

EMR Training – Buddy Code: SNTRNSIN (Skilled Nurse Transfer In)

Why

Nationally, hand off communication failures have been recognized as resulting in 50 -80% of serious medical errors. Miscommunication between caregivers has been a patient safety target for Joint Commission since 2012.

- Recent studies continue to confirm that communication breakdowns among medical staff are consistently determined to result in:
 - Patient harm
 - Delay in treatment
 - Inappropriate treatment
 - Increased length of stay at higher levels of care such as hospitalization

As the complexity of our patient’s needs increase, the need for Trustbridge teams to communicate effectively increases proportionally in order to ensure best outcomes and practice safety.

What

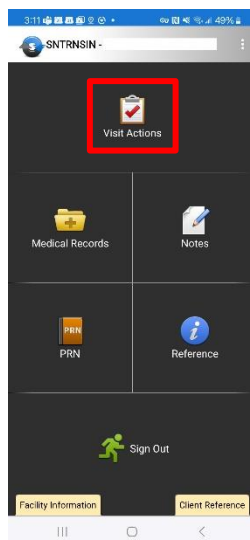
The new Buddy Codes must

- Be scheduled along with another skilled nurse visit
- Are to be scheduled directly in the scheduling console
- A physician verbal order should NOT be generated to plot the buddy code
- May be completed using either PointCare or Back Office
- Should be completed prior to transferring the patient
- Do NOT take the place of a call to the receiving nurse

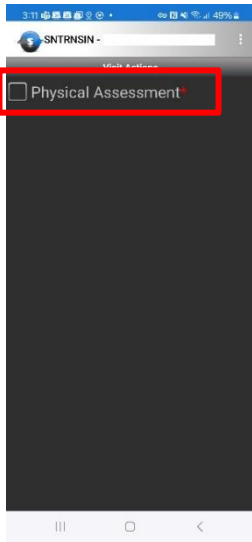
How

Patients that are being transferred from home or facility **INTO** an inpatient/care center will have a buddy code **SNTRNSIN** (Skilled Nurse Transfer In) completed by the nurse **PRIOR** to transferring into the unit.

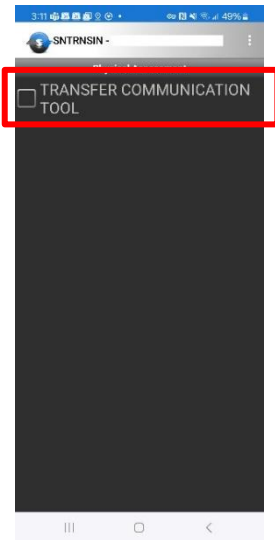
From the main visit screen, click Visit Actions.



Then click Physical Assessment.

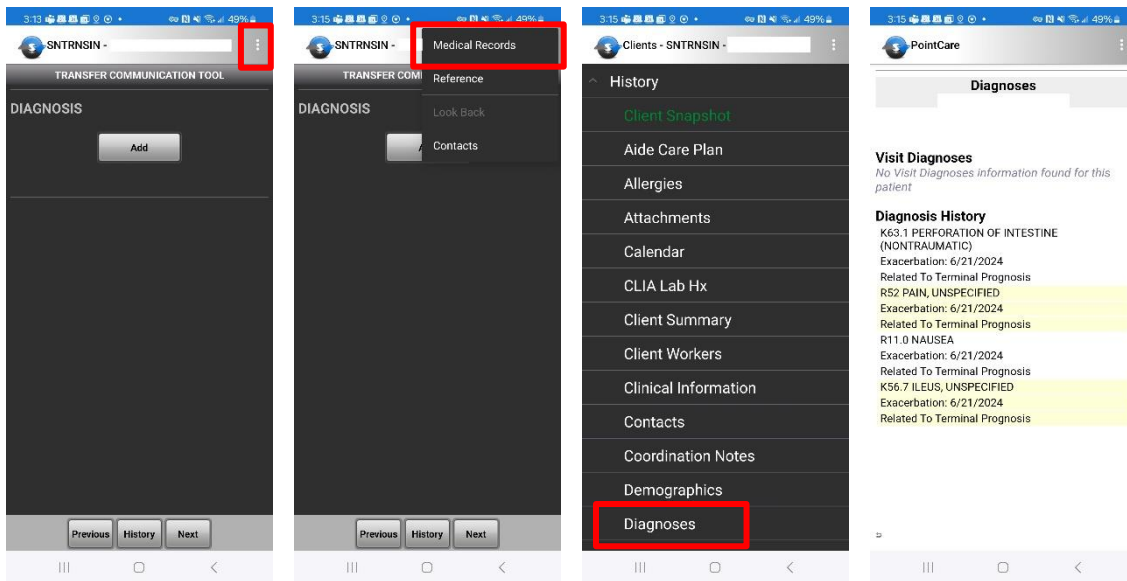


Then click TRANSFER COMMUNICATION TOOL. Answer all the remaining questions as appropriate.

