

Bluebird

Electronic Medical Record (EMR)



A screenshot of the Bluebird EMR interface displayed on a tablet. The interface shows patient information for 'Kamm, Long 54 M', including diagnosis 'Chest Pain', surgery 'CABG 3', and vital signs 'BP 140/80'. A 3D rendering of a patient lying in a hospital bed is overlaid on the screen. The interface includes a navigation bar with 'Bluebird', 'Lists', 'Ward', and 'Reports'. The patient's name, ID, and date of birth are listed. The diagnosis and surgery are shown in a table. The vital signs and location are also displayed. A 3D rendering of a patient lying in a hospital bed is overlaid on the screen.

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Introduction

The Bluebird electronic medical record (EMR), is a systematized digital collection of patient health information that facilitates optimal management of inpatients. Bluebird is a comprehensive clinical EMR designed to complement a hospital billing system and may include a range of data, including demographics, medical history, medication and allergies, immunization status, laboratory test results, radiology images, vital signs, and personal statistics such as age and weight.

Bluebird is best suited for hospitals that already have a billing solution and require an effective means to manage clinical information so as to optimize the efficiency of clinical staff.

The successful implementation of Bluebird, at scale, over the last 10 years in more than 70 large hospitals and 200 ICUs has demonstrated the robustness of the underlying technology and more specifically the following features that are at the core of the Bluebird EMR:

1. Minimal impact on hospital IT resources (both personnel and machine)
2. Data Security - Confidentiality of patient information
3. System stability
4. Data integration with existing hospital systems and multiple disparate laboratory information systems
5. Intuitive Graphic User Interface that enhances clinical efficiency.


Overview

Bluebird's Ward White Board is the spine of the EMR. It is an intuitive interface on which all relevant patient information is hung and on which new information may be quickly added.

| Name | Dx / PMHx | Surgery | Tasks | Infective | Devices | Alert | Feeding | Clinical | Drugs | Vitals | Beds |
|--|-----------|--|-------|-----------|----------------|-------|---------|---------------|-------|--------|--|
| Wadkins, Tea 1 F 1507109043033 1007400697 10/07/2015 Sibongile Radebe | A | | WL | I | | | | | Abx | | 18/07/2016 [3 2] Bed 4 Gen Room 1 |
| Kolodziej, Sora O M 1605229729881 1006911797 22/03/2016 Avery Pumphrey | A | Other major/ Stemotomy for B-T Shunt 128, Other major/ Diaphragm Pneumothorax S1, | WL | I | CAUTI | | | CF CM N IS | Abx | | 10/03/2016 [133 132] Bed 5 Gen Room 1 CRE IP |
| McCluskey, Maria O F 1006229849289 1007297097 22/06/2016 Avery Pumphrey | A | Other major/ Stemotomy for repair interrupted aortic arch, VSD closure ASD,PDA 14 | WL | I | BSI | | | | Abx | | 21/06/2016 [31 29] Bed 5 Gen Room 1 |
| Simone, Malea O F 1504200197911 1007281934 20/04/2016 Thora Brosnan | A | Other major/ TEE, Stemotomy 35, | WL | I | LRI SST BSI | | | N IS | Abx | | 16/06/2016 [35 34] Bed 5 Gen Room 1 IS CRE IP |
| Naicker, Noya O F 1508215962037 1007369911 21/08/2015 Sibongile Radebe | A | | | I | | | | | Abx | | 10/07/2016 [11 11] Bed 6 Gen Room 1 |
| Sithole, Roni O F 1606264348715 1007255824 26/06/2016 Thora Brosnan | A | Patent ductus arteriosus | | I | | | | N | Abx | | 09/06/2016 [43 43] Bed 6 Gen Room 1 IP |
| Tetreault, Sadia O F 1604012533862 1007383629 01/01/2016 Avery Pumphrey | A | Other minor/ TEE Stemotomy for VSD,ASD,PDA 7, | WL | I | | | | | Abx | | 13/07/2016 [8 14] Bed 6 Gen Room 1 |
| Open Bed | | | | | | | | | | | New Cleaning Gen Room 1 - Bed 7 |


Each line represents a patient on that specific unit.

