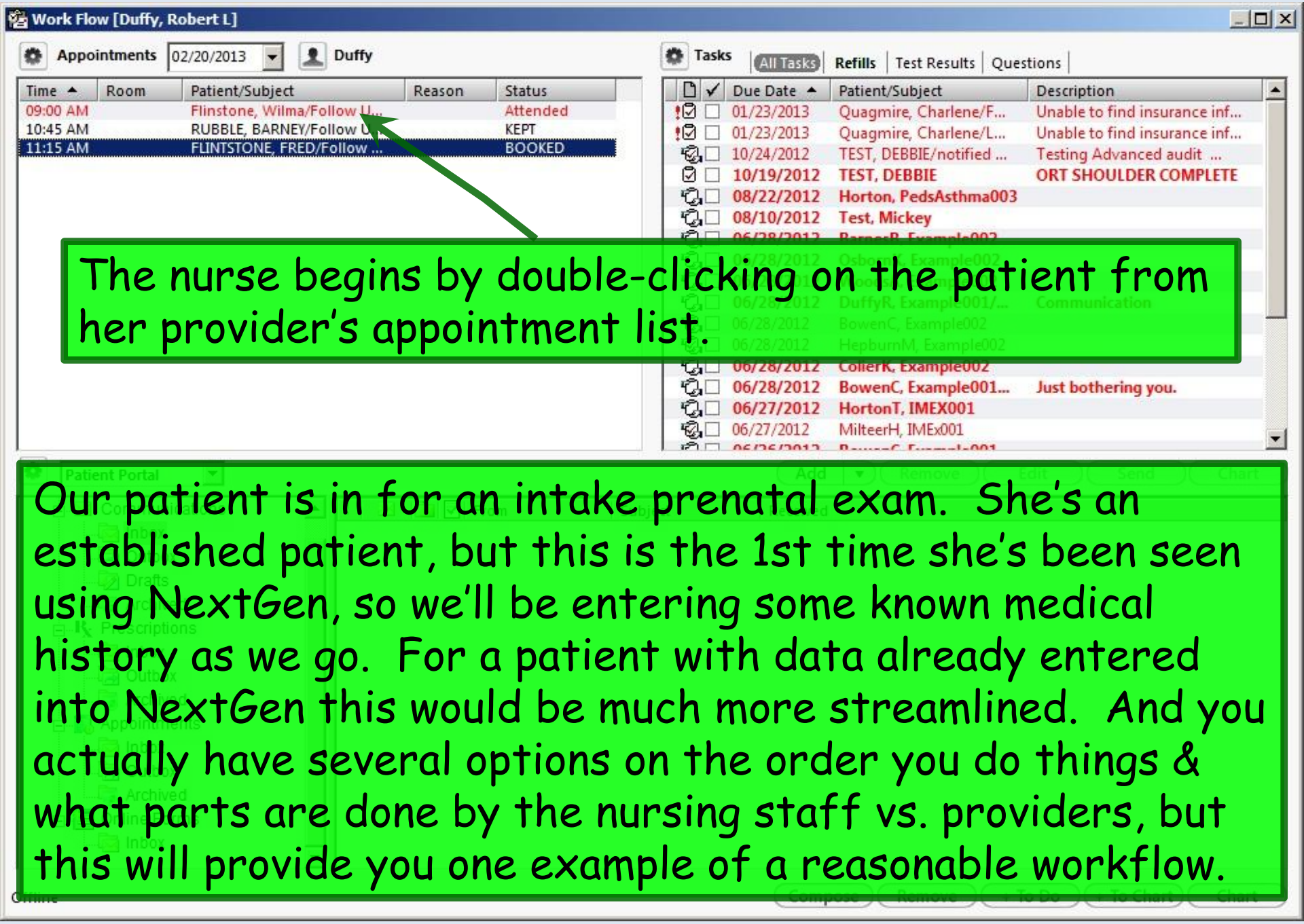
NEXTGEN
PRENATAL INTAKE VISIT
DEMONSTRATION

This demonstration reviews a typical intake prenatal visit. Details of the workflow will likely vary somewhat, depending on practice policy & clinic layout, though this should give you a good idea of the prenatal functionality within NextGen.

This has been prepared for EHR 5.8 & KBM 8.3, though some screen shots of older versions may appear if they don't compromise the presentation. Subsequent updates may display cosmetic and functional changes.

Use the keyboard or mouse to pause & resume as necessary.


Work Flow [Duffy, Robert L]
Appointments
02/20/2013
Duffy
Time
Room
Patient/Subject
Reason
Status
09:00 AM
Flinstone, Wilma/Follow U...
Attended
10:45 AM
RUBBLE, BARNEY/Follow U...
KEPT
11:15 AM
FLINTSTONE, FRED/Follow ...
BOOKED
Tasks
All Tasks
Refills
Test Results
Questions
Due Date
Patient/Subject
Description
01/23/2013
Quagmire, Charlene/F...
Unable to find insurance inf...
01/23/2013
Quagmire, Charlene/L...
Unable to find insurance inf...
10/24/2012
TEST, DEBBIE/notified ...
Testing Advanced audit ...
10/19/2012
TEST, DEBBIE
ORT SHOULDER COMPLETE
08/22/2012
Horton, PedsAsthma003
08/10/2012
Test, Mickey
06/28/2012
BowenC, Example002
06/28/2012
HepburnM, Example002
06/28/2012
CollerK, Example002
06/28/2012
BowenC, Example001...
Just bothering you.
06/27/2012
HortonT, IMEX001
06/27/2012
MilteerH, IMEx001
The nurse begins by double-clicking on the patient from her provider's appointment list.
Our patient is in for an intake prenatal exam. She's an established patient, but this is the 1st time she's been seen using NextGen, so we'll be entering some known medical history as we go. For a patient with data already entered into NextGen this would be much more streamlined. And you actually have several options on the order you do things & what parts are done by the nursing staff vs. providers, but this will provide you one example of a reasonable workflow.

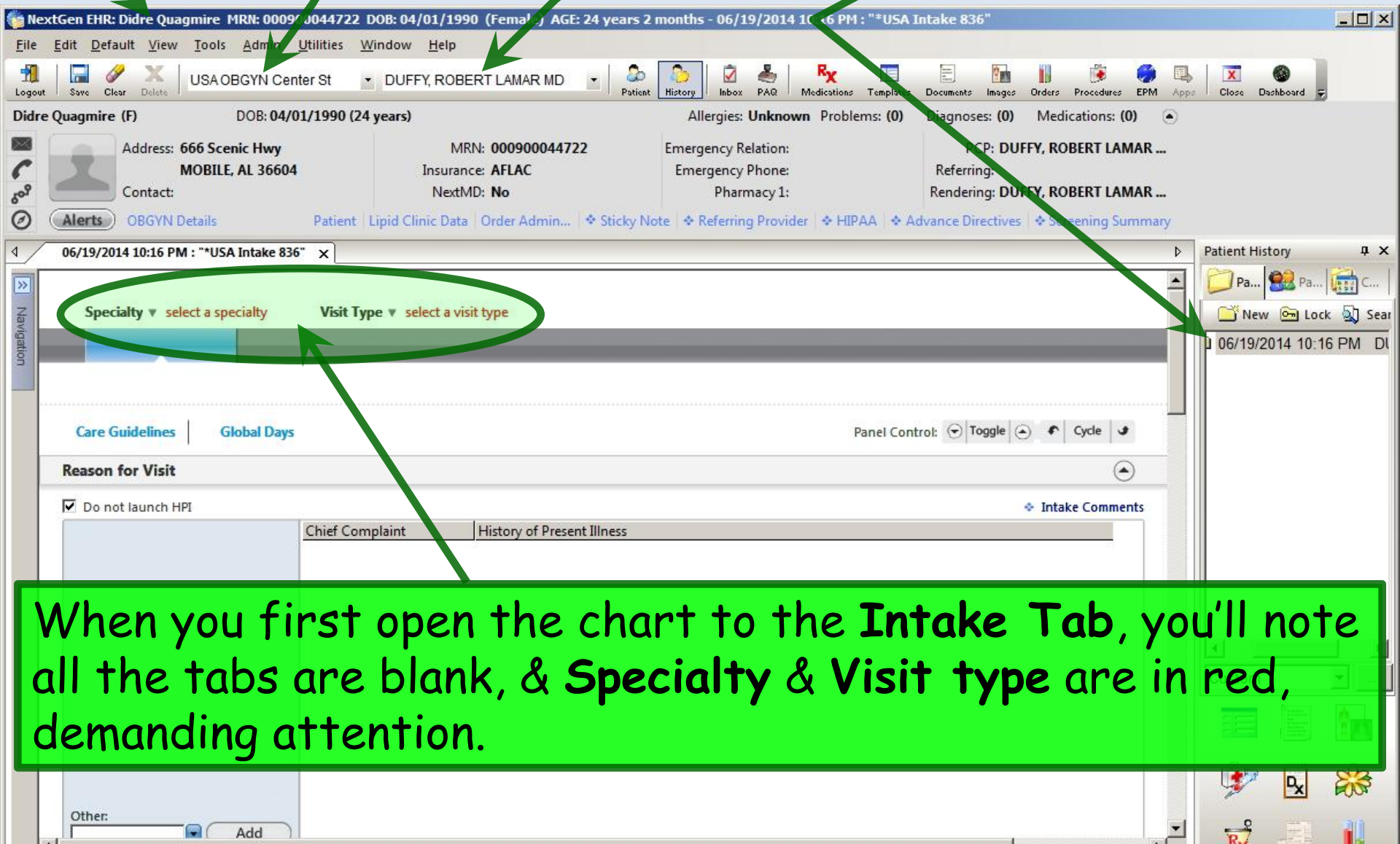
Always begin by performing the 4-Point check.

Patient

Location

Provider

Date

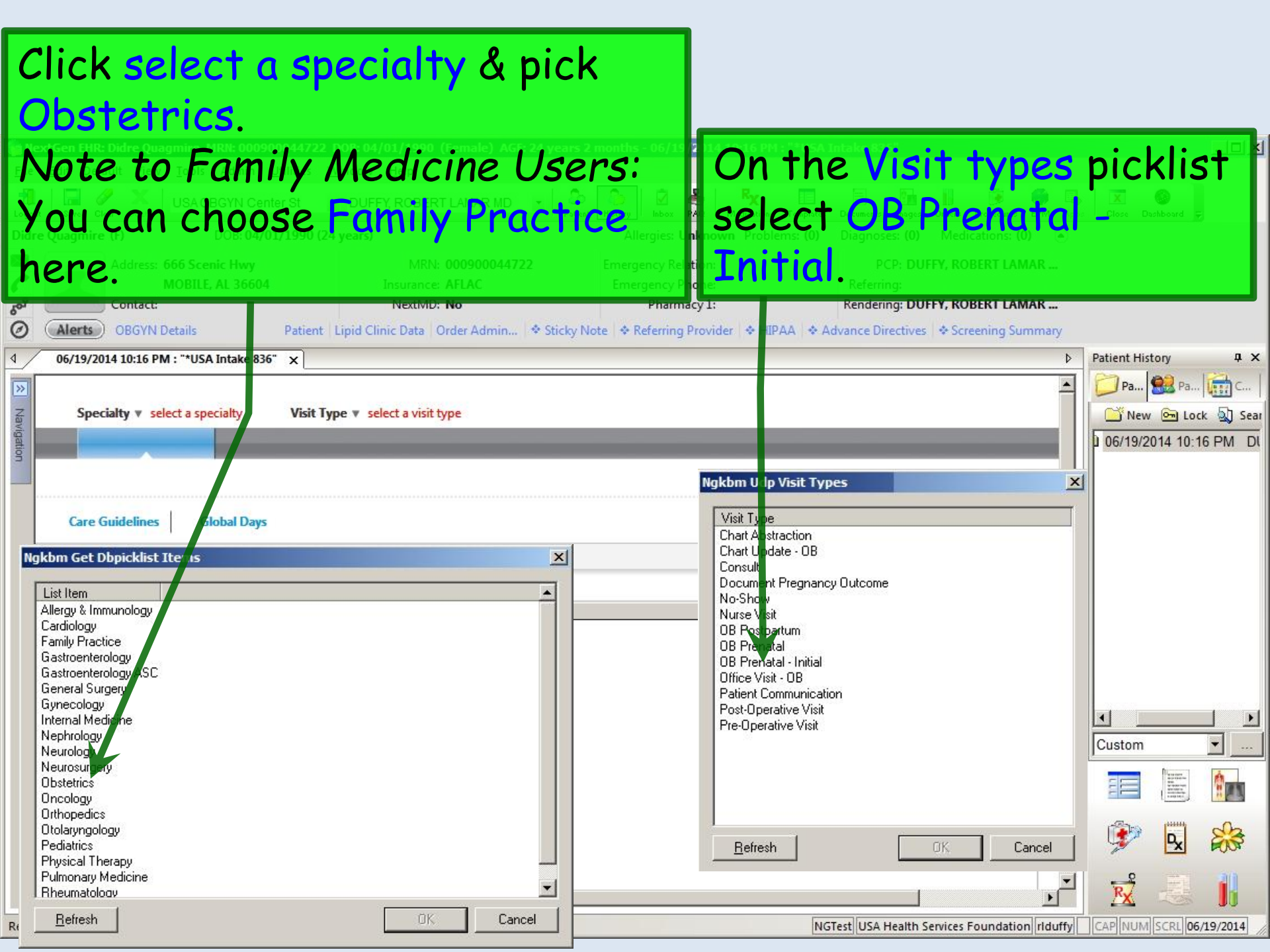


When you first open the chart to the **Intake Tab**, you'll note all the tabs are blank, & **Specialty** & **Visit type** are in red, demanding attention.

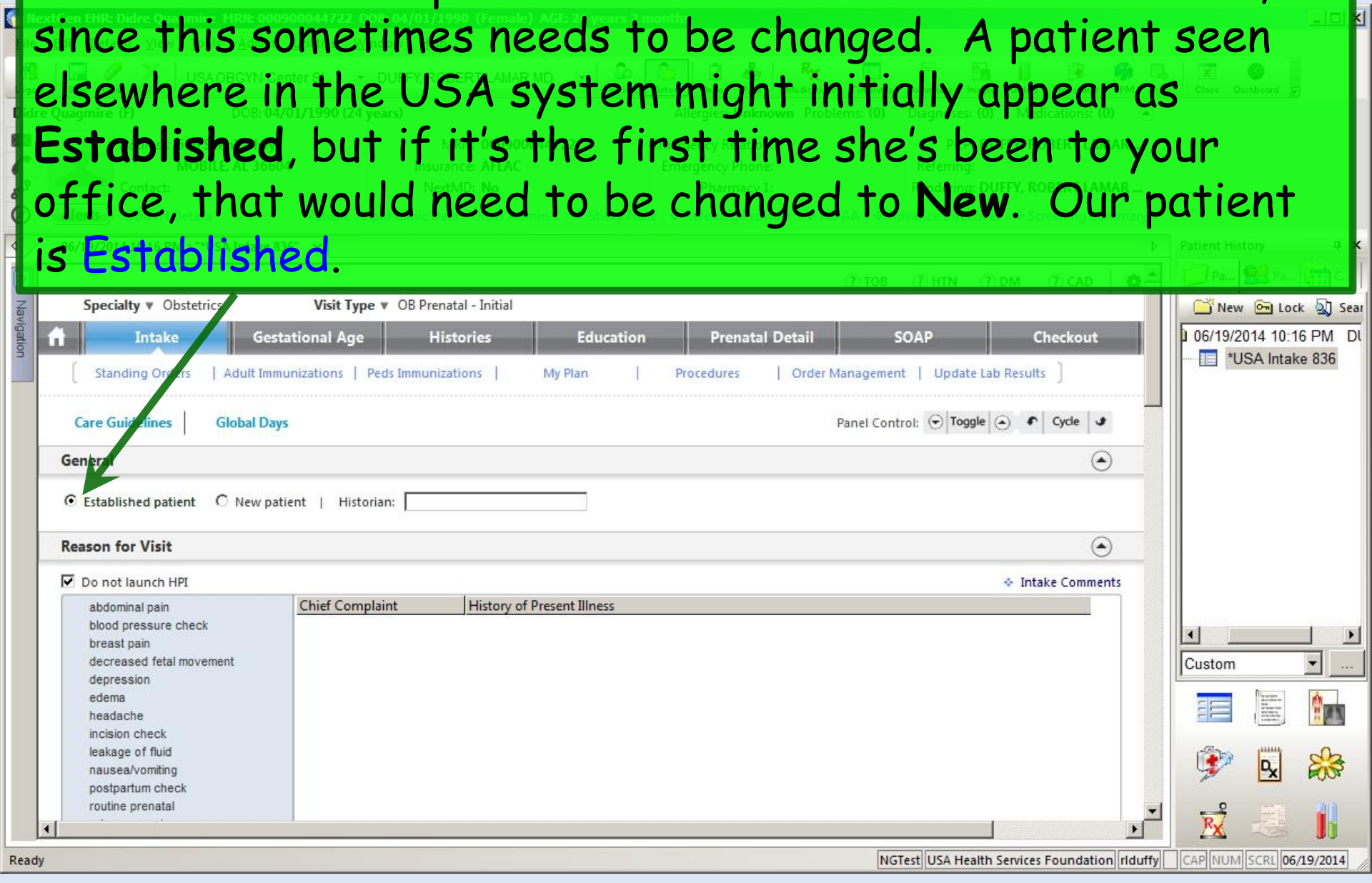
Click select a specialty & pick Obstetrics.

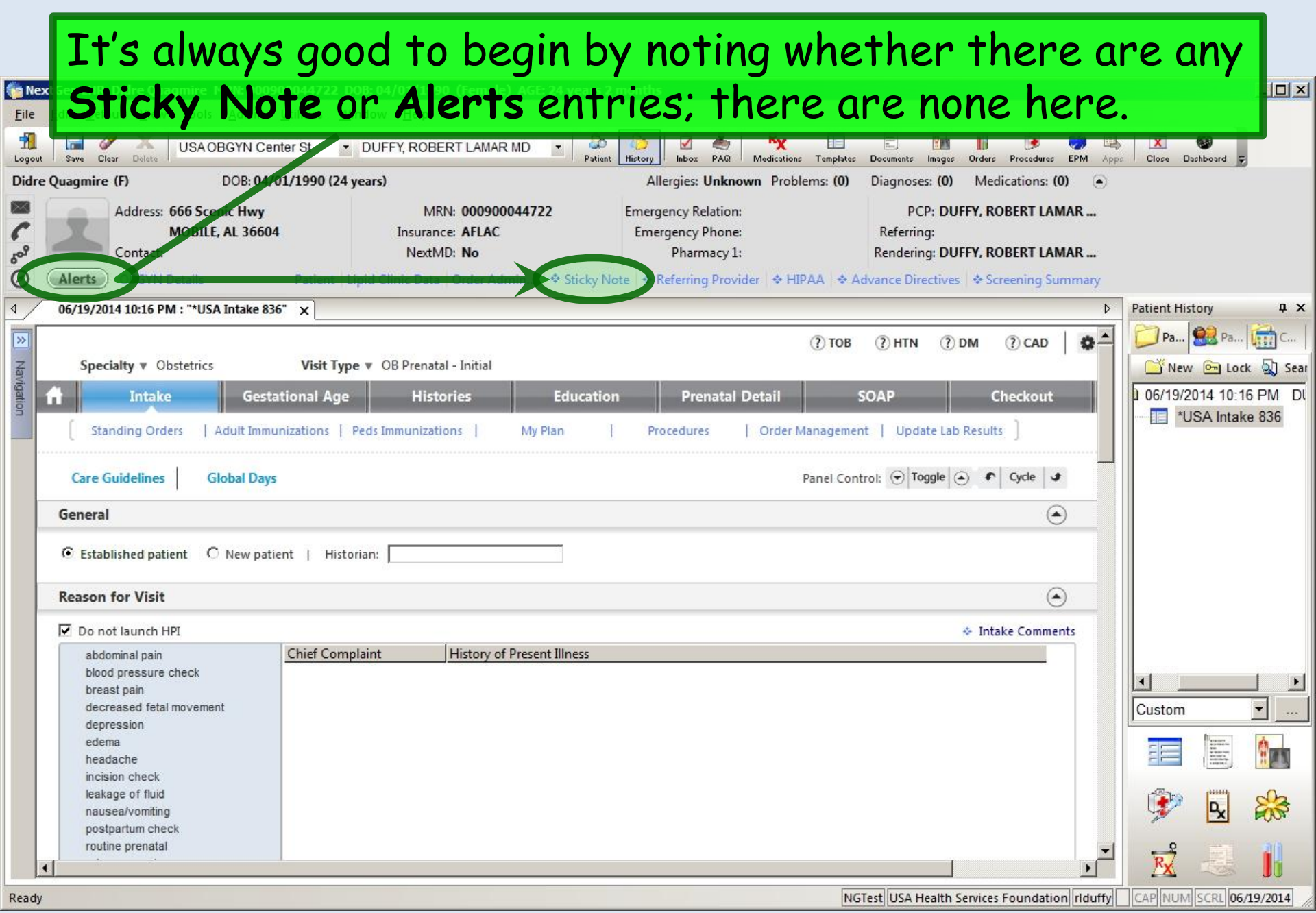
Note to Family Medicine Users:
You can choose Family Practice here.

On the Visit types picklist select OB Prenatal - Initial.

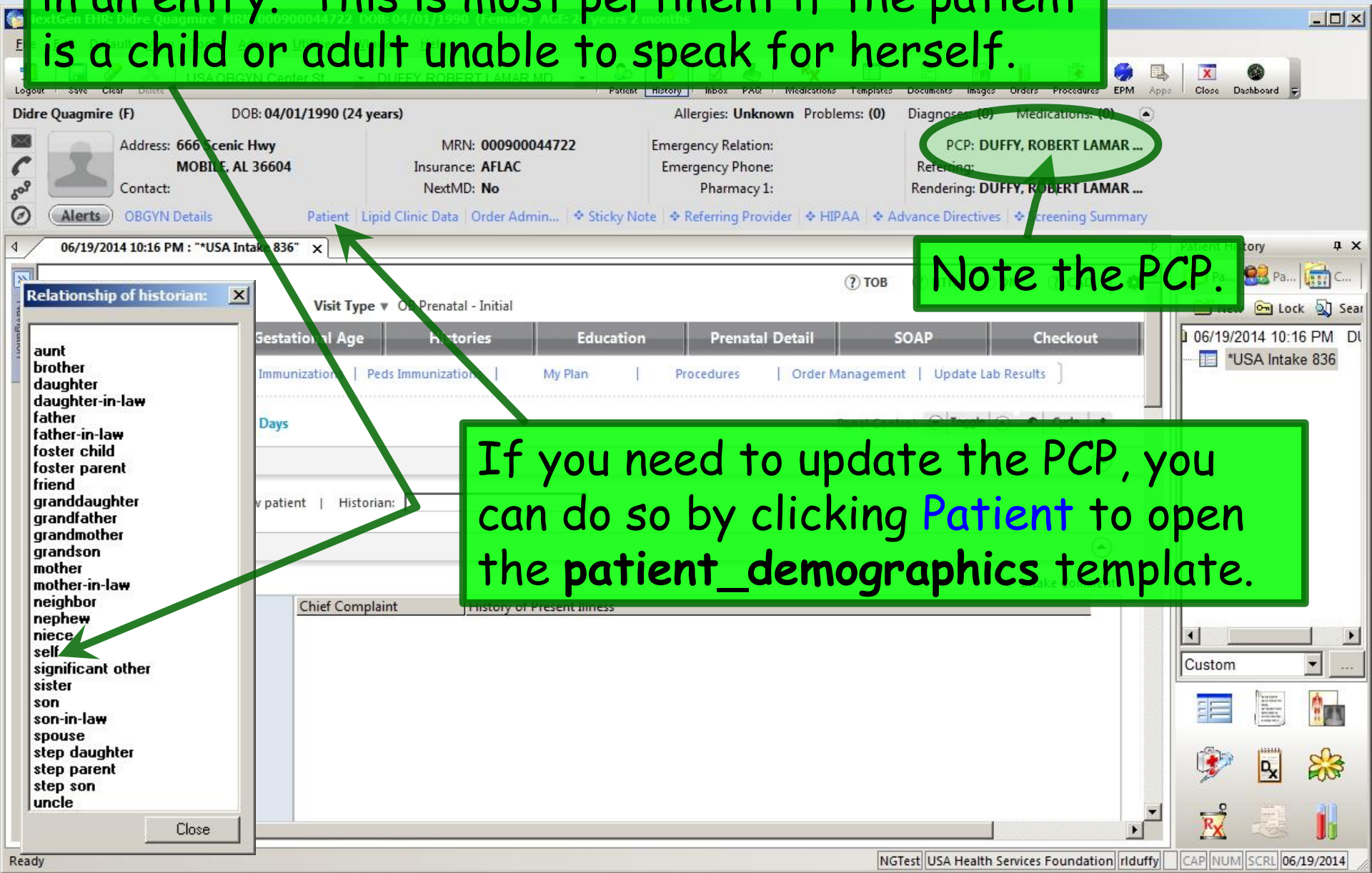


Note whether the patient is listed as **New** or **Established**, since this sometimes needs to be changed. A patient seen elsewhere in the USA system might initially appear as **Established**, but if it's the first time she's been to your office, that would need to be changed to **New**. Our patient is Established.



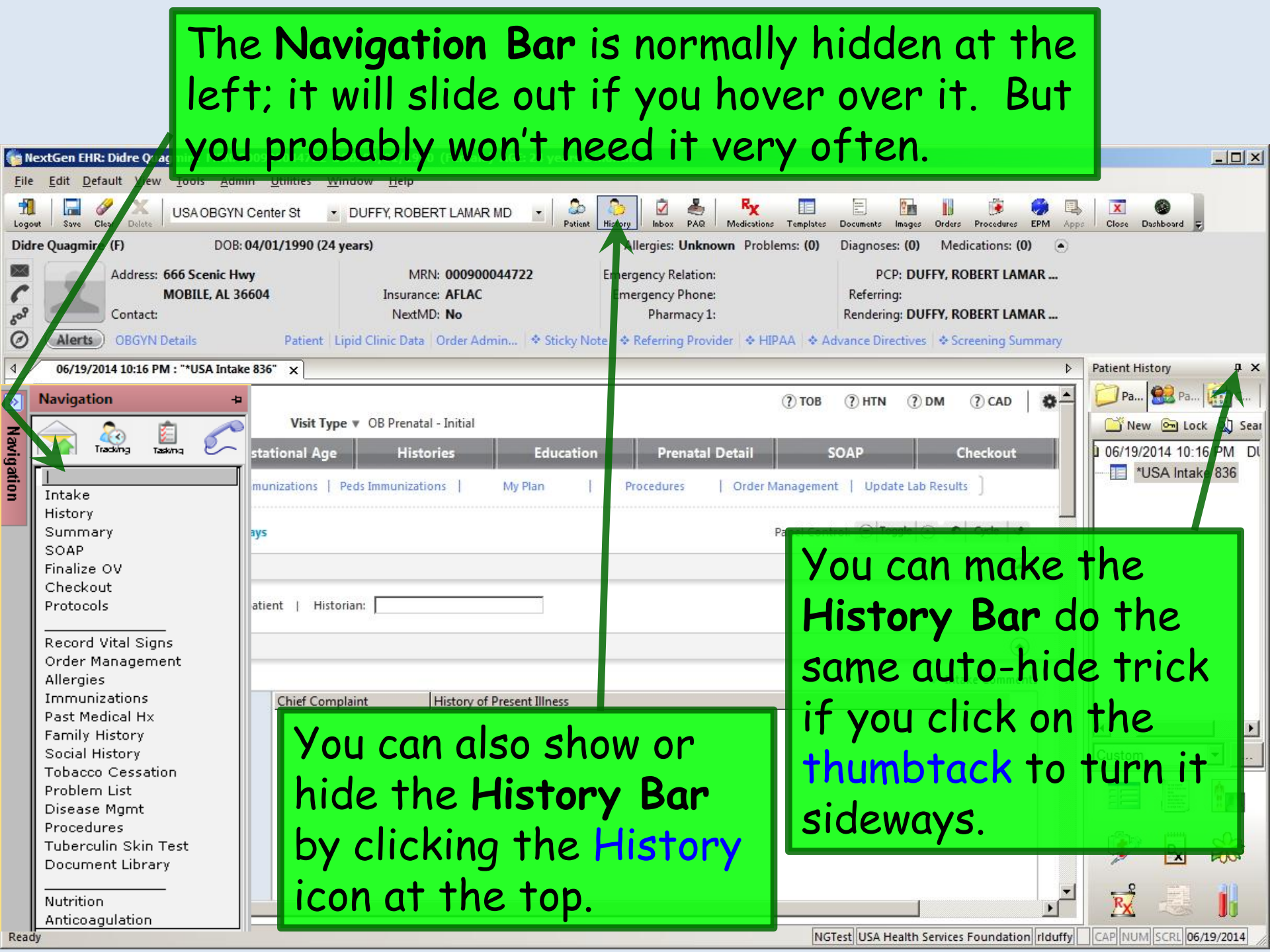

It's always good to begin by noting whether there are any **Sticky Note** or **Alerts** entries; there are none here.
File
Logout
Save
Clear
Delete
USA OBGYN Center St
DUFFY, ROBERT LAMAR MD
Patient
History
Inbox
PAQ
Medications
Templates
Documents
Images
Orders
Procedures
EPM
Apps
Close
Dashboard
Didre Quagmire (F)
DOB: 04/01/1990 (24 years)
Allergies: Unknown
Problems: (0)
Diagnoses: (0)
Medications: (0)
Address: 666 Scenic Hwy
MOBILE, AL 36604
Contact:
MRN: 000900044722
Insurance: AFLAC
NextMD: No
Emergency Relation:
Emergency Phone:
Pharmacy 1:
PCP: DUFFY, ROBERT LAMAR ...
Referring:
Rendering: DUFFY, ROBERT LAMAR ...
Alerts
Sticky Note
Referring Provider
HIPAA
Advance Directives
Screening Summary
06/19/2014 10:16 PM : "*USA Intake 836"
TOB
HTN
DM
CAD
Specialty ▾ Obstetrics
Visit Type ▾ OB Prenatal - Initial
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Standing Orders | Adult Immunizations | Peds Immunizations | My Plan | Procedures | Order Management | Update Lab Results
Care Guidelines
Global Days
Panel Control: Toggle Cycle
General
Established patient
New patient
Historian:
Reason for Visit
Do not launch HPI
Intake Comments
abdominal pain
blood pressure check
breast pain
decreased fetal movement
depression
edema
headache
incision check
leakage of fluid
nausea/vomiting
postpartum check
routine prenatal
Chief Complaint
History of Present Illness
Navigation
Patient History
New
Lock
06/19/2014 10:16 PM
*USA Intake 836
Custom
Ready
NGTest
USA Health Services Foundation
rlduffy
CAP
NUM
SCRL
06/19/2014

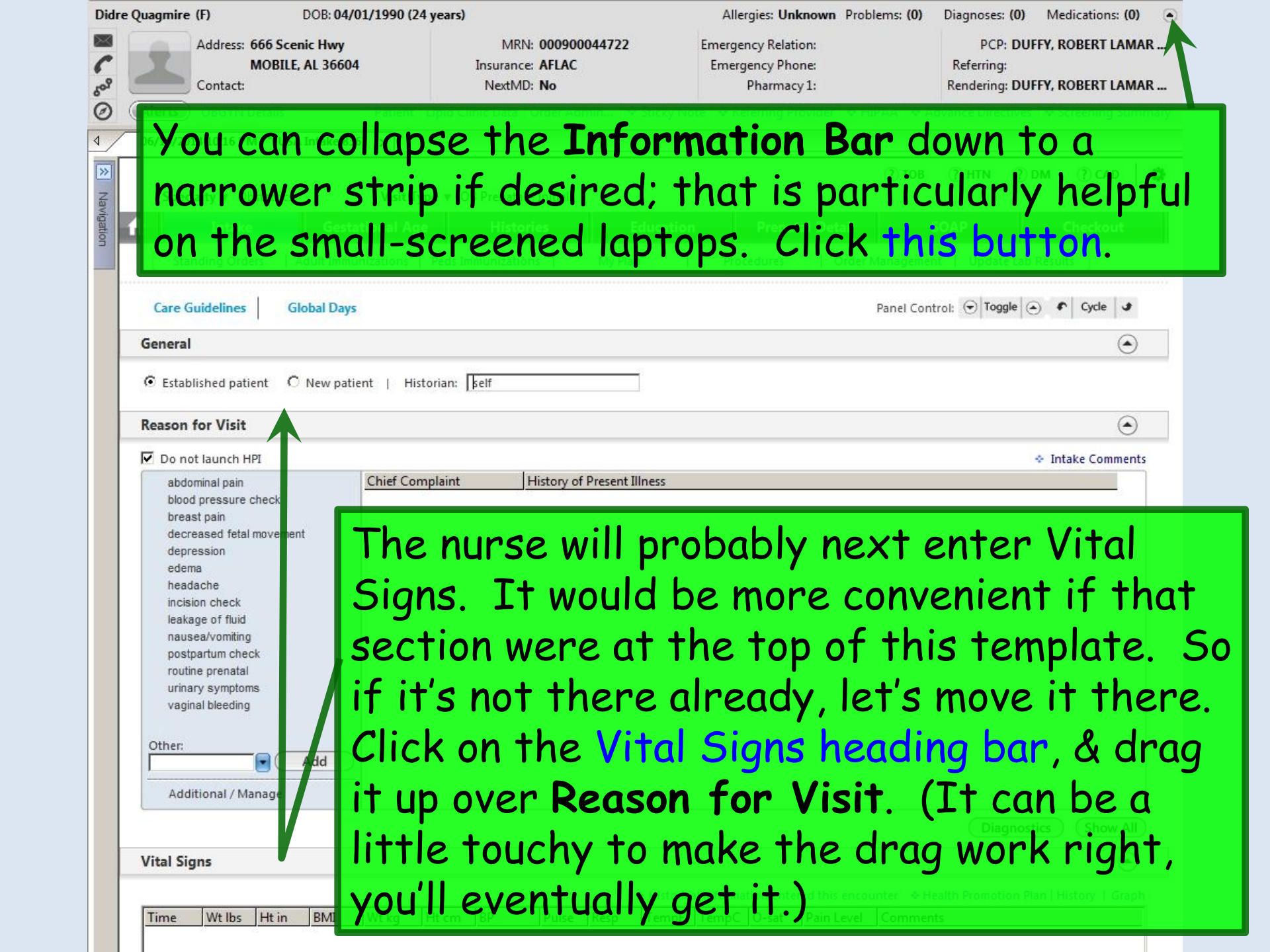
You can select a **Historian** from the picklist that appears if you click in that box; you can also type in an entry. This is most pertinent if the patient is a child or adult unable to speak for herself.



Note the PCP.

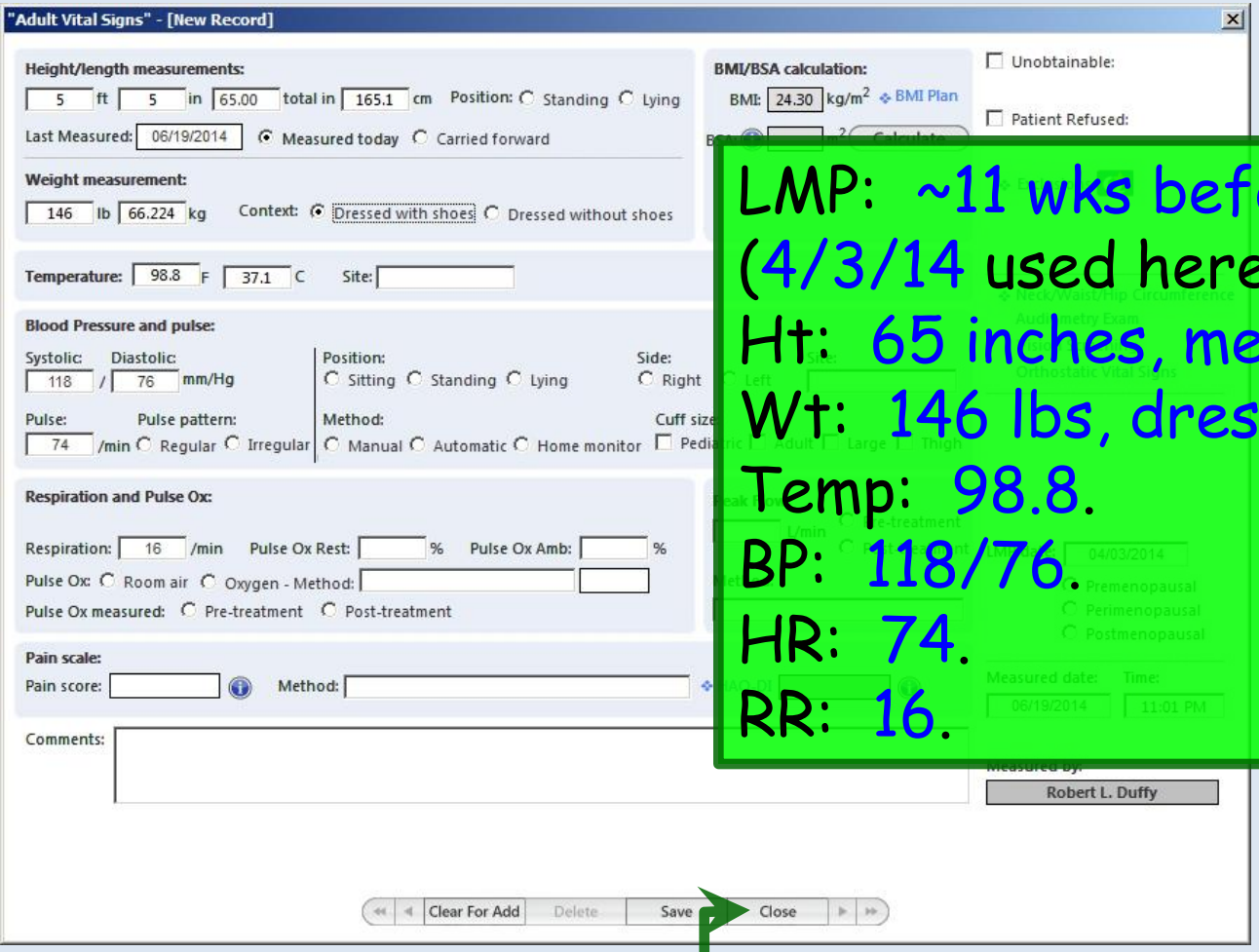
If you need to update the PCP, you can do so by clicking Patient to open the **patient_demographics** template.


The **Navigation Bar** is normally hidden at the left; it will slide out if you hover over it. But you probably won't need it very often.
You can also show or hide the **History Bar** by clicking the History icon at the top.
You can make the **History Bar** do the same auto-hide trick if you click on the thumbtack to turn it sideways.
Navigation
Intake
History
Summary
SOAP
Finalize OV
Checkout
Protocols
Record Vital Signs
Order Management
Allergies
Immunizations
Past Medical Hx
Family History
Social History
Tobacco Cessation
Problem List
Disease Mgmt
Procedures
Tuberculin Skin Test
Document Library
Nutrition
Anticoagulation
Patient History
Visit Type OB Prenatal - Initial
Chief Complaint
History of Present Illness
Ready


Didre Quagmire (F) DOB: 04/01/1990 (24 years) Allergies: Unknown Problems: (0) Diagnoses: (0) Medications: (0)
Address: 666 Scenic Hwy
MOBILE, AL 36604
Contact:
MRN: 000900044722
Insurance: AFLAC
NextMD: No
Emergency Relation:
Emergency Phone:
Pharmacy 1:
PCP: DUFFY, ROBERT LAMAR ...
Referring:
Rendering: DUFFY, ROBERT LAMAR ...
You can collapse the Information Bar down to a narrower strip if desired; that is particularly helpful on the small-screened laptops. Click this button.
Navigation
Care Guidelines
Global Days
Panel Control: Toggle Cycle
General
Established patient
New patient
Historian: self
Reason for Visit
Do not launch HPI
Intake Comments
abdominal pain
blood pressure check
breast pain
decreased fetal movement
depression
edema
headache
incision check
leakage of fluid
nausea/vomiting
postpartum check
routine prenatal
urinary symptoms
vaginal bleeding
Chief Complaint
History of Present Illness
Other:
Add
Additional / Manage
The nurse will probably next enter Vital Signs. It would be more convenient if that section were at the top of this template. So if it's not there already, let's move it there. Click on the Vital Signs heading bar, & drag it up over Reason for Visit. (It can be a little touchy to make the drag work right, you'll eventually get it.)
Vital Signs
Time
Wt lbs
Ht in
BMI
Wt kg
Ht cm
BP
Pulse
Resp
Temp
Temp C
O-sat
Pain Level
Comments

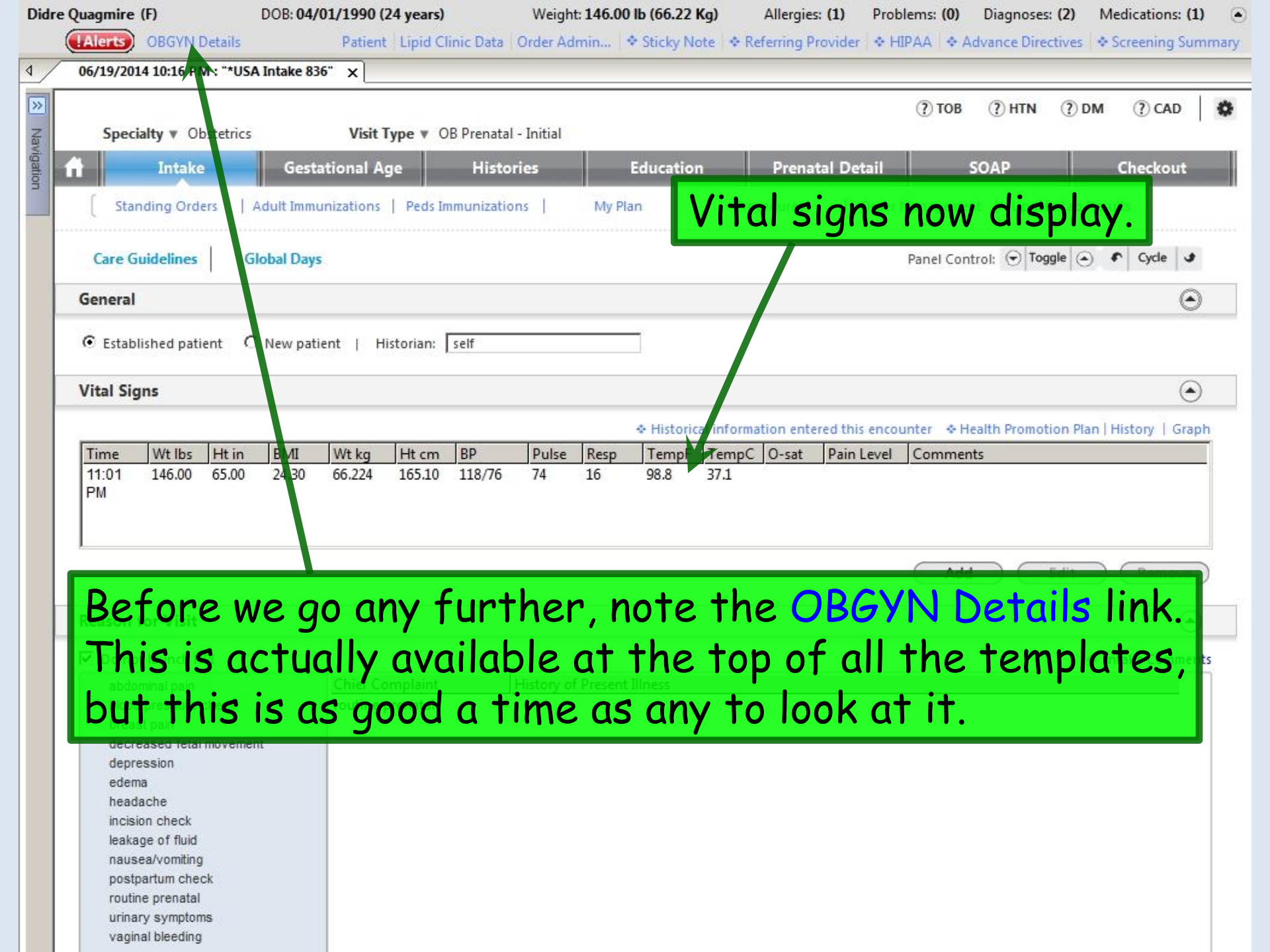
The Info Bar is collapsed, & Vital Signs are at the top.
Didre Quagmire (F)
DOB: 04/01/1990 (24 years)
Allergies: Unknown
Problems: (0)
Diagnoses: (0)
Medications: (0)
Alerts
OBGYN Details
Patient
Lipid Clinic Data
Order Admin...
Sticky Note
Referring Provider
HIPAA
Advance Directives
Screening Summary
06/19/2014 10:16 PM : "*USA Intake 836"
TOB
HTN
DM
CAD
Specialty ▾ Obstetrics
Visit Type ▾ OB Prenatal - Initial
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Standing Orders
Adult Immunizations
Peds Immunizations
My Plan
Procedures
Order Management
Update Lab Results
Care Guidelines
Global Days
Panel Control:
Toggle
Cycle
General
Established patient
New patient
Historian:
self
Vital Signs
Historical information entered this encounter
Health Promotion Plan | History | Graph
Time
Wt lbs
Ht in
BMI
Wt kg
Ht cm
BP
Pulse
Resp
TempF
TempC
O-sat
Pain Level
Comments
Add
Edit
Remove
Reason for Visit
Do not launch HPI
Intake Comments
abdominal pain
blood pressure check
breast pain
decreased fetal movement
depression
To enter Vital Signs, click Add.

Enter Vital Signs. (Details are reviewed in another demo.)

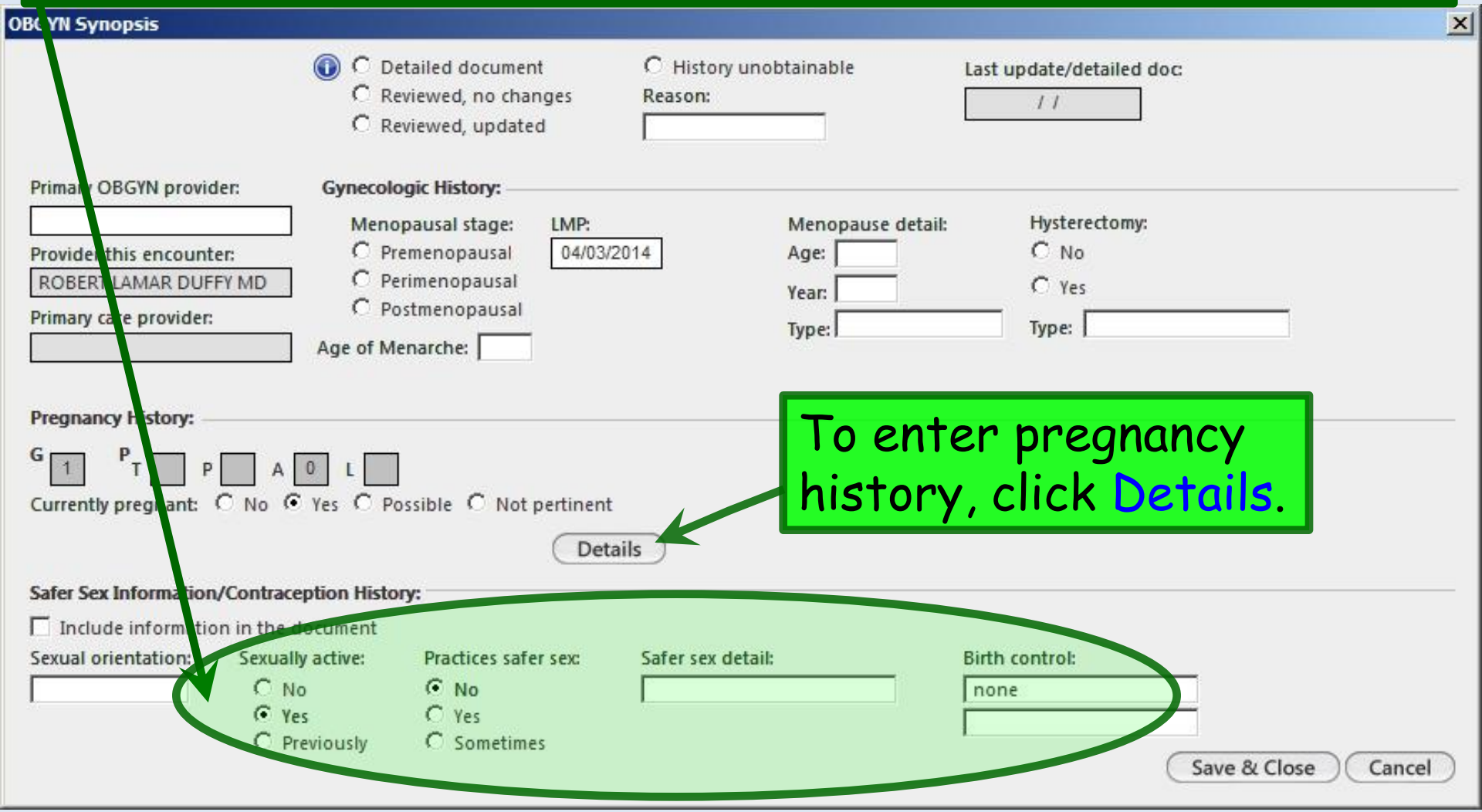


LMP: ~11 wks before encounter date (4/3/14 used here).
Ht: 65 inches, measured today.
Wt: 146 lbs, dressed with shoes.
Temp: 98.8.
BP: 118/76.
HR: 74.
RR: 16.

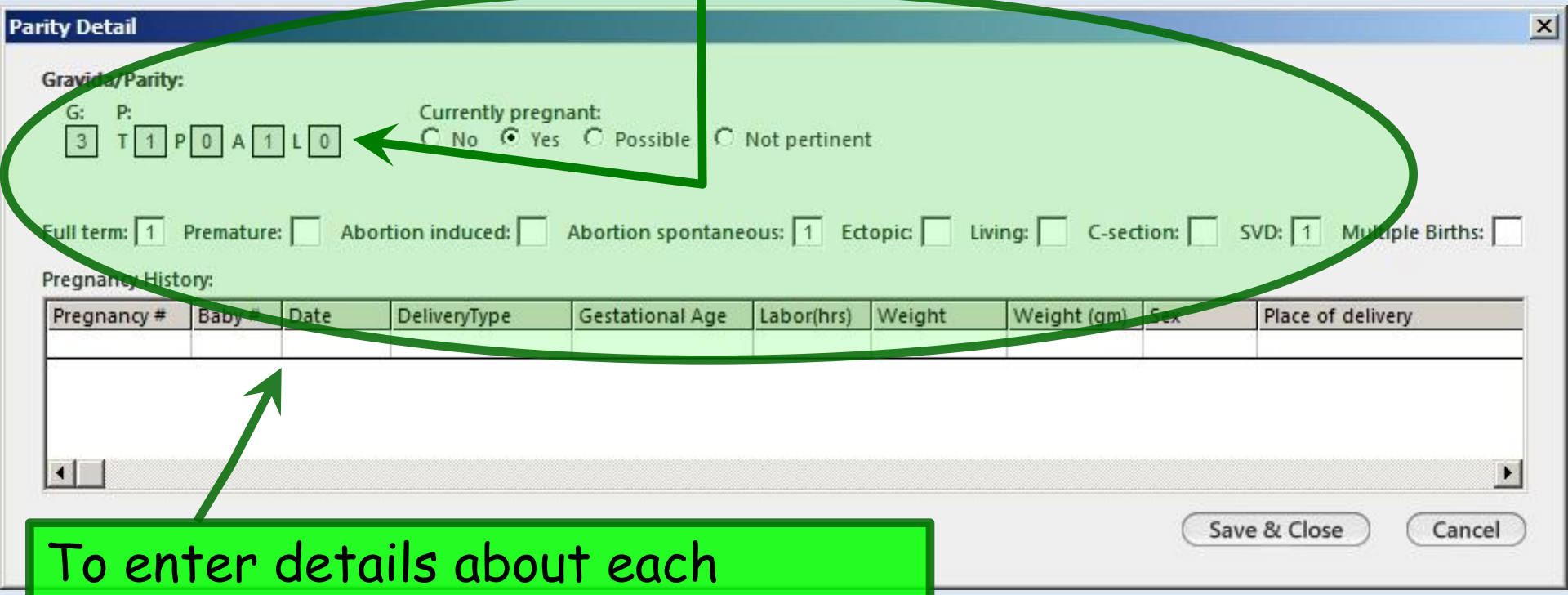
When done click Save then Close.


Didre Quagmire (F)
DOB: 04/01/1990 (24 years)
Weight: 146.00 lb (66.22 Kg)
Allergies: (1)
Problems: (0)
Diagnoses: (2)
Medications: (1)
!Alerts
OBGYN Details
Patient
Lipid Clinic Data
Order Admin...
Sticky Note
Referring Provider
HIPAA
Advance Directives
Screening Summary
06/19/2014 10:16 PM: "*USA Intake 836"
TOB
HTN
DM
CAD
Specialty ▼ Obstetrics
Visit Type ▼ OB Prenatal - Initial
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Standing Orders
Adult Immunizations
Peds Immunizations
My Plan
Care Guidelines
Global Days
Panel Control:
Toggle
Cycle
General
Established patient
New patient
Historian:
self
Vital Signs
Historical information entered this encounter
Health Promotion Plan
History
Graph
Time
Wt lbs
Ht in
BMI
Wt kg
Ht cm
BP
Pulse
Resp
TempF
TempC
O-sat
Pain Level
Comments
11:01 PM
146.00
65.00
24.30
66.224
165.10
118/76
74
16
98.8
37.1
Add
Edit
Remove
Vital signs now display.
Before we go any further, note the OBGYN Details link. This is actually available at the top of all the templates, but this is as good a time as any to look at it.
depression
edema
headache
incision check
leakage of fluid
nausea/vomiting
postpartum check
routine prenatal
urinary symptoms
vaginal bleeding

Some details can be entered directly here. We've added that she's sexually active, not practicing safer sex, & using no birth control.

