

CPOE/eMAR/BMV Training Document

Closed Loop System

Agenda

Section 1: CPOE Overview

Section 2: Order Management

Section 3: eMAR

Section 4: Medication Administration

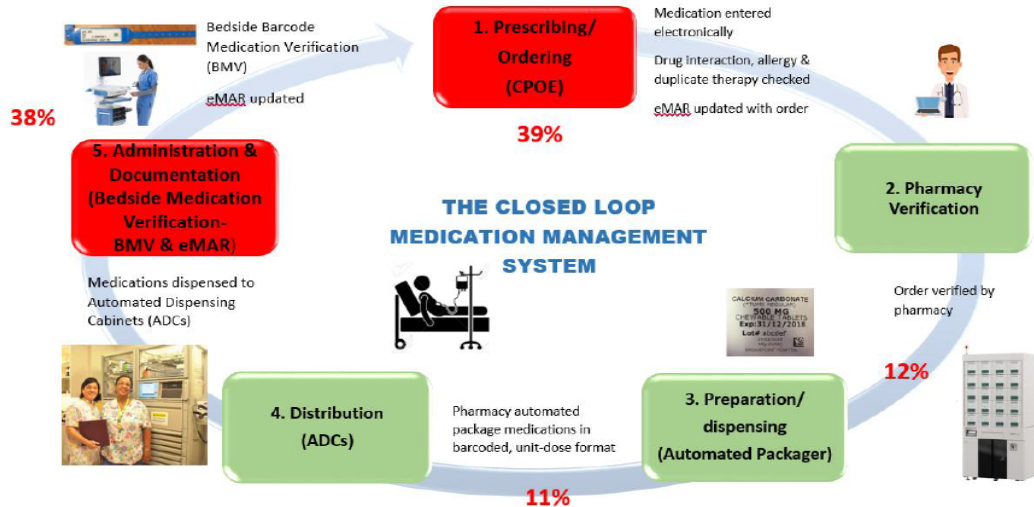
Section 5: Case Study practice

Section 1: CPOE Overview

What is CPOE?

CPOE stands for 'computerized provider order entry'. This means that the provider will directly input orders into the system. It is the first step in the Closed Loop Medication Management System.

What is a Closed Loop Medication Management System?



Section 1: CPOE Overview

Why are we doing it?

- SAFER!! This removes any confusion about orders, allows better tracking of information, and makes workflow more efficient.

Electronic Orders

- Medication
- Non-medication orders

Telephone one time order management

- The expectation is that all orders will be entered by the provider.
- There will be an exception if a provider is driving/not able to be at a computer to enter and in this case a one-time order will be given and written as a telephone order. If it is for a medication it will be taken from the ADC using override. If it is to be an ongoing order the provider MUST enter it when they have access to a computer.

Section 2: Order Management

Types of Orders at Bridgepoint

- Care Orders → Examples : vital signs, Daily weights, POCT glucose monitoring
- Medication Orders → This includes all medications that will ordered for your patient and will be reflected on the eMAR

Ways to Receive an Order

- Medical Directive
- Suggest Orders
- Verbal Orders
- Telephone Orders

Section 2: Order Management

Changes to Order Process with CPOE

Medical Directive

- At Bridgepoint nursing, Dietitian, SLP have medical directives (meaning they are pre-authorized to enact an order based on clinical judgment)
- Those who have a medical directive will enter the order into Meditech by using NMOE

Examples → new C. Diff medical directive

Suggest Orders

- There will be no changes to this process – if the clinician thinks a patient would benefit from an order, they will write the suggestion on the patient's chart in the Physicians order sheets, and flag it for the physician to enter into Meditech if they agree

Example → You think your patient would benefit from a Wound Care referral

Verbal Orders

- These should only be accepted in the event that the physician is unable to write or enter an order due to an emergency

Section 2: Order Management

Changes to Order Process with CPOE

Telephone Orders

- Telephone orders will only be accepted after business hours (17:00-08:00) when the physician is on-call
- The order can only be for a 1 time event for example → 1 time order of Tylenol 650mg for a new fever

Process for telephone orders

- Nursing will take an order over the phone that is for a single event and write it on the Physicians order sheets
 - If the order is a medication order, they will use the Override function on ADC to pull the medication, then bring the WOW to the patient bedside and scan the patients armband and the medication prior to giving
 - If it is a care order the nurse will enact the order
- *** if an ongoing order is required (for example “Tylenol q 4 hours until morning”) the physician will need to enter the order into Meditech***

Section 2: Order Management

Order Entry

Provider enters all orders in Meditech including: Medication, Patient Care, Laboratory, Microbiology, Referral, Consults, Radiology, Electrocardiogram, Electromyogram, Ultrasound, and Diet

Section 2: Order Management

New Status Board: Next Scheduled Medication & Next Scheduled Intervention

The Status Board will now have new features to reflect the changes with CPOE.

