision Time	Times
Throat Pack In	Times	Vascular Clamp/ Shunt Off	Times
Throat Pack Out	Times	Vascular Clamp/ Shunt On	Times
Tourniquet Deflated	Times	Venovenous Bypass Start	Times
Tourniquet Inflated	Times	Venovenous Bypass Stop	Times
Transfusion Reaction	Perioperative Events	Vital Sign Inaccurate Note	Patient Care
Transport/Emergence	End of Case	Warming Measures	Patient Care

Name	Name	Name
ACLS	Burst Suppression	Cosmetic Stop
Active Cooling	Cannulation of Aorta	CRNA Sign Record
Active Rewarming	Cannulation of Vena Cava	Delivery Time - Baby A
Administer Methylprednisolone	Care Model/ Compliance	Delivery Time - Baby B
Air Embolism	Case Cancellation	Delivery Time - Baby C
Allergic Reaction	Caudal Block	Delivery Time - Baby D
Anes Provider Must Sign Record	CBP - Off	Dialysis Start
Anesthesia Start	CBP - On	Dialysis Stop
Anesthesia Stop	Central Neuraxial Block	Disclaimer Note
Arterial Line Placement	Central Venous Catheter	Document Antibiotic
Aspiration	Check Blood Availability	Document Dose of Furosemide
Associate Blank Record to Case	Chest Compressions (RPM:100)	Document Dose of Mannitol
Asystole	Circulatory Arrest Start	Document Sensory Level
Attending Interval Notation	Circulatory Arrest Stop	Document Urine Output
Awareness Under Anesthesia	Clinician Handoff	ECMO Off
Basic TEE	Comprehensive TEE	ECMO On
Basic TEE - Post CBP	Comprehensive TEE Post- CBP	Enter PACU Orders
Billing Modifiers	Confirm Banner Anesthesia Type	Epidural Blood Patch
Block Attestation Note	Confirm Banner ASA Class	Epidural Catheter Disposition
Block Start	Controlled Hypotension Start	ET Intubation w/Lung Isolation
Block Stop	Controlled Hypotension Stop	Evoked Potential Monitoring
Bradycardia	Controlled Hypothermia Start	Execute Macro for Hand-Off Doc
Broncho/Laryngospasm	Controlled Hypothermia Stop	Extubation/Contd Airway Support
Bronchoscopy	Cosmetic Start	External Cardioversion / Defib

Name	Name	Name
Eye Protection	Monitors / Safety	Position: Sitting
Fetal Monitoring	Nerve Stimulator	Position: Sitting L & D
Fiberoptic Intubation	Neuro Evaluation	Position: Supine
Freetext Note	NG/OG Tube Placement	PQRI
Hemodynamic Acknowledgement	O2 Supplementation	Pre-Existing Devices
Induction	Observation Outcomes	Pre-Existing Epidural
Induction Evaluation	Organ Reperfusion	Pre-Existing Peripheral IV
Intermittent Ventilation	OR VAP Bundle	Pre-Induction Assessment
Internal Cardioversion/ Defib	Other Occurance	Progress of Labor
Intraoperative Death	PACU Arrival Time	Pulmonary Artery Catheter
Intubation	Pain Score	Redose Antibiotics
IV Regional Block	Patient in Room	Regional Anesthesia Block Note
Jet Ventilation	Patient Out of Room	Retrograde Autologous Prime
Labs Drawn/Reviewed	PCEA Change	SBAR - Handoff
Laser Precautions	PCEA Initial	SBAR - Handoff ICU
Left Uterine Displacement	Peripheral IV Placement	Sign In / Premeds Charted
LMA	Place Defibrillator Pads	Single Lung Ventilation Start
Local Anesthetic Toxicity	Placenta Delivery	Single Lung Ventilation Stop
Lumbar Drain Insertion	Position: Beach Chair	Suctioning
Magnet Applied	Positioning: Any	Surg Compression of the Heart
Magnet Removed	Position: Lateral Decubitus	Surgery Start
Major Hypotension	Position: Lithotomy	Surgery Stop
Malignant Hyperthermia Guide	Position: Multiple Positions	Surgical Airway
Mask Airway Management	Position: Prone	Throat Pack In

