



■ **IDEXX Cornerstone***
Enhanced Medical Notes
and Correspondence Documents

8.3 *Participant Workbook*



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Enhanced Medical Notes and Correspondence Documents

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Introduction

COURSE DESCRIPTION

During this course (2.5 hours), managers, receptionists, or technicians will learn to efficiently set up and use document templates—used for medical notes, release forms, and other purposes—and other important documents.

PREREQUISITES

- The current version of the IDEXX Cornerstone* Practice Management System installed at the practice.
- Basic Cornerstone software navigation skills.
- Security access for setting up Cornerstone software features related to medical notes and correspondence.

GETTING STARTED

Throughout this training, you will be working in your own practice's database.

This course is most effective if you work at a Cornerstone workstation while following along in the participant workbook and completing the exercises.

TRAINING CONTENT

Content of the course includes:

- Types of Documents and Uses
- Documents and Templates—Status, Properties, and Saving
- Document Templates and Document Content Elements
- Start New Document Window
- Cornerstone Editor
- Document Defaults and Security
- Daily Planner Window
- Reports

These icons are used throughout the training to provide additional information:



Important Information: Provides critical information about the topic or procedure. Read this information carefully.



Note: Provides additional information about the topic or procedure.



Tip: Provides helpful information about the topic or procedure.



[View a snippet online demonstration](#)

When you see this image placed below a lesson name, it indicates that video snippets are available online at idexxlearningcenter.com for topics related to this lesson.

Enhanced Medical Notes and Correspondence Documents

Document Template Setup

You'll learn these important concepts in this chapter:

- **Document Template Overview**—Document template benefits, types, and sample listings of correspondence and medical notes you may want to create.
- **Windows and Features for Creating Document Templates**—Windows for selecting and modifying the document templates, including the toolbars to add elements that make the document easy to use, such as text input fields, check boxes, bookmarks, tables, and images.
- **Template Properties and Save Properties**—Options that control how a document is saved in history, managed, and printed.
- **Other Document Procedural Steps**—Other procedural steps for creating documents and correspondence.
- **Default Settings and Security**—Default settings and security settings for documents and correspondence.




DOCUMENT TEMPLATE OVERVIEW

Document templates are reusable forms used to create medical notes and client correspondence type of documents. Document templates are just like familiar word processing programs and are easy to use. The benefits of setting up templates include data entry efficiencies and consistent content among staff.

Create a print-only, correspondence, or medical note document template type.

- **Print Only** documents are considered one-time use documents and are not saved to the patient's history. Examples of print-only documents might include PetDetect* collars, vaccination schedules, or cage cards.
- **Correspondence** documents are saved to a patient's history either as the entire document or as the title only, depending on how the template was set up. Examples of correspondence documents might include consent forms, insurance forms, or health certificates.
- **Medical Note** documents accommodate routine procedures and create forms for a consistent look and content. This makes searching easier and reduces missing information. Suggestions for medical note document templates include Medical Exam, Surgery Notes, or Grooming Notes. These document templates are located on the **Medical Notes** tab on the bottom of the Patient Clipboard* window. Information in a medical note can be edited until it is finalized. After the document is finalized, it cannot be changed, but an addendum can be added

This chart shows the document types that are recorded in the patient's medical history and the icon for each one.

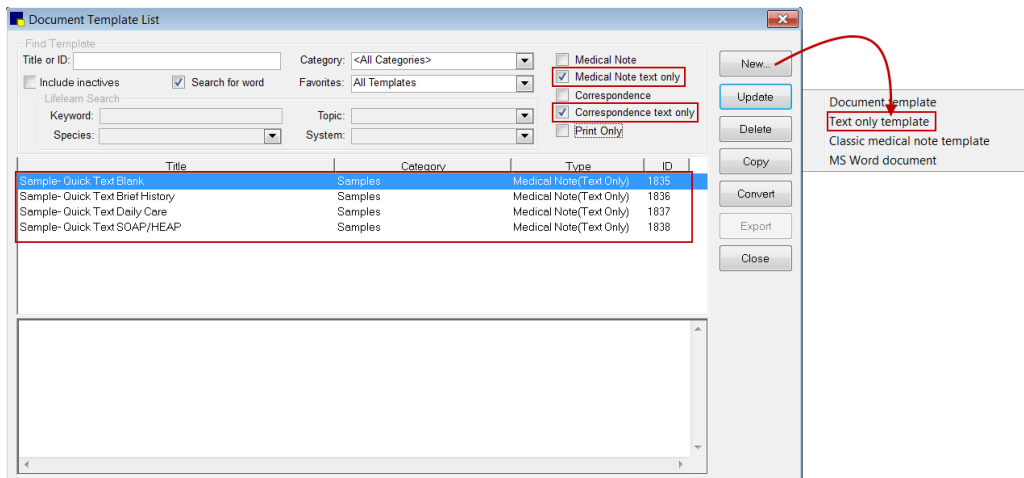
Document Type	Recorded in Medical History	Source Icon
Print Only	No	None
Correspondence—Title Only	Yes	
Correspondence—Entire Document	Yes	
Medical Notes	Yes	

Document templates can be used to create a variety of documents. Here is a list of some document templates you may want to use and create:

Client Education	Breed sheets, medication information, wellness programs, and pet's first year
Labels	Lab, cage, file, client, storage, and bar code
Certificates	Health, surgical sterilization, vaccination, puppy/kitten class, and brushing teeth
Letters	New client, returning client, collections, lost pet, medication information, newsletter, and special offers
Forms	Surgery authorization, health certificates, medication requests, discharge instructions, feeding schedules, and check-in checklists
Medical Notes	Exams, procedures, treatments, diagnostic results, health profiles, and vital signs

WINDOWS AND FEATURES FOR CREATING DOCUMENT TEMPLATES

The Document Template List window (**Lists > Documents > Templates**) includes options for finding, creating, and converting templates.



tip Four sample "Quick Text" templates are included in the Samples category.

Text Only vs. Enhanced Medical Notes—Feature Comparison Table

The following table summarizes the main features and functionality available with the two main styles of medical notes offered in Cornerstone.

Feature/Functionality	Text Only Templates	Enhanced Templates
Use a designated Medical Note Quick Text document for immediate text entry, bypassing the Start New Document window steps.	•	
Click the Color All Text button to apply a single color to all text.	•	
Apply multiple colors to select words or paragraphs throughout a document.		•
Apply text styles and formatting, such as font selection, bold, italics, indent level, numbered/bulleted lists, etc.		•
Insert check boxes, tables, and other design elements.		•
Import graphic files, photos, and logos.		•
Add standard text-based bookmarks.	•	•
Add image-based bookmarks (bookmarks that include signatures, images, etc. or bookmarks that are inserted in a table format).		•
Insert a date/time stamp.	•	•
Insert a problem description or diagnosis description.	•	•
Insert a table of problem details, diagnosis details, or vital signs.		•
Lock a medical note to create a quick “tab-through” form using text input fields.	•	•
Use spell check.	•	•
Use header/footer features.		•
Include attachments.	•	•
Include invoice items.	•	•
Use options for page setup and margins.		•
Email the client directly from the medical note	•	•
Save a document with a Draft, Tentative, or Final status and continue to add to or update the document.	•	•
Void a document.	•	•
Add an addendum to a document.	•	•
Insert an entire medical note into a correspondence document.	•	•
View full contents of the medical note on the Text tab and Medical Notes tab on the Patient Clipboard* window.	•	
View medical note in the Preview pane on the Patient Clipboard window.	•	•

To create a new text only template:

On the menu, select **Lists > Documents > Templates** and do one of the following:

- Click **New** and then select **Text only template**. Create the template and click **Save**.
- Select an existing template in the list and click **Update**. Make changes to the template and click **Save As** to create a new template and update the template properties.
- Select an existing template of the same type, click **Copy**, and enter a name for the new template in the **Description** box. Then select the copied template in the list and click **Update** to make any changes. Click **Save** to save with the existing template properties or **Save As** to change the template properties.



Click **Edit Properties** to set properties, including the title, category, and history description. You can also do this when you save the template..

TEMPLATE PROPERTIES AND SAVE OPTIONS

Setup Basics for Templates

1. Create a new template or update an existing template and click **Save As**.
2. Create/update the top of the document (title or letterhead).
3. Create/update the body of the document.
 - Develop content and layout first.
 - Identify work flow considerations: technician/doctor use and order of entries
 - Use fonts, text alignment, bullets, numbering, and colored text (formatting options found in programs like Microsoft® Word).
 - Paste text from Word and some types of PDF files (may lose original formatting).
 - Apply shading or colors to table cells to separate document sections.
4. Add elements:
 - Bookmarks
 - Text input fields
 - Check boxes
 - Links
 - Medical illustrations and pictures
 - Page breaks
5. Create/update the bottom of the document (footer or signature).
6. Set properties (description, type, practice favorite, auto finalize, default printer).



Bookmarks for Cornerstone data can be included in document templates. At the time of use, when a document with bookmarks is printed, the bookmarks are replaced with the applicable data. For example, if the client FullName bookmark is included in the template, the client's name replaces the bookmark in the document at the time of use.