Individual patient lines are broken into *Sections*. Each Section shows specific clinical information (Name, Diagnosis/Hx, Surgery, Tasks, Infections, Drugs...).

| Name | Diagnosis / Hx | Surgery | Tasks | Micro | Devices | Alert | Feeding | Clinical | Drugs | Vitals | Beds |
|---|----------------|---------|-------|--------------|------------------|-------|---------|----------|-------|--------|---|
|  Kamm, Long 54 M 6112031307749 1007245596 20/07/2016 12:17 03/12/1961 Naima Curran | A | CABG 15 | | I LRI UTI | Cath 46 CAUTI | A | | | Abx | | 06/06/16 [45 45] Bed 4 Gen Room 1 |

At a glance one is able to see that this 54 year old male patient is 15 days post op (coronary artery bypass), has a urinary catheter (which has been in place for 46 days), is on 2 classes of drugs (antibiotics and cardiac) and has been in this unit for 45 days. One can also see that the last labs arrived on the 20/07/2016 at 12:17.

Clicking on any section will reveal detail specific for that section. As an example, the following screenshot has the lab section open.

| Name | Diagnosis / Hx | Surgery | Tasks | Micro | Devices | Alert | Feeding | Clinical | Drugs | Vitals | Beds | | | | | | | | | | | | | |
|---|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|--|
|  Kamm, Long 54 M 6112031307749 1007245596 20/07/2016 12:17 03/12/1961 Naima Curran | A | CABG 15 | | I LRI UTI | Cath 46 CAUTI | A | | | Abx | | 06/06/16 [45 45] Bed 4 Gen Room 1 | | | | | | | | | | | | | |
| Kamm, Long 03/12/1961 M | | | | | | | | | | | | | | | | | | | | | | | | |
| Test name | Reference | 06/06/2016 21:20 | 07/06/2016 04:00 | 08/06/2016 03:30 | 09/06/2016 03:30 | 10/06/2016 03:30 | 11/06/2016 03:40 | 12/06/2016 03:40 | 13/06/2016 03:35 | 13/06/2016 21:15 | 14/06/2016 03:00 | 15/06/2016 03:00 | 16/06/2016 03:05 | 17/06/2016 03:05 | 18/06/2016 03:10 | 19/06/2016 03:05 | 20/06/2016 03:10 | 21/06/2016 05:40 | 22/06/2016 03:35 | 23/06/2016 03:35 | 23/06/2016 15:00 | 24/06/2016 03:30 | 25/06/2016 04:00 | |
| CHEM | | | | | | | | | | | | | | | | | | | | | | | | |
| Sodium | 136 - 145 mmol/l | 142 | 138 | 141 | 139 | 132 # L | 136 | 135 L | 136 | | 131 L | 130 L | 134 L | 133 L | 132 L | 133 L | 132 L | 130 L | 131 L | 132 L | | 131 L | 131 L | |
| Potassium | 3.5 - 5.1 mmol/l | 3.7 | 2.3 #L | 4.1 # | 3.8 | 3.9 | 4.0 | 4.2 | 3.8 | | 4.1 | 4.0 | 4.2 | 4.4 | 4.5 | 4.7 | 4.4 | 4.3 | 4.8 | 4.3 | | 4.5 | 4.2 | |
| Chloride | 98 - 107 mmol/l | 101 | 99 | 109 H | 108 H | 100 | 101 | 99 | 95 L | | 92 L | 90 L | 92 L | 91 L | 92 L | 91 L | 92 L | 91 L | 93 L | 92 L | | 93 L | 92 L | |

The Bluebird EMR is comprehensive with modules for nurses, physicians, case managers and ancillary medical staff. Admissions, discharges, readmissions, patient days, days of therapy, mortality etc. etc. are all available in real time. Outcome reporting helps hospitals manage the most appropriate use of scarce resources. Bluebird eICU helps minimize the errors that typically occur in about 1% of ICU patients, often with disastrous outcomes.

The following pages show screenshots aimed to demonstrate some of the powerful features available for hospitals using the Bluebird EMR.

Risk Assessment



Early Warning System

Bluebird promotes integrated, **system-level improvements**, within your hospital to help ensure patient safety. Bluebird's EWS uses the proven British Royal College of Physicians NEWS (National Early Warning) scoring system to save lives.



Fewer Falls

Bluebird screens patients at risk and then proactively manages that risk to help reduce the incidence of falls in Bluebird enabled hospitals.



