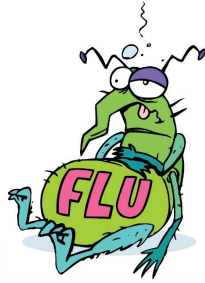


Influenza Screening & Immunization Orders

Out With the Old....In With the New!



Inspire Wellbeing — Together



Influenza Vaccine Screening

- Flu Season – October 1st thru March 31st
- **ALL** patients must be screened
- Quality measure



Influenza Vaccine Screening

- **Screening will begin October 1st for new admissions only**
- Patients who are in the hospital on October 1st who were admitted prior to October 1st (i.e. admitted September 30th) do not have to be screened



Why Do We Even Screen Our Patients?

- **Joint Commission Core Measure**
- Acute care patients age 6 months & older are screened for seasonal influenza immunization status & vaccinated prior to discharge if indicated
- **Documentation** (allowable values) **required** to meet core measure:
 - Patient offered & receives vaccine
 - Patient offered vaccine & refuses
 - Patient has contraindications to vaccine
 - Patient received vaccine prior to admission - during current flu season, but prior to this hospitalization

Influenza Screening – The Old Way

MED - ADULT INFLUENZA SCREENING and IMMUNIZATION ORDER FORM

Influenza Vaccination Status
(September 30th - March 31st only)

Drug/Food Allergies Sheet reviewed for previous vaccine
Add'l info. source: Patient Other _____

SCREENING

1. Vaccinated this season: Yes No/Unsure (per 42)

2. If not/Unsure, offer influenza vaccine and give: _____
 Influenza Vaccine (if 65 or older) Influenza Vaccine (if 65 or older) given

PATIENT RESPONSE
All patients age 18 and above

Patient refuses vaccine
 Patient agrees to take vaccine (indicate below)

REVIEW FOR CONTRAINDICATIONS

Vaccine Contra-indicated (note reason):
 History of Guillain-Barre
 Hypersensitivity to eggs or any of the vaccine
 Bone marrow transplant within the last 12 months
 Within 6 weeks of previous influenza vaccine
 Anaphylactic latex allergy

No Contra-indications Noted - Unless physician orders otherwise, 0.5 ml IM on the day following admission unless febrile (temperature of 101°F / 38.3°C or higher) Critical care patients will be given the vaccine at the time of transfer if able/well when physically able to get from the unit.
Scan this form to physician's order system

Physician's Signature: _____ Date: _____
Nurse Signature: _____ Date: _____

PO103
9/17

In the past, a paper copy of the *Influenza Screening & Immunization Order Form* was completed for all patients admitted to the hospital.



Influenza Screening – The New Way

Screening will now occur electronically...**NO MORE PAPER FORMS!**



Influenza Screening in the EMR

When completing the admission history, **influenza vaccine status** MUST be acknowledged.

The screenshot shows a portion of an EMR form. On the left is a navigation menu with 'Immunizations' highlighted in blue. The main content area includes several sections:

- Immunizations Current:** Radio buttons for Yes, No, None received, Unknown, Vaccine Recommended, and Other.
- Immunizations:** Text input fields containing 'influenza, inactivated: 0.5 mL (01/13/19)' and 'influenza, inactivated: 0.5 mL (11/13/17)'.
- Last TDAP:** Radio buttons for Less than 5 years, Greater than 5 years, None received, Unknown, and Other.
- Last Tetanus:** Radio buttons for Less than 5 years, Greater than 5 years, None received, Unknown, and Other.
- Tetanus/Tdap Immunization:** Checkboxes for None, Patient declined, Cans, secure, or enclosed, Currently pregnant and, and Hx of Guillain-Barre with.
- Influenza Vaccine Status:** Radio buttons for Received during this admission/visit, Received prior to admission, during current flu season, Not received, and Unknown. 'Not received' is selected.
- Influenza Vaccine Immunization Contraindications:** Checkboxes for None, Patient or caregiver refused, Not within season, Allergy/Sensitivity to vaccine, Anaphylactic egg allergy, Anaphylactic latex allergy, and Bone marrow transplant last 6 months. 'None' is selected.



If Influenza Vaccine Status is "Not Received" & Contraindications are "None"

This screenshot shows the 'Influenza Vaccine Status' section with 'Not received' selected and the 'Influenza Vaccine Immunization Contraindications' section with 'None' selected.

OR

Influenza Vaccine Status is "Unknown" & Contraindications are "None"

This screenshot shows the 'Influenza Vaccine Status' section with 'Unknown' selected and the 'Influenza Vaccine Immunization Contraindications' section with 'None' selected.

A task will fire to "Evaluate need for Influenza Vaccine"



If the patient has **not received** the flu vaccine during the current flu season & they or their caregiver **refuses** the vaccine, or there are **contraindications...no task will fire.**

Influenza Vaccine Status

Received during this admission/visit

Received prior to admission, during current flu season

Not received

Unknown

Influenza Vaccine Immunization Contraindications

None

Patient or caregiver refused

Not within season

Allergy/Sensitivity to vaccine

Anaphylactic egg allergy

Anaphylactic latex allergy

Bone marrow transplant last 6 months

Hx of Guillain-Barre within 6 wks of previous vaccination

Patient is Febrile

Vaccine not available

Including this encounter

Influenza Vaccine Status

Received during this admission/visit

Received prior to admission, during current flu season

Not received

Unknown

Influenza Vaccine Immunization Contraindications

None

Patient or caregiver refused

Not within season

Allergy/Sensitivity to vaccine

Anaphylactic egg allergy

Anaphylactic latex allergy

Bone marrow transplant last 6 months

Hx of Guillain-Barre within 6 wks of previous vaccination

Patient is Febrile

Vaccine not available

Including this encounter

Influenza season is typically between October and April. Follow your facility guidelines for exact dates.



