



To: Various Committee Meetings and Departments in GBHS, HDH, SBGHC

From: Andrea Rawn, Program Coordinator, Evidence-Based Care Program
Chair GBHN Order Set Committee

Date: March 27, 2014

RE: 4th Quarter Report 2013 -2014 from GBHN Evidence Based Care Program and Order Set Committee

Please note that all Order Sets developed MUST have a clear physician/department based stakeholder(s) list. Protocols may be developed, but are not limited to, different disciplines outlining their scope of practice, with the understanding that ALL protocols must have an Authorized Provider order to initiate them and that the contents cannot be altered. All Authorized Providers are required to know the content of the protocols before initiating them.

Please also note that the policy and procedures to accompany new order sets are the responsibility of the corporations that utilize them. Stakeholders are encouraged to ensure ALL involved parties have been properly consulted and supporting documentation is in place.

For more in-depth description of changes, please refer to the Order Set Committee Meeting Minutes by contacting the Administrative Professional - Julia Metzger at jmetzger@hdhospital.ca or the Program Co-Ordinator - Andrea Rawn at arawn@gbhs.on.ca

NEW ORDER SETS AND PROTOCOLS RELEASED FOR USE:

- NEW – EMERG – Management of Methadone Overdose Clinical Protocol** – This order set results from a BAR done on the original Methadone Overdose Protocol. There were several inconsistencies in the original document and those have been corrected with the creation of separate order sets for adults and paediatrics. Paediatrics has elected to go with a general Opioid Reversal Order Set yet to be created. This order set is owned by Risk Management as it is the result of a Coroner Recommendation and a mandatory requirement for facilities partnered with a methadone treatment program.
- NEW – Methadone Overdose Admission Order Set** – (as above)
- NEW – Methadone Overdose Information Sheet (All Ages) Associated Document** – This documents briefly discusses the half-life of methadone and outlines a preferred treatment course.
- NEW – Obstructive Sleep Apnea** – developed by the Anesthesia group for an at risk population that can be screened and better identified and managed.
- NEW – Obstructive Sleep Apnea Associated Document STOP-Bang Scoring Tool** – a validated tool to be used in conjunction with the order set
- NEW – Continuous Glucose Monitoring System (CGMS) Order Set** – This order set is owned by Diabetes Grey Bruce and is used in conjunction with their population in the Diabetes Ed department.
- NEW – Continuous Glucose Monitoring (CGMS) Loan and Commitment Contract Associated Document-**
A contract to be signed in conjunction with the glucose monitoring system.



NEW – PAEDIATRIC TPN Monitoring Order Set – This order set is owned by the Paediatric group as brought forward by the RD and now completes a full spectrum of order sets for this treatment across age groups.

NEW – Nicotine Replacement Therapy (NRT) Order Set – This order set is owned corporately and brought forward as a corporate initiative that spans the Grey Bruce Health Network. Each corporation had input into the creation, as well as CCAC and Public Health. This order set will be owned by the Evidence Based Care Program.

NEW – Associated Document – Recommended Guidelines For Nicotine Titration – This document contains recommendations on the titrating of nicotine replacement therapy.

MODIFIED ORDER SETS AND PROTOCOLS:

Critical Care Nurse Escort Transfer Order Set – The title of this order set has been changed to Critical Care/EMERG – General Transfer Order Set at the request of Emergency in order for them to utilize it as well at all sites.

ACS Thrombolytic Therapy Inclusion-Exclusion Criteria – Clarification was needed around the wording “dead ended” for front line staff as this is an old term.

ACS Non-ST elevation MI / Unstable Angina- Addition of ticagrelor on the order set at the request of Dr Shelig as an unselected option. This drug is available in GBHS only and is indicated as such. An indication AD is also available with the addition of this drug for information purposes.

Methotrexate Injection for Ectopic Pregnancy – removal of misoprostol information as it is not given with this procedure. Clarification around who is mixing this drug and when it will be given to the patient.

Enoxaparin capping of dosages on Non-Thrombolytic Order Sets – capping has been removed from this drug aligning with best practice as stated in the Chest Guidelines and Lexicomp references. Capping will remain on the population that receives thrombolytics for a span of 2 doses.

TPN and Enteral Feedings Order Sets (ALL) – clarification around NPO diet status to now read NPO – TPN or NPO – Enteral Feed. Dietitian consults preselected as requested by this department and approved in terms of added workload.

EMERG – Paediatric DKA Order Set – Clarification of Anion Gap calculation and not selection as a lab test.

TPN Short-term monitoring Order Set – Blood work changes in terms of initial blood work and monitoring schedule as requested by the RD and supported with guidelines.

Day Surgery/General Surgery Post Op Order Set – updating of wording and removal of vital sign selection. PACU has a standard procedure for vital signs according to procedure and multiple factors.

Paediatric Tonsilectomy and Adenoidectomy Post-Op Order Set – This order set has been brought up to date in formatting, as well as the morphine dosing chart being moved to a separate page for clarification purposes to staff and increase safety. Admission to be added to title.

Spinal/Epidural Analgesia Post-Operative Order Set – This order set underwent a biannual review and was updated with many changes, including medications, and was approved by both the pharmacy and the anesthesia group.