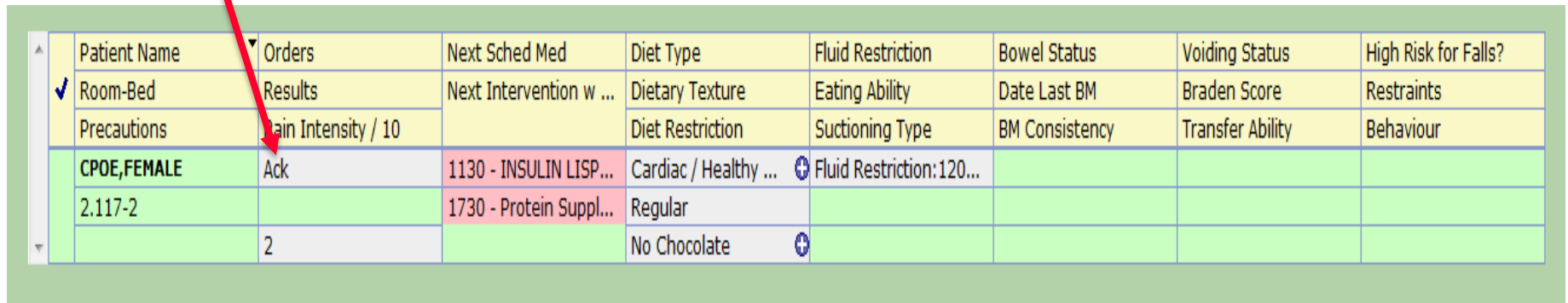
- There is now **“Next Scheduled Medication”** which shows the next medication that is due. If the medication is past due, it will turn red. It will not go away until it is signed off. If it is past the time it was due, it will also appear in **red**.

Patient Name	Orders	Next Sched Med	Diet Type	Fluid Restriction	Bowel Status	Voiding Status	High Risk for Falls?
Room-Bed	Results	Next Intervention w ...	Dietary Texture	Eating Ability	Date Last BM	Braden Score	Restraints
Precautions	Pain Intensity / 10		Diet Restriction	Suctioning Type	BM Consistency	Transfer Ability	Behaviour
CPOE,FEMALE	Ack	1130 - INSULIN LISP...	Cardiac / Healthy ...	Fluid Restriction:120...			
2.117-2		1730 - Protein Suppl...	Regular				
	2		No Chocolate				

Section 2: Order Management

New Status Board: Next Scheduled Medication & Next Scheduled Intervention

- There is also **“Next Scheduled Intervention”**. This shows the next intervention that is required. Interventions include, weight, blood glucose monitoring, and administering protein supplement. Once you have a new order you will need acknowledge that you have seen the order by opening the **“Order”** section of the status board. You will know there are new orders when you see **“Ack”**



Patient Name	Orders	Next Sched Med	Diet Type	Fluid Restriction	Bowel Status	Voiding Status	High Risk for Falls?
Room-Bed	Results	Next Intervention w ...	Dietary Texture	Eating Ability	Date Last BM	Braden Score	Restraints
Precautions	Pain Intensity / 10		Diet Restriction	Suctioning Type	BM Consistency	Transfer Ability	Behaviour
CPOE,FEMALE	Ack	1130 - INSULIN LISP...	Cardiac / Healthy ...	Fluid Restriction:120...			
2.117-2		1730 - Protein Suppl...	Regular				
	2		No Chocolate				

Section 2: Order Management

New Status Board: Care Orders

There are a few different types of care orders which require different actions including:

- Intervention Care Order
 - This is where the care orders will be linked to an intervention/assessment so you will be able to document → example: daily weights

- “I Did It” care order
 - Once you have completed the order you will be able to sign off what it was done → example: POCT glucose testing

- FYI Care Order
 - These care orders will **not** be reflected on the intervention list but they can be found in the Order History section of EMR

Section 2: Order Management

New Status Board: How to document interventions with linked documentation

- Click on the Intervention and a pop up screen with a snap shot of all the next interventions will come up.

