Enhanced Patient Safety



Intuitive

# **Doctor's EMR**



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## Introduction to the Bluebird Doctor's EMR

The Bluebird electronic medical record for doctors was first released in 1994 and has built a loyal following. Unlike many other EMRs, Bluebird was designed by doctors for doctors with the primary aim of making clinicians more *efficient*.

The latest version is a cloud based EMR with an API that allows *all* practice management systems to integrate with the Bluebird clinical notes. That API enables the doctor's receptionist to update patient demographics in real time.

Besides *quickly* creating detailed clinical notes, the Bluebird EHR also facilitates hospital pre-admission and consultation requests. Bluebird integrates (in real time) to all labs in Southern Africa, including the NHLS.

## **Bluebird EMR Navigation Bar**

#### Sluebird Office Patients Inbox Alerts Tasks (7) In Patients (5) Discharged

The application opens with the Bluebird EMR Navigation Bar at the top of the screen.

There are 6 navigation Links on the left of the Navigation Bar:

- Patients: A list of the patients that have been seen in the practice
- Inbox: A list of clinical communication that has come in to the practice (most typically laboratory results, imaging reports and consults)
- Alerts: A list of alerts that the practice has elected to receive
- Tasks: A list of tasks for this doctor
- InPatients: A list of current inpatients broken out by hospital and by ward
- Discharged: A list of all the practice patients that have been discharged from hospital

Each link will take one to the relevant *line list*.

One should deal with open Alerts urgently.

If there are open alerts, outstanding tasks, or patients in hospital there will be numbers (corresponding to the number of alerts, tasks or inpatients) shown in that link.

On the right of the Navigation Bar one finds 2 icons:

- Preferences: This opens the page where the doctor records their email address, cell number (both used for urgent communication) as well as their alert preferences
- Log out: This icon logs the Doctor out of Bluebird

## **Patients**

Clicking the Patient link will open a line list of patients.

<b>&amp;</b> Bluebird Offic	e Patients I	nbox Alerts	Tasks (7) In	Patients (5) Discharged									¢   A
+ Patients	(1 to 1 of 1)				vir	ne		ж					Today
Name	Alert	Tasks	Notes	Current Problems	Allergies	Procedures	PMHx	Rx	OBGYN	Vitals	Vax	Specialty	Investigations
Mine Damid 64 E		+	+	+	+	+	+	+	+	+ P 65	+	+	+
1234	1	3		Hypertension	Penicillin		Asthma	ABACAVIR		BP 120/80 RR 13 T 37 Wt 50	Influenza	OB S Cycle	
													30/06/2023

## Note:

If your practice management application (PMA) is set up to send Bluebird patient **Folder Numbers** as they arrive in your rooms, they will, by default, be shown on first opening this line list.

One may click the **Search Bar** at the top centre of the screen to open the **Search Box** to find specific patients. If a search is active, the bar becomes pink.

Folder	Date of Birth
First Name	Last Name
Class	Show Percent Find

To the right of the Patients Header one finds two buttons:

**Today**: This will filter the patient line list to show patients that have or will be seen today.

**Orphans**: This aqua button will filter the patient line list to show "patients" where the supplied patient demographics do not allow Bluebird to safely match that report to *any* practice patient. We call these orphans and typically they arrive in the Inbox from a lab. Use the Bluebird merge functionality to merge each of these orphans with a practice patient. That way the lab report will be linked to the specific patient.

Each **Patient Line** has *section specific* blue + **Icons** that open + **Icon Menus** which allow tasks (such as creating a new prescription or writing a new clinical note) to be performed quickly.

For illustration purposes all + Icon Menus have been opened but in practice only one is opened at a time:

. Bluebird Office	Patients	Inbox Alerts	Tasks (7) In Pa	tients (5) Discharged									• I 6
+ Patients	1 to 1 of 1)				vir	ne		×					
Name	Alert	Tasks	Notes	Current Problems	Allergies	Procedures	PMHx	Rx	OBGYN	Vitals	Vax	Specialty	Investigations
		+	+	+	+	+	+	+	+	+	+	+	+
line, Darryl 64 F	1	+ RN	+ Note	Hypertension	Penicillin	+ Procedure	Asthma	+ Prescription		+ General	Influenza	+ OB	+ Lab
.234	-	+ IC	+ Consult Note			+ Surgery		+ Rx Hx		+ Cardiac		+ S-Cycle	+ Imaging
		+ Pharm	+ Consult Request							+ Respiratory		+ Renal	+ Blood Bank
		+ Lab RN	+ Med Admission							+ Neuro		+ Oncology	
		+ UM	+ Surg Admission							+ Upper Limb		+ Psych	
		+ UC								+ Lower Limb		11 Sych	
		+ Doctor											

Items in the + Icon Menus typically have corresponding + Buttons under the relevant tab of each drill down section. In the example below the + button opens a new Follow Up (FU) Note:

🗸 Bluebird O	office												¢   🔒
Name	Alert	Tasks	Notes	Current Problems	Allergies	Procedures	PMHx	Rx	OBGYN	Vitals	Vax	Specialty	Investigations
Vine, Darryl 64 F 1234	1	+ 3	+	+ Hypertension	+ Penicillin	+	+ Asthma	+ ABACAVIR	+	+ P 65 BP 120/80 RR 13 T 37 Wt 50	+ Influenza	+ OB S Cycle	+
Notes +	Consults *												

The **+** Button provides the common note choice for that Tab. Use the **+** Icon Menu for a broader range of choices.

Each **Patient Line** in the list has *Sections* holding different information:

Name	Alert	Tasks	Notes	Current Problems	Allergies	Procedures	PMHx	Rx	OBGYN	Vitals	Vax	Specialty	Investigations
Vine, Darryl 64 F 1234	0	+	+	+ Hypertension	+ Penicillin	+	+ Asthma	+ ABACAVIR	+	+ P 65 BP 120/80 RR 13 T 37 Wt 50	+ Influenza	+ OB S Cycle	+

One can quickly see core information including that this 64 year old female hypertensive patient is allergic to penicillin and has a past medical history significant for asthma. There is one open alert (which should be dealt with immediately) and there are three outstanding tasks.

Clicking any of these Sections will "open the drawer" (drill down) and display more detailed information about that section.

#### Note:

In order not to lose the found set of patients, a Drill Down is shown as a new (secondary) browser tab. Secondary Browser Tabs have a red header to indicate that they should be closed once one is finished with that specific patient.

## 🗴 Bluebird Office 🌼 🕴 🔒

This document will deal with each of these *Sections* and their **Drill Down** in sequence.