Document title/header with bookmarks

Dermatology Problems Work-up
 Date: {CURRENTDATE[SHORT]}
 Pet Name: {NAME} {LASTNAME}, {AGE}, {BREED}, {CURRENTWEIGHT} {CURRENTWEIGHTUNIT}, {SEX}
 Dr. {STAFFLASTNAME} Technician:

History (Subjective):
 Does your pet itch/lick/chew/bite itself? Yes No When was the problem first noted?
 Where does your pet itch? Check all that apply. How bad is the itching? Scale 1 to 10
 Face Ears Under arms Abdomen Front Feet/Legs Mild Moderate Severe
 Back feet/Legs Lower back All over Constant Periodic
 Where did the problem begin? Is the problem seasonal?
 Does your pet have hair loss? Yes No What do you feed your pet?
 Outdoor pet? Yes No Any other pets in the house? Yes No


Physical Exam Findings:


Nose and Throat <input type="checkbox"/> Normal <input type="checkbox"/> Did Not Examine <input type="checkbox"/> Abnormal Remarks:	Mouth/Teeth/Gums <input type="checkbox"/> Normal <input type="checkbox"/> Did Not Examine <input type="checkbox"/> Abnormal Remarks:	Lymph Nodes <input type="checkbox"/> Normal <input type="checkbox"/> Did Not Examine <input type="checkbox"/> Abnormal Remarks:
Nervous System <input type="checkbox"/> Normal <input type="checkbox"/> Did Not Examine <input type="checkbox"/> Abnormal Remarks:	Heart and Lungs <input type="checkbox"/> Normal <input type="checkbox"/> Did Not Examine <input type="checkbox"/> Abnormal Remarks:	Legs/Paws/Back <input type="checkbox"/> Normal <input type="checkbox"/> Did Not Examine <input type="checkbox"/> Abnormal Remarks:
GI Tract/Abdomen <input type="checkbox"/> Normal <input type="checkbox"/> Did Not Examine <input type="checkbox"/> Abnormal Remarks:	Urinary and Genitals <input type="checkbox"/> Normal <input type="checkbox"/> Did Not Examine <input type="checkbox"/> Abnormal Remarks:	Eyes and Ears <input type="checkbox"/> Normal <input type="checkbox"/> Did Not Examine <input type="checkbox"/> Abnormal Remarks:

Dermatology Exam Findings:

Primary Lesions <input type="checkbox"/> Pustule <input type="checkbox"/> Patch <input type="checkbox"/> Wheal <input type="checkbox"/> Tumor <input type="checkbox"/> Cyst <input type="checkbox"/> Abscess <input type="checkbox"/> Other	Secondary Lesions <input type="checkbox"/> Scale <input type="checkbox"/> Crust <input type="checkbox"/> Collarettes <input type="checkbox"/> Erythema <input type="checkbox"/> Excoriation <input type="checkbox"/> Alopecia <input type="checkbox"/> Other	Skin Changes <input type="checkbox"/> Normal <input type="checkbox"/> Thick <input type="checkbox"/> Thin <input type="checkbox"/> Fragile <input type="checkbox"/> Hypotonic <input type="checkbox"/> Hyperextensible <input type="checkbox"/> Other
Haircoat Changes <input type="checkbox"/> Alopecia <input type="checkbox"/> Brittle Coat <input type="checkbox"/> Dry Coat <input type="checkbox"/> Oily Coat <input type="checkbox"/> Other	Configuration of Lesions <input type="checkbox"/> Linear <input type="checkbox"/> Follicular <input type="checkbox"/> Grouped <input type="checkbox"/> Annular <input type="checkbox"/> Other	Parasites <input type="checkbox"/> Fleas <input type="checkbox"/> Flea Dirt <input type="checkbox"/> Lice <input type="checkbox"/> Ticks <input type="checkbox"/> Ear Mites <input type="checkbox"/> Other

CANINE

DORSAL


VENTRAL


Laboratory:
 Scrape Cytology Tape Fungal Culture Wood's Light Hair Exam Other Findings:

Assessment & Plan:
 Assessment: [Add Diagnosis Description](#)
 Additional Notes:
 Plan:

Document body

- Check boxes
- Text input fields

Medical illustration

Diagnosis link

Use the following information to change template properties and use the various save options.

1. Click the **Edit Properties** button to open the Template Properties window.

- Name**—Type a name for this document template. The document template name will be included in the history entry when this document template is used to create a patient document.

Name:

- Type**—Select the type. Options are **Medical Note**, **Correspondence**, or **Print Only**.

Type: ▼

Medical Note

Correspondence

Print Only

- **Save Correspondence as**—When **Correspondence** is selected as the type, select how to save the document: **Title Only** (only the title and no content will be recorded in medical history) or **Document** (the entire document will be recorded in medical history). The **Save** option is not applicable to Medical Note or Print Only documents.
- **History (Hx) description**—(Optional) Type a default history description for this document template. This provides you with an additional description for this document and will be recorded in medical history. When recorded, the history line will be listed with the document name, followed by the status, and then followed by the history description for the document.

tip History descriptions can be added or modified as needed.

Sample of history description in history entry.

Date	Staff	History
8/24/2009	3	1.00
8/24/2009	3	1.00 DENTAL EXAMINATION (7500) for \$15.00
8/24/2009	3	1.00 DENTAL CLEANING ROUTINE (2551) for \$50.00
8/24/2009	3	1.00 DENTAL EXAM/CLEANING - Feline - FINAL 08/28/2009 - Dental Score 3/5

- **History (Hx) Alert**—Select the **Hx Alert** check box to mark this document template as an alert in medical history. Alerts help draw attention to the medical history entry.

Date	Staff	History
8/14/2009	3	14.00 tablet of Amoxicillin 50 mg (02333) Rx #: 1068 0 of 0 Refills
8/14/2009	3	14.00 tablet of Amoxicillin 50 mg (02333) for \$6.36
8/14/2009	3	Dental Exam/Cleaning - Feline - FINAL 08/14/2009 - Dental Score 3/5

- **Autofinalize in**—Select the **Autofinalize in** check box if you want the documents created from this document template to autofinalize. Indicate the number of days in which the document should autofinalize.

Autofinalize in days

- **Printer**—If this document template should print to a specific printer, select it from the list.
2. When the Template Properties window is complete, click **OK**.
 3. Save the document template by clicking **OK**, **Save**, or **Cancel**.
 - **OK**— Save and exit.
 - **Save**—Save and continue.
 - **Cancel**—Cancel changes and close.
 4. The document template has been added to the list. Click **Close** to close the Document Template List window.

Printer:

- Business Office
- Dr. Carson's Office
- Dr. Jones' Office
- Front Desk
- Pharmacy
- Treatment 1

OTHER PROCEDURAL STEPS

Template Conversion Options

On the Document Template List window, select a template in the list and then click **Convert**. The conversion options available depend on the type of template you selected to convert.

Text Only conversion options include:

- **Enhanced converted to Text Only**—Converts the template and opens it for editing in the Cornerstone Editor (in Text Only mode). The template retains only text from the enhanced template; tables, images, check boxes, etc. will be removed.

- **Text Only converted to Enhanced**—Converts the template and opens it for editing in the Cornerstone Editor.
- **Classic converted to Enhanced or Text Only**—Converts the template and opens it for editing in the Cornerstone Editor (in Text Only mode).

Conversion notes:

- When you convert a template, the original template is saved but inactivated.
- Bookmarks and invoice items are retained in the conversion, but note that when converting to Text Only, any nontext bookmarks will be removed.

Inserting Headers and Footers

1. On the Template Update window, on the menu, select **Insert > Header Footer >** and then select **Insert Header**, **Insert Footer**, **Delete Header**, **Delete Footer**, or **Edit Header Footer** (the options available depend on what the template already contains).
2. Make any changes, such as inserting bookmarks, page numbers, etc.
3. Select **Insert > Header Footer > Edit Header Footer** to exit the header or footer.

Inserting Tables

1. Place your cursor in the location where you want to add a table, right-click, and select **Insert > Table**. The New Table Parameters window opens.
2. Type the number of rows to include in the table.
3. Type the number of columns to include in the table.
4. Click **OK**.

Inserting Pictures

1. Place your cursor in the location where you want to add a picture, right-click, and select **Insert > Picture** (or **Picture and Description**). The Select Image File to Insert window opens.
2. Browse to the image (picture) you want to add to the document template and click **Open**. The image (picture) will be added to the template.
3. To resize an image:
 - a. Left-click the image.
 - b. Rest your cursor on the handle in the corner of the image until your cursor becomes a double-pointed arrow.
 - c. Left-click the handle and drag it to resize the image to the size you want.






Do not copy and paste images. Use only the **Insert > Picture** or **Insert > Picture and Description** method.

Inserting Page Breaks

1. Place your cursor in the location where you want to add a page break and right-click.
2. Select **Insert > Page break**. The page break is added at the cursor's location.

Inserting Bookmarks

Bookmarks for Cornerstone data can be included in document templates. At the time of use, when a document with bookmarks is printed, the bookmarks are replaced with the applicable data. For example, if the client FullName bookmark is included in the template, the client's name replaces the bookmark in the document at the time of use.

1. Place your cursor in the location where you want to add a bookmark and right-click.
 -  If inserting a bookmark within a table cell, select **Insert > Bookmark** on the menu or click the **Bookmark**  button on the editor toolbar. Right-clicking in a table cell opens a table menu.
 2. From the right-click menu, select **Insert > Bookmark**.
 3. From the **File Description** list, select the appropriate type of file.
 4. From the **Field Description** list, select the appropriate type of field.
 5. If applicable, update the name in the **Bookmark** box.
 6. Click **Add Bookmark**.
-  Do not copy and paste bookmarks. This will "break" the bookmark and could create "protected text" errors in the Cornerstone database.

 See the Appendix for a list of all document bookmarks.

Inserting Check Boxes

1. Place your cursor in the location where you want to add a check box and right-click.
2. From the right-click menu, select **Insert > Check Box**. You can type a corresponding name to appear next to the check box.