“Evaluate Need for Influenza Vaccine” Task

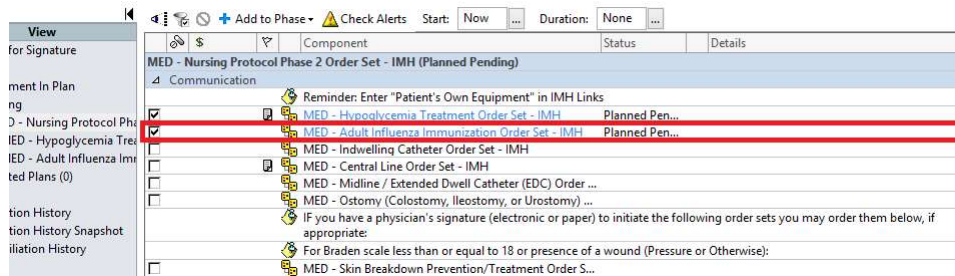
		Pending	7/31/2019 16:00 EDT	Skin Care	Skin Care	07/31/19 16:00:00 EDT, For intact skin at risk for breakdown related to incon...
		Pending	7/31/2019 16:00 EDT	Patient Education	Education General	07/31/19 16:00:00 EDT, Document patient education
		Pending	7/31/2019 16:00 EDT	Color Alert Armband	Color Alert Armband	07/31/19 16:00:00 EDT
		Pending	7/31/2019 18:00 EDT	Turn POC	Turn Patient POC	07/31/19 18:00:00 EDT, Remind and/or assist patient in repositioning using ...
		Pending	7/31/2019 18:00 EDT	Chart Check	Chart Check	07/31/19 18:00:00 EDT, Paper & Electronic Chart Check
		Pending	Unscheduled	Evaluate Need for Influenza Vaccine		

- Task will be **unscheduled**
- It will be located at the **bottom** of your task list
- If this task is on your task list, you **MUST** go to the Nursing Protocol and order the **“Influenza Immunization Order Set”**
- Once you have placed the Influenza Order Set, you can **“Done”** the task

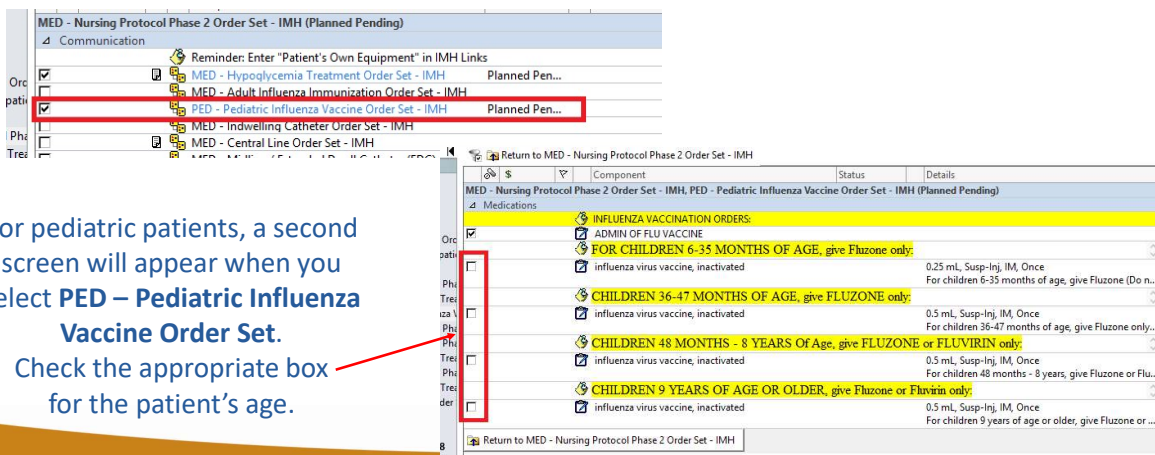


Influenza Immunization Order Set

If the patient **has not received** the vaccine & **agrees to get** the vaccine, check the box for **“Adult Influenza Immunization Order Set”** in the **Nursing Protocol Order Set**



Pediatric Influenza Immunization Order Set



For pediatric patients, a second screen will appear when you select **PED – Pediatric Influenza Vaccine Order Set**. Check the appropriate box for the patient’s age.



Initiate the Order

- Enter attending provider's name
- Select "Protocol/Standing Order"
- Click "OK"

Ordering Physician

Physician name: Attending Provider

Order Date/Time: 07/22/2019 0928 EDT

Communication type: Protocol/Standing Order

OK Cancel

Influenza Immunization Order Set

FYI....