Fewer Pressure Sores

Bluebird screens patients at risk and then proactively manages that risk to help reduce the incidence of bed sores in Bluebird enabled hospitals.



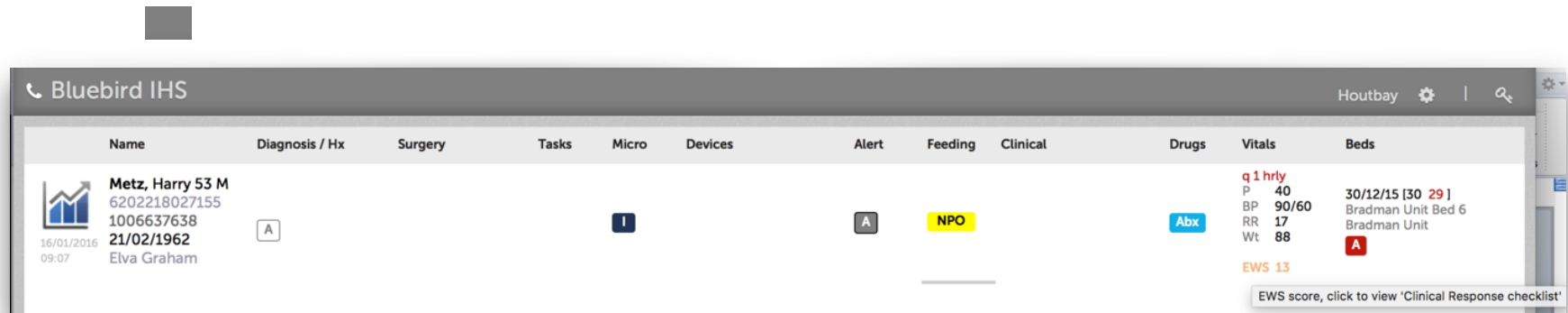
Fewer Infections

The combination of **advanced antibiotic stewardship** (rather than simple ADE avoidance) and **proactive infection prevention**, *within the same system* is key to Bluebird's success in measuring, and then driving down HAIs and MDROs. More detail can be found on Bluebird's separate antimicrobial stewardship site at www.intelms.com

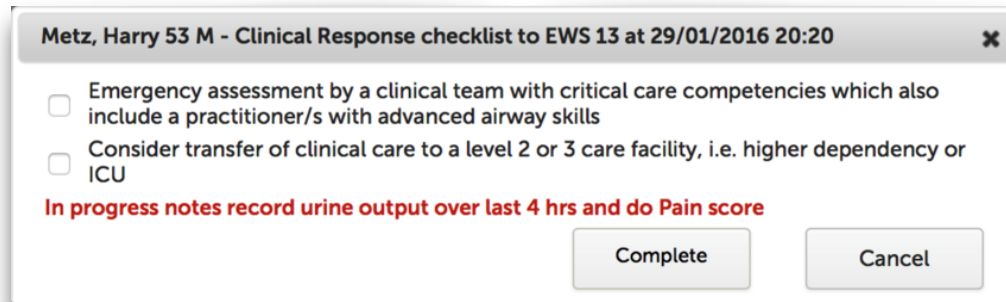
Bluebird is designed to manage risk by collecting data and then, depending on the data collected prompt repeat risk assessment at appropriate times.

Early Warning System (EWS)

Once vitals signs are digitalized they can be evaluated continuously. Bluebird algorithms produce real time early warning scores and, depending on that score, prompt and guide nursing staff to take proactive steps that have been proven to significantly reduce mortality. The AVPU score is an important component of the EWS. In the next image the EWS score is 13 and the tool tip explains that the User should click the score to view the “Clinical Response Checklist” (suggested future frequency of vitals is also set – in this case q1 hr.) Scores are colour coded to give a visual indicator of urgency.




Clicking the EWS score in this case shows the “Clinical Response Checklist”:



The Bluebird EWS is based on the Royal College National Early Warning Score.