## **Name Section**

Bluebird Offi	ce												¢   A
Name	Alert	Tasks	Notes	Current Problems	Allergies	Procedures	PMHx	Rx	OBGYN	Vitals	Vax	Specialty	Investigations
Vine Darryl 64 E		+	+	+	+	+	+	+	+	+ P 65	+	+	+
1234	1	3		Hypertension	Penicillin		Asthma	ABACAVIR		BP 120/80 RR 13 T 37 Wt 50	Influenza	OB S Cycle	30/06/2023
Gender		Address				Folder	No.		VIP				
Male						1234			○ Yes	○ No			
Initials	Member		Administrator		Scheme	2	Option	Number		Dependent No.		PS	EU
Contact Details													
Tel (h)		+27827843353											
Cell		+27827843353											
Email		darryl@bluebird.co.za	1										_

The Patient Name section holds the patient demographic data and includes the insurer (medical aid) information:

Communication with the patient via Bluebird's SMS and email functionally require that patient's cell number and email address so it is important to try and ensure they are kept current. Bluebird enabled Practice Management Applications update this data automatically whenever that it changes in the PMA.

## **Alert Section**

The practice may customize alerts they wish to see.

These might be alerts from Labs e.g. abnormal value or from Hospitals e.g. advice from the pharmacist regarding a specific drug prescribed.

🕻 Bluebird Offi	ce												¢   A
Name	Alert	Tasks	Notes	Current Problems	Allergies	Procedures	PMHx	Rx	OBGYN	Vitals	Vax	Specialty	Investigations
<b>Vine, Darryl 64 M</b> 1234	1	+	+	+ Nil	+ Penicillin	+	+ Asthma	+ ABACAVIR	+	+	+ Influenza	+	+ 30/06/2023

If there are any open alerts for this patient a red icon (with the number of open alerts) will be shown in the **Alert Section** of the **Patient Line**. Clicking that section will open a split screen with a line list of all the alerts on the left and a management pane on the right. Open alerts are shown first.

## **Tasks Section**

One is able (using the blue + Icon) to allocate tasks to a:

- Doctor
- Receptionist
- Practice Nurse

If there are any open tasks for the logged in User, a red icon (with the number of open tasks) will be shown in the **Task Section** of the **Patient Line**. If there are open tasks for other Users and no open tasks for the logged in User, the icon will be grey.

Clicking that section will open a split screen with a line list of all the tasks on the left and a management pane on the right.

Open tasks for that User are shown first.

📞 Bluebird Off	fice												🗢 I 🔒
Name	Alert	Tasks	Notes	Current Problems	Allergies	Procedures	PMHx	Rx	OBGYN	Vitals	Vax	Specialty	Investigations
		+	+	+	+	+	+	+	+	+	+	+	+
Vine, Darryl 64 M 1234	1	3		Nit	Penicillin		Asthma	ABACAVIR			Influenza		
													30/06/2023
			_										

## **Notes Section**

Every note made regarding this patient is shown here as well as every incoming consult from external specialists. These consults are shown on a separate tab which has a red \* in the tab if there are any consults.

📞 Bluebird Offi	ce												¢   A
Name	Alert	Tasks	Notes	Current Problems	Allergies	Procedures	PMHx	Rx	OBGYN	Vitals	Vax	Specialty	Investigations
Vine Darpd 64 E		+	+	+	+	+	+	+	+	+ P 65	+	+	+
1234	1	3		Hypertension	Penicillin		Asthma	ABACAVIR		BP 120/80 RR 13 T 37 Wt 50	Influenza	OB S Cycle	30/06/2023
Notes	Consults *												
Admission O HxOE	⊖ FU ⊖	Thumbnail OMD	O Nurse	All				• • • • • •					All
Date		Note					U	ser Role		Note Type		Author	
14/06/2023 18:59		Thumbnail Upda	ate				D	octor		PMHx Update		Haroon Haffejee	
14/06/2023 18:59		Admission					D	octor		Surgical Admission		Haroon Haffejee	
14/06/2023 18:59		Thumbnail Upda	ate				D	octor		Ongoing Problems Upda	te	Haroon Haffejee	
14/06/2023 18:59		Thumbnail Upd	ate				D	octor		OBGYN Update		Haroon Haffejee	

Clicking on any line item opens that (medico-legal) note in a non editable format.

One is able to filter notes by various categories including notes made by the practice nurse.

The Consults Tab houses all external consults that came into the Inbox. In the example below, note that there is not a red \* in the consult Tab because no consults have been received for this patient:

Notes	Consults					
$\bigcirc$ Anaesthetist	○ Cardiologist ○ Physio ○ OT ○ Speech ○	Dietician Other 💿 All				
Date	Specialty	Consult	Plan	Read	Consult By	

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#### Follow Up (FU) Note

This template is typically used to quickly enter a brief progress note.

ane, Lorenzo 32 M 01/01/1991	New FU Note
Date	24/06/2023 09:36
Note type	Follow Up Note
Details	
Cancel	Save

If any more detail is required use the full History & Examination (HxOE) template.

## Note:

When using the HxOE template, only the Tabs and Fields in which one enters data are included in the note. This means that one has huge flexibility to enter either a very short note or a very complex complete clinical note. It also means that Bluebird can help calculate the appropriate billing code based on the complexity of your clinical note.

#### **HxOE**

The **History & Physical** template is *extremely* flexible and offers sophisticated *options* including clinical decision support, specialty notes, drawing tools and imported images.

The **History & Physical** template has a row of **Primary Tabs**: Current Problem/s, Thumbnail (core history such as PMHx, allergies etc), Review of Symptoms, Physical examination, Assessment, Orders (including special investigations) and the Plan.

Primary Tabs have **Secondary Tabs** for example under the O/E Primary Tab one finds Secondary Tabs for the examination of each body part.

Cane, Lorenzo 32 M	M 01/01/1991								HxOE						×
Date: 23/06/	5/2023	13:26			Documented B	y: Attendin	g Doctor Test								
Problem/s	Thumb	onail	ROS	O/E	Assess	Orders	Plan								
Gen	Mental	Skin	Head/N	Neck	Eyes	ENT	Upper L	Thorax	Abdomen	Genital	Lower L	Excreta			
Diagrams / Image	es														× 1
Set						ſ	Description								- I'
Abn Skin Temp			⊖Yes	⊃ No											
Abn Surface			⊖ Yes ⊂	⊖ No											- 11
Abn Colour			● Yes (	⊃ No			Acanthosis nigr Addison's pigm	icans entation							
1 Lesion			⊖Yes	⊃ No			Albinism								
2 Lesion			⊖Yes	⊃ No			Argyria Arsenic poisoni	na							
Abn scalp			⊖Yes	⊃ No			Carotemia								
Abn Body Hair			⊖ Yes (	⊃ No			Cloasma								
Abn Nails			⊖ Yes (	⊃ No			Cyanosis								
Genoderms			⊖ Yes (	⊃ No											
Other			O Yes	U NO											
															9
Cancel													 	 	Submit

Yes/No Radio Buttons indicate that that parameter was assessed and if it was normal or abnormal. If normal, default text (which can be edited) is inserted in the text block but if *abnormal*, a *drop down* of appropriate choices is presented (one's own text may also be entered).