Inserting Text Input Fields

1. Place your cursor in the location where you want to add a text input field and right-click.
2. From the right-click menu, select **Insert > Text Input**.
3. In the **Field Name** box, type a name for the field.
4. In the **Initial Data** box, type any initial data.
5. In the **Maximum Field Length** box, type the maximum number of characters for the field.

 Leave the **Maximum Field Length** box blank to allow unlimited text.

6. Click the **Font** button to customize the font, and then click **OK**.
7. Click **OK**.


Inserting Links

You can add the following links: Problem Description, Problem Details, Diagnosis Description, Diagnosis Details, and Vital Signs.

1. Place your cursor in the location where you want to add a link and right-click.
2. From the right-click menu, select **Insert** and then select the appropriate link.

Vaccination Preferences

Vaccination preferences allow vaccination information to be included on vaccination certificates, health certificates, and other similar documents.

1. Select **Controls > Defaults > Practice and Workstation > Vaccination Bookmarks**.
2. Select the vaccinations to appear on vaccination certificates, health certificates, and other similar documents.
3. In the **Vaccination line pattern** area, select the buttons in the order in which the information should print on documents.
4. Click **OK**.
5. You can now insert a bookmark (Reminder Info or Vaccinations–Use Preferences) into a document template.
 -  The Reminder Info bookmark lists all items from the Vaccinations bookmark and also inserts dates based on patient history. The Vaccinations bookmark lists only items and dates from the vaccination bookmark list currently on the patient reminder file.

Access the Cornerstone Online Community


Check out all of the medical note templates available for download at community.idexx.com.

Importing a Document Template

Import templates from the Cornerstone* Online Community using the Import Document Templates feature.

1. On the **Tools** menu, select **Import Document Templates**.
2. If you have not already downloaded the document template to import, click the **Cornerstone Community** link and download the template file to the Downloads folder in your Cornerstone directory (for example: C:\Cstone\Downloads).
3. On the Import Document Template window, click **Browse** and select the document template (.csz file) to import.
4. If a template with the same name already exists on your system, a message asks if you want to continue with the import. If you click **Yes**, a number is appended to the new template name (“Eye Exam” will be changed to “Eye Exam (1)”). If you click **No**, the currently selected template will not be imported. Click **Browse** to select a different template or click **Cancel** to close the dialog box without importing a template.
5. Click **Import Template**. A message displays to inform you that the import was successful.
6. The next time you open the Document Template List window, the imported template will be available for selection in the Samples category.

If the Document Template List window is open while you import the template, you will need to close the Document Template List window and reopen it to see the new template in the list.

-  Once you have document templates set up, you can use them by accessing Correspondence or Medical Notes through the menu bar, toolbar, and right-click menus. To automate document templates, link them to:
 - Reason for Visit as a check-in/out document.
 - Invoice items with the Print Document special action.
 - Diagnostic codes.

DOCUMENT DEFAULT SETTINGS

On the menu, go to **Controls > Defaults > Practice & Workstation > Documents** to set the default document settings for your practice.

Controls > Defaults > Practice and Workstation			
Menu Access	Default	Description	
Documents <i>See figure V</i>	Medical Note options	Display partial medical note in correspondence (classic only)	Select the check box for Display partial medical notes in Correspondence to be able to select which information from your medical note templates to include in correspondence documents where medical note bookmarks are being used.
		Medical Note must be finalized before patient can be checked out	Select the check box for Medical Note to be finalized before patient can be checked out if you want medical notes to be finalized prior to patient check out.
		Auto finalize after ___ days	Select the number of days before the medical notes will be automatically finalized.
		Ask for weight if last entry is older than ___ days	Select the number of days for the computer to prompt for a weight entry.
	Default templates	For new templates use	Select the Medical Note template you want to use as a default.
		For Medical Note Quick Text documents use	Select the Quick Text Medical Note you want to use as a default.
	Include invoice items when printing Medical Notes	Select this check box to include invoice items when printing medical notes. Select the Also include check box to add the following options: Declined item , Amount , and Staff ID .	
	Include invoice items when printing Correspondence	Select this check box to include invoice items when printing correspondence documents. Select the Also include check box to add the following options: Declined item , Amount , and Staff ID .	

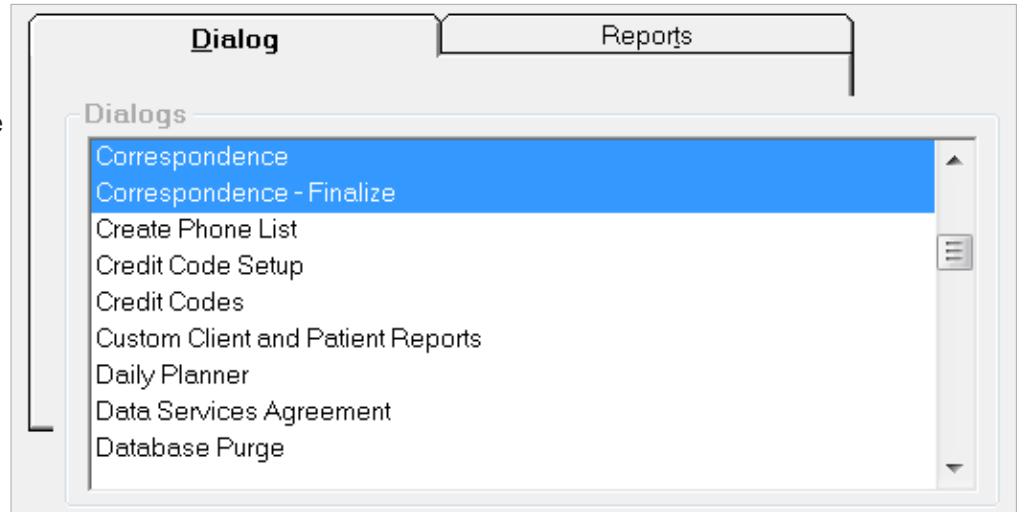
Controls > Defaults > Practice and Workstation

Menu Access	Default	Description
<p>Figure V</p> <p>(Controls > Defaults > Practice and Workstation > Documents)</p>		
<p>Documents > Favorite Documents See figure W</p>	<p>Favorite document templates</p>	<p>In the first empty ID field, enter the document ID of the medical note or correspondence documents you would like to include on your Favorites list. (Lists > Documents > Templates).</p>

<p>Figure W</p> <p>(Controls > Defaults > Practice and Workstation > Documents > Favorite Documents)</p>	<table border="1"> <thead> <tr> <th>ID</th> <th>Name</th> <th>Type</th> </tr> </thead> <tbody> <tr><td>1800</td><td>Allergies in Dogs-Take Home Instructions~</td><td>Correspondence</td></tr> <tr><td>1791</td><td>Arthritis in Dogs-Take Home Instructions~</td><td>Correspondence</td></tr> <tr><td>1169</td><td>Canine Neuter</td><td>Medical Note</td></tr> <tr><td>1796</td><td>Corneal Ulcer in Dogs-Take Home Instructions~</td><td>Correspondence</td></tr> <tr><td>1844</td><td>Dental Disease in Canines-Take home Instructions~</td><td>Correspondence</td></tr> <tr><td>1202</td><td>Dental Exam/Cleaning - Canine</td><td>Medical Note</td></tr> <tr><td>1963</td><td>Dental Exam/Cleaning-Canine</td><td>Medical Note</td></tr> <tr><td>1964</td><td>Dental Exam/Cleaning-Feline~</td><td>Medical Note</td></tr> <tr><td>1790</td><td>Diabetes in Dogs-Take Home Instructions~</td><td>Correspondence</td></tr> <tr><td>1804</td><td>Ear Infection in Cats-Take Home Instructions~</td><td>Correspondence</td></tr> <tr><td>1797</td><td>Ear Infection in Dogs-Take Home Instructions~</td><td>Correspondence</td></tr> <tr><td>1931</td><td>Gastroenteritis in Dogs-Take Home Instructions~</td><td>Correspondence</td></tr> <tr><td>1358</td><td>Hx, Exam, Assessment, Plan (H.E.A.P or SOAP)</td><td>Medical Note</td></tr> <tr><td>1811</td><td>Hypothyroidism in Dogs Take Home Instructions~</td><td>Correspondence</td></tr> <tr><td>1810</td><td>Lameness in Dogs Take-Home Instructions~</td><td>Correspondence</td></tr> <tr><td>1965</td><td>Medical Exam: Dermatology-Canine`</td><td>Medical Note</td></tr> <tr><td>1932</td><td>Medical Exam: Dermatology-Feline~</td><td>Medical Note</td></tr> <tr><td>1933</td><td>Medical Exam: Ears-Canine~</td><td>Medical Note</td></tr> <tr><td>1935</td><td>Medical Exam: Ears-Feline~</td><td>Medical Note</td></tr> <tr><td>1936</td><td>Medical Exam: Eyes~</td><td>Medical Note</td></tr> </tbody> </table>	ID	Name	Type	1800	Allergies in Dogs-Take Home Instructions~	Correspondence	1791	Arthritis in Dogs-Take Home Instructions~	Correspondence	1169	Canine Neuter	Medical Note	1796	Corneal Ulcer in Dogs-Take Home Instructions~	Correspondence	1844	Dental Disease in Canines-Take home Instructions~	Correspondence	1202	Dental Exam/Cleaning - Canine	Medical Note	1963	Dental Exam/Cleaning-Canine	Medical Note	1964	Dental Exam/Cleaning-Feline~	Medical Note	1790	Diabetes in Dogs-Take Home Instructions~	Correspondence	1804	Ear Infection in Cats-Take Home Instructions~	Correspondence	1797	Ear Infection in Dogs-Take Home Instructions~	Correspondence	1931	Gastroenteritis in Dogs-Take Home Instructions~	Correspondence	1358	Hx, Exam, Assessment, Plan (H.E.A.P or SOAP)	Medical Note	1811	Hypothyroidism in Dogs Take Home Instructions~	Correspondence	1810	Lameness in Dogs Take-Home Instructions~	Correspondence	1965	Medical Exam: Dermatology-Canine`	Medical Note	1932	Medical Exam: Dermatology-Feline~	Medical Note	1933	Medical Exam: Ears-Canine~	Medical Note	1935	Medical Exam: Ears-Feline~	Medical Note	1936	Medical Exam: Eyes~	Medical Note	
ID	Name	Type																																																															
1800	Allergies in Dogs-Take Home Instructions~	Correspondence																																																															
1791	Arthritis in Dogs-Take Home Instructions~	Correspondence																																																															
1169	Canine Neuter	Medical Note																																																															
1796	Corneal Ulcer in Dogs-Take Home Instructions~	Correspondence																																																															
1844	Dental Disease in Canines-Take home Instructions~	Correspondence																																																															
1202	Dental Exam/Cleaning - Canine	Medical Note																																																															
1963	Dental Exam/Cleaning-Canine	Medical Note																																																															
1964	Dental Exam/Cleaning-Feline~	Medical Note																																																															
1790	Diabetes in Dogs-Take Home Instructions~	Correspondence																																																															
1804	Ear Infection in Cats-Take Home Instructions~	Correspondence																																																															
1797	Ear Infection in Dogs-Take Home Instructions~	Correspondence																																																															
1931	Gastroenteritis in Dogs-Take Home Instructions~	Correspondence																																																															
1358	Hx, Exam, Assessment, Plan (H.E.A.P or SOAP)	Medical Note																																																															
1811	Hypothyroidism in Dogs Take Home Instructions~	Correspondence																																																															
1810	Lameness in Dogs Take-Home Instructions~	Correspondence																																																															
1965	Medical Exam: Dermatology-Canine`	Medical Note																																																															
1932	Medical Exam: Dermatology-Feline~	Medical Note																																																															
1933	Medical Exam: Ears-Canine~	Medical Note																																																															
1935	Medical Exam: Ears-Feline~	Medical Note																																																															
1936	Medical Exam: Eyes~	Medical Note																																																															