Patient Name	Orders	Next Sched Med	Diet Type	Fluid Restriction	Bowel Status	Voiding
Room-Bed	Results	Next Intervention w ...	Dietary Texture	Eating Ability	Date Last BM	Braden
Precautions	Pain Intensity / 10		Diet Restriction	Suctioning Type	BM Consistency	Transfe
CPOE,FEMALE	Unc	0730 - INSULIN LISP...	Cardiac / Healthy ...	Fluid Restriction:120...		
2.117-2		1634 - Weight				
	2					

Cpoe,Female CR0000012/20 0855-0855

Sched	Intervention	Frequency	History
20/08 1634	Weight	Q30DAYS	
20/08 1730	Protein Supplement	BID	23 hrs
20/08 2100	Blood Glucose Monitoring/POCT	TID	
21/08 0730	Protein Supplement	BID	23 hrs
21/08 0900	Blood Glucose Monitoring/POCT	TID	
21/08 1400	Blood Glucose Monitoring/POCT	TID	
21/08 1730	Protein Supplement	BID	23 hrs
21/08 2100	Blood Glucose Monitoring/POCT	TID	
22/08 0730	Protein Supplement	BID	23 hrs

Document Close

- Next, pick which Intervention on the list you wish to complete. Some will “link to intervention” when you need to add additional data (for example daily weight). By clicking on the intervention it will link you directly to the assessment

Section 2: Order Management

New Status Board: How to document interventions with linked documentation

Intervention that is linked to an assessment

Example -The patient is ordered daily weights

Height	
Height	<input type="text"/> (cm)
Height Source	<input type="radio"/> Stated (By Patient) <input type="radio"/> Stated (By Family) <input type="radio"/> Estimated <input type="radio"/> Actual
Weight	
Weight (kg)	<input type="text"/> (kg)
Weight Source	<input type="radio"/> Stated (By Patient) <input type="radio"/> Stated (By Family) <input type="radio"/> Estimated <input type="radio"/> Actual
Weight Measurement Method	<input type="radio"/> Standing Scale <input type="radio"/> Bed Scale- sling <input type="radio"/> Wheelchair <input type="radio"/> Built in Bedscale <input type="radio"/> Baby Scale

Section 2: Order Management

New Status Board: How to document interventions with the “I Did It” function.

- For blood glucose monitoring and protein supplement, you simply have to use the “I Did It” function without additional documentation.
- Again, pick the right intervention, so in this case, we will pick blood glucose monitoring, press document, and since you don’t need to enter additional data you only press “file”

Sched	Intervention	Frequency	History
20/08 1634	Weight	Q30DAYS	
20/08 1730	Protein Supplement	BID	23 hrs
20/08 2100	Blood Glucose Monitoring/POCT	TID	
21/08 0730	Protein Supplement	BID	23 hrs
21/08 0900	Blood Glucose Monitoring/POCT	TID	
21/08 1400	Blood Glucose Monitoring/POCT	TID	
21/08 1730	Protein Supplement	BID	23 hrs
21/08 2100	Blood Glucose Monitoring/POCT	TID	
22/08 0730	Protein Supplement	BID	23 hrs

Warning

There is unfiled Intervention data.
Save before proceeding?

File Cancel Discard

Section 2: Order Management

Order Entry: FYI Care Orders

- FYI Orders


For example: Oxygen 2L/min via Nasal Prong. Nurses will acknowledge as previously shown and this needs to be transcribed into the patient care plan. These orders do not show on the status board but they are available to be reviewed in “order history”

Cpoe, Female
DOB: 6/2/95 24F
Ht: 99 cm / Wt: 65 kg BSA: 1.42 m² BMI: 66.3 kg/m²
Allergy/AdvReact: ciprofloxacin

