

Coaching Series Presents:

Guide to Becoming Paperless or Paper-light





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Published by IDEXX Laboratories, Inc. IDEXX Computer Systems 2536 Alpine Road Eau Claire, Wisconsin 54703, USA (715) 834-0355 idexx.com

Printed in the United States of America.

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Acknowledgements

We would like to acknowledge a practice expert who contributed to this guide. A special thank you to the following:

Gina Toman Staff Training Coordinator Seaside Animal Care

For questions about this guide, email coachingseries@idexx.com

Section: Overview

Welcome! Get Ready, Get Set, Get Started.

This document is meant for decision makers and project leaders.

You've already made the decision to become chartless and you are driven to reach that goal line. At this point, you are already beyond collecting the benefits and challenges of this project (However, if you need tools of persuasion for others in your practice, see *Appendix: Reasons for a Paperless Practice*) and you're seeking answers on how to get started and other project considerations. Whatever your current situation, either a prospective or existing IDEXX Cornerstone client, IDEXX Cornerstone and IDEXX integration provides unmatched, superior features to make this journey.

Use this guide to get started on your paperless or paper-light project and use it as a resource throughout your project to achieve successful implementation.

The Paperless/Paper-light Vision

Is this a workflow you're trying to achieve?

Your receptionist smiles and welcomes your new client, Maggie, to your practice and checks in her puppy from the Patient Clipboard for a wellness exam, which will be followed by a neuter surgery. Maggie hands your smiling receptionist vaccination documents received from her former care provider. Your receptionist scans them using your flat bed scanner. Upon check-in, a one page breed document prints containing breed facts and your standards of care for each life stage, including diagnostic testing. Along with the breed document, a personalized surgery release document and a document explaining the surgery from your client correspondence document/Lifelearn library appears for your client Maggie to sign using a signature device.

Once in the exam room, your technician begins a medical record using a Tablet PC, allowing face-to-face interaction and collection of systematic information that was thoughtfully designed, including review of vaccinations and standard wellness care. Once in the exam room, your doctor completes the exam, presents findings, and provides care recommendations while your technician enters the findings.

Following the exam, your staff provides a complimentary tour so Maggie can view where her beloved pet will be spending the day. Your technician points out the large flat screen for the Electronic Whiteboard, which demonstrates a heightened level of professionalism while displaying completed and scheduled treatments.

After the visit, a patient report card is printed on your color printer that includes red text for areas of concern, which your technician reviews with Maggie. At check-out and invoicing, your receptionist hands Maggie a Pet ID card produced from your Zebra P110i ID printer.

Guide Overview

This guide includes:

- Practical steps
- A checklist
- A sample project plan in four project phases.
- Motivational words and tips from your peers

Gina Toman Staff Training Coordinator Seaside Animal Care

"As Staff Training Coordinator, it is my job to make the team's job easier. Cornerstone provided both the structure and flexibility I needed to make the chartless transition simple and trouble-free for my team."

Project Phase Overview

☀

This guide will help you obtain the workflow presented in the example provided on the previous page. The guide is presented in four phases:

Phase 1: Assess and Decide Phase 2: Design Phase 3: Implement Phase 4: Measure and Manage

Paperless or Paper-light Project Best Practice Approach – Integrate First

The approach provided in this guide follows this methodology

 Integrate your in-house laboratory, reference laboratory and digital imaging with IDEXX first. This is an easy first step in reducing clicks and capturing missed charges. You'll create some quick wins by increasing your top line revenue and reduce volumes of paper chart transactions.

Gina Toman Staff Training Coordinator Seaside Animal Care

"At Seaside, we took the "team approach". During one of our weekly team meetings, we as a group discussed converting to a chartless practice. We had the integrated laboratory, we utilized Cornerstone for all of our invoicing and inventory so becoming paper-lite was the next logical step. We made the decision to stop using charts by a certain date and took the leap to become chartless. Now I can never imagine using a chart again."

- **Move from Paper Charts**. This allows your practice to reduce the double entry, capture missed charges, and reduce time spent searching for lost records.
- **Implement Electronic Whiteboard.** Implement the Electronic Whiteboard for noncritical cases such as boarding, vaccinations or hospitalized feedings, then dental, then surgeries, etc.
- Implement Inventory Tracking.

Phase 1: Assess and Decide

Phase 1 Importance

Why all the planning? One major reason is because planning makes the implementation less difficult on your staff and less noticeable to your clients.

It's More than Learning the Clicks

We've seen many practices inclined to simply learn the clicks. Just like a first-time, international traveler who needs to become acquainted with the country, arrange for a passport, learn some of the language, gather your travel money, and receive vaccinations before departing, the same is true of the paperless or paper-light journey.

Project Assumptions / Operational Differences

Even though there is ambiguity in the term paperless or paper-light and a standard industry definition is lacking, there are some assumptions and operational differences to highlight:

- Practices keep their existing charts and pick a point in the future when they'll stop making new paper charts. Practices rarely scan in old history and paper charts. Note: Consult your attorney for retention requirements.
- Some practices may continue to use a printed Check-In Report and/or a Printed Travel Sheet.
- It's not necessary to have Patient Advisor[™] in order to be paperless.
- Some doctors might have their technicians enter most of the medical notes
- Some practices may allow the mixture of doctors with paper charts and doctors who engage in electronic medical records
- Some practices value fewer clicks rather than the benefit derived from using a robust feature
- Some practices provide only verbal recommendations versus providing client education documents and/ or pet report cards
- Some practices check out clients in exam rooms
- Some practices don't allow their doctors to enter or discuss charges
- Some practices don't have managers
- In the end, practices will need to employ inventory tracking, including the purchasing, receiving, and consumption. In order to remove paper from your processes, this means you'll need to stop writing down inventory quantities used during patient care for most items on various papers or forms.

These are just a handful of some of the assumptions and operational differences. To honor these differences and philosophies, options are provided.

Phase 1: Step Summary

This phase can be described as steps that include envisioning, collecting, and scoping your paperless or paperlight project.

- 1. Practice Visit(s) Read, Talk To, Visit
- 2. Practice Workflow Vision
- 3. Integration Assessment
- 4. Hardware and Software
- 5. Coaching and Training
- 6. Backups
- 7. Reminders
- 8. Optional: Paging Devices
- 9. Internet Access
- 10. Compelling Business Case
- 11. Core Team, Plan, & Communicate
- 12. Optional: Change Management Process and Interviewing
- 13. Optional: IDEXX Expert Medical Record Options
- 14. Lost Time/Missed Charge Inefficiencies

Assess and Decide Checklist

Instructions: Use the first column to identify the step description. Use the second column as a checklist. Use the third column as an explanation for the checklist, if needed.

| Assess and Decide | | Yo | ur Checklist | Exp | planation |
|-------------------|---|---|--|--|---|
| Ste | eps | | | | |
| 1 | Practice Visit (s) – Read, Talk To, and Visit | | Document your financial, productivity, and patient care goals. Document your average invoice goals. Document peer practice workflows, including advantages and disadvantages of their process. Use <i>Appendix: Sample Wellness Workflow</i> for an example. Collect peer practice paper forms used in the paper charts, reason for the paper form, and outline the new medical note template description and fields you'll set up in Cornerstone. Look for crossover and where efficiencies can be improved. Document or ask for an equipment list from the practice you speak to or visit that supports their paperless or paper-light environment. Use this list as a springboard for your own practice's needs. Use <i>Appendix: Sample 7.6 Hardware and Peripheral List</i> as an example. Document peer paperless project time and milestones. | Rea a. b. c. d. e. | ad about, talk to, and visit other like-sized practices. Collect financial, productivity, and patient care gains. Collect workflows from peer practices, including who is doing what step and where. Also document advantages and disadvantages of their process. Collect paper forms and questionnaires used in the paper charts and begin to outline the medical note templates you'll need to set up. Collect hardware and equipment needs for a paperless or paper-light practice based on a peer practice. Document examples of how long it took peer practices to complete their journey. |
| 2 | Practice Workflow Vision | | Document types of statements you want your clients to make about your new process, both new attributes and poor attributes they'd like to see removed. | Alig goa you you | In your paperless or paper-light workflow vision to your patient care and client service als. Take what you've learned and translate that into a workflow that fits your clients needs, ir staff roles, and heightens your practice value. Start by talking through your visions for ir most frequent patient visits. |
| | | | Document statements you want your employees | Ans | swering the next three questions will be indicators of your success: |
| | | to make about the efficiencies and productivity | | What new client service attributes would your clients like to see added? | |
| | | gans nom uns new process. | | | What poor client service attributes would your clients like to see removed? |
| | | | Document your desired visit workflow by patient visit type categories of wellness, outpatient, hospitalized, and/or sick/injured. | | What types of statements do you want your employees to make about the efficiencies and productivity gains from this new process? |
| | | | | You type | a'll need to document staff responsibilities during a typical visit's workflow by patient visit e: wellness, outpatient, hospitalized, and/or sick/injured |