Detail can be found at this URL: http://tfinews.ocbmedia.com/domains/ocbmedia.com/tfinews/data/news_score.pdf

Risk of Pressure Sores

| Name | Dx / PMHx | Surgery | Tasks | Isolates | Devices | Alert | Feeding | Clinical | Drugs | Vitals | Beds |
|--|------------------------|---|--------|------------|----------|----------------|------------|------------|------------|-------------------------------------|--|
|  Ricciardi, Amit 51 M 6412061039553 1007311542 06/12/1964 Arnulfo Nel <small>20/07/2016 12:17</small> | [A] Unstable angina | Other major/ IABP & Echo ` 28 , Other major/ TEE, Sternotomy for CBG, Mitral Repair and Repair of Aneurysm `? | [WL] | [I] LRI | | [A] | | | [Abx] | P 73 BP 129/85 RR 17 Wt 75 | 24/06/2016 [27 25] Isolation Room 1 P P F T |
| Orders | ProgressNotes | Consults | Rounds | InOut | Dialysis | RiskAssessment | Meds Given | Care Given | ClinDx | AdverseEvents | Notes |
| Form View | List View | | | << | < | 1 / 1 | > | >> | 22/07/2016 | | |
| Waterlow | Pain | Fall | TAS | | | | | | | | |
| BUILD / WEIGHT FOR HEIGHT | | | | | | | | | | | |
| 1 | | | | | | | | | | | |
| SEX RISK | | | | | | | | | | | |
| 1 | | | | | | | | | | | |
| AGE RISK | | | | | | | | | | | |
| 2 | | | | | | | | | | | |
| CONTINENCE | | | | | | | | | | | |
| <input type="radio"/> 0. Complete Catheterised <input type="radio"/> 1. Intermittent Catheterised <input type="radio"/> 2. Catheterised / Faecal incontinence <input type="radio"/> 3. Double incontinence | | | | | | | | | | | |
| MAJOR SURGERY / TRAUMA | | | | | | | | | | | |
| <input type="radio"/> 5. orthopaedic (below waist, spinal) <input type="radio"/> 5. on table > 2hrs <input type="radio"/> 8. on table > 8hrs | | | | | | | | | | | |
| MEDICATION RISK | | | | | | | | | | | |
| <input type="radio"/> 4. steroids, cytotoxics, high dose anti-Inflam, anti-coagulant | | | | | | | | | | | |
| SKIN TYPE VISUAL RISK AREAS | | | | | | | | | | | |
| <input type="radio"/> 0. Healty <input type="radio"/> 1. Tissue Paper <input type="radio"/> 1. Dry & / or Itching <input type="radio"/> 1. Oedematous <input type="radio"/> 1. Clammy, pyrexia <input type="radio"/> 2. Discoloured Stage 1 <input type="radio"/> 3. Pressure Ulcer Stage 2,3 or 4 | | | | | | | | | | | |
| MOBILITY | | | | | | | | | | | |
| <input type="radio"/> 0. Fully mobile <input type="radio"/> 1. Restless /fidgety <input type="radio"/> 3. Apathetic <input type="radio"/> 4. Restricted <input type="radio"/> 4. Bed bound (eg traction) <input type="radio"/> 5. Chair bound (eg wheelchair) | | | | | | | | | | | |
| APPETITE | | | | | | | | | | | |
| <input type="radio"/> 0. Average <input type="radio"/> 1. Poor <input type="radio"/> 2. NG tube/fluids only <input type="radio"/> 3. NBM/anorexic | | | | | | | | | | | |
| NEUROLOGICAL DEFICIT | | | | | | | | | | | |
| <input type="radio"/> 4. Diabetes, MS, CVA, Motor/Sensory paraplegia | | | | | | | | | | | |
| SPECIAL RISKS | | | | | | | | | | | |
| <input type="radio"/> 1. Smoking <input type="radio"/> 2. Anaemia (Hb<8) <input type="radio"/> 5. Peripheral vascular disease <input type="radio"/> 5. Single organ failure <input type="radio"/> 8. Multiple organ failure <input type="radio"/> 8. Terminal cachexia | | | | | | | | | | | |