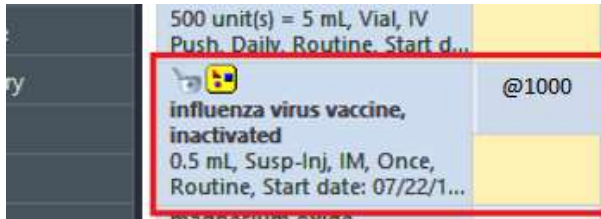
If the Nursing Protocol Order Set has already been initiated, click on the "lightbulbs" icon to view the excluded components – this will allow you to order the Med-Adult Influenza Order Set

Orders | Plan of Care

View Excluded Components

Component	Status	Details
MED - Nursing Protocol Phase 2 Order Set - IMH (Initiated)	Initiated	6/21/2019 11:46 EDT
MED - Hypoglycemia Treatment Order Set - IMH	Initiated	6/21/2019 11:46 EDT
Review Care Plan	Ordered	05/21/19 11:46:00 EDT, Qshift - 12
VTE, Quality Measures	Ordered	06/21/19 11:46:00 EDT

MAR Summary



- Once Pharmacy receives & reviews the “electronic” order, they will add it to the patient’s MAR.
- Vaccine will be scheduled to be given at **1000** the **day following admission**

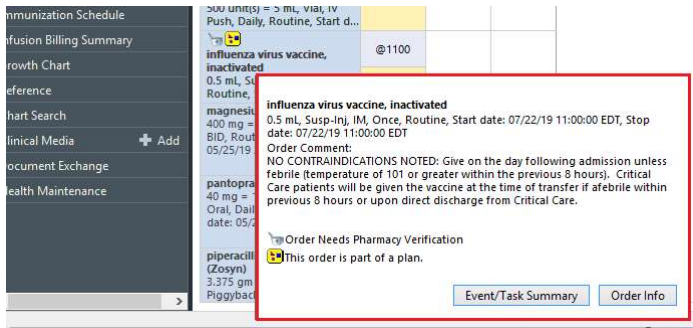


Evaluate Patient at the Time of Scheduled Administration

- At the time of the scheduled administration, evaluate the patient for contraindications for vaccine administration.
- **Delay/defer the vaccine if:**
 - Patient has had a **temperature of 101°F (38.3°C) or greater within the previous 8 hours**
 - Patient is **in the Critical Care Unit**
- CCU Patients **MAY** receive vaccine if they have been afebrile within the previous 8 hours and:
 - Have a pending transfer order to a lower level of care (med/surg or telemetry) – CCU should administer vaccine prior to transfer
 - Patient is a direct discharge from CCU – administer vaccine prior to discharge



“Hover to Discover”



“Hovering” the pointer over the medication will bring up the contraindications list.



influenza virus vaccine, inactivated
 0.5 mL, Susp-Inj, IM, Once, Routine, Start date: 07/22/19 11:00:00 EDT, Stop date: 07/22/19 11:00:00 EDT
 NO CONTRAINDICATIONS NOTED: Give on the day following admission unless febrile (temperatur...

*Performed date / time : 07/22/2019 1019 EDT

*Performed by : Tbbiz, Mwiuzl IC

Witnessed by :

*Lot Number :

*Manufacturer :

*Expiration Date :

*Vaccines For Children :

Vaccine Information Statements :

*Given :

*Statements :

*Published :

*influenza, inactivated: 0.5 mL Volume : ml

*Route : IM *Site :

Total Volume : 0.5 Infused Over : 0

7/22/2019 0900 EDT	7/22/2019 1000 EDT	7/22/2019 1100 EDT	7/22/2019 1200 EDT	7/22/2019 1300 EDT	7/22/2019 1400 EDT
--------------------	--------------------	--------------------	--------------------	--------------------	--------------------

Once you scan the vaccine vial, this screen appears...all areas in yellow are required fields.



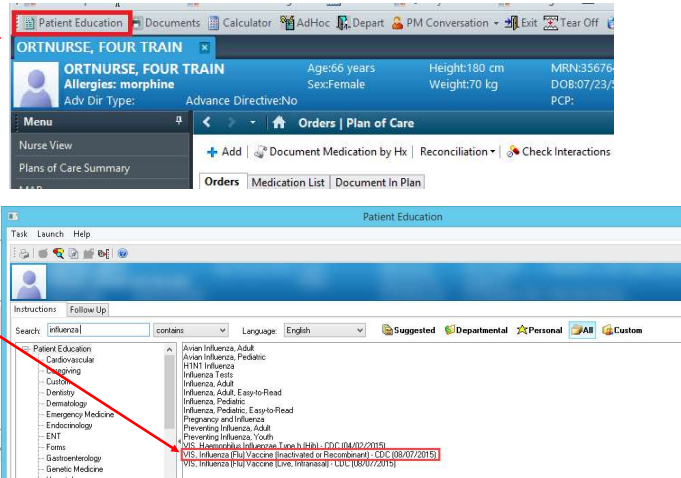
Select
“Not Qualified”
 Do not look up the
 patient's insurance
 as this is not
 required for the
 reimbursement.

- For the “Statements” section, select **“influenza (inactivated)”**.
- The date of the vaccine information sheet (VIS) will then **automatically populate** in the “Published” field.

Make sure the date on the vaccine information sheet you are giving the patient matches the date in the published field. If it does not, you will need to print a new one.