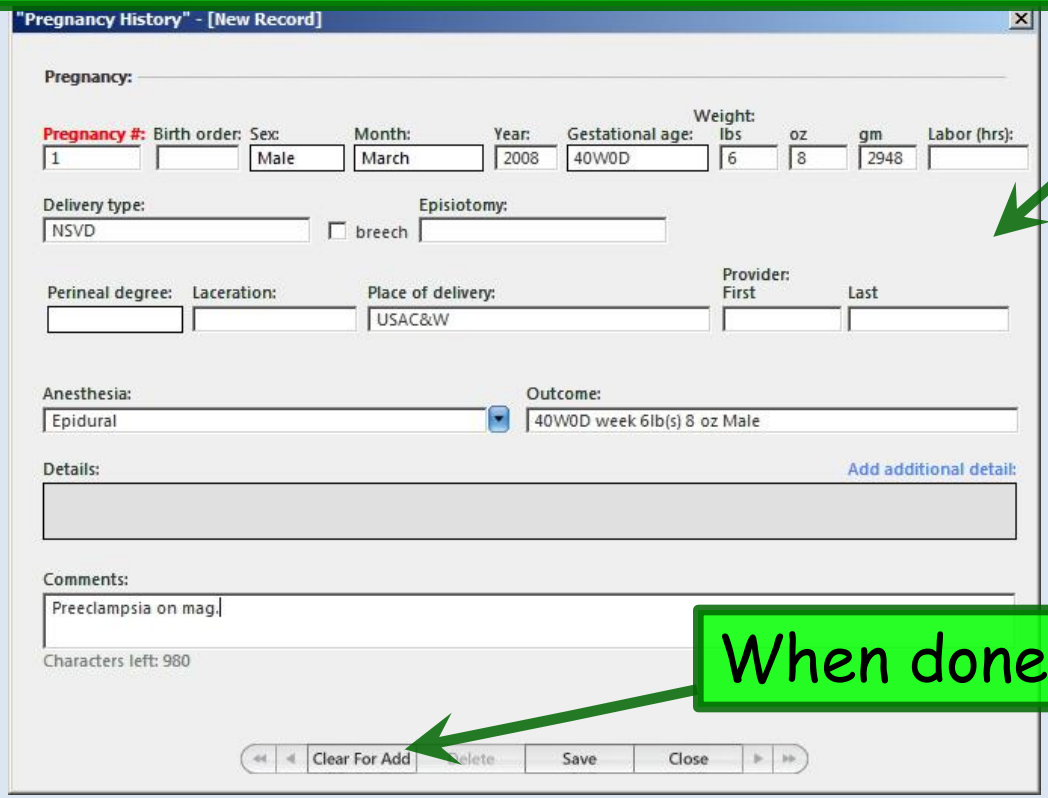


Enter data in the white boxes & they'll be summarized in the gray boxes above. She's had one term vaginal delivery & one miscarriage, & is currently pregnant.



To enter details about each pregnancy, double-click on the grid.

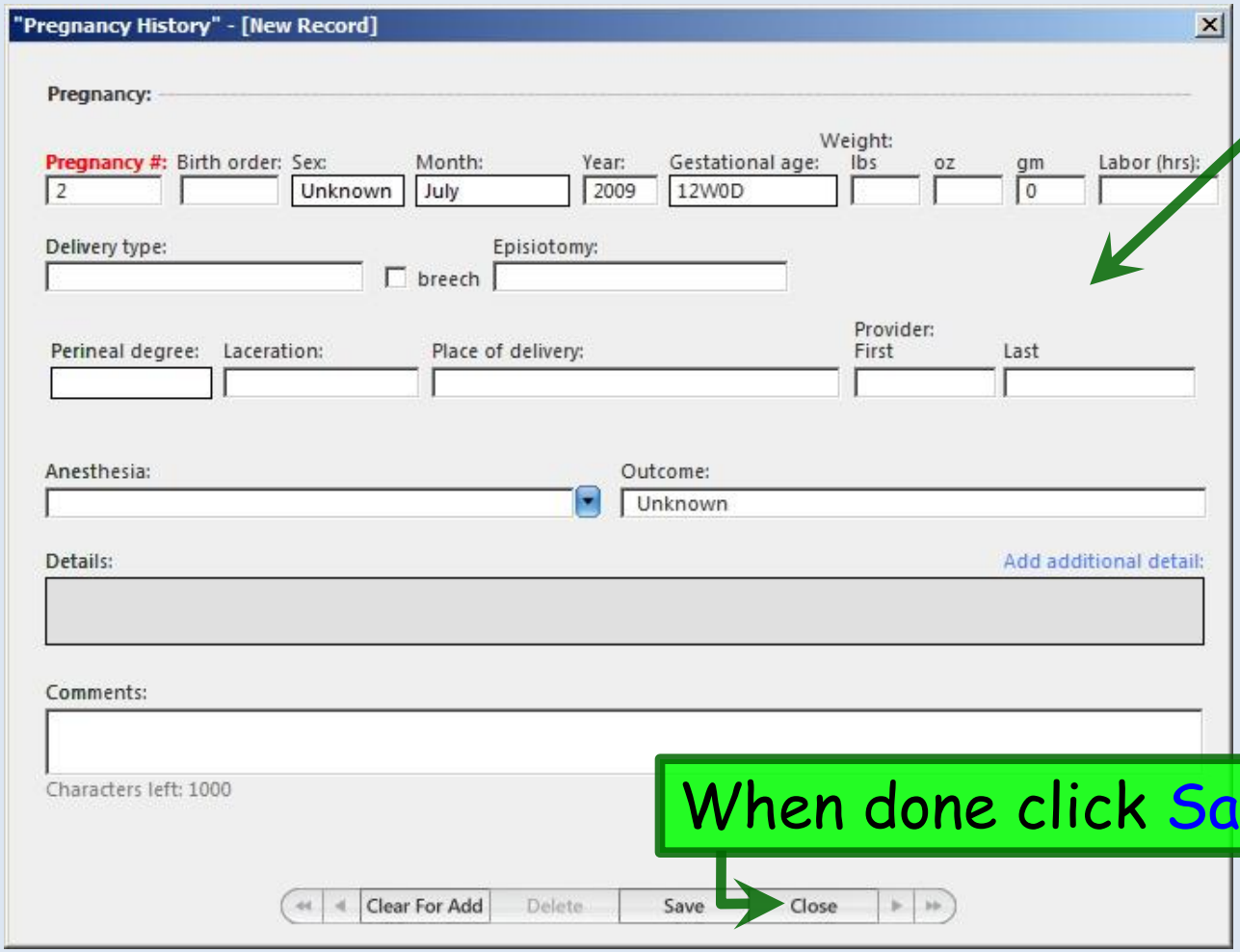
Begin by entering Pregnancy # 1. (Unless there was a multiple gestation, it is unnecessary to enter Baby #.)
Using the combination of available entry methods, enter the following data:
Male, born March 2008, at 40 weeks gestation, 6 lbs 8 oz, via NSVD, at USAC&W. She had Preeclampsia, requiring magnesium, & had an epidural.
Enter as much information as is known/pertinent.



When done click Clear For Add.

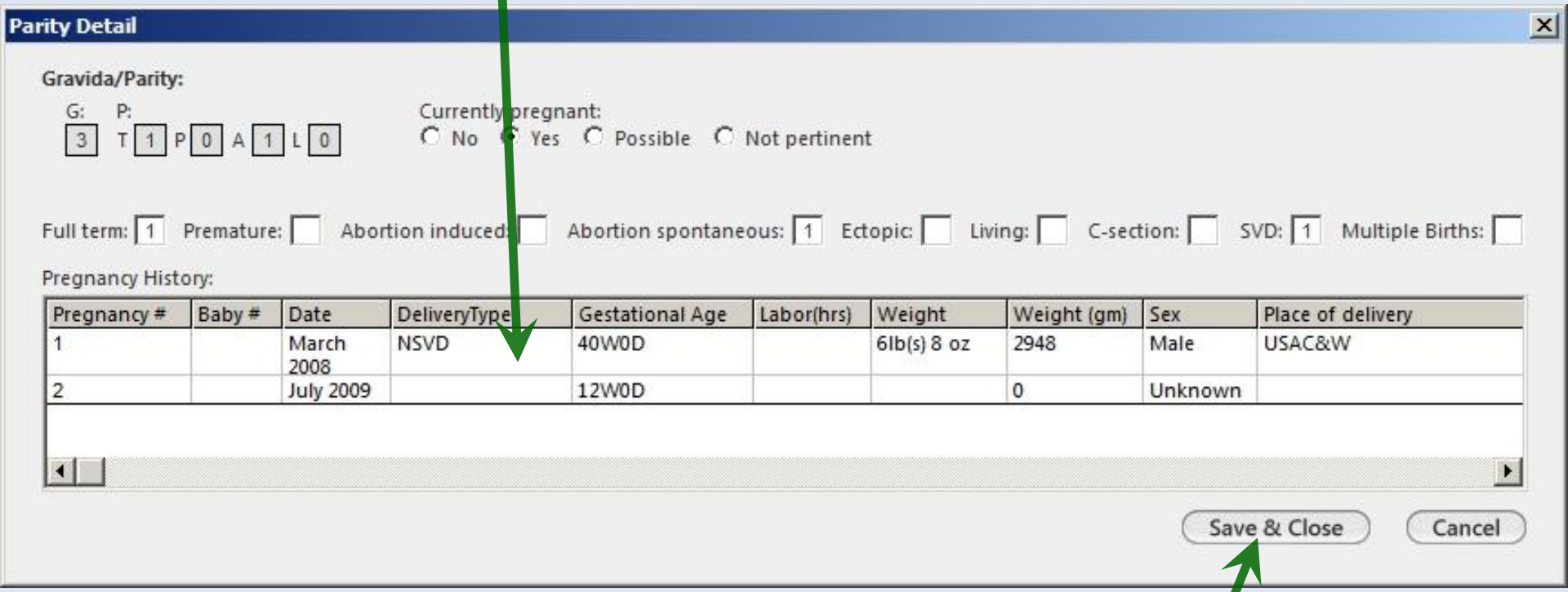
Enter Pregnancy # 2.

Data used here:
Gender-unknown miscarriage July 2009, at 12 weeks gestation.

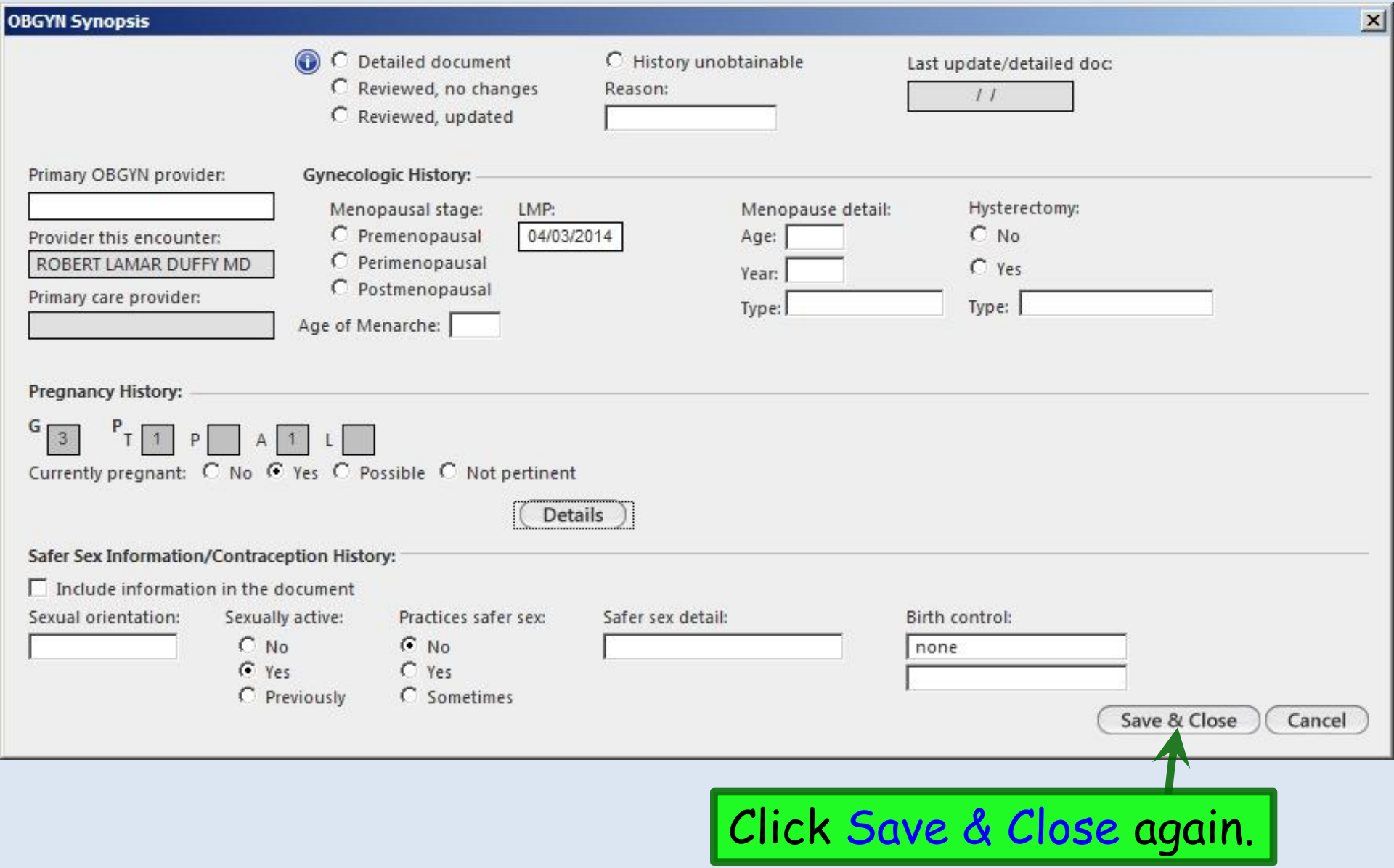


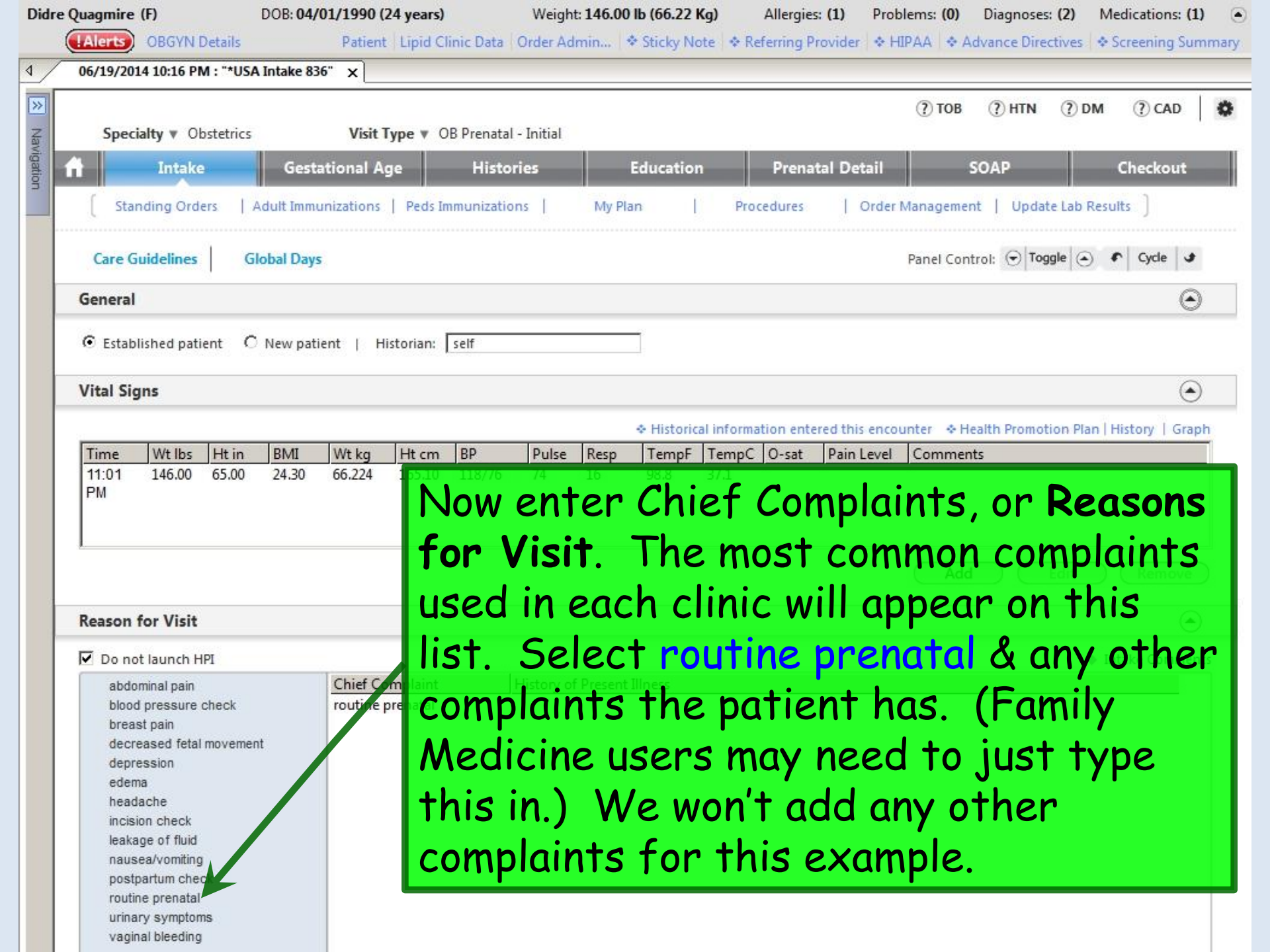
When done click Save then Close.

The details entered display.

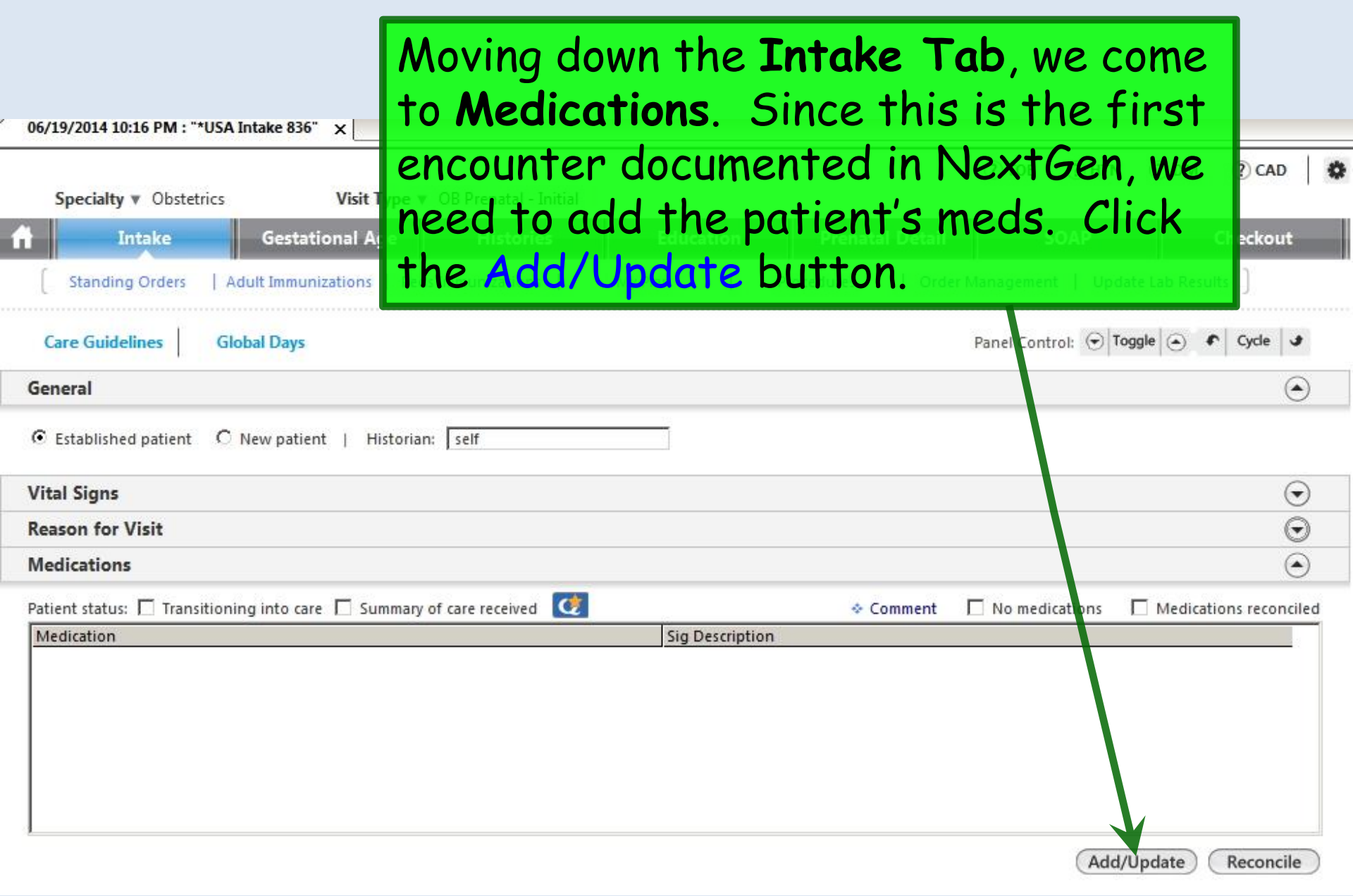


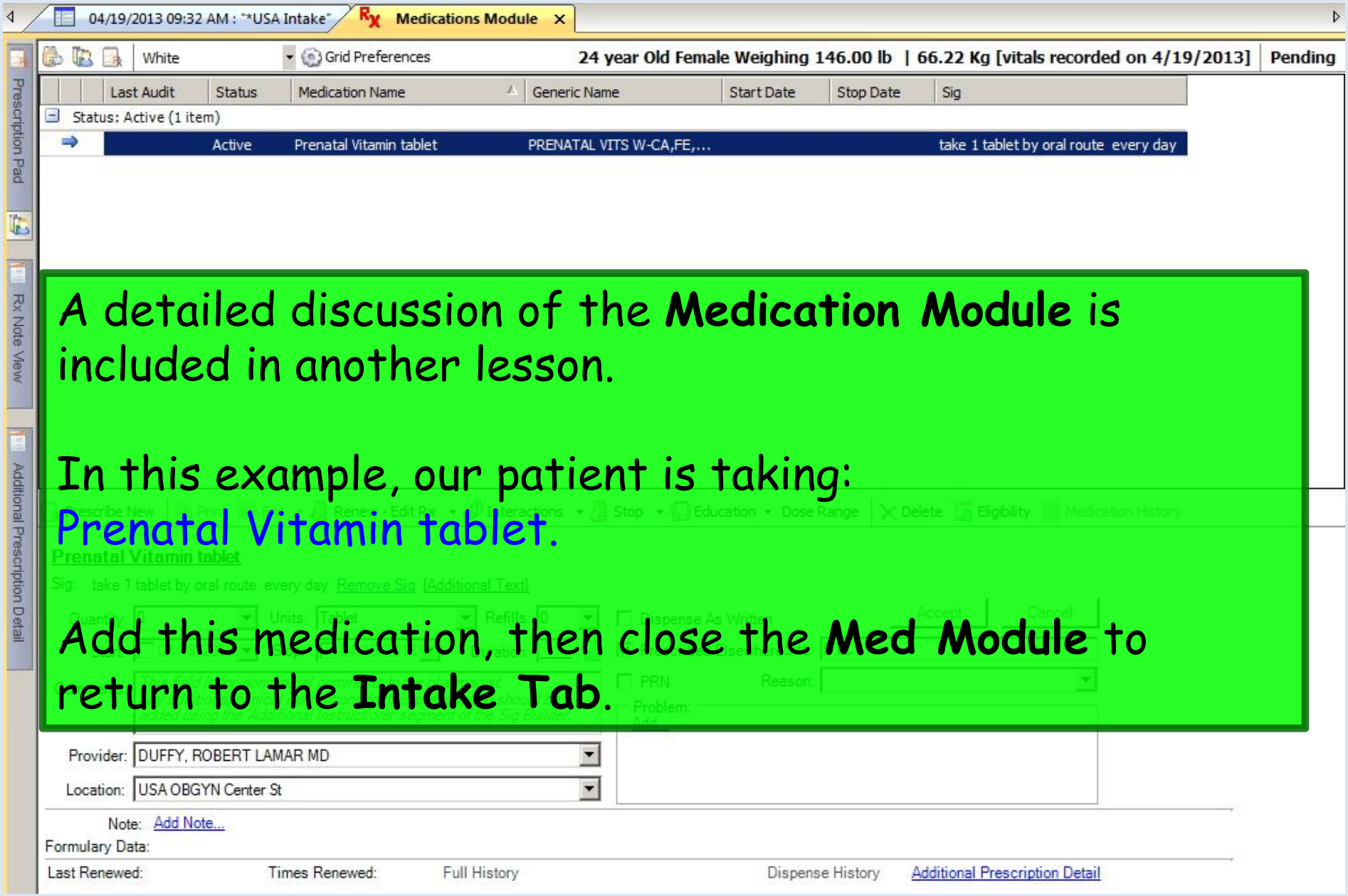
Click Save & Close.

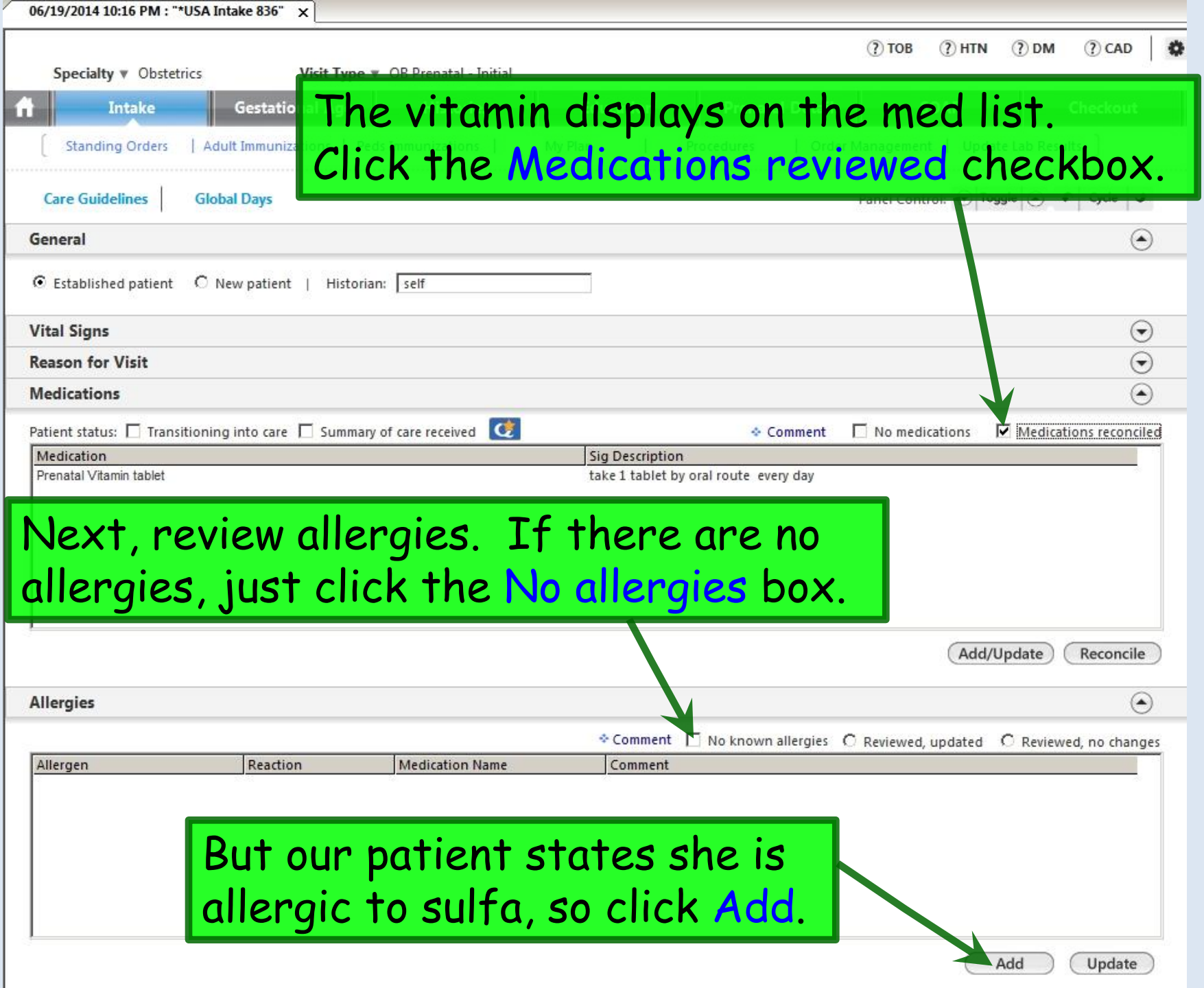

OBGYN Synopsis
Detailed document
Reviewed, no changes
Reviewed, updated
History unobtainable
Reason:
Last update/detailed doc:
/ /
Primary OBGYN provider:
Provider this encounter:
ROBERT LAMAR DUFFY MD
Primary care provider:
Gynecologic History:
Menopausal stage:
Premenopausal
Perimenopausal
Postmenopausal
LMP:
04/03/2014
Age of Menarche:
Menopause detail:
Age:
Year:
Type:
Hysterectomy:
No
Yes
Type:
Pregnancy History:
G 3 P T 1 P A 1 L
Currently pregnant: No Yes Possible Not pertinent
Details
Safer Sex Information/Contraception History:
Include information in the document
Sexual orientation:
Sexually active:
No
Yes
Previously
Practices safer sex:
No
Yes
Sometimes
Safer sex detail:
Birth control:
none
Save & Close
Cancel
Click Save & Close again.


Didre Quagmire (F) DOB: 04/01/1990 (24 years) Weight: 146.00 lb (66.22 Kg) Allergies: (1) Problems: (0) Diagnoses: (2) Medications: (1)
!Alerts OBGYN Details Patient Lipid Clinic Data Order Admin... Sticky Note Referring Provider HIPAA Advance Directives Screening Summary
06/19/2014 10:16 PM : "*USA Intake 836"
TOB HTN DM CAD
Specialty Obstetrics Visit Type OB Prenatal - Initial
Intake Gestational Age Histories Education Prenatal Detail SOAP Checkout
Standing Orders Adult Immunizations Peds Immunizations My Plan Procedures Order Management Update Lab Results
Care Guidelines Global Days
Panel Control: Toggle Cycle
General
Established patient New patient Historian: self
Vital Signs
Historical information entered this encounter Health Promotion Plan History Graph
Time Wt lbs Ht in BMI Wt kg Ht cm BP Pulse Resp TempF TempC O-sat Pain Level Comments
11:01 PM 146.00 65.00 24.30 66.224
Reason for Visit
Do not launch HPI
abdominal pain
blood pressure check
breast pain
decreased fetal movement
depression
edema
headache
incision check
leakage of fluid
nausea/vomiting
postpartum check
routine prenatal
urinary symptoms
vaginal bleeding
Chief Complaint
routine prenatal
Now enter Chief Complaints, or Reasons for Visit. The most common complaints used in each clinic will appear on this list. Select routine prenatal & any other complaints the patient has. (Family Medicine users may need to just type this in.) We won't add any other complaints for this example.

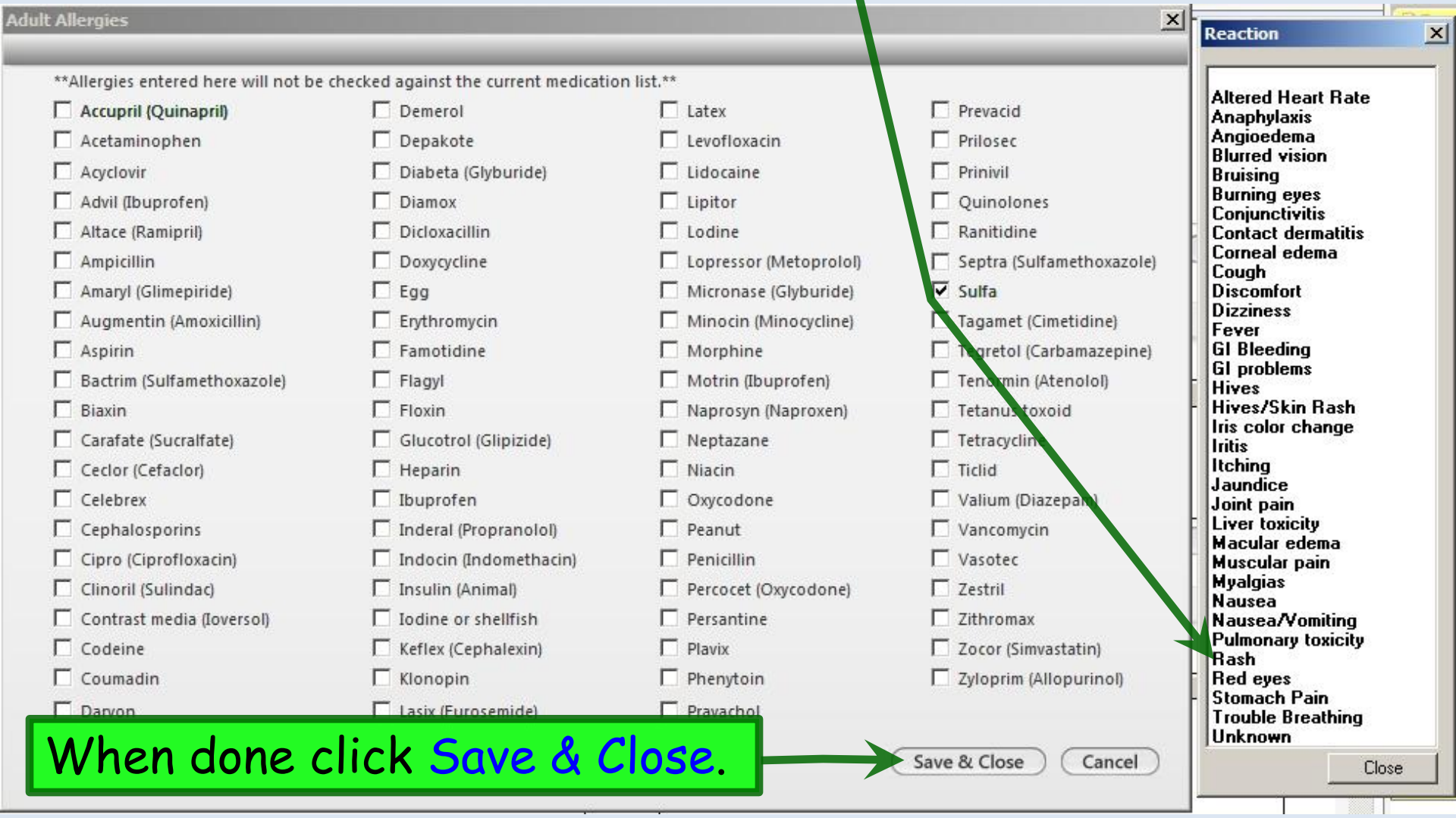
06/19/2014 10:16 PM : "*USA Intake 836"
The Reason for Visit you've entered displays.
Specialty ▼ Obstetrics
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Standing Orders | Adult Immunizations | Peds Immunizations | My Plan | Procedures | Order Management | Update Lab Results
Care Guidelines | Global Days
General
Established patient
New patient
Historian:
self
Click Intake Comments to enter some brief information about the patient's complaints.
Vital Signs
Reason for Visit
Do not launch HPI
Intake Comments
abdominal pain
blood pressure check
breast pain
Chief Complaint
History of Present Illness
routine prenatal
Intake Comments
Here for intake prental visit. No complaints.
Save & Close
Cancel
Type a few brief details as pertinent or volunteered by the patient. When done click Save & Close.


Moving down the **Intake Tab**, we come to **Medications**. Since this is the first encounter documented in NextGen, we need to add the patient's meds. Click the Add/Update button.
06/19/2014 10:16 PM : "*USA Intake 836"
Specialty ▼ Obstetrics
Intake
Standing Orders | Adult Immunizations
Care Guidelines | Global Days
Panel Control: Toggle Cycle
General
Established patient New patient | Historian: self
Vital Signs
Reason for Visit
Medications
Patient status: Transitioning into care Summary of care received
Comment No medications Medications reconciled
Medication
Sig Description
Add/Update
Reconcile

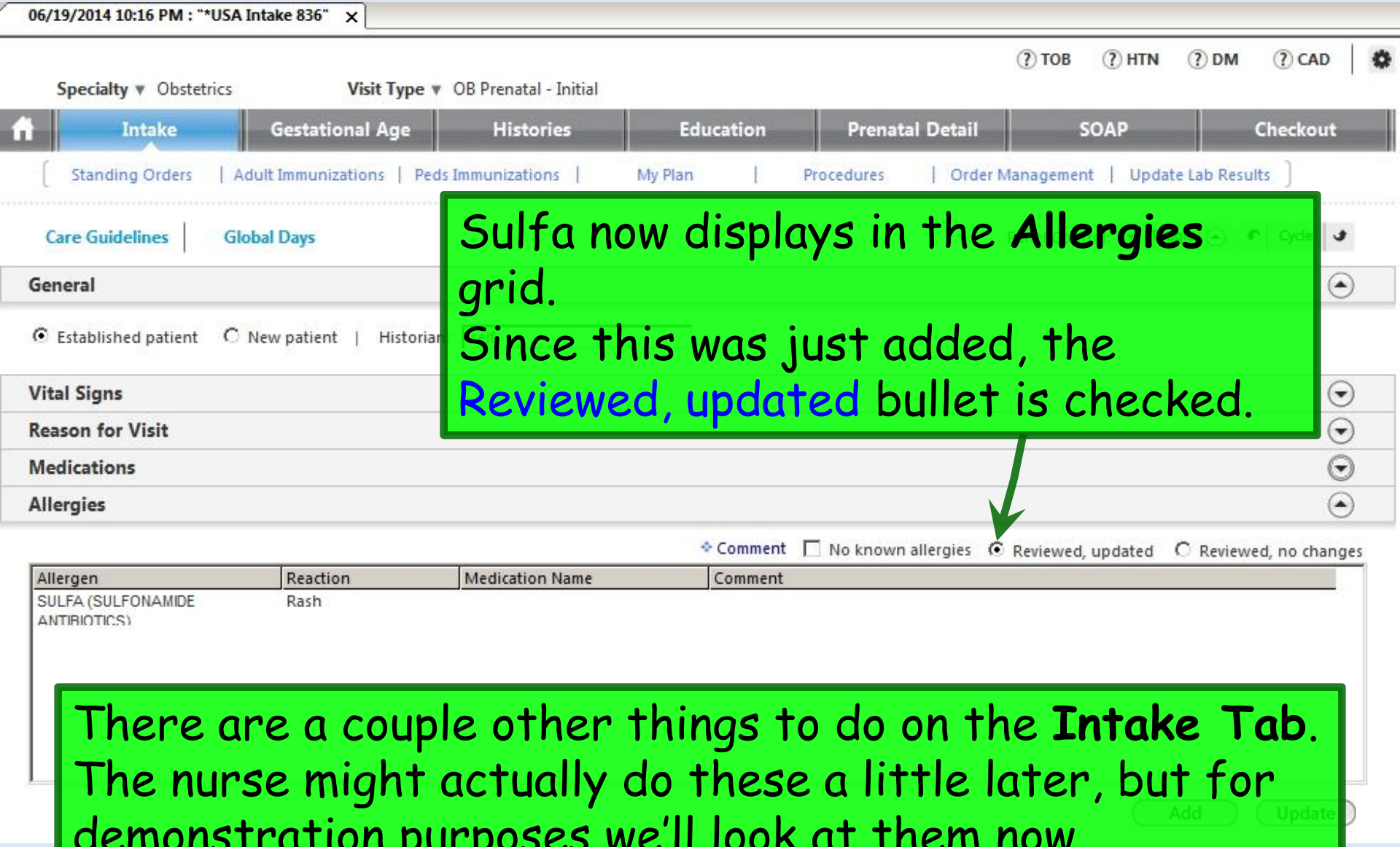

04/19/2013 09:32 AM : "*USA Intake"
Medications Module
White
Grid Preferences
24 year Old Female Weighing 146.00 lb | 66.22 Kg [vitals recorded on 4/19/2013]
Pending
Last Audit
Status
Medication Name
Generic Name
Start Date
Stop Date
Sig
Status: Active (1 item)
Active
Prenatal Vitamin tablet
PRENATAL VITS W-CA,FE,...
take 1 tablet by oral route every day
Prescription Pad
Rx Note View
Additional Prescription Detail
A detailed discussion of the Medication Module is included in another lesson.
In this example, our patient is taking:
Prenatal Vitamin tablet.
Add this medication, then close the Med Module to return to the Intake Tab.
Prenatal Vitamin tablet
Sig: take 1 tablet by oral route every day Remove Sig [Additional Text]
Provider: DUFFY, ROBERT LAMAR MD
Location: USA OBGYN Center St
Note: Add Note...
Formulary Data:
Last Renewed:
Times Renewed:
Full History
Dispense History
Additional Prescription Detail


06/19/2014 10:16 PM : "*USA Intake 836"
TOB
HTN
DM
CAD
Specialty ▼ Obstetrics
Visit Type ▼ OB Prenatal - Initial
Intake
Gestatio
Standing Orders
Adult Immuniza
Care Guidelines
Global Days
The vitamin displays on the med list. Click the Medications reviewed checkbox.
General
Established patient
New patient
Historian: self
Vital Signs
Reason for Visit
Medications
Patient status: Transitioning into care Summary of care received
Comment
No medications
Medications reconciled
Medication
Sig Description
Prenatal Vitamin tablet
take 1 tablet by oral route every day
Next, review allergies. If there are no allergies, just click the No allergies box.
Add/Update
Reconcile
Allergies
Comment
No known allergies
Reviewed, updated
Reviewed, no changes
Allergen
Reaction
Medication Name
Comment
But our patient states she is allergic to sulfa, so click Add.
Add
Update

Add the patient's allergy to Sulfa; she gets a Rash from it. (A detailed discussion of the **Allergy Module** is covered in a separate exercise.)

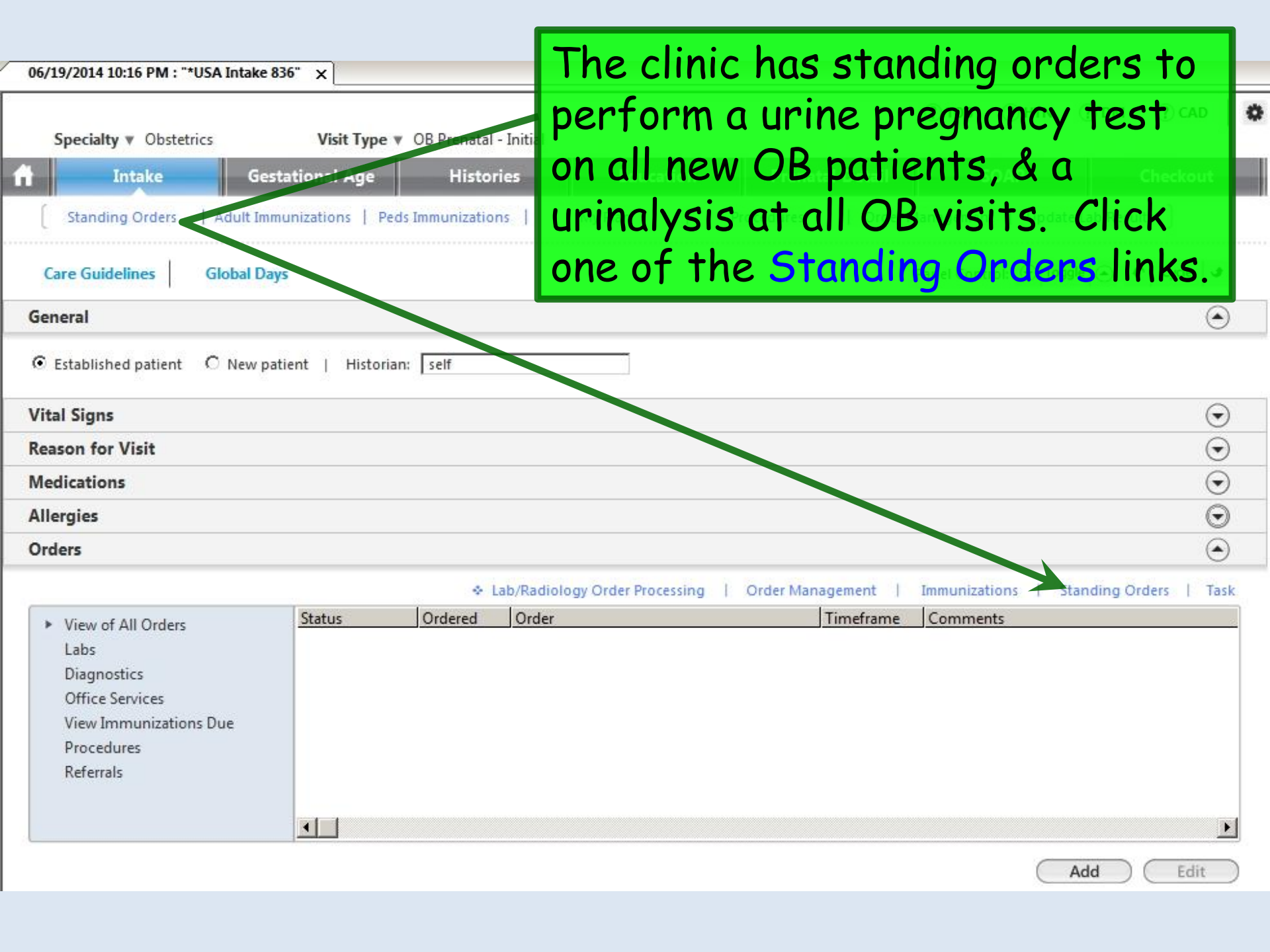


When done click Save & Close.

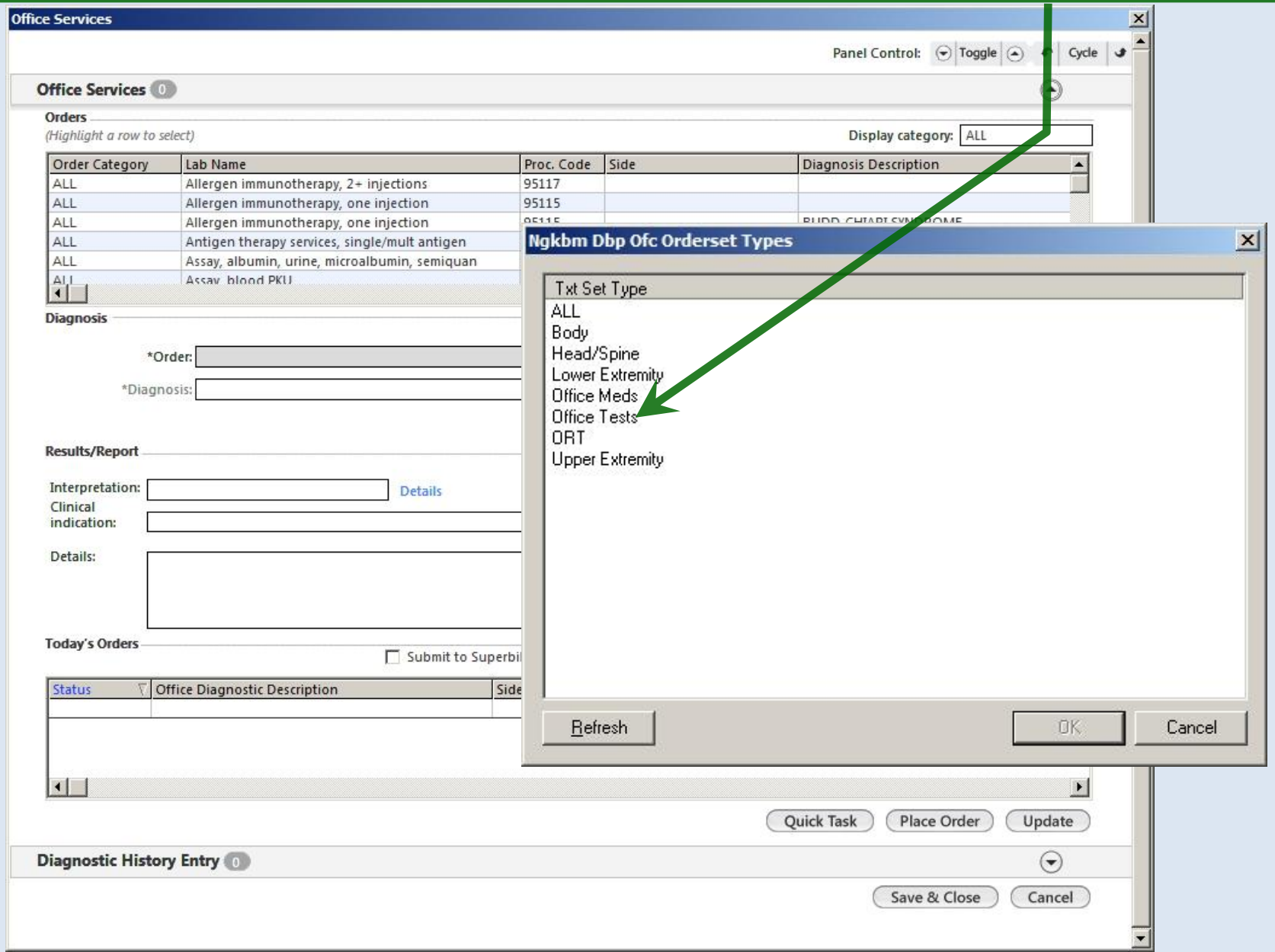


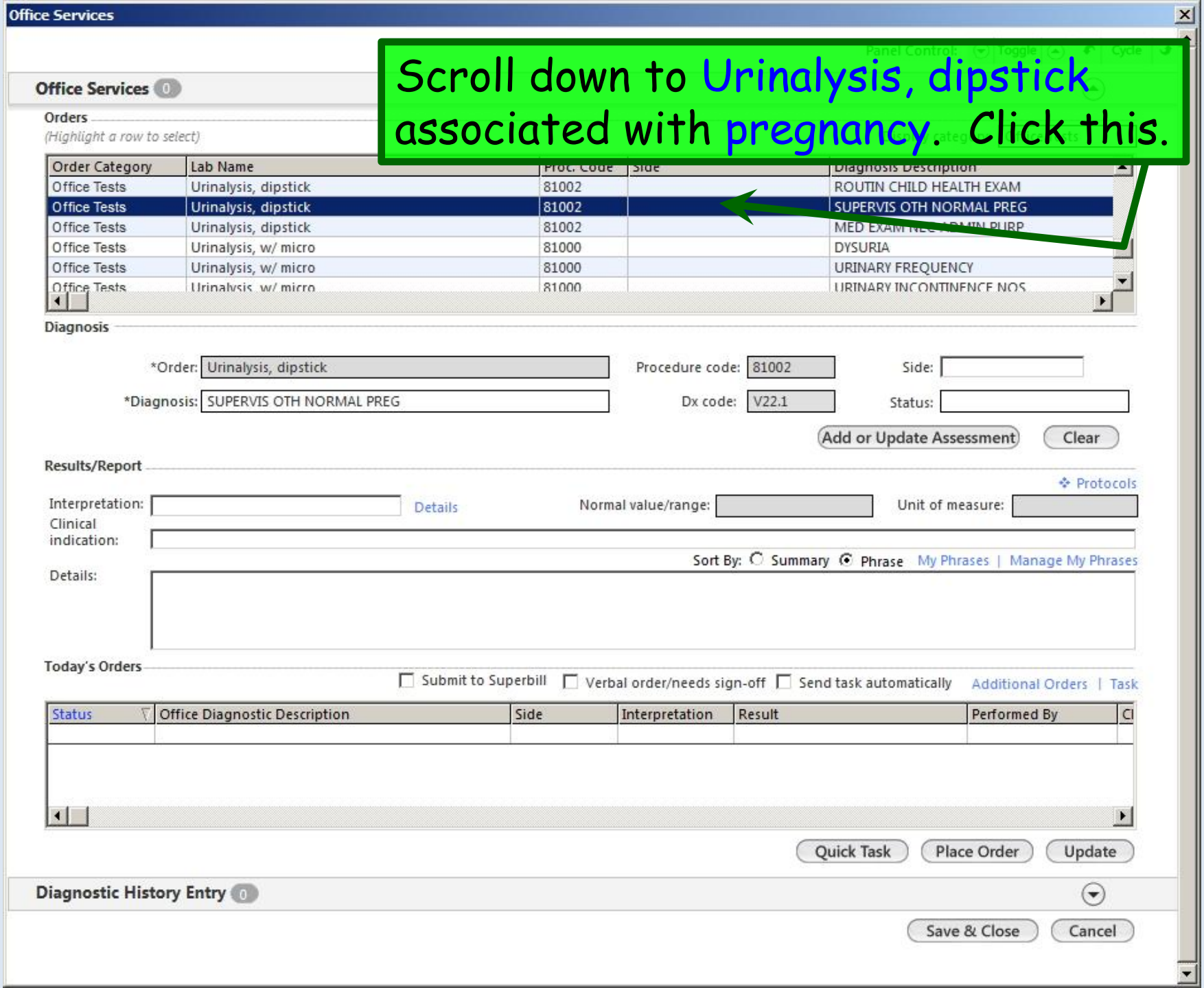
Sulfa now displays in the **Allergies** grid.
Since this was just added, the Reviewed, updated bullet is checked.