CRO000012/20 / HI00000077 / BDGTVIG0000082
2 North 2.117-2 ADM LTC

Orders

Order Date	Order Time	Service Date	Service Time	Ordered By	Category	Procedure	Status
21/8/19	08:15	21/8/19	08:13	Tepper	PCS	Weight (Q30DAYS)	In Process
					PCS	Blood Glucose Monito (TID...	In Process
					PCS	Oxygen Therapy	In Process
21/8/19	08:13	21/8/19	14:00	Tepper	PHA	Cefazolin Sod (Ancef) IV Q8HR SCH	Active
21/8/19	08:13	21/8/19	08:09	Tepper	REF	Occupational Therapy	Active
21/8/19	08:13	21/8/19		Tepper	RAD	Chest X-Ray	Active
20/8/19	16:37	20/8/19	16:34	Tepper	PCS	Blood Glucose Monito (TID...	In Process
					PCS	Oxygen Therapy	In Process
					PCS	Weight (Q30DAYS)	In Process
20/8/19	16:06	20/8/19	16:21	Tepper	LAB	Comp. Blood Count CB...	Active
20/8/19	16:04	20/8/19		Tepper	MIC	MRSA Screen	Uncollected
20/8/19	16:04	20/8/19	16:15	Tepper	LAB	Comp. Blood Count CB...	Active



- Return
- Other Visit
- Special Panels
- 24 Hour
- Vital Signs
- I & O
- Notes
- Medications
- Order History**
- Laboratory
- Microbiology
- Blood Bank
- Pathology

Section 3: eMAR

Navigation

What is eMAR?

eMAR means 'Electronic Medication Administration Record'

Navigating eMAR

You can access the eMAR From the status board.

If you click on "Next Scheduled Medication" it shows you a snapshot of the medications due that day. In this screen, there is a direct button to the full eMAR

The screenshot displays a software window titled "Medications" with a table of scheduled medications. A red circle highlights an "eMAR" button at the bottom of the window.

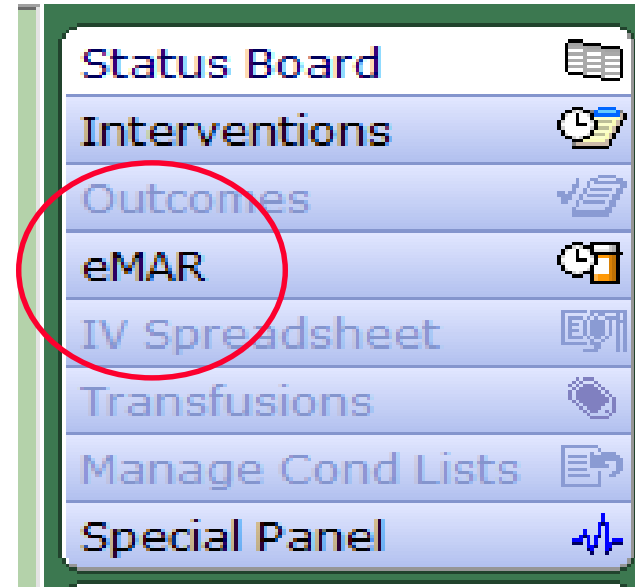
Sched	Medication	Dose	Route	Freq	Current Status
21/08 0730	INSULIN LISPRO (HUMALOG) 100 UNITS/ML (VIAL-10 ML)	10 UNIT	SC	QIDAC	Active
21/08 0900	METFORMIN 250 MG HALF TAB	250 MG	PO	QID	Active
21/08 1130	INSULIN LISPRO (HUMALOG) 100 UNITS/ML (VIAL-10 ML)	10 UNIT	SC	QIDAC	Active
21/08 1300	METFORMIN 250 MG HALF TAB	250 MG	PO	QID	Active
21/08 1400	IV: DEXTROSE 5 % IN WATER 50 ML CEFAZOLIN SOD 1,000 MG	100 MLS/HR	IV	Q8HR	Unverified
21/08 1630	INSULIN LISPRO (HUMALOG) 100 UNITS/ML (VIAL-10 ML)	10 UNIT	SC	QIDAC	Active
21/08 1700	METFORMIN 250 MG HALF TAB	250 MG	PO	QID	Active
PRN	MORPHINE 10 MG TAB *SHORT ACTING*	10 MG	PO	Q4HR	Active

At the bottom of the window, there is a button labeled "eMAR" which is circled in red, and a "Close" button with a red 'X' icon.

