CERNER MILLENNIUM

Patient Lists

This demonstration reviews creation of patient lists, & some of the limitations of patient lists.

This has been prepared/updated for Millennium code level 2015.01.21 & mPage 6.4. Subsequent updates may display cosmetic & functional changes. All patient names displayed are fictitious.
Use the keyboard or mouse to advance.
Introduction

There are several types of patient lists that can be created in our Unity (Cerner Millennium) EHR. Some can be useful; others, not so much. There are also a few steps that are easy to overlook for the beginning user that can lead to undesirable results. We’ll try to clarify all this a bit in this lesson.
Rounding Lists

One of the most common needs is to create a rounding list that can be shared among all attendings, residents, students, PharmDs, & other team members. While at first “Patient List” appears to be a good way to create these, a better approach that allows you to create a list that can continue to be used month after month as members of the ward team change is the Care Team List, on the Physician Handoff tool. Please see the lesson on our educational page illustrating this.
Getting Started

Here’s how to begin creating a patient list.
On the toolbar, click **Patient List**.
Lists you’ve previously chosen to view are displayed on tabs. To create lists, update them, & select which ones you wish to display, click the **wrench**, or **list maintenance button**.
The first thing you see is all of the lists you’ve created, or that have been shared with you by others. Just because you have access to a list doesn’t mean you have to view it. The **Active Lists** box on the right shows the lists you’re currently viewing in tabs.

To determine which lists you see on the tabs, select a list & use the left/right arrows to move them to or from the **Active Lists** box.
To create a new list, click **New**.
Several types of lists are offered. Feel free to experiment, but the ones most useful to the average provider are **Custom, Location, & Relationship**. We’ll review these on the following slides.
Location Lists

Location-based lists show you all the patients on a specific floor or unit in the hospital. While it may not help you create a rounding list, this can be a useful thing to know, & it’s a pretty easy way to introduce Patient Lists.
To begin, double-click Location.
Locations will be selected (bold) on the left. Click the + sign next to Locations to expand that folder.
There are a lot of locations available, & you probably won't recognize all of them. For this example, scroll down to USA Medical Center & click the + sign to expand that folder.
For some reason you see **USA Medical Center** again under that, so click the *+ sign* once more to expand further.
You’ll again see a long list of locations. For this example, we’ll make a list of all patients in MICU. Scroll down through the list, & click the checkbox next to MICU.
But you’re not done yet. On the left click **Encounter Types**, & on the right select **Emergency, Inpatient, Observation, & Outpatient in a Bed**.
Picking these statuses may not always be necessary (in this example most MICU patients are probably inpatients), but it is a good habit to get into. This makes sure you exclude other encounter types we don’t want for patients who are not actually in the building. If you create a list that looks too long & has names of patients who aren’t actually there, check this setting.
Next, on the left click **Discharged Criteria**, & on the right select **Only display patients that have not been discharged**.

But notice this presents you another interesting option— it might be useful to have a list of patients who have been discharged in the last few days, & you have the option to specify that here.
The program creates a list name for you based on your selections, but you can edit that as desired.

When done click **Finish**. (Yes, there’s a **Next** button, but we’ll get to that a little later.)
Your new list appears in the **Available Lists** box on the left. Select it, then click the **right arrow** to move it to the **Active Lists** box.
Notice that you can rearrange your tabs. Select one, & use the **up or down arrows** to move the tab left or right.

When done click **OK**.
Your new list is now available on a tab. Notice that your list criteria are summarized at the top of each list.
Location Lists

Uses:
- Makes a good rounding list if you’re following all patients in a specific location.
- Helps you monitor locations you frequently need to cover (e.g., an ICU, burn unit) or keep an eye on from an FYI standpoint, like the ED.

Limitations:
- Not very useful for making a rounding list if your patients are in multiple locations, or you don’t have all the patients in a single location.
Relationship Lists

Relationship lists are based on the relationship between the patient & provider. Sometimes this can be useful, but often the logistics of our residency programs make these relationships less than totally dependable for rounds-list purposes.
There are two general types of relationships. **Lifetime relationships**, like PCP, are set by registration/front office staff. **Encounter (or Visit) relationships** can be set by the registration staff, & are also set when you make a selection on the **Assign a Relationship** popup the first time you open a patient’s chart on that encounter.
As before, to begin creating a list click the wrench, or list maintenance button. Then click New.
Double-click **Relationship**.
Say you’re an attending, & you’d like to create a list of all the patients you’re seeing in either hospital for any reason. You might be the attending or admitting physician, a covering physician, a consultant, etc. To accomplish this you’ll need to pick some Visit & Lifetime Relationships. Click the + sign next to Visit Relationships.
There is a long list of relationships. Pick the ones that are pertinent to you. For this example we’ll pick Admitting Physician, Attending Physician, Consulting Physician, & Covering Physician, then scroll all the way to the bottom of the list so you can see Lifetime Relationships.
Click the + sign next to Lifetime Relationships & pick any that are pertinent to you, e.g., Primary Care Physician. You might also just pick All Lifetime Relationships. That way, if they apply to you they’ll be included, & if they’re never used by you it won’t matter.
If you only want inpatients, select **Encounter Types** & **Discharged Criteria** as demonstrated previously.

Give the list a name, then click **Finish**.
Select your new list & click the right arrow to move it to the Active Lists box.
Relationship Lists

Uses:
• Can be used for a rounding list focused on a single provider, if you are sure all the relationships are valid.