The **Set Button** insert normal values in any fields without data and is typically used as follows: Any abnormal values (in that Secondary Tab) are entered and the Set Button is then clicked to auto-fill the rest of the fields in that Secondary Tab <u>with normal values</u>.

The real magic is that *only* portions that have *data* entered are *included* in the final (medico-legal) note. e.g. the presenting complaint section has this data entered:

Cane, Lorenzo 32 M 01/01/1991		New Presenting Complaint	×
Presenting Complaint:	SOB		Ŧ
Duration	48 hours ~		
Character:			
Alleviating:	● Yes ○ No	Exsitting upright	
Exacerbating:	● Yes ○ No	Ex Lying flat	
Severity:			
Similar Before:	● Yes ○ No		
Additional Information	Coughing green mucus		
Cancel		S	ubmit

This is the portion of the final note that is produced for this section.

Presenting Complaint		
SOB		
Duration: 48 hours		
Alleviating:		
sitting upright		
Exacerbating:		
Lying flat		
Similar Symptoms in the past		
Additional Information:		
Coughing green mucus		

This means that this template can be used for a range of notes from very brief to very complex. Bluebird can use this to determine appropriate billing codes.

#### **Blue Accordions**

Bluebird uses accordions to open and close (hide) sections.

For example, at the top of each examination Secondary Tab one finds a Diagrams/Images accordion. These accordions are closed by default. In the screenshot below the accordion is open and shows a skin diagram. Selecting a choice from the list on the right and then clicking on a appropriate section of the diagram will label that area with the number corresponding to the chosen lesion.



At the bottom of these choices is an ability to add custom labels.

## Presenting Complaint Driven Hx & Exam

Bluebird can use the presenting complaint to indicate (using red text) portions of the history and physical that are important for that specific presenting complaint. For example dyspnoea in the patient below has been set up to remind the clinician to review the core history (thumbnail) as well as segments of the history (ROS) and examination.

Cane, Lorenzo 32	M 01/01/1991							ER Note
Date: 21/06	/2023 15:55			Documented By:	Ward Test			
Problem/s	Thumbnail	ROS	O/E	Assess	Disposition	Orders	Plan	
+ Presenting	Complaint							~
SOB								â

## Subsections of those Tabs are similarly marked in red. This functionality is customizable.

Cane, Lorenzo 32 M 01	/01/1991							ER Note
Date: 21/06/2023	15:55			Documented By:	Ward Test			
Problem/s	Thumbnail	ROS	O/E	Assess	CDS	Orders	Plan	
Ongoing Problems:								
Allergies:								
Occupation:								×
Social Hx:								
Family Hx:								
	D Phenylketonu	ıria 🗆 Thalasse	emia 🗌 Previo	ous MRSA				Reviewed
РМНх:								
	🗆 Leukemia 🗌	Diabetes	Cystic Fibrosis					Reviewed
PSHx:								
	Uentrosusper	nsion 🗆 Myom	nectomy 🗌 Bio	opsy with suture in	theatre			Reviewed
RxHx:								
+ Vaccination								^
Name		Туре	e					
Cancel								Submit
								Page 1

## Differential Dx Driven CDS, Orders and ICD10

Optionally the Differential Diagnosis can drive clinical decision support and default orders. Note that Differential Dx can have multiple values - only the first (the working diagnosis) drives CDS and Orders.

Cane, Lorenzo 32 M 01/01/1991	ER Note	×
Date: 21/06/2023 15:55 Documented B	Ward Test	
Problem/s Thumbnail ROS O/E Assess	CDS Orders Plan	
Assessment		^
SOB x 48 hrs		
Differential Diagnosis		^
CAP •	Description	
+ Diagnosis J15.9 Bacterial pneumonia, unspecified	8	^
+ Ongoing Problems HT Bacterial pneumonia, unspecified	e 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 1997 - 19	^
Cancel		Submit

The Differential Diagnosis entered above is CAP (Community Acquired Pneumonia) and that drives the CDS on the next page as well as the orders on the page following that.

<u>Page</u> 16

## Clinical Decision Support for CAP

Problem/s	Thumbnail	ROS	O/E	Assess	CDS	Orders	rs Plan
	Gı	ideline					
https://emedic	cine.medscape.co	n/article/234240	0-overview#sho	wall			
Typical bacter respiratory pat Presenting: fer Standard diag • Chest radiog • Complete blo • Serum blood	rial pathogens ti thogens are inc ver, a productiv gnostic workuj graphy ood cell (CBC) o d urea nitrogen (	nat cause CA reasingly beir e cough with for CAP incl count with dif BUN) and cre	P include <b>Str</b> ng identified a purulent spu lude the follor ferential eatinine levels	eptococcus as frequent et tum, dyspnea wing:	oneumoniae, Ha ologies of CAP. 1 , and pleuritic ch	emophilus in Fhe most com est pain.	Is influenzae, and Moraxella catarrhalis (see images below). However, with the advent of novel diagnostic technologies, viral common viral pathogens recovered from hospitalized patients admitted with CAP include human rhinovirus and influenza. [1]
For patients w following: [7] Sputum Grar Blood culture Serum transa Lactic acid le CRP LDH Urinary antig Pneumococc multiplex PC	vith <b>severe</b> CAF m stain and/or o es m level aminase levels avel gen testing for L cal urinary antig R (26 different s	, patients bei sulture egionella en testing (U/ sputum patho	ng empiricall AT) gens)	y treated for r	nethicillin-resista	nt S aureus (M	is (MRSA) or Pseudomonas, or patients in whom a specific etiology is suspected, additional workup may be warranted, including the
chronic heart, Risk factors for If Pseudomonia every 8 hours, <b>Prognosis of</b>	s lung, liver, or re or <b>Pseudomona</b> as is suspected , meropenem 1 <b>CAP</b>	enal disease; s pneumonia , therapy con g every 8 hou	diabetes mell a include strue isists of an ar irs, or imipen	litus; alcoholis ctural lung dis nti-pneumoco em 500 mg ev	m; malignancy; a ease, COPD, and ccal and anti-pse very 6 hours).	asplenia; immu d bronchiectas eudomonal bei	mmunosuppression; prior antibiotics within 90 days; or other risk factors for drug-resistant infectio actasis [4] al beta-lactam (piperacillin/tazobactam 4.5 g every 6 hours, cefepime 2 g every 8 hours, ceftazidime 2 g every 8 hours, aztreonam 2 g
<ul> <li>Negative pro</li> <li>preexisting lu</li> <li>underlying ca</li> <li>poor splenic</li> <li>advanced ag</li> </ul>	ognostic factors ung disease ardiac disease function ge	in communit	y-acquired pr	neumonia (CA	P) include:		
<ul> <li>multilobar inv</li> <li>past infection</li> <li>delayed initia</li> <li>The 2019 update</li> <li>Use of <b>PSI</b> a</li> <li>Rapid empirition</li> <li>Rapid fluid a</li> </ul>	volvement n with tuberculd ation of appropriated <b>IDSA/ATS</b> nd clinical crite ic appropriate a nd electrolyte m	osis iate antimicro guidelines intia to the dete ntibiotics star esuscitation	obial therapy. ncludes the fo ermine CAP s rted promptly	ollowing: everity and ap	ppropriate level o	f care	
• thromhoemh	olic prophylavi	2					

