Clinical Reminders

EDUCATION BOOST
NURSING PRACTICE

Uresil Accordion Drain

Interventional Radiology drainage system

- This is a closed system drain for abscess and other fluid drainage.
- Drainage will fill the accordion first, then flow into the gravity drainage bag as long as the bag is below the level of the drainage site.

- Key Points:

  Suction must be maintained, indicated by compression of the accordion.

  To activate suction:

  1. **Loosen** blue valve port at the bottom of the drainage bag



  2. Compress accordion to the **closed position**



  3. *While holding the accordion closed,* **close/tighten** the blue valve port



- Stopcock must be maintained on the end of the drainage tube. Add a needless connector to the open female port. The male port will be attached to the drain tube coming out of the patient.
- While the drain is in use, the stopcock must remain in the “off position” to the open port.
- MD orders must be followed for flushing, indicating volume and frequency. To flush:

Close stopcock to the drainage bag and attach prefilled syringe



Flush per MD order into the patient



Close the stopcock to the flush port, keeping the drain open from the patient to the drainage tube.



For more information on the forward flushing process, refer to the EBSCO procedure “Flushing a Biliary T-Tube”

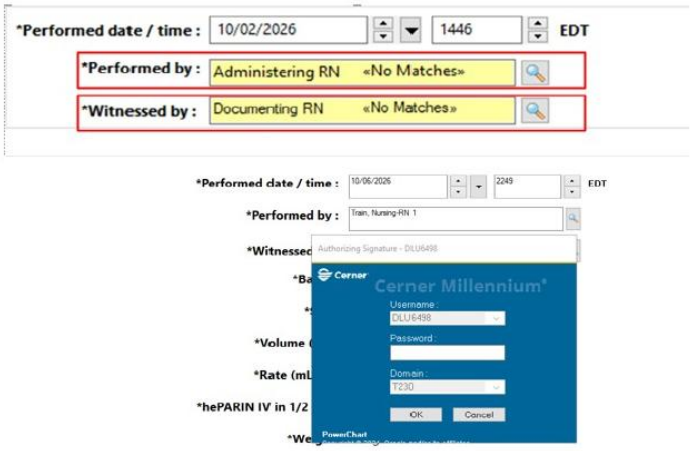
Clinical Reminders

GO LIVE
NOV 5

Independent Double Check Documentation

- Additional medications will be added to the High Alert Medication Independent Double Check (IDC) documentation requirements.
- ***In addition to* the current IDC requirements, medications that will prompt a co-sign in the MAR will now include:**
  - IV insulin
  - IV opioid infusions
  - Neuromuscular blocking agents
  - Hypertonic solutions (>0.9% NaCl)
  - IV push sedative agents (Ketamine, Phenobarbital)
  - Argatroban
  - TPN
  - Population Specific Requirements Remain
    - Mannitol (Pediatrics only)
    - Concentrated electrolytes (Potassium Chloride) – Pediatrics and NICU only
    - All controlled substances (NICU only)
    - Antiarrhythmics (NICU only)

Follow required IDC process and obtain a second RN co-sign in the EMR:



Refer to 1MM.MED.0001 "High Alert Medications and Independent Double Check (IDC) – Adults and Pediatrics" policy

Clinical Reminders

GO LIVE
NOV 5

Additional Adult and Pediatric Code Cart Changes

ADULT
- Dopamine Premix - Remove
- D50W Syringe - Add 1 additional syringe

PEDIATRIC
- 4.2% Infant Bicarb - remove from Peds Code Cart Tray
- 8.4% bicarb - Add 1, 50 mEq syringe
- Calcium gluconate - remove from Peds Code Cart Tray
- Calcium chloride - Add 2, 1 gm syringes
- Pediatric Code Sheet - Add
- Dopamine Premix - remove from Peds Code Cart Tray
- D50W Syringe - Add 1 additional syringe

Clinical Reminders

ROLLING DIVISION
GO-LIVE

BD Alaris™ Infusion System Updates

PEDIATRICS • Full system: Point of Care Unit (PCU) / Pump / Syringe / Patient Controlled Analgesia (PCA) / $EtCO_2$

RED DOTS MUST MATCH — Point of Care Unit (PCU) + EVERY ATTACHED MODULE
Use updated red-dot components together only. Never attach an unmarked older module to an updated PCU.

CORRECT • All components marked



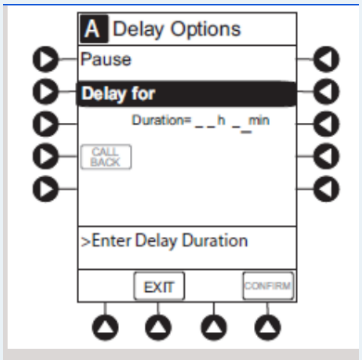
INCORRECT • Mixed marked/unmarked



New Programming Screens

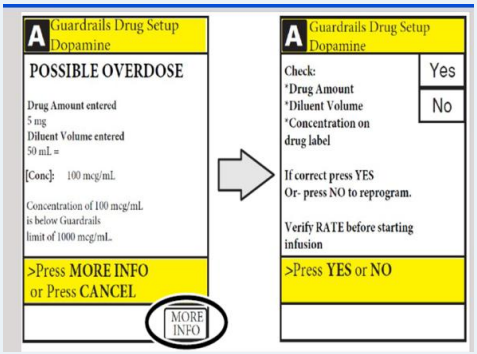
DELAY FOR

"Delay Until" is removed. Use "Delay For" (1 min to 11 hr 59 min); verify the programmed duration.