Limitations:
• You can’t build a relationship list based on two or more providers. When patients on a service can be admitted to one of several attendings, this becomes a problem.
• Some of our relationships are a bit specious or outdated, e.g., when you have to pick the best alternative from a list that isn’t quite right, or the PCP is outdated on the patient’s demographics.
• You sometimes need to view the chart of a patient who is not one of your current inpatients. But by opening the chart you establish a relationship, & thus add them to your list.
• It’s not easy to pass this sort of list on to the next team at the end of a rotation.
Custom Lists

Custom lists allow patients to be manually added to or removed from a list by the list owner. This can create a useful rounding list, though there are some caveats that can hamper the practicality a bit.
As above, to begin creating a list click the wrench, or list maintenance button. Then click **New**.
Double-click **Custom**.
The simplest kind of custom list is one where you just manually add or remove patients as desired. To do that, just give your list a name & click Finish.
Select your new list & click the right arrow to move it to the **Active Lists** box.
To add a patient to this list, click the **Add Patient** button.
Perform a patient search. Select the patient, then double-click the desired encounter; for inpatient lists this will generally be the current inpatient encounter.
The patient is added to the list.

<table>
<thead>
<tr>
<th>Location</th>
<th>Name</th>
<th>MRN</th>
<th>FIN</th>
<th>Age</th>
<th>DOB</th>
<th>Admitted</th>
<th>Admitting Physician</th>
<th>Visit Reason</th>
<th>Primary Care Physician</th>
</tr>
</thead>
<tbody>
<tr>
<td>MC Operatir ZZTESTDUFFY, FEMALEA NOSHOW</td>
<td>051215083 1200000341 41 years 05/27/76</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Liles MD, Joe Spenc exp lap</td>
<td></td>
<td>Duffy MD, Robert Lamar</td>
</tr>
</tbody>
</table>
When you have a patient’s chart open you can also quickly add that patient to a custom list. On the menu click Patient | Add Patient to a Patient List | Select desired list.
These patients have been added to the list.

<table>
<thead>
<tr>
<th>Location</th>
<th>Name</th>
<th>MRN</th>
<th>FIN</th>
<th>Age</th>
<th>DOB</th>
<th>Admitted</th>
<th>Admitting Physician</th>
<th>Visit Reason</th>
<th>Primary Care Physician</th>
</tr>
</thead>
<tbody>
<tr>
<td>USAMC In-House</td>
<td>ZZTESTDUFFY, FEMALEA NOSHOW</td>
<td>051215083 1200000341</td>
<td>41 years 05/27/76</td>
<td>Liles MD, Joe Spenc exp lap</td>
<td>Duffy MD, Robert Lamar</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>USA Health</td>
<td>ZZTESTDUFFY, ANALEMMA</td>
<td>051215082 1200038234</td>
<td>20 years 01/04/97 10/09/17 14:20 CDT</td>
<td>Duffy MD, Robert Lamar</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Custom Lists

Uses:
• It’s easy to build a rounding list like this, just by manually adding & removing patients.
• It allows you to add patients without regard to location, relationship, or other characteristics. This would allow you add patients to “shadow,” or include both inpatients & outpatients.
• You might keep discharged patients on the list until you have completed all post-discharge activities.

Limitations:
• The list has one owner, which may not be practical when ward attending & ward team residents/students change frequently throughout the year. The new team could appoint someone to rebuild the list as the rotation changes, or there are some sharing options you can employ (discussed above).
List Sharing (Proxy)

You often want more than one person to see your patient list, e.g., other members of the ward team or nighttime coverage team. To achieve this, lists can be shared.

Custom lists present a good way to demonstrate list sharing.
To share a list, view the list & click the List Properties button, then go to the Proxy tab.

Remember above how you saw a Next button on the screen where you clicked Finish at the conclusion of list creation? That Next button would take you to this step.

Click New.
To share a list, you give others **Proxy**. One way to do this is by selecting a **Group**. Some of these groups are useful, & some aren’t. Going forward we plan to better refine these groups.
A more practical way to grant proxy is to search for individuals. Select the **Provider** bullet & perform a search.
You can specify a time limit for the proxy. For attendings & maybe residents, you could leave it open-ended. For students you might indicate the end of their rotation.
You can also specify **Access** rights. Commonly, the list owner may be the only one with **Full Access**; this allows you to edit all aspects of the list.

- **Maintain access** allows the proxied user to add & remove patients from the list.
- **Read access** only allows the proxied user to view the list.
When everything has been specified, click **Apply**. To add more proxies, click **New** & repeat the process. When done, click **OK**.
Proxies

Uses:
- If one provider creates the custom list, you can provide others (e.g., all the residents) maintain access to be able to add & remove patients from the list. This would allow the list to remain useful even when the list creator is not currently on the team or rotation.

Limitations:
- The expired proxy list will eventually get pretty long. At present there is no way to prune this, & it doesn’t do any real harm. But you might want to periodically delete the list & create it anew to make it easier to view the proxy list.
In Conclusion

Hopefully this gives you a good idea of the potential uses & limitations of patient lists.

And remember Care Team Lists, on the Physician Handoff tool, may be a preferable option for creating a rounding list that incorporates a handoff tool & is durable throughout the year as rotation changes take place.