| Assess and Decide Steps | Your Checklist | Explanation | | |
|-----------------------------|---|---|--|---|
| 3 Integration Assessment | Complete the assessment in this section | Implement These Right Away! Talk to IDEXX experts and peer practice house laboratory, reference laboratory, and digital imaging. By doing the most voluminous number of medical records, create some quick wins, a average invoice. Identify your integration goals with the sections and re | es about Intensis, you'll rer and also incl ating system | egrating in- move the rease your below |
| | IDEXX Contact | In-house laboratory integration with Cornerstone | Current | Goal |
| | Cornerstone Sales Representative provide you a Coaching Discovery Tool, which is returned to the Learning and Performance Development | 3= High Performance IDEXX SmartLink [™] In-House Laboratory. Lab requests created via Cornerstone or the IVLS Census List and client charges applied. Lab results transferred to patient record. | | |
| | opportunities. | 2=Intermediate Performance IDEXX Serial; Lab requests entered at lab station without billing and results transferred to Cornerstone. | | |
| | | 1=Introductory Performance Non-IDEXX lab requests and results placed in paper chart | | |
| | | Reference laboratory integration with Cornerstone | Current | Goal |
| | | 3= High Performance IDEXX SmartLink Reference Laboratory. Lab requests created via LabREXX® through Cornerstone and client charges applied. Lab results transferred to patient record | | |
| | | 2=Intermediate Performance Electronic lab requests produced outside of Cornerstone. Lab results downloaded and/or lab results entered manually. | | |
| | | 1=Introductory Performance Handwritten lab request and results placed in paper chart | | |
| | | Digital imaging integration with Cornerstone | Current | Goal |
| | | 3= High Performance IDEXX SmartLink Imaging; Image requests entered in Cornerstone and client charges applied. Image results transferred to patient record. | | |
| | | 2=Intermediate Performance Non-Integrated digital Imaging – Non IDEXX. Image results may be imported from an outside system, but it takes an extra step to do so. | | |
| | | 1=Introductory Performance Non-Integrated imaging - Non IDEXX. Image results not placed in paper chart. | | |
| | | You can begin to implement these integration items immediately to ben efficiencies and average invoice increase. You'll be that much farther a get rid of the paper charts. | efit from the ahead when | it's time to |
| 4 Hardware and Software | Collect your peer practice hardware and equipment lists | Determine your hardware and software needs: | | |
| | | | | |

| Assess and Decide Steps | Your Checklist | Explanation |
|----------------------------|--|--|
| | Complete Appendix: Hardware Assessment Table Visit IDEXX Contact With your completed Hardware Assessment Table and peer practice lists in hand, call your IDEXX Cornerstone Representative to make your initial request for a hardware quote. Call 1-800-283-8386, option 2, for your Cornerstone Sales Representative. | Memory Upgrades Seat License (s) Workstations / Tablet PC(s) At appointment scheduling /boarding reservation locations At weight taking locations In consultation areas In exam rooms In treatment area In lab areas In pharmacy areas Post visit case management |
| | | medical history and notes at the point of patient care, your practice is going to need enough computing power at each point of patient care and enough for staff to do their work. Workstations or Tablet PC's in exam rooms are especially important. |
| | | At the same time, you do this, evaluate and document performance speeds for other workstations and rate their performance as acceptable or unacceptable. |
| | | More than likely you'll need to upgrade your current version of software to the latest because: |
| | | You'll be adding workstations and new workstations may not be supported on your current installed software version. (i.e. Cornerstone 7.5 is not supported on Vista) |
| | | There are new features in the latest release which would enhance your efficiencies and patient care. |
| | | Review this list of hardware and peripherals that support a paperless or paper-light environment. |
| | | Access Point(s) -needed for Tablet PC's Digital Camera - needed for pet pictures 3 Signature Devices: Clipgems or Signature Pads (Note: Average practice = 3 Signature capture devices for front office) - needed for consent and release forms 2 Document Scanners (Note: 1 front office and 1 back office) - needed for incoming patient medical record documents 3 Bar code scanners (Note: 2 front and 1 back office) - needed for quick scans of inventory bar codes and/or other bar codes Large Flat Screen for Whiteboard with a mounting bracket,- needed for Cornerstone Electronic Whiteboard feature to be used in your surgery suite and/or treatment area LifeLearn CD and Microsoft Word - for linked client education and recommendation documents |

| Assess and Decide Steps | Your Checklist | Explanation | |
|----------------------------|---|--|--|
| | | Pharmacy Formulary – check a drug against other drugs provided to patient from their patient history to avoid adverse drug interaction. Also drug information sheets. Color Printer (Dell 3110) for Patient Report Cards (Note: Print red abnormals) | |
| 5 Coaching and Training | IDEXX Contact Call 1-800-283-8386, option 2, for your Cornerstone Sales Representative and they will provide you a Coaching Discovery Tool. This free electronic tool is easy to complete and you'll be provided a coaching plan and contract that represents Coaching recommendations based on your current utilization and desired utilization. With this inquiry, be sure to ask for a Cornerstone Database Coach sample. | After you've translated what you've seen and heard, you'll now need to move your practice from present usage to desired usage. To do this simply requires systematic tools to evaluate current utilization while at the same time identifying the optimum utilization. There are two methods you may seek out. One is a Coaching Discovery Tool . This tool is provided free of charge and assists you in evaluating at a high level your current and goal usage for Integration, Cornerstone Setup, Electronic Medical Record, and Inventory. It also contains a skill assessment which you can use to systematically identify specific gaps in your use of Cornerstone features. Another tool you may seek out is a Cornerstone Database Coach . This remote service allows IDEXX Cornerstone to collect a copy of your database so a Performance Improvement Specialist can complete a review of 24 setup and usage areas. You will receive a report and a phone consultation covering such areas as the condition of your invoice item setup, classifications, smart groups, pick lists, and security. These areas are critical in order to ensure the integrity of your electronic medical record creation and usage, and seamless workflows within Cornerstone. | |
| 6 Backups | Assign someone to verify and validate your backup and future backup needs with your new paperless practice. IDEXX Contact Call 1-800-283-8386, option 2, for your Cornerstone Sales Representative for an IDEXX VetVault quote, backup media, and/or backup hardware. | Because all of your patient care and client service information will be contained in your practice information management system, evaluating and verifying a stable backup, along with the assurance that regular backups are occurring, is critical. There are two methods outlined below detailing the storage of your practice data, both of which require methodical and meticulous adherence to protocols set up to best meet your needs. Method #1 – Maintain backups at your practice a. Maintain a regular schedule to back up your data records nightly using a seven tape rotation, one reserved for each of the days your practice operates. Monday's tape will always be overwritten on Monday of the next week; Tuesday's tape will always be overwritten on Tuesday of the next week, and so forth for the days the practice is open. b. Provide a water/fire proof vault or storage location for the data records so they will not be destroyed by fire or theft if a disaster happens. The best option is always to have your back up data stored at an off site location. c. Maintain a monthly back up of the period ending data for each of the period ends so you have a virtual recreation of the periods in case you ever need to look back into a period that is archived. | |

| Assess and Decide Steps | Your Checklist | Explanation |
|-------------------------------|---|--|
| 7 Reminders | IDEXX Contact For procedures on emailing reminders from Cornerstone, contact Support at 1-800-695-2877. Alternatively, you can purchase the most recent version of the Cornerstone Designated Staff & Management Training and Setup Guide. The Training Guide is nicely bound for current and future staff training. Contact IDEXX Computer Supplies at 1-888-224-4408. For the IDEXX Reminder Service, visit www.idexxreminderservice.com or contact your reminder service expert at 1-888-224-4408. | Method #2 - Purchase IDEXX Vet Vault , the on-line back up and disaster recovery service a. The VetVault system ensures data is kept off-site in a secured facility so if a natural disaster strikes, or your data is lost, it can be easily restored back to your practice either via the Internet or offline by overnight shipment using a restoration device. b. IDEXX VetVault will back up your data nightly through an electronic means, archiving a rolling 180 days worth of data. c. No human intervention is required. The back up will launch automatically at night, storing the data in an off-site, controlled storage location d. The data is secure utilizing the strongest commercially available algorithm so the data cannot be viewed during transmission. e. An end of period tape should always be kept to maintain an entire year's worth of data. VetVault maintains a rolling 180 days. Some practices, on the theme of less paper, will now evaluate their reminder delivery method. They may have documented call back or service reminders in their paper charts. Reminders can be performed by two methods, both of which accomplish the goal of providing a reminder to your clients for services that are either due or past due. Method #1 - Email reminders generated through IDEXX Cornerstone software a. Learn how to email reminders from Cornerstone. You'll need to ensure your front desk/client service protocols include the collection of an email account for new clients, and also the verification of their current email address. Method #2 - Utilize a reminder service that prints and mails reminders a. IDEXX provides an alternative by offering a service that completes the printing and mailing process for you. b. The IDEXX reminder service provides a low cost, no hassle option that increases staff productivity by performing this task for you. The steps are very easy: 1) Generate your reminders in Cornerstone 2) Pi |
| 8 Optional: Paging Devices | Research available paging devices and speak with other practices about their advantages in workflows and processes. | One operational item you'll have to make a decision on is how to let your staff know that a client has arrived so they may review the reason for visit and patient's electronic medical record. Consider purchasing paging devices to accomplish this. Intercoms are an option, but you'll need to consider the added noise level it brings to your practice. |
| 9 Internet Access | □ Contact your local Internet Service provider for | You'll need Internet for: |

