Creating Your Own AutoText in Cerner PowerChart

AutoText is text you find yourself using repeatedly for common scenarios in your practice. Why type or dictate the same thing dozens of time a week when you can insert it with a shortcut and then make some minor adjustments? Note that these can be used in DynDocs, PowerNotes, and most any text field where you can type.

To create AutoText, begin with the **Manage AutoText** button, which can be found most anywhere you would manually enter text. One easy spot to find this that doesn’t require opening a patient’s chart is Communicate | Message on the toolbar:

![Communicate Message](image)

Then:

![General Message](image)

Other examples are text fields on workflow tabs:

![Subjective/History of Present Illness](image)
while directly editing a document:

...or the **Documentation** menu:

After clicking any of these, this popup appears:
You see a list of AutoTexts that have been created throughout the practice. You’ll notice that each has an abbreviation starting with a special character. Each department has its own special character or character combination, allowing a department to create AutoTexts that are easy to find for its users.

There have also been special characters reserved for individual/personal AutoTexts. These are:

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~ ! #
```

To create a new AutoText, click the **New Phrase** button:

In the **Abbreviation** field, choose an abbreviation for your AutoText. This is the shortcut you’ll type to call up your AutoText.
Start with one of the three special characters listed above. To keep your AutoTexts organized, you might want to follow that with your initials, then text that reflects the topic:

Keep in mind that this area is case-sensitive. If you use capital letters in your AutoText, you’ll have to type capital letters to bring up your AutoText, so you may wish to use lower-case letters, at least near the start of the abbreviation, to make it easier to call up your AutoText.

Next you can enter a **Description**, which can help clarify what your AutoText is about:

Now click the **Add Text** button:
Enter your text:

Note that if you’ve dictated or typed this in a note already you could copy and paste it here.

After entering your text, click the Convert HTML to RTF button:
Without going into a lot of detail, this just makes it so you can use your AutoText in a lot of different areas of the EHR.

Next click **OK**: 

then **Save**:
To use your AutoText, in a text field or document, start to type your abbreviation:

```
Assessment & Plan
```

The more you type, the more the list narrows down.

Double-click the desired AutoText:

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Assessment & Plan
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…and your text is inserted:
You can type or dictate to further refine this as needed for this particular patient.

Think about how and where you will use your AutoText.

How you want to use your AutoText may influence some of the choices you make when you’re creating it—especially whether you intend to use it mainly when you would otherwise be typing in the EHR, or whether you mainly want to use it with Dragon voice transcription.

If you just want several lines of text to appear in your document, that’s easy. Just create the text as illustrated above. After you’ve inserted it, you can always manually edit a few spots as desired. This works the same whether you’re typing or using Dragon.

If you have a fill-in-the-blank situation, however, things differ a bit. Dragon recognizes bracketed phrases as fields you can jump to with voice commands like “Next field.” When typing within a text field in the EHR, however, you can jump to the next field by hitting the F3 key, if you use the underscore character to indicate those fields.

Here’s an example. Say as part of a procedure note AutoText you want a line to record the estimated blood loss.

If you intend to call up this and use it mainly with Dragon, you would create that line like this:

Estimated blood loss [] ml.

In Dragon you could navigate to that bracketed field using voice commands such as “Next field,” then speaking the number you wish to enter, for example 50. When you’ve filled in all the fields, you’ll say “Accept defaults,” and all the brackets will go away.

If you intend to utilize it in a spot where you’ll mainly just be typing in the EHR, you’d create that line like this:

Estimated blood loss _ ml.

You could hit F3, and the cursor would jump to each underscore in your text in succession, where you could then type the number.

In either case, you can always just use the mouse/mousepad to go directly to the field. Regardless of which approach you take, the end result would look like this:
Estimated blood loss 50 ml.

The downside of using brackets when you’re not using Dragon is that if you never give the Dragon command “Accept defaults,” the brackets will remain, looking like this:

Estimated blood loss [50] ml.

Some people may not like that appearance; some won’t care.

So if you intend to use the AutoText only in Dragon, you may want to use brackets. If you intend to use it only when typing, or both for typing or Dragon, you probably want to use the underscore.

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And here’s another example that falls a bit in between those. Say you have an AutoText for a typical adult negative Review of Systems.

If you create it with brackets, it might look like this:

Constitutional: [No fever].
ENMT: [No nasal drainage or sore throat].
Respiratory: [No cough or dyspnea].
Cardiovascular: [No chest pain, palpitations, or edema].
GI: [No abdominal pain, diarrhea, nausea, or vomiting].
GU: [No dysuria].
Neuro: [No dizziness, headache, or focal weakness].
Integumentary: [No pruritus or rash].
Musculoskeletal: [No joint pain or neck/back pain].
Hema/Lymph: [No lymphadenopathy].

You could use Dragon navigation commands like “Next field” to move among the bracketed fields. If you then dictate, it’ll replace the whole field. When done you would say “Accept defaults” to remove the brackets.

If you weren’t using Dragon, you’d have to use the mouse to place the cursor at the desired location to make the change. And if you wanted to get rid of the brackets, you’d have to remove them one at a time.

So you might prefer to make the AutoText without brackets, like this:

Constitutional: No fever.
ENMT: No nasal drainage or sore throat.
Respiratory: No cough or dyspnea.
Cardiovascular: No chest pain, palpitations, or edema.
GI: No abdominal pain, diarrhea, nausea, or vomiting.
GU: No dysuria.
Neuro: No dizziness, headache, or focal weakness.
Integumentary: No pruritus or rash.
Musculoskeletal: No joint pain or neck/back pain.
Hema/Lymph: No lymphadenopathy.

You can’t use Dragon navigation commands, but you can still put the cursor wherever you need it, then dictate or type the change.

Here’s another advantage of using this approach. Say you want to change Musculoskeletal to “No joint pain or neck/back pain. Has diffuse myalgias in extremities.” With brackets and using Dragon, you’ll have to dictate that entire phrase. Without the brackets, you could just insert the cursor after pain and dictate or type “Has diffuse myalgias in extremities.”

So it becomes a matter of preference. Is the convenience of voice navigation with Dragon useful to you, or does the presence of all the brackets bother you if you don’t use Dragon?

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Here are a few other housekeeping tips.

You can copy an AutoText, for example, to create a new variation of it, or you can delete one you no longer use:

![AutoText Management](image)

You can also edit text of one you’ve already created:
When it comes to creating all of these AutoTexts, you may be thinking about sitting down and doing a bunch all at once, and that approach is fine. But many people never get around to that. Note that it is actually pretty easy to create these on the fly as you’re seeing patients. Every time you find yourself typing or dictating something that you think you might use again in the future, copy that text and save it as an AutoText. You may find yourself editing/refining it a bit the first few times you use it, but after a few days you’ll probably have it buffed pretty well. All this only takes you a moment, and the future time savings will pay you back multiple times over.