Risk of Falling

| Name | Dx / PMHx | Surgery | Tasks | Isolates | Devices | Alert | Feeding | Clinical | Drugs | Vitals | Beds |
|---|------------------------|--|--------|----------|----------|----------------|------------|------------|------------|-------------------------------------|---|
|  Ricciardi, Amit 51 M 6412061039553 1007311542 06/12/1964 Arnulfo Net | [A] Unstable angina | Other major/ IABP & Echo `28, Other major/ TEE, Sternotomy for CBG, Mitral Repair and Repair of Aneurysm `27 | [WL] | [I] | [A] | | | | [Abx] | P 73 BP 129/85 RR 17 Wt 75 | 24/06/2016 [27 25] Isolation Room 1 P P F T |
| Orders | ProgressNotes | Consults | Rounds | InOut | Dialysis | RiskAssessment | Meds Given | Care Given | ClinDx | AdverseEvents | Notes |
| Form View | List View | | | << | < | 1 / 1 | > | >> | 22/07/2016 | | |
| Waterlow | Pain | Fall | TAS | | | | | | | | |

4 AT RISK - COMPLETE HRFMP

MOBILITY

- 0. Ambulates independently
- 1. Uses Assistive Devices
- 1. Requires Ambulatory Assistance
- 1. Unable to Ambulate

ELIMINATION

- 0. Independent
- 1. Hx nocturia / incontinence
- 1. Requires Elimination Assistance

MEDICATION

- 0. No High Risk meds
- 1. Antihypertensives, Aperients / Laxatives
- 1. Antiparkinsonian, Benzodiazepines, sedation, analgesia
- 1. Psychotropics

MENTAL STATUS

- 0. Alert and Orientated
- 1. Periodic / Nocte confusion
- 1. History confusion
- 1. History falls

SENSORY STATUS


- 0. No sensory defects
- 1. Audio Visual Sensory Deficits

AGE RISK

0


Fluid Balance Chart

Bluebird automates the arithmetic making fluid balance easy and accurate to chart.

| Name | Dx / PMHx | Surgery | Tasks | Isolates | Devices | Alert | Feeding | Clinical | Drugs | Vitals | Beds | | | | | | | | | | | | | | |
|--|---------------------------------|--|----------|--------------------------------|---------|------------------|---------------|----------|------------|-------------------------------------|---|-------|----------------|-----------|----------|---------|----------|-------|-------------------|-------|-------------------|-------------|-------|---------------------|---|
|  Ricciardi, Amit 51 M 6412061039553 1007311542 06/12/1964 Arnulfo Nel <small>20/07/2016 12:17</small> | [A] Unstable angina | Other major/ IABP & Echo '28, Other major/ TEE, Sternotomy for CBG, Mitral Repair and Repair of Aneurysm '27 | [WL] [I] | [I] | [I] | [A] | | | [Abx] | P 73 BP 129/85 RR 17 Wt 75 | 24/06/2016 [27 25] Isolation Room 1 P P F T | | | | | | | | | | | | | | |
| Orders ProgressNotes Consults Rounds InOut Dialysis RiskAssessment Meds Given Care Given ClinDx AdverseEvents Notes | | | | | | | | | | | | | | | | | | | | | | | | | |
| Form View List View | << < 1 / 1 > >> 22/07/2016 | | | | | | | | | | | | | | | | | | | | | | | | |
| INPUT | | | | BALANCE FROM PREVIOUS DAY 0 ML | | | | | | OUTPUT | | | | | | | | | | | | | | | |
| | Enteral | Enteral Description | IV | IV Description | Meds | Meds Description | Total Enteral | Total IV | Total Meds | Total | Accumulative Intake | Urine | Urine Analysis | Vomitious | Aspirate | Dylasis | Bleeding | Stool | Stool Description | Drain | Drain Description | Total Drain | Total | Accumulative Output | |
| 7 - 8 a.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | 0 | 0 | 0 | |
| 8 - 9 a.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 9 - 10 a.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 10 - 11 a.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 11 - 12 noon | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 12 - 1 p.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 1 - 2 p.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 2 - 3 p.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 3 - 4 p.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 4 - 5 p.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 5 - 6 p.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 6 - 7 p.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 7 - 8 p.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 8 - 9 p.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 9 - 10 p.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 10 - 11 p.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 11 - 12 p.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 12 - 1 a.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 1 - 2 a.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 2 - 3 a.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 3 - 4 a.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |
| 4 - 5 a.m. | | | | | | | 0 | 0 | 0 | 0 | 0 | | | | | | | | | | | | 0 | 0 | 0 |

Dialysis

Dialysis documentation is made easy and digitalization facilitates data analysis.