Section 3: eMAR

Navigation

- You can also access eMAR in the side panel in the PCS



Section 3: eMAR

Medication Status and Order Information Headings

✓	Start	Medication	Dose	Next Sched	History ▲	Assoc
	Stop		Route	Ack/View Ord	Monograph	Asmnt
	Current Status		Frequency	Adjustment	Co-sign	Ref Err
	14/08/19 1300	Rx R000001055 METFORMIN 250 MG HALF TAB (Glucophage)	250 MG < 1 HALF TAB >	20/08 1700 20/08 2100	0900 26 hrs 250 MG	
	10/02/20 1259		PO		▶	
	Active		QID			

Label Comments

WITH FOOD

Section 3: eMAR

Medication Status and Order Information Headings

- **Start-** start time of the order
- **Stop-** stop time of the order
- **Current Status-** The current status will be one of the following: Active, Hold, Future Hold, Pending, Cancelled, Discontinued, Unverified
- **Medication-** The medication cell includes the RX number, medication trade name in BOLD, generic name, medication strength and medication form. The eMAR can hold 40 medications on one page, after that it will have multiple pages.
- **Dose-** Ordered dose and form of a medication order
- **Route-** Route of administration
- **Frequency-** frequency of administration

Section 3: eMAR

Medication Status and Order Information Headings

- **Next Schedule-** This cell will display the next 2 schedule dates and times for administration. If a reassessment is due, “reassess” will appear along with the time the reassessment is due (pain medication for example). Overdue items will display in red in this column per your eMAR time period setting.
- **Adjustment:** If the frequency for an order was edited by the pharmacist or the physician, “freq/time adj” will show in this column. This is a flagging message so you know a change has been made.
- **History:** The date and time of the last recorded activity. You can click on this cell to access the Edit eMAR screen

Section 3: eMAR

Medication Status and Order Information Headings

- **Monograph:** This cell will have a right arrow indicator if there is an associated monograph. You are also able to print the monograph.
- **Cosign:** it will show “cosign” if a cosign is needed for a high risk medication such as insulin, or narcotic patch we will go into more detail on the next slide.
- **Assoc:** Medications can have EMR values associated to them so that users can reference clinically relevant information. An arrow will appear if there is associated data relevant to this medication. For example: hold medication if pulse is less than 50
- **Asmnt:** right arrow indicator will appear in this cell if an assessment is attached to this medication order. For example, for injectable medications, patches, PRN pain meds, vaccines.
- **Ref Error:** there will be an indicator in this cell if a refill rule errors out when the refill list is run

Section 3: eMAR

Assessment Heading

Subcutaneous Injection	
Injection Side	<input type="radio"/> Left <input type="radio"/> Right
Injection Location	<input type="radio"/> ABD- Upper Quadrant <input type="radio"/> ABD- Lower Quadrant <input type="radio"/> Upper Arm <input type="radio"/> Thigh <input type="radio"/> Buttocks
Subcutaneous Injection Comment	<input type="text"/>
	Optional
Drug Given by IV Route	<input type="radio"/> Yes

For example if you have an injectable medication, this screen will pop up for you to fill in, or for a patch, this screen will pop up.

Section 3: eMAR

eMAR Sorting Options

- The primary way the eMAR is sorted is with the next scheduled medication showing first (or the most overdue), followed by active medications, followed by discontinued
- If multiple medications are due at the same time, they are sorted by route of administration, with medications of the same route grouped together
- You can also sort by pressing the different heading options

Section 4: Medication Administration

Bedside Medication Verification and eMAR process

What is BMV?

BMV (bedside medication verification) is part of the closed loop medication management system, the last step before the medication reaches the patient.

It involves scanning the patients armband and scanning the medication packages.

If a patient's armband is not able to be scanned, it needs to be replaced before you can administer your medication.

You must scan armband attached to patient. Do not scan loose armbands or armbands attached to the bed

Section 4: Medication Administration

How to administer medications

Step 1: Take the WOWs (which now include the new scanner), your medications, and other supplies you will need for preparing to administer your medications into the patient's room. If on isolation, leave the WOW at the door entrance.

Step 2: Log into Meditech and open the patient's eMAR

Step 3: Scan the barcode on the patients ID band. If the armband you scan does not match the eMAR you have opened, it will say "wrong patient" and close this eMAR.