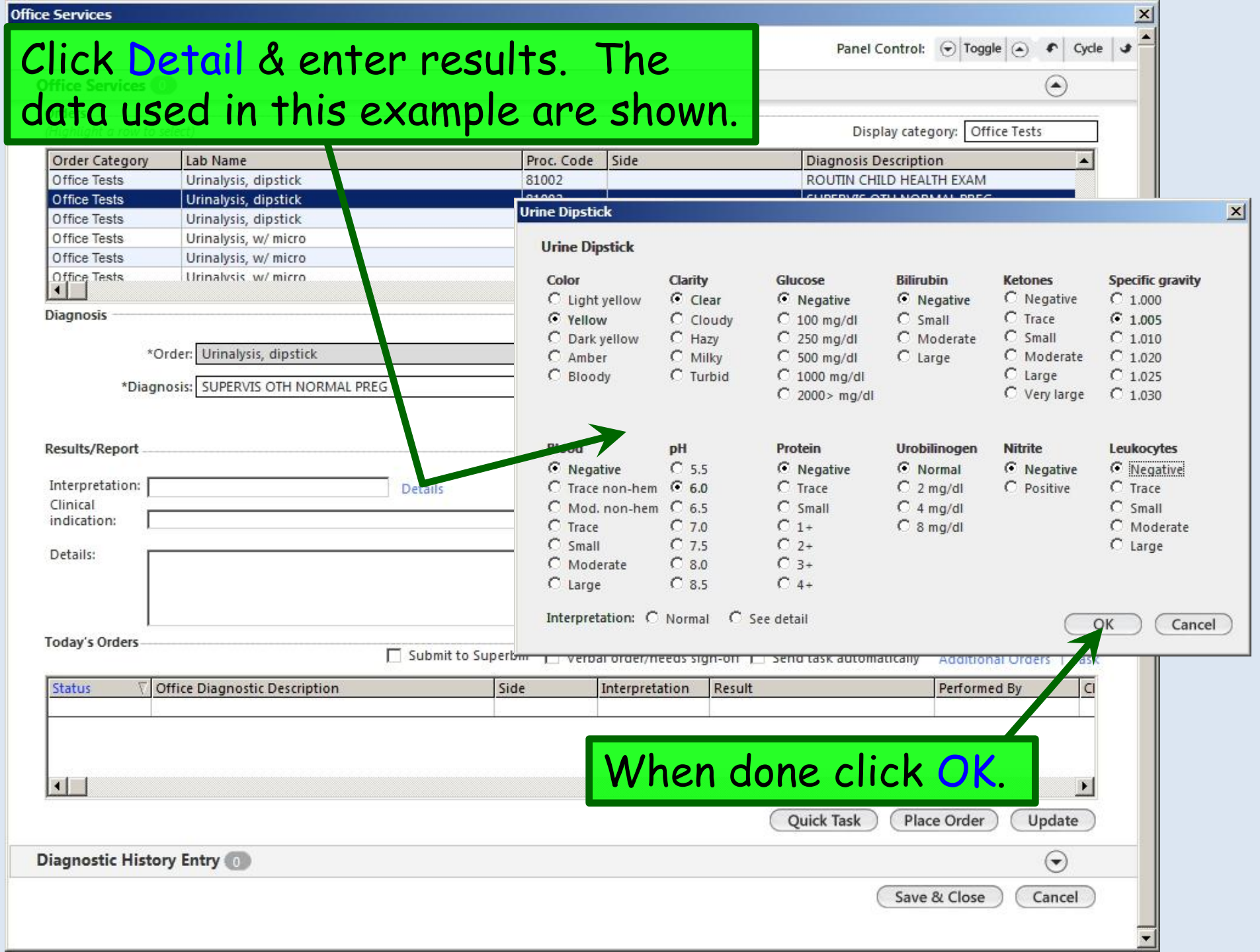
There are a couple other things to do on the **Intake Tab**. The nurse might actually do these a little later, but for demonstration purposes we'll look at them now.

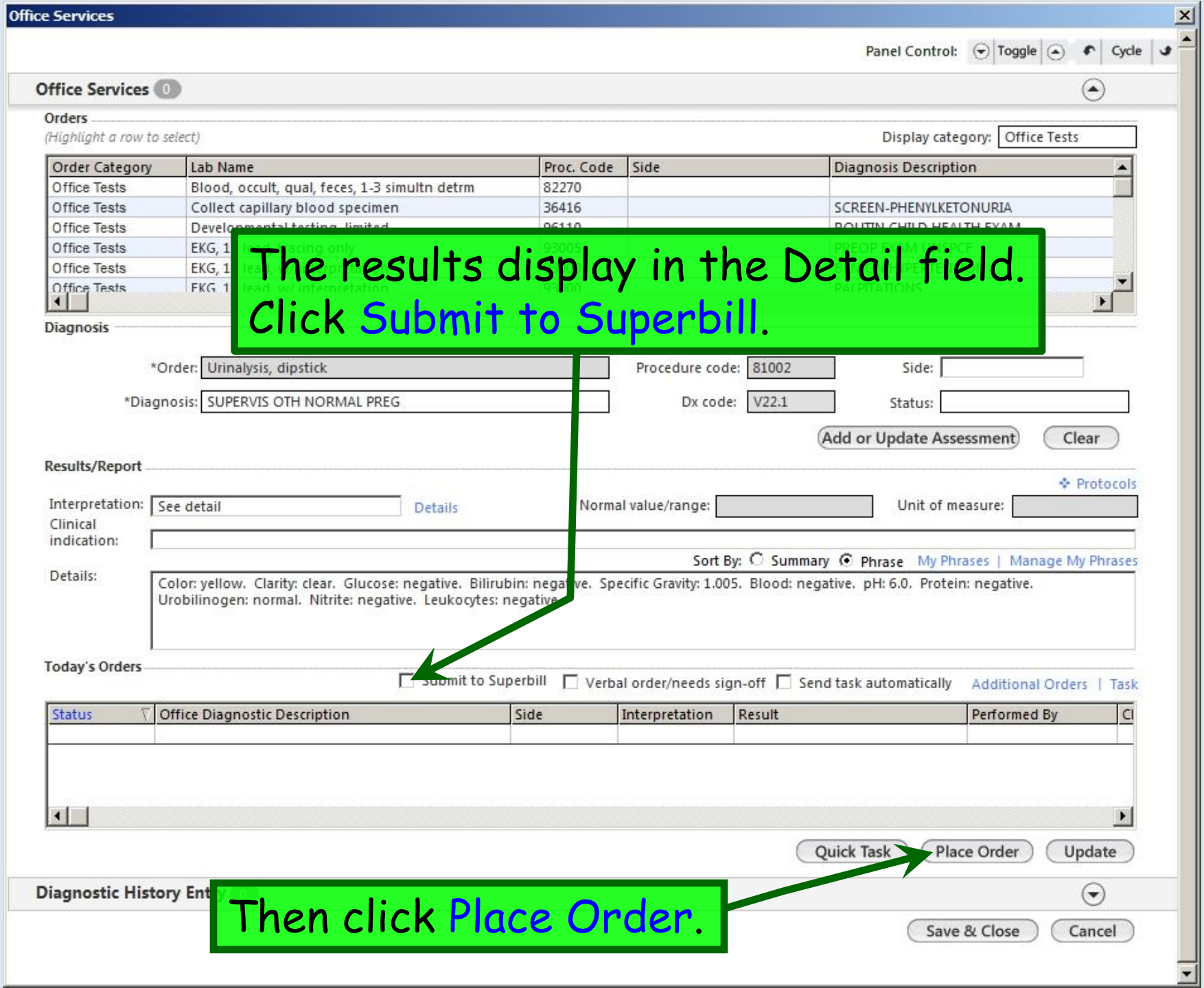

The clinic has standing orders to perform a urine pregnancy test on all new OB patients, & a urinalysis at all OB visits. Click one of the Standing Orders links.
06/19/2014 10:16 PM : "*USA Intake 836"
Specialty ▼ Obstetrics
Visit Type ▼ OB Prenatal - Initi
Intake
Gestational Age
Histories
Standing Orders | Adult Immunizations | Peds Immunizations |
Care Guidelines | Global Days
General
Established patient
New patient | Historian: self
Vital Signs
Reason for Visit
Medications
Allergies
Orders
Lab/Radiology Order Processing | Order Management | Immunizations | Standing Orders | Task
View of All Orders
Labs
Diagnostics
Office Services
View Immunizations Due
Procedures
Referrals
Status
Ordered
Order
Timeframe
Comments
Add
Edit

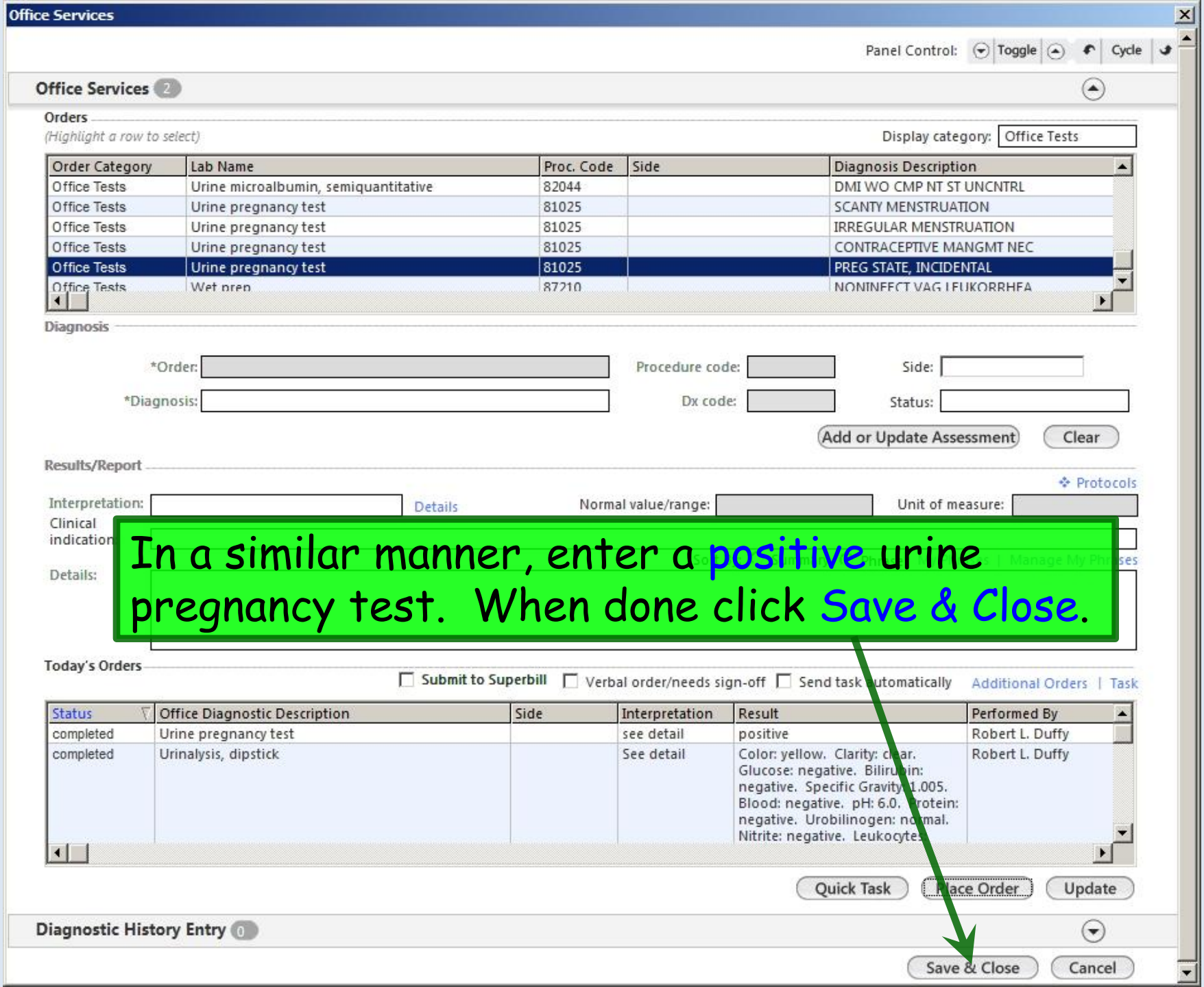
On the **Standing Orders** popup, click in the Display category box. In the ensuing popup, double-click Office Tests.

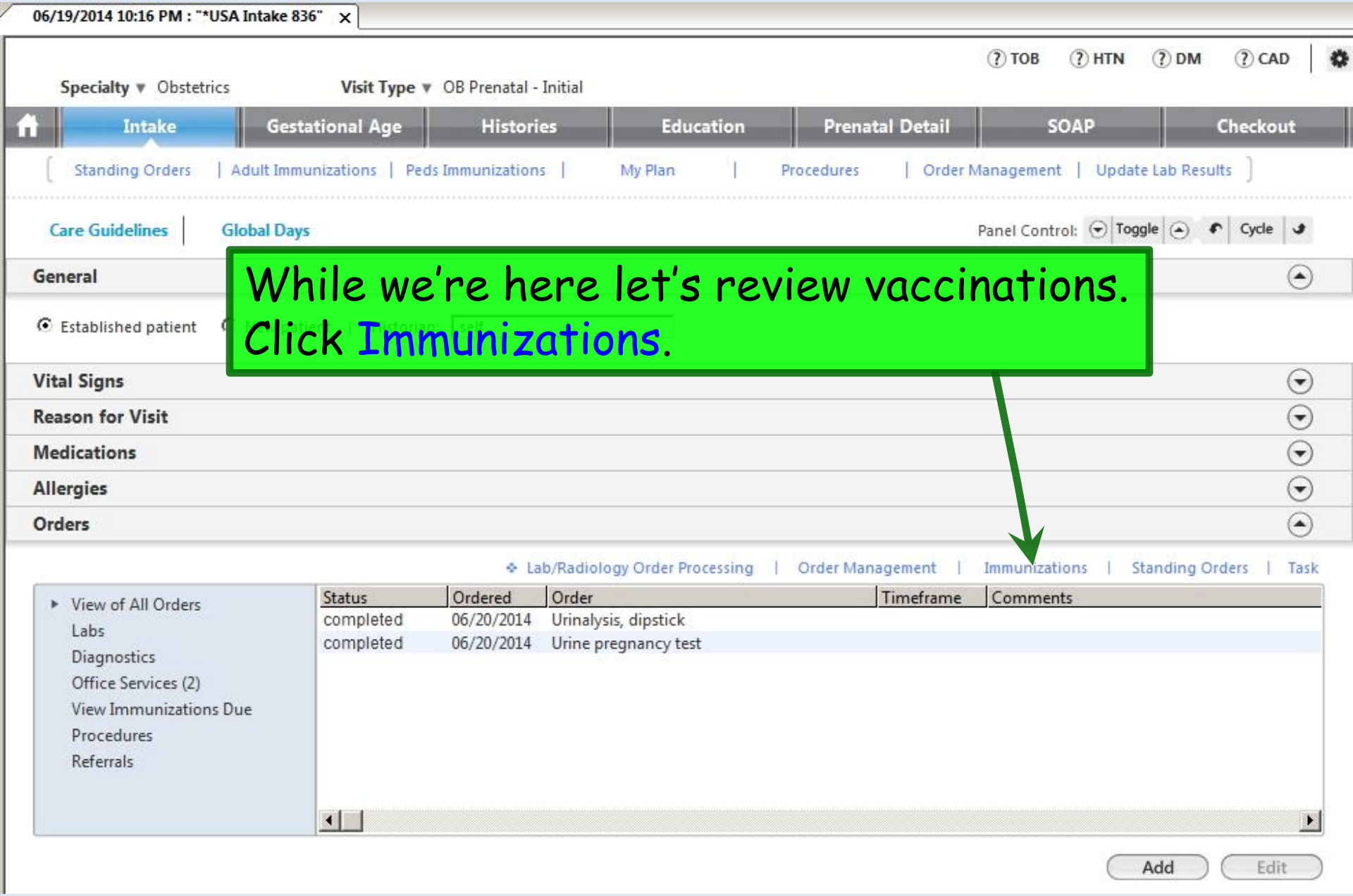


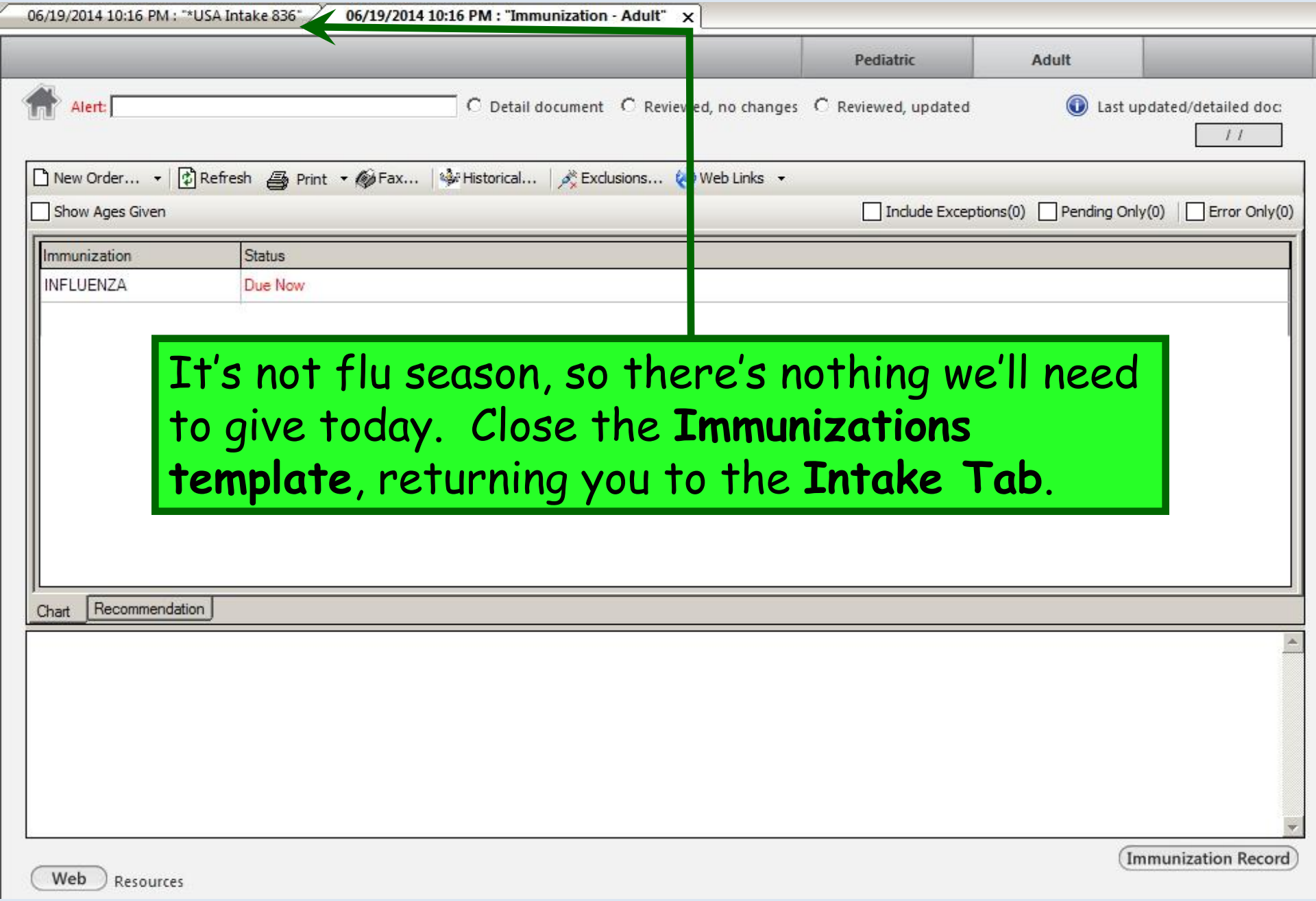

Office Services
Scroll down to Urinalysis, dipstick associated with pregnancy. Click this.
Office Services 0
Orders
(Highlight a row to select)
Order Category | Lab Name | Proc. Code | Side | Diagnosis Description
Office Tests | Urinalysis, dipstick | 81002 | | ROUTIN CHILD HEALTH EXAM
Office Tests | Urinalysis, dipstick | 81002 | | SUPERVIS OTH NORMAL PREG
Office Tests | Urinalysis, dipstick | 81002 | | MED EXAM NEC ADMIN PURP
Office Tests | Urinalysis, w/ micro | 81000 | | DYSURIA
Office Tests | Urinalysis, w/ micro | 81000 | | URINARY FREQUENCY
Office Tests | Urinalysis, w/ micro | 81000 | | URINARY INCONTINENCE NOS
Diagnosis
*Order: Urinalysis, dipstick
Procedure code: 81002
Side:
*Diagnosis: SUPERVIS OTH NORMAL PREG
Dx code: V22.1
Status:
Add or Update Assessment
Clear
Results/Report
Protocols
Interpretation:
Details
Normal value/range:
Unit of measure:
Clinical indication:
Sort By: Summary Phrase
My Phrases | Manage My Phrases
Details:
Today's Orders
Submit to Superbill
Verbal order/needs sign-off
Send task automatically
Additional Orders | Task
Status | Office Diagnostic Description | Side | Interpretation | Result | Performed By | Cl
Quick Task
Place Order
Update
Diagnostic History Entry 0
Save & Close
Cancel

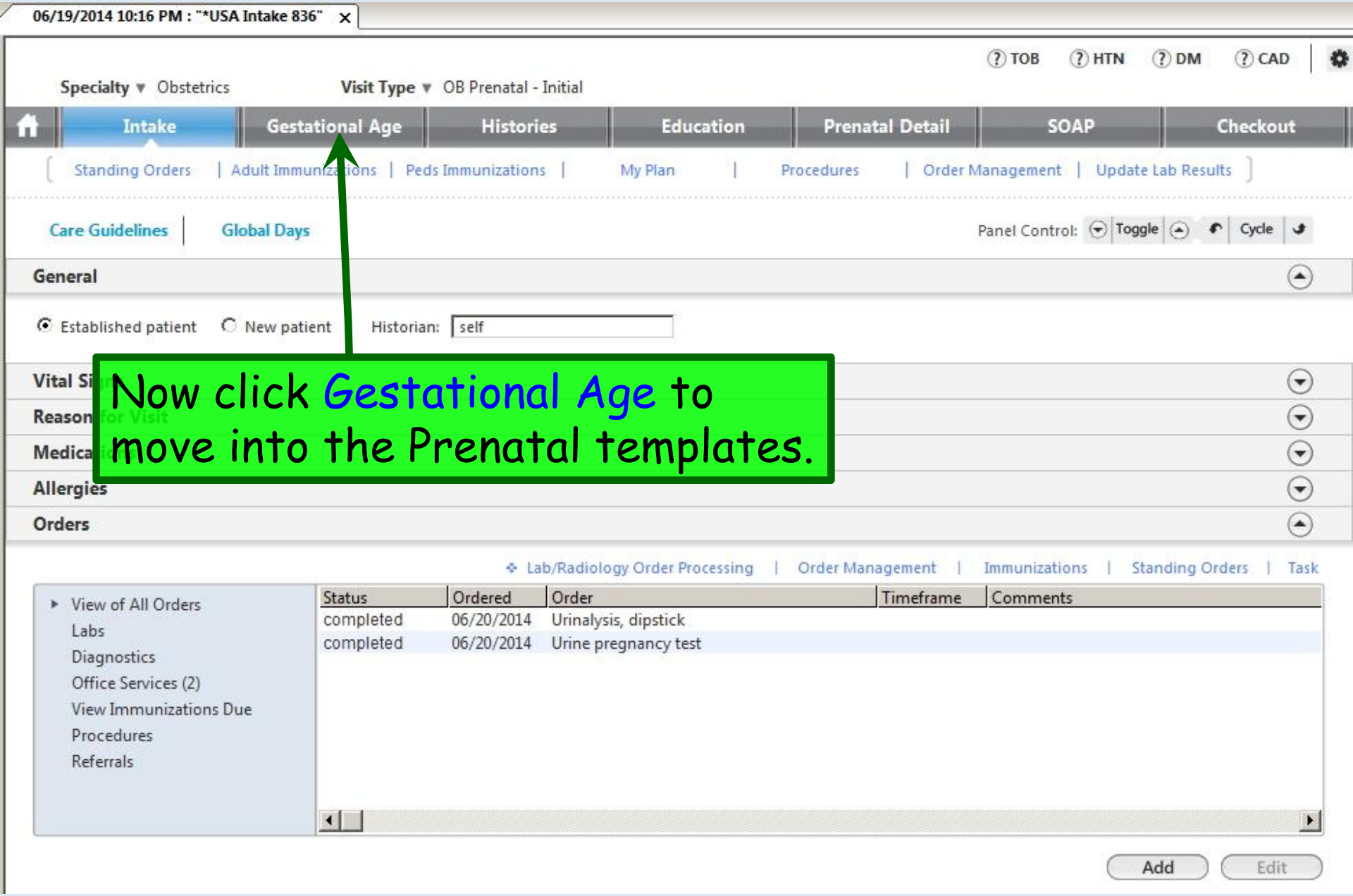

Click Detail & enter results. The data used in this example are shown.
Office Services
Panel Control: Toggle Cycle
Display category: Office Tests
Order Category | Lab Name | Proc. Code | Side | Diagnosis Description
Office Tests | Urinalysis, dipstick | 81002 | | ROUTIN CHILD HEALTH EXAM
Office Tests | Urinalysis, dipstick
Office Tests | Urinalysis, dipstick
Office Tests | Urinalysis, w/ micro
Office Tests | Urinalysis, w/ micro
Diagnosis
*Order: Urinalysis, dipstick
*Diagnosis: SUPERVIS OTH NORMAL PREG
Results/Report
Interpretation:
Details
Clinical indication:
Details:
Today's Orders
Submit to Superbill
Verbal order/needs sign-off
Send task automatically
Additional Orders
Task
Status | Office Diagnostic Description | Side | Interpretation | Result | Performed By
Quick Task
Place Order
Update
Diagnostic History Entry
Save & Close
Cancel
Urine Dipstick
Urine Dipstick
Color
Light yellow
Yellow
Dark yellow
Amber
Bloody
Clarity
Clear
Cloudy
Hazy
Milky
Turbid
Glucose
Negative
100 mg/dl
250 mg/dl
500 mg/dl
1000 mg/dl
2000> mg/dl
Bilirubin
Negative
Small
Moderate
Large
Ketones
Negative
Trace
Small
Moderate
Large
Very large
Specific gravity
1.000
1.005
1.010
1.020
1.025
1.030
Blood
Negative
Trace non-hem
Mod. non-hem
Trace
Small
Moderate
Large
pH
5.5
6.0
6.5
7.0
7.5
8.0
8.5
Protein
Negative
Trace
Small
1+
2+
3+
4+
Urobilinogen
Normal
2 mg/dl
4 mg/dl
8 mg/dl
Nitrite
Negative
Positive
Leukocytes
Negative
Trace
Small
Moderate
Large
Interpretation: Normal See detail
OK
Cancel
When done click OK.

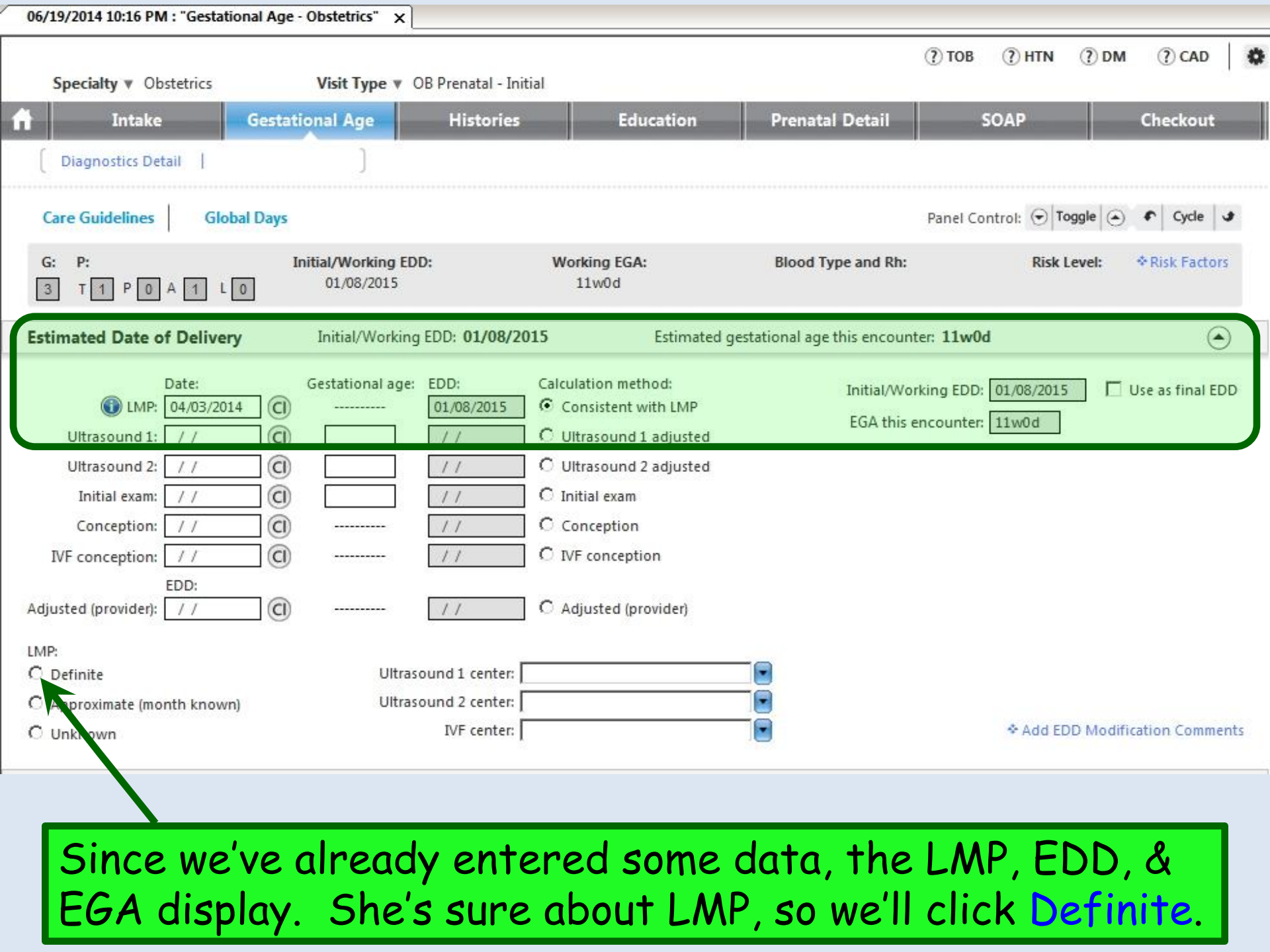

Office Services
Panel Control: Toggle Cycle
Office Services 0
Orders
(Highlight a row to select)
Display category: Office Tests
Order Category | Lab Name | Proc. Code | Side | Diagnosis Description
Office Tests | Blood, occult, qual, feces, 1-3 simultn detrm | 82270
Office Tests | Collect capillary blood specimen | 36416 | SCREEN-PHENYLKETONURIA
Office Tests | Developmental testing, limited | 96110 | ROUTN CHILD HEALTH EXAM
Office Tests | EKG, 1 | 93005 | PREOP EXAM EKG
Office Tests | EKG, 1
Office Tests | EKG, 1
The results display in the Detail field.
Click Submit to Superbill.
Diagnosis
*Order: Urinalysis, dipstick
Procedure code: 81002
Side:
*Diagnosis: SUPERVIS OTH NORMAL PREG
Dx code: V22.1
Status:
Add or Update Assessment
Clear
Results/Report
Protocols
Interpretation: See detail
Details
Normal value/range:
Unit of measure:
Clinical indication:
Sort By: Summary Phrase My Phrases | Manage My Phrases
Details:
Color: yellow. Clarity: clear. Glucose: negative. Bilirubin: negative. Specific Gravity: 1.005. Blood: negative. pH: 6.0. Protein: negative. Urobilinogen: normal. Nitrite: negative. Leukocytes: negative.
Today's Orders
Submit to Superbill
Verbal order/needs sign-off
Send task automatically
Additional Orders | Task
Status | Office Diagnostic Description | Side | Interpretation | Result | Performed By
Quick Task
Place Order
Update
Diagnostic History Ent
Then click Place Order.
Save & Close
Cancel


Office Services
Panel Control: Toggle Cycle
Office Services 2
Orders
(Highlight a row to select)
Display category: Office Tests
Order Category | Lab Name | Proc. Code | Side | Diagnosis Description
Office Tests | Urine microalbumin, semiquantitative | 82044 | | DMI WO CMP NT ST UNCNTRL
Office Tests | Urine pregnancy test | 81025 | | SCANTY MENSTRUATION
Office Tests | Urine pregnancy test | 81025 | | IRREGULAR MENSTRUATION
Office Tests | Urine pregnancy test | 81025 | | CONTRACEPTIVE MANGMT NEC
Office Tests | Urine pregnancy test | 81025 | | PREG STATE, INCIDENTAL
Office Tests | Wet prep | 87210 | | NONINFECT VAG LEUKORRHEA
Diagnosis
*Order:
Procedure code:
Side:
*Diagnosis:
Dx code:
Status:
Add or Update Assessment
Clear
Results/Report
Protocols
Interpretation:
Details
Normal value/range:
Unit of measure:
Clinical indication
Details:
In a similar manner, enter a positive urine pregnancy test. When done click Save & Close.
Today's Orders
Submit to Superbill
Verbal order/needs sign-off
Send task automatically
Additional Orders | Task
Status | Office Diagnostic Description | Side | Interpretation | Result | Performed By
completed | Urine pregnancy test | | see detail | positive | Robert L. Duffy
completed | Urinalysis, dipstick | | See detail | Color: yellow. Clarity: clear. Glucose: negative. Bilirubin: negative. Specific Gravity: 1.005. Blood: negative. pH: 6.0. Protein: negative. Urobilinogen: normal. Nitrite: negative. Leukocytes | Robert L. Duffy
Quick Task
Place Order
Update
Diagnostic History Entry 0
Save & Close
Cancel

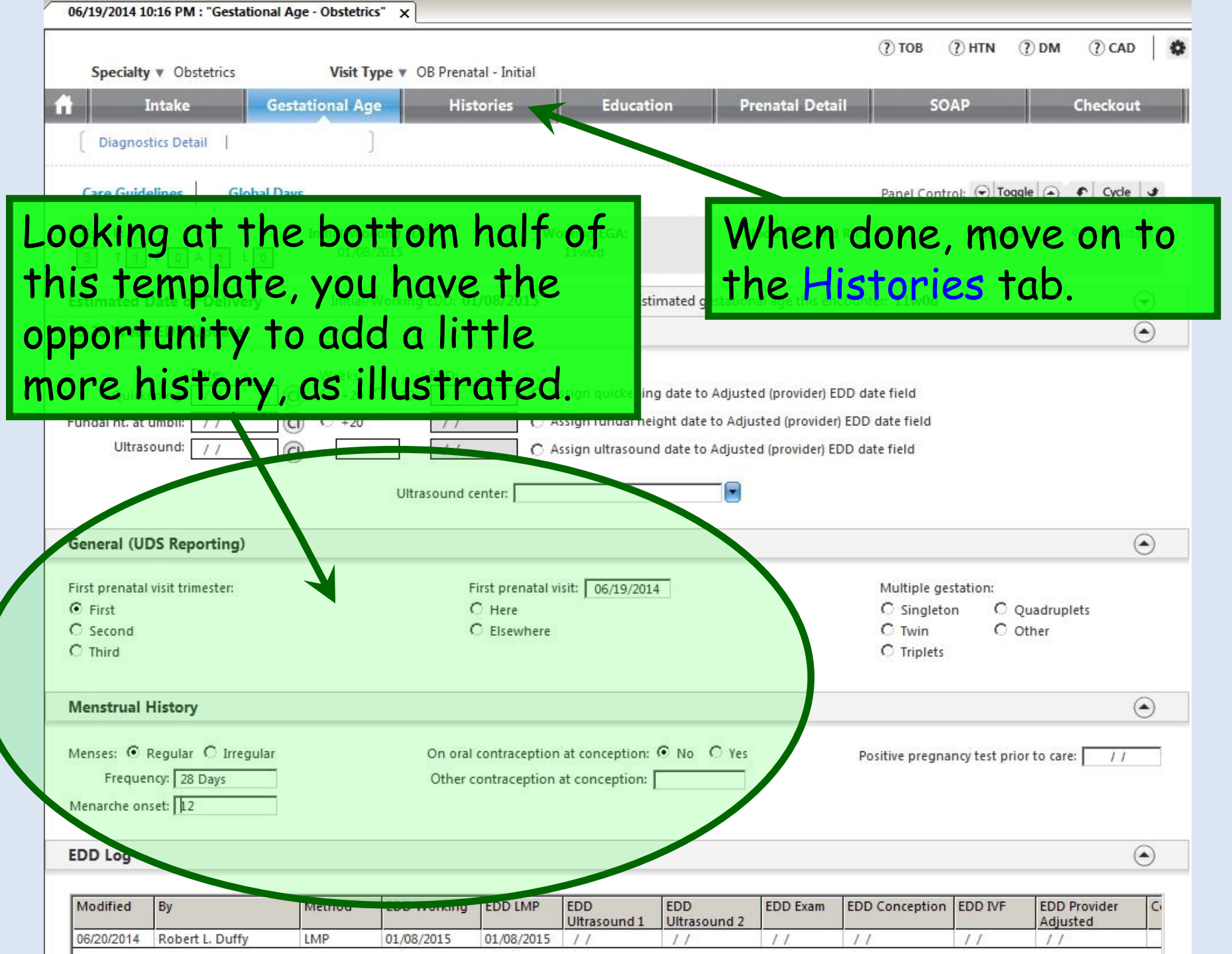

06/19/2014 10:16 PM : "*USA Intake 836"
TOB
HTN
DM
CAD
Specialty ▼ Obstetrics
Visit Type ▼ OB Prenatal - Initial
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Standing Orders | Adult Immunizations | Peds Immunizations | My Plan | Procedures | Order Management | Update Lab Results
Care Guidelines
Global Days
Panel Control: Toggle Cycle
General
Established patient
While we're here let's review vaccinations.
Click Immunizations.
Vital Signs
Reason for Visit
Medications
Allergies
Orders
Lab/Radiology Order Processing | Order Management | Immunizations | Standing Orders | Task
View of All Orders
Labs
Diagnostics
Office Services (2)
View Immunizations Due
Procedures
Referrals
Status
Ordered
Order
Timeframe
Comments
completed
06/20/2014
Urinalysis, dipstick
completed
06/20/2014
Urine pregnancy test
Add
Edit


06/19/2014 10:16 PM : "*USA Intake 836"
06/19/2014 10:16 PM : "Immunization - Adult"
Pediatric
Adult
Alert:
Detail document
Reviewed, no changes
Reviewed, updated
Last updated/detailed doc:
/ /
New Order...
Refresh
Print
Fax...
Historical...
Exclusions...
Web Links
Show Ages Given
Include Exceptions(0)
Pending Only(0)
Error Only(0)
Immunization
Status
INFLUENZA
Due Now
It's not flu season, so there's nothing we'll need to give today. Close the Immunizations template, returning you to the Intake Tab.
Chart
Recommendation
Immunization Record
Web
Resources


06/19/2014 10:16 PM : "*USA Intake 836"
TOB
HTN
DM
CAD
Specialty ▼ Obstetrics
Visit Type ▼ OB Prenatal - Initial
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Standing Orders | Adult Immunizations | Peds Immunizations | My Plan | Procedures | Order Management | Update Lab Results
Care Guidelines | Global Days
Panel Control: Toggle Cycle
General
Established patient
New patient
Historian: self
Now click Gestational Age to move into the Prenatal templates.
Vital Signs
Reason for Visit
Medications
Allergies
Orders
Lab/Radiology Order Processing | Order Management | Immunizations | Standing Orders | Task
View of All Orders
Labs
Diagnostics
Office Services (2)
View Immunizations Due
Procedures
Referrals
Status
Ordered
Order
Timeframe
Comments
completed
06/20/2014
Urinalysis, dipstick
completed
06/20/2014
Urine pregnancy test
Add
Edit



Since we've already entered some data, the LMP, EDD, & EGA display. She's sure about LMP, so we'll click Definite.


06/19/2014 10:16 PM : "Gestational Age - Obstetrics"
TOB
HTN
DM
CAD
Specialty ▼ Obstetrics
Visit Type ▼ OB Prenatal - Initial
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Diagnostics Detail
Looking at the bottom half of this template, you have the opportunity to add a little more history, as illustrated.
When done, move on to the Histories tab.
Ultrasound:
Assign ultrasound date to Adjusted (provider) EDD date field
Ultrasound center:
General (UDS Reporting)
First prenatal visit trimester:
First
Second
Third
First prenatal visit: 06/19/2014
Here
Elsewhere
Multiple gestation:
Singleton
Twin
Triplets
Quadruplets
Other
Menstrual History
Menses: Regular Irregular
Frequency: 28 Days
Menarche onset: 12
On oral contraception at conception: No Yes
Other contraception at conception:
Positive pregnancy test prior to care:
EDD Log
Modified
By
Method
EDD Working
EDD LMP
EDD Ultrasound 1
EDD Ultrasound 2
EDD Exam
EDD Conception
EDD IVF
EDD Provider Adjusted
06/20/2014
Robert L. Duffy
LMP
01/08/2015
01/08/2015

06/19/2014 10:16 PM : "Histories - Obstetrics"

TOB HTN DM CAD

Specialty ▼ Obstetrics Visit Type ▼ OB Prenatal - Initial

Intake | Gestational Age | Histories | Education | Prenatal Detail | SOAP | Checkout

Demographics | Order Management | Document Library | Chart Abstraction | Update Lab Results

Care Guidelines | Global Days | History Review

Panel Control: Toggle Cycle

G: 3 P: T 1 P 0 A 1 L 0

Initial/Working EDD: 01/08/2015

Working EGA: 11w0d

Blood Type and Rh:

Risk Level: Risk Factors

Pregnancy History

Highlight a row to view comments

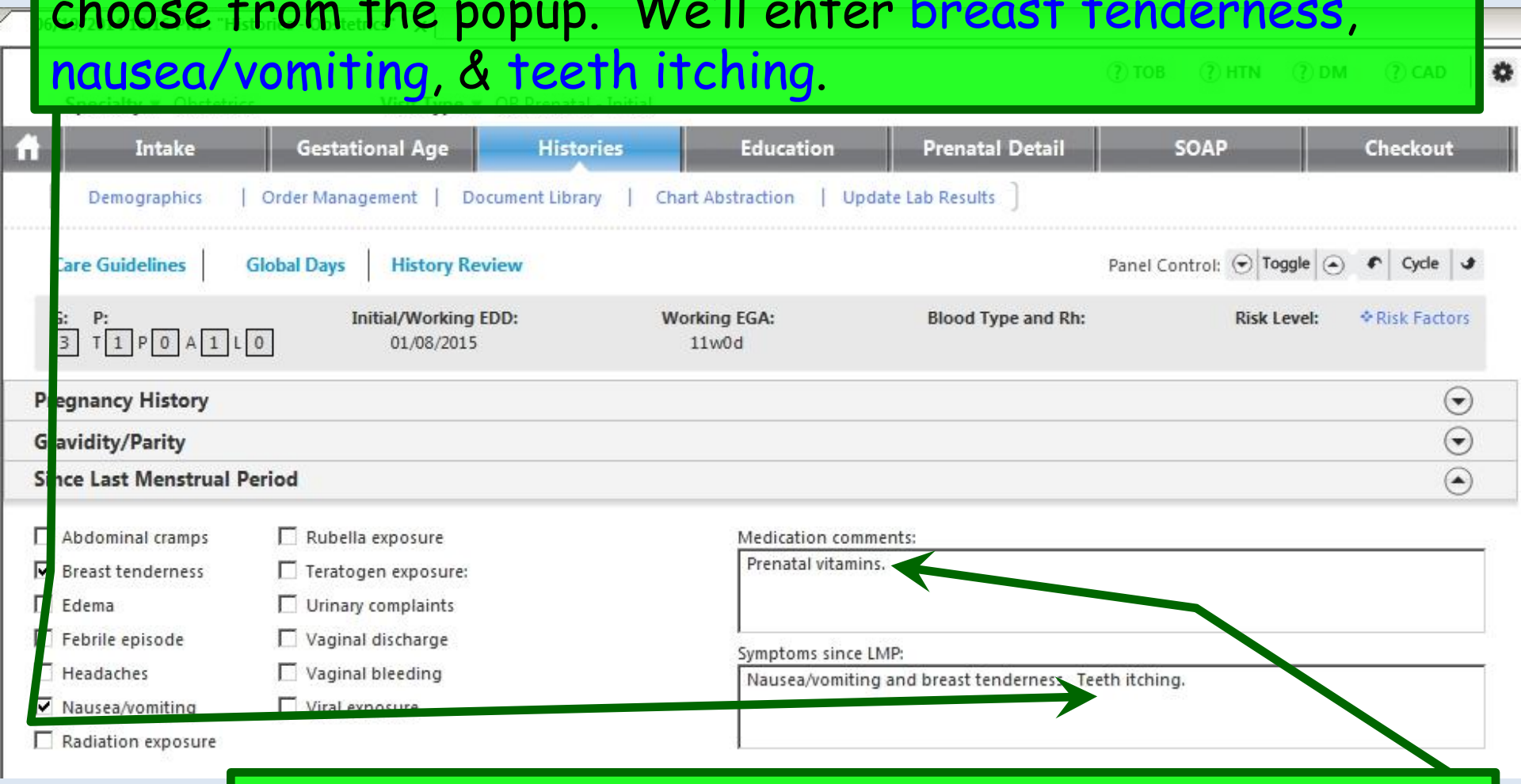
Pregnancy #	Baby #	Date	DeliveryType	Gestational Age	Labor(hrs)	Weight	Weight (gm)	Sex	Place of delivery	Anesthesia	Laceration
1		March 2008	NSVD	40W0D		6lb(s) 8 oz	2948	Male	USAC&W	Epidural	
2		July 2009		12W0D			0	Unknow			

This tab allows you to record most aspects of the past medical, family, & social history, as well as several items specific to pregnancy that are line items on the ACOG prenatal form. Since we recorded OBGYN Details earlier, they display here; you could add it at this point if you didn't enter it earlier.

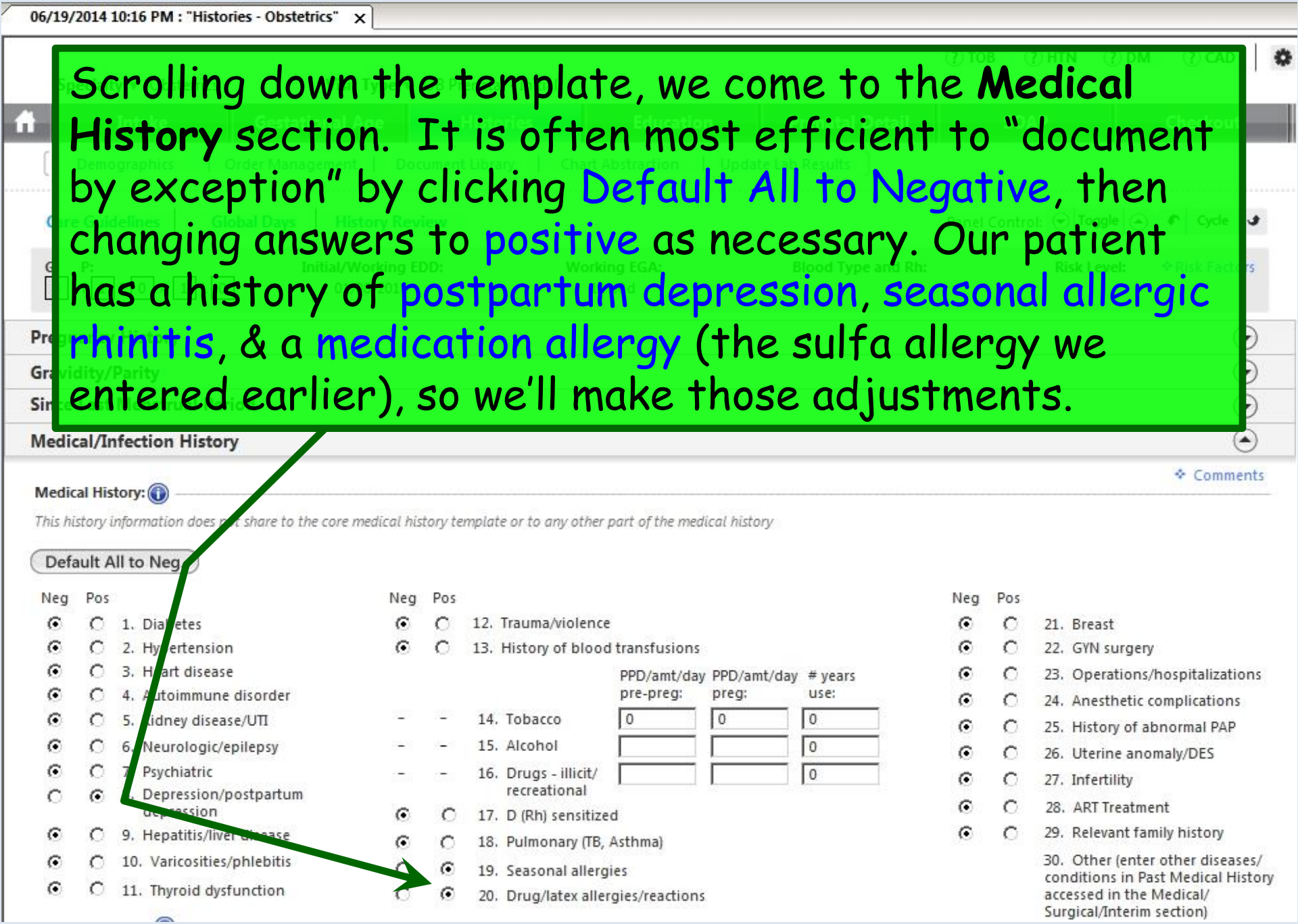
G: 3 P: T 1 P 0 A 1 L 0

Full term: 1 Premature: Abortion induced: Abortion spontaneous: 1 Ectopic: Living: C-section: SVD: 1 Multiple births:

Navigating down the template, enter **Symptoms Since LMP**. You can just type in the box, or click the Add button & choose from the popup. We'll enter breast tenderness, nausea/vomiting, & teeth itching.



Also click in the **Medication comments** box & type entries as necessary. We'll enter Prenatal vitamins.


06/19/2014 10:16 PM : "Histories - Obstetrics"
Scrolling down the template, we come to the **Medical History** section. It is often most efficient to "document by exception" by clicking Default All to Negative, then changing answers to positive as necessary. Our patient has a history of postpartum depression, seasonal allergic rhinitis, & a medication allergy (the sulfa allergy we entered earlier), so we'll make those adjustments.
Medical/Infection History
Medical History:
This history information does not share to the core medical history template or to any other part of the medical history
Comments
Default All to Neg
Neg Pos
1. Diabetes
2. Hypertension
3. Heart disease
4. Autoimmune disorder
5. Kidney disease/UTI
6. Neurologic/epilepsy
7. Psychiatric
8. Depression/postpartum depression
9. Hepatitis/liver disease
10. Varicosities/phlebitis
11. Thyroid dysfunction
12. Trauma/violence
13. History of blood transfusions
PPD/amt/day pre-preg:
PPD/amt/day preg:
years use:
14. Tobacco
15. Alcohol
16. Drugs - illicit/ recreational
17. D (Rh) sensitized
18. Pulmonary (TB, Asthma)
19. Seasonal allergies
20. Drug/latex allergies/reactions
21. Breast
22. GYN surgery
23. Operations/hospitalizations
24. Anesthetic complications
25. History of abnormal PAP
26. Uterine anomaly/DES
27. Infertility
28. ART Treatment
29. Relevant family history
30. Other (enter other diseases/ conditions in Past Medical History accessed in the Medical/ Surgical/Interim section)

In a similar fashion, document her **Infection History**. Her only positive response is for Chlamydia.

06/19/2014 10:16 PM : "Histories - Obstetrics"

Medic

Comments

Medical History:

This history information does not share to the core medical history template or to any other part of the medical history

Default All to Neg.