CUSTOM CONCENTRATION: MORE INFO

A two-step Guardrails alert shows the entered drug amount, diluent volume and concentration. Verify before proceeding.



- HIGH-PRIORITY ALARMS: "Infusion Complete" and "Infusion Complete–KVO" now require immediate response.
- $EtCO_2$: "NO CO_2" replaces "No Breath." Assess patient and sampling setup; message meaning is not an apnea diagnosis.
- SYRINGE / PCA SUPPLIES: Check manufacturer, model, size, flow rate and current approved disposables before loading.
- CLEAN + DISINFECT: Clean first, then disinfect with a BD-approved product and required contact/drying time. Never clean while attached to a patient. Include PCA handset/cord.

30-SECOND SAFETY CHECK: Red dots match • Correct patient/profile • Guardrails/settings verified • Syringe/sets approved

Clinical Reminders

ROLLING DIVISION
GO-LIVE

BD Alaris™ Infusion System Updates

ADULT ACUTE CARE • PCA USERS ONLY

RED DOTS MUST MATCH — Point of Care Unit (PCU) + EVERY ATTACHED MODULE
Use updated red-dot components together only. Never attach an unmarked older module to an updated PCU.

CORRECT • All components marked



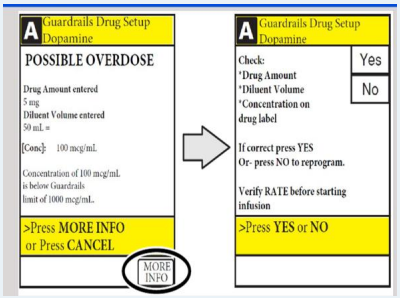
INCORRECT • Mixed marked/unmarked



PCA / $EtCO_2$ Screen Examples

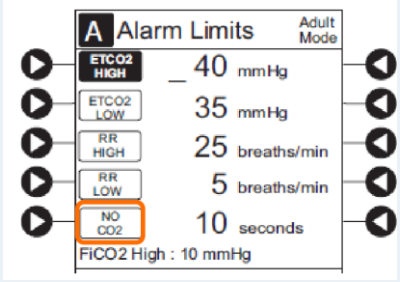
PCA CUSTOM CONCENTRATION

Two-step Guardrails warning: select MORE INFO and verify drug amount, diluent volume and concentration.



$EtCO_2$: "NO CO_2" (IF USED)

"No Breath" becomes "No CO_2." Assess the patient and sampling setup; this text does not diagnose apnea.



PCA Syringes • Examples from BD v12.6.X compatible list

SIZE	BD-COMPATIBLE PCA SYRINGE / MODEL
20 mL	BD 302830
30 mL	BD 302832; IMS Pump-Jet® NDC 76329-1912-1
35 mL	Cardinal Health Monoject™ detachable-plunger barrel 8881135609
50 mL	BD 309653

Clinical Reminders

EDUCATION BOOST

Insulin Answers! Rapid Facts

Meal & Correction Insulin

Goal: Insulin given within 30 minutes of CBG and meal tray arrival.