DOCUMENT SECURITY SETTINGS


After your practice has completed the work of setting up your document templates, the management team should be aware of the security options below that affect the staff's ability to access document windows. Be mindful of this to ensure the integrity of your document templates and electronic medical records. You should view the correspondence and medical note security options to ensure the correct staff have the intended access are listed below.



On the **File** menu, select **Security Setup** and view document security options.

Key: **GEN:** General Login; **REC:** Receptionists; **TECH:** Technicians; **DR:** Doctors; **M/O:** Managers/Owners

Cornerstone Dialog	Access Suggestions					Path to Locate
	GEN	REC	DR	TECH	O/M	
Correspondence	X	X	X	X	X	Activities > Correspondence OR Correspondence button on toolbar
Correspondence—Finalize	X	X	X	X	X	Activities > Correspondence OR Correspondence button on toolbar
Document Template Category List	X	X	X	X	X	Lists > Documents > Template Categories
Document Template Category Setup					X	Lists > Documents > Template > Categories > New OR Update
Document Template List	X	X	X	X	X	Lists > Documents > Template
Document Template Setup					X	Lists > Documents > Template > New OR Update
Documents—Void					X	From Patient Clipboard; double-click document and click Void OR right-click the document and select Void
Medical Notes	X	X	X	X	X	Activities > Medical Notes OR Medical Note button on toolbar
Medical Notes—Finalize	X	X	X	X	X	Medical Note button on toolbar

 Some practices may prefer to not give all staff the access/ability to finalize correspondence documents and/or medical notes.

Chapter Summary

You learned these important concepts in this chapter:

- **Document Template Overview**—Document template benefits, types, and sample listings of correspondence and medical notes you may want to create.
- **Windows and Features for Creating Document Templates**—Windows for selecting and modifying the document templates, including the toolbars to add elements that make the document easy to use, such as text input fields, check boxes, bookmarks, tables, and images.
- **Template Properties and Save Properties**—Options that control how a document is saved in history, managed, and printed.
- **Other Document Procedural Steps**—Other procedural steps for creating documents and correspondence.
- **Default Settings and Security**—Default settings and security settings for documents and correspondence.

Document Usage

You'll learn these important concepts in this chapter:

- **Document Editor—Medical Note Functionality**—Develop skills and understand how to record medical notes and use medical note features.
- **More Medical Note Features**—Additional medical note features.

Advantages of Using Medical Notes

You can dedicate some pages of the document for the internal medical record and other pages for client or external purposes. This might be a procedure summary or discharge instructions, all in one document. You can also:

- Customize forms.
- Insert elements such as tables, check boxes, text input fields, and images.
- Enter invoice items in the template.
- Access and insert other Cornerstone features, such as problems, diagnosis, and vital signs.

Starting the Medical Note

1. With the client account displayed on the Patient Clipboard* window, right-click the patient's name and select **Medical Note** to open the Start New Document window.



You can also select **Correspondence** when appropriate—follow the same steps.

2. Enter the staff ID and press TAB.



The staff ID should be the doctor or “author” of the medical note, as it is recorded in history and places the medical note on the Daily Planner window for that staff ID. The staff ID *cannot* be changed once it is assigned.

3. Use one of the following options to select the medical note template:

- If you know the exact title of the template or if you know the document ID, type it in the **Title or ID** box.
- If you do not know the exact title but know one or more keywords included in the title, select the **Search for word** check box and type all or part of the word in the **Title or ID** box.
- If your template is saved as a favorite, select it from the **Favorites** list.
- Select the template from the **Categories** drop-down list.

4. Select the document from the list and click **OK**. Continue to next activity.

Title	Category	Type	ID
Dental Exam/Cleaning-Canine	A Reason for Visit Template	Medical Note	1963
Dental Exam/Cleaning-Feline	A Reason for Visit Template	Medical Note	1964
Medical Exam: Dermatology-Canine*	A Reason for Visit Template	Medical Note	1935
Medical Exam: Dermatology-Feline**	A Reason for Visit Template	Medical Note	1932
Medical Exam: Ears-Canine*	A Reason for Visit Template	Medical Note	1933

advanced petcare
An Innovative Veterinary Practice

Dermatology Problems Work-up
Date: {CURRENTDATE[SHORT]}
Pet Name: {NAME} {LASTNAME}, {AGE}, {BREED}, {CURRENTWEIGHT} {CURRENTWEIGHTUNIT}, {SEX}
Dr. {STAFFLASTNAME} Technician: ■

Entering Vital Signs—Weight

Use the weight window to begin adding, editing, and graphing vital signs. Vital sign entry is based on the practice's default settings.

1. Enter the recording staff's ID.
2. Enter the patient's weight, verify the weight units, and select the value rating. If applicable, type a short note.

The screenshot shows a window titled "5009-2 - Barksalot". Under "Patient information", the ID is 5009-2, name is Barksalot, age is 10 Yrs. 6 Mos., and breed is Retriever, Labrado. Under "Weight entry", the date is 08/30/2011, time is 02:47 PM, and staff is CJ (Chris Jennings, LVT). The weight is entered as 62.0 pounds with a "Normal" rating. There are "OK" and "Cancel" buttons and a link for "add more Vital signs".

Leave the window open for the next activity.

Entering Other Vital Signs

1. In the **Weight entry** area, click **add more Vital Signs**.
 - If vital signs are entered by both the technician and the doctor, the technician can enter through the weight entry window. The doctor can use the vital sign link in the body of the note to enter their vital signs and then merge the two entries into a single set that will be automatically imported into the medical note.
2. Enter the vital signs values, click **OK** to input the staff ID for this vitals set, and select the recording staff.
 - If a vital signs link has been included in the medical note template, you can record vital signs while working in a medical note. The recorded vital signs will populate the Patient Clipboard, and the values will be inserted into the medical note as a table.
3. Click **OK**.

The screenshot shows the "Vital Signs" window for patient Chris Greene (ID: 5000, Patient ID: 6692). It displays a table with columns for "Vital Signs", "10/4/10 02:02 PM Staff: LP", and "Today 03:08 PM Staff: CS". A "Create new Vital Signs set" button is visible. The table contains the following data:

Vital Signs	10/4/10 02:02 PM Staff: LP	Today 03:08 PM Staff: CS	Create new Vital Signs set
Weight	41.0 pounds		enter Weight
BodyScore5	3 - Optimal		enter BodyScore5
Temp	98.0	103.0 H	enter Temp
Pulse	45.0	122.0 H	enter Pulse
Resp	50.0	28.0 H	enter Resp
Muc Memb			enter Muc Memb
Cap Refill			enter Cap Refill
Pain Scale			enter Pain Scale
Dental	2 - Mild		enter Dental
BP			enter BP
Appetite	3 - Decrease...		enter Appetite
Urine Outp	5 - 80-120%: ...		enter Urine Outp
Feces	Soft, Norm V/C		enter Feces
Gut Sounds	1 - Normal		enter Gut Sounds

Date	Staff	Weight	BodyScore9	Temp	Pulse	Resp	MM
2/11/2011	CJ		3 - Slightly Underw (L)	102.4	210	80	Pale/Anemic

Vital signs on the Patient Clipboard window


PHYSICAL EXAMINATION FINDINGS	
Add_Vital_Signs	
Neurological Exam	Norm
1. Observations	<input type="checkbox"/>
2. Seizure	<input type="checkbox"/>
3. Cranial Nerves	<input type="checkbox"/>
4. Gait	<input type="checkbox"/>

Vital signs link in medical note

Leave the window open for the next activity.