| Assess and Decide Steps | Your Checklist | Explanation |
|--|---|---|
| | Internet installation costs and how to ensure secure access | Receiving diagnostic results and referral doctor information Electronically communicating with your clients |
| | | Note: Sometimes practices grapple with not implementing the Internet due to the risk of outsiders accessing their information through their installed Internet. Secure access capabilities exist to remove this risk. |
| 10 Compelling Business Case | Document your compelling business case for change. | Create a compelling business case for change. Write a statement or explanation regarding why the upcoming project is so important to your practice. Trust us, you'll refer to this statement again and again throughout the project. |
| | | The purpose of a business case is to capture the reasoning for initiating a project or task. The logic of the business case is that whenever resources such as money or effort are consumed, they should be in support of the business. Implementing paperless or paper-light might improve your medical records but the "business case" is that improved medical records would improve patient care, average invoice, and customer satisfaction. |
| 11 Core Team, Plan, and Communicate | Create a project plan using the template found in Appendix: Project Plan | A. Pull together a core team. Depending on your practice size, this may be a staff member from each department, or simply an enthusiastic doctor/owner, practice manager, and lead technician. |
| | List Potential Adoption Barners. Decide who will create Kickoff communication | Identify the following in your practice: |
| | date to communicate and communication format (s) | Project Champion – Someone who won't complete most of the work but who is ever present in communicating how important the change is to your practice's vision and goals. |
| | how they can communicate their thoughts and findings | Project Lead – Someone who will update the project plan and ensure tasks are on track. |
| | IDEXX Contact □ Consider investing in an Integrated Practice Coach service which provides a systematic | Project Resources – All those that will experience the new process and support/ encourage others. |
| | process of interviewing, benchmarking and reporting upon organizational technology barriers. Call 1-800-283-8386, option 2, for your Cornerstone Sales Representative. | B. Create a document that outlines the project title, project alignment with practice workflow, goal, benefits, risks, costs, timeline, phases, and how it will affect each department. Don't forget to include the celebration in your plan. |
| | | What "people resources" are you committing to the project? |
| | | Project Champion: (Characteristics: Possesses appropriate authority to assign financial and staffing resources to the project, while not necessarily participating in the project tasks at a hands-on level. Positive, enthusiastic supporter of the desired change who can communicate the benefits to others. Allows for staff incentives to |

| Assess and Decide Steps | Your Checklist | Explanation |
|--|---|---|
| | | motivate project adoption) |
| | | Project Lead: (Characteristics: Holds enough authority to make task assignments, allowed sufficient time away from other duties to oversee regularly scheduled project planning initiatives, allows for feedback from all sources, able to direct brainstorming and feedback sessions with poise. Responsible for determining project goal accomplishment) |
| | | Core Team: (Characteristics: Capable, eager and empowered staff member. Able to accommodate additional tasks related to the project in addition to existing workload. Discerning problem solver who can take initiative but also aware of times when other project personnel's input would be valuable to the success of the project. Able to meet deadlines) |
| | | C. Assess potential adoption barriers such as other concurrent projects, poor communication habits, leave of absences, lack of project planning, and/or lack of standards of care. |
| | | D. Communicate to all practice staff. Decide whether you create a memo/document first so it can be digested before a staff meeting. Include alternative methods to be used if staff are absent or for newly hired staff. See <i>Appendix: Kickoff Memo</i> |
| | | E. Hold the project kickoff meeting. Encourage staff to observe each other's work areas, list double entry work, and how/when to report their findings |
| 12 Optional: Change Management | Schedule and complete Change Management Interviewing using the interview questions found in: Appendix: Change Management Process - Interview Questions. | Managing the people side of change accounts for a majority of any project. Some practices have experienced success with implementing this step to identify barriers and ensure staff have been heard. Use a person who is viewed as an objective party to interview each staff member for 10-15 minutes, compile the results, and then make adjustments to the project plan with a report to staff so they know they've been heard. |
| | IDEXX Contact □ Call 1-800-283-8386, option 2, for your Cornerstone Sales Representative and bring a Performance Improvement Specialist to your practice for change management services. Standard remote and on-site coaching rates apply. | |
| 13 Optional: IDEXX Expert – Medical Record Options | Review Appendix: Electronic Medical Note Options, Advantages, and Disadvantages Schedule and hold Medical Record Option | Practices have experienced success with having an IDEXX expert come on-site with the following agenda: |

| Assess and Decide Steps | Your Checklist | Explanation |
|---|--|---|
| | Overview session. | Practice provides tour/explanation of exam workflow vision to Cornerstone Coach Without reference to specific software screens With reference to roles at practice and desired client interactions Include desired elements of paper charts, check-in reports, and/or travel sheets Cornerstone coach explains medical record strategy options Discuss, explain, and demonstrate medical note strategy options. See Appendix: : Electronic Medical Note Options, Advantages, and Disadvantages Medical note draft set up and trial Make decision on medical note strategy to use Refine configuration and setup for selected option, such as order of data entry fields, including: Discuss who/where/what before exam room Discuss who/where/what during exam room Discuss who/where/what after exam room |
| 14 Lost time/missed charge inefficiencies | Complete Appendix: Calculate Lost Time/Missed Charge Inefficiencies. IDEXX Contact Call 1-800-283-8386, option 2, for your Cornerstone Sales Representative to have the Learning and Performance team calculate your opportunities with the Appendix document. | Calculate the metrics below. This is how you'll know you've reached the finish line. Inefficiencies in double entry of information into your paper charts and Cornerstone Inefficiencies in lost or misplaced paper chart Missed charges |

Phase 2: Design

Your next phase includes designing and configuring your Cornerstone system to match your vision, and preparing your staff for the changes you are going to implement.

The steps in this phase include the following.

Phase 2: Step Summary

- 1. Most Frequent Patient Visit Work
- 2. New Client Process
- 3. Client Marketing
- 4. Cornerstone Database Coach
- 5. Appointments Scheduled
- 6. Medical Record Overall Medical Notes, Weights, Client Concerns/Complaints, Medical Problem, TPR, Exam Findings
- 7. Medical Record -Lab Requests and Results
- 8. Medical Record Diagnosis, Charges, Estimates / Treatment Plans
- 9. Medical Record Recommendations: Current Visit, Current Life stage, Future Life stage
- 10. Electronic Whiteboard
- 11. Patient Discharge/Check-out/Invoice/Payment
- 12. Post-Visit Management
- 13. Inventory Management and Tracking

A checklist containing an explanation of each step and your work for each step follows.

Design Checklist Instructions: Use the first column to identify the step description. Use the second column as a checklist. Use the third column as an explanation for the checklist, if needed.