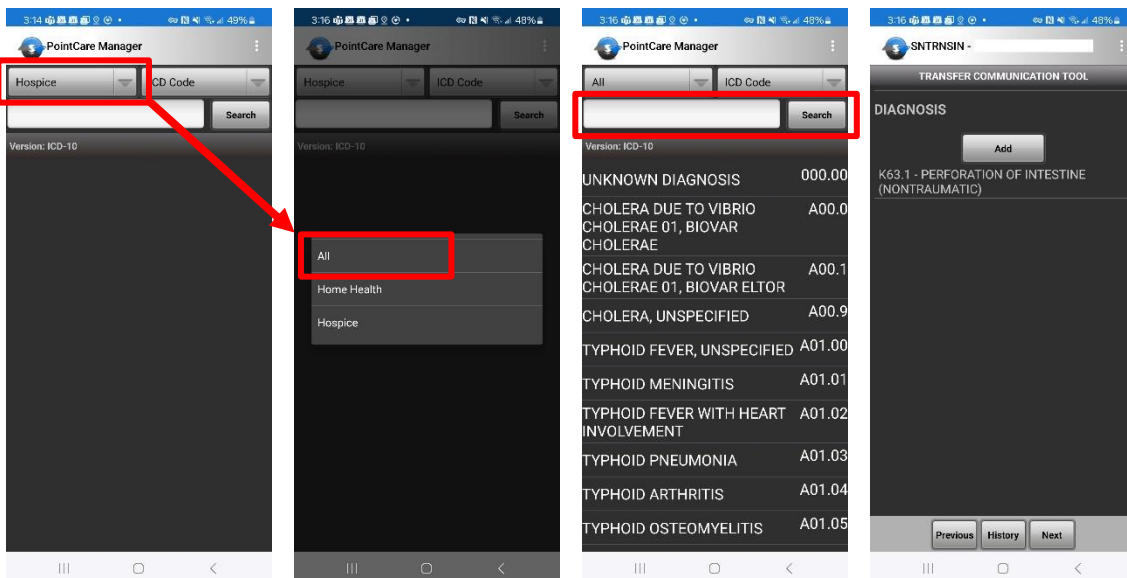


Answer all the remaining questions as appropriate (see end of document for question breakdown)

When asked to add the diagnosis, you can review the medical records by clicking the three dots in the upper right-hand corner, clicking Medical Records, then Diagnoses.



Return to the visit (by clicking the back button) and click Add. Change the location drop down to ALL (instead of Hospice) and then search for the patient’s diagnosis/diagnoses. Click on the diagnosis to add it to the visit.



Remember: Transfer communication in the electronic medical record does NOT replace verbal report to the receiving nurse. Information can be clarified, goals of care identified, and a better picture of patient condition and family dynamics can be relayed person to person than by reading a document.

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If yes, you will be asked the facility name & staff notified and date notified (see next screenshots)

4

If yes, you will be asked the name of the physician

If no, you will be asked the reason

5

If yes, you will be asked the name of the nurse

If no, you will be asked the reason

6

If yes, you will be asked the relationship to the patient (see next screenshot)

If no, you will be asked the reason

6b

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9

If yes, you will be asked to enter the result

If no, you will be asked the reason

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If yes, you will be asked to enter the result

If no, you will be asked the reason

11

If yes, you will be asked to enter the result

If no, you will be asked the reason

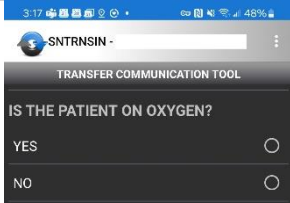
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If yes, you will be asked to enter the result