Vital Sign Editing Rules

The ability to edit vital signs is based on the original date/time of the vital sign set. Follow these guidelines for editing existing vital signs sets:

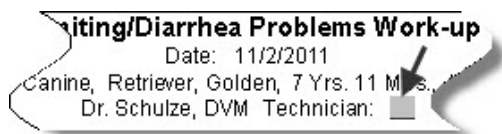
- If the vital signs set was created within the last 24 hours, you can add values to blank vital signs and edit an existing entry (cell) in the set.
 - If the vital signs set is older than 24 hours but created within the last 10 days, you can add values only to blank vital signs. Editing of existing entries is not allowed.
 - If the vital signs set was created over 10 days ago, no entries or editing are allowed. The key time frames to remember are 24 hours and 10 days.
 - You can void a vital sign at any time; however, it will void the entire vital sign set—you cannot void a single vital sign. Once the vital sign set is voided, you can add a new vital sign set and modify the entry date.
-  The period of time when editing is allowed is based on the server date/time when a vital signs set is created, which is not necessarily the date/time entered by the staff member.

TASK	Within 24 hours of initial vital signs set creation	More than 24 hours after initial vital signs set creation	Within 10 days of initial vital signs set creation	More than 10 days after initial vital signs set creation
Add a new vital sign entry (blank cell) within an existing set	Yes	Yes	Yes	Not Allowed
Edit a vital sign entry (occupied cell) within an existing set	Yes	Not Allowed	Not Allowed	Not Allowed

For more information about vital signs rules and options, see “More About Vital Signs” in the Appendix.

Entering Medical Notes

1. Lock the medical note so that you can automatically advance through the input fields and check boxes.
2. To record the technician in the Technician field of the medical note, double-click in the first input field, and then press TAB to advance to the next field.



3. Ask and answer the questions in the History area.

History (Subjective):		Vomiting		Yes	No
<input type="checkbox"/>	<input checked="" type="checkbox"/>	How often is your pet vomiting? <u>3X/day</u>	<input type="checkbox"/>	<input type="checkbox"/>	How
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are there large volumes of vomiting?	<input type="checkbox"/>	<input type="checkbox"/>	Is there
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are there pieces of whole food in the vomit?	<input type="checkbox"/>	<input type="checkbox"/>	Is there p
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Exposure to any chemicals?	<input type="checkbox"/>	<input type="checkbox"/>	Curre
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Any missing toys?	<input type="checkbox"/>	<input type="checkbox"/>	Any recu
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Noticed any blood in vomit?	<input type="checkbox"/>	<input type="checkbox"/>	Recent in
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Eating Changes? <input type="checkbox"/> Increased <input checked="" type="checkbox"/> Decreased	<input type="checkbox"/>	<input type="checkbox"/>	Cache




4. Record the physical exam findings. This example is from a sample gastrointestinal medical note.

Gastrointestinal Exam and Findings:	
Abdominal Wall	Remarks
<input type="checkbox"/> Pain	
<input type="checkbox"/> Trauma	
<input type="checkbox"/> Hernia	
<input type="checkbox"/> Redness	
<input type="checkbox"/> Other	
Gastrointestinal	
<input type="checkbox"/> Cyanosis	
<input type="checkbox"/> Respiratory difficulty	
<input checked="" type="checkbox"/> Pain	
<input checked="" type="checkbox"/> Increased/decreased gut sounds	increased
<input checked="" type="checkbox"/> Dehydration	
<input type="checkbox"/> Muscle atrophy	
<input type="checkbox"/> Palpable mass	
<input type="checkbox"/> Melena	
<input type="checkbox"/> Clumped intestines	
<input type="checkbox"/> Other	

Leave the window open for the next activity.

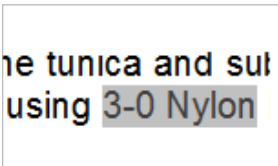
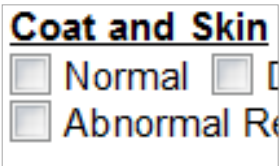
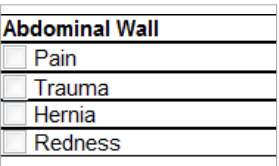


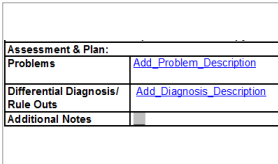
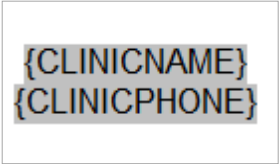
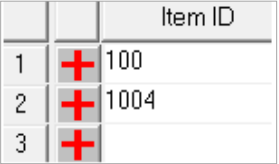

Document Editor—Medical Note Functionality

Keep the following information in mind when working with medical notes in the Cornerstone Editor:

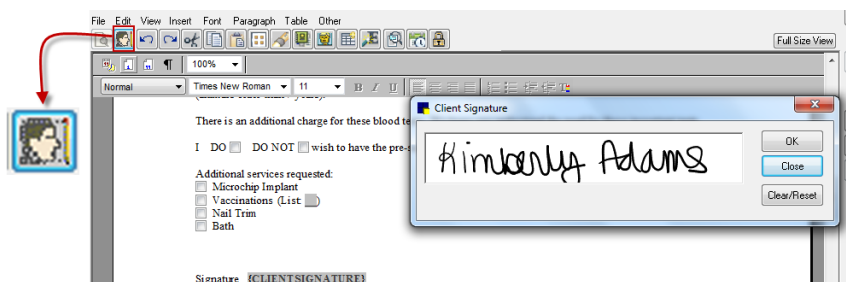
- Click the **Lock** button  to limit entries.
 - First Entry**—For locked documents, double-click the first text input field and enter the text.
 -  During document setup, select the first cursor position and lock the document. The first entry position will already be selected.
 - TAB**—Press the TAB key to advance to subsequent fields, making entries as you proceed.
 - Unlock**—To enter information in other locations, unlock the document .
 - Spacebar**—Press the spacebar to select a check box.
- Use the Cornerstone Editor toolbar, menu bar, or right-click menu to insert medical record features (pictured below).
 - Table**—When working in a table, only the menu bar and toolbar are available.
 - Problem**—Insert a problem link. This also populates the **Problems** tab on the Patient Clipboard*.
 - Diagnosis**—Insert a diagnosis link. You can also link documents to a specific diagnosis so the documents print when you use that diagnosis. This also populates the Dx tab on the Patient Clipboard.
- To expand the editor pane, grab the **Splitter Bar** and move it up or down or click **Full Size View** (at the top right corner of the editor pane).
- Double-click the client banner or patient banner to open the Client Information or Patient Information windows.

Medical Record Features

These features are available for correspondence and medical notes.

<p>Text Input Fields</p> 	<p>Check Boxes</p> 	<p>Tables</p> 	<p>Images</p> 	<p>Email/Fax and PHN Share</p> 
<p>Diagnosis and Problem Links</p> 	<p>Bookmarks</p> 	<p>Invoice Items</p> 	<p>Attachments</p> 	

Client Signature



Entering Invoice Items


About Invoice Items on the Medical Note

You can use the following methods for entering invoice items while creating medical notes:

- Add default invoice items to the template so that when a template is opened during the exam, the normal protocol and charges appear.
 - You'll experience differences when the invoice items are set with a blank status rather than a recommended status.
- Enter the invoice items when completing the medical note.
- Wait to enter the charges in the next step of the process, on the Patient Visit List.

Your key leaders will make a decision about entering invoice items on medical notes based on the following advantages and potential gaps:

Advantages


- Invoice items and medical notes can be entered on one window.
- Staff can later review the medical note and related invoice items in history together.
-  If invoice items and pricing change outside the medical note, the changes won't be reflected in the medical note.

Potential Gaps


- **Patient Visit List Changes Don't Change Medical Note Entries**—If changes or additions are made to the Patient Visit List, they do not “sweep back” and change the medical note entries. You must enter the change manually in the medical note.
- **Declined Recommendations—No Blue Line**—If you decline a recommendation and then make a notation on the blue line, the notation will not be available in the Cornerstone Editor window, as a declined recommendation is not included.
- **Estimates Don't Flow to Medical Note**—If your practice's standard process is to create and finalize estimates, be aware that finalized estimate charges don't flow to medical notes. Your practice team must delete duplicate charges created by having both a finalized estimate as well as medical note invoice items. You can also change estimate default settings so that the finalized charges are not transferred to the Patient Visit List window (**Controls > Defaults > Practice and Workstation > Estimates**).

Invoice Items Tab

The **Invoice Items** tab is located near the bottom of the Cornerstone Editor window.





-  Point to the gray bar between the document editor and the tab area until you see a cursor with a double arrow. Click and drag up to increase the size of the pane.

To add an invoice item at the time of use and save the medical note:


-  Add invoice items and smart groups to the medical note template to automatically add those items to the medical note.

1. In the first blank row, double-click or press F2 in the **Item ID** column, and then select the invoice item.
2. To set the invoice item status, click the gray box to the left of the **Item ID** column. Options are **Blank**, **Recommended**, **Accepted**, **Performed**, **Declined**, and **Declined to history**.

-  Click **Travel Sheet** to select multiple items from a specific list.

