

## EMR Quick Reference Guide

### Infusions – Newborn Services

NBS will be using EMR for **Intermittent Infusions** (those with an associated frequency). Continuous infusions and Fluid Balance Management remain on current paper infusion charts.

The following NBS ordersets have all been updated as part of the Infusions Enhancement Project:

- NEO Pre-Term
- NEO Sepsis
- Gentamicin NEO
- Vancomycin NEO

Additionally, a new orderset has been created:

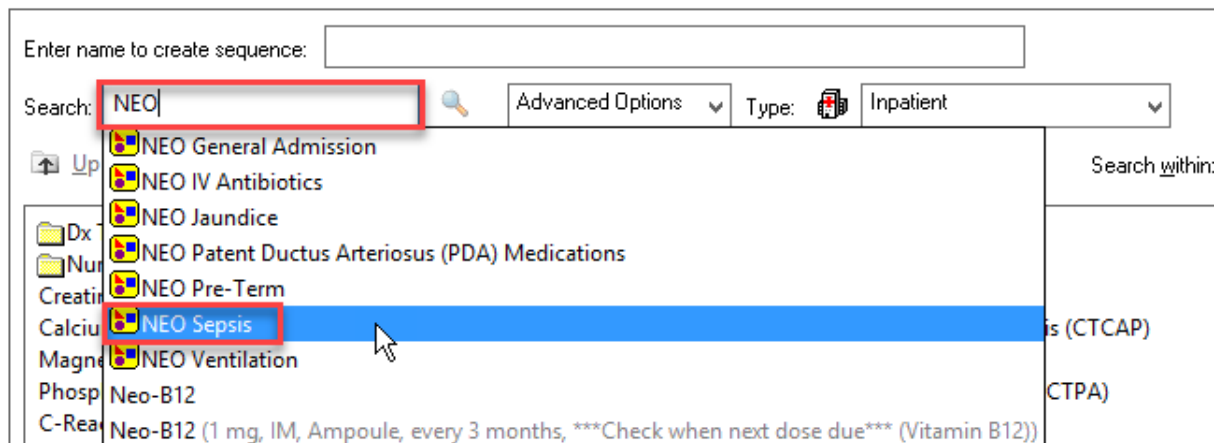
- NEO IV Antibiotics


This Quick Reference Guide covers:

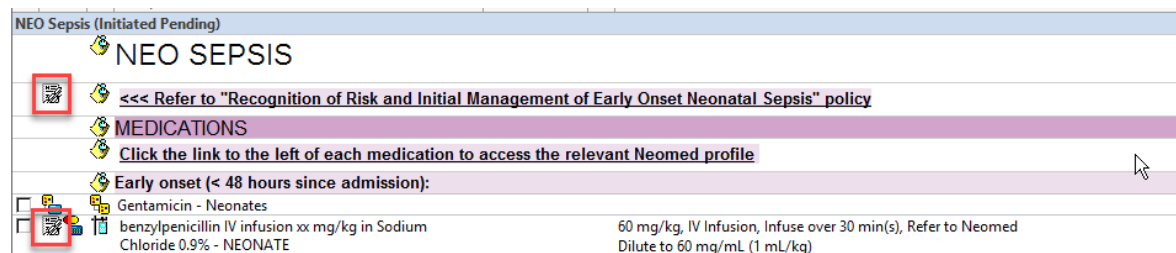
- [Ordering NBS Intermittent Infusions](#)
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### Ordering Intermittent Infusions

1. Select **Orders** and **+Add**
2. Search for and select the appropriate orderset.



3. The orderset will open. The  symbols indicate a link to related policies or Neomed medication profiles.



4. Tick the required intermittent infusion order.

MEDICATIONS		
Click the link to the left of each medication to access the relevant Neomed profile		
Early onset (< 48 hours since admission):		
<input type="checkbox"/>	Gentamicin - Neonates	
<input checked="" type="checkbox"/>	benzylpenicillin IV infusion xx mg/kg in Sodium Chloride 0.9% - NEONATE	60 mg/kg, IV Infusion, Infuse over 30 min(s), Refer to Neomed Dilute to 60 mg/mL (1 mL/kg)
<input type="checkbox"/>	cefOTAXIME IV infusion 50 mg/kg in Water for Injection - NEONATE	50 mg/kg, IV Infusion, Infuse over 30 min(s), Refer to Neomed Dilute to 100 mg/mL (0.5 mL/kg)
Late onset (> 48 hours since admission):		
<input type="checkbox"/>	Vancomycin IV: Neonates	
<input type="checkbox"/>	flucloxacillin IV infusion 50 mg/kg in Sodium Chloride 0.9% - NEONATE	50 mg/kg, IV Infusion, Infuse over 30 min(s), Refer to Neomed Dilute to 50 mg/mL (1 mL/kg) or weaker
<input type="checkbox"/>	cefOTAXIME IV infusion 50 mg/kg in Water for Injection - NEONATE	50 mg/kg, IV Infusion, Infuse over 30 min(s), Refer to Neomed Dilute to 100 mg/mL (0.5 mL/kg)
<input type="checkbox"/>	aciclovir IV infusion 20 mg/kg in Sodium Chloride 0.9%, 8 hourly - NEONATE	20 mg/kg, IV Infusion, 8 hourly, Infuse over 60 min(s), Refer to Neomed Dilute to 5 mg/mL (4 mL/kg)

5. The EMR dosage calculator will launch. Review and click **Apply Dose**.

**benzylpenicillin sodium (additive)**

Dose Values

1) Target dose: 60 mg/kg

2) Calculated dose: 192 mg

3) Dose Adjustment: 192 mg 100 %

4) Final dose: 192 mg 60 mg/kg

5) Standard dose: mg mg/kg

6) Rounding rule: No rounding

7) Adjust Reason:

8) Route: IV Infusion

Dose Forms Order Comments

Dilute to 60 mg/mL (1 mL/kg)

Reference Data

Date of birth: 02/10/2020 (1 Months)

Sex: F

Ethnicity: No

Height: cm Source: Manually entered

Actual weight: 3.2 kg Source: 4/11/2020 00:02 3.200 kg Weight Measured

Adjusted weight: 3.2 kg Adjustment: Actual (no adjustment)

Serum creatinine: umol/L Source: Manually entered

CrCl (est.): mL/min/1.73m2 Algorithm: Schwartz - full term Missing data

Body surface area: Algorithm: Mosteller Missing data

Buttons: Formulae... Standard Dose Reference Apply Standard Dose **Apply Dose** Cancel

6. The Details window will open. Click on the X next to the diluent. This will both remove the diluent and make the volume field non-mandatory to complete. It will then be the responsibility of the nurse to enter the diluent details via the MAR charting window.

Details for benzylpenicillin sodium (additive) + Sodium Chloride 0.9% infusion mL					
Details Ingredient Details Order Comments Offset Details Diagnoses					
Ingredients	Dose	Rate	Infuse Over	Frequency	Duration
benzylpenicillin sodium (additive)	192 mg		30 min(s)		
<input checked="" type="checkbox"/> Sodium Chloride 0.9% infusion	mL				
Total Volume		mL			

- Click on **Order Comments** and delete the dilution instructions to avoid confusion.

▼ Details for **benzylpenicillin sodium (additive) + Sodium Chloride 0.9% infusion mL**

Details Ingredient Details **Order Comments** Offset Details Diagnoses

Order comments

Dilute to 60 mg/mL (1 mL/kg)

Target Dose: benzylpenicillin sodium (additive) 60 mg/kg (Actual Dose: 60 mg/kg) 04/11/2020 00:12:10

- Return to **Ingredient Details** and select the dropdown arrow to select an appropriate frequency.

▼ Details for **benzylpenicillin sodium (benzylpenicillin sodium (additive))**

Details Ingredient Details **Order Comments** Offset Details Diagnoses

Ingredients	Dose	Rate	Infuse Over	Frequency	Duration
benzylpenicillin sodium (additive)	192 mg		30 min(s)		
Total Volume					
mL					

- Click **Details** to enter a mandatory indication.

▼ Details for **benzylpenicillin sodium (additive) + Sodium Chloride 0.9% infusion 3.2 mL**

Details Ingredient Details **Order Comments** Offset Details Diagnoses

Strength dose: 192 mg See Ingredients Tab

Strength dose unit: See Ingredients Tab

Route of administration: IV Infusion

Drug Form: [Dropdown]

PRN:  Yes  No

PRN reason: [Dropdown]

Duration: [Text]

Duration unit: [Dropdown]

Special Instructions: Refer to Neomed

Approval Number: [Text]

Priority: Routine

Pretext dose: See Ingredients Tab

\*Frequency: 12 hourly

Max dose per 24 hours: [Text]

\*Indication: Sepsis

First Dose Date / Time: [Text]

Stop type: [Dropdown]

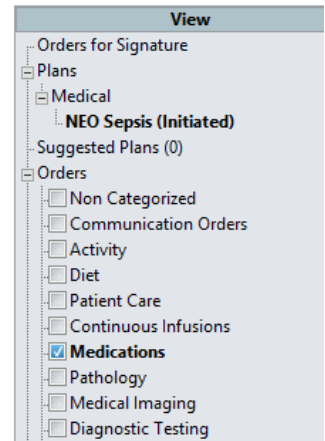
- Click **Orders for Signature**, review order sentence, and Sign.
- Review the MAR/MAR Summary. Intermittent infusions will live under the “Scheduled” section.

Scheduled	08/11/2020 18:00	08/11/2020 18:00
<p><b>benzylpenicillin sodium (benzylpenicillin sodium (additive))</b>            192 mg, IV Infusion, 12 hourly, Infuse over 30 min(s), Indication: sepsis, Refer to Neomed, First dose 08/11/2020 18:00:00            Target Dose: benzylpenicillin sodium (additive) 60 mg/kg (Actual Dose: 6...            benzylpenicillin sodium</p>	192 mg Not given within 5 days.	192 mg Not given within 5 days.

### Modifying Intermittent Infusions

- Return to the **Orders** page.
- All intermittent infusions appear in the **Medications** section. They can also be found by clicking on the orderset from which they were initially ordered:

3. Right click on the intermittent infusion order and select **Modify**.



## Internal Transfers

### If a NBS patient is transferred to Children's Ward:

- It is highly unlikely that a NBS patient will be transferred to CW on anything other than an intermittent infusion (e.g. an intravenous antibiotic).
- Children's Ward Medical Officer is responsible for reviewing the MAR and any active paper infusion charts upon arrival to the ward, and for **re-ordering intermittent infusions on EMR to include the diluent and volume**, in keeping with standard Paediatric workflow.
- Children's Ward Nurse is responsible for **reconciling the NBS paper fluid balance chart onto EMR**, in keeping with standard Paediatric workflow.

### If a NBS patient is admitted via ED:

- Staff in ED will manage all medications, infusions and fluid balance on EMR for NBS patients, in keeping with standard ED workflow.
- When the patient arrives on SCN/NICU, NBS Medical Officer is responsible for reviewing the MAR, **re-ordering intermittent infusions on EMR to remove the diluent and volume**, and **re-ordering continuous infusions on paper**, in keeping with standard NBS workflow.
- ED Nurse and NBS Nurse will work together during patient handover to **reconcile the EMR fluid balance chart onto paper**.