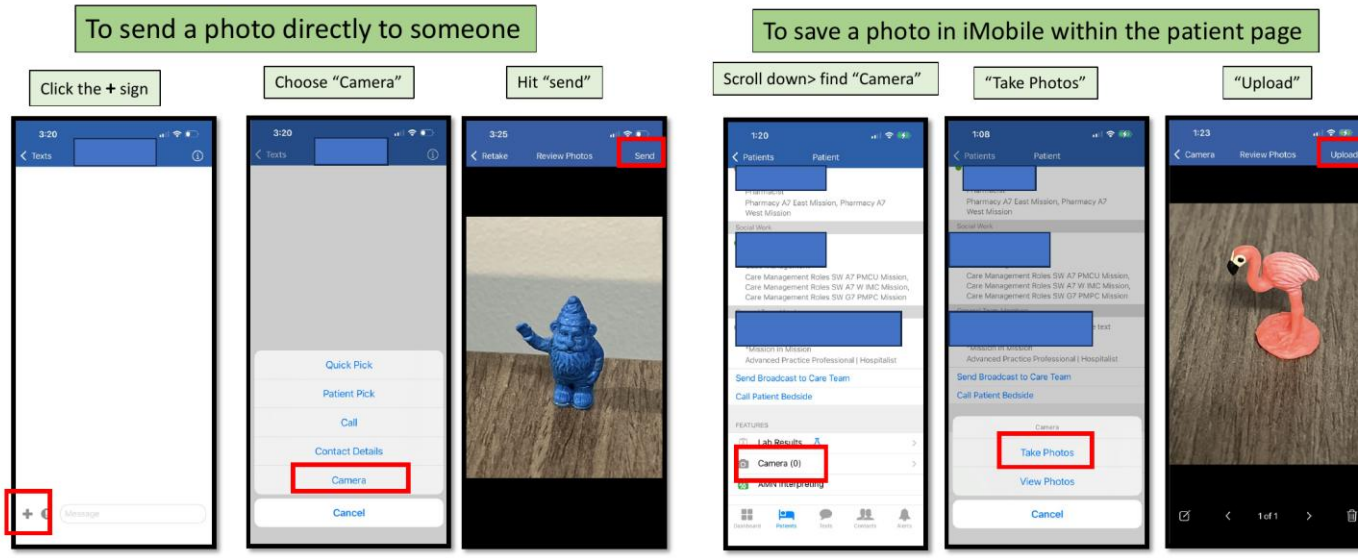
Safety pearls: Do not give MEAL insulin if the tray is delayed or the patient is not eating. Give CORRECTION insulin regardless of NPO. Reassess CBG if the meal is delayed >30 minutes. “HOVER” over MAR orders for rapid-acting insulin dose accuracy.

Clinical Reminders

EDUCATION BOOST
WOUND & SKIN

PIP Tip: Wound Photos

iMobile photo workflow



- **Photos taken within the app DO NOT upload to the EMR**
- **Complex wounds, new pressure injuries, PI stage 3 and above: notify wound team about photos**

Photos taken within the app DO NOT upload to the EMR. For complex wounds, new pressure injuries, and pressure injuries stage 3 and above, notify the wound team about photos.

Clinical Reminders

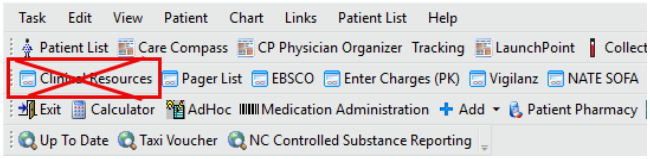
GO LIVE NOV 9

MOD Retirement - Accessing the New Medication Calculator Links

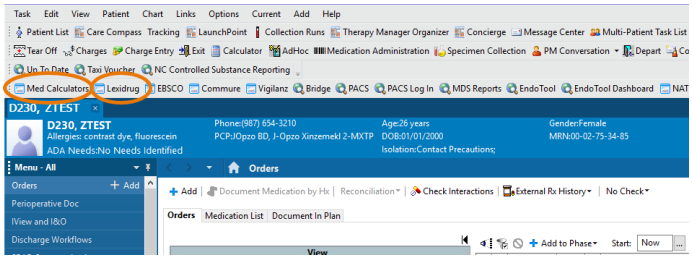
Cerner build update

- MOD is being retired.
- The "Clinical Resources" button in the toolbar is being removed and replaced with links to (1) LexiDrug and (2) the new SharePoint Med Calculator page.
- Users can continue to access Med Dosing Calculators via PowerPlan links and Reference Text links; those links are being updated to point to the new SharePoint med calculator link.

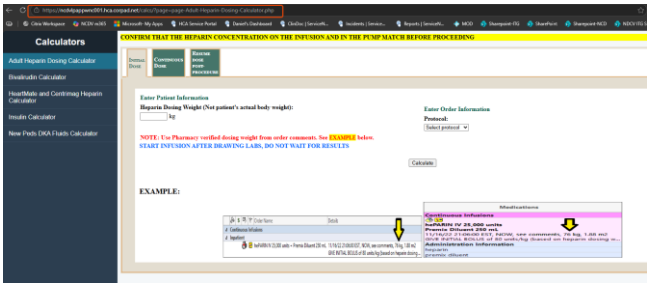
CURRENT STATE - Toolbar



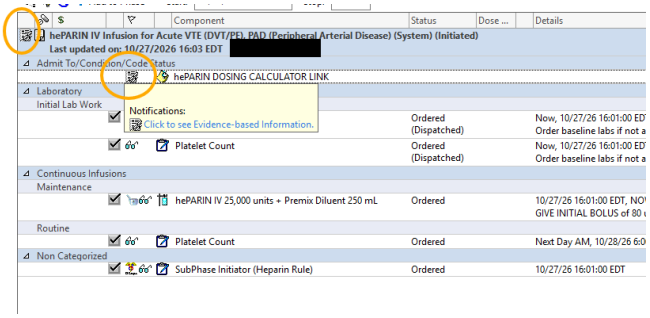
FUTURE STATE - Toolbar



FUTURE STATE - SharePoint Med Calculators



NOT CHANGING - PowerPlan Access



Not changing: PowerPlans and Reference Text continue to be accessed the same way; only the link endpoint is changing.