Invoice Items (12)		Attachments	
	Item ID	Description	Qty
5	 VTREAT	Vomiting Treatment	1.00
6	 IVFLUID	IV Fluid Group	1.00
7	 IVCP	I.V. Catheter Placement	1.00
8	 F	IV Set/Cath & Fluids - 500 ml	1.00


3. Optional: In the **Hx description** box, type a description for the patient's history. The history description is part of the in line history entry in the patient's file.
4. Optional: Select the **Alert** check box to place a permanent red highlight in the patient history for this medical entry.
5. Select the status of the medical note. Options are **Draft**, **Tentative**, or **Final**. The default status is **Tentative**.
6. Click **OK** to save and close the medical note.

-  If any special actions appear, complete them and then click **Continue**; the medical note will close. If you complete the special actions at this time, they will not be available on the Electronic Whiteboard, so you must determine at which time you need to complete them. Some examples of special actions are lab request, image request, prescription label, vaccine tag, update microchip ID, and print document.

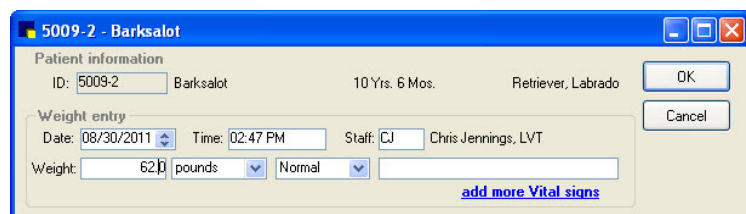
-  To delete an item from the **Invoice Items** tab, highlight the quantity for that item and press CTRL + D.

Medical Note Quick Text


In addition to using medical note templates, you can use the medical note quick text feature. This option offers a fast and simple medical note for adding information to a patient's medical record. Select the **Medical Note Quick Text** option, enter your staff ID, and immediately start typing your notes in the Cornerstone Editor.

 The quick text feature allows text entry **ONLY**. Links, images, tables, and some bookmarks are not available.


1. With the patient's record open on the Patient Clipboard, right-click the patient's name and select **Medical Note Quick Text**.
2. Enter the staff ID and click **OK**.
3. If prompted for weight, complete the weight entry information and click **OK**.



4. In the white work area, type the medical notes into the template.

 Set a default document for your Medical Note Quick Text template at **Controls > Defaults > Practice and Workstation > Documents**. Customize your Quick Text templates at **Lists > Templates**.

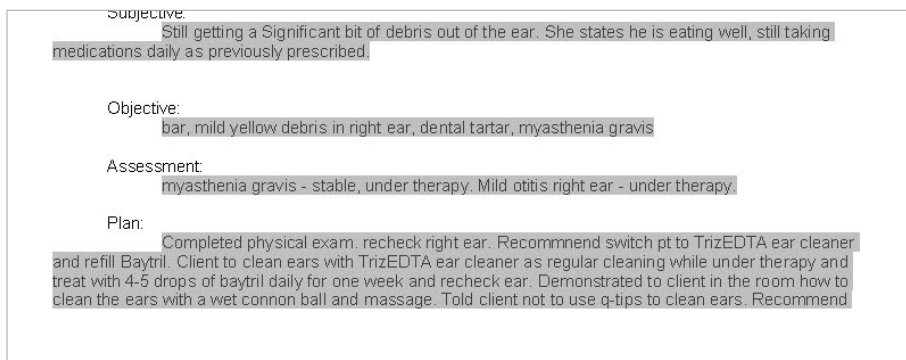
5. After you enter the medical note text, select the document status. Options are **Draft**, **Tentative**, and **Final**.

 Draft and tentative documents appear in the Daily Planner window until they are finalized.

6. Optional: In the **Hx description** box, type a history description.
7. Optional: Select the **Alert** check box to place a permanent red highlight on this entry in patient history (title line only). Use text color to highlight the body of the note as needed for additional alert information. You can also change the text color for the entire note to enhance it when viewing patient history.
8. Optional: Select the **Autofinalize in (#) days** check box and enter the number of days.
9. Click **OK** to save and close the medical note.

View Text Only Medical Notes

Text only medical notes allow full in line viewing of text only document contents on the Patient Clipboard window. This means that you can quickly view any text only medical note directly on the **Text** tab or **Medical Notes** tab in the patient history area without having to open the document in a separate preview or editor window. You can also point to the quick text medical note to view the note in the **Summary** tab.



Example of a quick text medical note using text input fields

Debbie Cabe - Patient Clipboard

Client ID: 8951 Debbie Cabe Pet Owner
 Patient Search: (715) 605-2681 (Home) Balance Due: \$0.00 Accept All Payments
 Total Patients: 1 Active Patients: 1

Client information
 Kimberly Adams
 7965 West White
 Eau Claire, WI 54703
 debbie@yahoo.com
 Status: Active
 Class: Pet Owner
 Referred: 0 clients
 Referred by: 5325 Katie Jacks
 Home Practice: 1

Patient list

Name	Species	Breed	Sex
Ima	Canine	Poodle Mix	Male

Patient information
 ID: 15295 Inpatient
 Name: Ima
 Status: Active
 Class: Breeding Pet Sex: Male
 Birthdate: 4/30/2008 Breed: Poodle Mix
 3 Yrs. 2 Mos. Color: Black
 24.8 pounds Markings:
 Ward: Cage:

Medical Notes

Date	Staff	Expanded History
5/26/2011	CS	<p>SOAP: recheck on right ear - TENTATIVE SUBJECTIVE: still getting a significant bit of debris out of the ear. She states he is eating well, still taking medications daily as previously prescribed.</p> <p>OBJECTIVE: bar, mild yellow debris in right ear, dental tartar, myasthenia gravis</p> <p>ASSESSMENT: myasthenia gravis - stable, under therapy. mild otitis right ear - under therapy.</p> <p>DIAGNOSIS: Otitis Externa Myasthenia Gravis</p> <p>PLAN: Completed physical exam, recheck right ear. Recommend switch pt to TrizEDTA ear cleaner and refill Baytril. Client to clean ears with TrizEDTA ear cleaner as regular cleaning while under therapy and treat with 4-5 drops of baytril daily for one week and recheck ear. Demonstrated to client in the room how to clean the ears with a wet cotton ball and massage. Told client not to use q-tips to clean ears. Recommend slow massaging motion upward to help loosen and lift the debris from the lower canal. If pet's ear is better then decrease baytril to EOD for 2 weeks, then every third day, etc. May even consider a pulse therapy strategy.</p> <p>Staff: CS</p>

Rows 2 to 2 of 2

Find Find Next Go to Date Print History Preview

Hide Whiteboard Notes Hide voided items

MORE MEDICAL NOTE FEATURES

Automatically Print a Linked Diagnosis Document from a Medical Note

When adding a medical note for a patient, if you insert a diagnosis code that has been preconfigured to link to a particular document in Cornerstone (**Lists > Diagnostic Codes > Diagnostic Code Setup**), the Diagnosis Document window opens.


If you click **Yes** to print the linked diagnosis document, the Staff Selection window opens.

After entering the staff ID, one of the following will happen:

- If the linked diagnosis document is a medical note or correspondence document, the document prints on the default printer.
- If the linked diagnosis document is a LifeLearn® client handout, the document opens in Microsoft® Word. You can then print the document directly from Microsoft Word.

Annotate Medical Note Images

To edit a picture or make annotations to a picture (available only at time of use):

 Any edits or annotations you make to a picture within a document are associated only with that document and will not be reflected outside of the document (will not change the original picture saved in the patient record).

1. Double-click the inserted image (not a pasted image) that you want to edit. The image opens in the Image Viewer window.
2. Use the Image Viewer tools to make annotations and edit the image, and then close the Image Viewer window
3. Click **Yes** to save changes. The Image Viewer closes and the edited image is displayed.

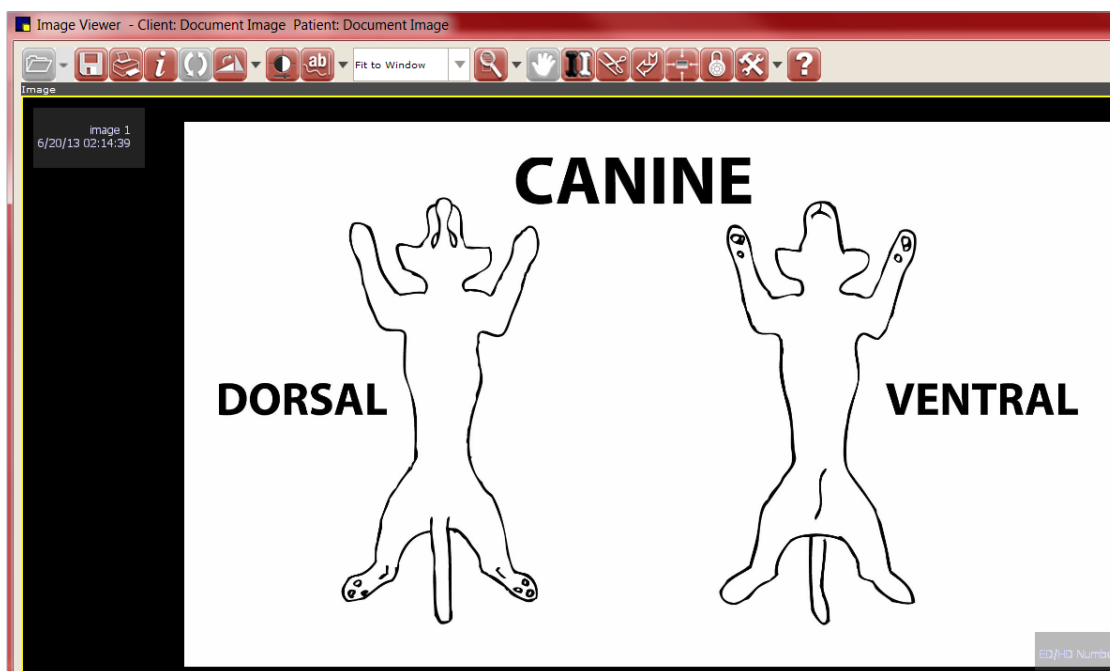
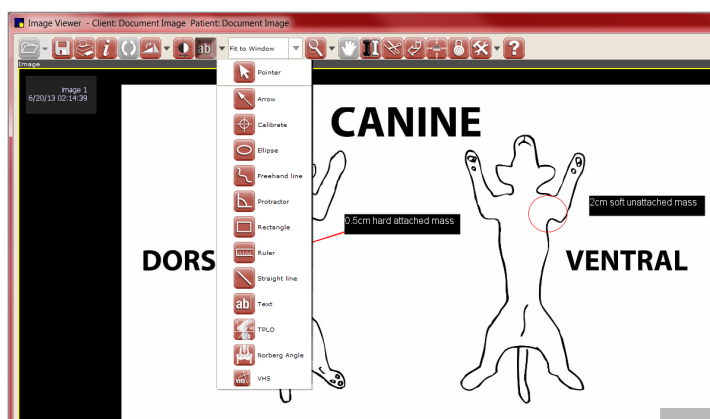
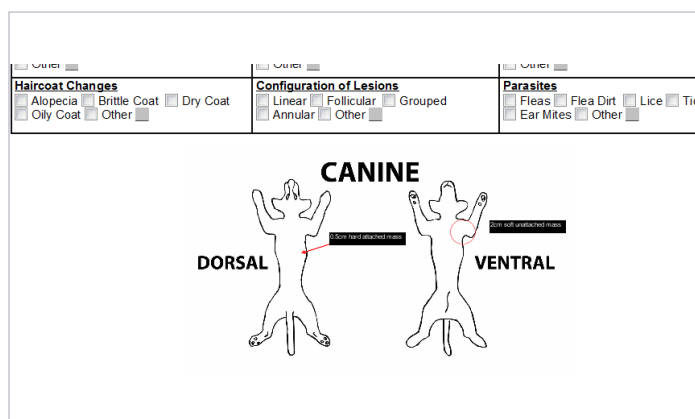