Intensivist Led Admission Order Set – Corrective wording around the Acetaminophen dosing and removal of CO lines.



Cellulitis Admission Order Set – Deletion of clarithromycin as a choice as it has been deleted from the formulary.

COPD Stages Reference Sheet as AD – as above

Fractured Hip Post-Op Order Set; Total Hip Replacement Post-Op Order Set; Total Knee Replacement Post-Op Order Set – Change “volume expander” to Ringers Lactate for clarification to staff. Addition of Tranexamic Acid as requested by the Orthopedic group. Addition of language around recommendations for dental work has been added to the Patient Information Booklet.

GBHS – Owen Sound site only – Critical Care Unit Post Cardiac Arrest Hypothermia Order Set – addition of arterial gases as well as clarification around MAP readings and holding administration of potassium during the rewarming phase

Prothrombin Complex Concentrate (PCC) Infusion Order Set – Clarification around timing of this product in relation to Operating Room time. Hopefully a clarification of additional wording will be more instructional to frontline staff.

Radical Prostatectomy Post-Operative Order Set - this order set is the first of the urology sets to undergo a BiAnnual review. It has been brought up to date in terms of formatting and aligns more closely with the anesthesiology group for spinal/epidural.

MODIFIED PATHWAYS:

COPD Pathway – Smoking cessation information and instruction has been made more prominent on this pathway.

Newborn Pathway – This pathway has been brought up to date to match the baby friendly initiative that was changed on the maternal pathway. Because there are two charts after the baby is born it should be documented on both that the mother gave and the newborn received. This results in a small amount of duplication, however the situation is unique in that one chart becomes two separate individuals and therefore care should be reflected on both. These include skin to skin contact, initiation of breastfeeding within 30 minutes and delay to prophylactic medication within an acceptable timeframe in order to facilitate the first two.

General Pathway Changes for GBHS include the switching of the Blaylock Tool to the Complex Discharge Screening Tool as requested by the Discharge Planning group in co-operation with CCAC and supported with documentation.

General Order Set Changes (Requests involving all order set)

A general change from Physician to “Authorized Provider” to encompass all scopes of practice. This change affects all order sets and Associated documents with the exception of validated/copyright protected material that cannot be changed.

CBC with Diff and CBC No diff will both be selections on the order sets. There has been some confusion on how the orderable translate to the lab system and what the intention is of the authorized provider. In some cases ordering of the CBC is understood to include the Diff, but it does not. Therefore both entries will be listed and the Authorized Provider will indicate which they expect to be resulted.

EBC Activity/Discussion:

COPD Electronic “Document in Plan” remains on hold. Further discussion is required in negotiation of a plan to move forward. To date funding not available and resource allocation is limited.



There was a request to remove the DNR section on the order sets completely in order to better facilitate the use of a more comprehensive tool that enables better discussion on decision making around the Plan of Care. Where GBHS may not use this as much, SBGHC and HDH indicate that it is used frequently, especially in Chesley where their order set usage approaches 100% of admissions. It was therefore the decision of the group to leave this entry on for now until the tool itself has been finalized and rolled out in discussion with the partners. This has been a difficult project to get consensus for and ongoing discussions to educate are ongoing.

It was also decided, that if possible through the ordering in Power Chart, if more than one EBC orderable for tracking purposes could be selected in one order instead of multiple entries. Sue Downs is looking into this and an issue trak will be submitted. Especially in Crit Care where multiple sets are used on one patient, this would be more user friendly as well as increase compliance for the tracking stat.

There have been several requests for Auditing of data from the various corporations and sites. Although a report is generated regarding use, the report remains dependent on the end users entering the tracking orderable and spot checking has revealed that there is still a large number that are not being tracked. Ongoing education is being done with key stakeholders to improve this, but accurate data is still having to be done manually.

ORDER SET INCIDENTS TO REPORT

Intensivist Led Unit Admission Order Set – The notation for PRN had been inadvertently left off of this order set. A critical error report was sent to Patient Order Sets and corrected immediately. No harm was reported.

REQUESTS FOR NEW AND UNDER DISCUSSION:

Insulin Drip/ Dose Adjustment Order Set/Protocol (outside of Critical Care)
Diabetic Ketoacidosis Order Set
Insulin Pump Application Order Set
Paediatric Insulin Pump Application Order Set
Paediatric Methadone Admission Order Set
Paediatric Nalaxone Order Set
PRBC's/ Platelets/Fresh Frozen Plasma Order Set
Altered Level of Orientation Diagnosis Order Set
Amputation Pre and Post Op Order Set
GBHS only - Post Oncology Clinic Chemo Order Set for Admitted Patients
Request for EMERG specific order sets
 - EMERG - Smoke Inhalation Treatment Order Set
 - EMERG – DVT Treatment Order Set
 - EMERG – Owen Sound site only - CIWA-ar
Wound Vac Order Set/Protocol
Warfarin Dosing Protocol
Diabetes Pathway
HDH only - PICC Line Placement Order Set
Palliative Care Admission Order Set
Upper Limb Post-op Order Set
Critical Care Sepsis Order Set
Therapeutic Phlebotomy Order Set