| Design Steps | Your Checklist | Explanation | |
|--|---|---|--|
| 1. Most Frequent Patient Care Visit | Review Appendix: Cornerstone Workflows | In this step, the 80/20 rule applies. Overall, make setup and usage decisions for your most frequent patient care visits. | |
| Work | Assign team to complete Appendix: Design Phase – Patient Care Visit Work for most frequent visit types. | Understand Cornerstone Workflows Understand how to process the electronic medical record for an Outpatient Visit in Cornerstone | |
| | Review Appendix: Electronic Medical Note Options, Advantages, and Disadvantages and make decision how you'll record medical notes based on your most frequent patient care visits | Understand how to process the electronic medical record for a Hospitalized Visit in Cornerstone Understand how to process visits when diagnostic lab and imaging special actions are applied in Cornerstone (See Appendix: Cornerstone Workflows) | |
| | Request your applicable version of the Default Settings Guide for setup and configuration path and decisions from Cornerstone Support. | Understand the High Level Creation Process for an Electronic Medical Record Use the following high level process to understand the process you'll undertake to get one patient care routine off the ground. | |
| | Support. | Outline Protocols (including services and Inventory Items) Outline Cornerstone Electronic Medical Record Features to accomplish a Patient Care Visit (See Table: Outlining Electronic Medical Record Features below) | |
| | IDEXX Contact Call Cornerstone Support at 1-800- 695-2877 and ask for an electronic version of the Default Setting Guide for your installed Cornerstone version | Set up Cornerstone Electronic Medical Record Features Have Doctors/Staff Test Make Adjustments Test Staff Training Start Using | |
| | | Table: Outlining Electronic Medical Record Features Design how you'll use Cornerstone features to work together for your most frequent patient care visits such as a Wellness Exam, Sick/Injured, or Surgery. | |
| | | Key Electronic Explanation Feature | |
| | | Patient Alerts Set up and enter all medial alerts (vaccination reactions, seizures, allergic reactions.) | |

| Design Steps | Your Checklist | Explanation | | |
|-----------------------|--|---|--|----------|
| | | Compliance Alerts | Set up protocols in the Compliance Assessment Tool and turn on compliance alerts will allow your staff to be alerted that a patient is eligible for important patient care. | |
| | | Reason for Visit | Ensure the reason for visit is concise and parallels how it was recorded in the paper charts for later searching | |
| | | Medical Notes | See Appendix: Electronic Medical Note Options, Advantages, and Disadvantages to make decisions on the electronic medical note features to use | |
| | | Problem (s) | Set up or refine the problems associated with your key visits because the staff won't be able to write in the paper chart any longer. They can write in a text field in medical notes or physical exam, but it will be viewable on the Problems tab of patient history only by utilizing problems set up under Controls > Problems. | |
| | | Physical Exam | Use existing System Templates or modify them to create your own | |
| | | Smart Group, Pick Lists, Invoice Items, and Special Actions | Invoice Item Descriptions – Decide on hospital vs. client description and how you want it to print on the invoice. Invoice Items – Using the most standard protocol, identify the group of invoice items | |
| | | | Special Actions - Identify the special actions to use in order to automate the generation and recording of patient care. Here are some special actions that probably aren't set up yet if you still have paper charts: | |
| | | | Feeding Guide Software | |
| | | | Lab Request | |
| | | | Print Document Judata Weight | |
| | | | o Opuate weight | |
| 2. New Client Process | Create New Client Information Form Client Correspondence Document Create New Client medical note template or Set up Imaging | Make decisions on y Create Clie this out and making it n such as en | your new client process using Cornerstone documents, templates, and required fields. ent Correspondence Document, a New Client Information Form. You'll be able to print d have the client complete it so the information collected parallels your staff's entry wor nore efficient. Don't forget to include required fields that support your paperless practic nail addresses. | rk ce |
| | Keywords Decide on Required Fields for Patients and Clients. | 祭 Gina Toman Staff Training Coorc Seaside Animal Car "We have eliminated client and entering t personal." | linator e d this step by either driving them to our online site to register or by sitting down with the he info on a laptop (either the CSR OR TECH WILL DO THIS) We found that it's more | e |

| Design Steps | Your Checklist | Explanation |
|----------------------------------|---|---|
| 3. Client Marketing | Create a marketing sub-team and have them devise messaging that will occur from Cornerstone. DEXX Contact If you need staff to be trained, call 1- 800-283-8386, option 2, for your Cornerstone Sales Representative and a Coaching Services quote. | Make a decision regarding where you'll scan and save documents that your new clients bring. You have two options: Scan into imaging. Advantages: Easy searching and image file size is smaller Disadvantages: Extra area of Cornerstone for Receptionists/CSR's to learn Attach Scanned Images to Medical Note Template. Advantages: Image is clear. Easier to standardize because images can't be recorded underneath ad hoc imaging keywords. Disadvantages: Image file size is larger Image sis saved outside of Cornerstone. (Place document in network location, then attach.) Image storage location must be added to backup Decide on required fields for patients and clients (Controls > Defaults > Practice > Required Data) A smart business will market their available services. Pull a sub-team together to begin your marketing plan for both existing clients and prospective clients. Where in Cornerstone will you need to make changes to present your unique practice services to your clients related to your new efficient, paperless system? Estimate Invoice Statement Client Correspondence Pet Health Report Card Reminder messages Departing Instructions |
| 4. Cornerstone Database Coach | If you need staff to be trained, call 1- 800-283-8386, option 2, for your Cornerstone Sales Representative and a Coaching Services quote. | that may make your paperless project longer. Also, you may discover there are some activities occurring that in the end, may improve your cash flow by eliminating double discounts to clients, missed charges, and failing to properly remind clients about future services. |

| Design Steps | | ur Checklist | Explanation |
|--|--|---|---|
| 5. Appointments Scheduled | | Document new operational and Cornerstone workflow expectations for your front office/client service area. | Software Your journey may include the following Appointment Scheduler changes and training for your receptionists/CSR's: |
| | | Schedule Appointment Scheduler Setup and Training. This may be the service you contracted in the Assess and Decide Phase: Step- Coaching and Training. Communicate the training date to your staff. | a. Appointment Scheduler to Patient Clipboard b. Patient Clipboard tab order change. c. Patient Clipboard to Appointment Scheduler d. Client Alerts e. Patient Alerts a. As each patient has an appointment, have the receptionists / CSR's transfer the medical alerts to the Cornerstone in the alerts set up. f. Linked Client Correspondence documents to Reasons for Visit g. Client Correspondence Authorization & Consent Forms Requiring Signature h. Scanning Forms and attaching to New Client medical note template i. Protocol for transferring charges from Patient Visit List to an Invoice j. New features if your journey includes upgrading from a previous version Hardware Needed k. Signature Capture Device for Authorization forms l. Scanner for new patient history (i.e. paper copy of their previous veterinary medical history) Change Management m. Change Receptionist / CSR Job Descriptions to include using technology for appointment scheduling and client intake n. Change performance metrics and performance reviews |
| 6. Medical Record – | | Collect your specific medical note | Software – Medical Note Templates |
| Weights, Client Concerns/Complai nts, Medical Problem, TPR, Exam Findings, | | template needs from your medical team. Review the charts to see what is currently recorded and needed. Review available medical note | There are many medical note templates that you'll eventually set up. The key is to focus on the most frequent patient care routines first and implement those medical note templates, with the others to follow. Review your charts to see medical record information currently being captured. Following, review the medical note templates that came with your Cornerstone installation. The templates that are available to you will depend on your new system installation date and converted information. |
| | | templates currently in your system as well as the list provided in this section. See Appendix-Medical Note Template Examples | a. U Overall, review those templates found under <i>Controls > Medical Note Templates</i> Consider adding these other templates: b. Boarding |
| | | Document medical note template creation order, rollout and communication plans | c. Call back d. Client Communication e. Doctor Release |
| | | Create Medical Team training | f. Dosage Change |
| | | Schedule Electronic Medical Record Setup Training for your | g. Doctor Case Summary h. Heartworm Test |

| Design Steps | Your Checklist | Explanation |
|--------------|---|--|
| | medical record administrators. This may be the service you contracted in the Assess and Decide Phase: Step-Coaching and Training. Schedule Electronic Medical Record Usage Training for your medical team. This may be the service you contracted in the Assess and Decide Phase: Step- Coaching and Training. Communicate the training date to your staff. Schedule staff and appointments appropriately so staff can complete their training | I. In-House Cytology j. Lab Results to Owner k. Non-anesthetic Dental Notes I. Outside Pharmacy m. Post Procedure Phone Call n. Progress Notes o. Schirmer Tear Test p. Skin Scraping q. SOAP r. Surgery Template s. Tx Template Software - Weights Some practices may be recording patient weights in the paper chart only. If so, you'll need to decide on where the patient weights will be entered in Cornerstone. Note: Wherever you select, ensure it's in a place where the Weights tab of the Patient History is updated so you may graph and void weights. Options for recording weights: a. medical Note 1. Advantage: Weight table not updated/Weight can't be graphed. c. Patient Clipboard - Weights 1. 1. Advantage: Weight table is updated/Weight can be graphed. c. Physical Exam - CS Foundation 1. 1. 1. Advantage: Weight is recorded with the rest of the patient visit record. 2. Disadvantage: Weight table is updated/Weight can be graphed. c. Patient Clipboard - Check-in 1. 1. 1. Advantage: Weight is recorded with the rest of the patient visit record. 2. Disadvantage: Weight is recorded with the rest of the patient visit record. 2. Disadvantage: Weight is rec |
| | | a. Disadvantage: weight table not updated/weight can't be graphed. e. Patient Advisor 1. Advantage: Weight is recorded with the rest of the patient visit record. 2. Disadvantage: Weight table not updated/Weight can't be graphed. Software - TPR Where will you record Temperature, Pulse, and Respiration (TPR)? a. Medical Note b. Whiteboard c. Physical Exam –CS Foundation |