To print a new Vaccine Information Sheet (VIS):

- Go to Patient Education
- Search for Influenza
- Select VIS – Influenza (Flu) Vaccine (Inactivated or Recombinant) – CDC 08/07/2015



VACCINE INFORMATION STATEMENT

Influenza (Flu) Vaccine (Inactivated or Recombinant): What you need to know

Many Vaccine Information Statements are available in Spanish and other languages. For more information, visit www.cdc.gov/vaccines/imz/.
 Some of the information on this vaccine may not be available in Spanish or other languages. Visit www.cdc.gov/vaccines/imz/.

4 Risks of a vaccine reaction

With any medicine, including vaccines, there is a chance of reactions. These are usually mild and go away on their own, but serious reactions are also possible. Most people who get a flu shot do not have any problems with it.

Minor problems following a flu shot include:

- soreness, redness, or swelling where the shot was given
- hoarseness
- sore, red or itchy eyes
- cough
- fever
- aches
- headache
- itching
- fatigue

If these problems occur, they usually begin soon after the shot and last 1 or 2 days.

More serious problems following a flu shot can include the following:

- There may be a small increased risk of Guillain-Barré Syndrome (GBS) after inactivated flu vaccine. This risk has been estimated at 1 or 2 additional cases per million people vaccinated. This is much lower than the risk of severe complications from flu, which can be prevented by flu vaccine.
- Young children who get the flu shot along with pneumococcal vaccine (PCV13) and/or DTPa vaccine at the same time might be slightly more likely to have a seizure caused by fever. Ask your doctor for more information. Tell your doctor if a child who is getting the vaccine has ever had a seizure.

Problem that could happen after any injected vaccine:

- People sometimes faint after a medical procedure, including vaccination. Sitting or lying down for about 15 minutes can help prevent fainting, and injuries caused by a fall. Tell your doctor if you feel dizzy, or have vision changes or ringing in the ears.
- Some people get severe pain in the shoulder and have difficulty moving the arm where a shot was given. This happens very rarely.
- Any medication can cause a severe allergic reaction. Such reactions from a vaccine are very rare, estimated at about 1 in a million doses, and would happen within a few minutes to a few hours after the vaccination.

As with any medicine, there is a very remote chance of a vaccine causing a serious injury or death. The safety of vaccines is always being monitored. For more information, visit www.cdc.gov/vaccinesafety/

5 What if there is a serious reaction?

What should I look for?

- Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or unusual behavior.

Signs of a severe allergic reaction can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness. These would start a few minutes to a few hours after the vaccination.

What should I do?

- If you think it is a severe allergic reaction or other emergency that can't wait, call 9-1-1 and get the person to the nearest hospital. Otherwise, call your doctor.
- Reactions should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor should file this report, or you can do it yourself through the VAERS web site at www.vaers.hhs.gov; or by calling 1-800-822-7947.

VAERS does not give medical advice.

6 The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines.

Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling 1-800-338-2343 or visiting the VICP website at www.vaers.hhs.gov/vaccinecompensation. There is a time limit to file a claim for compensation.

7 How can I learn more?

- Ask your healthcare provider. He or she can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call 1-800-232-4636 (1-800-CDC-INFO) or
 - Visit CDC's website at www.cdc.gov/flu

Published Date

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

08/07/2015

42 U.S.C. § 300aa-26

(For Use Only)


11

The “Given” date is the date the patient was given the Vaccine Information Sheet, **NOT** the date the vaccine was administered.

Administration of Flu Vaccine Task

Select “Chart Done” to complete the task. This also charges for the actual administration of the vaccine by the nurse.

Task Status	Scheduled Date and Time	Task Description	Mnemonic	Order Detail
Pending	7/22/2019 09:28 EDT	Notify Provider	Notify Provider (For finger stick blood sugar less than 40 mg/dL)	07/22/19 9:2
Pending	7/22/2019 09:50 EDT	Notify Provider	Notify Provider (For finger stick blood sugar less than 40 mg/dL)	07/22/19 9:5
Pending	7/22/2019 09:50 EDT	ADMINISTRATION OF FLU VACCINE	ADMIN OF FLU VACCINE	07/22/19 9:5
Pending	7/22/2019 10:00 EDT	Review Care Plan	Review Care Plan	07/22/19 10:0
Pending	7/22/2019 10:00 EDT	Review Care Plan	Review Care Plan	07/22/19 10:0



IMMUNIZATION RECORD

Flu Shot - Take each Fall

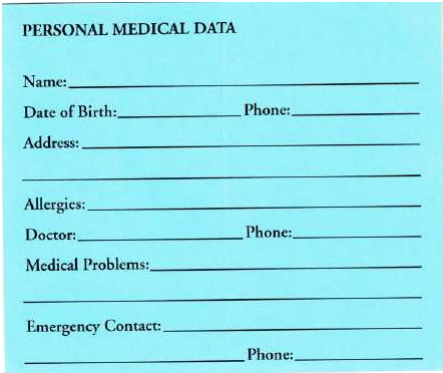
2015-2016 _____ (date administered)
 2016-2017 _____ (date administered)
 2017-2018 _____ (date administered)
 2018-2019 _____ (date administered)
 2019-2020 _____ (date administered)

Pneumonia Shot - One shot is all most people need.
The vaccine may need to be repeated in 5 years if it was administered before age 65 or if you have certain chronic health conditions. Ask your doctor.