Step 4: The nurse scans patient's medications. If it is not the right medication it will say "wrong medication"

Step 5: The nurse administers medications

Step 6: The nurse clicks on the save button in eMAR

Section 4: Medication Administration

Types of Medication Administration

Some medications look different to sign off including;

- Medication that require a co-sign (ex. Insulin)
- CADD pump medication
- Controlled patch medication (ex. fentanyl)

Section 3: eMAR

Cosigning

When you click on cosign, the person administering and the person cosigning have to enter their pin number.

Please remember- DO NOT LOSE YOUR PIN OR FORGET IT.

The screenshot shows a window titled "Electronic Signature" with a table of medication orders and signature input fields. A red circle highlights the "Co-sign" column in the table.

Start	Medication	Dose	Next Sched	History	Assoc
Stop		Route	Ack/View Ord	Monograph	Asmnt
Current Status		Frequency	Adjustment	Co-sign	Ref Err
20/08/19 1130	Rx R000001062 INSULIN LISPRO (HUMALOG) 100 UNITS/ML (VIAL-10 ML) (Humalog)	10 UNIT < 0.1 ML >	20/08 1630 20/08 2100	1431 24 hrs 10 UNIT	
19/08/20 1129 Active		SC QIDAC			Co-sign

Below the table, there are two signature input sections:

- Signed:** User: Foroozan Zayani, PIN: [redacted], Signed: [checkbox]
- Cosign:** User: [redacted], PIN: [redacted], Signed: [checkbox]

Buttons: Cancel (X), OK (checkmark)

Section 4: Medication Administration

Types of Medication Administration

CADD Pump Recording	
Concentration (mg/mL)	<input type="text"/>
Reservoir Volume (mL)	<input type="text"/>
Continuous Rate (mg/hr)	<input type="text"/>
Demand/Breakthrough Dose (mg)	<input type="text"/>
Demand Dose Lockout (minutes)	<input type="text"/>
Demand Doses Given (total # given)	<input type="text"/>
Demand Doses Attempted	<input type="text"/>
Total Demand Given (mg)	<input type="text"/>
Site Checked	<input type="text"/>
Pump Cleared	<input type="radio"/> Yes
Please indicate the reason why CADD pump was stopped	<input type="checkbox"/> CADD discontinued <input type="checkbox"/> CADD concentration change <input type="checkbox"/> CADD pump changed <input type="checkbox"/> Cassette changed <input type="checkbox"/> Battery changed <input type="checkbox"/> Line/SC site changed <input type="checkbox"/> Patient deceased
Was cassette returned to pharmacy?	<input type="radio"/> Yes
What was reservoir volume when returned to pharmacy? (mL)	<input type="text"/>

For CADD pumps, you will now complete the CADD Pump Recording sheet in the eMAR (rather than the previous paper sheet)

Section 4: Medication Administration

Types of Medication Administration

Electronic Signature

Start	Medication	Dose	Next Sched	History	Assoc
Stop		Route	Ack/View Ord	Monograph	Asmnt
Current Status		Frequency	Adjustment	Co-sign	Ref Err
20/09/19 1515	Rx R000001250 MORPHINE SULFATE 400 MG/100 ML CASS	400 MG < 100 ML >	20/09 1515 20/09 1615		
04/10/19 1514		SC		▶	▶
Active		Q1H		Co-sign	

User	PIN	Signed
Krystal Lawley		

Cosign		Signed
User	PIN	Signed

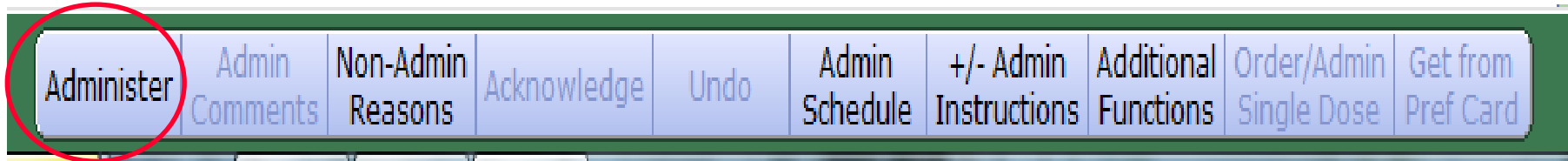
Cancel OK

Note – it is required to be completed at the bedside with another nurse who will enter their PIN as validation once you have completed the **CADD Pump Recording** screen

Section 4: Medication Administration

How to administer medications: Manually Administering Medications

In the footer bar of the eMAR page, there is a button called “administer”



- This is used to manually document that you administered the selected medication
- You only use this if: you are unable to scan a medications barcode or if you are signing for another nurse.
- You are then able to add “admin comments” to describe why you are using this function.