| Name | Dx / PMHx | Surgery | Tasks | Isolates | Devices | Alert | Feeding | Clinical | Drugs | Vitals | Beds |
|--|------------------------|--|--------|------------|----------|----------------|------------|------------|------------|-------------------------------------|---|
|  Ricciardi, Amit 51 M 6412061039553 1007311542 06/12/1964 Arnulfo Nel <small>20/07/2016 12:17</small> | [A] Unstable angina | Other major/ IABP & Echo 28 , Other major/ TEE, Sternotomy for CBG, Mitral Repair and Repair of Aneurysm 27 <small>More</small> | [WL] | [I] LRI | | [A] | | | [Abx] | P 73 BP 129/85 RR 17 Wt 75 | 24/06/2016 [27 25] Isolation Room 1 P P F T |
| Orders | ProgressNotes | Consults | Rounds | InOut | Dialysis | RiskAssessment | Meds Given | Care Given | ClinDx | AdverseEvents | Notes |
| Form View | List View | | | << | < | 1 / 1 | > | >> | 22/07/2016 | | |

New Dialysis

Dialysis type:

Alarm Limits Set: Yes No Anticoagulant: UNIT

Blood Pump speed: Fluid removed: ML

Dialysate Flow rate:

Dialyser:

Techician's notes:

Signature: Frida Shows

Orders

Bluebird's ordering interface makes CPOE (Computer Physician Order Entry) simple.

The screenshot displays a patient's medical record interface. At the top, there are columns for Name, Dx / PMHx, Surgery, Tasks, Isolates, Devices, Alert, Feeding, Clinical, Drugs, Vitals, and Beds. The patient's name is Ricciardi, Amit 51 M, with ID numbers 6412061039553 and 1007311542, and a date of birth of 06/12/1964. The diagnosis is Unstable angina. The surgery history includes Other major/ IABP & Echo, major/ TEE, Sternotomy for CBG, Mitral Repair and Repair of Aneurysm. There are icons for WL (Warning) and LRI (Laboratory Result Incomplete). The Drugs column shows an Abx (Antibiotic) order. The Vitals column shows P 73, BP 129/85, RR 17, and Wt 75. The Beds column shows 24/06/2016 [27 25] and Isolation Room 1. Below the main record, there are tabs for Orders, ProgressNotes, Consults, Rounds, InOut, Dialysis, RiskAssessment, Meds Given, Care Given, ClinDx, AdverseEvents, and Notes. The Orders tab is selected, and within it, the Prescription sub-tab is active.

| Name | Dx / PMHx | Surgery | Tasks | Isolates | Devices | Alert | Feeding | Clinical | Drugs | Vitals | Beds |
|--|---------------------|--|--------|----------|---------|-------|---------|----------|---------|-------------------------------------|---|
| Ricciardi, Amit 51 M 6412061039553 1007311542 20/07/2016 12:17 06/12/1964 Arnulfo Nel | Unstable angina | Other major/ IABP & Echo - 28, Other major/ TEE, Sternotomy for CBG, Mitral Repair and Repair of Aneurysm 27 | WL | LRI | | A | | | Abx | P 73 BP 129/85 RR 17 Wt 75 | 24/06/2016 [27 25] Isolation Room 1 P P F T |

Orders ProgressNotes Consults Rounds InOut Dialysis RiskAssessment Meds Given Care Given ClinDx AdverseEvents Notes

Prescription Vitals Labs XR DNR Other All

Fast accurate prescribing helps minimize mistakes. The orders are sent to nurses “todo” list and Bluebird converts a physicians prescription to a precise product dose, eliminating the need for manual calculations.

The following 2 pages show examples of drug ordering and lab ordering (in this example, micro):

Add Antibiotic - Hamernik, William 54 M

Indication: Symptoms or Signs:

Category: Documented Allergies: None Recorded

Drug:

Administration Route:

Dose: mg Loading: mg

Frequency: hourly

Duration: days

Microbiology Ordered:

Ordered: dd/mm/yyyy hh:mm

Collection 25/11/2016 09:56

Profiles + Show

General Microbiology Cytology Histology

Clinical Urgent

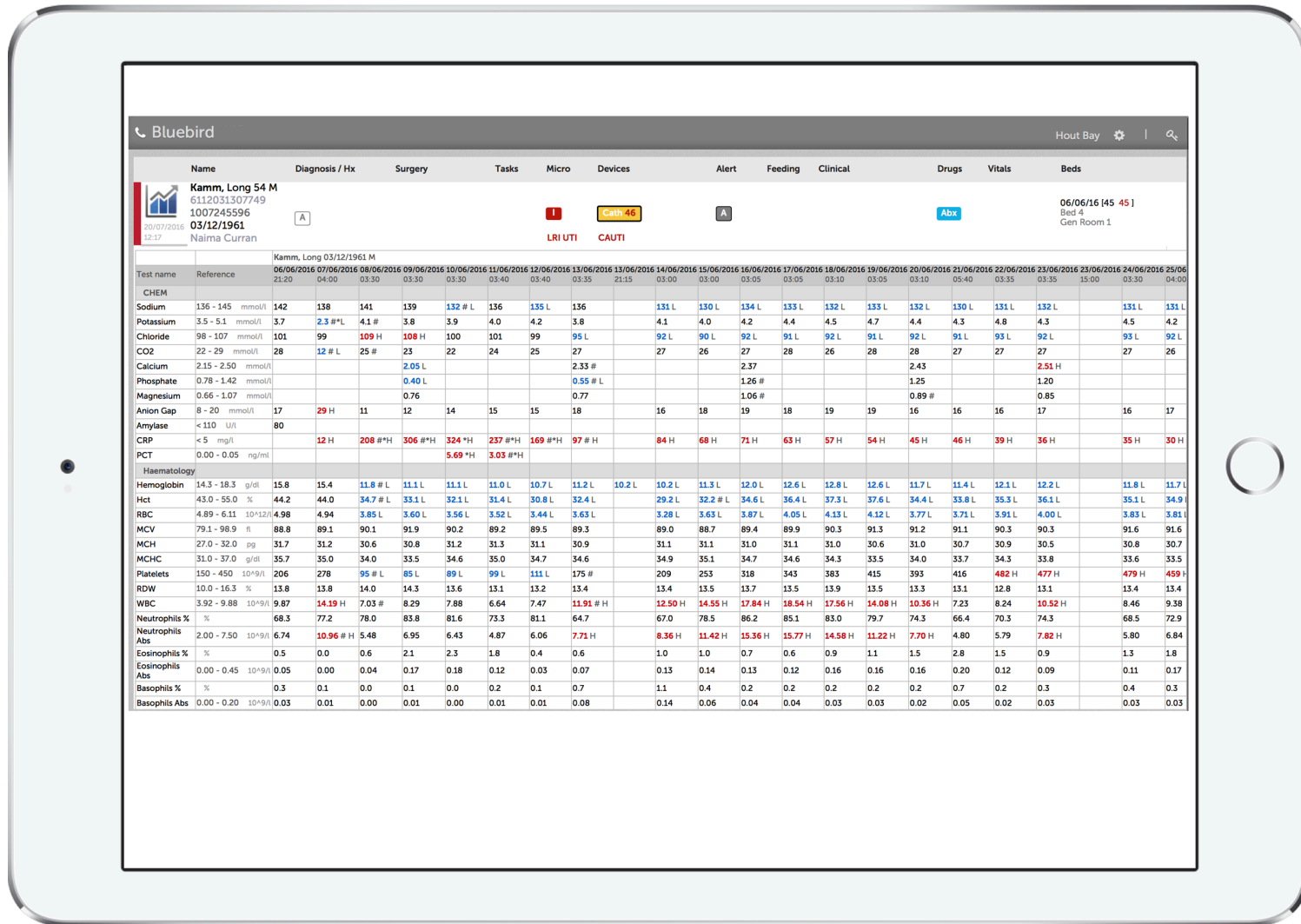
Clinical Info

Indication: UTI Symptoms or Signs: Yes No

Submit Cancel

iPad Enabled

Bluebird's EMR is mobile, facilitating care at the bedside.



Summary

For health facilities that do not require a new billing system, Bluebird's comprehensive EMR offers a practical alternative to high priced foreign EMRs not specifically designed for the South African market.

Bluebird has an enviable track record in South Africa and is backed by a Cape Town based development team that is flexible enough to help your hospital implement in house ideas that you know would be beneficial in your local environment.