| Design Steps | Your Checklist | Explanation |
|---------------------|------------------------------------|---|
| | | d. Detient Advisor |
| | | |
| | | Software – Client Concerns/Complaints |
| | | You'll need to decide where the client's concerns and complaints related to their pet will be recorded. |
| | | a. Additional Notes/ Check-In Screen |
| | | |
| | | Software – Medical Version of Problems |
| | | You'll need to decide where the medical versions of the problems will be stored. Your options follow. (See Reports > Practice > Problem List Setup Report) |
| | | c. Detient Clipboard - Problems |
| | | d. 🗌 Medical Note w/ Problem List |
| | | |
| | | Software – Assessment Checklist/ Exam Findings |
| | | Where will you record exam findings? |
| | | e. Dimedical Note |
| | | α Patient Advisor |
| | | |
| | | Hardware |
| | | h. Sufficient server and workstations (workstations might be desktop, tablet, or laptop devices) |
| | | |
| | | Change Management |
| | | i. Client Concerns / Problems - Designated role for capturing this information. Will this be done by receptionist at intake, technician in exam room or veterinarian upon exam? |
| | | j. Uveights - Standardized point in patient visit for weight capture. Whose role is it? |
| | | k. Weights - Where is this accomplished? (ex. Lobby floor scale, exam room table scale) |
| | | I. Will each exam result in a printed Patient Health Report card for the client? |
| | | m. U Will clients be provided with digital or print form of captured images? |
| | IDEXX Contact | |
| 7. Lab Requests and | Call 1-800-283-8386. option 2. for | Lab Requests |
| Results | your Cornerstone Sales | Software |
| | Representative to receive an IDEXX | Decide where you if enter has requests whether it's from the IDEXX ver Lab Station of Comerstone. |
| | auote. | Hardware |
| | | a. 🔲 Lab Results Options |
| | | 3. 1 st Recommendation: High Speed Internet access for downloading results |
| | | 4. 2 nd Recommendation: Manually enter results. Set up manual lab results template. |
| | | 5. Scanner for non-IDEXX results. Disadvantages: Lab tab on Patient Clipboard is not updated and lab |

| Design Steps | Your Checklist | Explanation |
|---|--|--|
| | | results can't be graphed. Change Management b. Regularly scheduled update maintenance to insure profiles/pricing are current c. Establish staff methodology for follow-up on lab results |
| 8. Diagnosis, Charges, Estimates / Treatment Plans | Document your decisions regarding who will record diagnosis, charges, and estimates/treatment plans by patient visit type. | Software -Diagnosis Where are the diagnoses recorded? a. Medical Note w/ Diagnosis List b. Physical Exam - Cornerstone Foundation c. Patient Advisor Software - Charges Where will you record product and service charges, including prescriptions? d. Medical Note Template w/ Invoice Items e. Patient Visit List f. Whiteboard Software - Estimates From which location will estimates be produced? g. Estimates (using Smart Groups/Pick Lists) h. Estimates (using Smart Groups/Pick Lists) i. Patient Advisor Hardware n. n. Sufficient server and workstations (workstations might be desktop, tablet, or laptop devices) Change Management o. o. Establish protocol for who enters diagnosis, charges, estimates and treatment plans and at what point in the visit p. Winture use will capturing diagnoses have for: marketing, medical, professional development and epidemiologic research? r. Estimates - Signature capture device for estimates, authorization forms s. Verify email accounts for sending Estimates/Plans |
| 9. Recommendations – Current Visit, Current Life stage, | Document your decisions of whom and where you'll record recommendations. | Software |

| Design Steps | Your Checklist | Explanation |
|-------------------|---|--|
| Future Life stage | | Where are you going to enter the verbal recommendations provided to the client for the current visit, current life stage, or future life stage? |
| | | a. Medical Note |
| | | b. Dedical Note, 'include in Client Correspondence' |
| | | c. D Patient Advisor Treatment Plans |
| | | e. System Outside Cornerstone |
| | | External |
| | | How will you provide written recommendations for current visit, current life stage, and future life stage? |
| | | a. Feeding Guide |
| | | b. Departing Instructions |
| | | d. Client Correspondence –LifeLearn |
| | | e. Client Correspondence – Other |
| | | f. 🗌 Medical Note, 'include in Client Correspondence' |
| | | g. Reminders/Callbacks |
| | | h. Departing Instructions |
| | | i. Estimate |
| | | k. 🗌 Email |
| | | I. System Outside Cornerstone |
| 10. Whiteboard | Assess, decide, design, communicate, train and implement the Electronic Whiteboard. | For treatments, surgeries, dentals, boarding, and/or scheduled vaccinations, now is the time to move your upcoming treatments from a treatment form, individual cages, dry erase board, or any other central physical location to the Electronic Whiteboard so that all patient care is captured, including the changes. |
| | IDEXX Contact | that are due (red for overdue treatments). Many times practices aren't recording all nursing care in their patient records or charts. |
| | Login into www.idexxlearningcenter.com and use Cornerstone 7.5 Basic Foundation online course. Call | Assess |
| | | 10.1 List care currently not recorded in your patient records or charts and frequencies. Talk to your attorney to evaluate the legal risks. |
| | 1-800-695-2877, x63430 for | 10.2 Identify efficiencies |
| | IDEXX Learning Center helpline if you need courses assigned to your practice. | 10.3 Identify patient care and client value perception opportunities. |
| | | 10.4 Learn about the Electronic Whiteboard feature and how it works with other features to record and complete the medical record. Options: |
| | for your Cornerstone Sales Representative to purchase | Receive a demonstration of the Electronic Whiteboard from your IDEXX Computer System Sales Representative. |

| Design Steps | Your Checklist | Explanation | |
|--------------|--|---|--|
| Design Steps | Your Checklist instructor-led training for the Electronic Whiteboard training Coaching Series course, Electronic Medical Record and Whiteboard Setup Training and/or Electronic Medical Record and Whiteboard Usage Training. Visit www.idexxlearningcenter.com for | Explanation • • | Use the print, Cornerstone 7.5 Self-Paced Enhancement Training provided with Cornerstone available under your Cornerstone program group, which covers Whiteboard training. IDEXX Learning Center's course: Cornerstone 7.5 Basic Foundation. Hospitalized Visit section. Cornerstone 7.5 Basic Foundation Training Guide. Speak with a like size/type practice Schedule meeting to introduce the Electronic Whiteboard opportunity to your practice management and medical teams. Gain commitment from staff to move forward with Electronic Whiteboard. Purchase customized Coaching time that can be delivered through an online or on- |
| | the course topics and available course dates. Call 1-800-283-8386, option 2, for your Cornerstone Sales Representative to purchase onsite Electronic Whiteboard Setup, Training & Implementation. Purchase Cornerstone 7.5 Basic Foundation Training Guide and use the Hospitalized Visit section, which covers Whiteboard. Contact the IDEXX Computer Systems Supply Department (1-888-224-4408). | Design 10.5 A 10.6 P • • • • • • • • • • • • • • • • • • • | site format. Optional: Contact ICS Sales Representative for large flat screen purchase. Collect flat screen specifications and costs. ssign a project leader. roject leader completes training. Options: Use the print, Cornerstone 7.5 Self-Paced Enhancement Training provided with Cornerstone and available under your Cornerstone program group, which covers Whiteboard training. IDEXX Learning Center's course: Cornerstone 7.5 Basic Foundation. Hospitalized Visit section. Register for our upcoming online, instructor-led Electronic Medical Record & Whiteboard Setup or Usage courses found on the IDEXX Learning Center. Cornerstone 7.5 Basic Foundation Training Guide. Purchase our Cornerstone 7.5 Basic Foundation Training Guide and use the Hospitalized Visit section, which covers Whiteboard. Purchase customized Coaching time that can be delivered through an online or on-site format. Iold Project Kickoff – Assign a project leader, establish the core project team, work through the roject plan, establish project meeting times and a communication plan |
| | | 10.8 ld 10.9 ld m P 10.10 C ris | Suggested Approach – Implement Noncritical to Critical Boarding Hospitalized Feedings Vaccinations Dentals Surgeries |
| | | Implement | |
| | | 10.11 S | chedule Training |