Image Viewer



Annotation tool menu and annotated image



Annotated image in medical note

Chapter Summary

You learned these important concepts in this chapter:

- **Document Editor—Medical Note Functionality**—Develop skills and understand how to record medical notes and use medical note features.
- **More Medical Note Features**—Additional medical note features.

Managing Medical Notes and Correspondence

You'll learn these important concepts in this chapter:

- **Daily Planner**—How to use the Daily Planner window to view and act on medical notes and correspondence.
- **Reports**—How to view reports for medical notes and correspondence documents.

DAILY PLANNER—MEDICAL NOTES AND CORRESPONDENCE

The Daily Planner window features nine tabs of information and is valuable for receptionists, technicians, and doctors to view tentative or draft medical notes and correspondence.

1. Click the **Daily Planner** button on the toolbar.
2. In the **Staff ID** box, press TAB to accept the default staff ID, or enter a new staff ID and press TAB.
3. Click the **Medical Note** tab to view tentative or draft medical notes.
4. Right-click and select an option to completed the following actions for the selected patient:
 - **Update**—Update or complete and finalize the medical note.
 - **Finalize**—Finalize the medical note to the patient file. Finalized medical notes cannot be modified.
 - **Patient Clipboard***—Access the Patient Clipboard for selected patient.

tip While finalized medical notes cannot be modified, addendum are allowed.

i You can complete these steps for tentative or draft correspondence documents on the **Correspondence** tab on the Daily Planner window.

MEDICAL NOTE AND DOCUMENT REPORTS

Tentative Medical Note Report (Reports > Patient)

This report lists all patients with medical notes still marked as tentative.

The screenshot shows the 'Report Search' window. At the top, there is a search bar with 'Search' and 'Reset' buttons. Below the search bar, there is a 'Reports' section with a list of report types. The 'Tentative Medical Note Report' is selected and highlighted. To the right of the list, there is a 'Report fields' section with a list of fields: Date, Patient Information, Client ID, Staff ID, and Template/Note. Below the fields, there is a 'Description' section that reads: 'List of patients with medical notes still marked tentative.' At the bottom of the window, there is a table titled 'Tentative Medical Note Report' with columns for Date, Patient Information, Client ID, Staff ID, and Template/Note. The table contains several rows of patient data.

Date	Patient Information	Client ID	Staff ID	Template/Note
12/20/10 2:49 PM	30035-1 Logan	30035	6 Lamar Yeas	Carine Exam
12/20/10 2:50 PM	32356-1 Desele	32356	GGG Barbara Kozian	CRU/GATE
12/20/10 3:01 PM	32356-1 Desele	32356	10 Jorge Bayliss	Carine Neckst
12/20/10 3:01 PM	26943-2 Max	26943	GGG Garret J. Miller	Dental Exam/Cleaning - Carine
12/20/10 3:05 PM	24800-1 Ruggs	24800	25 Annette	Eye Exam

Patient Documents Finalized by EOD (Reports > End of Period > End of Day)

This report provides a list of medical notes and correspondence documents that were automatically finalized during end-of-day processing.

Report Search

Search Search Reset

Reports 407 shown Hide locked reports Create report

Report fields

- Patient ID
- Patient Name
- Client ID
- Client Name
- Create Date/Time: create date of medical note or correspondence
- Patient Document Description: documents title or Hx description when entered using a doc
- Document Type: correspondence, medical note, or classic medical Note.
- Items transferred to PVL: if items were moved to the patient visit list, asterisks ** display
- report line
- Extra fields included when saving to a file: Template ID, Staff ID, Staff Name and Practice

Description: A list of which medical notes and correspondence documents were automatically finalized during end-of-day processing.

Patient Documents Finalized by EOD
Sorted by Patient ID

Wednesday, February 28, 2007 07:11 pm through Thursday, March 01, 2007 06:42 pm

Patient ID	Client ID	Case	Date/Time	Document Type	Description	Items transferred to PVL
9827-3	9827	A	2/28/2007	SCUF		
83898A	Kottmann Niederstadt		07:06 pm	Classic Medical Note		
7106-CUD	7106		2/28/2007		Default Comments	
C05084	Pfaws & Claws		05:01 pm		Basic Medical Note	
7106-CUD	7106		02:26/2007		Default Call Back Notes	
C05084	Pfaws & Claws		08:29 pm		Classic Medical Note	
7106-CUD	7106		2/28/2007		Default Call Back Notes	
C05084	Pfaws & Claws		05:05 pm		Classic Medical Note	
7106-CUD	7106		05:33 pm		Default Call Back Notes	
C05084	Pfaws & Claws		05:33 pm		Classic Medical Note	
9890-1	9890		2/28/2007		Default Call Back Notes	

Chapter Summary

You learned these important concepts in this chapter:

- **Daily Planner**—How to use the Daily Planner window to view and act on medical notes and correspondence.
- **Reports**—How to view reports for medical notes and correspondence documents.

Appendix

Medical Notes and Correspondence Bookmark List

File descriptions and bookmarks are listed below.

Bar Codes

BC Client First Name	BC Client Last Name	BC Staff Full Name
BC Client Full Name	BC Patient ID	BC Staff ID
BC Client ID	BC Patient Name	BC Staff Last Name
	BC Staff First Name	

Boarding

Arrival Date	Cage Number	Departure Time
Arrival Time	Cage Type	Patient Information
Boarding Status	Departure Date	

Choice

our/your	us/you	we/you
----------	--------	--------

Client

Address 1	Last Name	Referred Address 1
Address 2	Last Payment Amount	Referred Address 2
All Phones	Last Payment Date	Referred By Name
City	LY Sales—Inventory	Referred City
Classification	LY Sales—Services	Referred Postal Code
Client Signature	LY Visits	Referred State
Credit Code	Middle Initial	Secondary Name
Current A/R	Ninety Days A/R	Sixty Days A/R
Date Client Entered	Note	State
Email Address	Outstanding Balance	Status
Finance Charges A/R	Overdue Balance	Thirty Days A/R
First Name	Phone Description	Title
Full Name	Phone Extension	YTD Sales—Inventory
ID	Phone Number	YTD Sales—Services
Last Month A/R	Postal Code	YTD Visits

Imaging

Image	Patient Picture
-------	-----------------

Invoice Items

List

Lab

Lab Results

Medical History

Abnormal Exam Observ.
OnlyAll Exam Observations
Departing Instructions

Patient Diagnosis

Medical Notes

All or any specific medical notes

Header and Footer
Header and Footer w/fonts

Merge

Invoice Item BC

Invoice Item Desc (description)

Invoice Item ID

Miscellaneous

Current Date

Current Time

Patient

Age

Birth Date

Breed

Check In Date (Last)

Check In Time (Last)

Check Out Date (Last)

Check Out Time (Last)

Color

Current Weight

Current Weight Unit

Current Weight Unit Date

Date Current Weight

Date Patient Entered

Deceased Date

Manner Of Injection

Markings

Microchip ID

Name

Number of Years

Patient Classification

Patient ID

Patient Note

Patient Status

Rabies Expiration Date

Rabies Tag Date

Rabies Tag Number

Registration Number

Sex

Species

Vaccine Amount

Vaccine Expiration

Vaccine Lot Number

Vaccine Name

Vaccine Producer

Vaccine Type

Practice

All Phones

Clinic Address 1

Clinic Address 2

Clinic City

Clinic Name

Clinic Name 2

Clinic Phone

Clinic Postal Code

Clinic State

Prescription Inst (instructions)

List

Question

Displays a window for a question to be entered.