A screenshot of a dialog box titled 'Administration Date, Time & User'. The dialog box has a title bar that says 'Software by MEDITECH'. Inside the dialog, there is a section for 'Date, Time & User' with the following text: 'Wed, 21 Aug 2019 1219 by Foroozan Zayani'. Below this, there are two input fields: 'Date' with a dropdown arrow and the value '21/08/2019', and 'Care Provider' with an empty text box. Below the 'Date' field is a 'Time' section with a dropdown arrow and the value '1219'. Below the 'Time' section is a numeric keypad with buttons for 7, 8, 9, 4, 5, 6, 1, 2, 3, a left arrow, 0, and T/N. At the bottom right of the dialog are 'Cancel' and 'OK' buttons with red and green icons respectively.

Section 4: Medication Administration

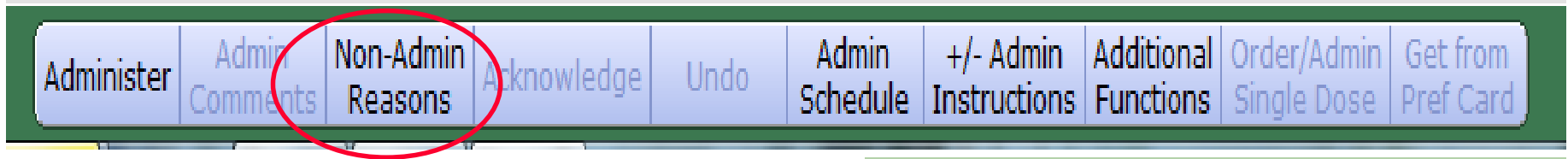
How to administer medications: Signing for another nurse?

- As mentioned in the previous slide, you will be able to sign off a medication for another nurse.
- This is used if a nurse forgot to sign off a medication before going home, and now the medication is showing as “over due”
- The process would be : speaking with the nurse to confirm the medication was given. If it was, the nurse can enter the date and time it was giving, and add a comment that you verbally spoke with the nurse to confirm.

Section 4: Medication Administration

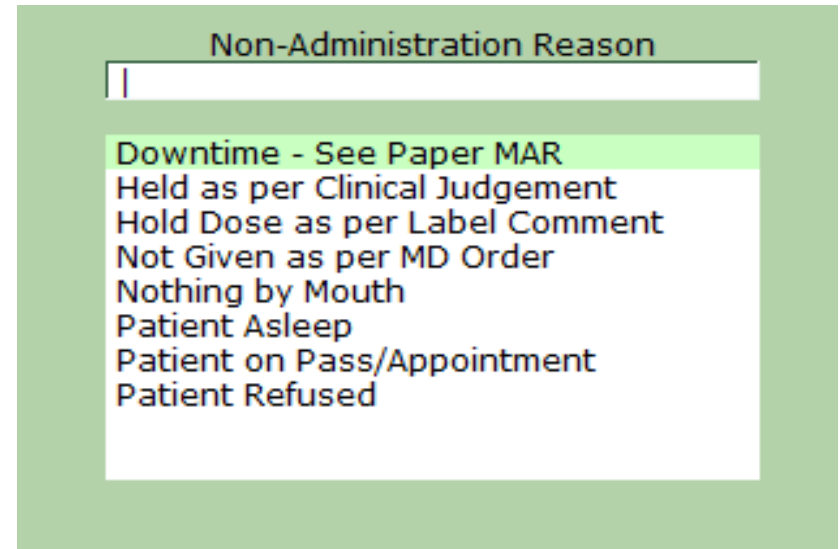
How to administer medications: Non administer reasons

If you are not administering a selected medication, you chose “non-admin reasons” in the



You will enter a reason for not administering a medication from the list that will pop up

please note, you will have to do this for all scheduled medications when a patient is on pass