Date administered: _____

Tetanus & Diphtheria - Booster dose every 10 yrs. (Adults).

Date administered: _____ PHAR 153



PERSONAL MEDICAL DATA

Name: _____

Date of Birth: _____ Phone: _____

Address: _____

Allergies: _____


Doctor: _____ Phone: _____

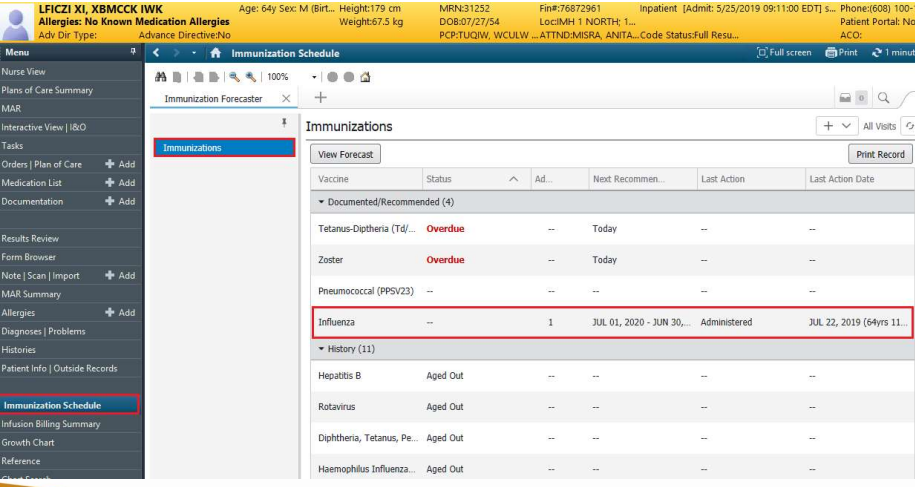
Medical Problems: _____

Emergency Contact: _____

Phone: _____

Fill out the blue
Immunization Record
 card and give it to the patient.






LFICZI XI, XBMCCK IWK Age: 64y Sex: M (Bir... Height: 179 cm MRN: 31252 Fin#: 76872961 Inpatient [Admit: 5/25/2019 09:11:00 EDT] s... Phone: (608) 100-1000
Allergies: No Known Medication Allergies Weight: 67.5 kg DOB: 07/27/54 Loc: IMH 1 NORTH 1... Patient Portal: No
 Adv Dir Type: Advance Directive: No PCP: TUGJW, WCULW ... ATTND: MSRA, ANITA... Code Status: Full Resu... ACO:

Immunization Schedule

Immunizations

Vaccine	Status	Ad...	Next Recommen...	Last Action	Last Action Date
Documented/Recommended (4)					
Tetanus-Diphtheria (Td/...	Overdue	--	Today	--	--
Zoster	Overdue	--	Today	--	--
Pneumococcal (PPSV23)	--	--	--	--	--
Influenza	--	1	JUL 01, 2020 - JUN 30,...	Administered	JUL 22, 2019 (64yrs 11...
History (11)					
Hepatitis B	Aged Out	--	--	--	--
Rotavirus	Aged Out	--	--	--	--
Diphtheria, Tetanus, Pe...	Aged Out	--	--	--	--
Haemophilus Influenza...	Aged Out	--	--	--	--

It will automatically be charted in the **Immunization Schedule** section of the EMR.



If There is a Delay in Administration.....

August 13, 2019 20:51 EDT - August 15, 2019 08:51 EDT (Clinical Rang

Time View	Medications	08/14/19 15:00 EDT	08/14/19 14:51 EDT
<input checked="" type="checkbox"/> Scheduled	Scheduled		
<input checked="" type="checkbox"/> Unscheduled	influenza virus vaccine, inactivated	0.5 mL	Not given within 5 days
<input checked="" type="checkbox"/> PRN	0.5 mL, Susp-Ing, IM, Once, Routine, Start date: 08/14/19 15:00:00 EDT, Stop date: 08/14/19 15:00:00 EDT		
<input checked="" type="checkbox"/> Continuous Infusions	NO CONTRAINDICATIONS NOTED; Give on th...		
<input checked="" type="checkbox"/> Future	influenza, inactivated		
<input checked="" type="checkbox"/> Discontinued Scheduled	PRN	PRN	
<input checked="" type="checkbox"/> Discontinued Unscheduled	glucagon	1 mg	Not given within 5

Add	Task Status	Scheduled Date and Time	Task Description	Mnemonic	Order Details
	Overdue	11/1/2018 09:00 EDT	Catheter Care POC	Catheter Care POC	11/01/18 9:00:00 EDT, Stop Date 11/01/18 9:00:00 EDT
	Overdue	11/1/2018 10:00 EDT	Turn POC	Turn Patient POC	11/01/18 10:00:00 EDT, Stop Date 11/01/18 10:00:00 EDT, q2hr
	Pending	8/14/2019 14:49 EDT	ADMINISTRATION OF FLU VACCINE, ADMIN OF FLU VACCINE	ADMIN OF FLU VACCINE	08/14/19 14:49:00 EDT, 1