Name	
	Throat Pack Out
	Tourniquet Deflated
	Tourniquet Inflated
	Transfusion Reaction
	Transfusion Reaction/Error
	Transport/Emergence
	Uterine Incision Time
	Vascular Clamp/Shunt Off
	Vascular Clamp/Shunt On
	Venovenous Bypass Start
	Venovenous Bypass Stop
	Vital Sign Inaccurate Note
	Warming Measures

CATEGORY	MACROS
<b>CARDIOVASC/ THORACIC</b>	Cardiac basic/flo trac
	Cardiac Complex/ ECHO/Swan
	Circ Arrest
	Interventional Bronch
	TAAA
	TAVR
	Thoracotomy

CATEGORY	MACROS
<b>ECT</b>	ECT-LMA ECT-Mask
<b>ENDO</b>	Bronch GETA Bronch LMA Endo GETA Endo MAC
<b>GENERAL</b>	GETA (General) GETA+ ALine/CVP GA LMA GA Mask
<b>MAC</b>	MAC

CATEGORY	MACROS
<b>NEURO</b>	Crani ALine/CVP Spine ALine/CVP Spine GETA
<b>OB</b>	Cerclage C-section - GETA C-section Spinal C-Section w/Existing Epidural Labor epidural Post-Partum Tubal

CATEGORY	MACROS
<b>ORTHO</b>	Shoulder arthroscopy Total Hip - general Total Hip - neuraxial Total Knee - general Total Knee - neuraxial Total Shoulder
<b>PEDIATRIC</b>	Peds BMT Peds IV Induction GETA Peds IV Induction LMA Peds Mask Induction GETA Peds Mask Induction LMA

CATEGORY	MACROS
TRANSPLANT	HEART
	KIDNEY
	LIVER
	LUNG

CATEGORY	MACROS
Monitors	All Monitors
Positioning	Beachchair
	Lateral Decubitus
	Lithotomy
	Prone
	Sitting
Supine	
Procedure	Arterial Line #1
	Arterial Line #2
	Central Line
	PA Catheter

MACRO	CATEGORY	MACRO	CATEGORY
All Monitors	Monitors	C-section Spinal	OB
Bronch	ENDO	ECT - LMA	ECT
Cardiac basic/ flo trac	Cardiovasc/Thoracic	ECT- Mask	ECT
Cardiac Complex/ Echo/Swan	Cardiovasc/Thoracic	Endo GETA	ENDO
Cerclage	OB	Endo MAC	ENDO
GETA (General)	General	Circ Arrest	Cardiovasc/Thoracic
GA LMA	General	Crani	Neuro
GA + invasive monitors	General	C-section - GETA	OB



MACRO	CATEGORY	MACRO	CATEGORY
Heart Transplant	Transplant	Neuraxial	Regional
Interventional Bronch	Cardiovasc/Thoracic	PEDS - BMT	Pediatric
IV Regional	Regional	PEDS - Cardiac	Pediatric
Kidney Transplant	Transplant	PEDS - Complex	Pediatric
Labor epidural	OB	PEDS - Dental	Pediatric
Liver Transplant	Transplant	PEDS - GETA	Pediatric
Lung Transplant	Transplant	PEDS - LMA	Pediatric
MAC	MAC	PEDS - Spinal	Pediatric

MACRO	CATEGORY	MACRO	CATEGORY
PEDS - T/A	Pediatric	Thoracotomy	Cardiovasc/Thoracic
Post-Partum Tubal	OB	Total Hip - general	Ortho
Pre-Op/Post-Op Block	Regional	Total Hip - neuraxial	Ortho
Shoulder arthroscopy	Ortho	Total Knee - general	Ortho
Spine	Neuro	Total Knee - neuraxial	Ortho
TAAA	Cardiovasc/Thoracic	Total Shoulder	Ortho
TAVR	Cardiovasc/Thoracic		

## OB Workflow

### Labor Epidural

Log on  
Select Case  
Verify Patient  
(Select Cancel on device dialogue box)  
Add personnel/Sign Record  
Choose/Execute Macro  
Perform Procedure  
Document  
Suspend the case

### Baby delivered

End Time is when baby is delivered  
**CRNA or Anesthesiologist** can finalize the case

### C-Section

If patient goes to OR for a C-section a new case is opened

### Pre-Op Block/Procedure

- Log on
- Select Case
- Verify Patient  
(Select Cancel on device dialogue box)
- Add personnel/Sign Record
- Choose/Execute Macro
- Perform Procedure
- Document
- Suspend the case