Neg	Pos		Neg	Pos		Neg	Pos	
◉	○	1. Diabetes	◉	○	12. Trauma/violence	◉	○	21. Breast
◉	○	2. Hypertension	◉	○	13. History of blood transfusions	◉	○	22. GYN surgery
◉	○	3. Heart disease				◉	○	23. Operations/hospitalizations
◉	○	4. Autoimmune disorder				◉	○	24. Anesthetic complications
◉	○	5. Kidney disease/UTI	–	–	14. Tobacco	◉	○	25. History of abnormal PAP
◉	○	6. Neurologic/epilepsy	–	–	15. Alcohol	◉	○	26. Uterine anomaly/DES
◉	○	7. Psychiatric	–	–	16. Drugs - illicit/ recreational	◉	○	27. Infertility
○	◉	8. Depression/postpartum depression	◉	○	17. D (Rh) sensitized	◉	○	28. ART Treatment
◉	○	9. Hepatitis/liver disease	◉	○	18. Pulmonary (TB, Asthma)	◉	○	29. Relevant family history
◉	○	10. Varicosities/phlebitis	○	◉	19. Seasonal allergies			30. Other (enter other diseases/ conditions in Past Medical History accessed in the Medical/ Surgical/Interim section)
◉	○	11. Thyroid dysfunction	○	◉	20. Drug/latex allergies/reactions			

	PPD/amt/day pre-preg:	PPD/amt/day preg:	# years use:
14. Tobacco	0	0	0
15. Alcohol			0
16. Drugs - illicit/ recreational			0

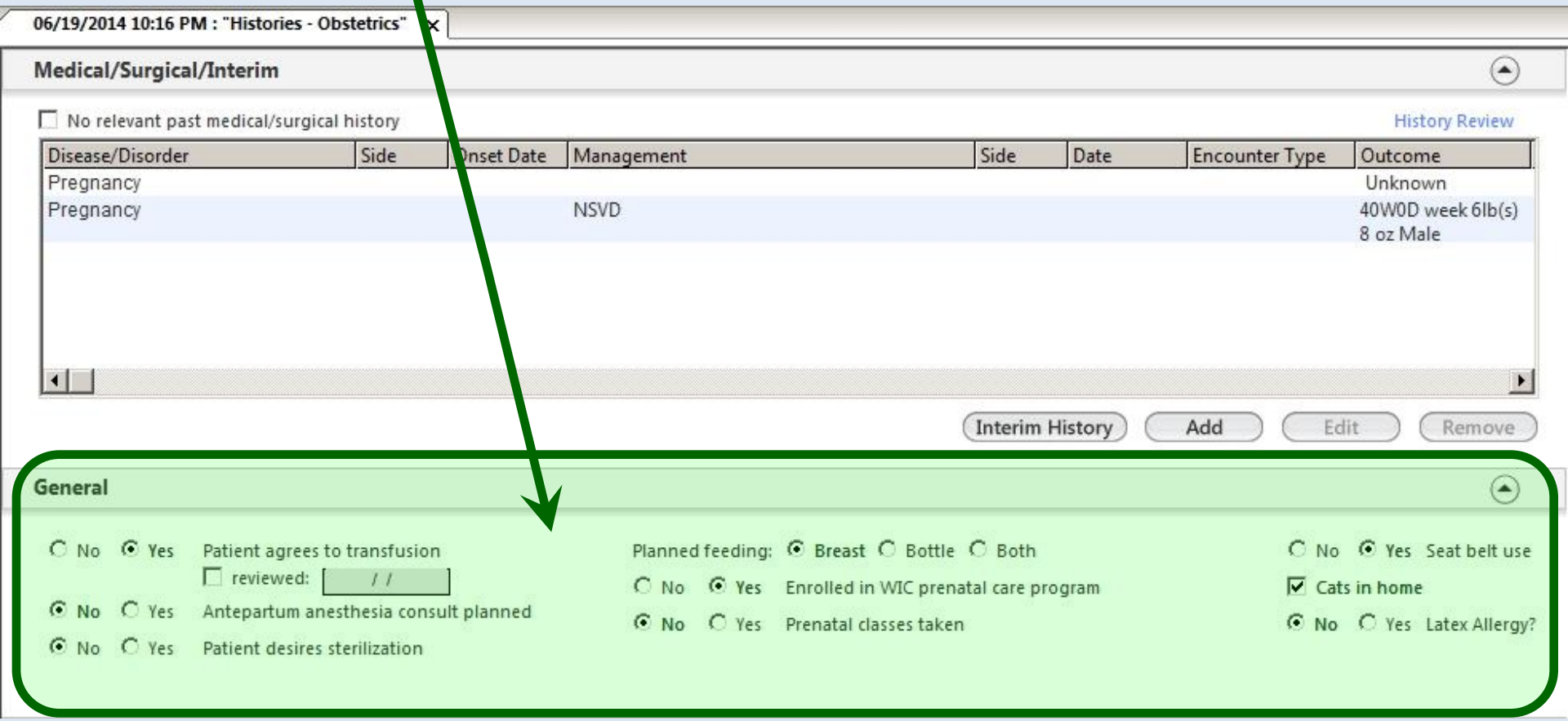
Infection History:

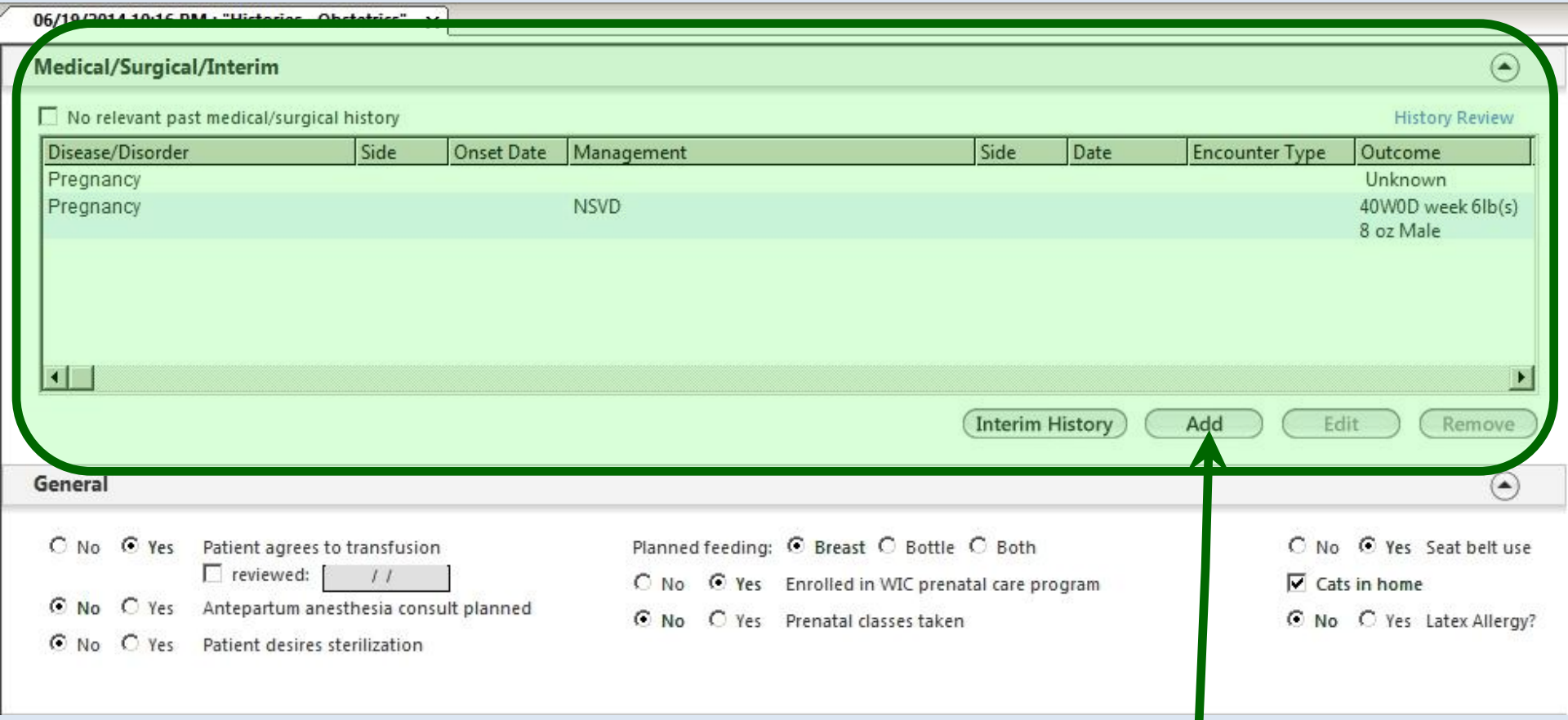
This history information does not share to the core medical history template or to any other part of the medical history

Default All to Neg.

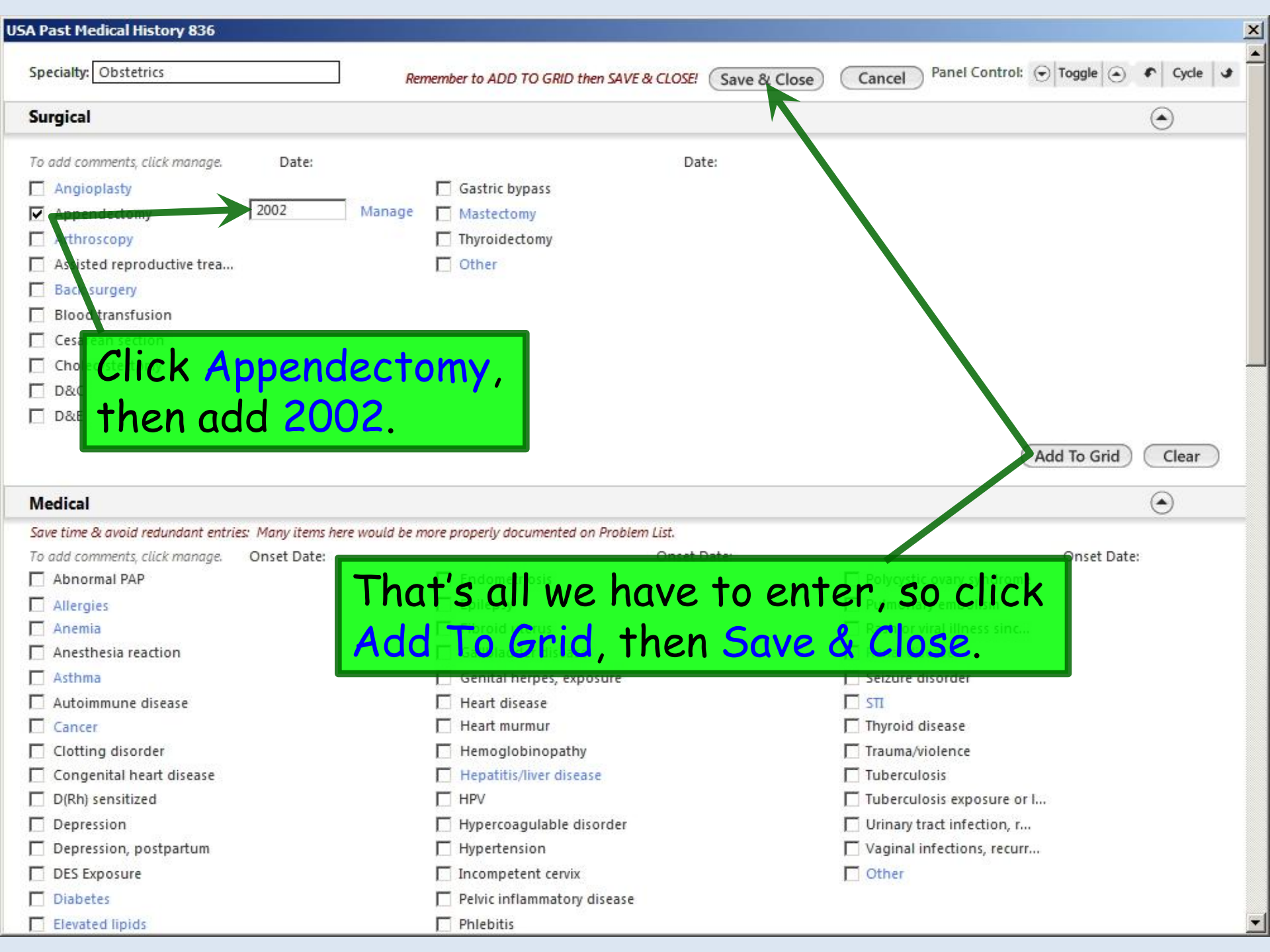
No	Yes		No	Yes		No	Yes	
◉	○	Live with someone with TB or exposed to TB	◉	○	Hepatitis B, C	◉	○	HIV
◉	○	Patient or partner has history of genital herpes	◉	○	STI	○	◉	Chlamydia
◉	○	Rash or viral illness since last menstrual period	◉	○	HPV	◉	○	Syphilis
			◉	○	Gonorrhea			Other (enter other infections or exposure to infections in Past Medical History accessed in the Medical/Surgical/Interim section)

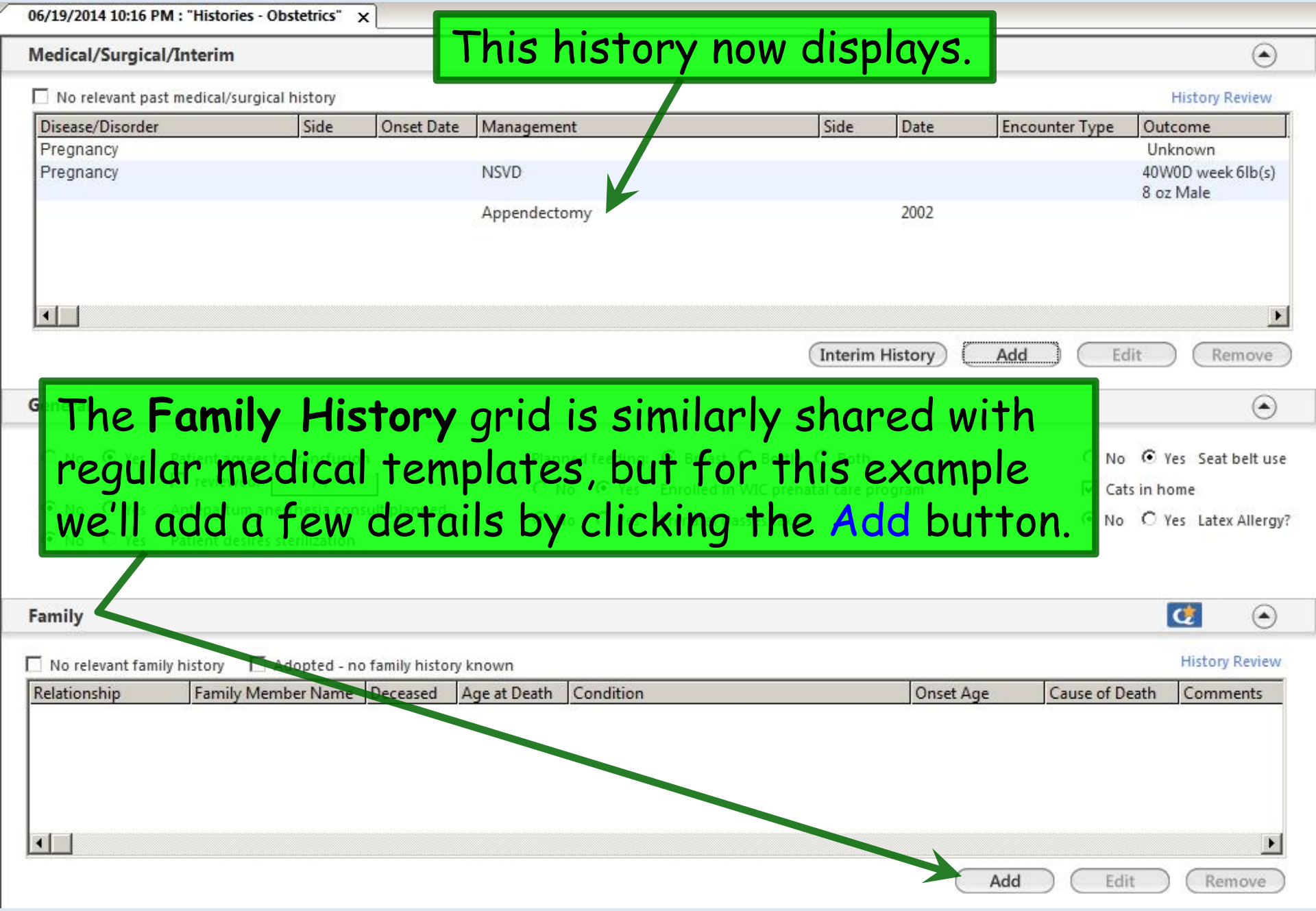
There are several pregnancy-related questions to answer here, as illustrated.

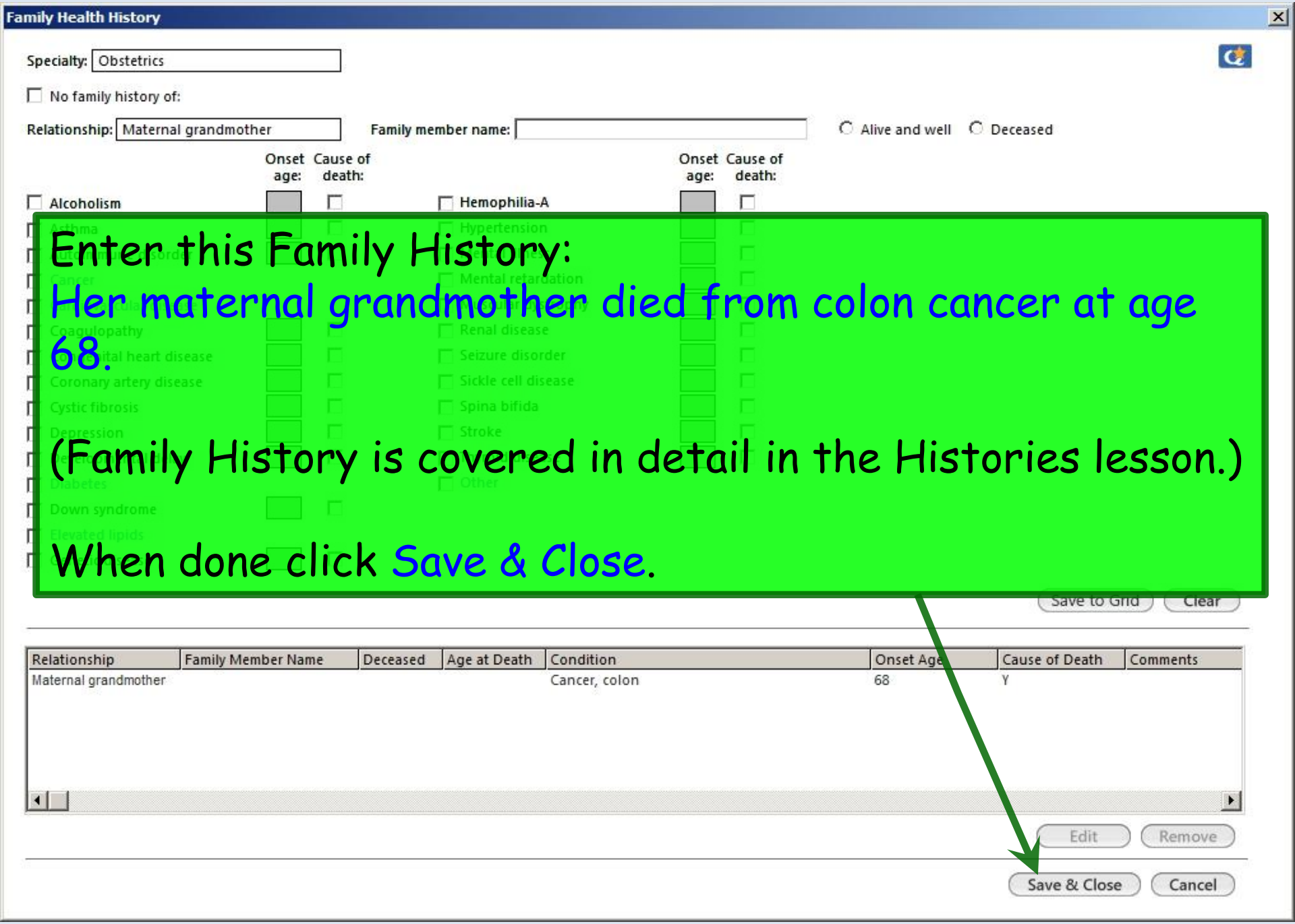


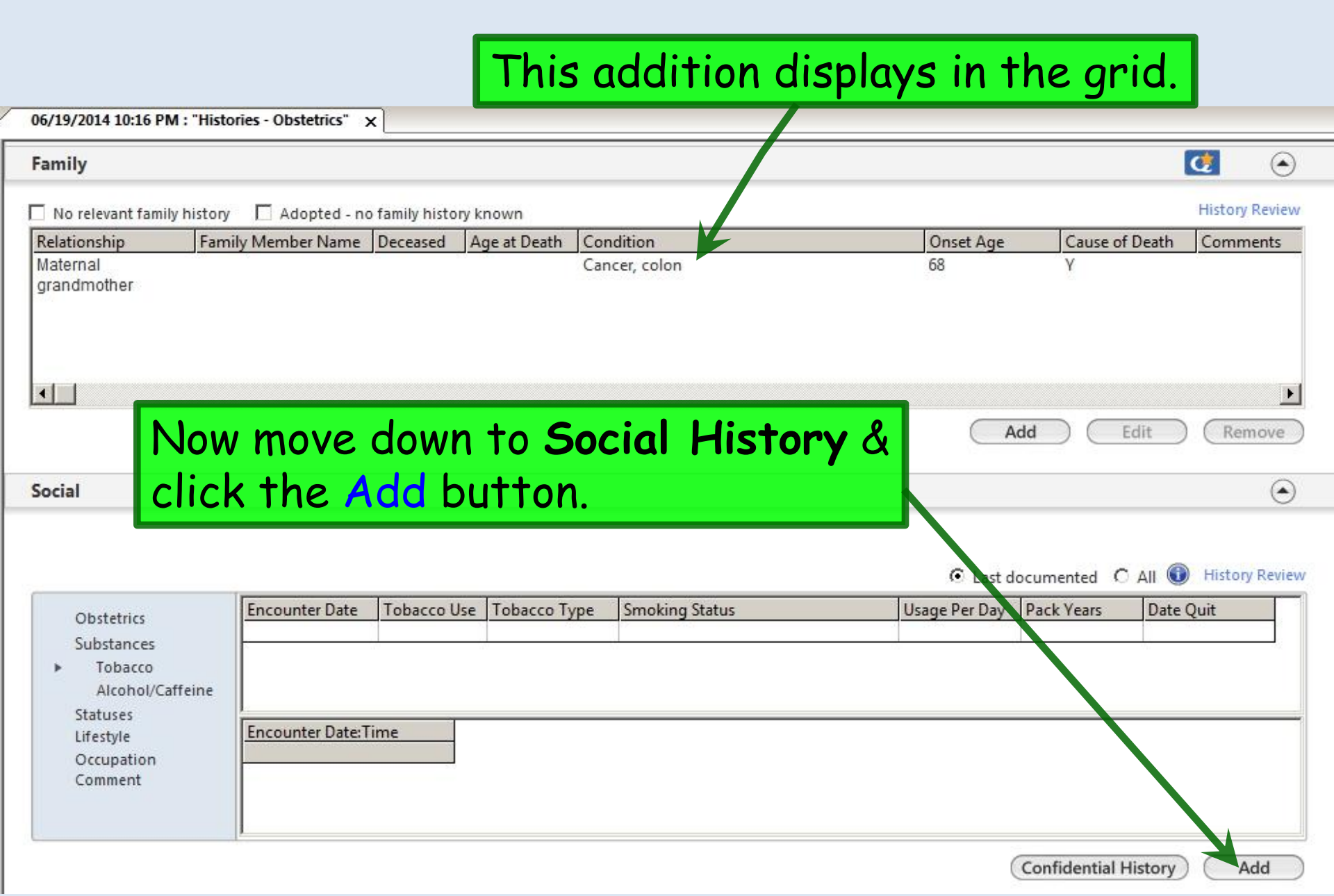


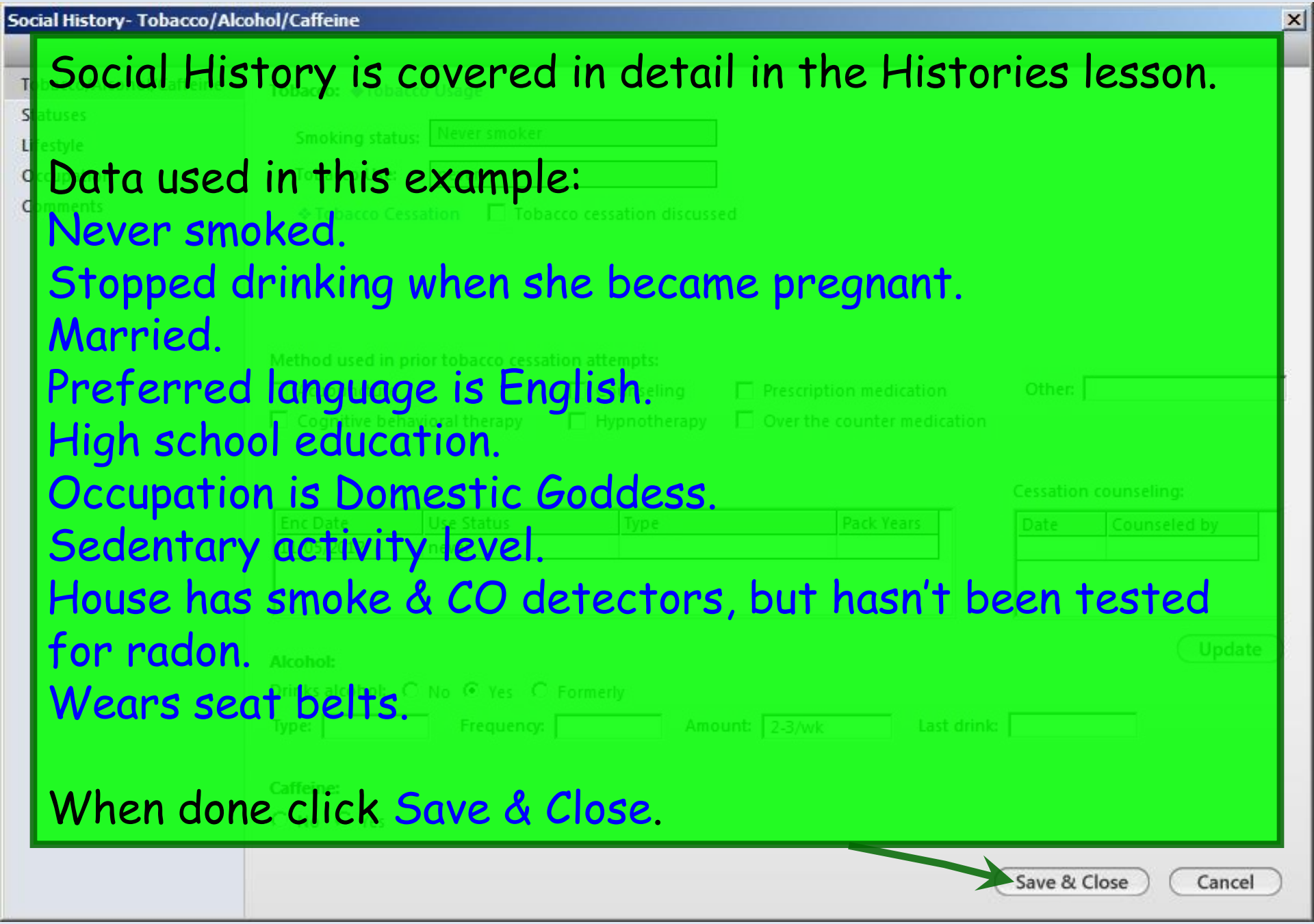
The **Medical/Surgical/Interim** grid is the same as on the Histories Tab you see on non-obstetrical encounters, so for an established patient, you'd probably already have all this info entered. For this example we'll add that she's had an appendectomy. Click Add.

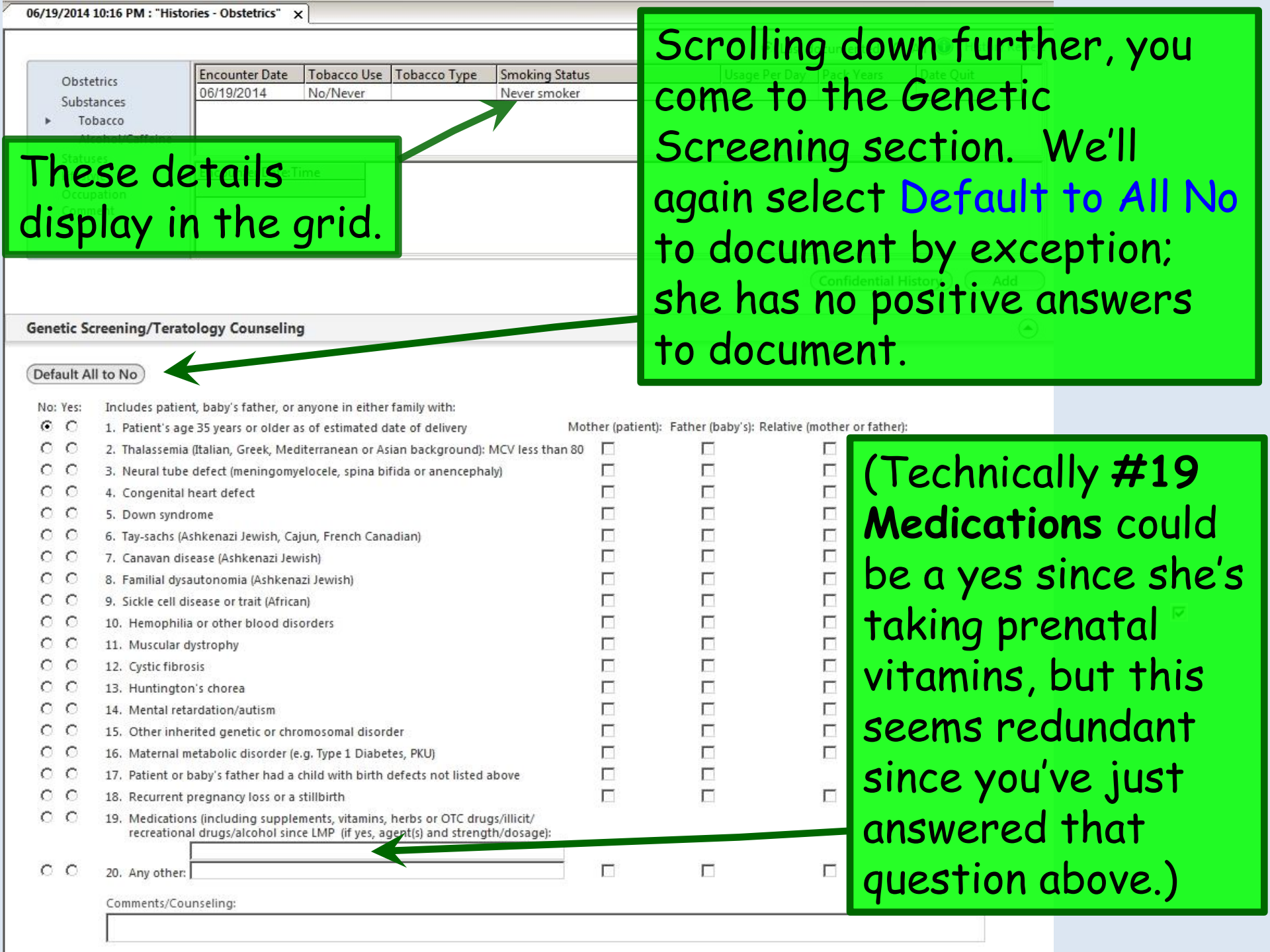

USA Past Medical History 836
Specialty: Obstetrics
Remember to ADD TO GRID then SAVE & CLOSE!
Save & Close
Cancel
Panel Control:
Toggle
Cycle
Surgical
To add comments, click manage.
Date:
Date:
Angioplasty
Appendectomy
2002
Manage
Arthroscopy
Assisted reproductive trea...
Back surgery
Blood transfusion
Cesarean section
Cholecystectomy
D&C
D&E
Gastric bypass
Mastectomy
Thyroidectomy
Other
Click Appendectomy, then add 2002.
Add To Grid
Clear
Medical
Save time & avoid redundant entries: Many items here would be more properly documented on Problem List.
To add comments, click manage.
Onset Date:
Onset Date:
Onset Date:
That's all we have to enter, so click Add To Grid, then Save & Close.
Abnormal PAP
Allergies
Anemia
Anesthesia reaction
Asthma
Autoimmune disease
Cancer
Clotting disorder
Congenital heart disease
D(Rh) sensitized
Depression
Depression, postpartum
DES Exposure
Diabetes
Elevated lipids
Endometriosis
Genital herpes, exposure
Heart disease
Heart murmur
Hemoglobinopathy
Hepatitis/liver disease
HPV
Hypercoagulable disorder
Hypertension
Incompetent cervix
Pelvic inflammatory disease
Phlebitis
Polycystic ovary syndrome
Pulmonary embolism
Seizure disorder
STI
Thyroid disease
Trauma/violence
Tuberculosis
Tuberculosis exposure or I...
Urinary tract infection, r...
Vaginal infections, recurr...
Other

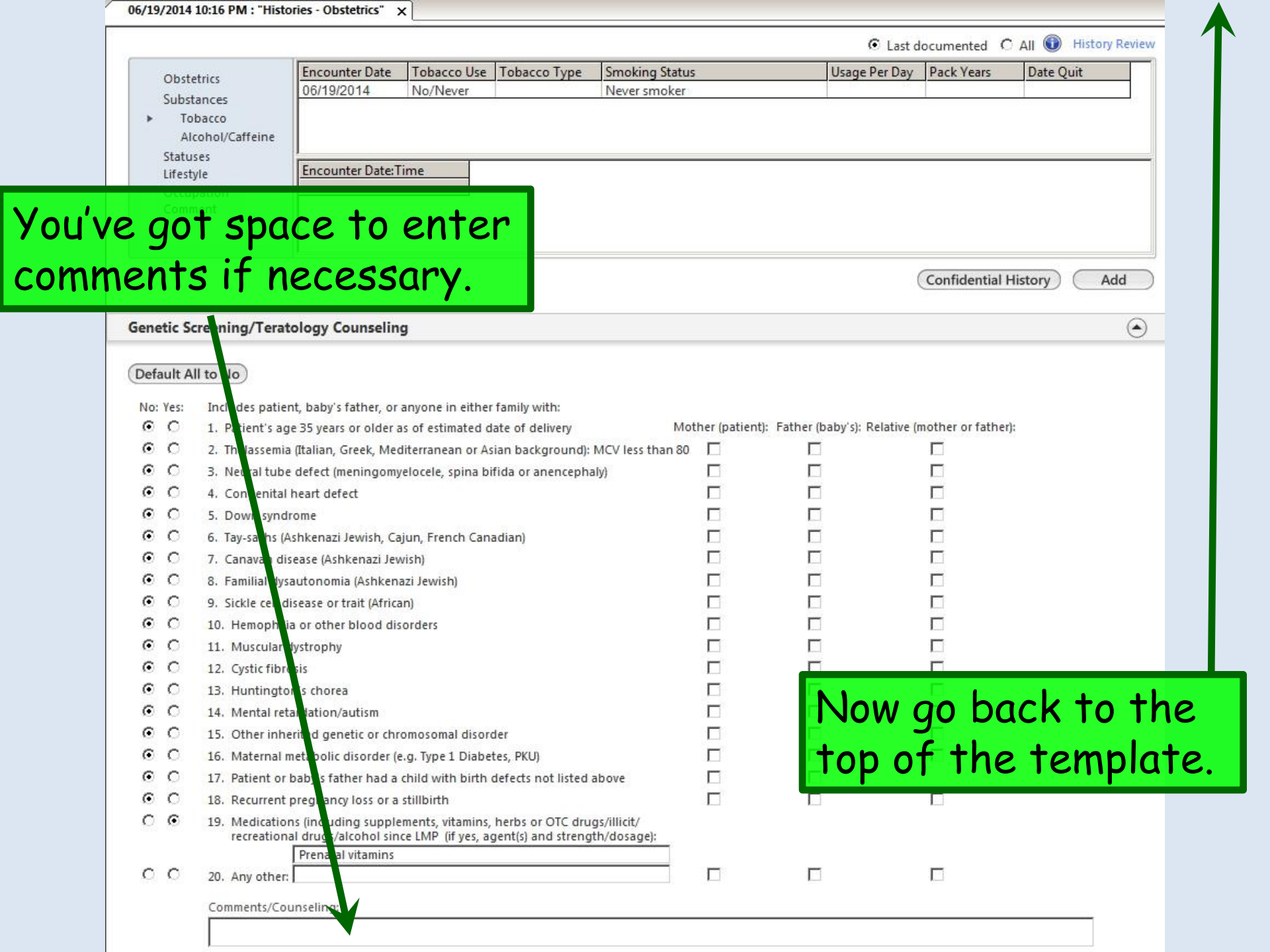

06/19/2014 10:16 PM : "Histories - Obstetrics"
This history now displays.
Medical/Surgical/Interim
No relevant past medical/surgical history
History Review
Disease/Disorder
Side
Onset Date
Management
Side
Date
Encounter Type
Outcome
Pregnancy
Unknown
Pregnancy
NSVD
40W0D week 6lb(s) 8 oz Male
Appendectomy
2002
Interim History
Add
Edit
Remove
The Family History grid is similarly shared with regular medical templates, but for this example we'll add a few details by clicking the Add button.
No
Yes
Seat belt use
Cats in home
No
Yes
Latex Allergy?
Family
No relevant family history
Adopted - no family history known
History Review
Relationship
Family Member Name
Deceased
Age at Death
Condition
Onset Age
Cause of Death
Comments
Add
Edit
Remove

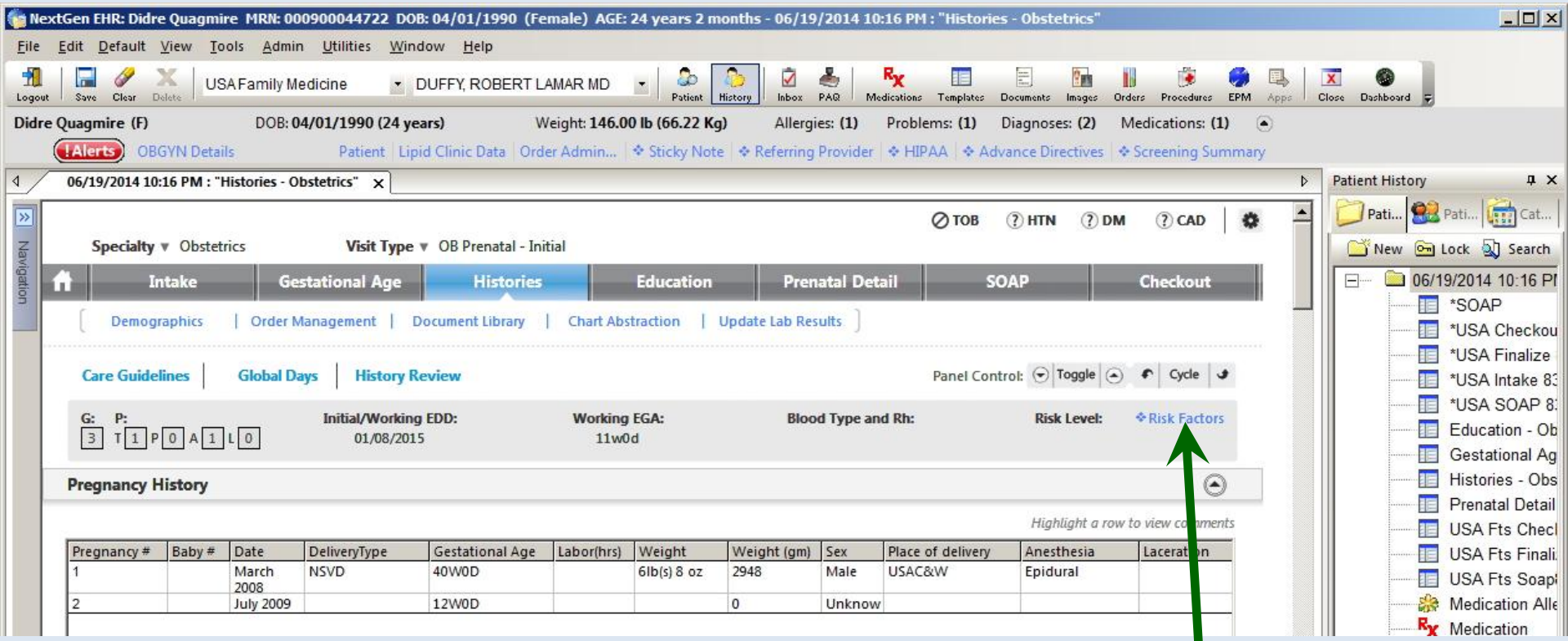

Family Health History
Specialty: Obstetrics
No family history of:
Relationship: Maternal grandmother
Family member name:
Alive and well
Deceased
Onset age:
Cause of death:
Alcoholism
Hemophilia-A
Hypertension
Mental retardation
Renal disease
Seizure disorder
Sickle cell disease
Spina bifida
Stroke
Coronary artery disease
Cystic fibrosis
Depression
Diabetes
Down syndrome
Elevated lipids
Enter this Family History:
Her maternal grandmother died from colon cancer at age 68.
(Family History is covered in detail in the Histories lesson.)
When done click Save & Close.
Save to Grid
Clear
Relationship
Family Member Name
Deceased
Age at Death
Condition
Onset Age
Cause of Death
Comments
Maternal grandmother
Cancer, colon
68
Y
Edit
Remove
Save & Close
Cancel


This addition displays in the grid.
06/19/2014 10:16 PM : "Histories - Obstetrics"
Family
No relevant family history
Adopted - no family history known
History Review
Relationship
Family Member Name
Deceased
Age at Death
Condition
Onset Age
Cause of Death
Comments
Maternal grandmother
Cancer, colon
68
Y
Add
Edit
Remove
Now move down to Social History & click the Add button.
Social
Last documented
All
History Review
Obstetrics
Substances
Tobacco
Alcohol/Caffeine
Statuses
Lifestyle
Occupation
Comment
Encounter Date
Tobacco Use
Tobacco Type
Smoking Status
Usage Per Day
Pack Years
Date Quit
Encounter Date:Time
Confidential History
Add

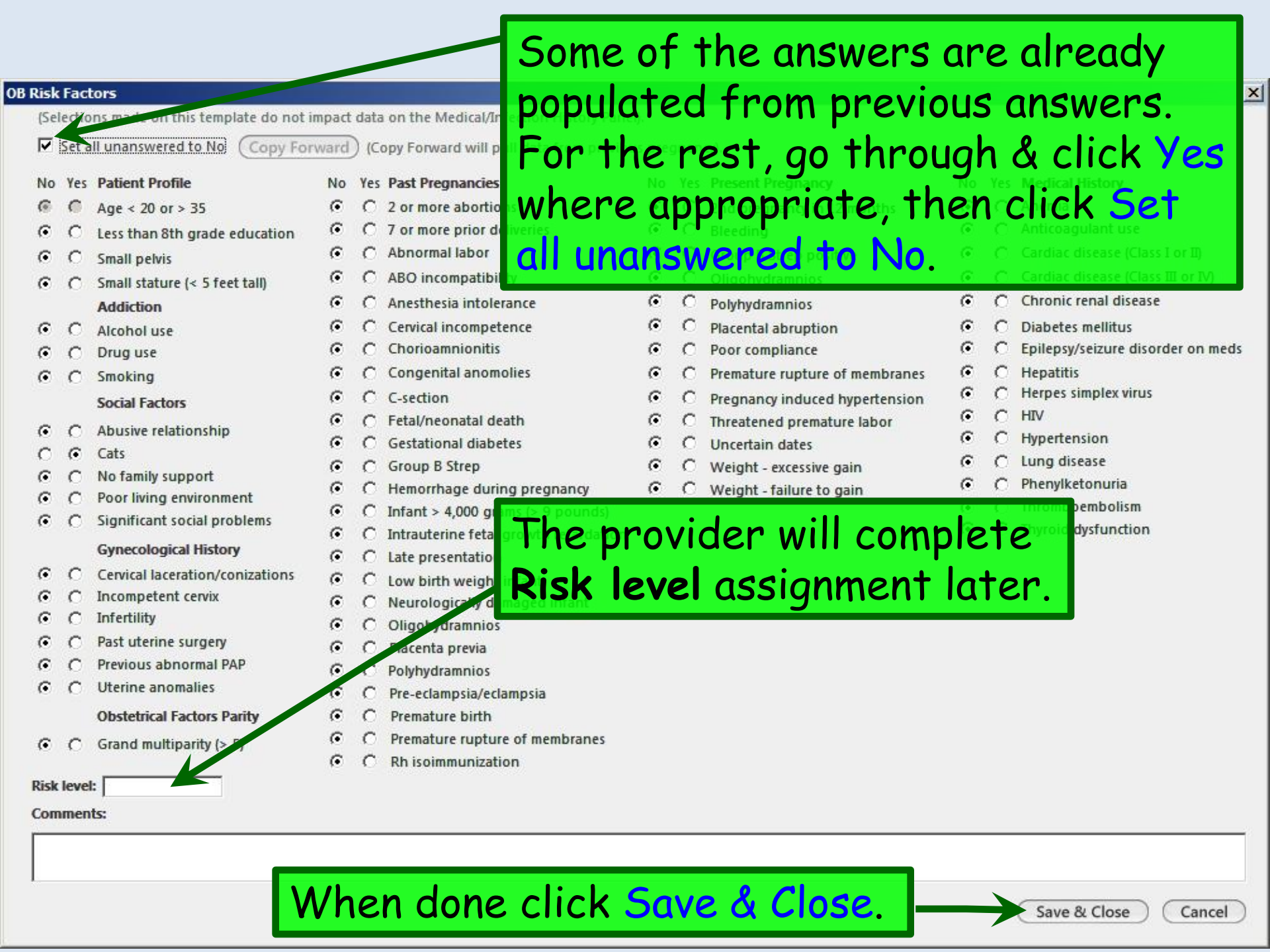

Social History- Tobacco/Alcohol/Caffeine
Social History is covered in detail in the Histories lesson.
Data used in this example:
Never smoked.
Stopped drinking when she became pregnant.
Married.
Preferred language is English.
High school education.
Occupation is Domestic Goddess.
Sedentary activity level.
House has smoke & CO detectors, but hasn't been tested for radon.
Wears seat belts.
When done click Save & Close.
Save & Close
Cancel

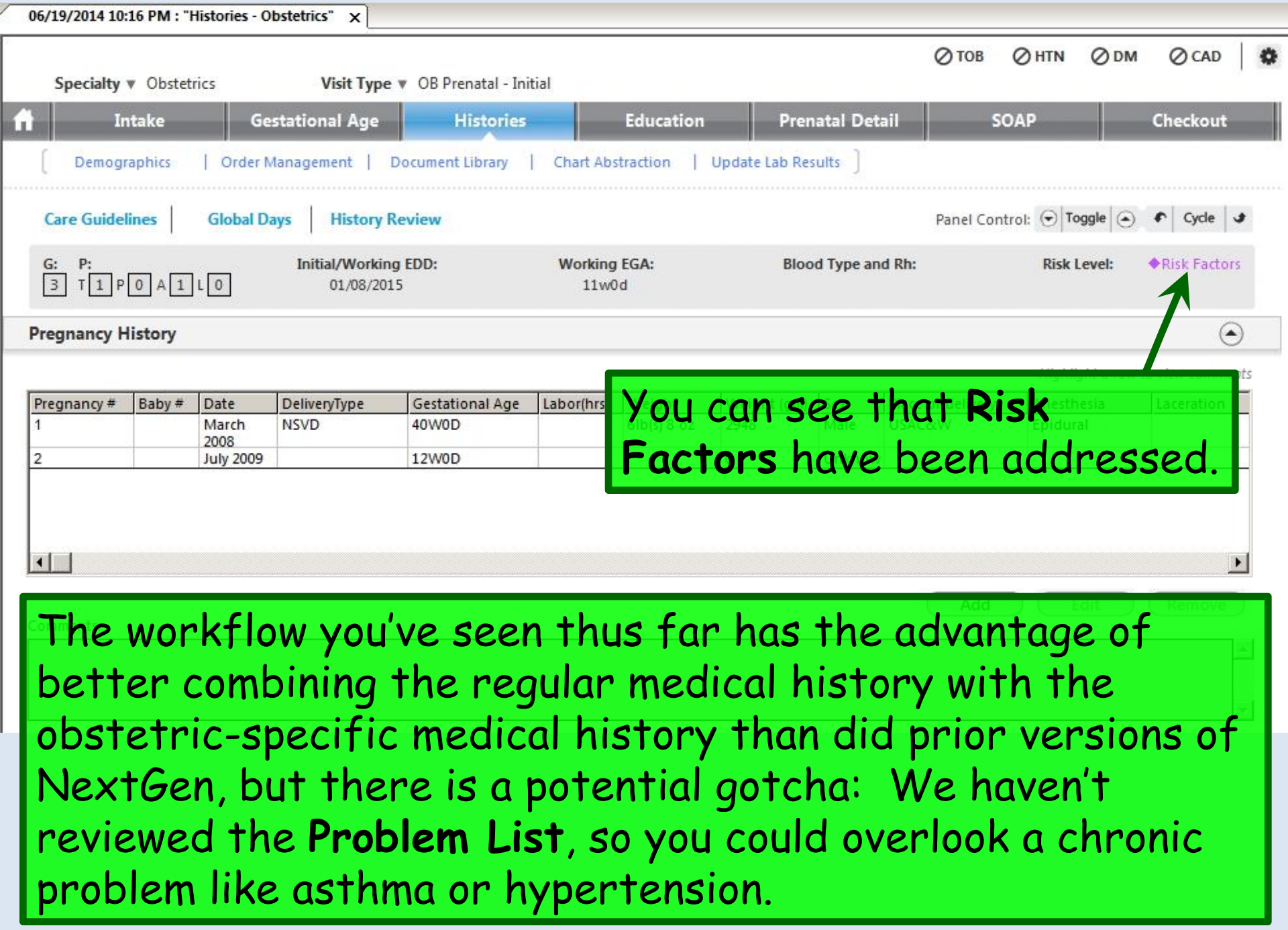

06/19/2014 10:16 PM : "Histories - Obstetrics"
Obstetrics
Substances
Tobacco
Encounter Date
Tobacco Use
Tobacco Type
Smoking Status
06/19/2014
No/Never
Never smoker
These details display in the grid.
Scrolling down further, you come to the Genetic Screening section. We'll again select Default to All No to document by exception; she has no positive answers to document.
Genetic Screening/Teratology Counseling
Default All to No
No: Yes:
Includes patient, baby's father, or anyone in either family with:
Mother (patient):
Father (baby's):
Relative (mother or father):
1. Patient's age 35 years or older as of estimated date of delivery
2. Thalassemia (Italian, Greek, Mediterranean or Asian background): MCV less than 80
3. Neural tube defect (meningomyelocele, spina bifida or anencephaly)
4. Congenital heart defect
5. Down syndrome
6. Tay-sachs (Ashkenazi Jewish, Cajun, French Canadian)
7. Canavan disease (Ashkenazi Jewish)
8. Familial dysautonomia (Ashkenazi Jewish)
9. Sickle cell disease or trait (African)
10. Hemophilia or other blood disorders
11. Muscular dystrophy
12. Cystic fibrosis
13. Huntington's chorea
14. Mental retardation/autism
15. Other inherited genetic or chromosomal disorder
16. Maternal metabolic disorder (e.g. Type 1 Diabetes, PKU)
17. Patient or baby's father had a child with birth defects not listed above
18. Recurrent pregnancy loss or a stillbirth
19. Medications (including supplements, vitamins, herbs or OTC drugs/illicit/ recreational drugs/alcohol since LMP (if yes, agent(s) and strength/dosage):
20. Any other:
Comments/Counseling:
(Technically #19 Medications could be a yes since she's taking prenatal vitamins, but this seems redundant since you've just answered that question above.)


06/19/2014 10:16 PM : "Histories - Obstetrics"
Last documented
All
History Review
Obstetrics
Substances
Tobacco
Alcohol/Caffeine
Statuses
Lifestyle
Encounter Date
Tobacco Use
Tobacco Type
Smoking Status
Usage Per Day
Pack Years
Date Quit
06/19/2014
No/Never
Never smoker
Encounter Date:Time
Confidential History
Add
You've got space to enter comments if necessary.
Genetic Screening/Teratology Counseling
Default All to No
No: Yes:
Includes patient, baby's father, or anyone in either family with:
Mother (patient):
Father (baby's):
Relative (mother or father):
1. Patient's age 35 years or older as of estimated date of delivery
2. Thalassemia (Italian, Greek, Mediterranean or Asian background): MCV less than 80
3. Neural tube defect (meningomyelocele, spina bifida or anencephaly)
4. Congenital heart defect
5. Down syndrome
6. Tay-sachs (Ashkenazi Jewish, Cajun, French Canadian)
7. Canavan disease (Ashkenazi Jewish)
8. Familial dysautonomia (Ashkenazi Jewish)
9. Sickle cell disease or trait (African)
10. Hemophilia or other blood disorders
11. Muscular dystrophy
12. Cystic fibrosis
13. Huntington's chorea
14. Mental retardation/autism
15. Other inherited genetic or chromosomal disorder
16. Maternal metabolic disorder (e.g. Type 1 Diabetes, PKU)
17. Patient or baby's father had a child with birth defects not listed above
18. Recurrent pregnancy loss or a stillbirth
19. Medications (including supplements, vitamins, herbs or OTC drugs/illicit/ recreational drugs/alcohol since LMP (if yes, agent(s) and strength/dosage):
Prenatal vitamins
20. Any other:
Comments/Counseling:
Now go back to the top of the template.

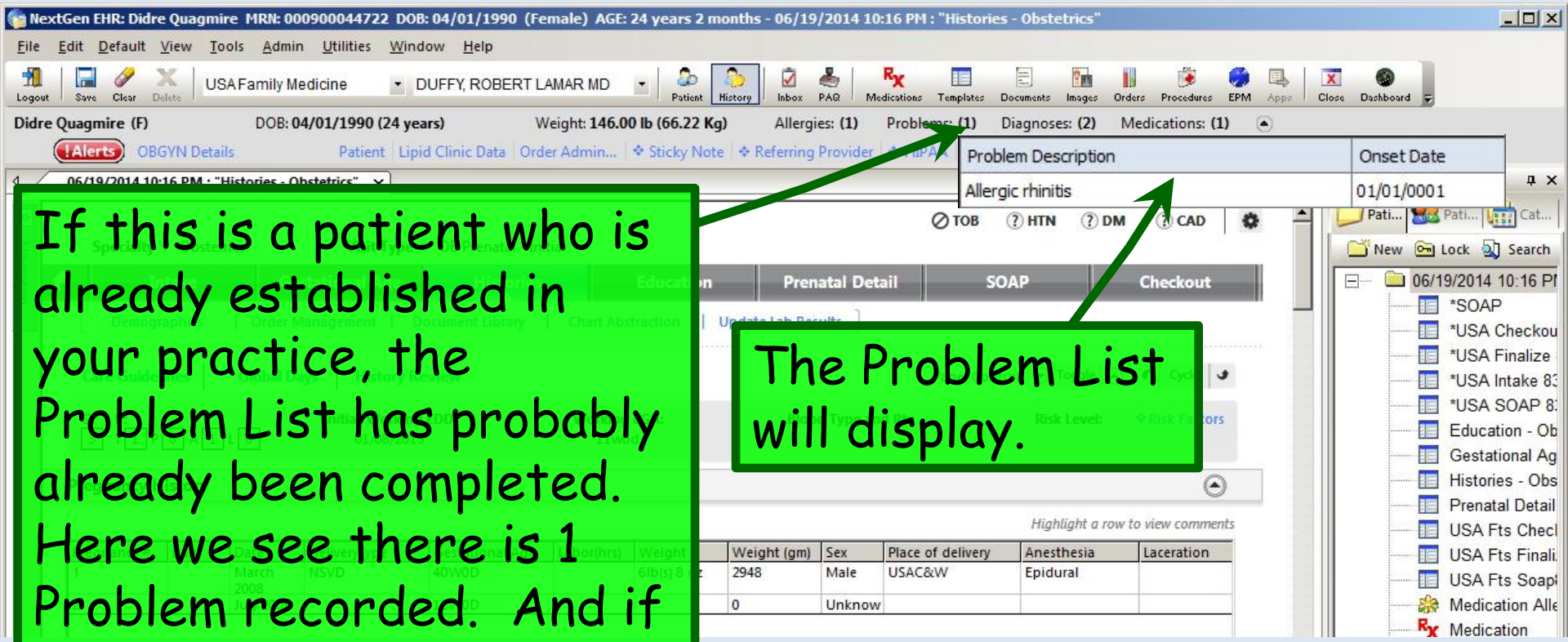


This is a good time to review **Risk Factors**, though links to this are available on other templates as well. Click Risk Factors.