Referral Doctor

All Phones	Ref. Doctor First Name	Ref. Doctor Phone Extension
Ref. Doctor Address 1	Ref. Doctor Full Name	Ref. Doctor Phone Number
Ref. Doctor Address 2	Ref. Doctor Last Name	Ref. Doctor Postal Code
Ref. Doctor City	Ref. Doctor License	Ref. Doctor State
Ref. Doctor Email	Ref. Doctor Note	Ref. Doctor Title
Ref. Doctor Fax	Ref. Doctor Phone Desc. (description)	

Referral Hospital

All Phones	Ref. Hospital Email	Ref. Hospital Phone Extension
Ref. Hospital Address 1	Ref. Hospital Fax	Ref. Hospital Phone Number
Ref. Hospital Address 2	Ref. Hospital Name	Ref. Hospital Postal Code
Ref. Hospital City	Ref. Hospital Note	Ref. Hospital State
	Ref. Hospital Phone Desc. (description)	

Reminder Info

Varies by practice

Staff

All Phones	Staff Extension	Staff Note
Signature	Staff First Name	Staff Phone Description
Signature w/Pwd. (password)	Staff Full Name	Staff Phone Number
Staff Address 1	Staff ID	Staff Postal Code
Staff Address 2	Staff Last Name	Staff State
Staff City	Staff License Number	Staff Status
Staff Classification	Staff Middle Initial	Staff Title

User Def Client

Varies by practice (depending on what you set up as user-defined prompts
(**Controls > User Defined Prompts > Client** tab))

User Def Patient

Varies by practice (depending on what you set up as user defined prompts
(**Controls > User Defined Prompts > Patient** tab))

Vaccinations

Varies by practice

IDEXX Cornerstone Chartless Setup Checklist

Client/Patient Information Recommendations

- **User Defined Prompts:** Consider creating user-defined prompts to create fields for information that does not already exist in the client or patient record. User-defined prompts can also be set as alerts.
 - Client Prompts: Preferred Doctor, Client Alert
 - Patient Prompts: Medical Condition, Patient Alert, Temperament, Special Diet, Vaccine Reactor, Allergic To

Medical History Recommendations

- **List Top 10 Reasons for Visit:** Create a list of your top ten reasons for visit. Use this list to ensure that all Cornerstone features are setup to support your protocols for the most common visits.
- **Review/Modify Reasons for Visit:** Review reasons for visit. Create reasons for visit for the top 10 reasons for visit if not already listed. Attach alerts to remind staff of information they should collect from or provide to the client. Documents can also be attached to print at check-in or checkout. (**Controls > Reasons for Visit**)
- **Create Smart Groups:** Create smart groups for your top 10 reasons for visit. Smart groups will establish your protocol and ensure charges are not missed. Pick lists may also be used in smart groups. (**Lists > Invoice Item**)
- **Create Document Templates:** Create medical notes and documents (correspondence or print only) for each reason for visit. (**Lists > Documents > Templates**)

Medical note templates will standardize the information recorded for each visit in the patient's file. Ensure templates include fields for SOAP or HEAP notations and links to enter vital signs, problems, and diagnoses. Documents can be created for consent forms, discharge instructions, and client education, which can be electronically signed and saved to the patient's file.

- **Review/Modify Problems:** Review/modify the problem list. This will ensure the majority of common problems will be on the list to be added to the patient's file as needed. Reviewing now will eliminate time entering new problems during exam time. (**Controls > Problems > Problem List**)
- **Review/Modify Diagnoses:** Review/modify the diagnostic code list. This will ensure the majority of common diagnoses will be on the list to be added to the patient's file as needed. Reviewing now will eliminate time entering new diagnoses during exam time. (**Lists > Diagnostic Codes**)
- **Review/Modify Callback Reminders:** Review/modify callback reminders attached to invoice items for each reason for visit to ensure callbacks are performed and documented in the patient's file. (**Lists > Invoice Item**)
- **Review/Modify and Attach Departing Instructions:** Review/modify the departing instructions and attach to invoice items to ensure consistent information is provided to clients regarding service and inventory items where appropriate. (**Lists > Departing Instructions**)
- **Review/Modify and Attach Prescription Instructions:** Review/modify prescription instructions and attach to invoice items where appropriate. This will create efficiency when creating prescription labels for medications that have standard dosing instruction. (**Lists > Prescription Instructions**)
- **Review Diagnostic Integration Options:** IDEXX SmartLink* technology can advance the standard of medical care in your practice. It will help you provide better medicine and increase efficiency which lead to better business and increased client loyalty. Lab results and digital radiography can be directly downloaded to the patient's file. Contact your IDEXX Computer Systems Representative for more information on integration options for your practice.
- **Create Compliance Protocols:** Use the Compliance Assessment Tool* to create compliance protocols for your top reasons for visit to measure compliance rates and review missed revenue-generating opportunities. Use the compliance results to determine opportunities for staff education. (**Reports > Compliance Assessment Tool > Protocol Setup Wizard**)

Skill Assessment and Evaluation

Enhanced Medical Notes and Correspondence Documents Skill Assessment

Practice Name: _____

Your Name: _____

Completion Date: _____

Instructions: After completing your training, please read each of the following skill assessment statements and evaluate your ability to perform each task. Mark only one X for each skill statement.

	Can Perform	Can Perform but NOT Using	Cannot Perform	Not Applicable
Chapter Summary				
1. I can create a document template.				
2. I can insert a table into a document template				
3. I can insert an invoice item into a document template.				
4. I can set a document template to autofinalize in a specific number of days.				
5. I can edit and/or delete a default header and/or footer in a document template.				
6. I can set the properties for a document template.				
7. I can mark a document template as inactive.				
8. I can select the template from a list of available document templates.				
9. I can start a medical note document for a patient from the Patient Clipboard*.				
10. I can enter information into a medical note document.				
11. I can select the document status.				
12. I can save the document.				
13. I can update a medical note from the Daily Planner or the Patient File.				
14. I can update a correspondence document from the Daily Planner or the Patient File.				
15. I can void a document.				
16. I can enter vital signs through a document.				

Results of the Skill Assessment

_____ Can Perform

_____ Can Perform but not Using

_____ Cannot Perform

_____ Not Applicable

Please return this skill assessment using one of the following methods:

Return this information to:

Cornerstone Education Department at CornerstoneCoach@idexx.com.

Mail this information to:

IDEXX Laboratories

Attn: Cornerstone Education Department/Gina Toman

One IDEXX Drive

Westbrook, Maine 04092

Enhanced Medical Notes and Correspondence Documents Evaluation

We value your opinion! Tell us what you think about the course.

Practice: _____

Date: _____

Trainer: _____

Feedback received from you regarding the training is vital to our continued improvement.

Course Description

During this two and a half hour course, managers, receptionists or technicians will learn to efficiently set up and use document templates, used for such purposes as medical notes, release forms or other important documents. Topics include:

- Types of Documents and Uses
- Documents and Templates—Status, Properties, and Saving
- Document Templates and Document Content Elements
- Start New Document Window
- Cornerstone Editor
- Document Defaults and Security
- Daily Planner Window
- Reports

1. How likely would you be to recommend an IDEXX Cornerstone course to a friend or colleague?

1 Not Likely.....Likely 10

1	2	3	4	5	6	7	8	9	10
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. For us to better understand the opinions of our participants, please explain why you selected the rating above?

3. The prerequisites for this course are:

- The most current version of Cornerstone installed at practice.
- Basic Cornerstone navigation.
- Access to set up Cornerstone features, which means security for medical notes and correspondence setup.

Indicate which participants were ready for, and met the prerequisites for, this course.

Please select all that apply.

- Our practice All other practices Some other practices

Enhanced Medical Notes and Correspondence Documents Evaluation

4. How was the length of the course?

- Too short
 Too long
 Just right

Additional Comments:

5. Referring to the items listed below, did we meet your expectations:

	No										Yes
	1	2	3	4	5	6	7	8	9	10	N/A
The course content matched the course description.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The course materials were professional looking.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The course materials provided contained valuable content.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The trainer arrived well prepared and used appropriate examples.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The trainer used effective communication skills.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The trainer answered all of my questions effectively.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
As a result of this course we can expand our use of Cornerstone's features.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This course provided a good value for the cost.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Additional Comments:

6. Did you follow along with the participant workbook during the course presentation?

- Yes**—I followed the participant workbook the majority of the time.
 No—I didn't use the participant workbook.
 Sometimes—I used the participant workbook some, but not most, of the time.

If **No** or **Sometimes**, why not?

7. What was the most valuable aspect of this course?

Enhanced Medical Notes and Correspondence Documents Evaluation

8. What suggestions do you have for future revisions of this course?

9. Using the roles listed, count and record how many participants (from your practice) attended some, or all, of this course. If someone holds more than one of these roles, record their primary role only.

Primary Roles	Number of participants with this primary role that attended this course
Veterinarian	
Technician or Nurse	
Reception or Client Services	
Office, Practice, or Business Manager	
Practice Owner	
Other (List role and record number)	
Other (List role and record number)	

Thank you! We appreciate your feedback.

Testimonial Permission:

(Please check the box below)

- Please have an IDEXX Computer Systems Representative contact me to discuss featuring my comments in promotional materials.

Please Print:

Your Name: _____

Practice Name: _____

Practice City, State: _____

Practice Telephone #: _____

Reminder: Please return this evaluation using one of the following methods:

Return this information to:

Cornerstone Education Department at CornerstoneCoach@idexx.com.

Mail this information to:

IDEXX Laboratories

Attn: Cornerstone Education Department/Gina Toman

One IDEXX Drive

Westbrook, Maine 04092

