

**UNC Emergency Department**  
**Epic@UNC** ED Physician/NP/PA Downtime Information Sheet

**1-2 Hours Before Downtime**

- Try to make sure all your documentation is caught up as best you can.
- Discharge anyone you can – or finish their discharge in Epic and print it out if you think they will be leaving soon.
- Make sure you have all the necessary Epic downtime forms – these forms can be printed from within the UNCH firewall by going to the UNC healthcare intranet home page (<http://intranet.unchealthcare.org/intranet/>) and clicking on the “Epic@UNC Downtime Resources” link in the right lower corner. If available, ask the HUC to print/copy these forms for you.



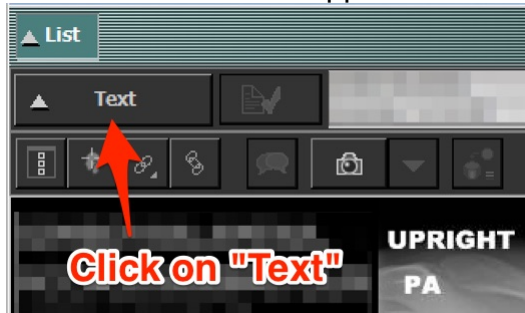
- Click on “**Epic Downtime Forms**”
- Under “**ED**” you will find forms for:
  - Physician Record –this is the ED provider note (H&P) form
  - Discharge Instructions
  - Work/School Excuse
- Under “**Provider**” you will find forms for:
  - Physician Notes – this is a blank form that should be used for medical decision-making, progress notes, procedure documentation, etc.
  - Lab Requisition (labs orders only)
  - Radiant Requisition (radiology orders)
  - Provider Orders (medication, nursing and process orders)
  - Blood Component Order Form
  - Restraints (both violent and nonviolent)

## ED Downtime Documentation

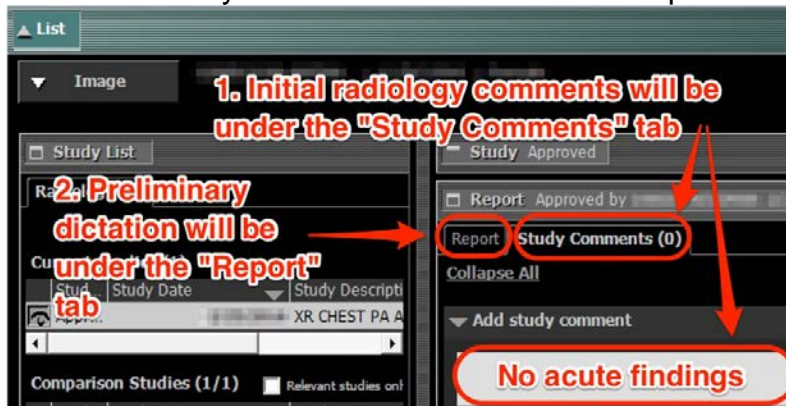
- **Residents**
- **NPs and PAs**
- **Attending Physicians (seeing patients by yourself, e.g. Hillsborough or Team D)**
  - Document on handwritten paper documentation using the appropriate downtime forms (see above).
    - Be sure to affix a patient label to **ALL** downtime sheets of paper.
    - Make sure to date, time and sign all handwritten notes.
    - Residents & NP/PA's: make sure to **write the last name of the FIRST emergency attending to staff the case on the top of all forms.**
  - Once complete, all original paper documentation that is created during downtime should be placed on the patient's nursing clipboard. All paper forms should be collected at the time of disposition (discharge OR admit) and given to the HUC.
  - Be sure to document on the discharge paperwork exactly what prescriptions (medication name, dose, frequency, route, duration, etc.) were given. Don't forget to **make a copy of the discharge paperwork for our records and give it to the HUC** – DO NOT GIVE THE ONLY COPY OF THE DISCHARGE PAPERWORK TO THE PATIENT TO TAKE HOME!
- **ED Attending Physicians (seeing patients with a resident or midlevel provider)**
  - You do not need to document during downtime for patient's staffed with the residents or midlevel providers. Once downtime is over, you will enter an Attestation Note with a brief summary of the visit electronically in Epic (See RECOVERY section below).
- **ED Attending Physicians and NP/PAs**
  - Be sure to keep a log of all the patients that you saw during downtime so that none are "lost" to documentation and billing.
  - **TIP:** Take a pre-printed patient label for each patient and put them in a notebook or on a sheet of paper).
  - Once Epic comes back up (see RECOVERY section below), make sure you have received a paper chart for all patients that you saw during downtime and complete the recovery steps appropriately.