Some of the answers are already populated from previous answers. For the rest, go through & click Yes where appropriate, then click Set all unanswered to No.
The provider will complete Risk level assignment later.
When done click Save & Close.
OB Risk Factors
Set all unanswered to No
Copy Forward
No Yes Patient Profile
Age < 20 or > 35
Less than 8th grade education
Small pelvis
Small stature (< 5 feet tall)
Addiction
Alcohol use
Drug use
Smoking
Social Factors
Abusive relationship
Cats
No family support
Poor living environment
Significant social problems
Gynecological History
Cervical laceration/conizations
Incompetent cervix
Infertility
Past uterine surgery
Previous abnormal PAP
Uterine anomalies
Obstetrical Factors Parity
Grand multiparity
No Yes Past Pregnancies
Abnormal labor
Anesthesia intolerance
Cervical incompetence
Chorioamnionitis
Congenital anomolies
C-section
Fetal/neonatal death
Gestational diabetes
Group B Strep
Hemorrhage during pregnancy
Low birth weigh
Oligohydramnios
Placenta previa
Polyhydramnios
Pre-eclampsia/eclampsia
Premature birth
Premature rupture of membranes
Rh isoimmunization
Polyhydramnios
Placental abruption
Poor compliance
Premature rupture of membranes
Pregnancy induced hypertension
Threatened premature labor
Uncertain dates
Weight - excessive gain
Weight - failure to gain
Anticoagulant use
Cardiac disease (Class I or II)
Cardiac disease (Class III or IV)
Chronic renal disease
Diabetes mellitus
Epilepsy/seizure disorder on meds
Hepatitis
Herpes simplex virus
HIV
Hypertension
Lung disease
Phenylketonuria
Risk level:
Comments:
Save & Close
Cancel

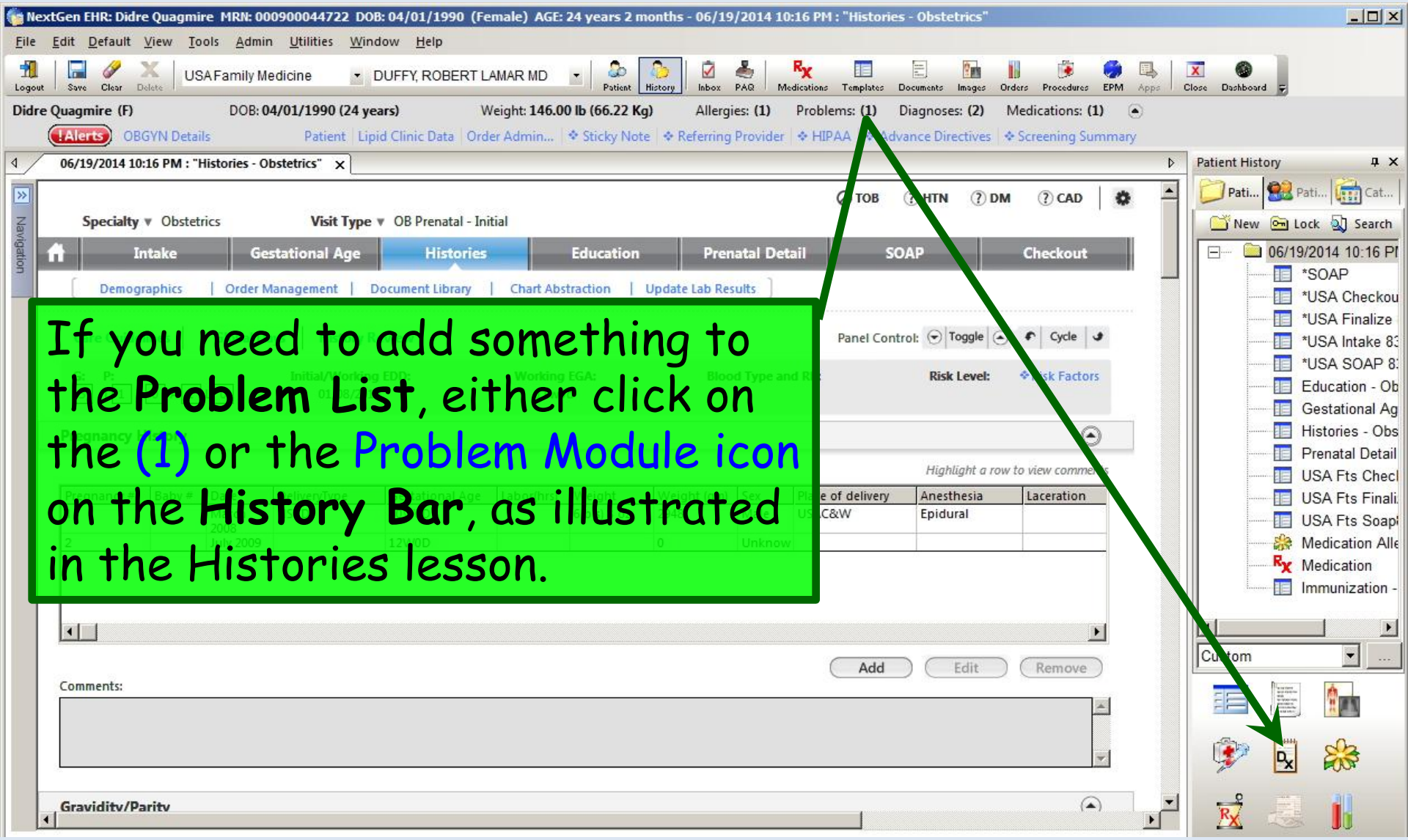


The workflow you've seen thus far has the advantage of better combining the regular medical history with the obstetric-specific medical history than did prior versions of NextGen, but there is a potential gotcha: We haven't reviewed the **Problem List**, so you could overlook a chronic problem like asthma or hypertension.

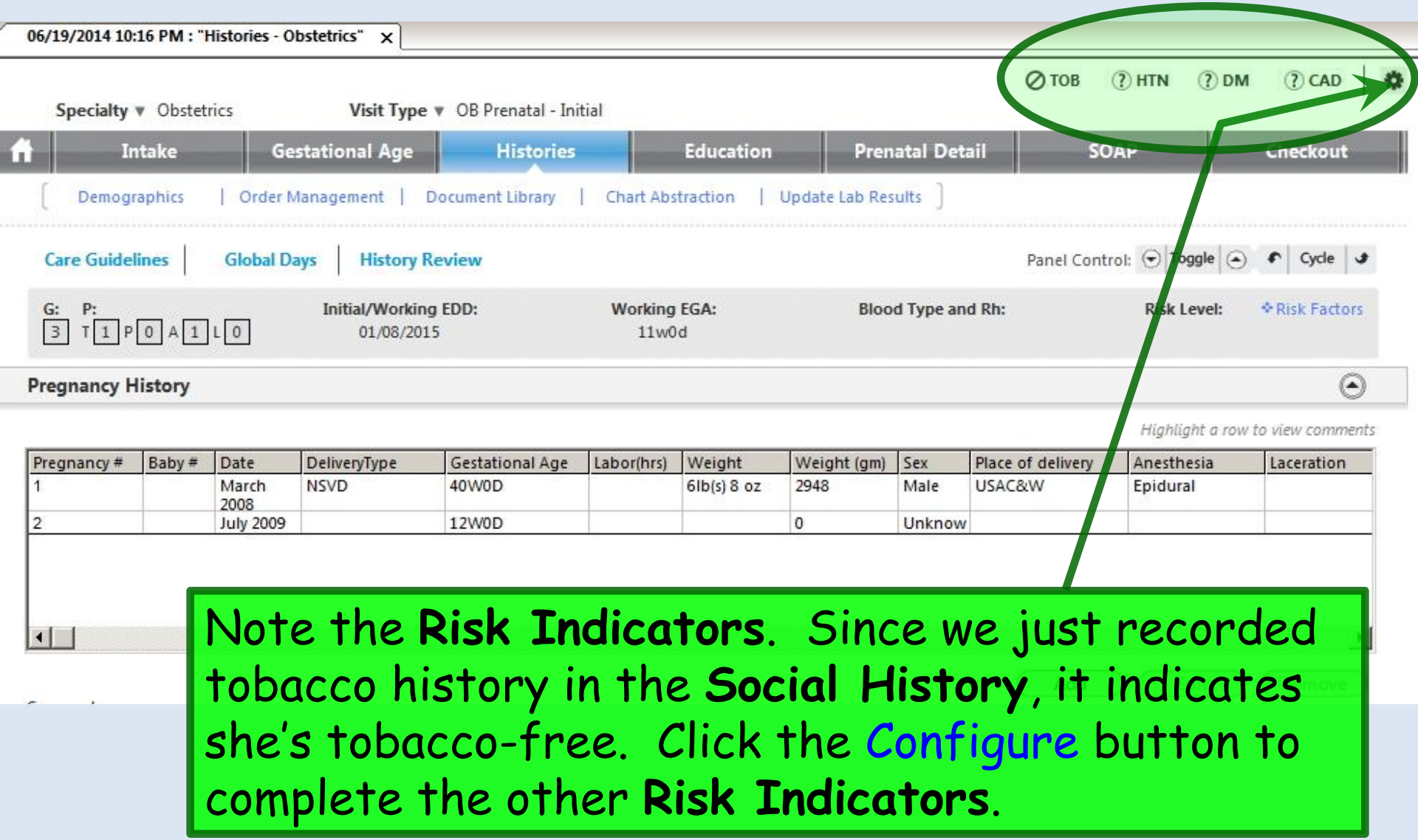


If this is a patient who is already established in your practice, the Problem List has probably already been completed. Here we see there is 1 Problem recorded. And if you hover the cursor over the (1)…

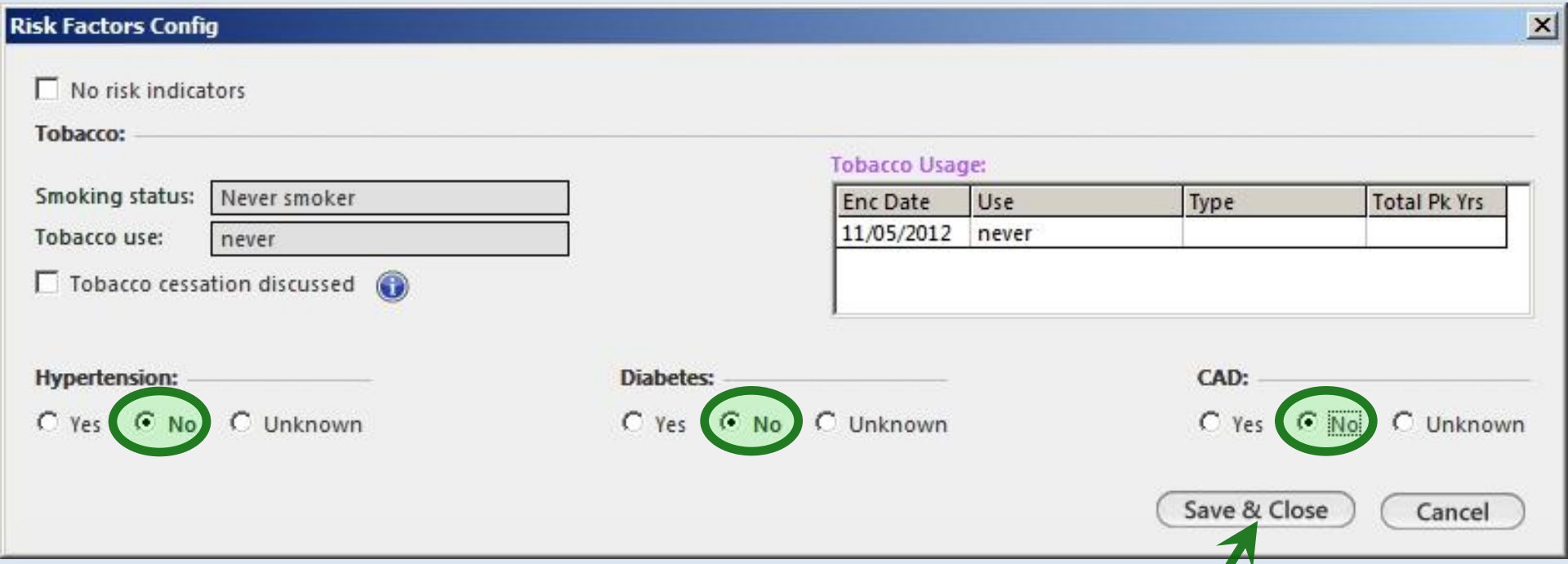
The Problem List will display.



If you need to add something to the **Problem List**, either click on the (1) or the Problem Module icon on the **History Bar**, as illustrated in the Histories lesson.

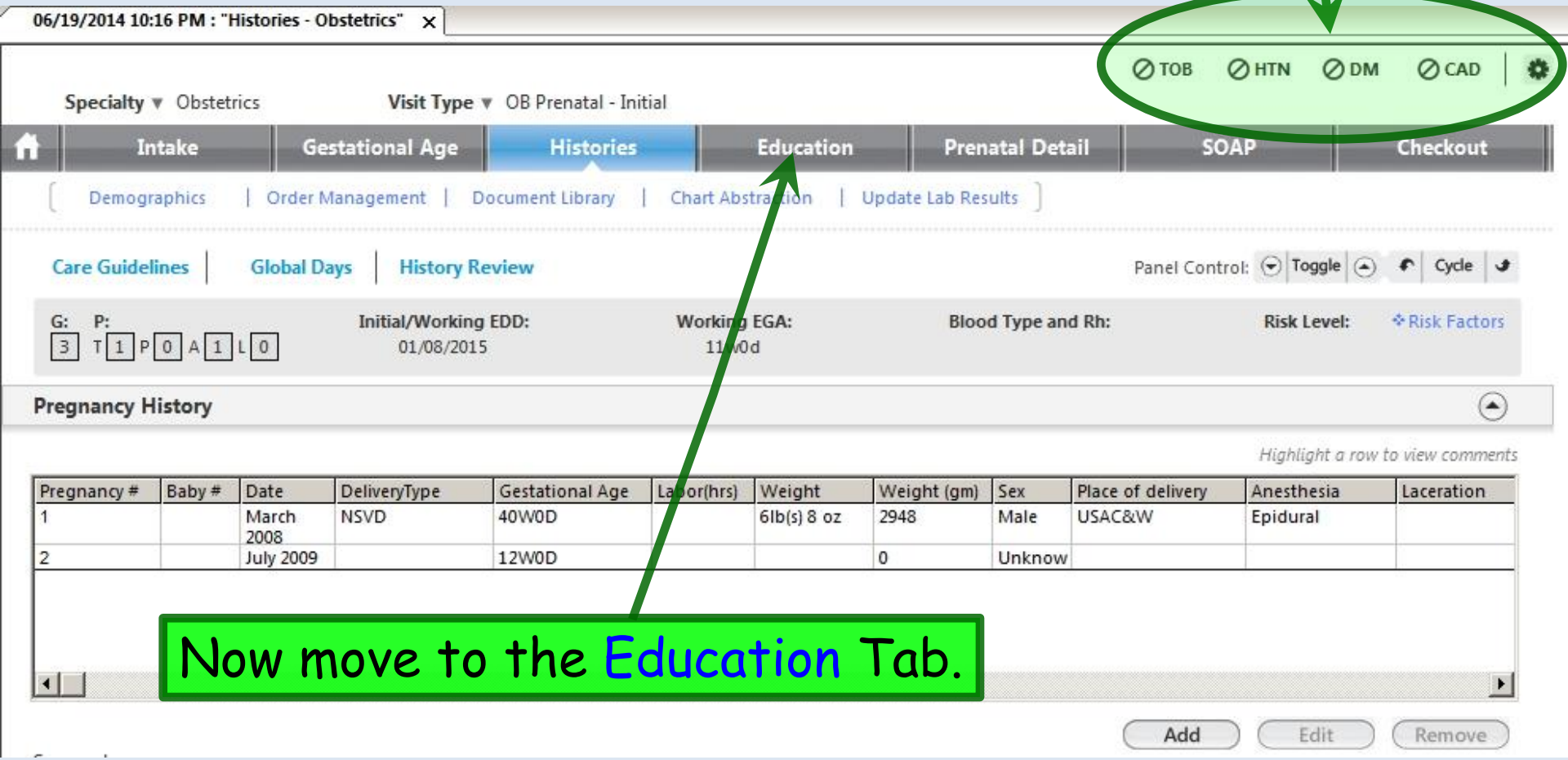


Note the **Risk Indicators**. Since we just recorded tobacco history in the **Social History**, it indicates she's tobacco-free. Click the Configure button to complete the other **Risk Indicators**.

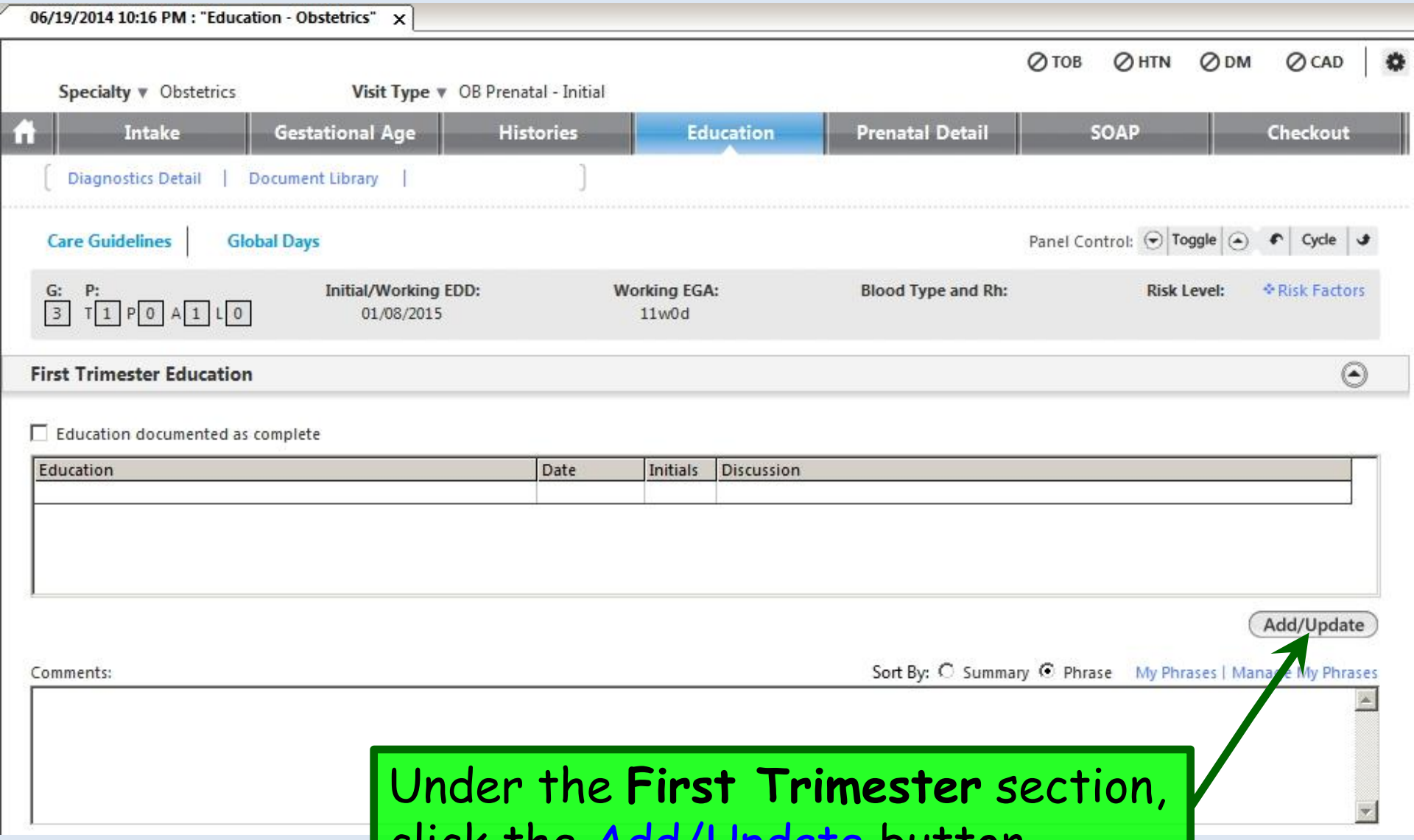


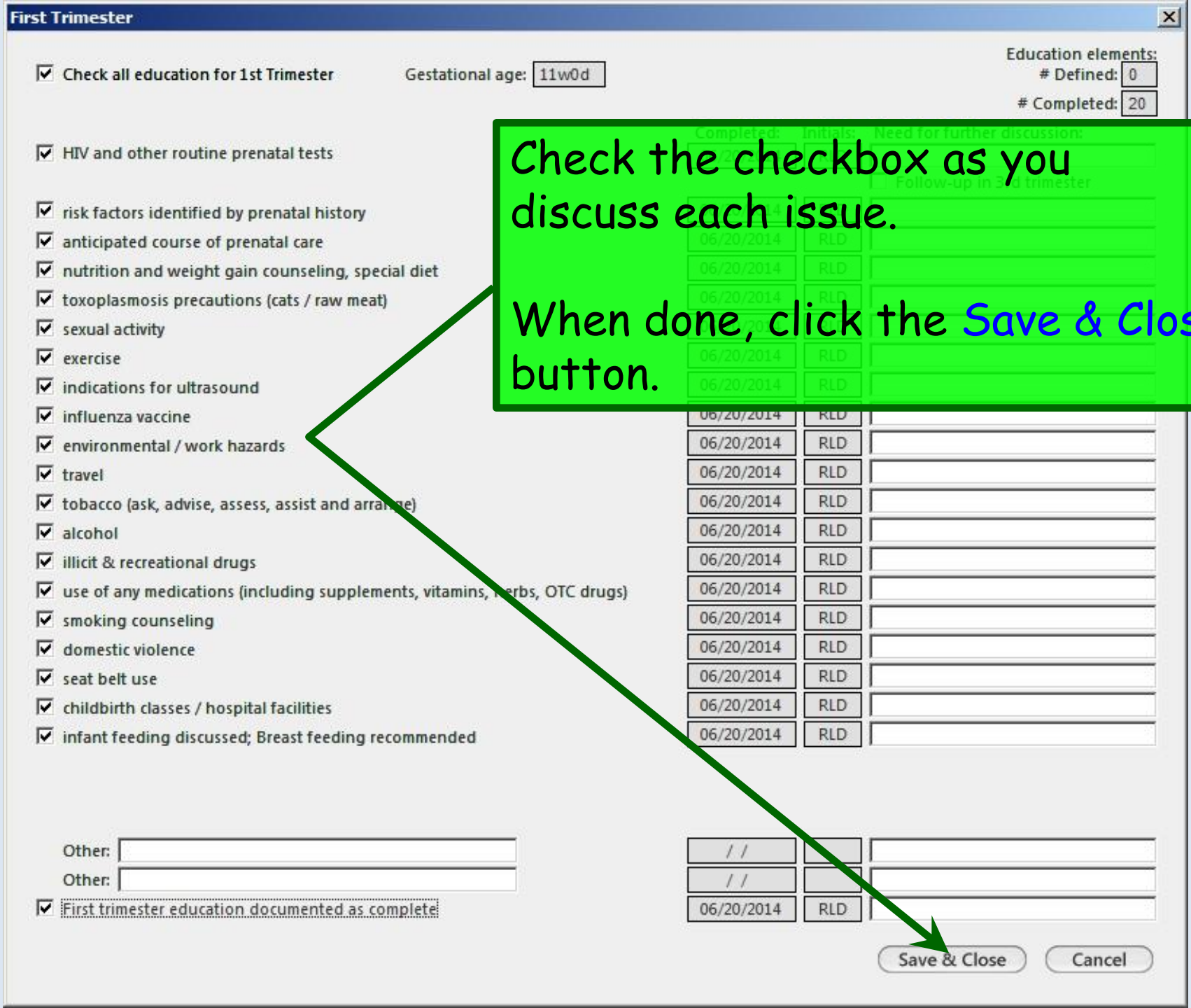
Tobacco has already been addressed.
Click the bullets for Hypertension No, Diabetes No, & Coronary Artery Disease No.
When done click Save & Close.

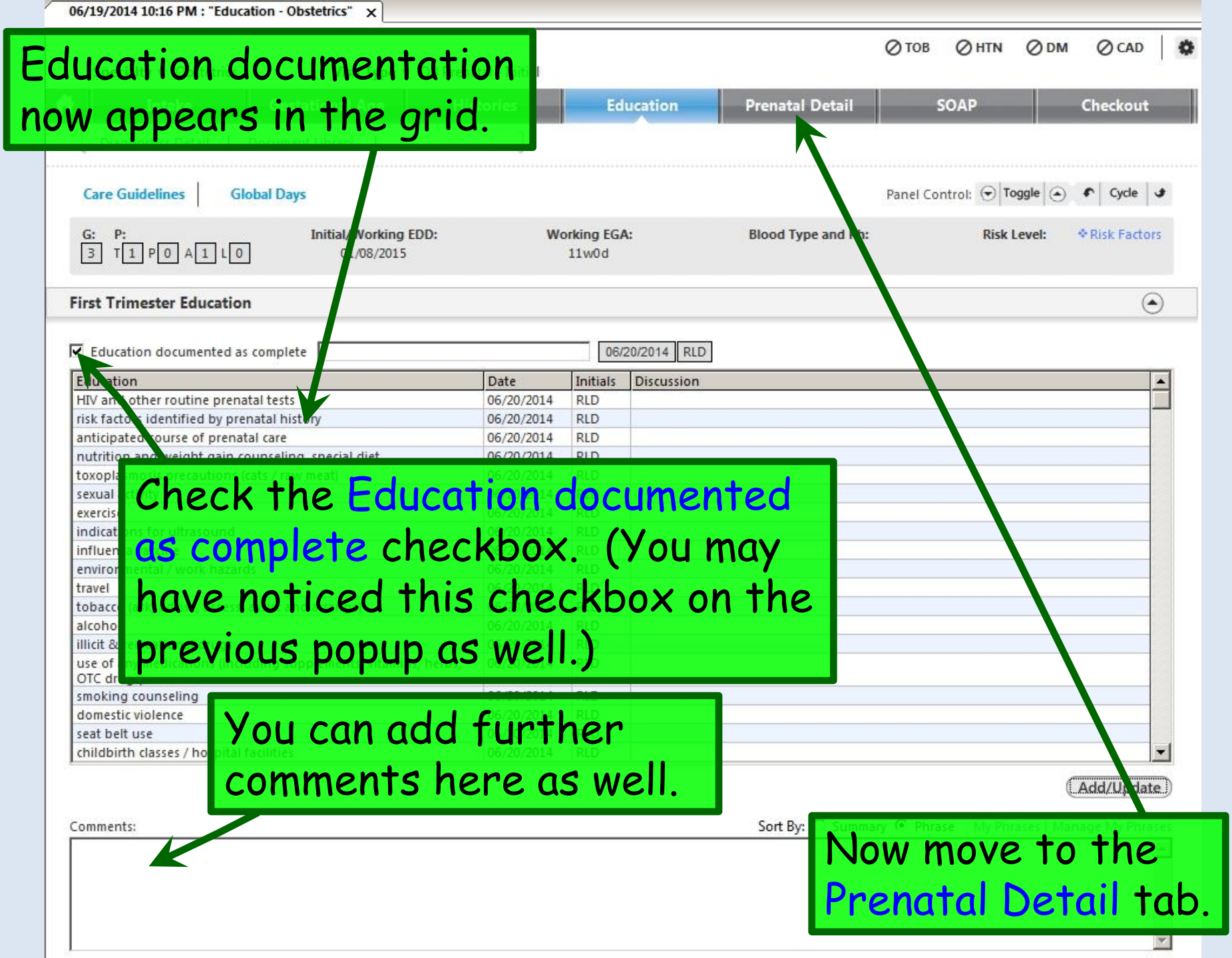
All **Risk Indicators** are now configured.

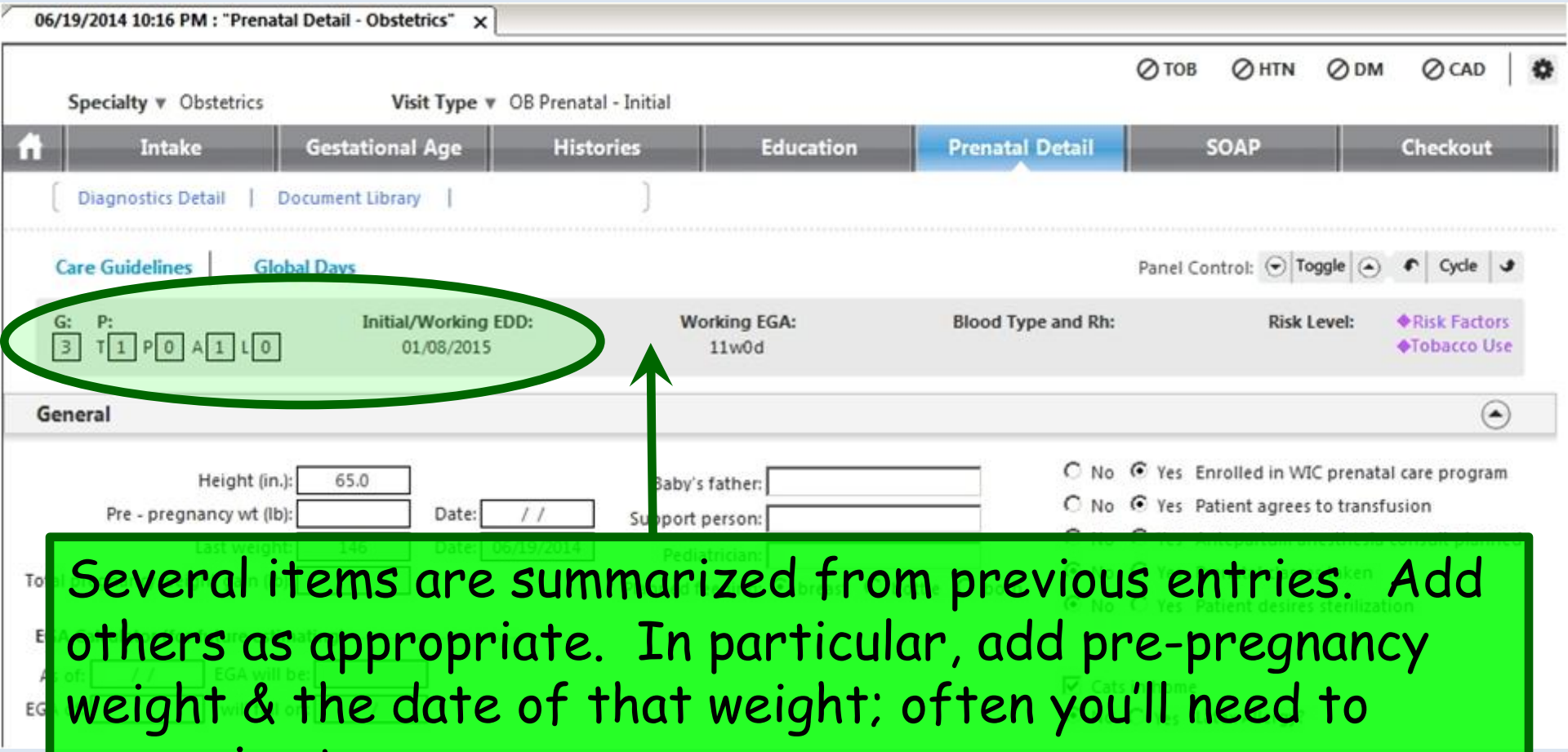


Now move to the Education Tab.


06/19/2014 10:16 PM : "Education - Obstetrics"
TOB
HTN
DM
CAD
Specialty ▼ Obstetrics
Visit Type ▼ OB Prenatal - Initial
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Diagnostics Detail | Document Library |
Care Guidelines
Global Days
Panel Control: Toggle Cycle
G: 3 P: T 1 P 0 A 1 L 0
Initial/Working EDD: 01/08/2015
Working EGA: 11w0d
Blood Type and Rh:
Risk Level:
Risk Factors
First Trimester Education
Education documented as complete
Education
Date
Initials
Discussion
Add/Update
Comments:
Sort By: Summary Phrase
My Phrases | Manage My Phrases
Under the First Trimester section, click the Add/Update button.

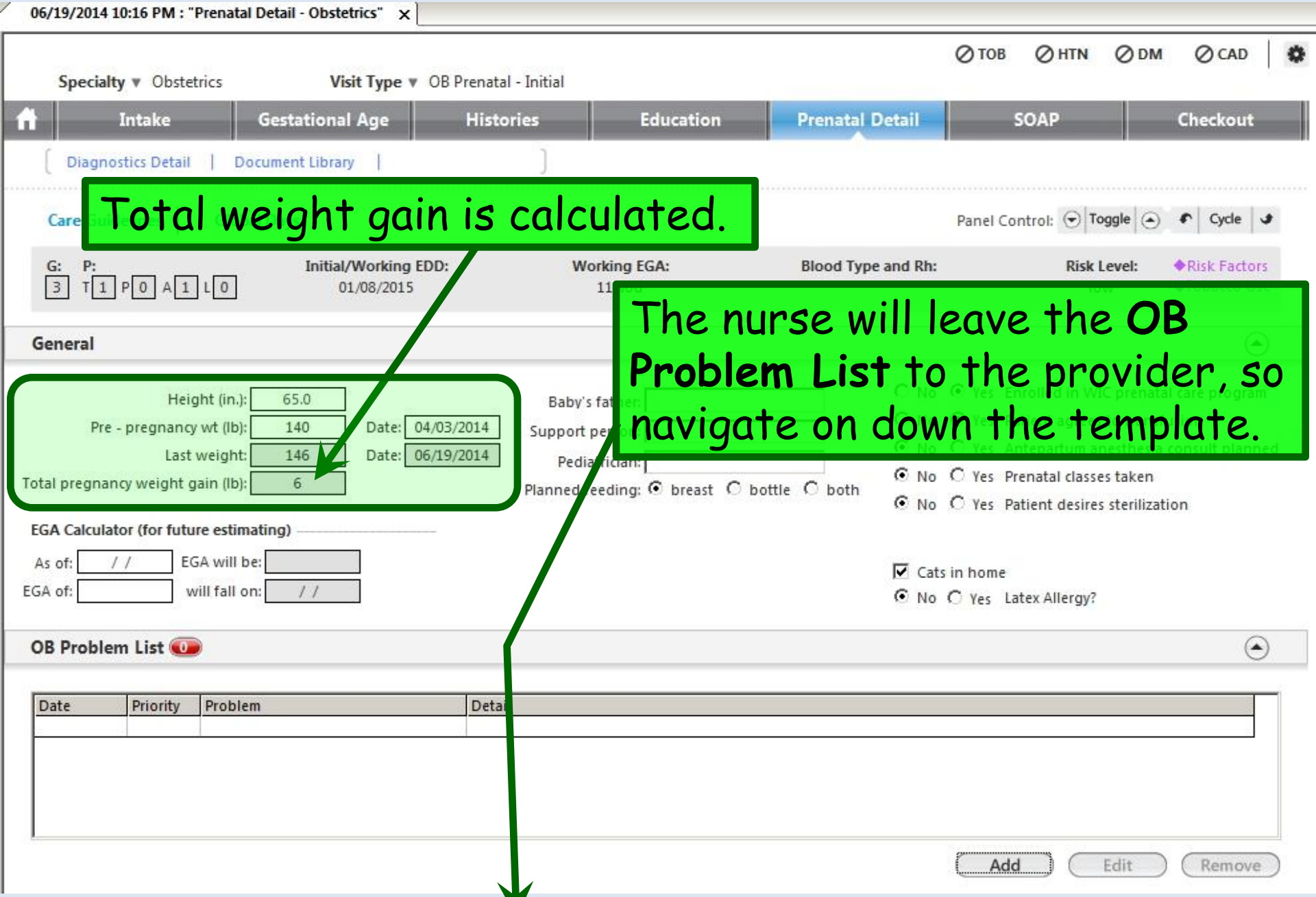

First Trimester
Check all education for 1st Trimester
Gestational age: 11w0d
Education elements:
Defined: 0
Completed: 20
Completed:
Initials:
Need for further discussion:
HIV and other routine prenatal tests
risk factors identified by prenatal history
anticipated course of prenatal care
nutrition and weight gain counseling, special diet
toxoplasmosis precautions (cats / raw meat)
sexual activity
exercise
indications for ultrasound
influenza vaccine
environmental / work hazards
travel
tobacco (ask, advise, assess, assist and arrange)
alcohol
illicit & recreational drugs
use of any medications (including supplements, vitamins, herbs, OTC drugs)
smoking counseling
domestic violence
seat belt use
childbirth classes / hospital facilities
infant feeding discussed; Breast feeding recommended
06/20/2014
RLD
Other:
Other:
First trimester education documented as complete
Save & Close
Cancel
Check the checkbox as you discuss each issue.
When done, click the Save & Close button.


Education documentation now appears in the grid.
06/19/2014 10:16 PM : "Education - Obstetrics"
TOB
HTN
DM
CAD
Education
Prenatal Detail
SOAP
Checkout
Care Guidelines
Global Days
Panel Control:
Toggle
Cycle
G: P:
3 T 1 P 0 A 1 L 0
Initial Working EDD:
Working EGA:
11w0d
Risk Level:
Risk Factors
First Trimester Education
Education documented as complete
06/20/2014
RLD
Education
Date
Initials
Discussion
HIV and other routine prenatal tests
risk factors identified by prenatal history
anticipated course of prenatal care
nutrition and weight gain counseling, special diet
toxoplasmosis precautions (cats / raw meat)
sexual
exercise
indications for ultrasound
influenza
environmental / work hazards
travel
tobacco
alcohol
illicit &
use of OTC drugs
smoking counseling
domestic violence
seat belt use
childbirth classes / hospital facilities
Add/Update
Comments:
Sort By:
Summary
Phrase
My Phrases
Manage My Phrases
Check the Education documented as complete checkbox. (You may have noticed this checkbox on the previous popup as well.)
You can add further comments here as well.
Now move to the Prenatal Detail tab.

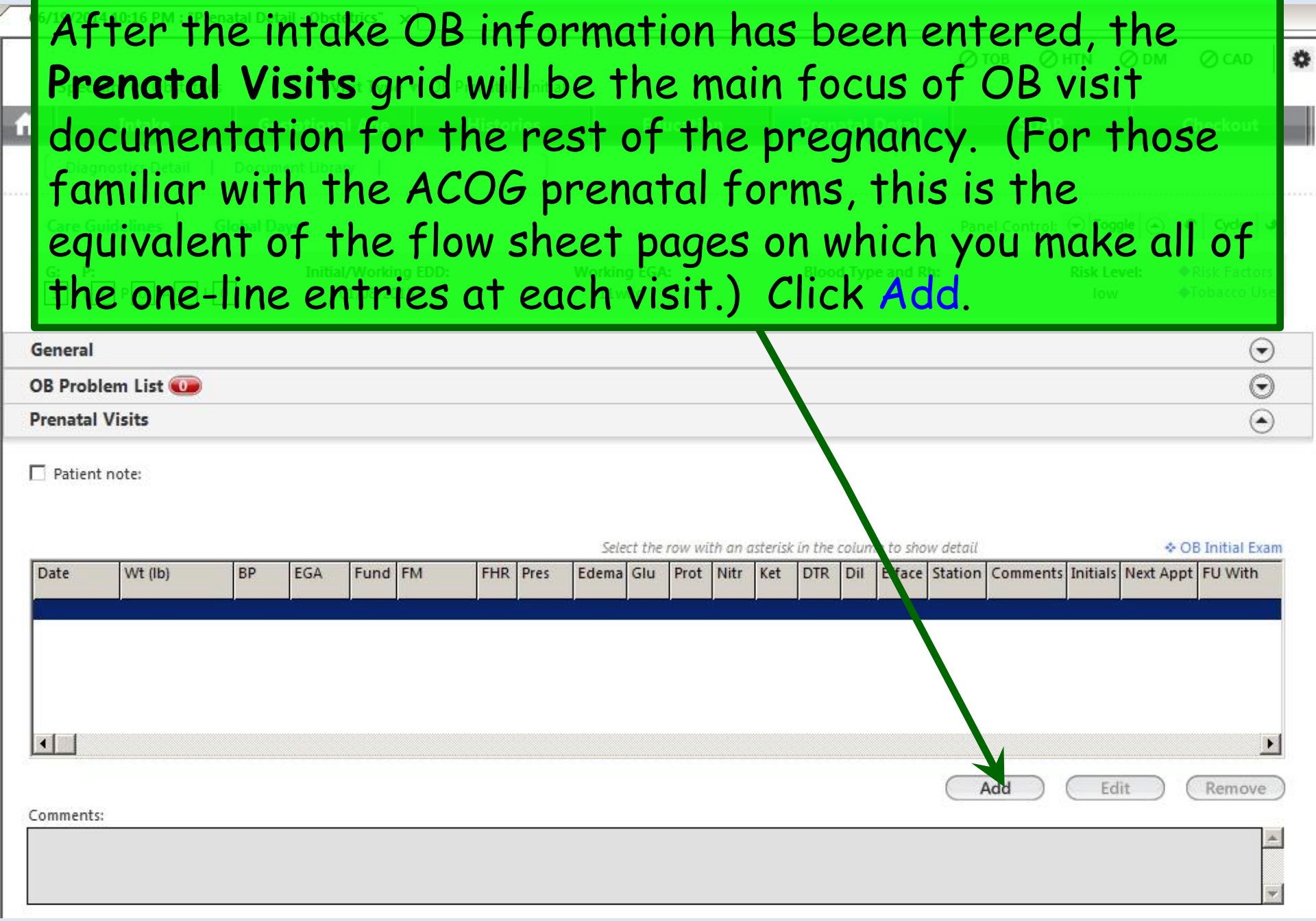


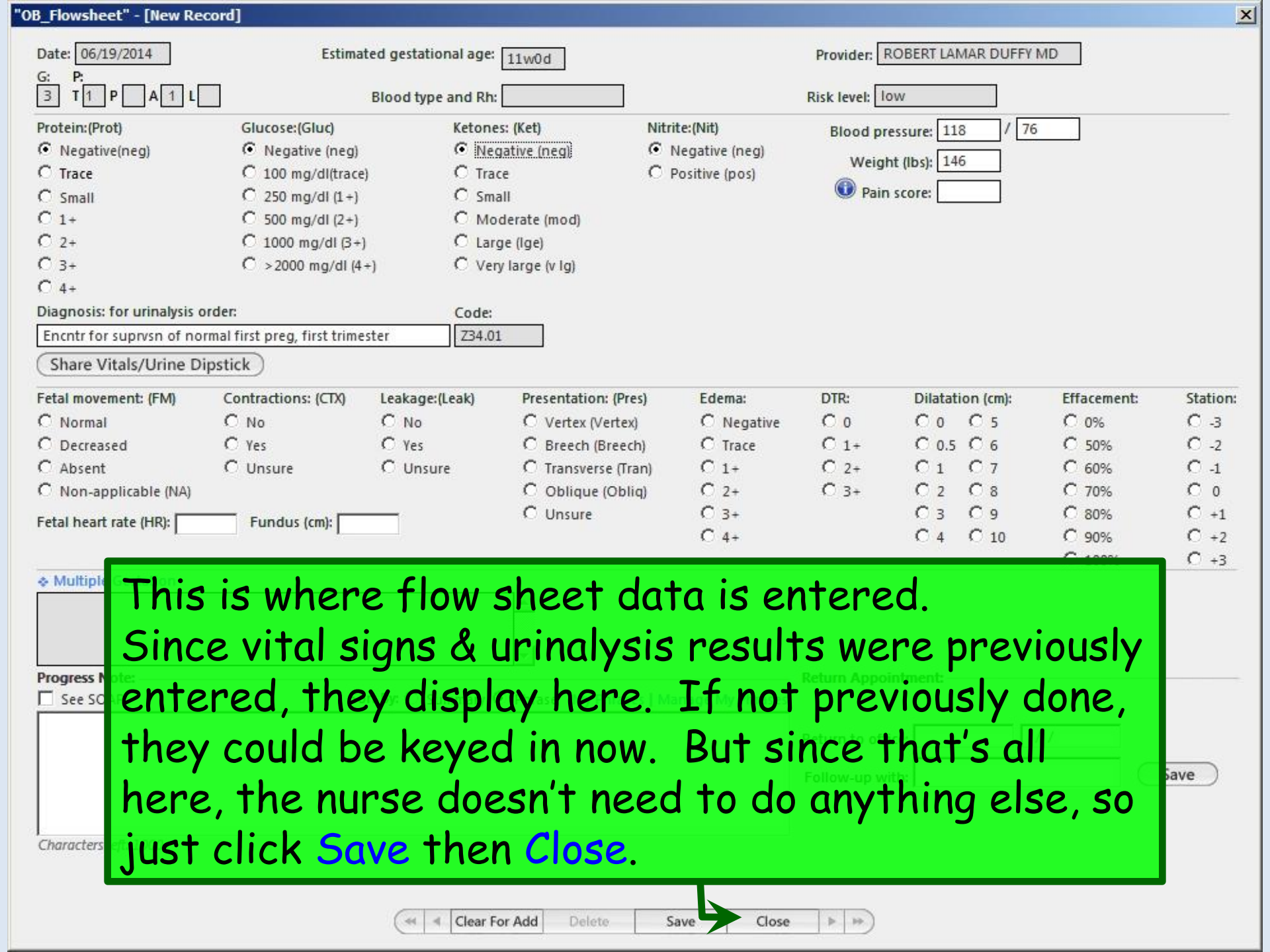
Several items are summarized from previous entries. Add others as appropriate. In particular, add pre-pregnancy weight & the date of that weight; often you'll need to approximate.

In this example, our patient weighed 140 lbs on the day of her LMP, 4/3/14.

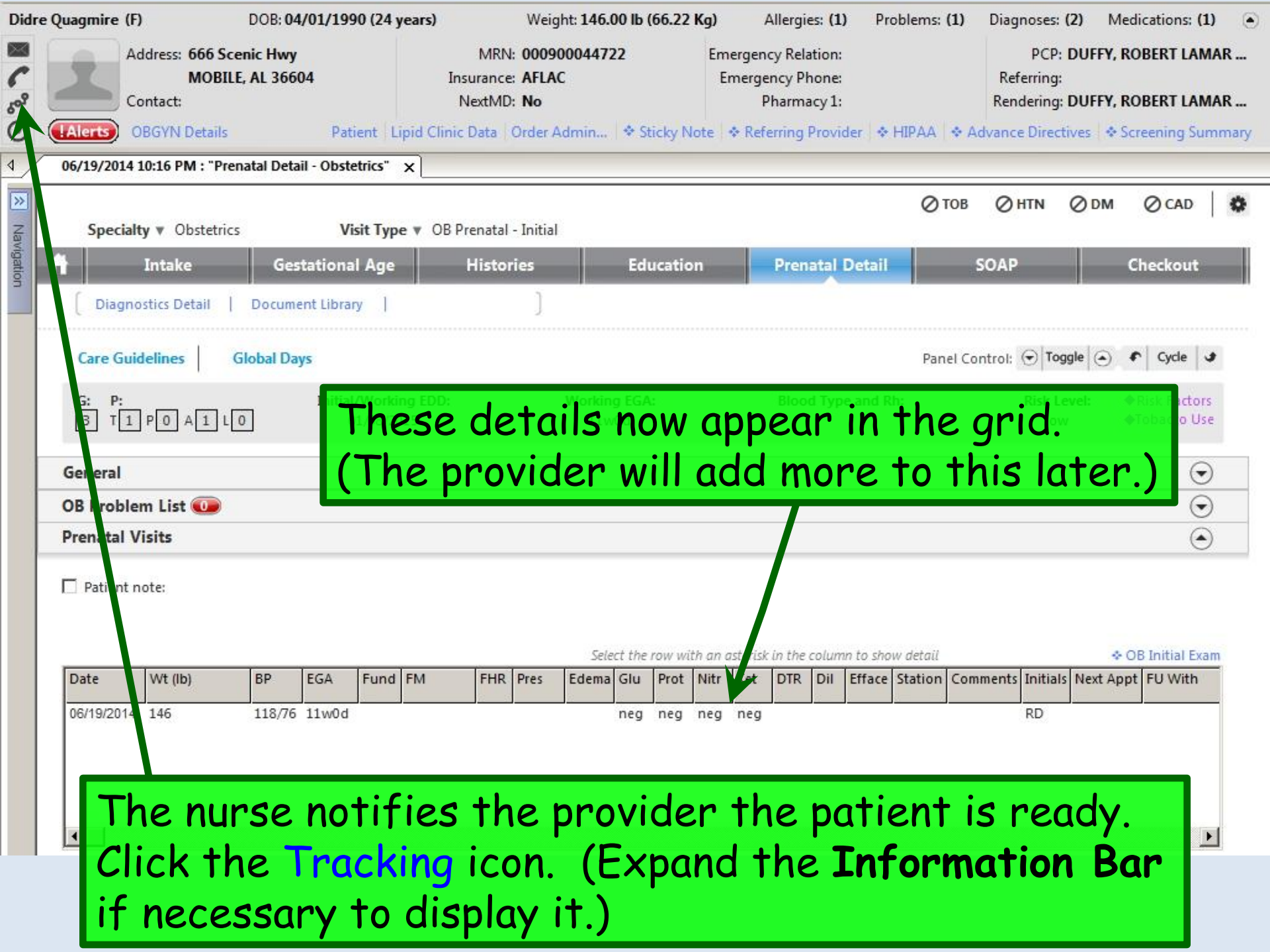

06/19/2014 10:16 PM : "Prenatal Detail - Obstetrics"
TOB
HTN
DM
CAD
Specialty ▾ Obstetrics
Visit Type ▾ OB Prenatal - Initial
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Diagnostics Detail | Document Library
Total weight gain is calculated.
Panel Control: Toggle Cycle
G: 3 P: T 1 P 0 A 1 L 0
Initial/Working EDD: 01/08/2015
Working EGA:
Blood Type and Rh:
Risk Level:
Risk Factors
General
Height (in.): 65.0
Pre - pregnancy wt (lb): 140 Date: 04/03/2014
Last weight: 146 Date: 06/19/2014
Total pregnancy weight gain (lb): 6
Baby's father:
Support person:
Pediatrician:
Planned feeding: breast bottle both
The nurse will leave the OB Problem List to the provider, so navigate on down the template.
No Yes Prenatal classes taken
No Yes Patient desires sterilization
EGA Calculator (for future estimating)
As of: / / EGA will be:
EGA of: will fall on: / /
Cats in home
No Yes Latex Allergy?
OB Problem List 0
Date
Priority
Problem
Detail
Add
Edit
Remove

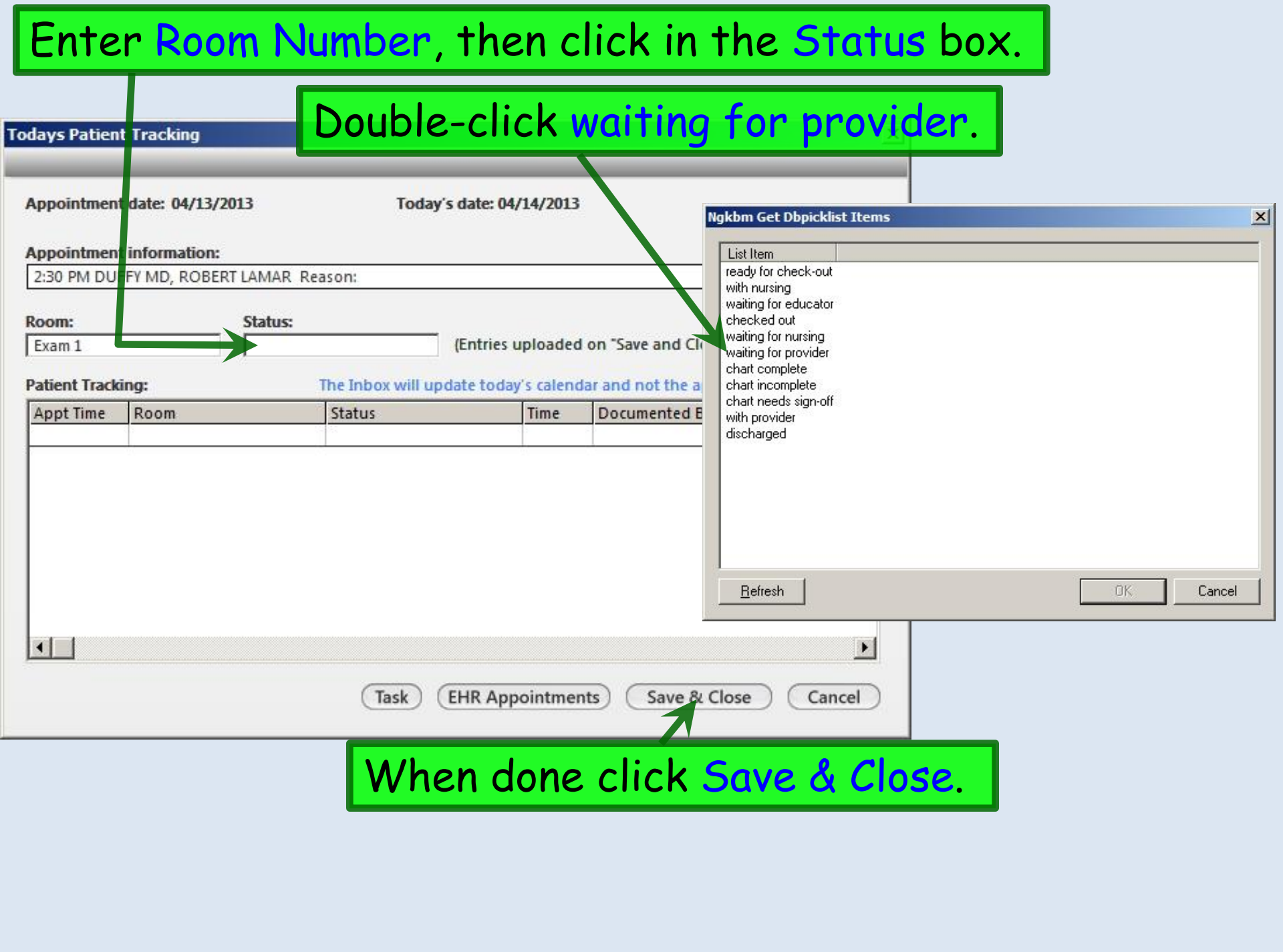
After the intake OB information has been entered, the **Prenatal Visits** grid will be the main focus of OB visit documentation for the rest of the pregnancy. (For those familiar with the ACOG prenatal forms, this is the equivalent of the flow sheet pages on which you make all of the one-line entries at each visit.) Click Add.