<u>Page</u> 17

Cane, Lorenzo 32 M	01/01/1991							ER Note	×
Date: 21/06/	2023 15:55			Documented By:	Ward Test				
Problem/s	Thumbnail	ROS	O/E	Assess	CDS	Orders	Plan		
+ Plan								^	
Admit to ICI	J							ê	
Cancel									Submit

Default orders for CAP

Once the **Plan Tab** is completed click the Submit button to review (and edit if required) the clinical document (next page) before signing it off. Once signed off it becomes a medico-legal document and cannot be altered.

Cane, Lorenzo 32 M 01/01/1991 ER Note	×
Presenting Complaint SOB Duration: 48 hours Alleviating: sitting upright Exacerbating: Lying flat Similar Symptoms in the past Additional Information: Coughing green mucus	
Orgoing Problems HT	
Bacterial pneumonia, unspecified	
Normal キ A ﷺ B I U S リック 目目 正正 IA	
RoS Skin Family HX: Ashma Resp Dysnoea: X 48 hrs Duration: 48 hours Greater than Normal Cough Duration: 12 hours Sputum: Green Chest. Pain Wheez	
O/E Gen	
Normal ≑ A ﷺ B I U ⊕ 19 ↔ Ε Ξ Ξ Ξ I.	
Normal Emotional State	
Assessment SOB x 48 hrs	
Differential Diagnosis	
Diagnosis	
JLS y Backenar preumonia, unspecimed Disposition: Admit Ward: tsticu1 Orders:	
Feeding: NPO Activity: May be out of bed Drugs: Antibiotics: Amplcillin: Dose: 1.0 g Administration: intermittent Duration: q 6 hourly x 4 days Route: IV Labs: Urea SerPI-sCnc Duration: g 4 hourly Imaging: Thorax CXR	
Admit to ICU	
Cancel	Submit

<u>Page</u> 19

It is useful to have the diagnostic codes (ICD10) added to the clinical record as soon as possible. To facilitate this Bluebird provides a simple wizard that takes clinicians through two drop down lists that make coding easy.

Cane, Lorenzo 32 M 01/01/1991	Cane, Lorenzo 32 M 01/01/1991		Add New Diagnosis	×	×
Date: 21/06/2023 15:5	5				
Problem/s Thumbnail		Select code			
		Category	Diseases of the respiratory system (J00-J99)	$\checkmark$	
Assessment		Sub Category	Influenze and pneumonia / (10- 118)		^
		Sub category			
SOB x 48 hrs		Code	$\checkmark$		
	ICD10 Code		Influenza due to identified influenza virus		
Differential Diagnosis			Influenza with pneumonia, influenza virus identified		^
		Code lookup	Influenza with other respiratory manifestations, influenza virus identified		
			Influenza with other manifestations, influenza virus identified		
САР		Find Code	Influenza, virus not identified	<b></b>	
	Details		Influenza with pheumonia, virus not identified		
+			Influenza with other respiratory manifestations, virus not identified		
	Cancel		Adenoviral pneumonia	Submit	
+ Diagnosis			Respiratory syncytial virus pneumonia		~
			Parainfluenza virus pneumonia		
			Other viral pneumonia		
+ Ongoing Problems			Viral pneumonia, unspecified		
			Pneumonia due to Streptococcus pneumoniae		
HT			Pneumonia due to Haemophilus influenzae	Ū.	
			Bacterial pneumonia, not elsewhere classified		
			Pneumonia due to Klebsiella pneumoniae		
Cancel			Pneumonia due to Pseudomonas		Submit
			Pneumonia due to staphylococcus		
			Pneumonia due to streptococcus, group B		
			Pneumonia due to other streptococci		
			Pneumonia due to Escherichia coli		
			Pneumonia due to other aerobic Gram-negative bacteria		
			Pneumonia due to Mycoplasma pneumoniae		
			Other bacterial pneumonia		
			Bacterial pneumonia, unspecified		
			Pneumonia due to other infectious organisms, not elsewhere classified	2	

<u>Page</u> 20

## **Thumbnail Sections**

The next 7 sections on the **Patient Line** (Problems, Allergies, Procedures, PMHx, Rx, OBGYN and Vax) are all part of the core medical history or what we call the **Thumbnail**. It is the data that is saved as part of each patient's national Single Digital Health Record (**SDHR**). With the patient's consent this may be accessed by other medical practitioners or by emergency medical services (EMS). Typically this core information is initially documented on the **Thumbnail Tab** of the Hx and Physical template.

Problem/s	Thumbnail	ROS	O/E	Assess	Orders	Plan						
Ongoing Problems:												
Allergies:	×test											
Occupation:												•
Social Hx:												
Family Hx:												
PMHx:	×Thyroid ×Ast	hma										
PSHx:	× Ovarian surgery	7										
RxHx:												
LMP:	04/01/2023											
Cambra and Inc.	Contracentive	Patch										
Contraception:		racen										
Gynae Surgery:	× Ovarian surger	у										
G 5 T 1 P	0 A 1 L	2		Description:	hhe	scxv11						
Pregnant:	● Yes ○ No			EDD:	29/	06/2023	EmodeD:	vacuum		•		
+ Vaccination											^	
Name		Тур	e									
COVID-19		Pfiz	er		Da	te 🔍 +-Age		05/06/2023			匬	
Cancel												Submit

The **Patient Line** shows the current core information (without needing to click anywhere).