## ED Downtime Orders

- **Lab orders** should be written on the “Downtime Lab Requisition” form and given to the HUC. A copy will be tubed to the lab (Tube stations: Micro – 82, Core Lab – 888)
  - Labs results will be faxed to the ED.
  - Critical values will still be called directly to the ED provider.
- **Radiology orders** should be written on the “Downtime Radiant Requisition” form and given to the HUC. A copy will be tubed to radiology (Tube station 10).
  - To view radiology results:
    1. Open PACS and view the image.
    2. Click on “Text” in the upper left corner



3. Initial radiology comments (the “wet read”) will be under the “Study Comments” tab. Preliminary dictation will be under the “Report” tab.



- **Medication, nursing and process orders** (e.g. admit, consult, discharge orders) should be written on the “Provider Orders” form, placed on the nursing clipboard for the patient and put upright on the chart rack. Be sure to let the patient’s nurse know that there are orders that need to be carried out.
- **Blood products orders** should be written on the “Blood Component Order Form” and given to the HUC. A copy will be tubed to blood bank (Tube station 32). If needed emergently, call the blood bank personally to make sure they are aware/responsive.
- **Prescriptions** will be hand written on script pads - make sure you know/remember your DEA number. Don’t forget to sign the script!

## Recovery

(Transition from Downtime Paper Documentation back to Epic)

- **Residents:**

- All original paper documentation that was created during downtime should be completed and given to the HUC for copying and appropriate distribution. Make sure every sheet of paper has a patient label affixed, the ED attending name handwritten at the top and all sheets are hand-signed.
- Resident paper documentation will be scanned into Epic by MIM (medical information management).
- Residents do not need to back-enter any of their downtime documentation. If a scribe is available, they may back-enter resident documentation as time permits.
- Residents, you **MUST** finish all of your paper documentation BEFORE you go home at the end of your shift.

- **ED Attending physicians** (for patients seen with a resident or mid-level provider):

- Once Epic comes back up:
  1. A copy of the resident's paper documentation will be made available to you.
  2. Enter an **Attestation Note** that includes a brief summary of the visit
    - Include the following downtime statement in your note. I recommend creating a SmartPhrase, something like: "The electronic documentation system experienced a system downtime during all or part of this patient's ED visit. Downtime paper documentation will be scanned into the patient's chart."
  3. Enter a **Clinical Impression** (or as many as are appropriate) for the visit.
  4. Send the note to **Provider Billing** as usual (the coders will get a separate copy of the downtime paper documentation but will not bill until your attestation/clinical impression is entered and the chart is sent *electronically* to billing).
  5. Ignore the AVS reminder for downtime patients if it shows up in your in-basket.

- **Nurse Practitioners and ED Attendings Physicians** (for patients seen without a resident or midlevel provider – e.g Hillsborough or Team D):

- Give all original paper documentation to the HUC. This will be scanned into Epic by MIM (medical information management).
- Once Epic comes back up:
  1. A copy of your paper documentation will be made available to you.
  2. Enter a brief summary of the visit into Epic as a **Provider Note** note type.
    - Include the following downtime statement in your note. I recommend creating a SmartPhrase, something like: "The electronic documentation system experienced a system downtime during all or part of this patient's ED visit. Downtime paper documentation will be scanned into the patient's chart."
  3. Enter a **Clinical Impression** (or as many as are appropriate) for the visit.
  4. Send the note to **Provider Billing** (the coders will get a separate copy of the downtime paper documentation but will not bill until a clinical impression is entered and the chart is sent electronically to billing).
  5. Ignore the AVS reminder for downtime patients if it shows up in your in-basket.