| Design Steps | Your Checklist | Explanation |
|--|---|---|
| | | 10.12 Security and Setup |
| | | 10.13 Conduct Training - Remaining medical team completes training, including decision making, setup, and security with key medical team members |
| 11. Patient Discharge/Check- out/Invoice/Payme nt | Assess, decide, design, communicate, train and implement new check-out procedures. | What indicates all charges, treatments, medication, results and educational pieces are prepared and finalized for the client? What takeaways are provided to client? a. Patient Visit List b. Patient Clipboard to Client Account/Payment on Account c. Client Correspondence education documents d. Pet Health Report Card e. Care Credit f. QuickBooks Merchant Services g. Client Correspondence (merged/linked) Hardware a. a. Sufficient workstations (could be desktop, tablet, or laptop devices) b. Credit card reader c. Color printer d. CD burner e. Email account for providing recommendations to the client |
| 12. Post-Visit Management | Assess, decide, design, communicate, train and implement new post-visit management procedures. | After patient care, case management What processes are in place to pro-actively monitor treatment progress or resolution? a. Daily Planner – Medical notes b. Daily Planner – Callbacks Hardware c. Sufficient server and workstations (workstations might be desktop, tablet, or laptop devices) d. Email account for providing follow-up to the client Change Management e. Veterinarians held responsible for transcription review and finalization in timely manner f. Daily protocol for follow-up callbacks created g. Provider's schedule for this duty |
| 13. Inventory Management and | Access the free inventory training available through your | Read through the following: |

| Design Steps | Your Checklist | Explanation |
|--------------|---|--|
| Tracking | Cornerstone program group available on a workstation where Cornerstone is installed. | Quantity on Hand Tracking Quantities on hand accurately tracked for all classifications except medical supplies |
| | IDEXX Contact Call 1-800-283-8386, option 2, for your Cornerstone Sales Representative to purchase inventory | Inventory Item Tracking a. Inventory tracking, including order/receipt entry and markup/margin management |
| | training through our Coaching Series | Please mark the most appropriate description of your business practice: |
| | www.idexxlearningcenter.com for the | a. 🔲 Single Practice, Single Location within a practice for single item |
| | course topics and available course | b. Single Practice, Multiple Locations within a practice for single items |
| | dates. | c. I Multiple Practices/Sites, Single Location within a practice for a single item |
| | | d. Multiple Practices/Sites, Multiple Locations within a practice for multiple items |
| | | Hardware |
| | | a. Sufficient workstation in location away from central traffic |
| | | b. Bar code Scanner with USB or with Bluetooth wireless (Laptop with Bluetooth card) |
| | | c. 🗌 Printer, labels |
| | | d. 🗌 Printer, paper |
| | | |
| | | Change Management |
| | | a. Entire staff instruction in tracking efforts put into place |
| | | Description Process for staff to record usage and/or purchase requests, if not involved in Cornerstone Inventory management |
| | | c. Timely, regularly physical inventory, recommended at least quarterly. Staffing responsibilities should reflect accommodation for this important step. |
| | | |

Phase 3: Implement

Your next phase includes implementing the decisions you've made.

Phase 3: Step Summary

- 1. Training Plans and Schedule Training
- 2. Cornerstone Setup
- Security Changes
 Default Changes
- 5. Training
- Medical History Summary at Transfer Date
 Each Subsequent Visit Patient Alerts and Marking Paper Chart

Implement Checklist

Instructions: Use the first column to identify the step description. Use the second column as a checklist. Use the third column as an explanation for the checklist, if needed.

| Impleme | ent Steps | Your Checklist | Explanation |
|--------------------------|--------------------------------|---|---|
| 1. Trair and Trair | ning Plans Schedule ning | Create training plans. See Appendix: Sample Training Plans and schedule training | Create your training plans and schedule training for: |
| 2. Corr Setu | nerstone up | IDEXX Contact Call 1-800-283-8386, option 2, for your Cornerstone Sales Representative for a Coaching Services quote to assist with the setup either remotely or on-site. | Each day, make setup and configuration changes, communicate, and implement the following: Software a. Staff Login - Staff have individual logins. This will allow the automation of medical records by the staff who created them. It will also allow you to monitor more transactions more efficiently that will be entered into Cornerstone. See Security Changes step that follows. b. Appointment Scheduler c. Boarding/Grooming d. Manual Lab Templates e. Integrated In-House Laboratory f. Integrated Reference Laboratory g. Integrated Reference Laboratory g. Integrated Reference Laboratory g. Setup, Client and Patient Alerts j. Setup, Client and Patient Alerts j. Setup, Dick Lists/Smart Groups/Special Actions/Dispensing Items- Smart Groups, Pick Lists and Dispensing Items set up to accommodate most patient care visits and support high level business goals and standards of care. Set up the Pick Lists and Smart Groups related to the majority of your visits. If you have SmartLink Imaging with Cornerstone 7.6, collect the 7.6 Basic Foundation Training Guide Addendum for chart on how to handle x-ray invoice items within Smart Groups. k. Setup, Medical Note Templates – Set up the medical note template based on a. Electronic Medical Record Strategy selected b. Most Frequent Patient Care Visits n. Controls > Problems (Note: For fee, Support c |

| Implement Steps | Your Checklist | Explanation |
|------------------------|--|--|
| | | p. Miscellaneous Setup Configuration Backup Logs Backup Verification Assistant |
| | | Change Management 1. Communicate benefits and consequences of not using with staff 2. Expect and plan role changes for some staff with new expectations for capturing data. Also plan and communicate expected actions when alerts are presented 3. Create project plan calendar and review events in management meetings 4. Provide time for designated staff member to regularly perform compliance computations and report them as desired to management and staff. 5. Tie incentives to improvement |
| 3. Security Changes | Select date to make security changes and communicate to staff the effective date IDEXX Contact Obtain a Security Settings Guide that matches your Cornerstone version from Support by calling 1-800-695-2877. Call 1-800-283-8386, option 2, for your Cornerstone Sales Representative for a Coaching Services quote. | Review/set the security related to electronic medical records using a Cornerstone Security Settings Guide. This guide provides recommended security settings by role, such as Administrator/Practice Manager, Receptionist, Doctor Associate, Technician. With electronic medical records, you'll want staff to log in and out of Cornerstone with their individual log-ins. This will improve efficiencies such as which screen automatically opens upon log-in, the tabs to display on their Patient Clipboard, or the default medical note template to display. Another reason for having staff log in and out with individual log-ins is so a manager can review omissions and deletions on the following reports: EOD Report: Daily Inv and PVL Entries. EOD Report: Medical Notes Finalized by EOD EOD Report: Daily Patent Visit List Entries (Review deleted) |
| | | Below are some examples of security settings you'll want to ensure that staff have appropriate access. Lab Maging Voiding weights Invoice Item Whiteboard Medical Notes Daily Planner Apply setup options to Administrator/Owner/Manager only |

| Implement Steps | Your Checklist | Explanation |
|--|---|--|
| | | (It's also a good idea to review new security setting options by version and review access privileges occasionally using the resources provided with your new release packets. |
| 4. Default Changes | Review and configure these setup areas. | Lists >Staff Controls > Problems Lists > Diagnostic Codes Lists > Electronic Whiteboard Lists > Patient Hospital Status Lists > Ward/Loc Lists > Physical Exam (or Patient Advisor) |
| 5. Training | □ Schedule and complete training. | Schedule and complete these tasks: Consider closing to maximize your training Schedule staff and appointments appropriately for the training Consider lunch and learn sessions Complete training by function/role using the training plans in previous steps Use the print training tools available free to clients on Support and found under the Cornerstone program group. Use the companion training files found in Start > Programs > Cornerstone > Training Files > Cornerstone Tutorial. These training files are staged with clients, patients, invoice items, etc that work with the training tools. |
| 6. Medical History Summary at Transfer Date | Assign tasks, train how, and decide when it begins. Communicate to all staff because they'll need to know where they should seek this information at each point in your transition. | Under a designated date enter a summary of medical problems, vaccinations and pertinent information into electronic medical notes. Create a medical note template that is labeled, "Medical History Summary at Electronic Medical Record Transfer Date" |
| 7. Each Subsequent Visit – Patient Alert and Mark Paper Chart | Assign tasks, train how, and decide when it begins. Communicate to all staff because they'll need to know where they should seek this information at each point in your transition. | Create a patient alert labeled, "Paper Chart Status." Make a note in the pop-up alert window that the paper file has been entered and retired, so that you won't continue to pull that chart. Mark paper chart when all information has been entered for the patient, so that you will no longer have to pull that paper record. |

Phase 4: Measure and Manage

Your next phase includes measuring and managing the changes.