Name	Alert	Tasks	Notes	Current Problems	Allergies	Procedures	PMHx	Rx	OBGYN	Vitals	Vax	Specialty	Investigations
<b>Vine, Darryl 64 F</b> 1234	1	+ 3	+	+ Hypertension	+ Penicillin	+	+ Asthma	+ abacavir	+	+ P 65 BP 120/80 RR 13 T 37 Wt 50	+ Influenza	+ OB S Cycle	+ 30/06/2023

The blue + Icons provide a quick method to update any section - for example, Allergies:

Thompson, Marina 35 F	03/03/1988			Up	date		×
Date:	17/07/2023	Time:	12:02	Documented By:	Haroon Haffejee		
Allergies:		×Penicillin					
Reason for Change:							
Cancel							Submit

Clicking the relevant section opens the Drill Down line items which document the timeline of changes.

Name Ale	rt Tasks	Notes	Current Problems	Allergies	Procedures	PMHx	Rx	OBGYN	Vitals	Vax	Specialty	Investigations
Thompson, Marina 35 F 880303004001 10123456	+	+	+	+ Codeine	+	+ Thyroid, Asthma	+	+ LMP: 04/01/2023 51012 hhescxv11 Pregnant	+ BP <b>102/90</b>	+ COVID-19	+ OB	+ 14/07/2023 14:30
Date	Note		Update To	Up	date From	User Role		No	te Type		Author	
17/07/2023 12:02	Thumbnail Update		Codeine	Nil		Doctor		Alle	ergies Update		Haroon Haffejee	
14/07/2023 17:54	Thumbnail Update		Nil	Pe	n	Doctor		Alle	ergies Update		Haroon Haffejee	

Clicking any line shows the reasons for that change in the Thumbnail.

Thompson, Marina 35 F 03/03/1988		Thumbnail Update	×
Patient: Thompson, Marina 35 F 03/03/1988	Created By: Haroon Haffejee Date: 14/07/2023 17:54		Print
Allergies Before: <mark>Penicillin</mark>			
Allergies After:			
Reason for Change: Testing showed no Pen allergy			
			Pa

## **Vitals Section**

The most recent P, BP, RR, T and  $O_2$  are shown in the Vitals Section of each patient line.

📞 Bluebird Off	ice												¢   A
Name	Alert	Tasks	Notes	Current Problems	Allergies	Procedures	PMHx	Rx	OBGYN	Vitals	Vax	Specialty	Investigations
<b>Vine, Darryl 64 F</b> 1234	1	+ 3	+	+ Hypertension	+ Penicillin	+	+ Asthma	+ ABACAVIR	+	+ P 65 BP 120/80 RR 13 T 37 Wt 50	+ Influenza	+ OB S Cycle	+

Although only the **General** Vitals are typically used in the office, for completeness all Observations (broken into the following groups) may be entered:

- General
- Cardiac
- Respiratory
- Neurological
- Upper Limb
- Lower Limb

(the latter two are important in the assessment of limb viability).

To document *new vitals* one may use either the blue **+Icon** (which pops open the menu seen below) or the **+Button** under each **Vitals Tab** on the **Vitals Drill-Down.** 

Each Vitals group has it's own Tab and it's own + Button.

	ce												🌩 l 🔒
Name	Alert	Tasks	Notes	Current Problems	Allergies	Procedures	PMHx	Rx	OBGYN	Vitals	Vax	Specialty	Investigations
Vine, Darryl 64 F		+	+	+	+	+	+	+	+	+ BP 120/80	+	+	+
1234										+ General			
										+ Cardiac			
General Car	rdiac Re	spiratory	Neuro	Limb		O Day O Week	) Month 🧿 All			+ Respiratory			
+										+ Neuro			
Table Graph	hs									+ Upper Limb			
Recorded At 1	13/07/2023 13:55									+ Lower Limb			
Temp (°C)	37												
Pulse (bpm)	65												
Systolic BP (mmHg)	120												
Diastolic BP (mmHg)	80												
O <sub>2</sub> Sat (%)	13												

#### Vitals Tabs

Each Vitals Group has it's own **Tab** and it's own **+ Button**. Vitals can be viewed by day, week, month or All with All being the default. If one uses the daily sheet, **VCR Buttons** appear which allow one to navigate through the daily sheets. Click the middle VCR button (which shows the day being viewed and the total days in the found set) to navigate to the current day.

General	Card	diac	Re	espiratory	/	Neuro	o	Limb			🖲 Day	◯ Week		h OAd	mission		< <	3 / 34	>	>>	25/05/202	3			
+																									
Table	Graph	s																							
Hourly	All																								
		07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	01	02	03	04	05	06
Temp (°C)									36.5*																
Pulse (bpm)									*																
Systolic BP (mmHg	g)								*																
Diastolic BP (mmH	lg)								*																

When one sees an \* in the hourly cell, it means more than one vitals has been recorded in that hour. Click it to move to the All tab:

General	Ca	rdiac	Respiratory	Neuro	Limb	$lacksquare$ Day $\bigcirc$ Week $\bigcirc$ Month $\bigcirc$ Admission	<< < 3/34 > >> 25/05/2023	
+								
Table	Grap	hs						
Hourly	All							_
Recorded At	:	14:42 14	:44					
Temp (°C)		36.5 3	5.5					
Pulse (bpm)		86						
Systolic BP (mmHg	)	122						
Diastolic BP (mmH	g)	81						
	-	-						

## Graphs

## All information may also be viewed graphically.



In this case it has been elected to view vitals by day (which would be unusual in most practices) but this example was chosen to demonstrate the VCR buttons that appear when daily graphs are chosen. The VCR buttons enable navigation between days in the found set.

One may mouse over any portion of the graph to see an individual Data Point.



If one selects only one vital - in the example below only the pulse rate has been selected - the **Y** axis will adjust to show only the range for that specific vital and, as in the case below, this will show variation that might have not been obvious if all parameters were charted.



#### Data Download

As with all Bluebird charts, tables may be downloaded to excel and graphs downloaded in multiple image formats:



#### + Buttons

General	Cardiac	Respiratory	Neuro	Limb	O Day ○ Week ○ Month ○ Admission     <<< >
		+	M		
			_		

The **+Button** opens the corresponding **Data Entry Form** e.g. clicking the **Respiratory Tab** +Button opens this data entry form:

-			•	
		Date	Time	
	Recorded At:	25/06/2023	15:28	
	RR: (bpm)			
	O <sub>2</sub> Sat:			
	FiO <sub>2</sub> :		J	
	Sup O <sub>2</sub> :	~	J	
	Method:	~	J	
	Air Entry A L:	~	]	
	Air Entry A R:	~	]	
	Air Entry B L:	~	]	
	Air Entry B R:	~		
	Peak, Flow: (L/min)	[	)	
	Ventilator			
	Mode:	~	]	
	Rate Pt: (L/min)			
	Rate M: (L/min)			
	Tidal V Pt: (ml)			
	Tidal V M: (ml)			
	Min V:			
	Alarm:			
	Peak IP P: (cmH <sub>2</sub> O)			
	Peak IP M: (cmH <sub>2</sub> O)			
	Plateau P: (cmH <sub>2</sub> O)			
	PEEP: (cmH <sub>2</sub> O)			
	Pressure Sup: (cmH <sub>2</sub> O)			
	PeakF / Insp P: (L/min)			
	Sensitivity: (cmH <sub>2</sub> O)	~		
	I.E. Ratio: (L/min)		]	
	Cuff Pressure: (cmH <sub>2</sub> O)		]	
	ET Length: (cm)			
	Humid, H <sub>2</sub> O; (mgH <sub>2</sub> O/L)			
	V.Temp: (°C)			

<u>Page</u> 30

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## **Specialty Section**

Use the + Icon in the Specialty Section to create a new specialty form such as an antenatal sheet or a stimulation sheet for infertility.