### Before patient in room/As patient arrives

- Log on
- Select Case
- Verify Patient
- Associate Devices
- Check that Allergies are listed
- Add Personnel
- Choose Macro-customize if needed
- Add Anesthesia Type/ASA Class

**\*Note:** You will not be able to open the record before the Pre-Op block documentation is complete.

## General Workflow Cont'd

### During Procedure

- Document (Actions, Meds, I&O's)
- Sign the record
- Suspend the case

### Transport to PACU

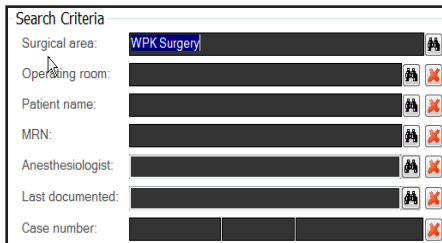
- Pull up case in PACU
- Give report
- Finish Documenting
- Address Deficiencies
- Sign record (if not already done)
- CRNA** Close Record
- Anesthesiologist** opens record
- Finalize Record (**Anesthesiologists**)

## Selecting a Case:

Patients scheduled for today's date will be listed for the selected location. Patients ready for Anesthesia documentation will be **checked-in** on the case selection screen.

It is important to verify the patient name, birth date, case number, surgeon and procedure prior to initiating documentation. Check with nursing for any discrepancies before initiating the record.

If the case is not listed for the default location, select the red **X** next to the location or operating room number and click **Search** again to find all cases schedule for the day. If the case is still not found you can use different search criteria such as patient name, case number, or date and search again. To open the case: Highlight the **case** and click **OK**.



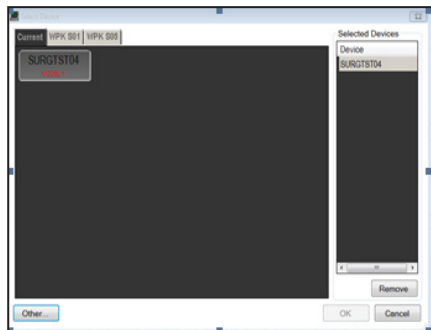
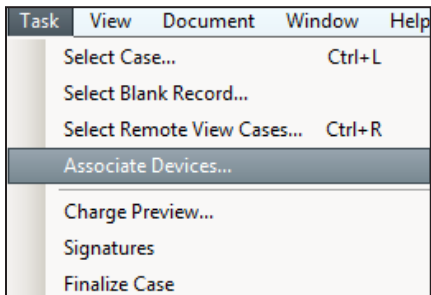
Search Criteria

Surgical area:	WPK Surgery	
Operating room:		
Patient name:		
MRN:		
Anesthesiologist:		
Last documented:		
Case number:		

## Associating Devices Manually

You can choose to associate additional devices during a case that is in progress.

1. Click Task on the SurgiNet Anesthesia menu bar and select Associate Devices. The Select Device Dialog box .
2. Select the appropriate device from the available devices listed, or click the Other button. When the appropriate device has been located and associated click the OK button.

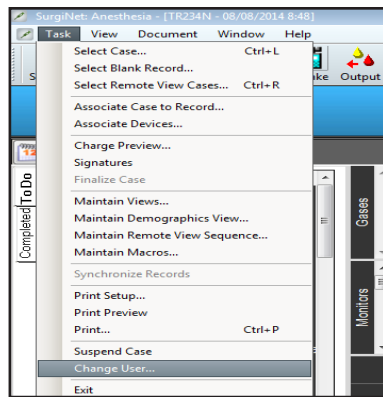


## Changing Users in a Case

If it becomes necessary to change users within a case, the following steps should be followed:

1. From the Menu bar click Task and select Change User.
2. The new user will enter their OPID and Password to sign-in and be added to the record

**\*Remember to also add yourself as personnel and sign**

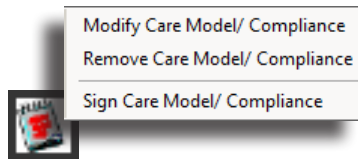
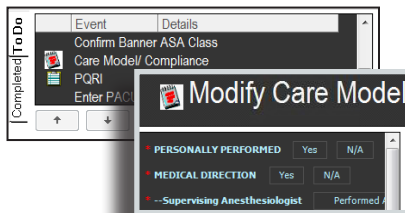




## Adding information to Checklist, Assessments, & Attestations

Another action you will perform is completing Checklists, Assessments, and Attestations. By selecting the item from the **To Do List** a new window opens, notice the defaults and required items, once complete select **Execute**. This will place the item on the icon in **Action Pane**.