If no, you will be asked the reason

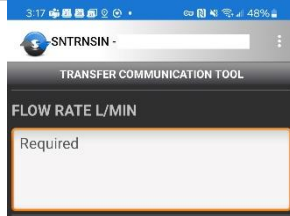
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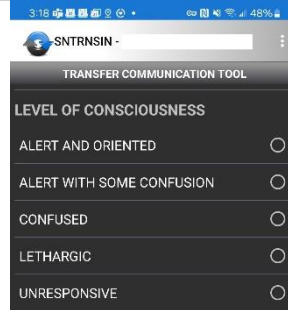


If yes, you will be asked to enter the Flow Rate L/Min, Route & Frequency (see next screenshots)

14b



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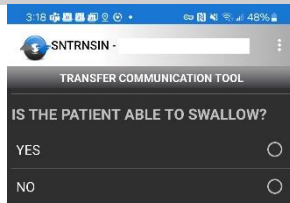
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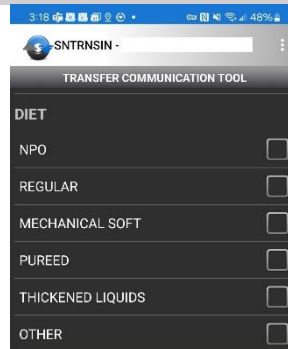
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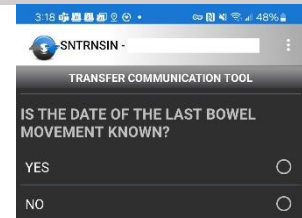
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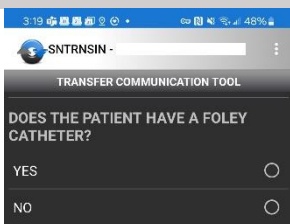


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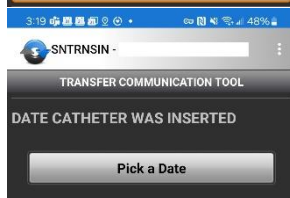
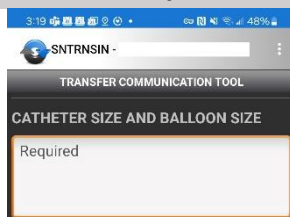
If yes, you will be asked to enter the date

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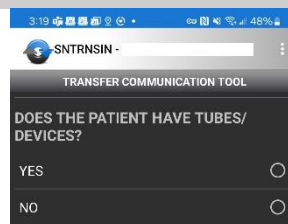


If yes, you will be asked to enter the catheter & balloon size and date the catheter was inserted (see next screenshots)

21b

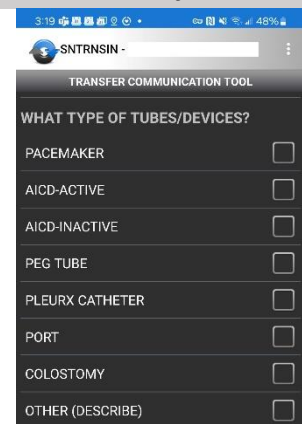


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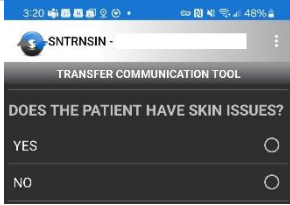


If yes, you will be asked to choose the issues (see next screenshot)

22b

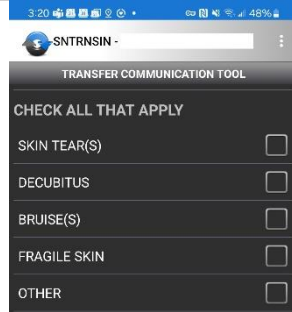


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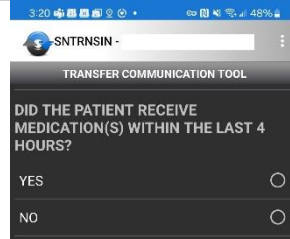


If yes, you will be asked to choose the issues (see next screenshot)

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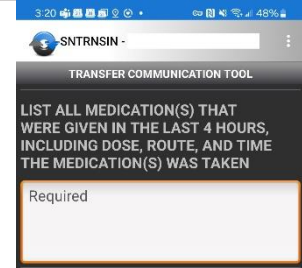


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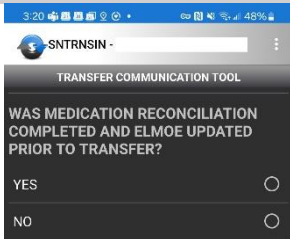


If yes, you will be asked to list medications (including dose, route & time) [see next screenshot]

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If no, you will be asked the reason

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