Phase 4: Step Summary 1. Daily Planner

- 2. Reports
- 3. Metrics

Measure and Manage Checklist Instructions: Use the first column to identify the step description. Use the second column as a checklist. Use the third column as an explanation for the checklist, if needed.

| Measure and | | Your Checklist | | Explanation | |
|-------------|---------------|----------------|--|---|--|
| Ма 1. | Daily Planner | | Communicate, set motivational rewards and incentives, and identify the monitoring plan | Monitor daily for: Entries remaining on the Patient Visit List Callbacks (There won't be paper charts held by a staff member as a tickler to call a client Unfinished Medical Notes Create rewards | |
| 2. | Reports | | Communicate, set motivational rewards and incentives, and identify the reports management plan | Review new reports to manage and quality check the electronic medical records EOD Report: Daily Inv and PVL Entries. EOD Report: Medical Notes Finalized by EOD EOD Report: Daily Patent Visit List Entries (Review deleted) | |
| 3. | Metrics | | Assign staff to report the metrics. Train staff to find the measures. Decide on the frequency and method of metric reporting | Assign, calculate, graph and report upon the following metrics: Average Invoice amounts Compliance percentages Revenue dollars | |

Appendix

Appendix: Reasons for a Paperless Practice

- 1. Increase your practice's value before you retire
- 2. Increase your practice's revenues and average invoice by capturing missed charges
- 3. Align patient care protocols amongst the medical team, improving patient care by offering the best of the best
- 4. Be excited to come to work
- 5. Improve your efficiencies
- 6. Impress your clients
- 7. Stop searching for lost paper charts and records
- 8. Share medical records more easily
- 9. Make it easier for others to read your case notes and recommendations
- 10. Let your team go home on time
- 11. Decrease your paper consumption go green
- **12.** Reduce your changes of running out of physical storage space in your practice it's too expensive and too valuable

Appendix: Sample 7.6 Paperless/Paper-light Hardware and Peripheral List

- □ IDEXX Vet Lab Station
- □ IDEXX DR/CR for Digital Imaging
- □ Server Upgrade
- □ Workstations / Tablet PC's
 - a. At appointment scheduling /boarding reservation locations
 - b. At weight taking locations
 - c. In consultation areas
 - d. In exam rooms
 - e. In treatment area
 - f. In lab areas
 - g. In pharmacy areas
 - h. Post visit case management
- □ Memory Upgrades
- □ Seat License (s)
- □ Upgraded Backup Software or IDEXX VetVault
- D IDEXX Reminder Service
- □ Access Point(s) one needed for Tablet PC's
- Digital Camera
- □ 3 Signature Devices: Clipgems or Signature Pads (Note: Average practice = 3 Signature capture devices for front office)
- 2 Document Scanners (Note: 1front office and 1 back office)
- 3 Bar code scanners (Note: 2 front office and 1 back office)
- Large Flat Screen for Whiteboard, Mounting bracket, 42" wide screen flat panel
- LifeLearn CD
- □ Pharmacy Formulary
- Color Printer (Dell 3110) for Patient Report Cards (Note: Abnormals print in red)



Date:

To:[Practice Name] StaffFrom:Practice Management TeamRE:Paperless and Integrated Practice Project



Dear Staff,

Memo Purpose

The purpose of this memo is to ask for your contributions and efforts towards a new goal of our practice becoming paperless and a high performing Integrated Practice

What is an Integrated Practice?

An integrated practice is one where the medical and management systems are linked. It is a practice where all aspects of a practice (management practices, technology, protocols, etc.) support one another to optimize the desired level of practice performance.

What are the Practice Benefits?

When our practice reaches a high performing level, the results are:

- Streamline the process by connecting patient records with lab data
- Increased client compliance by using integrated information to educate and remind clients
- A healthy return on investment

What are the Benefits to You?

- Go home on time
- Medical record information at your fingertips that is easy to read
- Spend more quality time with patients

Your Action

We need your help to make this happen. Please take action in the following ways:

- When the event arises to refine our workflows, contribute to the necessary changes and present concerns and barriers to the management team as soon as possible
- Become aware of the goal and tasks so you can support your team mates
- Complete the training when prompted
- Encourage and support others as they utilize new Cornerstone features

Our Actions Together

Together, we will review performance and make necessary adjustments to meet our patient care needs.

Sincerely,

Practice Management Team

Appendix: Calculate Lost Time/Missed Charge Inefficiencies

| Paper Chart - Productivity/Efficiency Opportunities | Time to enter in Chart (Mins) | Average # Per Day | # of Days Open | Total # of Mins/Hours | Avg Hrly Wage Benefitted | Annualized Double Entry in Labor \$\$\$ |
|---|----------------------------------|----------------------|----------------|--------------------------|-----------------------------|---|
| Example: | 10 | 40 | 360 | 144,000 2400 | \$16 | \$38,400 |
| 1. Enter medical notes in paper chart | | | | | | |
| 2. Enter prescription information in paper chart | | | | | | |
| 3. Record lab results in paper chart | | | | | | |
| 4. Record image results in paper chart | | | | | | |
| 5. Record other information in paper chart | | | | | | |
| 6. Record Search | | | | | | |

| Missed Charges | Estimated # Missed Weekly | Average Charge | Annualized Losses |
|--|------------------------------|----------------|-------------------|
| 7. Reference Lab Missed Charges | | | |
| 8. In-House Lab Missed Charges | | | |
| 9. Imaging Missed Charges | | | |
| 10. Other Missed Charges (Hint: Compare travel sheets/charts to CS Itemized Audit Trail) | | | |

Appendix: Cornerstone Outpatient Workflow



Appendix: Cornerstone Hospitalized Workflow



Important Information: Critical Whiteboard Steps - Inpatient on Check-in, Patient Orders, Whiteboard - Patient Visit List (you can only access this from Patient Orders window), Whiteboard, Patient Treatments, Patient Visit List and Invoice



Appendix: Cornerstone Workflow with Laboratory and Imaging Invoice Items

Appendix: Medical Record Options, Advantages, and Disadvantages

Strategy A:

Medical Note Templates - Internal/External Purposes

Strategy B:

Medical Note Templates – Internal Purposes Physical Exam/ Patient Report Card – External Purposes

Strategy C:

Medical Note Templates – Internal Purposes 'Include in Client Correspondence' – External Purposes

Strategy D:

Medical Note Templates – Internal Purposes Physical Exam – Internal Purposes

Strategy E

Patient Advisor - Internal/External Purposes

| Medical Record Strategy A | Medical Record Strategy C | | | | | |
|--|---|--|--|--|--|--|
| Medical Note Templates Internal/External | Medical Note Templates Internal Client Correspondence External | | | | | |
| Advantages: One Template Design Easy to train to use Disadvantages: Mixed Medical and Client Friendly Terms Format Design Not Print Friendly | Advantages: Can view all items on one screen, which is conducive to a 10-15 exam Technician can easily review/reiterate visit key points from one screen Flexibility in Designing Client Friendly Report Card All Saved in Patient History (Client Correspondence if Referral Document) One Template to Enter Information and Client Information is Preset to Merge into Client Correspondence Document Disadvantages: Medical Terms will appear on Client Correspondence Document | | | | | |
| Medical Record Strategy B Medical Note Templates Internal Physical Exam / Report Card External | Medical Record Strategy D Medical Note Templates – Internal Purposes Physical Exam Report Card Internal | | | | | |
| Advantages: Physical Exam/Report Card Client Friendly Information Medical Terms Remain for Internal Use Only Both Saved in Patient History With Patient Advisor Have Treatment Recommendations Less Duplicate Entry at Recheck Standard Systems (Exam Findings)Text to Right Click and Select Disadvantages: Physical Exam Details Do Not Print on Patient History Report Two Different Templates Used to Enter Information | Advantages: One Template Design Less Duplicate Entry at Recheck Standard Systems (Exam Findings)Text to Right Click and Select Disadvantages: Physical Exam Details Do Not Print on Patient History Report Two Different Templates Used to Enter Information | | | | | |
| | Medical Record Strategy E Patient Advisor – Internal/External Purposes Advantages: One Template Design If desired goal is standard text for selection for various cases, much setup work Less Duplicate Entry at Recheck Standard Systems (Exam Findings)Text to Right Click and Select Medical Notes + Treatment plan + Diagnosis Combination Disadvantages: Adding Next Day Charges for Invoice Item Physical Exam Details Do Not Print on Patient History Report Treatment Plan Assumes Service Will Occur During the Same Visit (i.e. day) of Exam/Medical Notes | | | | | |

Appendix: Medical Note Template Examples

| Entry Name | Field Type | Default Item ID | Default Value | Entry Description | Include in corres | OK |
|-----------------|--------------|--------------------|---------------|-------------------------------|--------------------|-------------|
| [PROCEDURE] | CHAR | | | Enter the type of procedure | | Add |
| INVOICE ITEM] | INVOICE ITEM | | | Enter anesthetic | | |
| INVOICE ITEM2] | INVOICE ITEM | | | Enter maintaining anesthetic | | Delete |
| RISK] | | | | Enter presurgical assessment | | |
| TECH] | TECH | | | Enter attending technician ID | | Cancel |
| DURATION] | CHAR | | | Enter duration of procedure | | |
| HISTOPATHOLOGY] | CHAR | | | Enter histopathology | | Spell Check |
| REMARKS] | REMARKS | | | Enter comments | | |
| DATE] | DATE | | | Enter the date | | |
| TIME] | TIME | | | Enter the current time | | |
| PATIENT NAME] | PATIENT NAME | | | Enter patient name | | ↑ + |
| PATIENT ID] | PATIENT ID | | | Enter patient id | | |

| Wellness | Surgery | Sick / Injured | Other |
|--------------------|--------------------------|--------------------|-----------------------------|
| Canine SOAP | Castration Canine/Feline | Technician History | Fecal |
| Canine Exam | OVH Canine/Feline | Emergency | Heartworm Testing |
| Exam Wellness | Technician History | Exam Sick | Client Communication |
| Feline SOAP | Dental Routine | Cystotomy | Referral Communication |
| Technician History | ACL Repair | Gastropexy | Hospital Notes Tech per/day |
| Avian Exam | Anesthesia | | Lab results/Interpretation |
| Lizard Exam | TPLO Surgery | | Reproduction AI |
| Puppy Exam | Cornerstone Surgery | | Reproduction Semen |
| Kitten Exam | Pyometra Surgical Report | | Collection |
| | | | Reproduction Ultrasound |
| | | | |