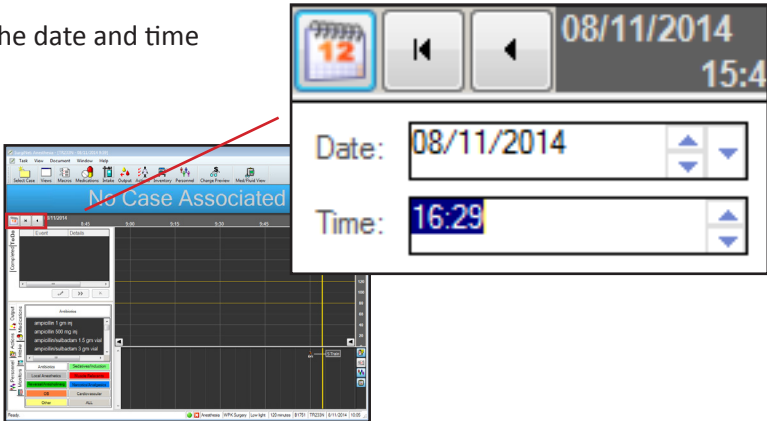
Check Lists and Assessments can be reopened and modified – times can be adjusted, and narrative comments added. Notice the letter “C” next to the icon indicating a comment, by hovering you can read the comment. Right-clicking the icon allows you access to the form to modify or sign it.



## Modifying the Time Bar

To modify the time bar, complete the following steps:

1. Click Date and Time on the toolbar (located next to the time bar).
2. Modify the date and time



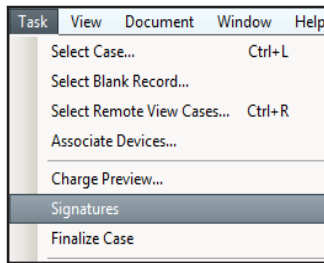
## Signing the Anesthesia Record

All participating anesthesia personnel are required to sign the record.

To sign the record:

1. From the **Task** Menu select **Signatures**. (Signatures dialog box will appear)
2. Select “Sign Record”
3. Enter your electronic signature using your User Name and Password.

Note: The CRNA does not need to log out in order for the Supervising Anesthesiologist to sign the record.

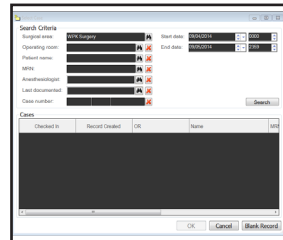
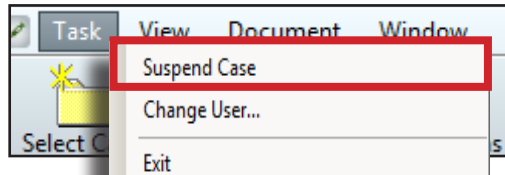


## Suspending a Case

It will be necessary to suspend a case such as when moving the patient from the intraoperative area to the PACU.

To suspend a case:

1. From the **Menu bar** click **Task** and select **Suspend Case** and exit the application.
2. To resume the case at the new location, click the application icon, log into the application, locate and select the case to be reopened.



## Transport to PACU

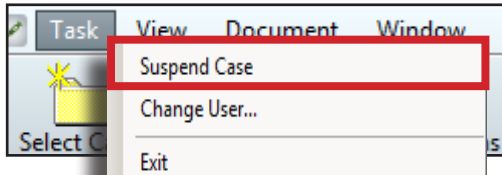
Upon completion of surgery the patient will be transported to PACU.

To transport the patient:

1. Suspend the Case
2. Transport the patient
3. Re-open the case from a computer located in the PACU
4. Give handoff report to the PACU staff
5. Complete the Transport Checklist
6. Close or Finalize the Case, depending on your role.\*

\*(CRNA) Close the Case

\*(Anesthesiologist) Finalize the Case



## **Finalize the Case**

Records will need to be finalized at the end of a surgical procedure to permanently record the case data to the patient's record. It will also give the anesthesia provider an opportunity to review the record, and complete the details of any medications, fluids, or actions.

