

FirstNet – Clerical - URN / Encounter Duplicate or Wrong Encounter Process



This Quick Reference Guide will explain how to:

The process to follow in FirstNet if:

- A Duplicate URN is discovered
- Two Emergency Encounters have been created for the one patient
- Emergency Encounter added against an incorrect patient

A Duplicate URN is created during the Quick Registration Process:

Quick Registration is the process to search the EMR for an existing patient. If the patient is not found and the “Add Person” process is selected a new URN is created in the EMR and sent to iPM. Two issues may occur as a result of this process:

1. A Duplicate URN
2. The New URN did not send to iPM

A Duplicate URN

If the clerical team during the Full Registration process discovers the patient has an existing URN in iPM this means the patient now has two **URNs**. This is known as a duplicate URN.

In this instance the following process is to be followed:

- Clerical staff alert Clinical staff that the patient has a duplicate URN
- Continue care on the **current open** encounter in FirstNet
- Clerical team follow the duplicate URN process and [email duplicate.notification@wh.org.au](mailto:email_duplicate.notification@wh.org.au)
- Clinical staff to note against the patient the previous URN number

The New URN did not send to iPM

Occurs if the clerical team during the Full Registration process discovers the new URN created in FirstNet did not send to iPM. This will prevent a Full Registration from being completed and will hard stop the patient from being discharged.

In this instance the following process is to be followed:

- Clerical staff alert Clinical staff that the new URN has failed to be sent to iPM
- Log a Service Desk ticket to review the cause
- If unable to resolve issue with Service Desk:
 - Clerical staff create new patient URN in iPM, move the failed URN to the left ED with note on issue and IT job number.
 - ED Triage nurse complete Quick Registration and triage against new URN, cancel any orders against failed URN
 - Clerical team follow the duplicate URN process and [email duplicate.notification@wh.org.au](mailto:email_duplicate.notification@wh.org.au)



! Please don't re Quick Registration and Triage the patient under the other URN as this will create a duplicate encounter for the patient. Two open encounters creates a clinical risk of staff charting or ordering on the wrong encounter.

Two Emergency Encounters have been created for the same patient:

Refers to when the same patient has two open emergency encounters. This can occur if the duplicate URN process is not followed **or** the same patient is Quick Registered and Triage'd with slightly different demographic details i.e. misspelling of name.

In this instance the following process is to be followed:

- Clinical staff:
 - Check to see if any Clinical Notes/Documentation has been recorded on the incorrect encounter. If so, print any notes that may need to be transcribed into the correct ED encounter, especially if the Triage form has been completed.
 - Cancel/DC any order activity associated with the encounter
 - Discharge the incorrect encounter, in this instance using “Left at Own Risk Without Treatment” to bypass most Hard Stops (will require a Clerk Full Registration to be completed)
 - Transcribe all Orders/Clinical Notes/Documentation into new encounter and ensure times are backdated.
- Clerical staff:
 - Complete a Full Registration so the encounter can be discharged
 - Log a service desk job with details for the encounter that requires to be cancelled
 - Follow the DAC Notification Process to ensure encounter is excluded from the VEMD
 - DACTeam@wh.org.au



An Encounter has been created against an Incorrect Patient:

This scenario may occur if the incorrect patient was selected during the Quick Registration process. This encounter will need to be cancelled as the patient has not presented to the Hospital.

In this instance the following process is to be followed:

- Clinical staff:
 - Check to see if any Clinical Notes/Documentation has been recorded on the encounter. If so, print any notes that may need to be transcribed into the new ED encounter, especially if the Triage form has been completed.
 - Cancel/DC any order activity associated with the encounter
 - Discharge the incorrect encounter, in this instance using “Left at Own Risk Without Treatment” to bypass most Hard Stops (A clerk Full Registration will need to be completed)
 - Create new encounter on correct patient UR, transcribe all Orders/Clinical Notes/Documentation into new encounter and ensure times are backdated.
- Clerical staff:
 - Complete a Full Registration so the encounter can be discharged
 - Log a service desk job with details for the encounter that requires to be cancelled

Follow the DAC Notification Process to ensure encounter is excluded from the VEMD



EMR Encounter Error - Notification Process

If you believe there is an encounter issue within a patient’s visit such as an incorrectly closed encounter, duplicate encounter or open encounter that should be closed, please follow the instructions below.

Business hours (Monday to Friday 8:00AM – 4:30PM)

Please complete and submit the following form: [Encounter Error Notification Form](#)

After business hours (Monday to Friday 4:30PM - 8:00AM, and weekends)

Contact the Service Desk on extension 56777, provide information regarding the error and indicate if the issue is urgent or non-urgent (can be corrected post patient discharge).



Handy Hint – Following the below QRG’s will assist with minimising Duplicate URN and Encounter errors

- FirstNet – Quick Registration at Triage - Known/New Patient
- FirstNet - Quick Registration Unknown/Unidentifiable Patient