- If the vaccine is **not administered** at the **scheduled time**, **LEAVE** the medication order and the task - **DO NOT chart as "NOT DONE"**
- Defer/delay vaccine until it is appropriate for administration
- **Communicate reason deferred/delayed** to charge RN and when giving shift report



Reminder in Depart

Diagnosis	J96.01 Acute hypoxemic respiratory
Medication Reconciliation	
Pix	
QM Med Contraindications	
Orders	
Follow-up Date	
JOEL INMAN Within 5 to 7 days	
Patient Diet and Activity	
Work/School Note	
Patient Education	
more...	
Medication Education	
Immunizations	
Quality Measures Discharge Instructions	
Nursing Discharge Summary	
Discharge	

- An **"Immunizations"** section has been added to the **Depart** process to ensure the patient has been adequately screened and has received the influenza vaccine (if indicated)
- Click on the notepad to review the Immunizations power form completed on admission



formed on: 08/08/2019 1002 EDT

Immunizations

Immunizations Current: Yes
 No
 None received
 Unknown
 Vaccine Recommended
 Other:

Immunizations: influenza, inactivated 0.5 mL (08/08/19)

Last TDAP: Less than 5 years
 Greater than 5 years
 None received
 Unknown
 Other:

Last Tetanus: Less than 5 years
 Greater than 5 years
 None received
 Unknown
 Other:

Tetanus/Tdap Immunization Contraindications: None
 Patient declined
 Coma, seizure, or encephalopathy within 7 days of previous Tetanus/Tdap
 Currently pregnant and received Tetanus/Tdap during this pregnancy
 Hx of Guillain-Barre within 6 wks of previous vaccination
 Latex Allergy
 Mild to moderate reaction to Tetanus/Tdap in the past
 Previously received Tdap after age 19
 Progressive/unstable neurologic condition
 Severe reaction to Tetanus/Tdap in past (anaphylaxis)

Influenza Vaccine Status: Received during this admission/visit
 Received prior to admission, during current flu season
 Not received
 Unknown

Influenza Vaccine Immunization Contraindications: None
 Patient or caregiver refused
 Not within season
 Allergy/Sensitivity to vaccine
 Anaphylactic egg allergy
 Anaphylactic latex allergy
 Bone marrow transplant last 6 months
 Hx of Guillain-Barre within 6 wks of previous vaccination
 Patient is Febrile
 Vaccine not available

This patient has received the influenza vaccine. Make sure it is for the **CURRENT** flu season.

Immunizations

Immunizations Current: Yes
 No
 None received
 Unknown
 Vaccine Recommended
 Other:

Immunizations: No Immunizations documented in past 10 years

Last TDAP: Less than 5 years
 Greater than 5 years
 None received
 Unknown
 Other:

Last Tetanus: Less than 5 years
 Greater than 5 years
 None received
 Unknown
 Other:

Tetanus/Tdap Immunization Contraindications: None
 Patient declined
 Coma, seizure, or encephalopathy within 7 days of previous Tetanus/Tdap
 Currently pregnant and received Tetanus/Tdap during this pregnancy
 Hx of Guillain-Barre within 6 wks of previous vaccination
 Latex Allergy
 Mild to moderate reaction to Tetanus/Tdap in the past
 Previously received Tdap after age 19
 Progressive/unstable neurologic condition
 Severe reaction to Tetanus/Tdap in past (anaphylaxis)

Influenza Vaccine Status: Received during this admission/visit
 Received prior to admission, during current flu season
 Not received
 Unknown

Influenza Vaccine Immunization Contraindications: None
 Patient or caregiver refused
 Not within season
 Allergy/Sensitivity to vaccine
 Anaphylactic egg allergy
 Anaphylactic latex allergy
 Bone marrow transplant last 6 months
 Hx of Guillain-Barre within 6 wks of previous vaccination
 Patient is Febrile
 Vaccine not available

If the patient has **NOT** received the influenza vaccine & there are no contraindications.

- **Order** the **Influenza Immunization Order Set**
- **Administer** the vaccine before discharge

If the influenza vaccine was administered during the current hospital stay, it will be listed under **Immunizations** on the patient's discharge paperwork.

PCP:DBIOZI, XBMIC QL...AT INDEPENDENCE, CARL... CODE S

Patient Summary Clinical Summary

triamcinolone topical (triamcinolone 0.1% topical cream) 1 Application Topical 2 times a day
dermatitis.
Next Dose: _____

Immunizations:
Immunizations
influenza, inactivated (08/08/2019)

Follow-up Instructions:

Patient Activity Level:



Other Situations



Not Flu Season

If it is not Flu Season (October 1st - March 31st), select "Not within season" for contraindications.



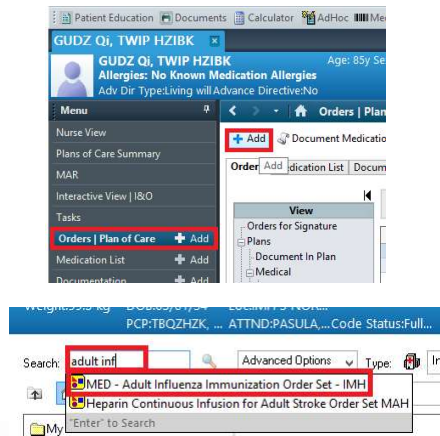
OPS Nurse – Planned Admission

Patients that have a **planned admission** after surgery:

- During the pre-admission visit, complete the immunizations section on the Admission History Adult power form
- If the patient has not received the vaccine & agrees to get the vaccine, order the "Adult Influenza Immunization Order Set" and put in a **planned** state



OPS Nurse – Planned Admission (cont.)