**Note: Cases will be finalized by the anesthesiologist.  
CRNAs will finalize cases as directed.**

## Steps to Finalize the Case

1. Click **Task** on the menu bar.
2. Click **Finalize Case** to select it from the drop down menu.
  - The Finalize dialog box will display the deficiencies and signatures for the record.
  - Any fluids that need stop times or actions that have incomplete required fields will display in the Deficiencies section located at the top of this dialog box.
3. Click the Edit icon to edit the fluid or action and the fluid/action dialog will display. After a deficient item has been completed it will disappear from the finalize dialog.
4. Click the Ignore checkbox to ignore the deficiency and allow finalization to continue. All deficiencies should be appropriately managed prior to finalizing the case. Return to the record to complete deficiencies prior to finalizing the case.
5. Click the **Sign** button in the Finalize dialog box and the Cerner Authorizing Signature screen displays.

## Steps to Finalize the Case cont'd

6. Enter your User Name and Password to sign the record and click the OK button to display the updated finalize dialog. Click the **Finalize** button.
- \*Anesthesia records will be viewable within PowerChart and will NOT be routinely printed. You are returned to the main screen of the record which displays as Finalized with the case number at the top of the screen. Once finalized, the record becomes read-only.

The screenshot shows a 'Finalize' dialog box with the following sections:

- Deficiencies**: No deficiencies
- Required Documentation**: Name: PQRI
- Personnel**: No Running Personnel
- ToDo List**: Event: Induction Evaluation, Details: Attending Interval Notation. Includes an 'Ignore All' button.
- Signatures**: Name: [redacted], Date: [redacted]. Includes a 'Sign' button.

At the bottom, there are buttons for 'Print record', 'Finalize', 'Select Charted Values', 'Charge Preview', and 'Close'.



## Deficiencies

Click **Task** on the menu bar. Click **Finalize Case** to select it from the drop down menu.

The **Finalize** dialog box will display the deficiencies and signatures for the record. Any fluids that need stop times or actions that have incomplete required fields will display in the Deficiencies section located at the **top** of this dialog box.

Click the **Edit** icon to edit the fluid or action and the fluid/action dialog will display. After a deficient item has been completed it will disappear from the finalize dialog.

Click the **Ignore** check-box to ignore the deficiency and allow finalization to continue.

All deficiencies should be appropriately managed prior to finalizing the case. Return to the record to complete deficiencies prior to finalizing the case.

## **CRNA End of Case**

Prior to closing the record and having the Anesthesiologist finalize the case; the CRNA will need to address the following:

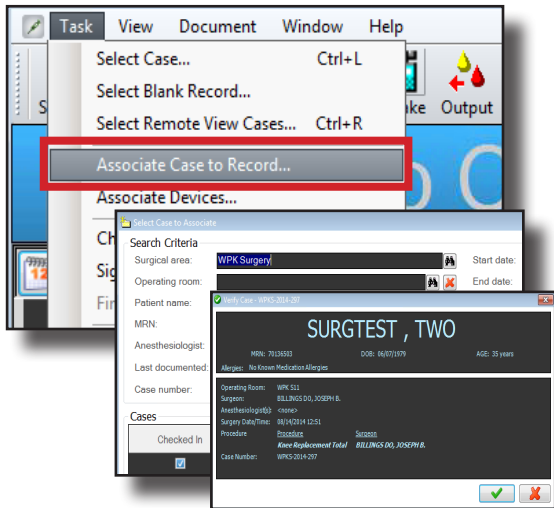
1. Sign the Record
2. Record total fluid volume for the case
3. Complete/Clear unused items from the To-Do List  
(ex. medications, fluids, procedures)

**Note:** CRNAs will finalize cases as directed.

## How to Associate a Blank Record with a Case

If a blank record is created, you must associate it with the appropriate case once it becomes available in the system. After the record is associated with the correct case, it becomes a permanent part of the patient's record and available for review.

1. From the **Task** menu, select:  
***Associate Case to Record.***
2. Search for and select the case.
3. Click Verify in the Verify Case dialog box to associate the record with the case.



# Physician Informatics Contact List

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<b>Campus</b>		<b>SpectraLink</b>	<b>Tie Line</b>
Altamonte	407-303-2200	7708	835-7708
Apopka	407-889-1000	2020	833-2020
Celebration	407-764-4000	7155	843-7155
East Orlando	407-303-8110	7135	832-7135
Kissimmee	407-846-4343	5463	834-5463
Orlando	407-303-5600	110-2210	831-110-2210
Winter Park	407-646-7000	2357	838-2357





**24 hr Support 407-303-5580**