



QR Tips

March 2015

Encounter Document Reminders

Remember to check the following boxes when completing paper versions of the ED.

(For clinics currently using the County Electronic Health Record, these processes will be automated.)

The image shows a screenshot of a medical encounter form. Several fields are highlighted with colored boxes and arrows:

- Trauma:** A red box highlights the 'Trauma' dropdown menu, which is set to 'Yes'.
- Substance Abuse:** A blue box highlights the 'Substance Abuse' dropdown menu, which is set to 'Yes'.
- Date of Doc:** A green box highlights the 'Date of Doc' field, which contains '03/17/2015'.
- CPT Code:** A blue box highlights the 'CPT' dropdown menu, which is set to '305.50'.

Other visible fields include: Encounter Type (Trauma), Home locations, Site Locations, Host Clinic Locations, Date ED entered, OT Initials, Date ED Corrected, OT Initials, ENCOUNTER LOCATION, Enter address, CPT MODIFIER I (M61), CPT MODIFIER II (None), CPT MODIFIER III (None), REPEAT SERVICES CORRECTIONS, and a 'PROGRESS NOTE' section at the bottom.

- If the client has a **history of trauma**, indicate “YES” on the ED.
- Indicate if the client has a **substance use disorder**. For CYBH clinics still using pdf ED-PN if you select “Yes” a **prompt** will appear reminding you to select a substance use code. If a substance abuse code is not selected a **CSI error** will result.

This process is automated in CYBH clinics with the County EHR.

- For clinics using the pdf EN/PN always indicate the **date of documentation**. If the date of service and the date of documentation **are the same date** indicate “S” in the “Date of Doc” field.

For clinics currently using the County EHR this process is automated provided date of service in the **registration screen** and the dates of the service in the **documentation widget** are the same. The system will recognize that the service is documented on the day it is entered into Powerchart. See below for an example of correct entry in Powerchart.

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BH Outpatient Summary

ztest, NLCM5c Male 31 years DOB: 09/23/1983 MRN: 1000-67-2790 FIN: 100-0106-03055 Isolation: Visit Reason:

Allergies (0) +

Vitals & Client Info Updates

Last 13 months for all visits

No results found

Labs

Diagnoses & Problems

All Visits

Classification: All

Add new as: Problems

Service Documentation

Date of Service: 06-Mar-2015

Type of Service: Medication Service

Submit

EHR: BHS Clinician Pre-Reg

Street Address: Apt/Unit/Suite ZIP Code City State County
B15 N Sycamore 92701 SANTA ANA CA Orange

Home Address: Street Address Apt/Unit/Suite Zipcode City State
B15 N Sycamore 92701 SANTA ANA CA

Home Phone Admission Living Arrangement Cal/Alternate Phone Business Phone Confidential Home Phone
No Support Req in Hous...

Encounter Information

Encounter Type	Intended Encounter Type	Pre-Reg Date	Pre-Reg Time	Division	Program Specialty	Facility	Building	Site/Unit	Place of Service	Medical Service
Clinician Pre-Reg	Home Visit	10/06/2014	14:19	AMHS	AMHS Acute	AMHS WEST	AMHS WEST TEAM 1	AMHS WEST TEAM 1u	Private Residence	01 Adult

Referral Source: Self Service Chief: Test, SC 1

Legal

2014	October						
Su	Mo	Tu	We	Th	Fr	Sa	
29	30	1	2	3	4		
5	6	7	8	9	10	11	
12	13	14	15	16	17	18	
19	20	21	22	23	24	25	
26	27	28	29	30	31	1	
2	3	4	5	6	7	8	

Client's Relationship to Conservator

DO NOT add NEW public or private conservators to the system. Please only use PAPG conservators that have PAPG acronym in their name. Please contact IRIS Liaison team to add new conservators.

Ready OK Cancel

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