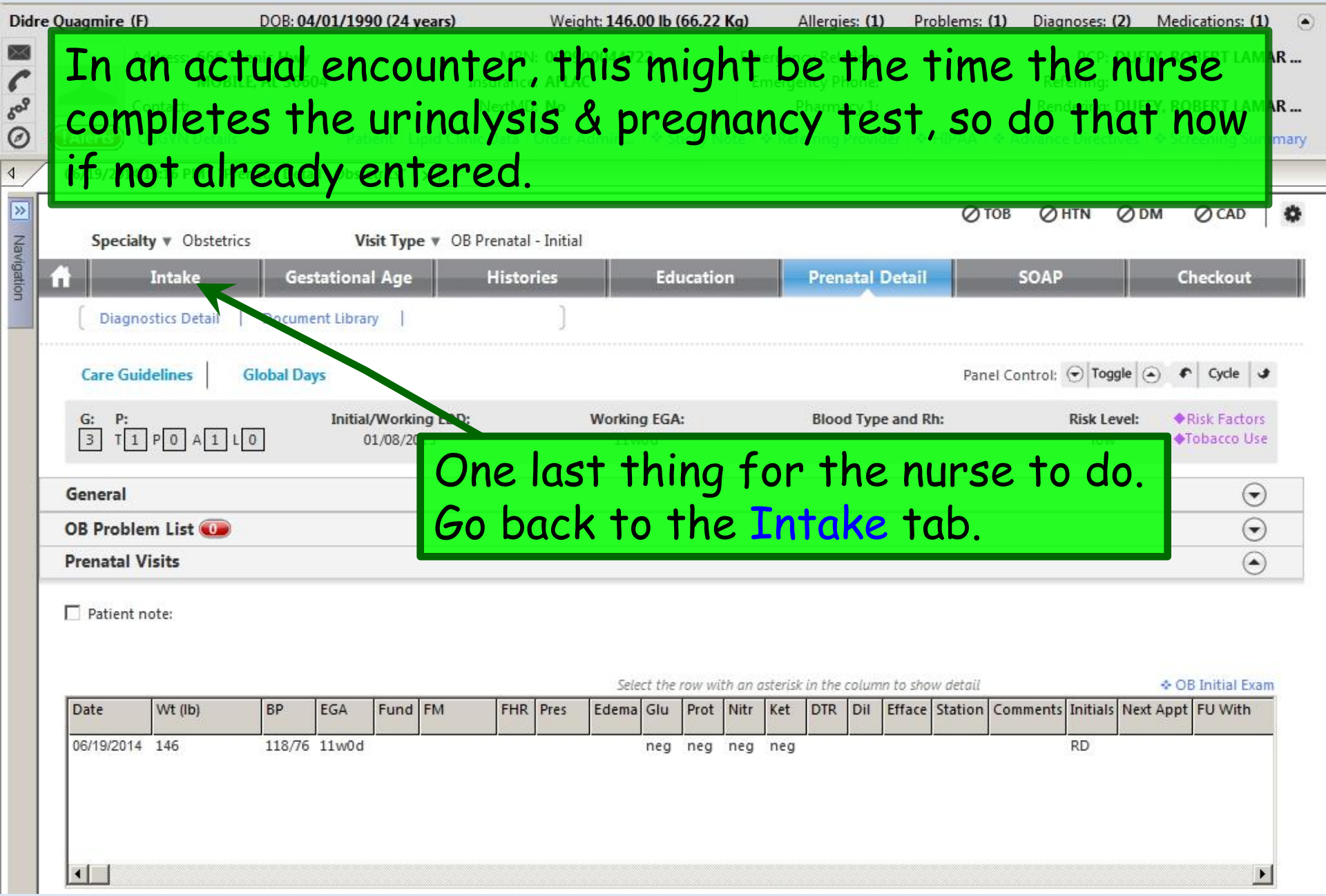




This is where flow sheet data is entered.
Since vital signs & urinalysis results were previously entered, they display here. If not previously done, they could be keyed in now. But since that's all here, the nurse doesn't need to do anything else, so just click Save then Close.


Didre Quagmire (F) DOB: 04/01/1990 (24 years) Weight: 146.00 lb (66.22 Kg) Allergies: (1) Problems: (1) Diagnoses: (2) Medications: (1)
Address: 666 Scenic Hwy
MOBILE, AL 36604
Contact:
MRN: 000900044722
Insurance: AFLAC
NextMD: No
Emergency Relation:
Emergency Phone:
Pharmacy 1:
PCP: DUFFY, ROBERT LAMAR ...
Referring:
Rendering: DUFFY, ROBERT LAMAR ...
!Alerts
OBGYN Details
Patient
Lipid Clinic Data
Order Admin...
Sticky Note
Referring Provider
HIPAA
Advance Directives
Screening Summary
06/19/2014 10:16 PM : "Prenatal Detail - Obstetrics"
TOB
HTN
DM
CAD
Specialty ▼ Obstetrics
Visit Type ▼ OB Prenatal - Initial
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Diagnostics Detail
Document Library
Care Guidelines
Global Days
Panel Control:
Toggle
Cycle
G: P:
3 T 1 P 0 A 1 L 0
General
OB Problem List
Prenatal Visits
Patient note:
Select the row with an asterisk in the column to show detail
OB Initial Exam
Date
Wt (lb)
BP
EGA
Fund
FM
FHR
Pres
Edema
Glu
Prot
Nitr
DTR
Dil
Efface
Station
Comments
Initials
Next Appt
FU With
06/19/2014
146
118/76
11w0d
neg
neg
neg
neg
RD
These details now appear in the grid.
(The provider will add more to this later.)
The nurse notifies the provider the patient is ready.
Click the Tracking icon. (Expand the Information Bar
if necessary to display it.)


Enter Room Number, then click in the Status box.
Double-click waiting for provider.
Todays Patient Tracking
Appointment date: 04/13/2013
Today's date: 04/14/2013
Appointment information:
2:30 PM DU FY MD, ROBERT LAMAR Reason:
Room:
Exam 1
Status:
(Entries uploaded on "Save and Cl
Patient Tracking:
The Inbox will update today's calendar and not the a
Appt Time
Room
Status
Time
Documented B
Task
EHR Appointments
Save & Close
Cancel
Ngkbm Get Dbpicklist Items
List Item
ready for check-out
with nursing
waiting for educator
checked out
waiting for nursing
waiting for provider
chart complete
chart incomplete
chart needs sign-off
with provider
discharged
Refresh
OK
Cancel
When done click Save & Close.


Didre Quagmire (F) DOB: 04/01/1990 (24 years) Weight: 146.00 lb (66.22 Kg) Allergies: (1) Problems: (1) Diagnoses: (2) Medications: (1)
In an actual encounter, this might be the time the nurse completes the urinalysis & pregnancy test, so do that now if not already entered.
TOB HTN DM CAD
Specialty ▾ Obstetrics Visit Type ▾ OB Prenatal - Initial
Intake Gestational Age Histories Education Prenatal Detail SOAP Checkout
Diagnostics Detail | Document Library |
Care Guidelines | Global Days
Panel Control: Toggle Cycle
G: 3 P: T 1 P 0 A 1 L 0
Initial/Working EDD: 01/08/20
Working EGA:
Blood Type and Rh:
Risk Level:
Risk Factors
Tobacco Use
One last thing for the nurse to do. Go back to the Intake tab.
General
OB Problem List 0
Prenatal Visits
Patient note:
Select the row with an asterisk in the column to show detail
OB Initial Exam
Date Wt (lb) BP EGA Fund FM FHR Pres Edema Glu Prot Nitr Ket DTR Dil Efface Station Comments Initials Next Appt FU With
06/19/2014 146 118/76 11w0d neg neg neg neg RD

06/19/2014 10:16 PM : "*USA Intake 836"

Add | Update

Orders

Lab/Radiology Order Processing | Order Management | Immunizations | Standing Orders | Task

- View of All Orders
- Labs
- Diagnostics
- Office Services (2)
- View Immunizations Due
- Procedures
- Referrals

Status	Ordered	Order	Timeframe	Comments
completed	06/20/2014	alcohol		
completed	06/20/2014	anticipated course of prenatal care		
completed	06/20/2014	childbirth classes / hospital facilities		
completed	06/20/2014	domestic violence		
completed	06/20/2014	environmental / work hazards		
completed	06/20/2014	exercise		
completed	06/20/2014	HIV and other routine prenatal tests		
completed	06/20/2014	illicit & recreational drugs		
completed	06/20/2014	indications for ultrasound		

Add | Edit

Review of Systems

ROS Defaults:

- Constitutional
- HEENT
- Respiratory
- Cardiovascular
- Vascular
- Gastrointestinal
- Genitourinary
- Reproductive
- Metabolic | Endocrine
- Neuro | Psychiatric
- Dermatologic
- Musculoskeletal
- Hematologic
- Immunologic

General ROS - Female

System	Neg/Pos	Findings

Navigate to the bottom & click Generate Intake Note.

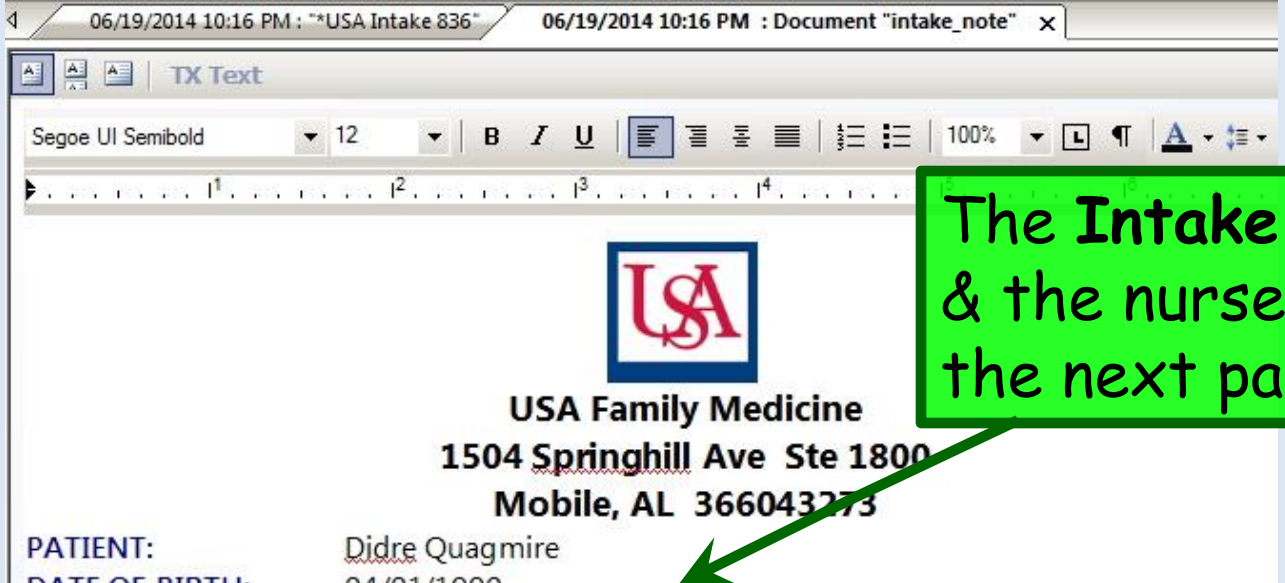
PHQ

Generate Intake Note

06/19/2014 10:16 PM : "*USA Intake 836" | 06/19/2014 10:16 PM : Document "intake_note"

TX Text

Segoe UI Semibold | 12 | B I U | 100%



The **Intake Note** is created, & the nurse can move on to the next patient.

USA Family Medicine
1504 Springhill Ave Ste 1800
Mobile, AL 366043273

PATIENT: Didre Quagmire
DATE OF BIRTH: 04/01/1990
DATE: 06/19/2014 10:16 PM
HISTORIAN: self
VISIT TYPE: OB Prenatal - Initial
TODAY'S PROVIDER: ROBERT L. DUFFY MD

Reasons For Visit

This 24 year old female presents for routine prenatal.

NURSING COMMENTS
Intake Comments: Here for intake prenatal visit. No complaints.

1. routine prenatal

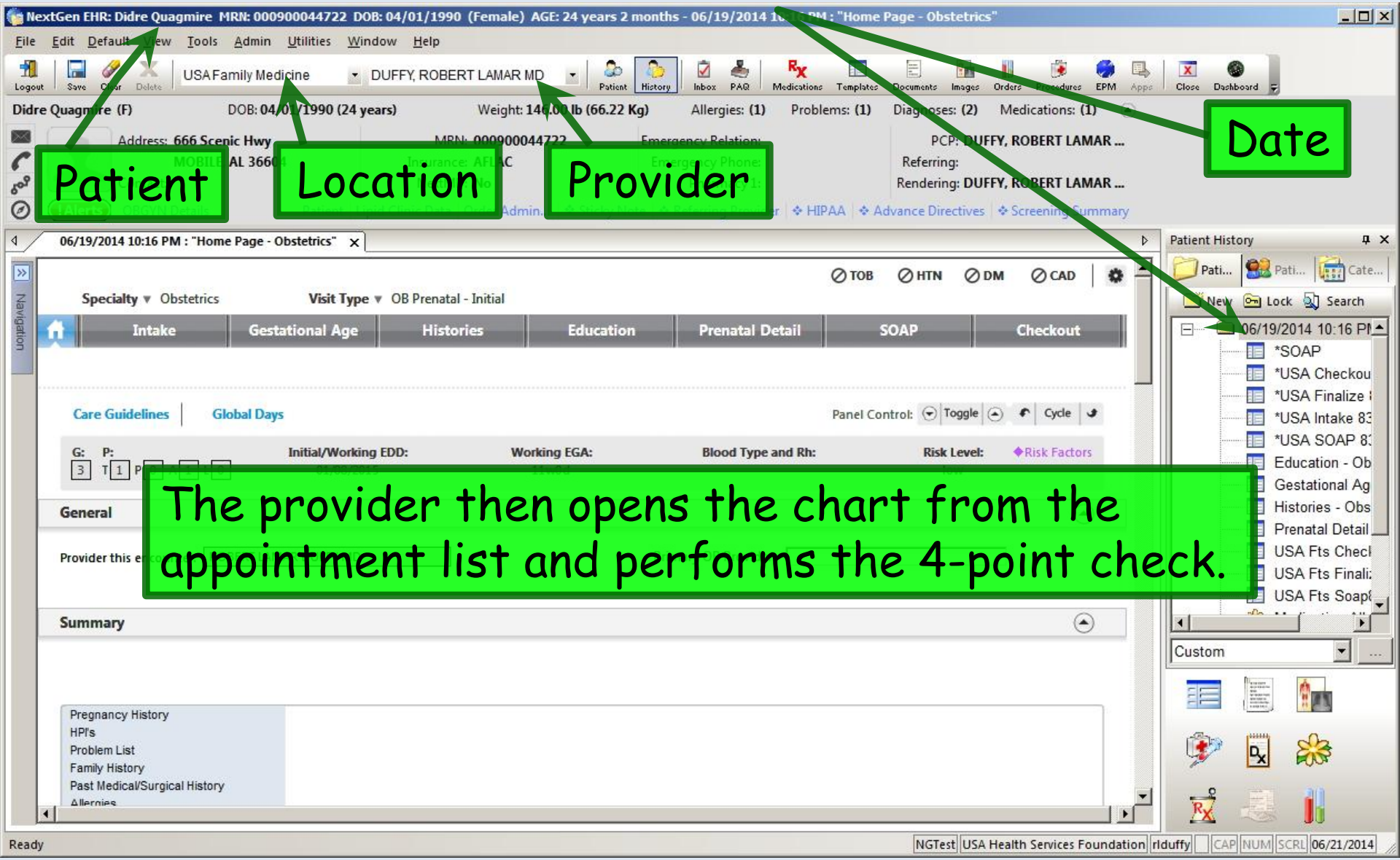
Medication List (after nurse review/reconciliation)

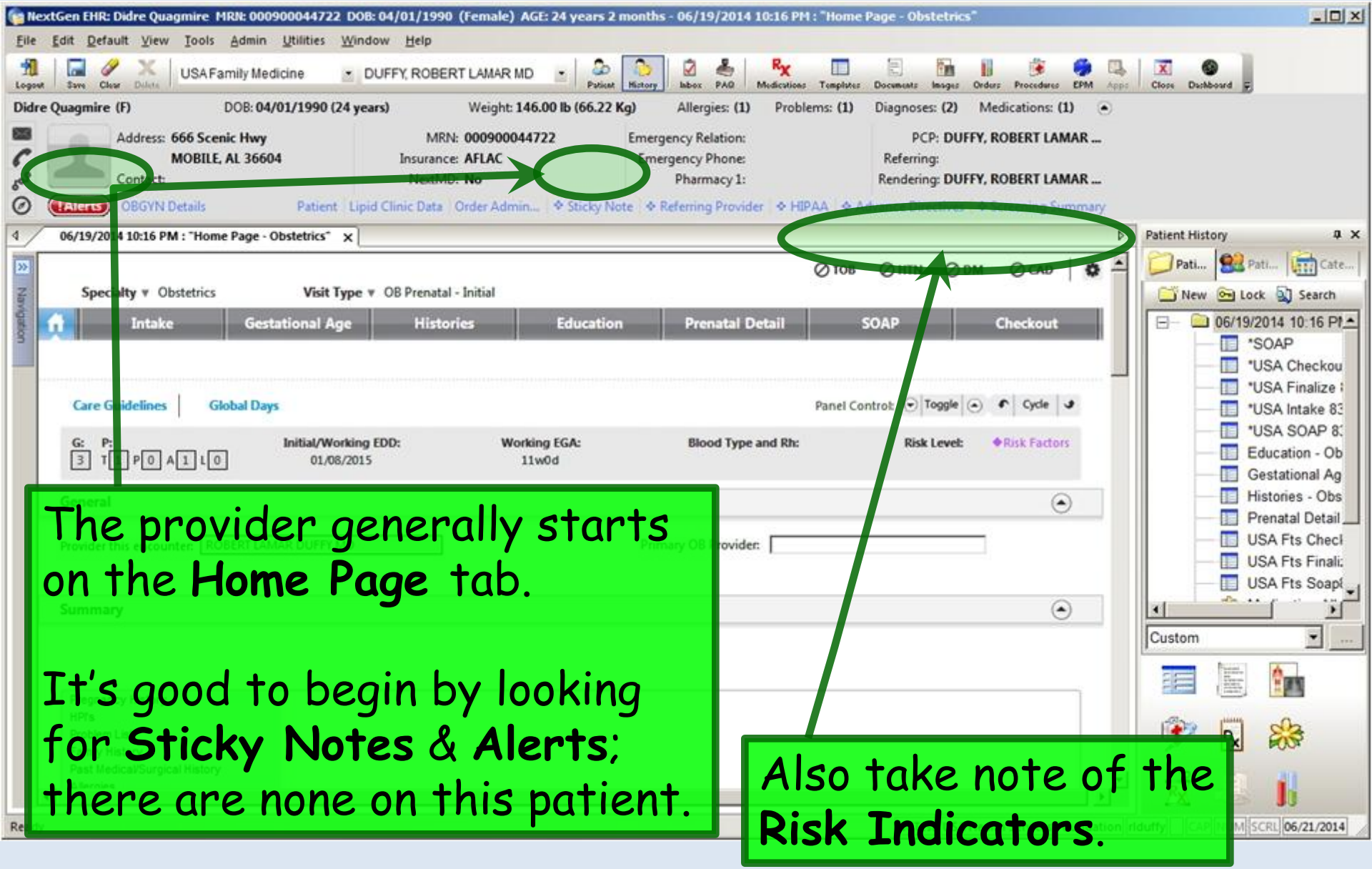
Medication	Directions
Prenatal Vitamin tablet	take 1 tablet by oral route every day

MEDICATION REVIEW, RECONCILIATION, AND COMMENTS
Medications reconciled today.

Vital Signs Summary

Time	BP	Pulse	Resp	TempF	TempC	Wt lb	Ht in	BMI	Wt kg	Ht cm	Ht%	Wt%	O-sat
11:01 PM	118/76	74	16	98.8	37.1	146.00	65.00	24.30	66.224	165.10			

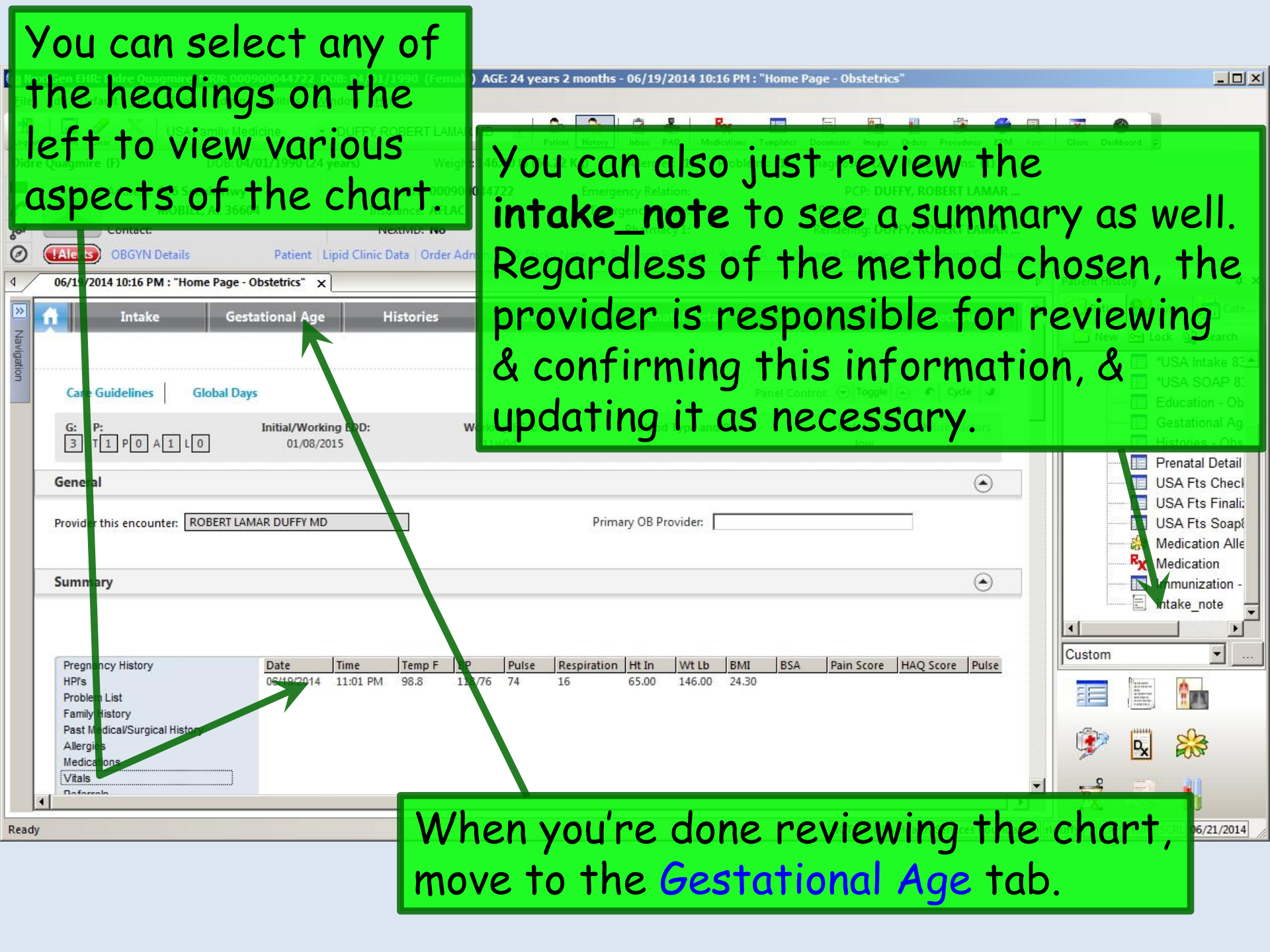

Patient
Location
Provider
Date
The provider then opens the chart from the appointment list and performs the 4-point check.



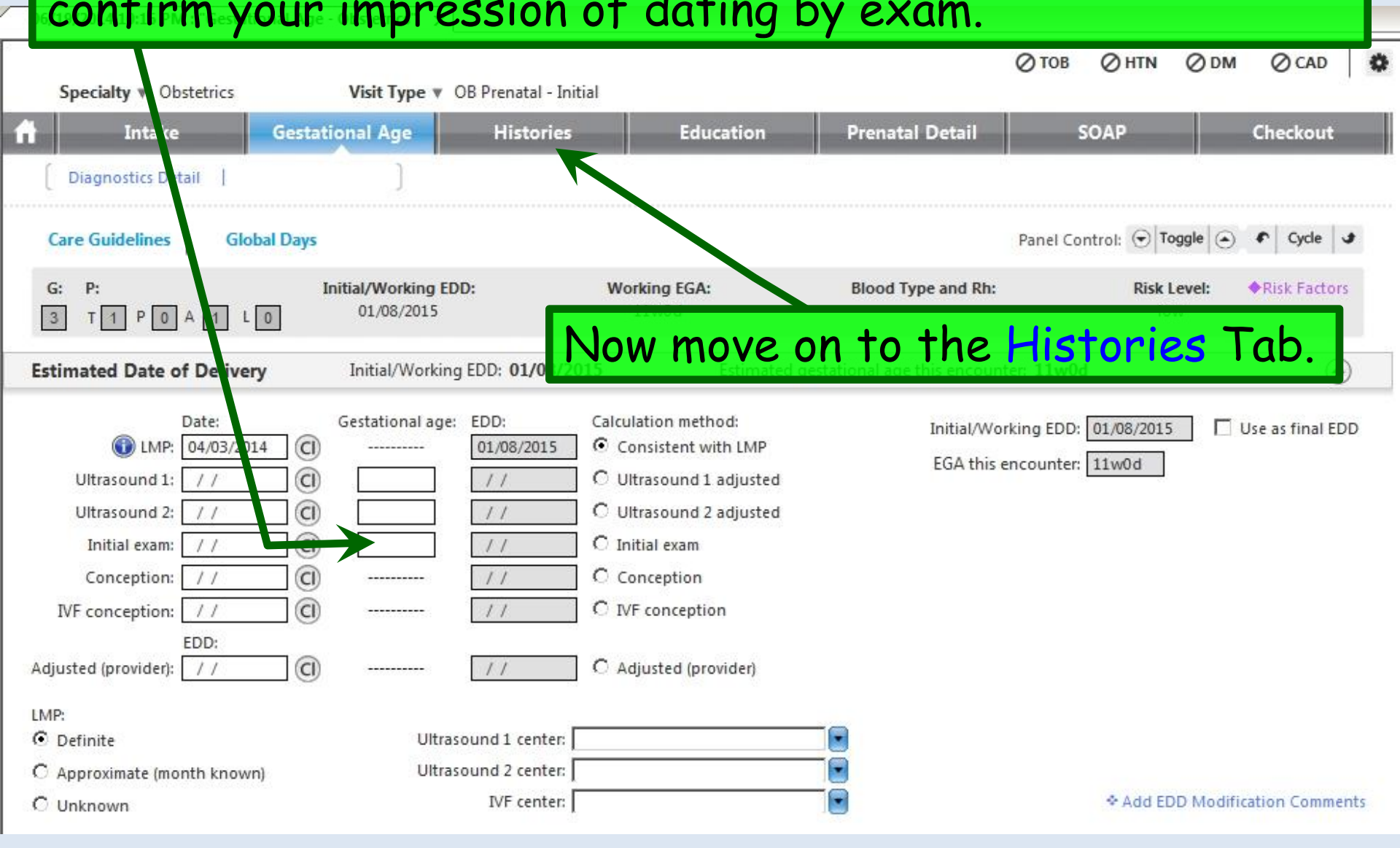
The provider generally starts on the **Home Page** tab.

It's good to begin by looking for **Sticky Notes** & **Alerts**; there are none on this patient.

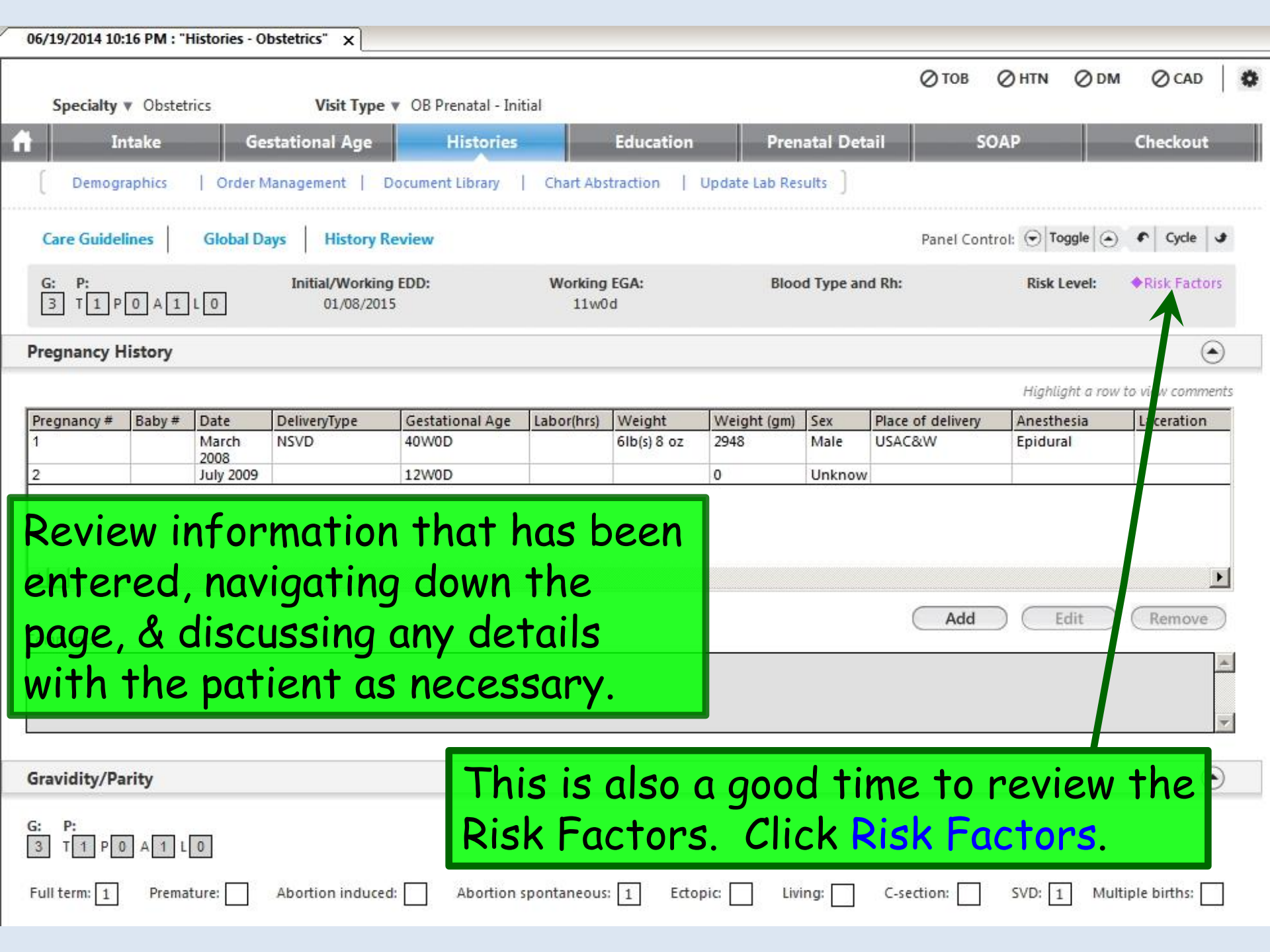
Also take note of the **Risk Indicators**.

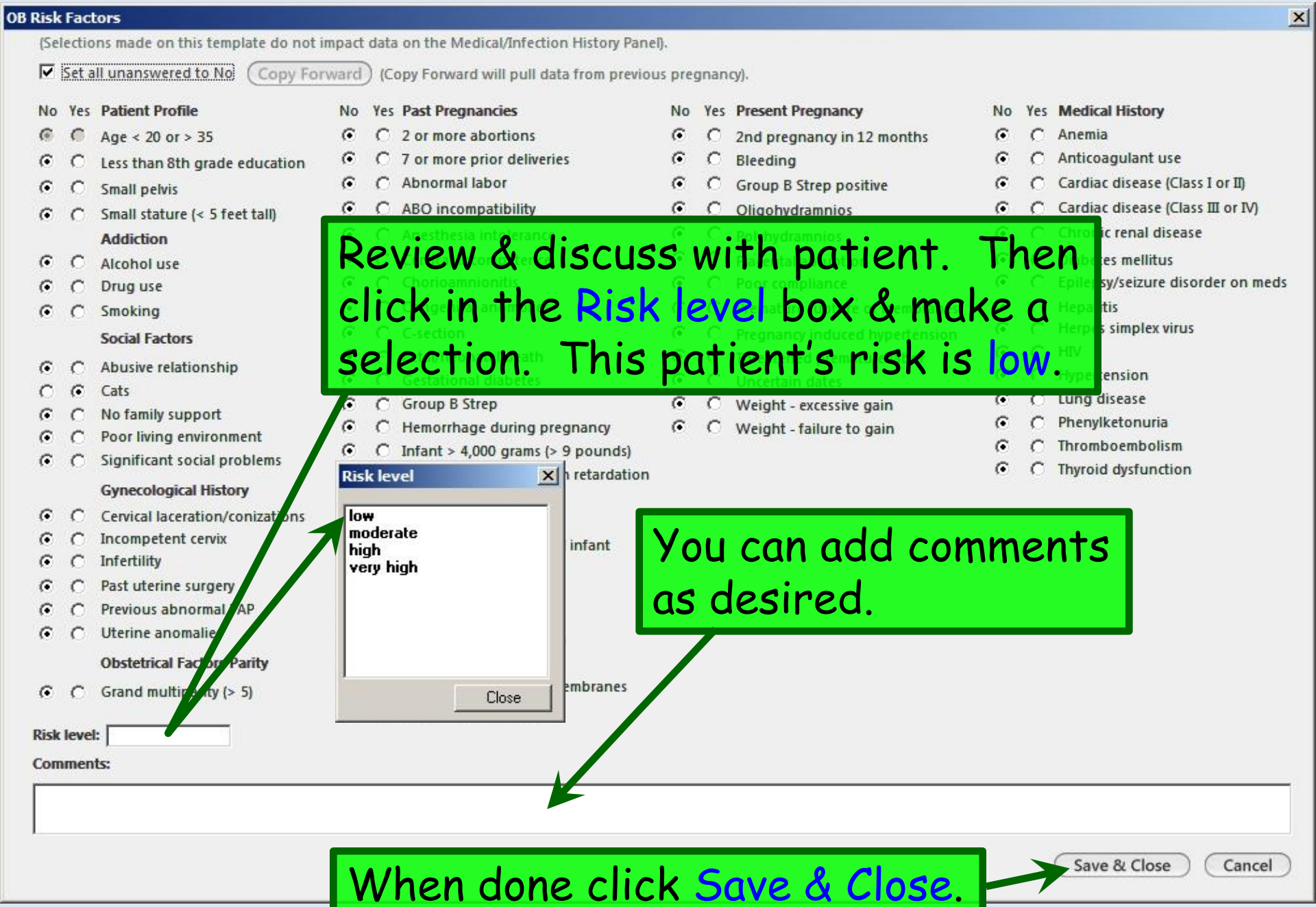

You can select any of the headings on the left to view various aspects of the chart.
You can also just review the **intake_note** to see a summary as well. Regardless of the method chosen, the provider is responsible for reviewing & confirming this information, & updating it as necessary.
When you're done reviewing the chart, move to the Gestational Age tab.
AGE: 24 years 2 months - 06/19/2014 10:16 PM : "Home Page - Obstetrics"
Intake
Gestational Age
Histories
Care Guidelines
Global Days
Initial/Working EDD:
01/08/2015
General
Provider this encounter:
ROBERT LAMAR DUFFY MD
Primary OB Provider:
Summary
Pregnancy History
HPI's
Problem List
Family History
Past Medical/Surgical History
Allergies
Medications
Vitals
Date
Time
Temp F
Pulse
Respiration
Ht In
Wt Lb
BMI
BSA
Pain Score
HAQ Score
11:01 PM
98.8
74
16
65.00
146.00
24.30
Prenatal Detail
Medication
Custom
Ready

Review information that has been entered, clarifying any details with the patient as necessary. Navigate down to see the rest of the template. After your exam, you will confirm your impression of dating by exam.



Now move on to the Histories Tab.


06/19/2014 10:16 PM : "Histories - Obstetrics"
TOB
HTN
DM
CAD
Specialty ▼ Obstetrics
Visit Type ▼ OB Prenatal - Initial
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Demographics | Order Management | Document Library | Chart Abstraction | Update Lab Results
Care Guidelines | Global Days | History Review
Panel Control: Toggle Cycle
G: P:
3 T 1 P 0 A 1 L 0
Initial/Working EDD:
01/08/2015
Working EGA:
11w0d
Blood Type and Rh:
Risk Level:
Risk Factors
Pregnancy History
Highlight a row to view comments
Pregnancy # | Baby # | Date | DeliveryType | Gestational Age | Labor(hrs) | Weight | Weight (gm) | Sex | Place of delivery | Anesthesia | Laceration
1 | | March 2008 | NSVD | 40W0D | | 6lb(s) 8 oz | 2948 | Male | USAC&W | Epidural |
2 | | July 2009 | | 12W0D | | | 0 | Unknow | | |
Add
Edit
Remove
Review information that has been entered, navigating down the page, & discussing any details with the patient as necessary.
This is also a good time to review the Risk Factors. Click Risk Factors.
Gravidity/Parity
G: P:
3 T 1 P 0 A 1 L 0
Full term: 1
Premature:
Abortion induced:
Abortion spontaneous: 1
Ectopic:
Living:
C-section:
SVD: 1
Multiple births:



Review & discuss with patient. Then click in the Risk level box & make a selection. This patient's risk is low.

You can add comments as desired.

When done click Save & Close.

06/19/2014 10:16 PM : "Histories - Obstetrics"

TOB HTN DM CAD

Specialty ▼ Obstetrics Visit Type ▼ OB Prenatal - Initial

Intake | Gestational Age | Histories | Education | Prenatal Detail | SOAP | Checkout

Demographics | Order Management | Document Library | Chart Abstraction | Update Lab Results

Care Guidelines | Global Days | History Review

Panel Control: Toggle Cycle

G: 3 P: T 1 P 0 A 1 L 0

Initial/Working EDD: 01/08/2015

Working EGA: 11w0d

Blood Type and Rh:

Risk Level: low

Risk Factors

Pregnancy History

Highlight a row to view comments

Pregnancy #	Baby #	Date	DeliveryType	Gestational Age	Labor(hrs)	Weight	Weight (gm)	Sex	Place of delivery	Anesthesia	Laceration
1		March 2008	NSVD	40W0D		6lb(s) 8 oz	2948	Male	USAC&W	Epidural	
2		July 2009		12W0D			0	Unk			

Add Edit Remove

Comments:

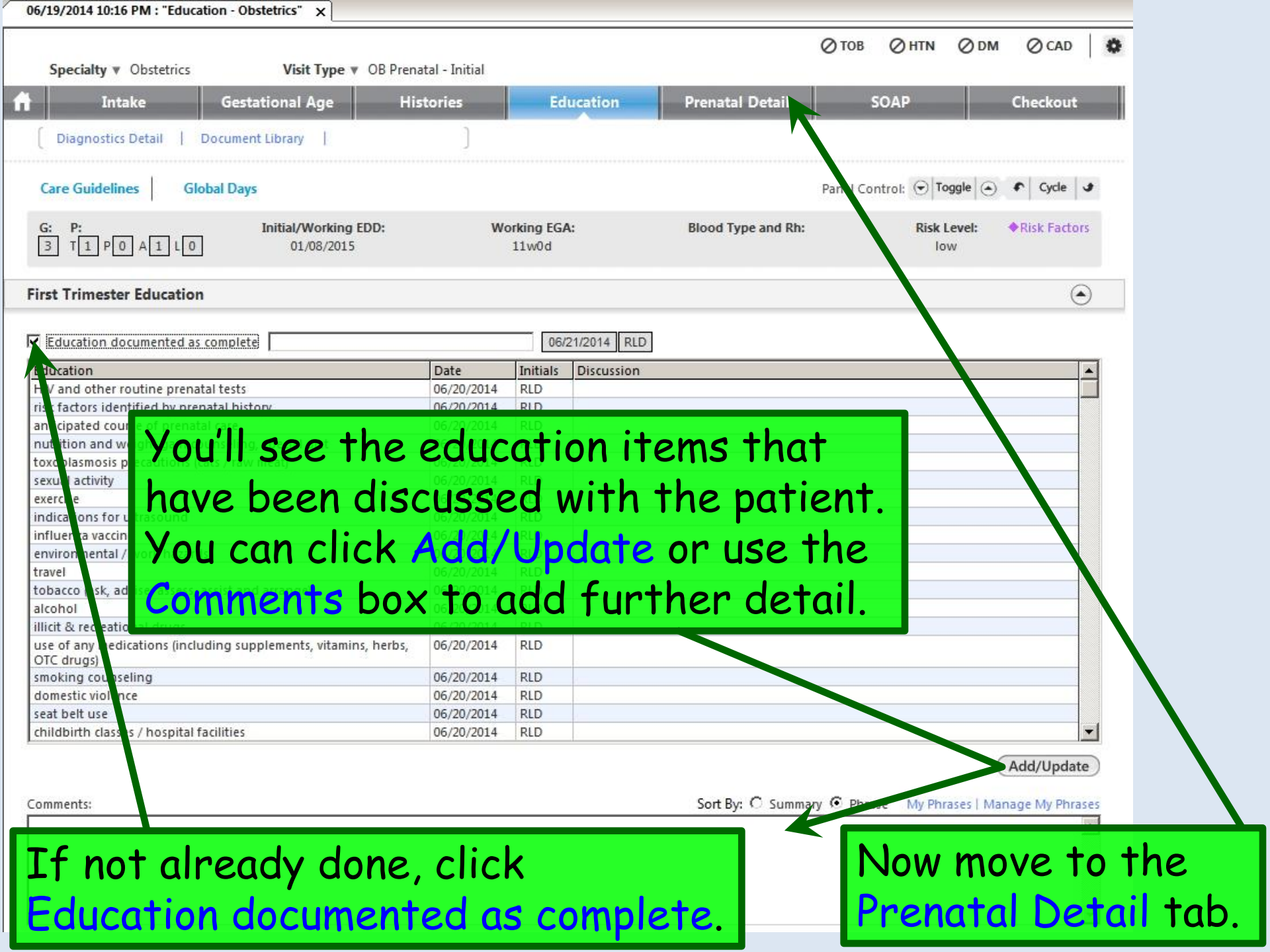
Now move to Education.

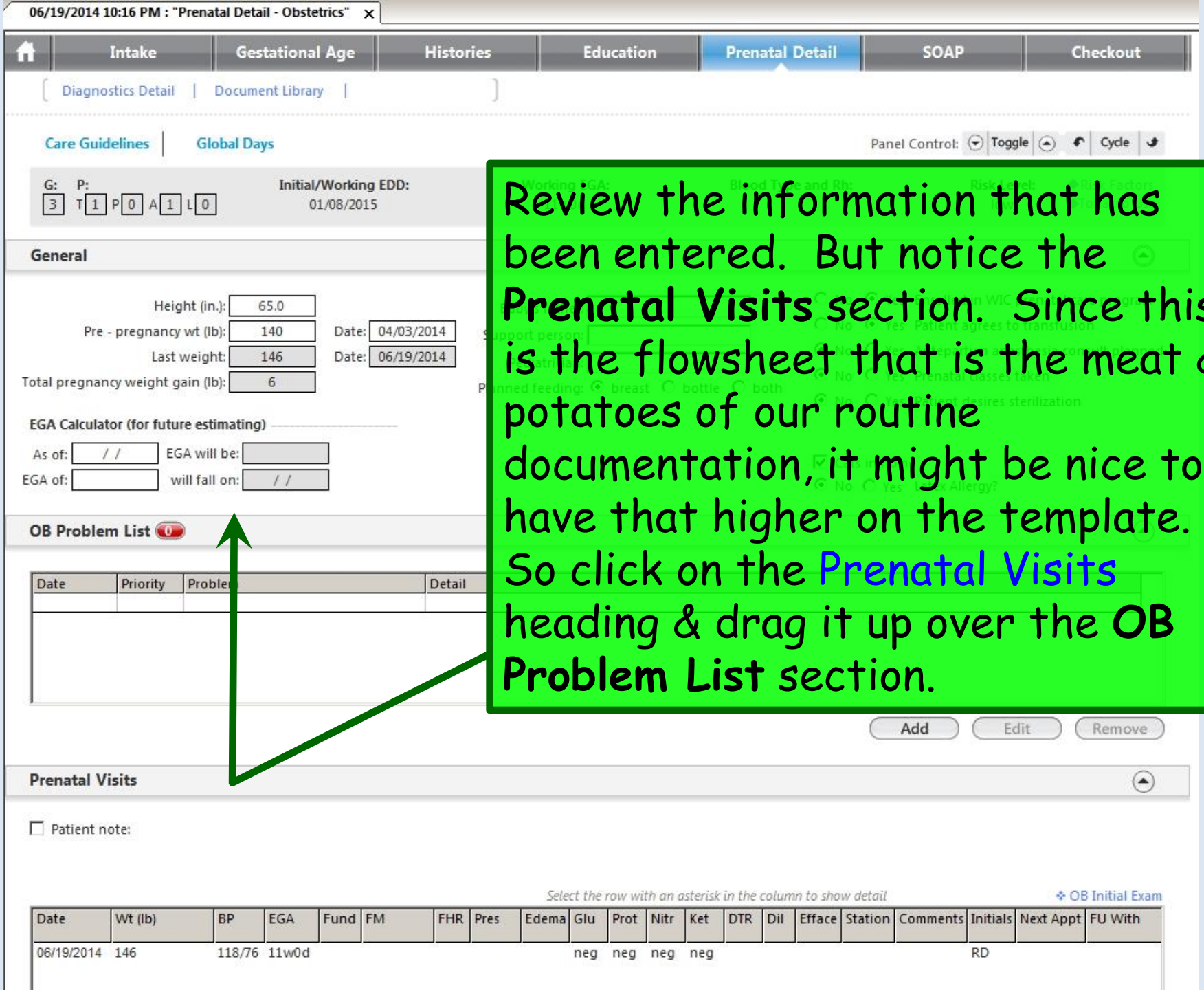
Risk Level displays.

Gravidity/Parity

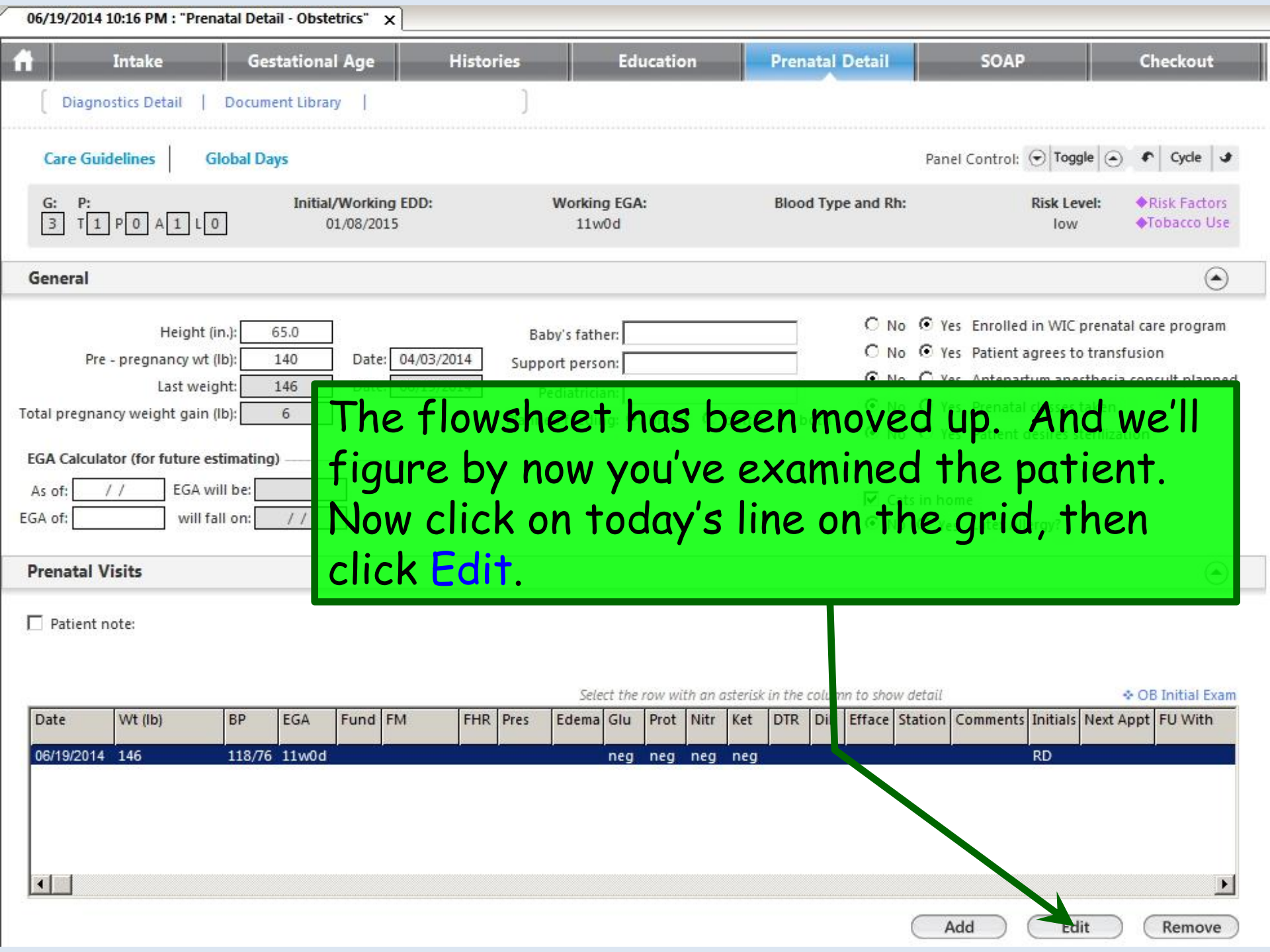
G: 3 P: T 1 P 0 A 1 L 0

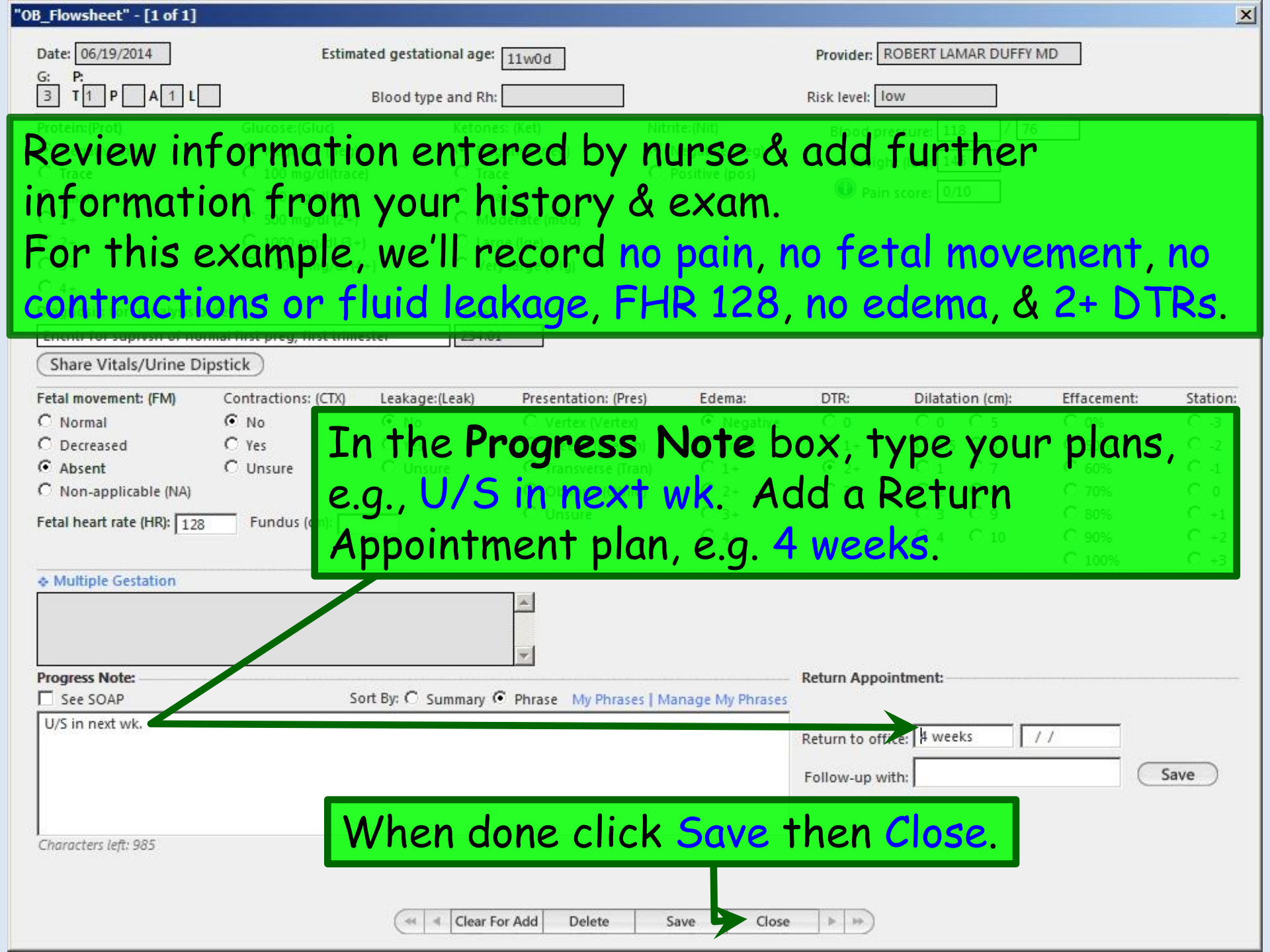
Full term: 1 Premature: Abortion induced: Abortion spontaneous: 1 Ectopic: Living: C-section: SVD: 1 Multiple births:

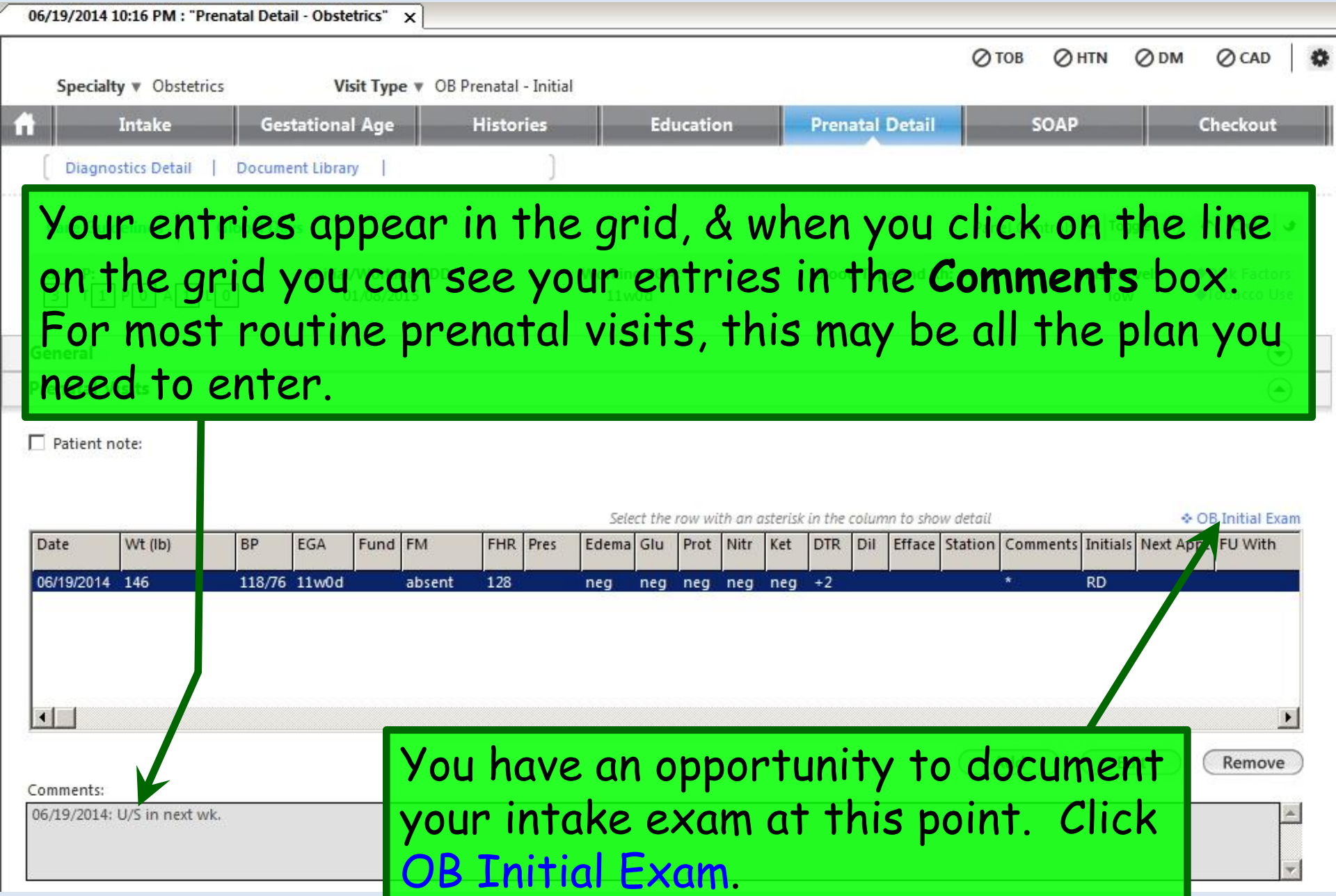

06/19/2014 10:16 PM : "Education - Obstetrics"
TOB
HTN
DM
CAD
Specialty ▾ Obstetrics
Visit Type ▾ OB Prenatal - Initial
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Diagnostics Detail | Document Library |
Care Guidelines | Global Days
Panel Control: Toggle Cycle
G: 3 P: T 1 P 0 A 1 L 0
Initial/Working EDD: 01/08/2015
Working EGA: 11w0d
Blood Type and Rh:
Risk Level: low
Risk Factors
First Trimester Education
Education documented as complete
06/21/2014
RLD
Education
Date
Initials
Discussion
HIV and other routine prenatal tests 06/20/2014 RLD
risk factors identified by prenatal history 06/20/2014 RLD
anticipated course of prenatal care 06/20/2014 RLD
nutrition and weight gain 06/20/2014 RLD
toxoplasmosis precautions (cats / raw meat) 06/20/2014 RLD
sexual activity 06/20/2014 RLD
exercise 06/20/2014 RLD
indications for ultrasound 06/20/2014 RLD
influenza vaccine 06/20/2014 RLD
environmental / 06/20/2014 RLD
travel 06/20/2014 RLD
tobacco risk, ad 06/20/2014 RLD
alcohol 06/20/2014 RLD
illicit & recreational drugs 06/20/2014 RLD
use of any medications (including supplements, vitamins, herbs, OTC drugs) 06/20/2014 RLD
smoking counseling 06/20/2014 RLD
domestic violence 06/20/2014 RLD
seat belt use 06/20/2014 RLD
childbirth classes / hospital facilities 06/20/2014 RLD
Add/Update
Comments:
Sort By: Summary
My Phrases | Manage My Phrases
You'll see the education items that have been discussed with the patient. You can click Add/Update or use the Comments box to add further detail.
If not already done, click Education documented as complete.
Now move to the Prenatal Detail tab.