Appendix: Hardware Assessment Table

| Hardware | (C) Current Location or (N) Needed Location | Memory (MB) | Processing Speed | Hard Drive Space (MB or GB) | Performance Level (A) Acceptable (U) Unacceptable NA (To Purchase) | Other Needs and Notes |
|-------------------------|---|-------------|---------------------|-----------------------------------|---|-----------------------|
| 1. Server | | | | | | |
| 2. Reception 1 | | | | | | |
| 3. Reception 2 | | | | | | |
| 4. Reception 3 | | | | | | |
| 5. | | | | | | |
| 6. Exam Room 1 | | | | | | |
| 7. Exam Room 2 | | | | | | |
| 8. Exam Room 3 | | | | | | |
| 9. Exam Room 4 | | | | | | |
| 10. | | | | | | |
| 11. Surgery | | | | | | |
| 12. Pharmacy | | | | | | |
| 13. Lab | | | | | | |
| 14. Doctor's Office 1 | | | | | | |
| 15. Doctor's Office 2 | | | | | | |
| 16. Doctor's Office 3 | | | | | | |
| 17. | | | | | | |
| 18. Technician Station | | | | | | |
| 19. Boarding & Grooming | | | | | | |
| 20. Manager | | | | | | |

Appendix: Project Plan (To Be Completed)

| Goal/ Task | Goal/ Task ID | Goal/Task | Start Date | End Date | Status (Not Started, In Progress, or Complete) | Responsibility/ Notes |
|---------------|------------------|---|------------|----------|--|-----------------------|
| Goal | | Increase our practice's average invoice from \$XXX.XX (Qx 2009) to \$XXX.XX by xx/xx/xx. | | | | |
| | 1.1. | Assess and Decide: | | | | |
| | 1.1.1. | | | | | |
| | 1.1.2. | | | | | |
| | 1.1.3. | | | | | |
| | 1.1.4. | | | | | |
| | 1.1.5. | | | | | |
| | 1.1.6. | | | | | |
| isk | 1.1.7. | | | | | |
| Ц Н | 1.1.8. | | | | | |
| | 1.1.9. | | | | | |
| | 1.1.10. | | | | | |
| | 1.1.11. | | | | | |
| | 1.1.12. | | | | | |
| | 1.1.13. | | | | | |
| | 1.1.14. | | | | | |
| | 1.1.15. | | | | | |

| Goal/ Task | Goal/ Task ID | Goal/Task | Start Date | End Date | Status (Not Started, In Progress, or Complete) | Responsibility/ Notes |
|---------------|------------------|---|------------|----------|--|-----------------------|
| | 1.2. | Train and Change: | | | | |
| | | Once gaps are identified, training is used to bring staff and management to new level of proficiency. | | | | |
| | 1.2.1. | | | | | |
| | 1.2.2. | | | | | |
| | 1.2.3. | | | | | |
| | 1.2.4. | | | | | |
| | 1.2.5. | | | | | |
| | 1.2.6. | | | | | |
| | 1.2.7. | | | | | |
| | 1.3. | Measure and Manage: Setting goals that can be quantified has a powerful influence on the success of any transition. | | | | |
| | 1.3.1. | | | | | |
| | 1.3.2. | | | | | |
| | 1.3.3. | | | | | |
| | 1.3.4. | | | | | |
| | 1.3.5. | | | | | |
| | 1.3.6. | | | | | |

Appendix: Sample Wellness Workflow



Appendix: Training Plan

| Training Procedure # | Training: | Doctor | Practice Manager | Front Desk Manager | Inventory Manager | Treatment Nurse | Room Nurse | Technician | Diagnostic Technician |
|----------------------------|-----------|--------|------------------|--------------------|-------------------|-----------------|------------|------------|-----------------------|
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R-Required Training G-General Training

Appendix: Training Tracking

| | | Name | Name | Name | Name | Name | Name | Name | Name | Name |
|----------------------|----------------------|----------|---------------------|--------------------------|----------------------|--------------------|---------------|------------|--------------------------|--------------------------|
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Hire Date | | Xx/xx/xx | Xx/xx/xx | Xx/xx/xx | Xx/xx/xx | Xx/xx/xx | Xx/xx/xx | Xx/xx/xx | Xx/xx/xx | |
| Position | | Doctor | Practice Manager | Front Desk Manager | Inventory Manager | Treatment Nurse | Room Nurse | Technician | Diagnostic Technician | Diagnostic Technician |
| Training Procedure # | Training Description | | | | | | | | | |
| | | | | | | | | | | |
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Appendix: Readiness Assessment

Instructions: The upcoming change at our practice is ______. Your feedback is critical to the implementation of this change and our practice readiness. Carefully read each statement and rate each on a scale from 1-7. Return to ______ by __/___/___.

| | | Strongly Disagree | | Disagree | | Agree | | Strongly Agree |
|-----|--|----------------------|---|----------|---|-------|---|-------------------|
| 1. | I fully understand the reasons for implementing the change. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 2. | I have a clear idea of how this change can improve the way patient care is provided at our practice. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 3. | I accept that my job tasks may change as related to this upcoming project. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 4. | I believe benefits to the practice are great and far outweigh the risks and costs involved | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 5. | I believe that communications regarding the upcoming changes are very thorough. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 6. | I believe suggestions related to a successful change will be heard and acted upon. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 7. | I believe <u>I am and will be</u> sufficiently involved in the change that impacts my work group. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 8. | I believe that change is being introduced in a way that shows clear concern for those affected by it. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 9. | I believe I will personally be better off as a result of the changes. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 10. | I believe the impact of changes on my work group will be very positive. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 11. | I believe the changes will have a positive impact on client and patient care. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 12. | I believe practice leaders are committed to support me while the changes occur. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 13. | I have great confidence and trust in the leaders responsible for planning the change. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 14. | I am confident that the change will be successful. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

Appendix: Change Management Process - Interview Questions

Attitudinal Questions:

- 1. What is your understanding of the business reasons for implementing paperless or paper-light using Cornerstone X.X?
- 2. What concerns do you have regarding your potential job task changes that may occur when implementing paperless or paper-light aspects such as electronic medical notes, signature devices, SmartLinked digital imaging, SmartLinked laboratory, and/or electronic whiteboard?
- 3. Will the suggestions related to a successful change be heard and acted upon? Why or why not?

Technical Questions:

- 1. What medical note or treatment information do you currently record in the paper chart?
- 2. What do you feel must continue to be recorded in the paper chart even when electronic medical records are used? Why?
- 3. What can be recorded in Cornerstone only? Why only there?
- 4. Who and what won't be able to be recorded in Cornerstone, such as medical notes and/or electronic whiteboard? Why?
- 5. Do you feel that elimination of paper charts can be accomplished in the next XX days? How do you recommend that this take place?

Appendix: Design Phase – Patient Care Visit Work

Patient Care Visit:

| Key Electronic Feature | Description | Explanation |
|--|-------------|--|
| Patient Alerts | | Set up and enter all medial alerts (vaccination reactions, seizures, allergic reactions.) |
| Compliance Alerts | | Setting up protocols in the Compliance Assessment Tool and turning on compliance alerts will allow your staff to be alerted that a patient is eligible for important patient care. |
| Reason for Visit | | This is probably already set up, but revisiting this for your key visits might be a good idea especially if the way it was labeled/written in the charts by staff so they could easily recognize doesn't parallel the current reasons for visit. |
| Medical Note Template / Physical Exam and SOAP Notations | | See the Appendix: Electronic Medical Record Strategy Options, Advantages, and Disadvantages |
| Problem (s) | | Set up or refine the problems associated with your key visits because the staff won't be able to write in the paper chart any longer. They can write in a text field, but it will be searchable if using the Problem List feature. |
| Smart Group, Pick Lists, Invoice Items, Special Actions, Dispensing Items | | Item ID Invoice Items Client Correspondence Documents / Report Card Call Backs Departing Instructions |