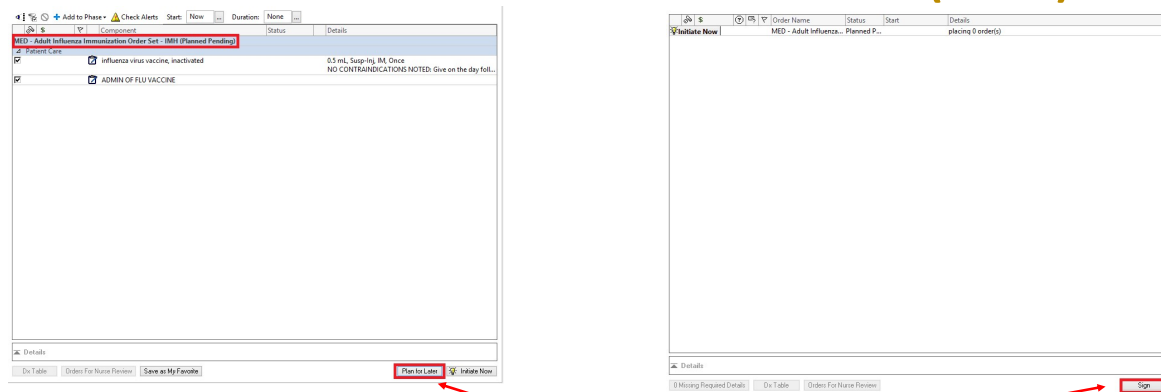


To add the order:

- Click **“Add”** from the Orders/Plan of Care section of the menu
- In the search bar, start typing adult influenza
- Select the MED-Adult Influenza Immunization Order Set (if patient is ≤ 17 yrs. old, select the PED –Pediatric Influenza Immunization Order Set)



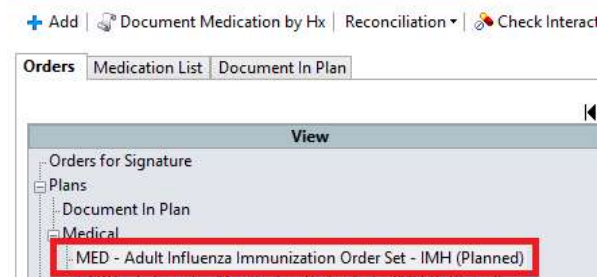
OPS Nurse – Planned Admission (cont.)



Click **“Plan for Later”** then **“Sign”**

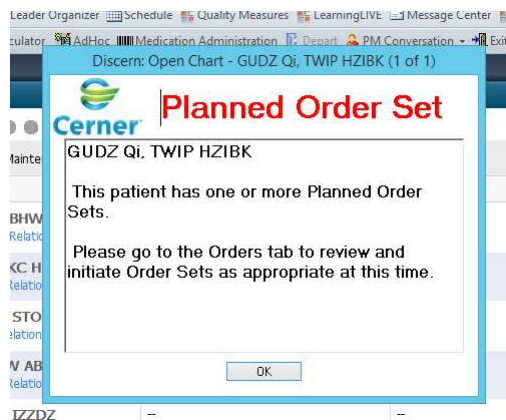


OPS Nurse – Planned Admission (cont.)



- The order will display as “Planned”
- Orders can be “planned” up to one week prior to the surgery date

Inpatient Nurse – Planned Admission



Day of surgery:

- A discern message will pop-up when the chart is opened notifying the nurse of planned order set(s)

Inpatient Nurse – Planned Admission (cont.)

- Click on the planned order set to open
- Click on “Initiate Now” to initiate order
- The order will be sent to pharmacy for review – they will add the influenza virus vaccine to the patient’s MAR.
- “Administration of Flu Vaccine” task will fire
- The vaccine will be administered by floor staff (will not be given in OR/PACU) prior to discharge

Outpatient Surgery – Planned for Discharge

Patients that have a **plan for discharge after surgery**:

- During the pre-admission visit (PAT), the Adult Comprehensive Intake power form is completed
- Immunizations are not addressed, as it is not a required field
- Flu vaccine WILL NOT be ordered for/administered to patients who are being discharged home the same day as their surgery

Received Vaccine Outside of Hospital

- If the patient has received the vaccine elsewhere, select “Received prior to admission, during current flu season”.
- A task will fire reminding you to document the vaccine.

The screenshot shows a medical form with several sections. The 'Influenza Vaccine Status' section has three radio button options: 'Received during this admission/visit', 'Received prior to admission, during current flu season' (which is selected and highlighted with a red box), and 'Not received'. There are also 'Greater than 5 years' and 'None received' options for other vaccine types. To the right, there is an 'Influenza Vaccine Immunization Contraindications' section with several checkboxes.



Received Vaccine Outside of Hospital

Once you have documented the influenza vaccine – right click and click “Done” to complete the task.