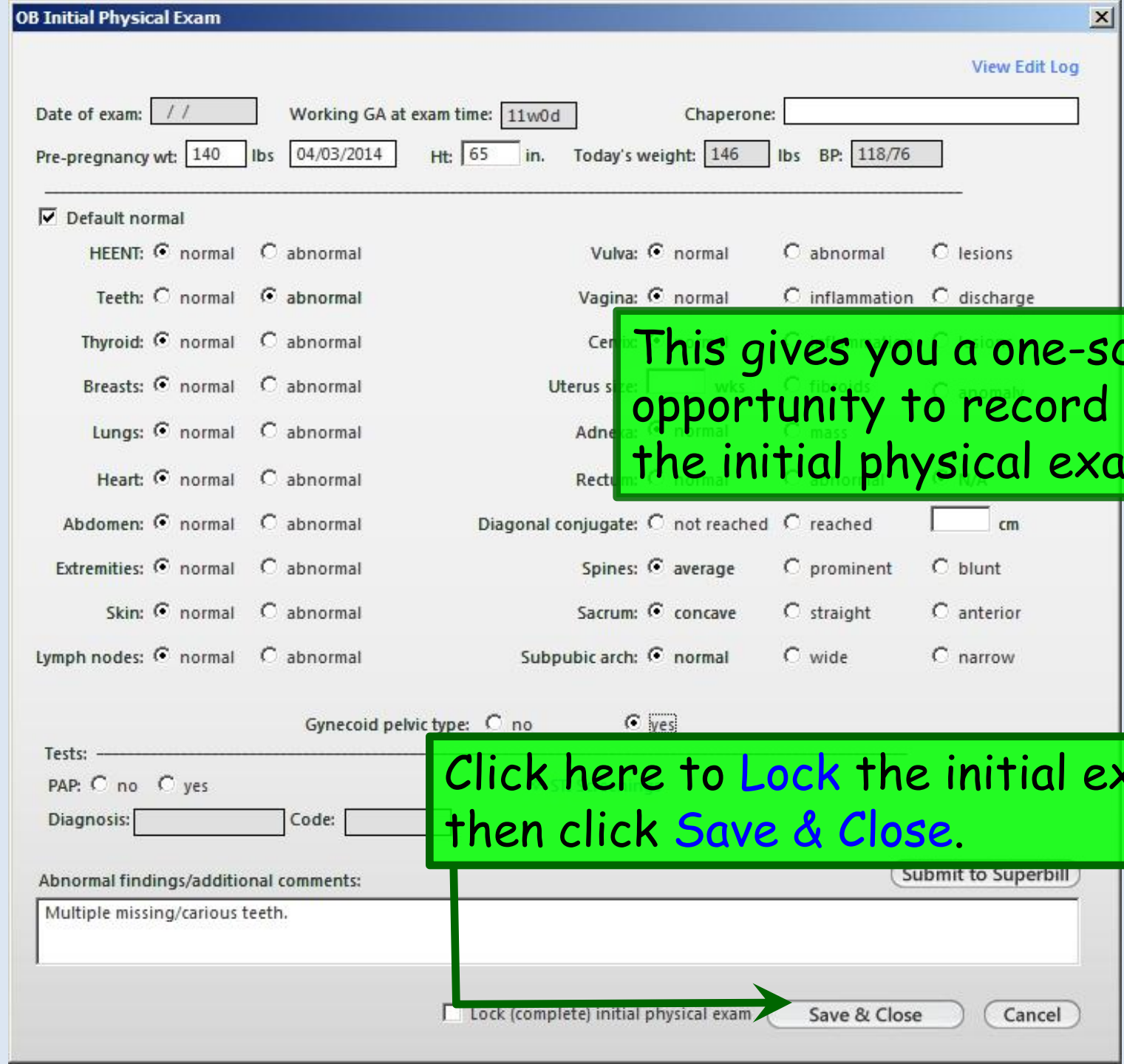


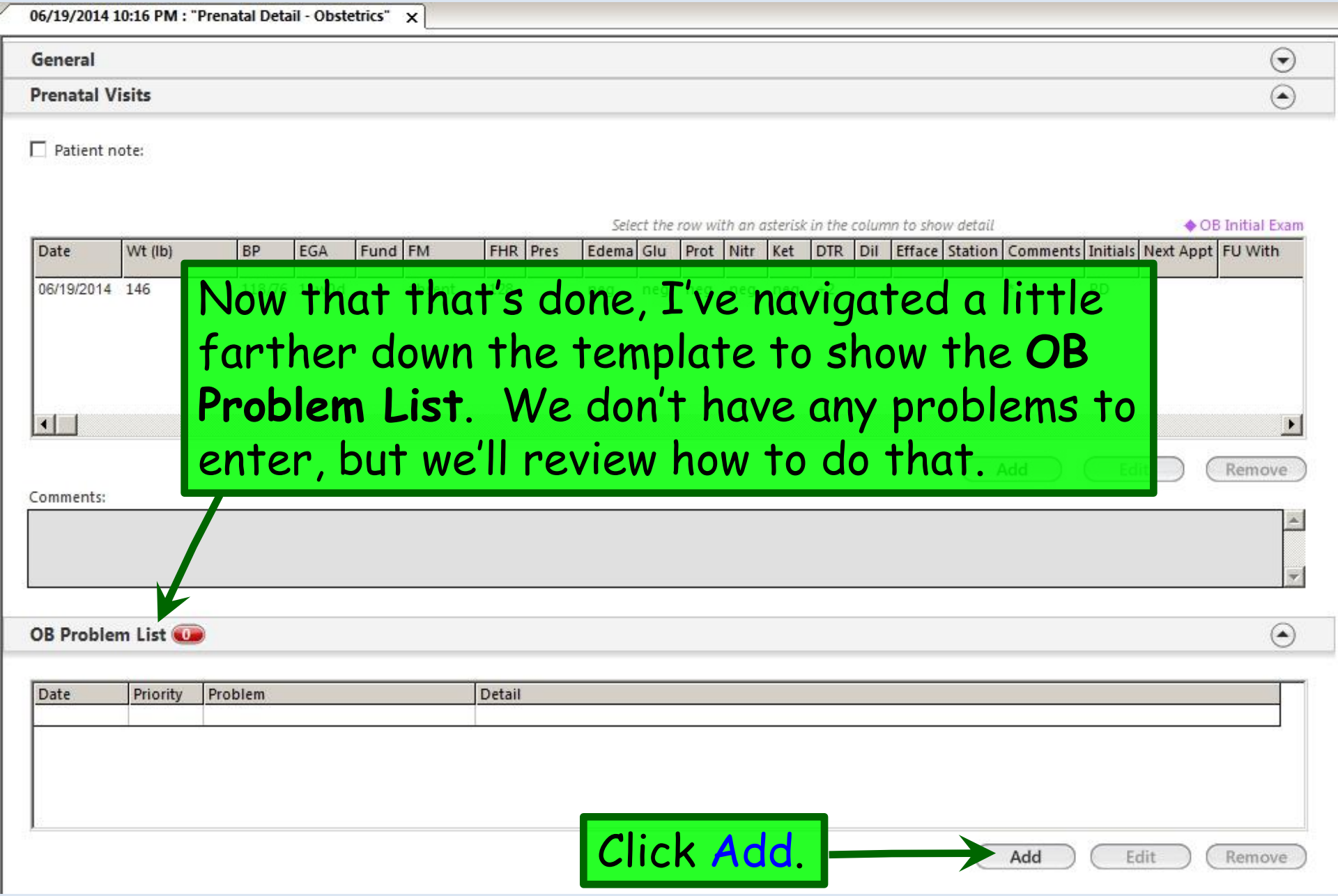
Review the information that has been entered. But notice the **Prenatal Visits** section. Since this is the flowsheet that is the meat & potatoes of our routine documentation, it might be nice to have that higher on the template. So click on the Prenatal Visits heading & drag it up over the **OB Problem List** section.


06/19/2014 10:16 PM : "Prenatal Detail - Obstetrics"
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Diagnostics Detail | Document Library |
Care Guidelines | Global Days
Panel Control: Toggle Cycle
G: 3 P: T 1 P 0 A 1 L 0
Initial/Working EDD: 01/08/2015
Working EGA: 11w0d
Blood Type and Rh:
Risk Level: low
Risk Factors
Tobacco Use
General
Height (in.): 65.0
Pre - pregnancy wt (lb): 140
Last weight: 146
Total pregnancy weight gain (lb): 6
Date: 04/03/2014
Baby's father:
Support person:
No Yes Enrolled in WIC prenatal care program
No Yes Patient agrees to transfusion
EGA Calculator (for future estimating)
As of: / /
EGA will be:
EGA of:
will fall on: / /
The flowsheet has been moved up. And we'll figure by now you've examined the patient. Now click on today's line on the grid, then click Edit.
Prenatal Visits
Patient note:
Select the row with an asterisk in the column to show detail
OB Initial Exam
Date | Wt (lb) | BP | EGA | Fund | FM | FHR | Pres | Edema | Glu | Prot | Nitr | Ket | DTR | Di | Efface | Station | Comments | Initials | Next Appt | FU With
06/19/2014 | 146 | 118/76 | 11w0d | | | | | | neg | neg | neg | neg | | | | | | RD | | |
Add
Edit
Remove

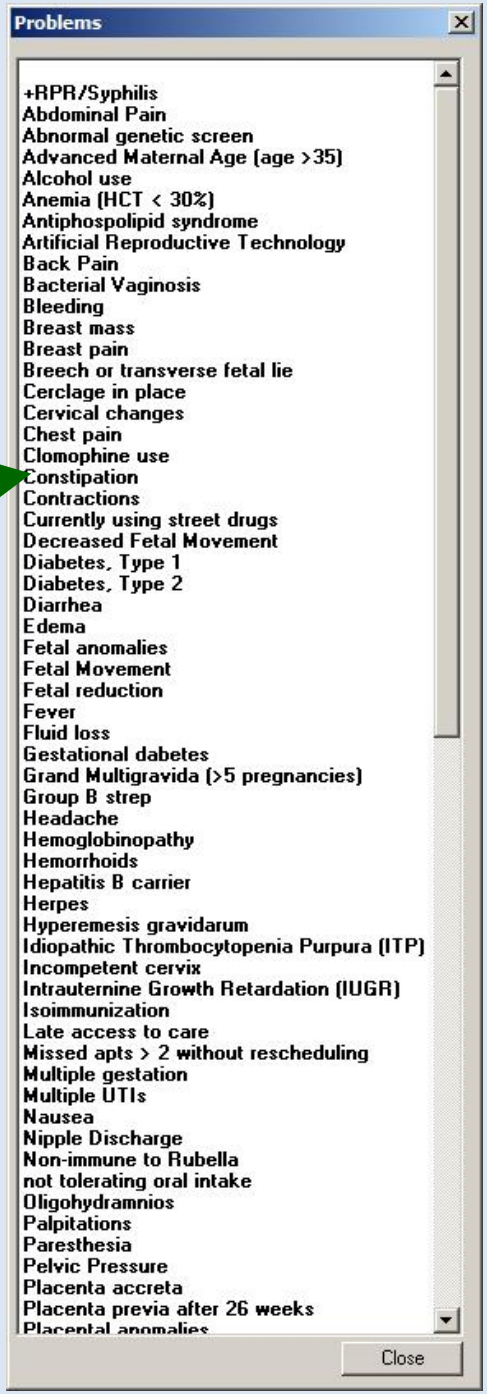

"OB_Flowsheet" - [1 of 1]
Date: 06/19/2014
Estimated gestational age: 11w0d
Provider: ROBERT LAMAR DUFFY MD
G: 3 P: T 1 P A 1 L
Blood type and Rh:
Risk level: low
Review information entered by nurse & add further information from your history & exam.
For this example, we'll record no pain, no fetal movement, no contractions or fluid leakage, FHR 128, no edema, & 2+ DTRs.
Share Vitals/Urine Dipstick
Fetal movement: (FM)
Normal
Decreased
Absent
Non-applicable (NA)
Contractions: (CTX)
No
Yes
Unsure
Leakage:(Leak)
Presentation: (Pres)
Edema:
DTR:
Dilatation (cm):
Effacement:
Station:
Fetal heart rate (HR): 128
Fundus
In the Progress Note box, type your plans, e.g., U/S in next wk. Add a Return Appointment plan, e.g. 4 weeks.
Multiple Gestation
Progress Note:
See SOAP
Sort By: Summary Phrase
My Phrases | Manage My Phrases
U/S in next wk.
Characters left: 985
Return Appointment:
Return to office: 4 weeks / /
Follow-up with:
Save
When done click Save then Close.
Clear For Add
Delete
Save
Close


06/19/2014 10:16 PM : "Prenatal Detail - Obstetrics"
TOB
HTN
DM
CAD
Specialty ▾ Obstetrics
Visit Type ▾ OB Prenatal - Initial
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Diagnostics Detail | Document Library |
Your entries appear in the grid, & when you click on the line on the grid you can see your entries in the Comments box. For most routine prenatal visits, this may be all the plan you need to enter.
Patient note:
Select the row with an asterisk in the column to show detail
OB Initial Exam
Date | Wt (lb) | BP | EGA | Fund | FM | FHR | Pres | Edema | Glu | Prot | Nitr | Ket | DTR | Dil | Efface | Station | Comments | Initials | Next Appt | FU With
06/19/2014 | 146 | 118/76 | 11w0d | absent | 128 | neg | neg | neg | neg | neg | +2 | * | RD
Remove
Comments:
06/19/2014: U/S in next wk.
You have an opportunity to document your intake exam at this point. Click OB Initial Exam.

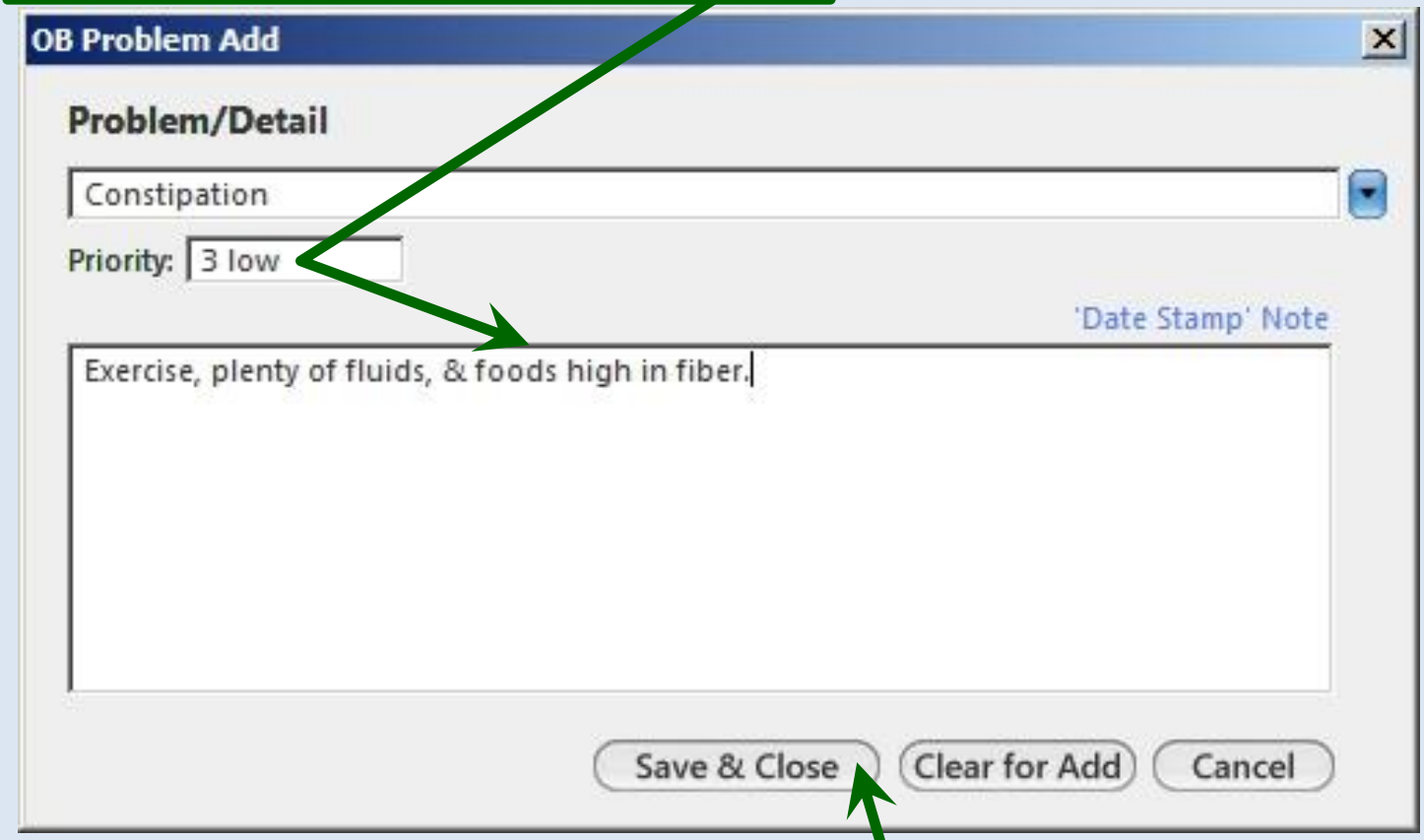

OB Initial Physical Exam
View Edit Log
Date of exam: / /
Working GA at exam time: 11w0d
Chaperone:
Pre-pregnancy wt: 140 lbs 04/03/2014 Ht: 65 in. Today's weight: 146 lbs BP: 118/76
Default normal
HEENT: normal abnormal
Teeth: normal abnormal
Thyroid: normal abnormal
Breasts: normal abnormal
Lungs: normal abnormal
Heart: normal abnormal
Abdomen: normal abnormal
Extremities: normal abnormal
Skin: normal abnormal
Lymph nodes: normal abnormal
Vulva: normal abnormal lesions
Vagina: normal inflammation discharge
Diagonal conjugate: not reached reached cm
Spines: average prominent blunt
Sacrum: concave straight anterior
Subpubic arch: normal wide narrow
Gynecoid pelvic type: no yes
Tests:
PAP: no yes
Diagnosis: Code:
Abnormal findings/additional comments:
Multiple missing/carious teeth.
Submit to Superbill
Lock (complete) initial physical exam
Save & Close
Cancel
This gives you a one-screen opportunity to record details of the initial physical exam.
Click here to Lock the initial exam, then click Save & Close.


06/19/2014 10:16 PM : "Prenatal Detail - Obstetrics"
General
Prenatal Visits
Patient note:
Select the row with an asterisk in the column to show detail
OB Initial Exam
Date
Wt (lb)
BP
EGA
Fund
FM
FHR
Pres
Edema
Glu
Prot
Nitr
Ket
DTR
Dil
Efface
Station
Comments
Initials
Next Appt
FU With
06/19/2014
146
Now that that's done, I've navigated a little farther down the template to show the OB Problem List. We don't have any problems to enter, but we'll review how to do that.
Add
Remove
Comments:
OB Problem List
0
Date
Priority
Problem
Detail
Click Add.
Add
Edit
Remove

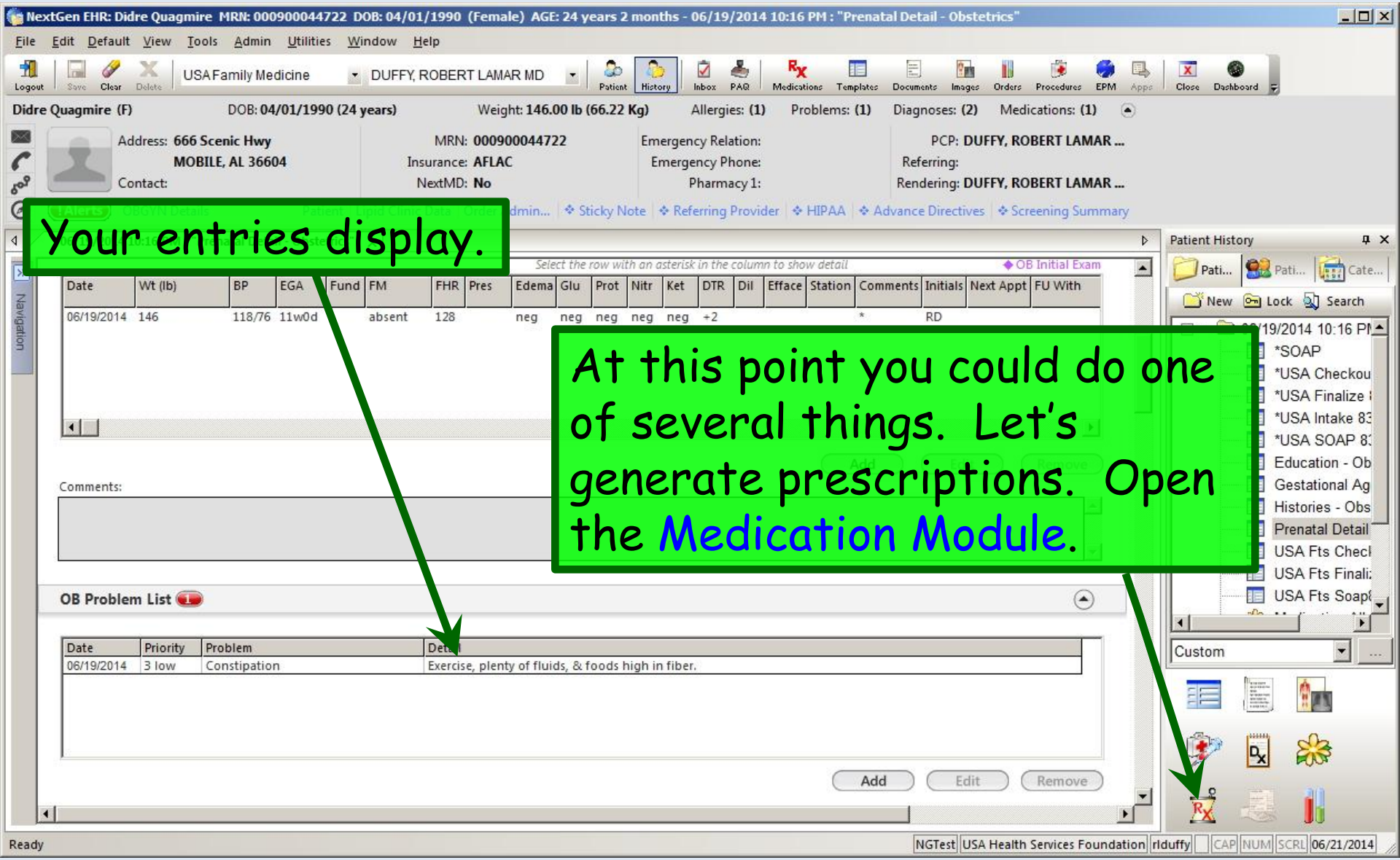
Click the Problem/Detail dropdown arrow to make a selection from the picklist, or just type in a problem. Here I'll pick Constipation.

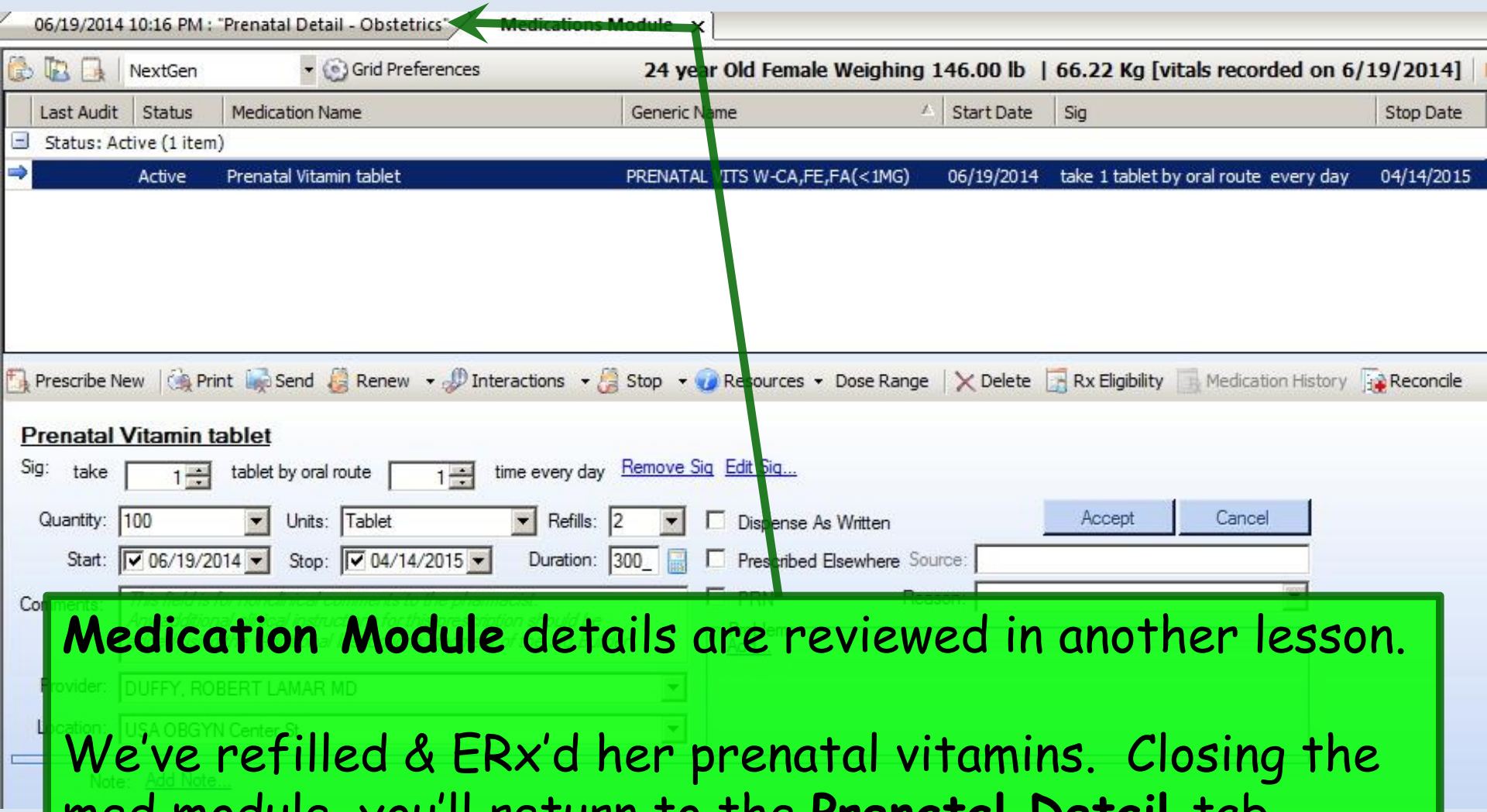


You can assign a priority & type plans/instructions.



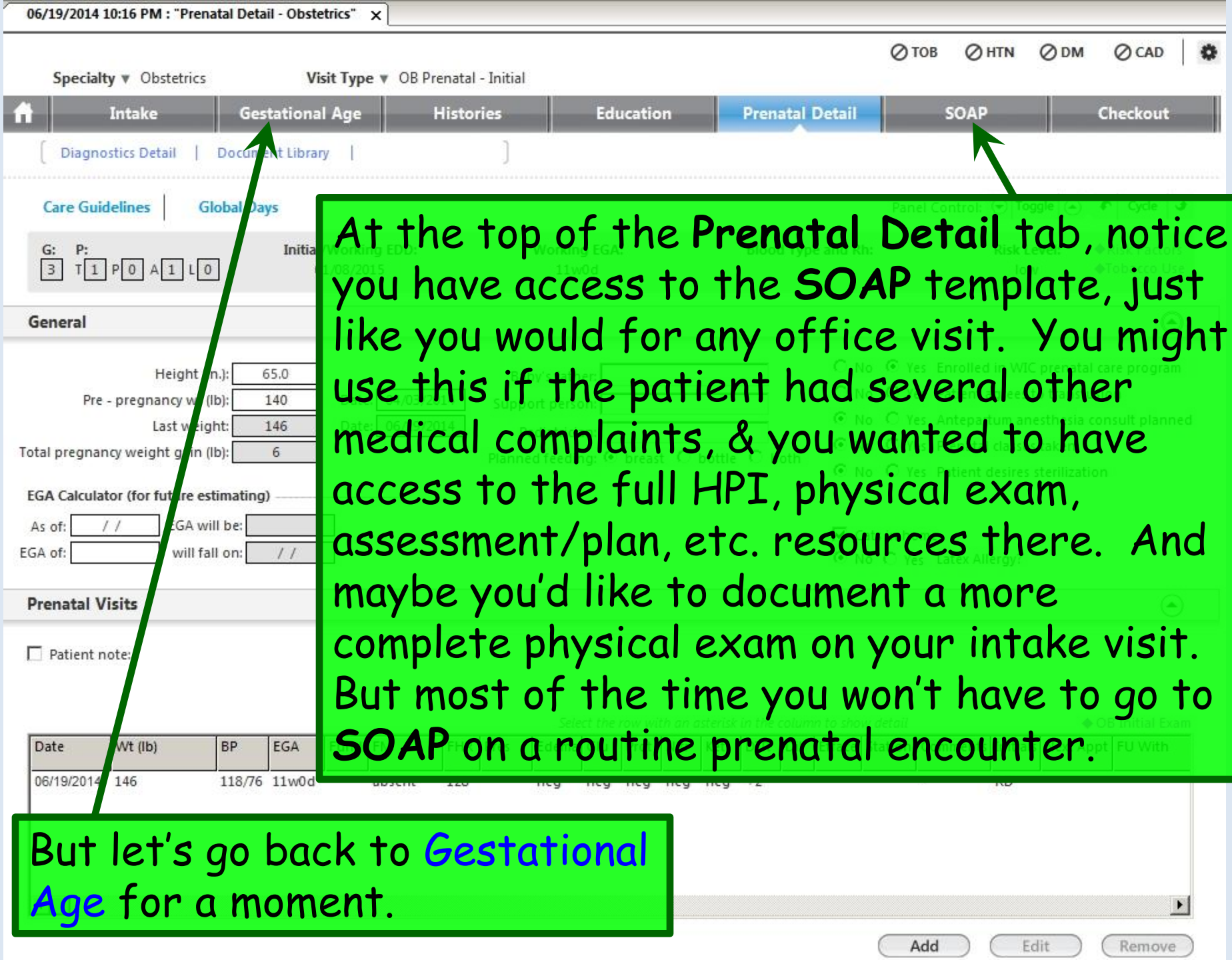
Click Clear for Add to make more entries, or Save & Close to finish.


NextGen EHR: Didre Quagmire MRN: 000900044722 DOB: 04/01/1990 (Female) AGE: 24 years 2 months - 06/19/2014 10:16 PM : "Prenatal Detail - Obstetrics"
File Edit Default View Tools Admin Utilities Window Help
Logout Save Clear Delete USA Family Medicine DUFFY, ROBERT LAMAR MD Patient History Inbox PAQ Medications Templates Documents Images Orders Procedures EPM Apps Close Dashboard
Didre Quagmire (F) DOB: 04/01/1990 (24 years) Weight: 146.00 lb (66.22 Kg) Allergies: (1) Problems: (1) Diagnoses: (2) Medications: (1)
Address: 666 Scenic Hwy
MOBILE, AL 36604
Contact:
MRN: 000900044722
Insurance: AFLAC
NextMD: No
Emergency Relation:
Emergency Phone:
Pharmacy 1:
PCP: DUFFY, ROBERT LAMAR ...
Referring:
Rendering: DUFFY, ROBERT LAMAR ...
Sticky Note Referring Provider HIPAA Advance Directives Screening Summary
Your entries display.
Select the row with an asterisk in the column to show detail
OB Initial Exam
Date Wt (lb) BP EGA Fund FM FHR Pres Edema Glu Prot Nitr Ket DTR Dil Efface Station Comments Initials Next Appt FU With
06/19/2014 146 118/76 11w0d absent 128 neg neg neg neg neg +2 * RD
Comments:
OB Problem List 1
Date Priority Problem Detail
06/19/2014 3 low Constipation Exercise, plenty of fluids, & foods high in fiber.
Add Edit Remove
At this point you could do one of several things. Let's generate prescriptions. Open the Medication Module.
Patient History
New Lock Search
*SOAP
*USA Checkou
*USA Finalize
*USA Intake 83
*USA SOAP 8
Education - Ob
Gestational Ag
Histories - Obs
Prenatal Detail
USA Fts Chec
USA Fts Finali
USA Fts Soap
Custom
Ready
NGTest USA Health Services Foundation rlduffy CAP NUM SCRL 06/21/2014

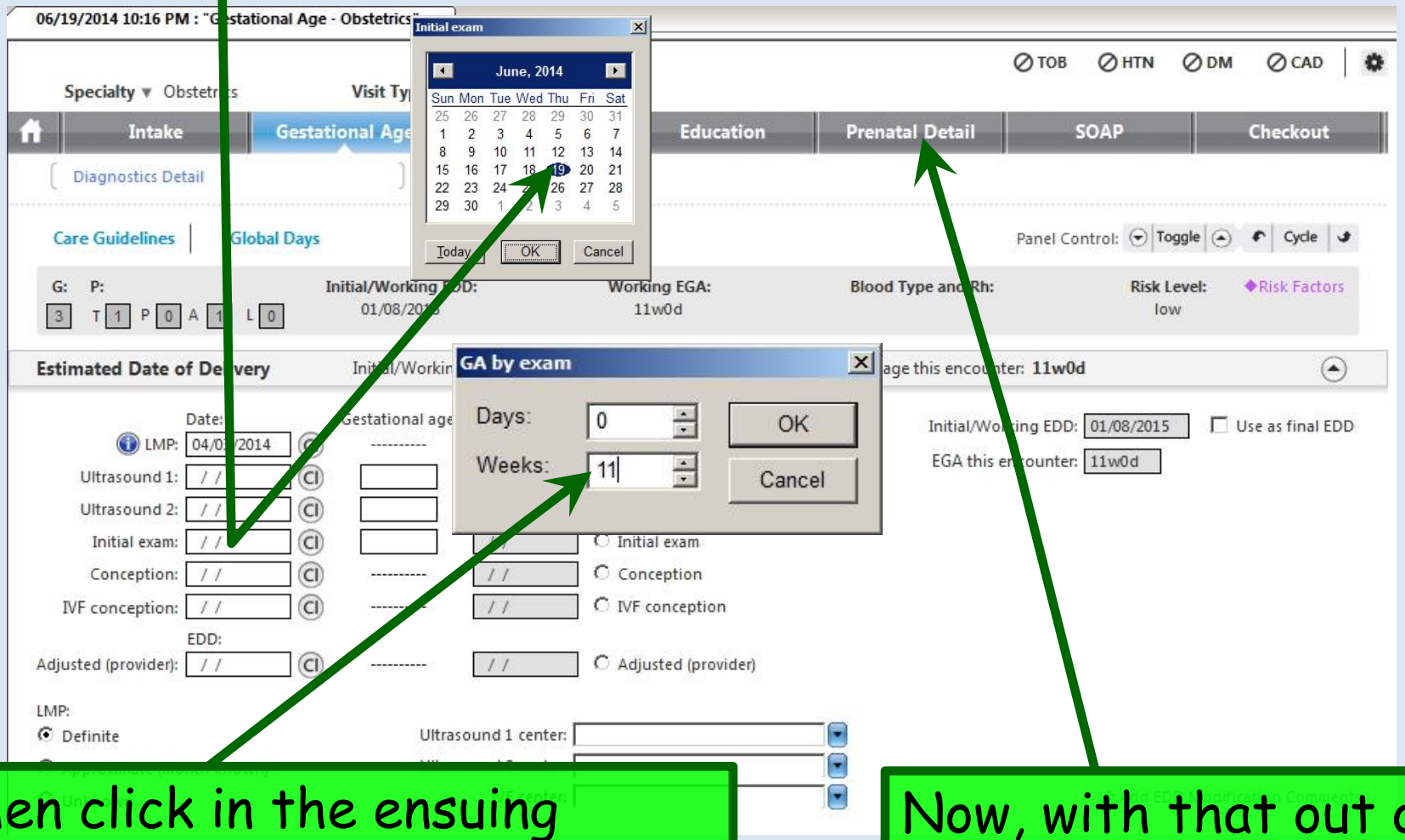


Medication Module details are reviewed in another lesson.

We've refilled & ERx'd her prenatal vitamins. Closing the med module, you'll return to the **Prenatal Detail** tab.


06/19/2014 10:16 PM : "Prenatal Detail - Obstetrics"
TOB
HTN
DM
CAD
Specialty ▾ Obstetrics
Visit Type ▾ OB Prenatal - Initial
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Diagnostics Detail
Document Library
Care Guidelines
Global Days
G: 3 P: T 1 P 0 A 1 L 0
General
Height (in.): 65.0
Pre - pregnancy wt (lb): 140
Last weight: 146
Total pregnancy weight gain (lb): 6
EGA Calculator (for future estimating)
As of: / /
EGA will be:
EGA of:
will fall on: / /
Prenatal Visits
Patient note:
Date
Wt (lb)
BP
EGA
06/19/2014
146
118/76
11w0d
Add
Edit
Remove
At the top of the Prenatal Detail tab, notice you have access to the SOAP template, just like you would for any office visit. You might use this if the patient had several other medical complaints, & you wanted to have access to the full HPI, physical exam, assessment/plan, etc. resources there. And maybe you'd like to document a more complete physical exam on your intake visit. But most of the time you won't have to go to SOAP on a routine prenatal encounter.
But let's go back to Gestational Age for a moment.

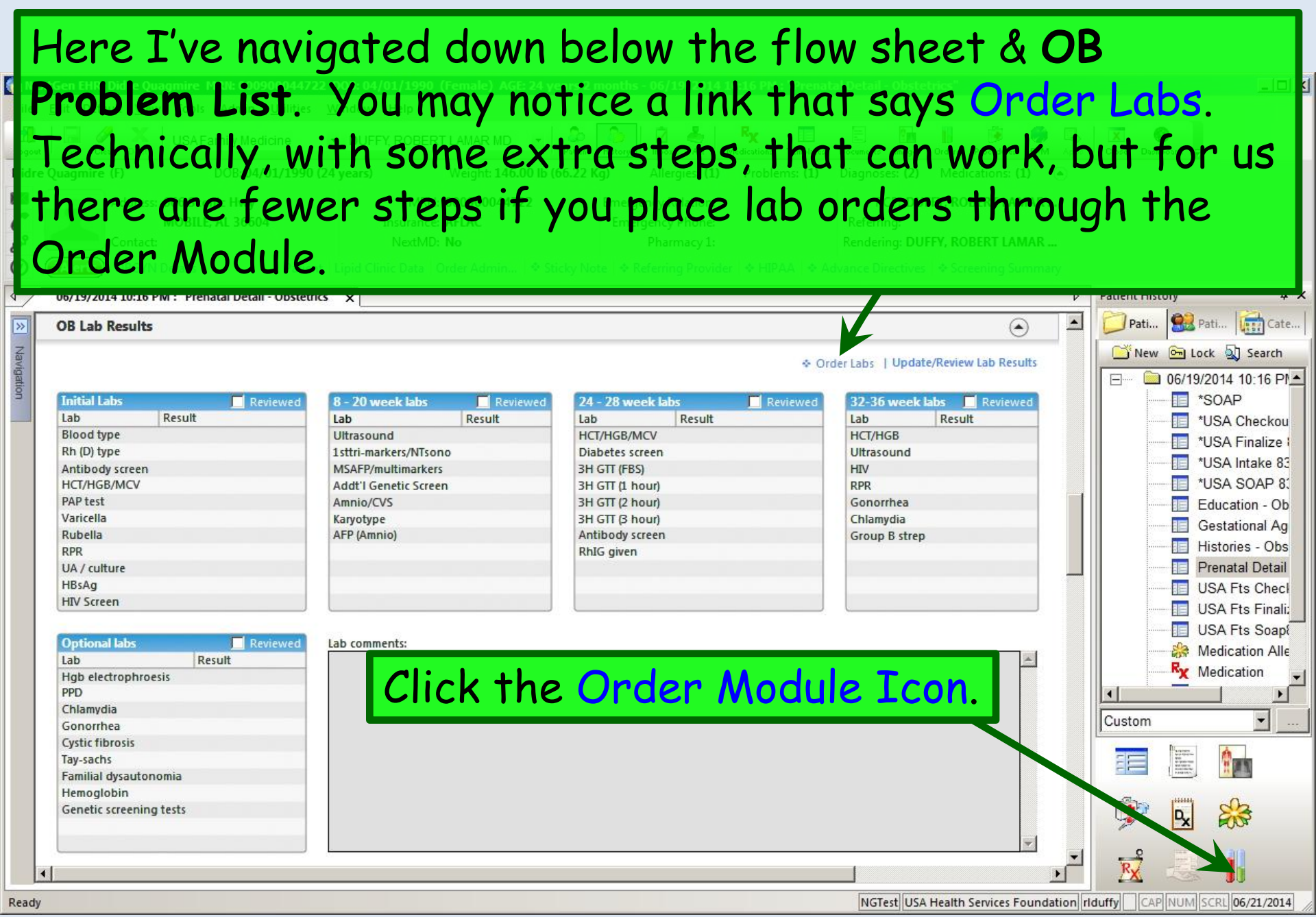
Click in the Initial Exam Date box & enter today's date.



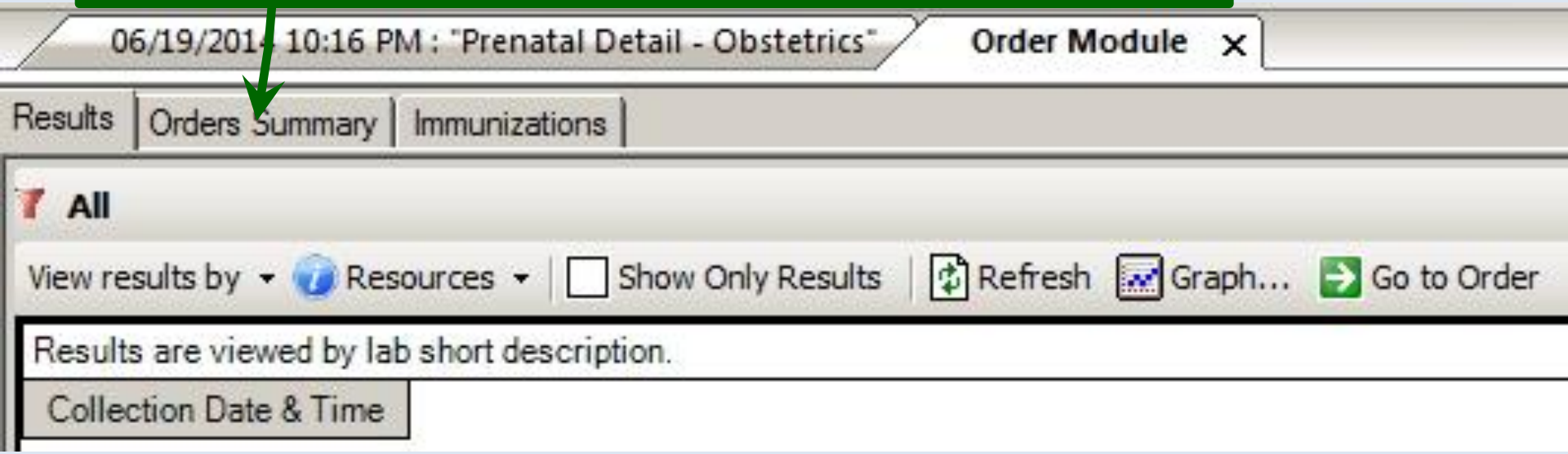
Then click in the ensuing popup enter 11 wks as your impression from today's exam.

Now, with that out of the way, let's go back to Prenatal Detail.

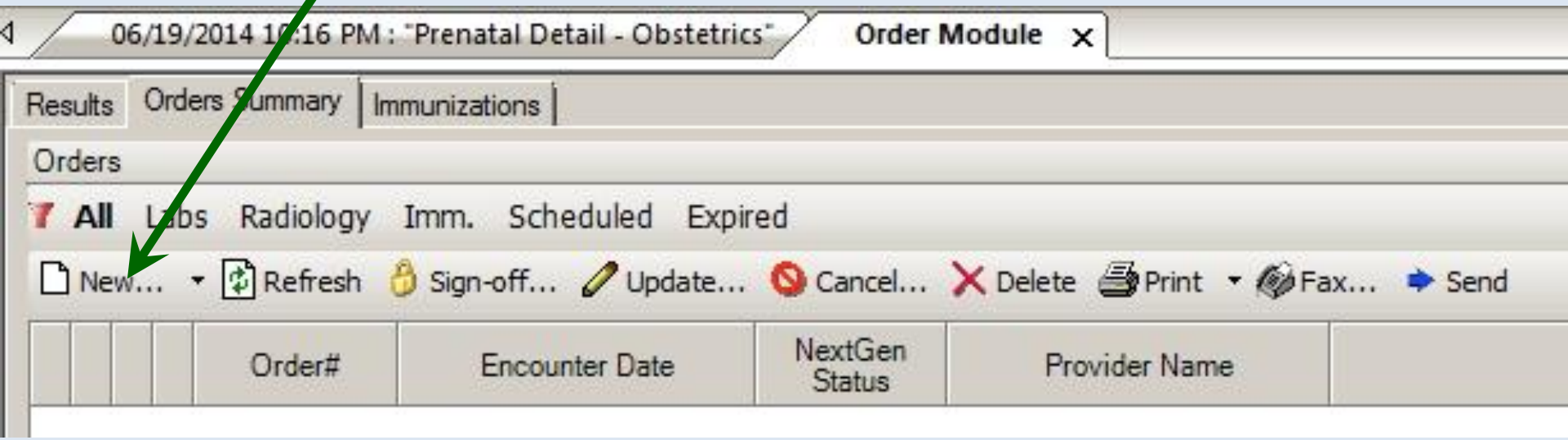
Here I've navigated down below the flow sheet & **OB Problem List**. You may notice a link that says Order Labs. Technically, with some extra steps, that can work, but for us there are fewer steps if you place lab orders through the Order Module.

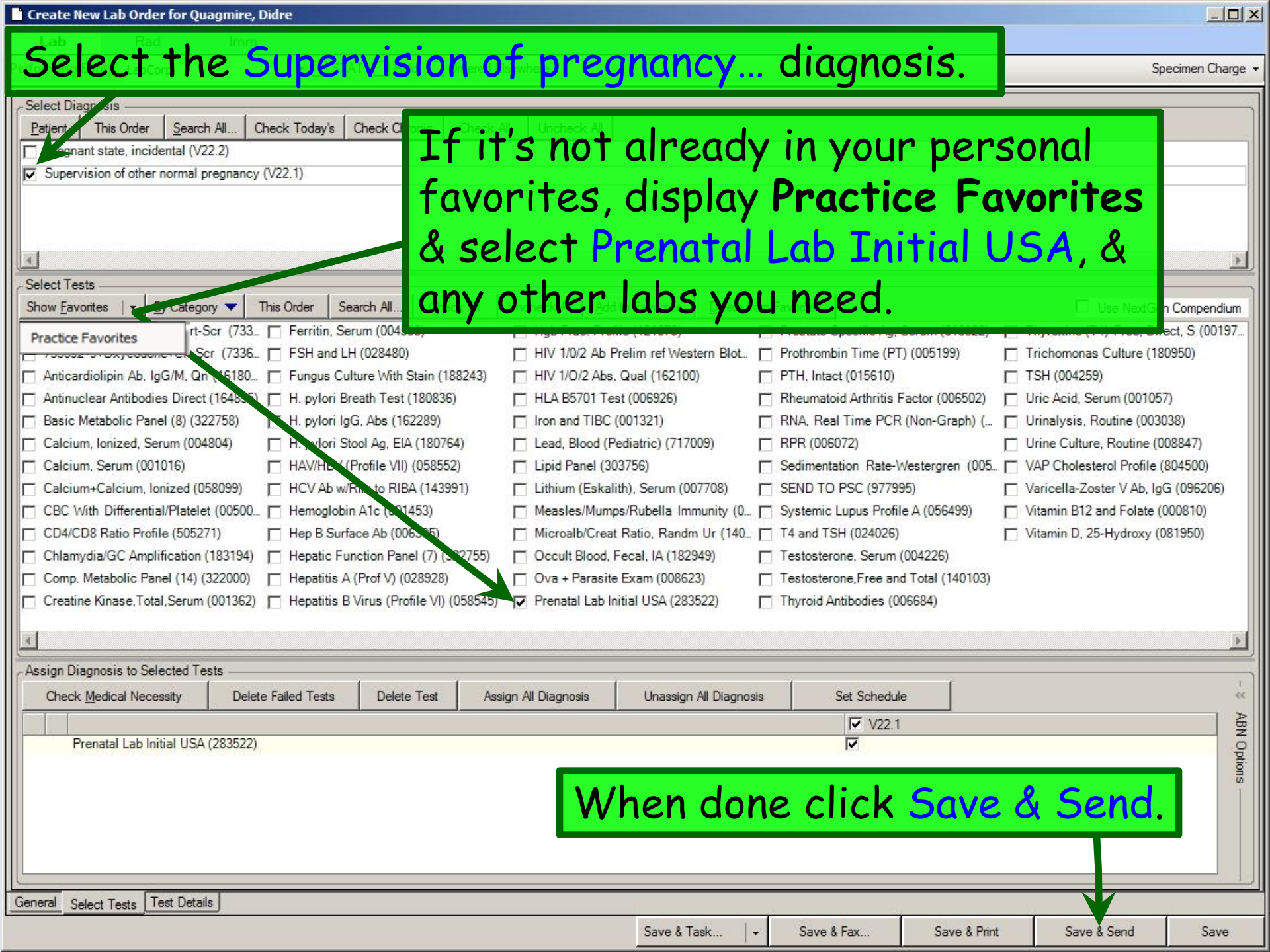


The **Order Module** opens on the **Results Tab**.
Click the Orders Summary tab.