Section 4: Medication Administration

How to administer medications: Undo Function

You are able to “Undo” a scanned medication before saving by clicking on the purple writing before the medication order and selecting “Undo” on the task bar below

The screenshot displays a medication administration interface. At the top, there is a table with medication details. Below this, a green bar indicates the medication was administered on 07/10/19 at 1654. Below the green bar, there is a section for 'Label Comments' with a text input field containing 'MAXIMUM 4000 MG ACETAMINOPHEN (12 TABS) / 24'. At the bottom, a task bar contains several buttons: 'Administer', 'Admin Comments', 'Non-Admin Reasons', 'Acknowledge', 'Undo', 'Admin Schedule', '+/- Admin Instructions', 'Additional Functions', 'Order/Admin Single Dose', and 'Get from Pref Card'. The 'Undo' button is circled in red. A red arrow points to the purple text 'Administered - 07/10/19 at 1654 (02/10/19 2100) 325 MG' in the green bar.

27/09/19 1300	Rx T000000302	325 MG < 1 TABLET >	UNV 02/10 2100 03/10 0900	1648 6 mins 325 MG	
26/09/20 1259	✓ ACETAMINOPHEN 325MG TAB (Tylenol)	PO			
Unverified		QID			

Administered - 07/10/19 at 1654 (02/10/19 2100) 325 MG Location: 2 North

Label Comments

MAXIMUM 4000 MG ACETAMINOPHEN (12 TABS) / 24

Administer Admin Comments Non-Admin Reasons Acknowledge **Undo** Admin Schedule +/- Admin Instructions Additional Functions Order/Admin Single Dose Get from Pref Card

Section 4: Medication Administration

How to administer medications: Undo Function

If you scan the medication and save, you are able to undo by selecting the “History” column of the MAR then selecting

✓	Start	Medication	Dose	Next Sched ▾	History	Assoc
	Stop		Route	Ack/View Ord	Monograph	Asmnt
	Current Status		Frequency	Adjustment	Co-sign	Ref Err
	24/09/19 1700	Rx T000000273 ACETAMINOPHEN 325MG TAB (Tylenol)	325 MG < 1 TABLET > (See Dose Instructions)	UNV 02/10 2100 03/10 0900	1654 10 mins 325 MG	
	23/09/20 1659		PO			
	Unverified		QID			

You will then be brought to another screen where you can select the medication administration event you would like to remove and select “Undo” on the bottom task bar
*** *Note: you can only “Undo” what you have scanned and save, you can not do it for an event completed by another nurse****

Section 4: Medication Administration

How to administer medications: Undo Function

You will then be brought to another screen where you can select the medication administration event you would like to remove and select “Undo” on the bottom task bar ***** Note: you can only “Undo” what you have scanned and save, you can not do it for an event completed by another nurse*****

The screenshot displays a medication administration interface. At the top, there is a header table with columns: Start, Stop, Current Status, Medication, Dose, Next Sched, History, and Assoc. Below this is a detailed view for a medication administration event on 24/09/19 at 1700. The medication is ACETAMINOPHEN 325MG TAB (Tylenol). The dose is 325 MG < 1 TABLET > (See Dose Instructions). The next scheduled time is UNV 02/10 2100 03/10 0900. The history shows 1654 18 mins 325 MG. The current status is 23/09/20 1659 Unverified. Below this is a table of medication administration events.

Scheduled	Performed by	Entered by	Patient Care Location Performed from Module	Dose Given	Admin Comment Non-Admin Reason	Asmnt	Type
02/10/2019 1700	Krystal Lawley 07/10/2019 1654	Krystal Lawley 07/10/2019 1654	2 NORTH PCS	325 MG			Admin
	Foroozan Zayani 24/09/2019 1615	Foroozan Zayani 24/09/2019 1615					Ack

At the bottom of the interface, there is a task bar with three buttons: "Undo", "View Order", and "Monograph". The "Undo" button is circled in red.

Section 4: Medication Administration

How to administer medications: Administration Schedule

Signing off past medications

- In the event that you will need to sign off a medication for another nurse (for example they a nurse has gone home and forgot to sign off the medication but they gave it) by doing the following
 1. Select the medication
 2. Change the time to when it was given
 3. Type the nurses name in the “Care Provider” and select the name
 4. Press “OK”