Immunization Schedule	Overdue	7/22/2019	08:00 EDT	Color Alert Armband	Color Alert
Infusion Billing Summary	Overdue	7/22/2019	09:00 EDT	Dressing Change	Dressing Ch
Growth Chart	Overdue	7/22/2019	10:00 EDT	Chart Check	Chart Chec
Reference	Overdue	7/22/2019	10:00 EDT	Patient Education	Education (
Chart Search	Overdue	7/22/2019	10:00 EDT	Review Care Plan	Review, Car
Clinical Media + Add	Pending	7/22/2019	11:22 EDT	Document Historical Influenza Vaccine in Immunization Tab	
Document Exchange	Pending	7/22/2019	11:30 EDT	Blood Glucose POC	Blood Gluc
Health Maintenance	Pending	7/22/2019	14:00 EDT	Chart Check	Chart Chec
	Pending	7/22/2019	14:00 EDT	I&O POC	I&O POC (I
	Pending	7/22/2019	16:00 EDT	Color Alert Armband	Color Alert



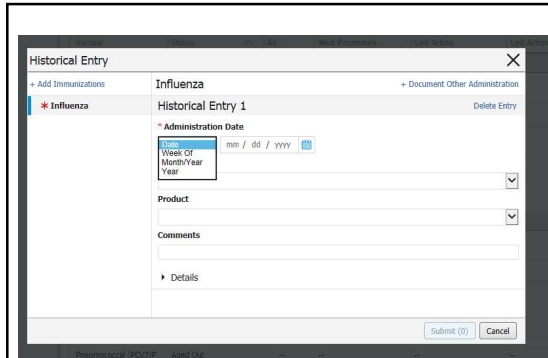
Documenting Flu Vaccine Received Outside of Hospital

- Go to the Immunization Schedule section of the menu
- Click on the + and select “Document History”



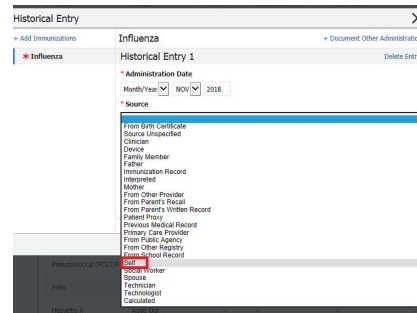
- Click on **+ Add Immunizations**
- Select **Influenza**
- Click **Select (1)** – the one indicates the number of immunizations you have selected





Select the date format and add the administration date. The date format can be:

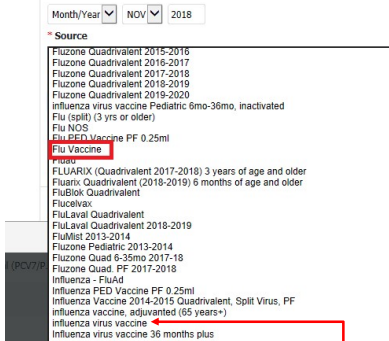
- Exact date
- Week of
- Month/Year
- Year



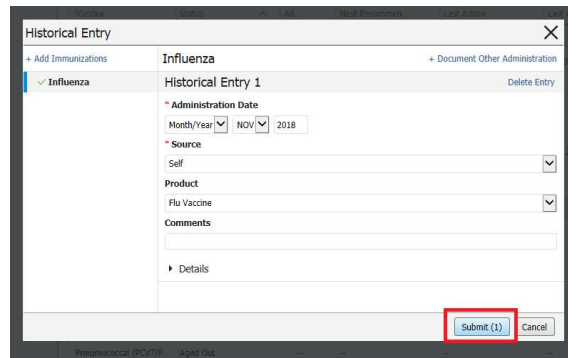
Select the source from the drop-down menu



Received Vaccine Outside of Hospital

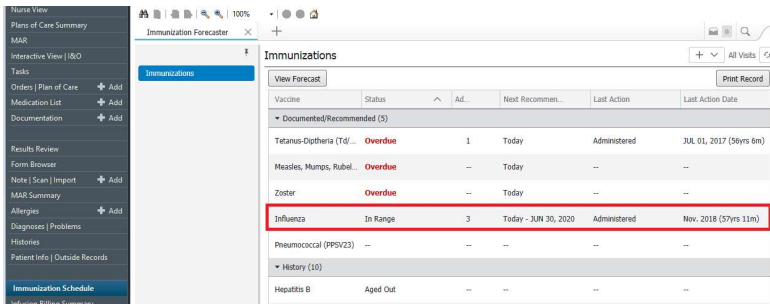


Select **Flu Vaccine**
or
Influenza virus vaccine.



Click **Submit** to document





Vaccine	Status	Ad.	Next Recommen...	Last Action	Last Action Date
Documented/Recommended (3)					
Tetanus-Diphtheria (Td)...	Overdue	1	Today	Administered	JUL 01, 2017 (56yrs 6m)
Measles, Mumps, Rubel...	Overdue	--	Today	--	--
Zoster	Overdue	--	Today	--	--
Influenza	In Range	3	Today - JUN 30, 2020	Administered	Nov. 2018 (57yrs 11m)
Pneumococcal (PPSV23)	--	--	--	--	--
History (10)					
Hepatitis B	Apex Out	--	--	--	--

The record of immunization
will now appear in the
patient's **Immunization
Schedule**



Questions???

For questions, feel free to reach out to:

- Pharmacy
- Cerner Clinical Help Line (704-929-3557)
- Your Clinical Educator