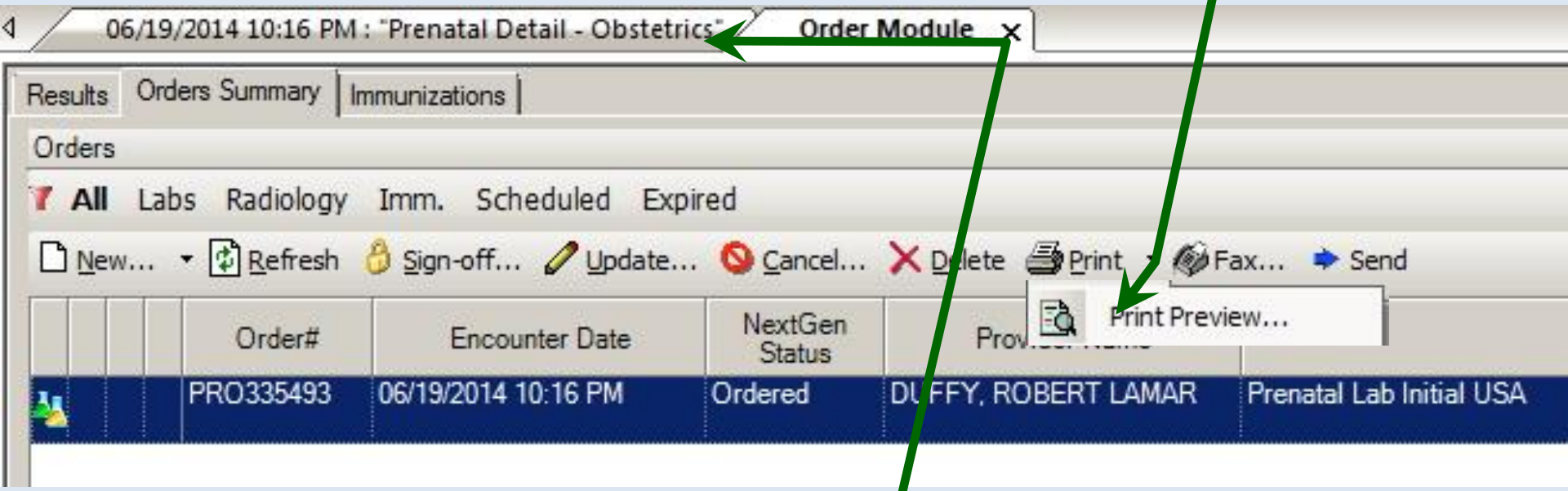


On the **Orders Summary** tab click New.

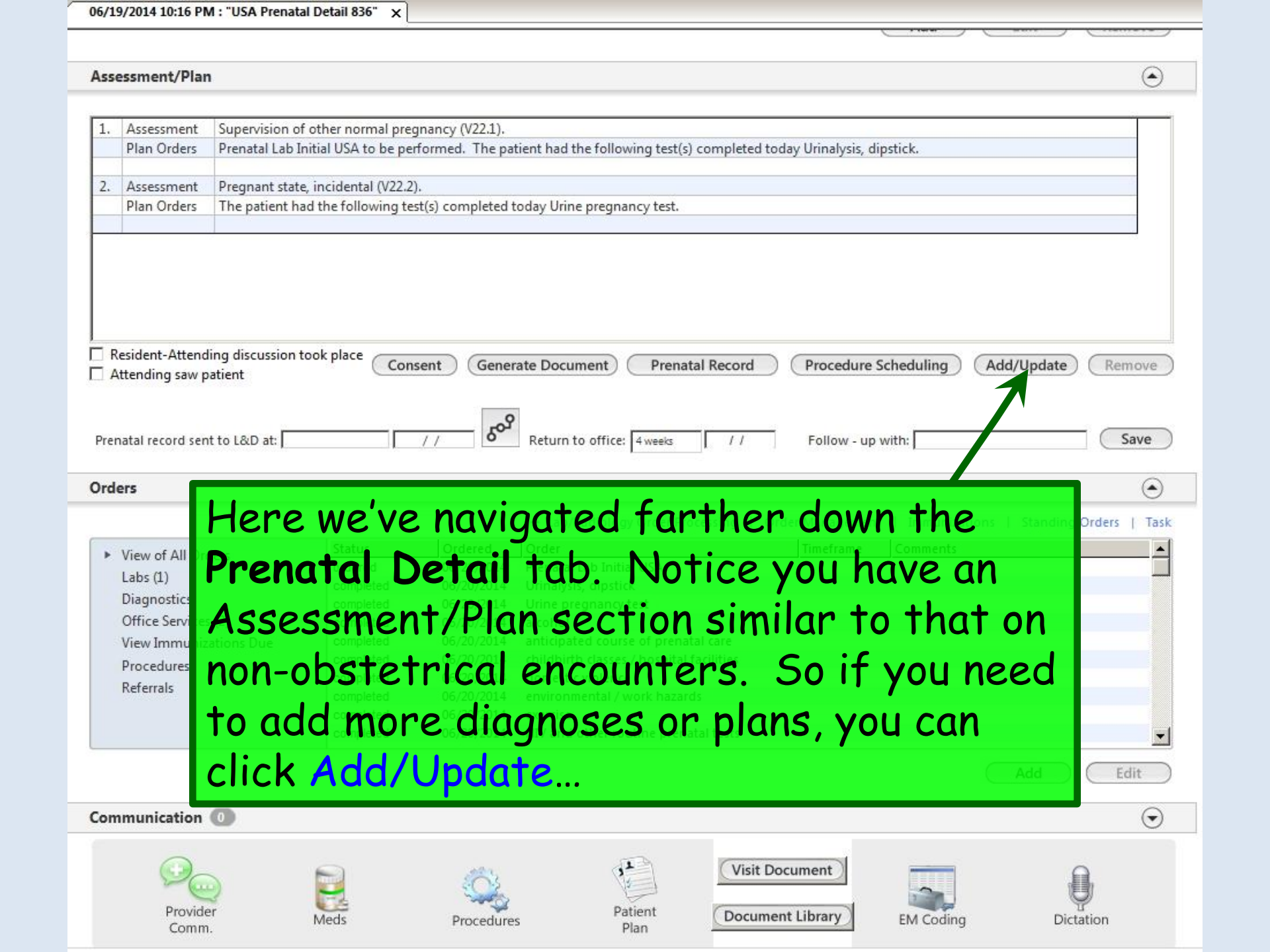


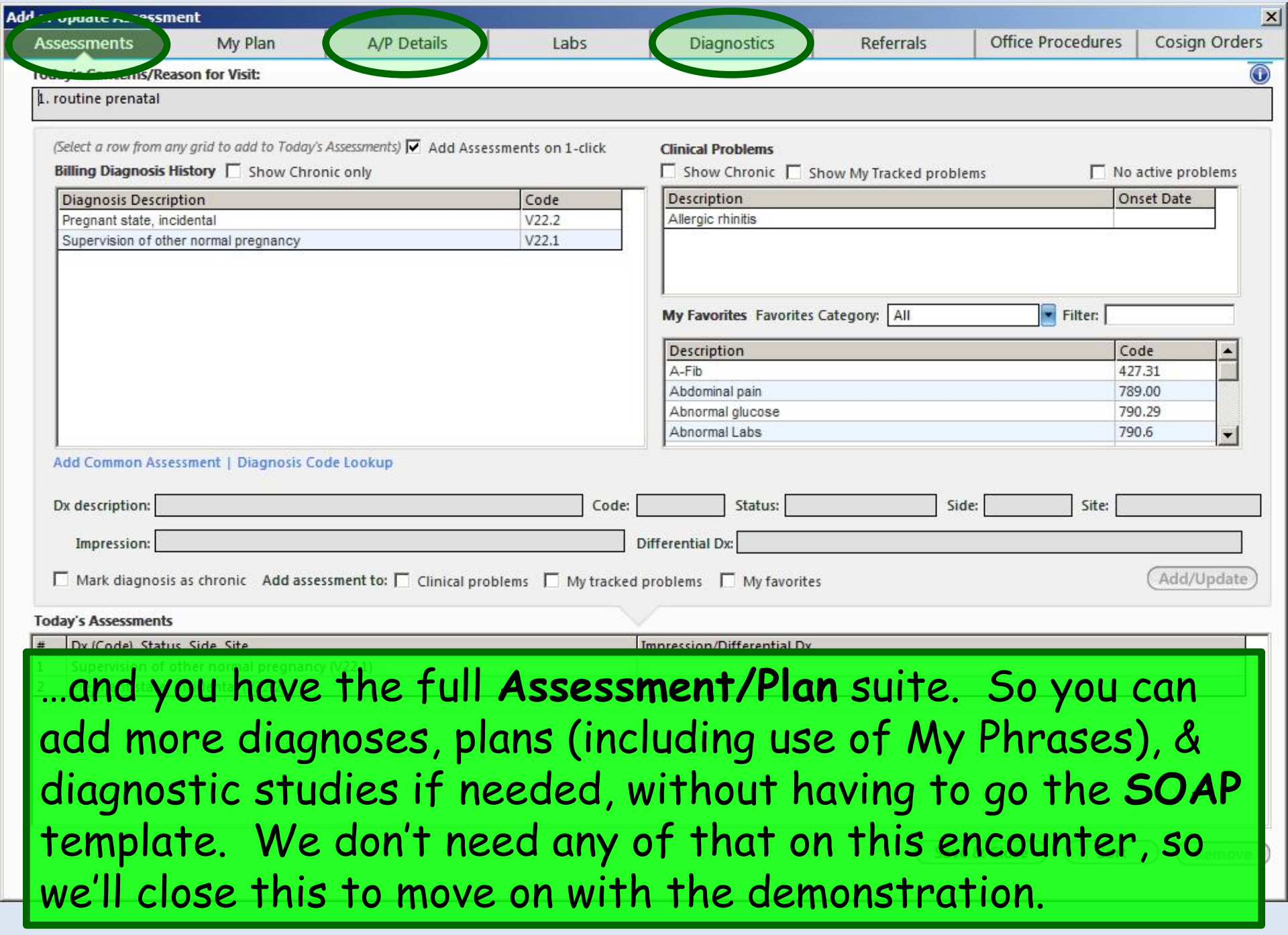

Create New Lab Order for Quagmire, Didre
Select the Supervision of pregnancy… diagnosis.
If it's not already in your personal favorites, display Practice Favorites & select Prenatal Lab Initial USA, & any other labs you need.
Specimen Charge
Select Diagnosis
Patient
This Order
Search All...
Check Today's
Supervision of other normal pregnancy (V22.1)
Select Tests
Show Favorites
Category
This Order
Search All...
Practice Favorites
Anticardiolipin Ab, IgG/M, Qn
Antinuclear Antibodies Direct
Basic Metabolic Panel (8) (322758)
Calcium, Ionized, Serum (004804)
Calcium, Serum (001016)
Calcium+Calcium, Ionized (058099)
CBC With Differential/Platelet
CD4/CD8 Ratio Profile (505271)
Chlamydia/GC Amplification (183194)
Comp. Metabolic Panel (14) (322000)
Creatine Kinase,Total,Serum (001362)
Ferritin, Serum
FSH and LH (028480)
Fungus Culture With Stain (188243)
H. pylori Breath Test (180836)
H. pylori IgG, Abs (162289)
Hepatitis A (Prof V) (028928)
Hepatitis B Virus (Profile VI) (058545)
HIV 1/0/2 Ab Prelim ref Western Blot
HIV 1/O/2 Abs, Qual (162100)
HLA B5701 Test (006926)
Iron and TIBC (001321)
Lead, Blood (Pediatric) (717009)
Lipid Panel (303756)
Lithium (Eskalith), Serum (007708)
Measles/Mumps/Rubella Immunity
Microalb/Creat Ratio, Randm Ur
Occult Blood, Fecal, IA (182949)
Ova + Parasite Exam (008623)
Prenatal Lab Initial USA (283522)
Prothrombin Time (PT) (005199)
PTH, Intact (015610)
Rheumatoid Arthritis Factor (006502)
RNA, Real Time PCR (Non-Graph)
RPR (006072)
Sedimentation Rate-Westergren
SEND TO PSC (977995)
Systemic Lupus Profile A (056499)
T4 and TSH (024026)
Testosterone, Serum (004226)
Testosterone,Free and Total (140103)
Thyroid Antibodies (006684)
Trichomonas Culture (180950)
TSH (004259)
Uric Acid, Serum (001057)
Urinalysis, Routine (003038)
Urine Culture, Routine (008847)
VAP Cholesterol Profile (804500)
Varicella-Zoster V Ab, IgG (096206)
Vitamin B12 and Folate (000810)
Vitamin D, 25-Hydroxy (081950)
Assign Diagnosis to Selected Tests
Check Medical Necessity
Delete Failed Tests
Delete Test
Assign All Diagnosis
Unassign All Diagnosis
Set Schedule
V22.1
Prenatal Lab Initial USA (283522)
ABN Options
When done click Save & Send.
General
Select Tests
Test Details
Save & Task...
Save & Fax...
Save & Print
Save & Send
Save

Click the Print dropdown arrow & then Print Preview.



Select a local printer & print the order. Then close the **Order Module** & navigate back to the **Prenatal Detail Tab**.


06/19/2014 10:16 PM : "USA Prenatal Detail 836"
Assessment/Plan
1. Assessment Supervision of other normal pregnancy (V22.1).
Plan Orders Prenatal Lab Initial USA to be performed. The patient had the following test(s) completed today Urinalysis, dipstick.
2. Assessment Pregnant state, incidental (V22.2).
Plan Orders The patient had the following test(s) completed today Urine pregnancy test.
Resident-Attending discussion took place
Attending saw patient
Consent
Generate Document
Prenatal Record
Procedure Scheduling
Add/Update
Remove
Prenatal record sent to L&D at:
Return to office: 4 weeks
Follow - up with:
Save
Orders
View of All
Labs (1)
Diagnostics
Office Servi
View Immu
Procedures
Referrals
Add
Edit
Communication
Provider Comm.
Meds
Procedures
Patient Plan
Visit Document
Document Library
EM Coding
Dictation
Here we've navigated farther down the Prenatal Detail tab. Notice you have an Assessment/Plan section similar to that on non-obstetrical encounters. So if you need to add more diagnoses or plans, you can click Add/Update…



...and you have the full **Assessment/Plan** suite. So you can add more diagnoses, plans (including use of My Phrases), & diagnostic studies if needed, without having to go the **SOAP** template. We don't need any of that on this encounter, so we'll close this to move on with the demonstration.

06/19/2014 10:16 PM : "USA Prenatal Detail 836"

Assessment/Plan

1.	Assessment	Supervision of other normal pregnancy (V22.1).
	Plan Orders	Prenatal Lab Initial USA to be performed. The patient had the following test(s) completed today Urinalysis, dipstick.
2.	Assessment	Pregnant state, incidental (V22.2).
	Plan Orders	The patient had the following test(s) completed today Urine pregnancy test.

☐ Resident-Attending discussion took place
☐ Attending saw patient

Consent | Generate Document | Prenatal Record | Procedure Scheduling | Add/Update | Remove

Prenatal record sent to L&D at: / / Return to office: 4 weeks / / Follow - up with: Save

Orders

Lab/Radiology Order Processing | Order Management | Immunizations | Standing Orders | Task

- View of All Orders
- Labs (1)
- Diagnostics
- Office Services (2)
- View Immunizations Due
- Procedures
- Referrals

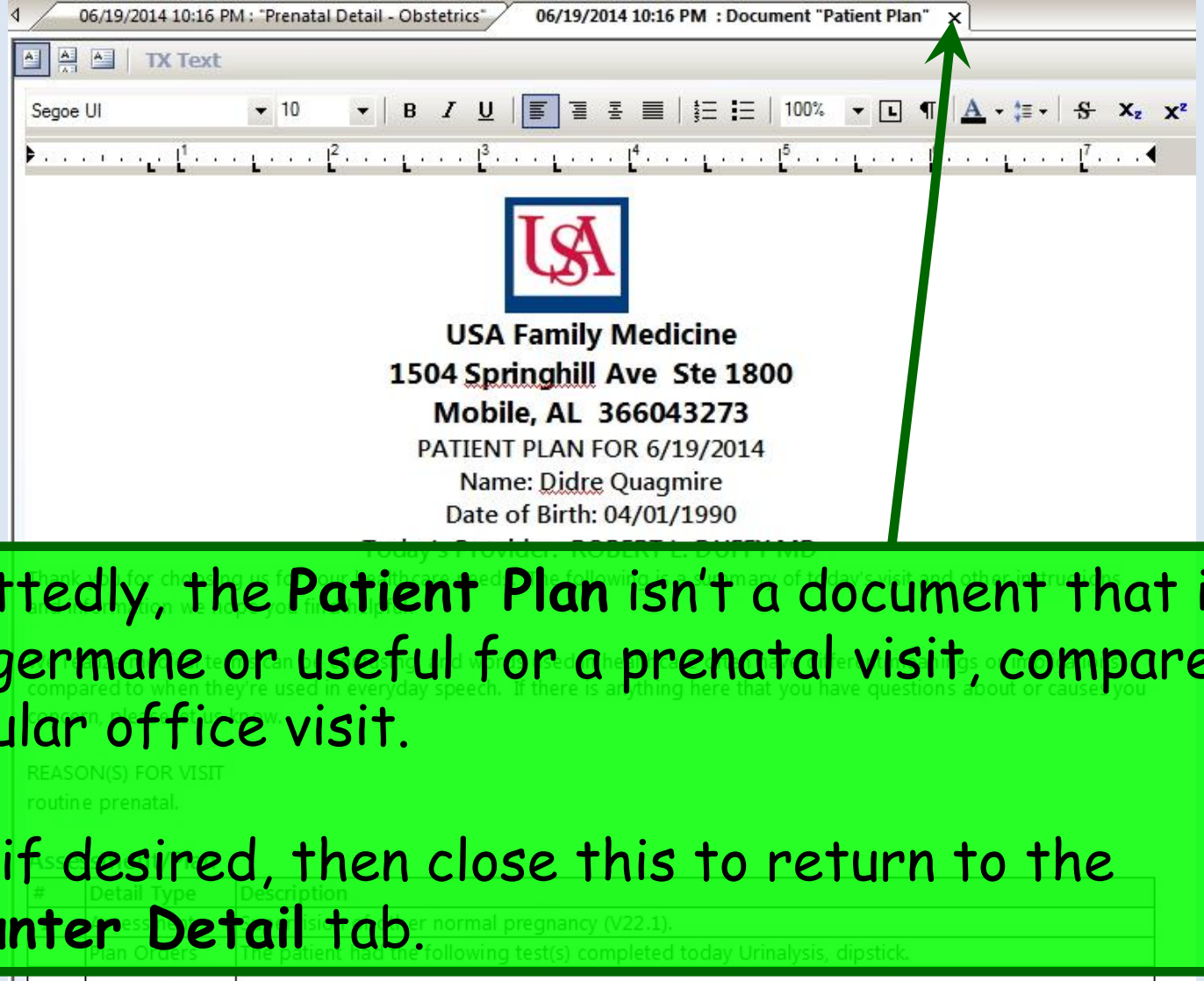
Status	Ordered	Order	Timeframe	Comments
ordered	06/21/2014	Prenatal Lab Initial USA		
completed	06/20/2014	Urine pregnancy test		
completed	06/20/2014	anticipated course of prenatal care		
completed	06/20/2014	exercise		
completed	06/20/2014	HIV and other routine prenatal tests		

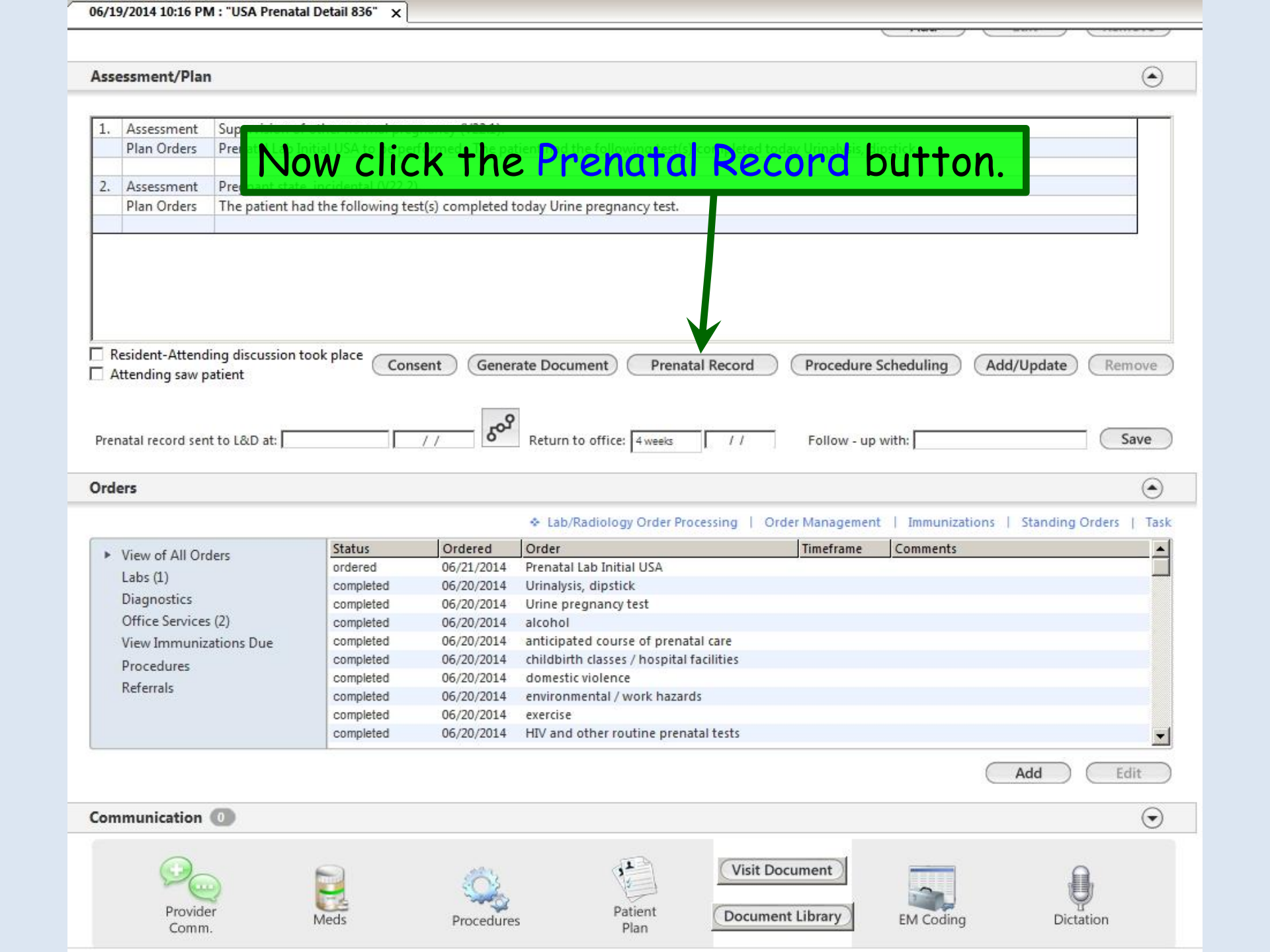
From here you can generate the Patient Plan. Click the icon.

Add | Edit

Communication 0

Provider Comm. | Meds | Procedures | Patient Plan | Visit Document | Document Library | EM Coding | Dictation


06/19/2014 10:16 PM : "Prenatal Detail - Obstetrics"
06/19/2014 10:16 PM : Document "Patient Plan"
TX Text
Segoe UI
10
100%
USA Family Medicine
1504 Springhill Ave Ste 1800
Mobile, AL 366043273
PATIENT PLAN FOR 6/19/2014
Name: Didre Quagmire
Date of Birth: 04/01/1990
Admittedly, the Patient Plan isn't a document that is all that germane or useful for a prenatal visit, compared to a regular office visit.
Print if desired, then close this to return to the Encounter Detail tab.
REASON(S) FOR VISIT
routine prenatal.
Detail Type Description
2. Assessment Pregnant state, incidental (V22.2).
Plan Orders The patient had the following test(s) completed today Urine pregnancy test.
Medications
Please remember to bring ALL your medicines to EVERY visit with ANY doctor!
Medication Directions
Prenatal Vitamin tablet take 1 tablet by oral route every day
If this medication list does not match what you're ACTUALLY taking, or if you have any questions about your medicines,


06/19/2014 10:16 PM : "USA Prenatal Detail 836"
Assessment/Plan
1. Assessment
Plan Orders
2. Assessment
Plan Orders
The patient had the following test(s) completed today Urine pregnancy test.
Now click the Prenatal Record button.
Resident-Attending discussion took place
Attending saw patient
Consent
Generate Document
Prenatal Record
Procedure Scheduling
Add/Update
Remove
Prenatal record sent to L&D at:
Return to office:
4 weeks
Follow - up with:
Save
Orders
Lab/Radiology Order Processing | Order Management | Immunizations | Standing Orders | Task
View of All Orders
Labs (1)
Diagnostics
Office Services (2)
View Immunizations Due
Procedures
Referrals
Status | Ordered | Order | Timeframe | Comments
ordered | 06/21/2014 | Prenatal Lab Initial USA
completed | 06/20/2014 | Urinalysis, dipstick
completed | 06/20/2014 | Urine pregnancy test
completed | 06/20/2014 | alcohol
completed | 06/20/2014 | anticipated course of prenatal care
completed | 06/20/2014 | childbirth classes / hospital facilities
completed | 06/20/2014 | domestic violence
completed | 06/20/2014 | environmental / work hazards
completed | 06/20/2014 | exercise
completed | 06/20/2014 | HIV and other routine prenatal tests
Add
Edit
Communication 0
Provider Comm.
Meds
Procedures
Patient Plan
Visit Document
Document Library
EM Coding
Dictation

NEXTGEN
HEALTHCARE INFORMATION SYSTEMS

USA Health Services Foundation
1504 Springhill Avenue
Mobile, AL 36604
251-434-3626

PRENATAL RECORD

DATE: 6/21/2014 PATIENT: **Quagmire, Didre**	**Physical Location Address**
HOSPITAL OF DELIVERY:	USA Family Medicine
NEWBORN'S PHYSICIAN:	1504 Springhill Ave
PRIMARY PROVIDER /GROUP: **USA Health Services Foundation**	Mobile, 366043273
PRACTICE ADDRESS: **1504 Springhill Avenue Mobile, AL 36604**	251-434-3475
FINAL EDD: **01/08/2015** PATIENT ACCT ID: **9000063961**	

DOB: **04/01/1990** AGE: **24 year old**	Race: **Black or African American**		
MARITAL STATUS:	**Married**	ADDRESS:	
OCCUPATION:			
EDUCATION LEVEL:	**high school**		
LANGUAGE:	**English**	INSURANCE:	**AFLAC**
SUPPORT PERSON /PARTNER:	PH:	POLICY NO:	**333445555**
FATHER OF BABY:	PH:		

It takes a few moments, but this generates a summary of the visit formatted very much like the ACOG form. This takes the place of generating any other type of visit note for prenatal visits.
After it has been generated, close the report to return to the Prenatal Detail Tab.

PAST PREGNANCIES

Preg	Date	GA	Labor	Weight	Sex	Delivery Type	Anesthesia	Laceration
1	March 2008	40W0D		6lb(s) 8 oz	M	NSVD	Epidural	
2	July 2009	12W0D						

06/19/2014 10:16 PM : "USA Prenatal Detail 836"

Assessment/Plan

1.	Assessment	Supervision of other normal pregnancy (V22.1).
	Plan Orders	Prenatal Lab Initial USA to be performed. The patient had the following test(s) completed today Urinalysis, dipstick.
2.	Assessment	Pregnant state, incidental (V22.2).
	Plan Orders	The patient had the following test(s) completed today Urine pregnancy test.

Resident-Attending discussion took place
Attending saw patient

Consent | Generate Document | Prenatal Record | Procedure Scheduling | Add/Update | Remove

Prenatal record sent to L&D at: / / Return to office: 4 weeks / / Follow - up with: Save

Orders

Lab/Radiology Order Processing | Order Management | Immunizations | Standing Orders | Task

- View of All Orders
- Labs (1)
- Diagnostics
- Office Services (2)
- View Immunizations Due
- Procedures
- Referrals

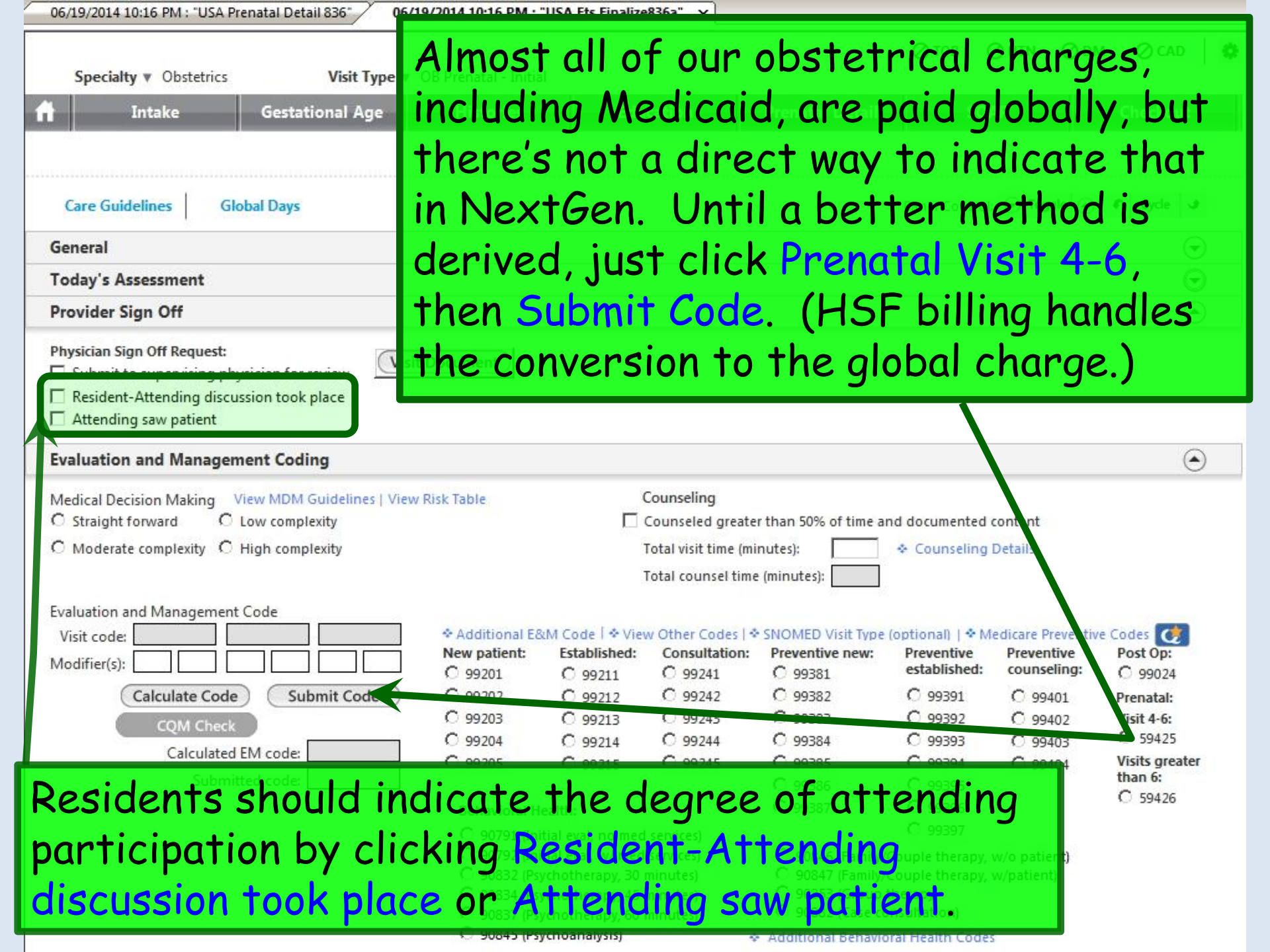
Status	Ordered	Order	Timeframe	Comments
ordered	06/21/2014	Prenatal Lab Initial USA		
completed	06/20/2014	Urinalysis, dipstick		
completed	06/20/2014	Urine pregnancy test		
completed	06/20/2014	alcohol		
completed	06/20/2014	anticipated [illegible] of prenatal care		
completed	06/20/2014	[illegible]		
completed	06/20/2014	domestic violence		
completed	06/20/2014	environmental / work hazards		
completed	06/20/2014	exercise		
completed	06/20/2014	HIV and other routine prenatal tests		

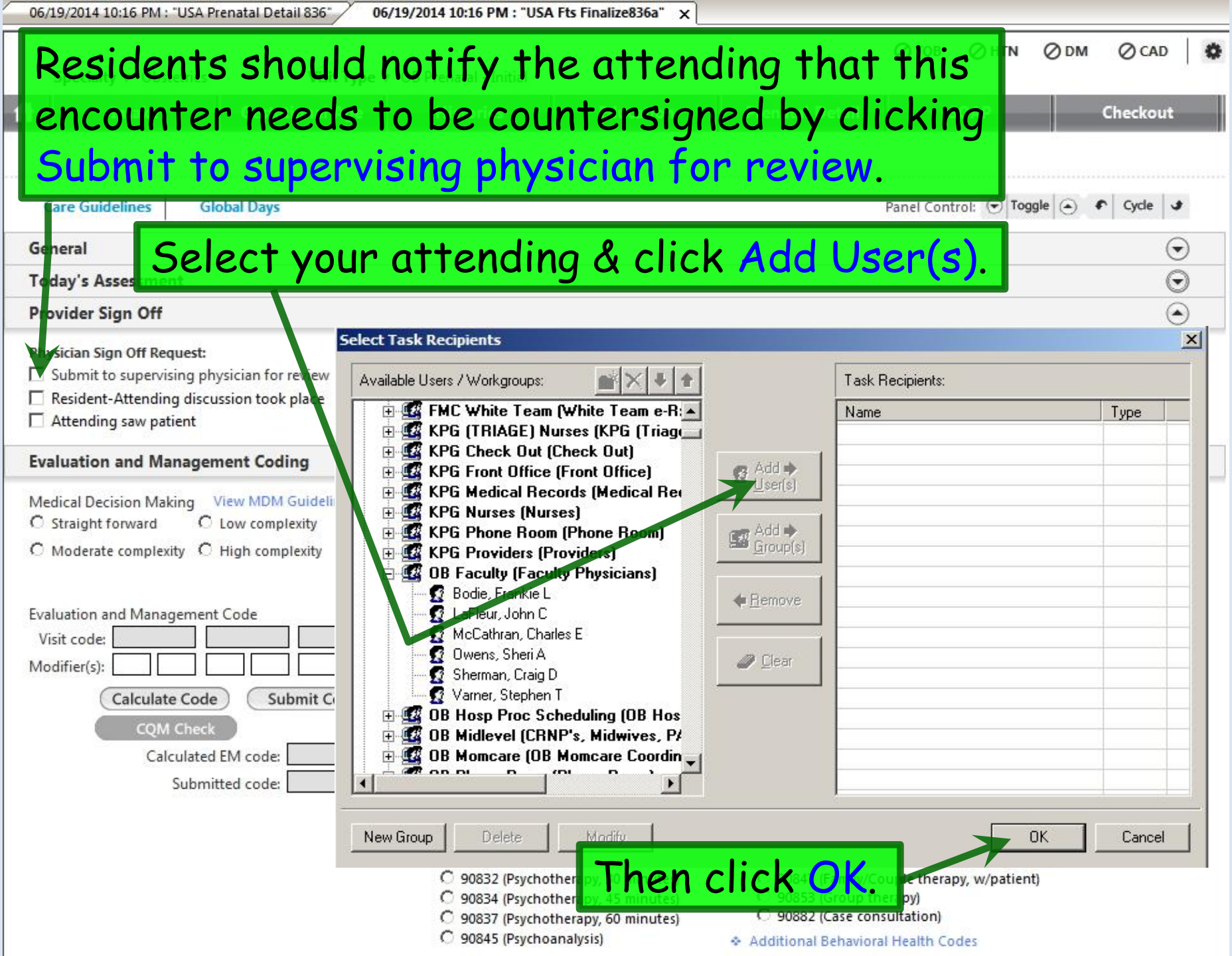
Add | Edit

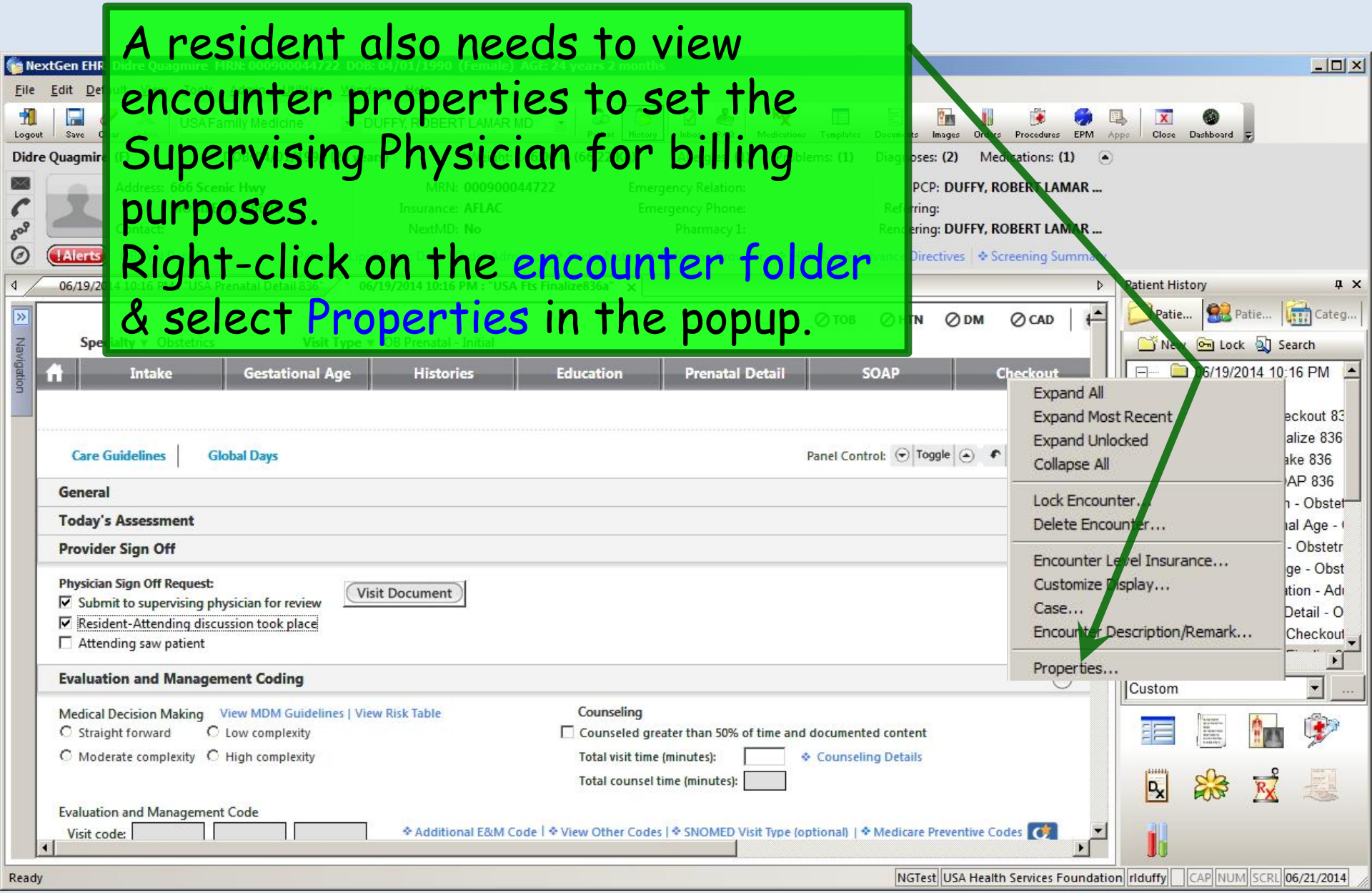
Now click the EM Coding button.

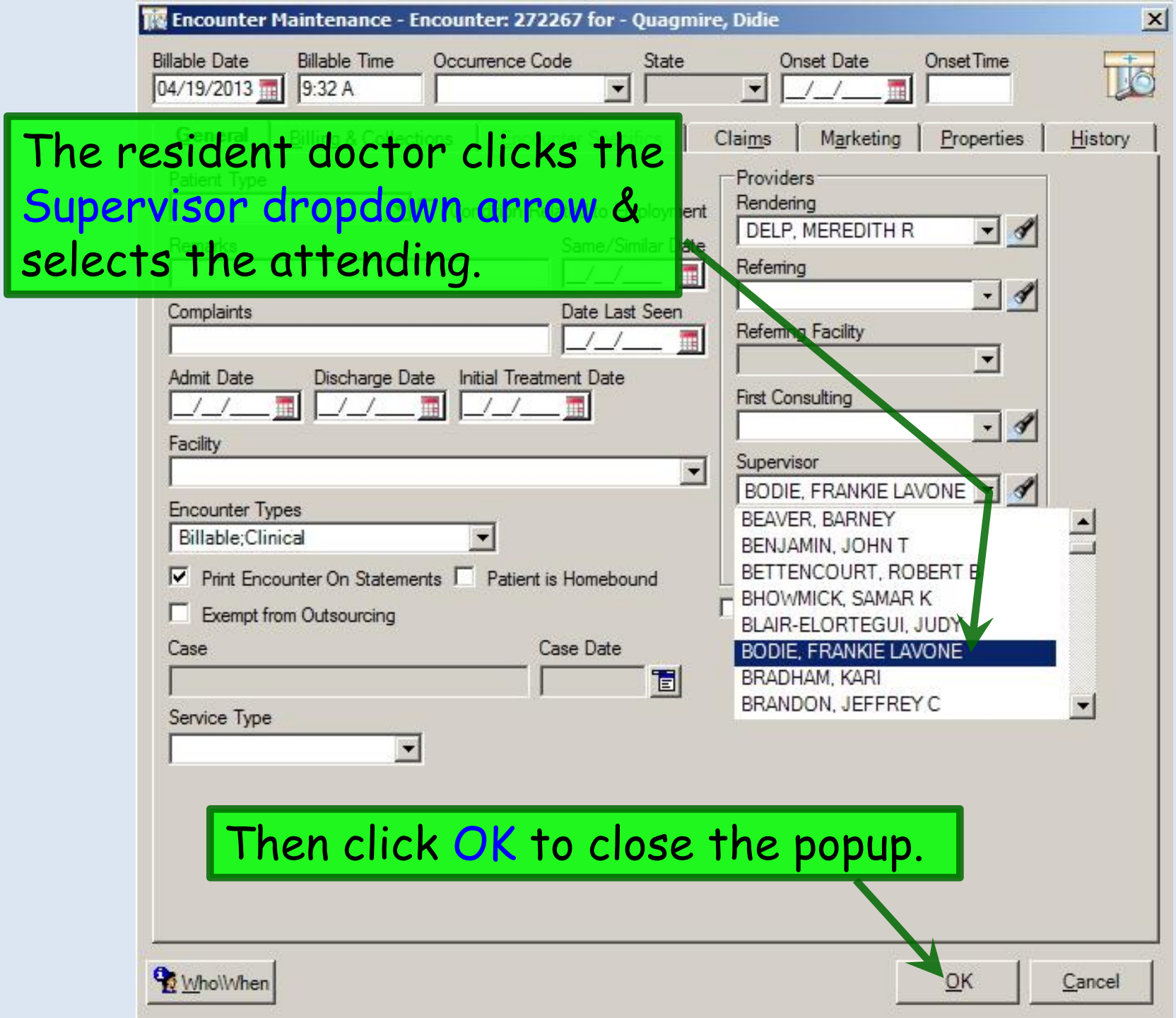
Communication 0

Provider Comm. | Meds | Procedures | Patient Plan | Visit Document | Document Library | EM Coding | Dictation


Almost all of our obstetrical charges, including Medicaid, are paid globally, but there's not a direct way to indicate that in NextGen. Until a better method is derived, just click Prenatal Visit 4-6, then Submit Code. (HSF billing handles the conversion to the global charge.)
Resident-Attending discussion took place
Attending saw patient
Evaluation and Management Coding
Submit Code
Residents should indicate the degree of attending participation by clicking Resident-Attending discussion took place or Attending saw patient.

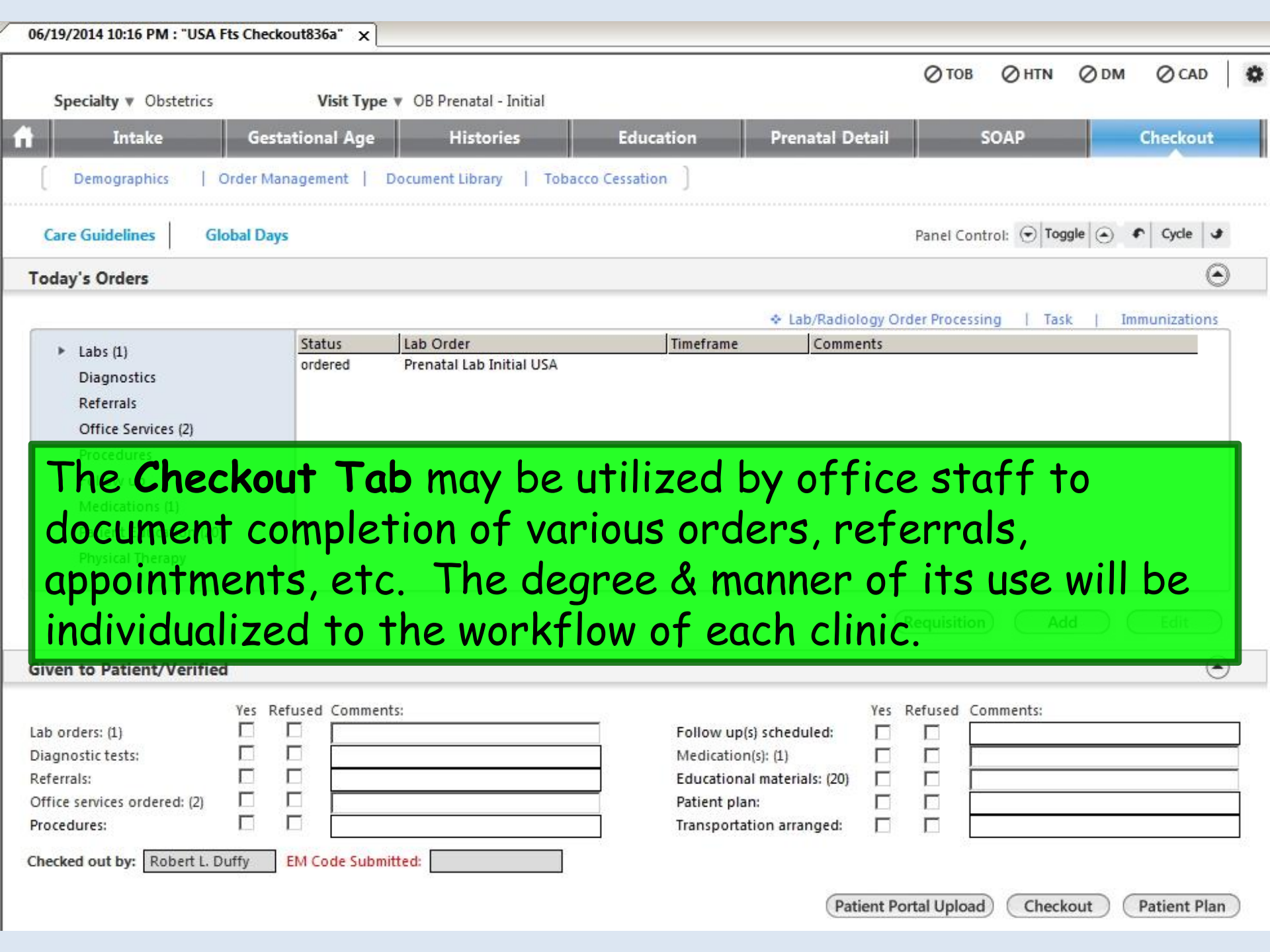

Residents should notify the attending that this encounter needs to be countersigned by clicking Submit to supervising physician for review.
Select your attending & click Add User(s).
Then click OK.
06/19/2014 10:16 PM : "USA Prenatal Detail 836"
06/19/2014 10:16 PM : "USA Fts Finalize836a"
HTN
DM
CAD
Checkout
Care Guidelines
Global Days
Panel Control:
Toggle
Cycle
General
Today's Assessment
Provider Sign Off
Physician Sign Off Request:
Submit to supervising physician for review
Resident-Attending discussion took place
Attending saw patient
Evaluation and Management Coding
Medical Decision Making
View MDM Guideli
Straight forward
Low complexity
Moderate complexity
High complexity
Evaluation and Management Code
Visit code:
Modifier(s):
Calculate Code
Submit C
CQM Check
Calculated EM code:
Submitted code:
Select Task Recipients
Available Users / Workgroups:
FMC White Team (White Team e-R
KPG (TRIAGE) Nurses (KPG (Triag
KPG Check Out (Check Out)
KPG Front Office (Front Office)
KPG Medical Records (Medical Rec
KPG Nurses (Nurses)
KPG Phone Room (Phone Room)
KPG Providers (Providers)
OB Faculty (Faculty Physicians)
Bodie, Frankie L
LaPleur, John C
McCathran, Charles E
Owens, Sheri A
Sherman, Craig D
Varner, Stephen T
OB Hosp Proc Scheduling (OB Hos
OB Midlevel (CRNP's, Midwives, PA
OB Momcare (OB Momcare Coordin
Add User(s)
Add Group(s)
Remove
Clear
Task Recipients:
Name
Type
New Group
Delete
Modify
OK
Cancel
90832 (Psychotherapy
90834 (Psychotherapy, 45 minutes)
90837 (Psychotherapy, 60 minutes)
90845 (Psychoanalysis)
90853 (Group therapy)
90882 (Case consultation)
Additional Behavioral Health Codes


A resident also needs to view encounter properties to set the Supervising Physician for billing purposes.
Right-click on the encounter folder & select Properties in the popup.
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Care Guidelines
Global Days
Panel Control:
Toggle
General
Today's Assessment
Provider Sign Off
Physician Sign Off Request:
Submit to supervising physician for review
Resident-Attending discussion took place
Attending saw patient
Visit Document
Evaluation and Management Coding
Medical Decision Making
View MDM Guidelines | View Risk Table
Straight forward
Low complexity
Moderate complexity
High complexity
Counseling
Counseled greater than 50% of time and documented content
Total visit time (minutes):
Counseling Details
Total counsel time (minutes):
Evaluation and Management Code
Visit code:
Additional E&M Code | View Other Codes | SNOMED Visit Type (optional) | Medicare Preventive Codes
Expand All
Expand Most Recent
Expand Unlocked
Collapse All
Lock Encounter...
Delete Encounter...
Encounter Level Insurance...
Customize Display...
Case...
Encounter Description/Remark...
Properties...
Patient History
Lock
Search
Custom
Ready



The resident doctor clicks the Supervisor dropdown arrow & selects the attending.

Then click OK to close the popup.


06/19/2014 10:16 PM : "USA Fts Checkout836a"
TOB
HTN
DM
CAD
Specialty ▼ Obstetrics
Visit Type ▼ OB Prenatal - Initial
Intake
Gestational Age
Histories
Education
Prenatal Detail
SOAP
Checkout
Demographics | Order Management | Document Library | Tobacco Cessation
Care Guidelines | Global Days
Panel Control: Toggle Cycle
Today's Orders
Lab/Radiology Order Processing | Task | Immunizations
Labs (1)
Diagnostics
Referrals
Office Services (2)
Status
Lab Order
Timeframe
Comments
ordered
Prenatal Lab Initial USA
The Checkout Tab may be utilized by office staff to document completion of various orders, referrals, appointments, etc. The degree & manner of its use will be individualized to the workflow of each clinic.
Given to Patient/Verified
Yes
Refused
Comments:
Lab orders: (1)
Diagnostic tests:
Referrals:
Office services ordered: (2)
Procedures:
Follow up(s) scheduled:
Medication(s): (1)
Educational materials: (20)
Patient plan:
Transportation arranged:
Checked out by: Robert L. Duffy
EM Code Submitted:
Patient Portal Upload
Checkout
Patient Plan

This concludes the NextGen Prenatal Intake Visit demonstration.

How much deeper would the ocean be without sponges?

R. Lamar Duffy, M.D.
Associate Professor
University of South Alabama
College of Medicine
Department of Family Medicine