🕻 Bluebird Off	fice												¢ I A
Name	Alert	Tasks	Notes	Current Problems	Allergies	Procedures	PMHx	Rx	OBGYN	Vitals	Vax	Specialty	Investigations
Vine, Darryl 64 F 1234	٦	+ 3	+	+ Hypertension	+ Penicillin	+	+ Asthma	+ ABACAVIR	+	+ P 65 BP 120/80 RR 13 T 37 Wt 50	+ Influenza	+ 08	+ 30/06/2023
												+ OB	
												+ S-Cycle	
												+ Renal	
												+ Oncology	
												+ Psych	
	_	_	_								_	_	-

If there is an active sheet (in the example above an antenatal sheet), a blue icon will be shown in the Specialty Section. Clicking that icon will open the specialty sheet. Once a sheet has been made but is no longer active (in the example above the baby might have been delivered) the icon will become grey.

The next 2 pages show examples of an antenatal sheet and an infertility stimulation sheet.

<u>Page</u> 31

support@intelms.com

#### **Antenatal Sheet**

Antenatal	Labour D	elivery	3rd Stage	New	Born	6/52 PostPa	artum					List All	Pregnancies			
Risk 0	1 0 1	Name:		Aicha		Mthembu		Father:	John Snow			Folder No:	1002936489	Gestational Age:		40
Current Date:	13/07/2023	Attend	ing Doctor:	Haroon Haf	fejee			Referral:				Blood Group:	A ~ + ~	Maternal Age:	4	\$5.5
EDD:	22/02/2023	by:		early u/s			•	Antenatal Vitamins:	×Vitamin D			Allergies:	×Penicillin		□ Boc	oked:
G 5 T 1 P 1 A	3 L 2					Description		NVD x 2, SA x 2, Ectop	pic x 1							
Problems:	×Anovulatory					Reminder Not	e									
Labour Floor Copy:	lab.floor 34		•								Labour Plan					
GP Letter:	GP28		•	Hospital:	H	outbay Hospital		•	Pediatrician:				Breast Feeding:	Planned		
Antenatal Classes:				Epidural:	EL	ective Epidural		٣	Contraception:	×TL						
				Additional Information												
Placenta:	Ant. not praevia		•	Cat:		Sex:	XX They kno	w	Ŧ							
Date			GA	Urine		Hb	w	t BP	SFH	Lie	FHR	FM	Other	FW	ТСА	
+			(Wks)	Р	G	(g/dl)	(Kg	g)	(cm)					(gm)	(Wks)	
22/02/2023 09:51			40.0	-	+	12	62	110/60	36	с	145	+	Anxious re: pain relief	3400	1	6

#### Notes:

- Bluebird provides a tool to measure risk profiles (Pre-pregnancy, PastOB, Current Pregnancy and Total Risk) which helps plan the most appropriate location for delivery
- In the example above, only the last antenatal visit is shown

More detail regarding the Complete OB Module, including in-hospital and newborn care can be found here: intelms.com/954

## Infertility Stimulation Sheet

This specialty module facilitates the documentation of the daily parameters that may need to be recorded during a stimulation cycle:

Name		A	lert		Task	s	Note	s	Cur	rent Pro	blems		Allergie	s	Proce	dures		PMHx			Rx		OBGYN	ı	Vit	tals		Vax		Specialty		Investigations
Mthembu, Aicha 7708240043084 1003947873 Stimulation Cycle:	25 F 10/02/	2023			+		+		Testir probl new p anoth testin Adde	+ ng the or ems, Ade problem, ner probl g 03022 d today f	ngoing ding a , Adding lem for 023, for	Penicil	+ Ilin		-	F	c	+ Cellulitis		ABACA ABACA LAMIV today 1 03022	+ WIR, WIR, UDINE, Add for testing 023, Acyclo lifine Amik	Li ded 5 ovir, racin	+ MP: 02/02/20 5 5 5 5	023 B	P 110/6 D <sub>2</sub> 1	+	Influenza Meningoo Meningoo	+ Hepatitis coccal, coccal	а В,	+ [sc	ycle	+
	L Fo	ollicle	R Fol	licle	Endo	Mucus	E2	LH	АМН	FSH	bHCG	FSH	HCG	Clomiphene	Vit	HMG	Progestron	e Lupron	E2	E+P	Ovitrelle	Cetrore	elixPergoveri	sGonal F[	Decapepty	l Lucrin	Insemnation	Embryo Biopsy	Egg Retrieval	Embryo Transplant	ТСА	Notes
#10/02/2023 Fri	# 1 2	mm	#	mm	mm		pg/m		pmol/		mIU/m	IU	IU	mg	Tabs	IU	mg	mg	cc		mcg	mg	IU	IU	mg	mg					Days	
#12/02/2023 Sun : #13/02/2023 Mon 4	3 4 5																															
#15/02/2023Wed	6 7																															
@17/02/2023 Fri	8 9																															
\$19/02/2023 Sun 1	10																															

<u>Page</u> 33

## **Investigations Section**

The blue + Icon under the **Investigations Header** allows one to create requisitions which may either be printed or, if your service provider is Bluebird enabled, may be sent electronically to the lab, radiologist or to the blood bank.

A big advantage to both the practice as well as the service provider in using the electronic requisitions is that it obviates the need to recapture data from a paper sheet along with all the data capture errors that inevitably occur.



Examples of each of these electronic requisition forms are shown on the next 3 pages.

## Lab Requisition

## Use the blue + Icon to open a new Lab Order Form:

	)				Requ	isition			
Order Date 18/06/2023	3 Time 15:22								
General O Microbiology /	Cytology O Histology O B								
- deneral - meroplotogy	Chest pain	nood – magnig							
Clinical						Urgent	Documented By	Attending Doctor Te	
Indication	infection V Cardiac	Device infection	ons 🗸			Ordered By	Attending Doctor Te		
Recurring	0								
Requisition IC	CD 10 Calculator c.c.	. Doctor/s Tests Ordered	i						
Profiles + Show									
Service Provider: 💿 BB									
Allergy									
Allergy (Allergy)									
Drugs									
Abuse / Overdose	Monitoring								
General									
General									
Chemistry	Constantion (Characteria)	Distance	Davies	Enderstein Other					
Allergy (Chemistry)	Coagulation (Chemistry)		Drugs	Endocrinology: Other					
Iron / Vit	Lipids / CAD risk	Metabolic / Genetic (Chemistry)	Semen						
Auto-immuno									
Mycobacteriology									
Sputum, NPA / Tracheal / Bror	nchial								
Neonatal									
Perinatal									
Other									
Hypertension / Other	Microscopy								
Endocrinology									
Adrenal	Parathyroid								
Find Test									

## **Imaging Requisition**

## Use the blue + Icon to open a new Imaging Order Form:

Vine, Darryl 64 M 17/0	1/1959				Requisition			;
Order Date 21/0	6/2023 Time 08:22							
⊖ General ⊖ Microb	ology O Cytology O Histolog	gy 🔾 Blood 🔘 Imagin	9					
	120 Angina pectoris							
Clinical					Urgent 🗌	Documented By	Attending Doctor Te	
Indication						Ordered By	Attending Doctor Te	
Order Later								
Requisition	ICD 10 Calculator	c.c. Doctor/s	Tests Ordered		ICD 10: I20 Angina pe	ectoris		
Profiles + SI	low							
Service Provider:	В							
Safety Check: Is t Is t Do XR	he patient a high risk infection? he patient diabetic? he patient on Metformin? es the patient have any allergies	Yes No Unkr Yes No Unkr Yes No Unkr Yes No Unkr ? Yes No Unkr	nown nown nown nown					
Head	Lower Extrem	. Misce	ellaneous	Spine	Thorax			
Upper Extrem								
MRI								
Neuro / ENT	Spine							
US								
Abdomen	OBGYN							
Mammography								
Mammography	Spine							
Bone								
Bone								
Fluroscopy								
Fluroscopy								
Nuclear Med								
Nuclear Medicir	e							

<u>Page</u> 36

## **Blood Bank Requisition**

Use the blue + Icon to open a new Blood Requisition Form to be sent to the blood bank:

	17/01/1959				Blood Re	equisition			
Order Date	19/06/2023		Time	12:54					
Date of birth	17/01/1959								
Clinical	I20 Angina pect	oris			Indication	× Hgb<7 Hct<25 RBC <2.5			
Doctor 🔍 Verba	al O Telephone C	Transcribed			Ordered By	Lindsay Morley		Documented By	Lindsay Morley
								)	ICD 10: I20 Angina peo
Requisition	ICD 10 Calo	culator	c.c. Doctor/s	Tests Ordered					
	Consent	• Yes	No						
Leuc	Request	● Type & Scr ○ Yes ●	reen O Cross M No	atch O Univer Cryo Poor	rsal Donor OYes 💿 No	)	Low Titre Anti-T	O Yes 🖲 No	2
Leuc Patient History	Request	Type & Scr     Yes	reen O Cross M No	atch O Univer Cryo Poor	rsal Donor O Yes 🔍 No		Low Titre Anti-T	O Yes 🔍 No	
Leuc Patient History I	Request cocyte reduced Blood group	<ul> <li>Type &amp; Scr</li> <li>Yes</li> <li>ABO</li> </ul>	reen O Cross M No	atch O Univer Cryo Poor	rsal Donor O Yes () No Rh	+ VInknown	Low Titre Anti-T	○ Yes ● No	
Leuc Patient History I Tra	Request cocyte reduced Blood group Insfusion Hx	<ul> <li>Type &amp; Scr</li> <li>Yes</li> <li>ABO</li> <li>Yes</li> </ul>	reen ○Cross M No ○ ✓ No	atch O Univer Cryo Poor	sal Donor O Yes (© No Rh Adverse events	+ VInknown	Low Titre Anti-T	○ Yes ● No	19/06/2021
Leuc Patient History I Tra	Request cocyte reduced Blood group insfusion Hx Hb	<ul> <li>Type &amp; Scr</li> <li>Yes</li> <li>ABO</li> <li>Yes</li> <li>8.3</li> </ul>	No No No Date	atch O Univer Cryo Poor 18/06/2023	rsal Donor O Yes (© No Rh Adverse events Time Time	+ Vinknown Fever v 10:54	Low Titre Anti-T	○ Yes ● No	19/06/2021
Leuc <b>'atient History</b> I Tra	Request cocyte reduced Blood group Insfusion Hx Hb Platelets INR	<ul> <li>Type &amp; Scr</li> <li>Yes</li> <li>ABO</li> <li>Yes</li> <li>Yes</li> <li>8.3</li> <li>288</li> <li>1.1</li> </ul>	No Cross M No Date Date Date	atch O Univer Cryo Poor 18/06/2023 16/06/2023 14/06/2023	rsal Donor O Yes (e) No Rh Adverse events Time Time Time	+ VINknown Fever V 10:54 14:00 09:45	Low Titre Anti-T	O Yes   No	19/06/2021

All doctor's orders requesting the blood bank to group and screen or to create blood products for this patient are listed under the **Requisitions Tab** under the Investigations Drill Down.

Click any line item to review the original Blood Bank Requisition (in a read only format).

## Results

Clicking the **Blue Lab Icon** (far right) on the Patient Line brings up the **SI** (Special Investigation) **Tabs** with the cumulative table selected by default. All labs for this patient are shown. A line list of all SI results is shown under the "All" tab.

## Notes:

- Orphaned results, until merged, cannot be allocated to a specific patient and will not be shown.
- When present, a red dot above the blue lab icon indicates that there are one or more abnormal septic lab results (such as high WCC, poor renal or liver function or a raised PCT).
- The date and time below the icon, shows the time that the *last* lab result arrived in Bluebird (note: *arrived* **not** the collection date). This is particularly useful when one is waiting for an urgent result.
- If your practice has set up specific groups of tests they wish to see at once, for example tests specific to a renal patient, one can filter by that group using the "Test Group" filter.



+       +	Investigations	
Vine, Darry 64 M         1         3         Nit         Pencilin         Asthma         ABACMR         Influenza           1234         Influenza         Influenza         Influenza         Influenza         Influenza         Influenza           Graphs         Tables         POC         toolates (0)         Histo (0)         Cyto (0)         Immunology (0)         Other (II)         All (0)         Requisitions (1)         Transmission Checklists           Test Group         All (0)         From (5) (0) (2016)         10 (2016)         Transmission Checklists         Filter         Clear         Print Table           Showing test results from 05/01/2016 to 21/01/2016         To 21 (0) (2) (0) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2	+	
Graphs         Tables         POC         Isolates (0)         Histo (0)         Cyto (0)         Immunology (0)         Radiology (0)         Other (III)         All (0)         Requisitions (1)         Transmission Checklists           Test Group All ©         From 5 © 1 © 2016 © To 21 © 1 © 2016 ©         Filter         Clear         Print Table           Showing test results from 05/01/2016 to 21/01/2016         Disclaimer: Unmatched patient results not included.         Histo 00 7/09/1965 M         Trest name         Satterfield, Weldon 07/09/1965 M         16/01/2016         03:40         09:45         03:30         03:30         03:40         09:45         03:30         03:30         03:30         03:40         09:45         137         135         137	$\sim$	
Graphs         Tables         POC         Isolates [0]         Histo [0]         Cyto [0]         Immunology [0]         Radiology [0]         Other [II]         All [0]         Requisitions [1]         Transmission Checklists           Test Group All ©         From 5 © 1 © 2016 © To 21 © 1 © 2016 ©         Filter         Clear         Print Table           Showing test results from 05/01/2016 to 21/01/2016           Disclame: Unmatched patient results not included.           Test tables are designed for blood results. Labs do not always provide specimen information in a machine readable format, therefore non-blood results might be included. Use the full report for individual patient care.           Solicume: Unmatched patient results not included.           Test name         Reference         12/01/2016         15/01/2016         15/01/2016         03:40         09:45         03:30         03:3	30/06/2023	
Test Group All ©         From 5 © 1 © 2016 © To 21 © 1 © 2016 ©         Filter         Print Table           Showing test results from 05/01/2016 to 21/01/2016           Disclaimer: Unmatched patient results not included.         These tables are designed for blood results. Labs do not always provide specimen information in a machine readable format, therefore non-blood results might be included. Use the full report for individual patient care.           Test name         Reference         12/01/2016         15/01/2016         03/40         0/9/45/01         18/01/2016         03/30         03/30           CHEM <td< th=""><th></th></td<>		
Showing test results from 05/01/2016 to 21/01/2016           Disclaimer: Unmatched patient results not included.           These tables are designed for blood results. Labs do not always provide specimen information in a machine readable format, therefore non-blood results might be included. Use the full report for individual patient care.           Test name         Satterfield, Weldon 07/09/1965 M           CHEM         12/01/2016         15/01/2016         15/01/2016         17/01/2016         18/01/2016         20/01/2016           OHEM         Immovi/1         139         Immovi/1         135         137         135         137		
Showing test testilts not both 2000/2016 to 2000/2016         Disclaimer: Unmatched patient results not included.         These are designed for blood results. Labs do not always provide specimen information in a machine read-ble format, therefore non-blood results might be included. Use the full report for individual patient care.         Test name       Satterfield, Weldon 07/09/1965 M         Test name       16/01/2016       15/01/2016       15/01/2016       03:30 <th colspa<="" td=""><td></td></th>	<td></td>	
Disclamer: Unmatched patient results not included.           These tables are designed for blood results. Labs do not always provide specimen information in a machine readable format, therefore non-blood results might be included. Use the full report for individual patient care.           These tables are designed for blood results. Labs do not always provide specimen information in a machine readable format, therefore non-blood results might be included. Use the full report for individual patient care.           Test name         Satterfield, Weldo-D7/09/1965 M           Test name         Satterfield, Weldo-D7/09/1965 M           CHEM         Solution 13/01/2016         15/01/2016         15/01/2016         03/30         <th colspan="</td> <td></td>		
Satterfield, Weldon 07/09/1965 M           Test name         Reference         12/01/2016         12/01/2016         15/01/2016         16/01/2016         17/01/2016         18/01/2016         20/01/2016           CHEM         Image: Chemical Strategies		
Test name         Reference         12/01/2016 15/01/2016         15/01/2016 03:40         16/01/2016 03:40         17/01/2016 09:45         18/01/2016 03:30         18/01/2016 03:40         18/01/2016 09:45         18/01/2016 03:30         18/01/2016 03:40		
Test name         Reference         Discretion         Discretio	/2016	
CHEM         CM         C	2010	
Sodium         136-145 mmol/l         139         137         135 L         137		
Potassium         3.5 - 5.1 mmol/l         3.9         1         3.9         3.6         3.6         4.4           Chloride         98 - 107 mmol/l         104         99         97 L         99         101           CO2         22 - 29 mmol/l         25         29         29         27         27         23           Anion Gap         8 - 20 mmol/l         14         1         13         15         15         17           CRP         < 5 mg/l		
Chloride       98 - 107 mmol/l       104       99       97 L       99       101         CO2       22 - 29 mmol/l       25       20       29       27       27       23         Anion Gap       8 - 20 mmol/l       14       100       13       15       15       17         CRP       5 mg/l       6 # H       100       10		
CO2         22 - 29 mmol/l         25         Image: Color of the state		
Anion Gap         8 - 20 mmol/l         14         Image: Complex co		
CRP         < 5 mg/L         6 # H <th< th=""></th<>		
Haematology		
Hemoglobin 14.3 - 18.3 g/dt 7.2 *L 6.9 *L 9.9 #L 13.4 #L 13.0 L 12.7		
Hct 43.0 - 55.0 % 22.9 # L 29.7 # L 39.5 # L 38.1 36.1		

## Notes:

- 1. Results are colour coded by Bluebird (red = high, blue = low). **Note**: Sometimes labs also add their own markers to abnormal results in the example above, the lab has included a # to one result and a \* to another Bluebird shows whatever that specific lab places in the result.
- 2. Clicking the *numeric result* brings up the original full lab report as sent out by the lab.
- 3. Clicking the *test name* brings up a graph specific for that specific test (the graphs tab shows multiple tests <u>simultaneously</u>) hovering over data points on the graph brings up detail about the data point see below.
- 4. Orphaned lab results (results that cannot be matched to a HIS record) will NOT show on these cumulative tables and graphs and is one of the many reasons to deal actively with orphaned labs.
- 5. The common reason for a paper lab report not being in your office Bluebird is because the practice was not copied (check the paper report).
- 6. Occasionally an "old" report reappears in Bluebird. This is because the lab has resent the report (usually because the report was updated or the doctor requested a resend).

Clicking the *test name* brings up a graph specific for that test.



One can quickly view subsets of special investigations (Micro, Histo, XR) by switching tabs:

Graphs	Tables	POC	Isolates [0]	Histo [0]	Cyto [0]	Immunology [0]	Radiology [0]	Other [[]]	All [0]	Requisitions [1]	Transmission Checklists
--------	--------	-----	--------------	-----------	----------	----------------	---------------	------------	---------	------------------	-------------------------

The Requisition tab shows all electronic requisitions for this patient.