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Computerized

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CPOE Part 1

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CPOE-ONC-X1:  
Inpatient with  
Recurring Outpatient  
Appointment

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Cerner General  
Overview and  
Structure Cerner  
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Intro to Ordering *Intro*  
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**MAR.MAW EHR**

*Chapter 1 Lecture:*

*Introduction to  
Electronic Health  
Records*

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~~Cerner DCPTools~~

~~PowerPlan Tool Intro~~

**Medications and IV**

**Fluids Care**

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## **Compass Basics of a writing a**

**PowerNote Epic:**

*Electronic Health*

*Records What is*

~~CPOE?~~ *What is*

~~CPOE?~~ ~~Cerner Part 1~~

~~Creating a Patient List~~

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second edition of the authoritative guide to CDS implementation has been substantially enhanced with expanded and updated guidance on using CDS interventions to improve care delivery and outcomes. This edition has been reorganized into parts that help readers set

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up (or refine) a successful CDS program in a hospital, health system or physician practice; and configure and launch specific CDS interventions. Two detailed case studies illustrate how a "real-life" CDS program and specific CDS interventions might evolve in a

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hypothetical  
community hospital  
and small physician  
practice. This updated  
edition includes  
enhanced  
worksheets--with  
sample data--that  
help readers to  
document and use  
information needed  
for their CDS program  
and interventions.  
Sections in each

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Chapter present  
considerations for  
health IT software  
suppliers to effectively  
support their CDS  
implementer clients.

ASHP's Informatics  
Pearls is a  
compilation of  
expanded versions of  
original sessions from  
the 2006 and 2007  
ASHP Midyear

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Clinical Meetings. The pearls presented will help identify how pharmacy informatics programs can be utilized in your hospital system to improve patient care. It will also compare various pharmacy informatics programs and how they improve the medication-use system. Expanded

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topics from the Informatics Pearls sessions include topics on: The transition from paper to online forms Barcode uses Training on a new health care system technology And much more.

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including examples  
from person-centered  
systems already in  
place in the US  
Editors have brought  
together contributors  
from varied health  
care sectors in the  
United States and  
elsewhere—public and  
private, not-for-profit  
and for-profit

"This book

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establishes a  
convergence in  
thinking between  
knowledge  
management and  
knowledge  
engineering  
healthcare application  
s"--Provided by  
publisher.

The world of  
healthcare is  
constantly evolving,

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ever increasing in complexity, costs, and stakeholders, and presenting huge challenges to policy making, decision making and system design. In Design for Care, we'll show how service and information designers can work with practice professionals and patients/advocates to

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make a positive  
difference in  
healthcare.

This books provides content that arms clinicians with the core knowledge and competencies necessary to be effective informatics leaders in health care organizations. The content is drawn from

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the areas recognized by the American Council on Graduate Medical Education (ACGME) as necessary to prepare physicians to become Board Certified in Clinical Informatics. Clinical informaticians transform health care by analyzing, designing, selecting, implementing,

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Managing, and  
evaluating information  
and communication  
technologies (ICT)  
that enhance  
individual and  
population health  
outcomes, improve  
patient care  
processes, and  
strengthen the  
clinician-patient  
relationship. As the  
specialty grows, the

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Content in this book covers areas useful to nurses, pharmacists, and information science graduate students in clinical/health informatics programs. These core competencies for clinical informatics are needed by all those who lead and manage ICT in health

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organizations, and there are likely to be future professional certifications that require the content in this text.?

The New York Times  
Science Bestseller  
from Robert Wachter,  
Modern Healthcare's  
#1 Most Influential  
Physician-Executive  
in the US While

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modern medicine produces miracles, it also delivers care that is too often unsafe, unreliable, unsatisfying, and impossibly expensive. For the past few decades, technology has been touted as the cure for all of healthcare's ills. But medicine stubbornly resisted



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computerization – until now. Over the past five years, thanks largely to billions of dollars in federal incentives, healthcare has finally gone digital. Yet once clinicians started using computers to actually deliver care, it dawned on them that something was deeply wrong. Why were

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doctors no longer making eye contact with their patients? How could one of America's leading hospitals give a teenager a 39-fold overdose of a common antibiotic, despite a state-of-the-art computerized prescribing system? How could a recruiting ad for physicians tout

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the absence of an electronic medical record as a major selling point?

Logically enough, we've pinned the problems on clunky software, flawed implementations, absurd regulations, and bad karma. It was all of those things, but it was also something far more complicated.

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And far more interesting . . . Written with a rare combination of compelling stories and hard-hitting analysis by one of the nation's most thoughtful physicians, *The Digital Doctor* examines healthcare at the dawn of its computer age. It tackles the hard

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questions, from how technology is changing care at the bedside to whether government intervention has been useful or destructive. And it does so with clarity, insight, humor, and compassion. Ultimately, it is a hopeful story. "We need to recognize that computers in

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Healthcare don't simply replace my doctor's scrawl with Helvetica 12," writes the author Dr. Robert Wachter. "Instead, they transform the work, the people who do it, and their relationships with each other and with patients. . . . Sure, we should have thought of this sooner. But it's

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not too late to get it right." This riveting book offers the prescription for getting it right, making it essential reading for everyone – patient and provider alike – who cares about our healthcare system.

- Practical in its scope and coverage, the authors have provided

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a tool-kit for the  
medical professional  
in the often complex  
field of medical  
informatics - All  
editors are from the  
Geisinger Health  
System, which has  
one of the largest  
Electron Health  
systemes in the USA,  
and is high in the list  
of the AMIA "100  
Most Wire" healthcare



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systems - Describes  
the latest successes  
and pitfalls

In a joint effort  
between the National  
Academy of  
Engineering and the  
Institute of Medicine,  
this books attempts to  
bridge the  
knowledge/awareness  
divide separating  
health care

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professionals from  
their potential  
partners in systems  
engineering and  
related disciplines.

The goal of this  
partnership is to  
transform the U.S.  
health care sector  
from an  
underperforming  
conglomerate of  
independent entities  
(individual

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practitioners, small group practices, clinics, hospitals, pharmacies, community health centers et. al.) into a high performance "system" in which every participating unit recognizes its dependence and influence on every other unit. By providing both a

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framework and action plan for a systems approach to health care delivery based on a partnership between engineers and health care professionals, Building a Better Delivery System describes opportunities and challenges to harness the power of systems-

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Training tools,  
information  
technologies and  
complementary  
knowledge in social  
sciences, cognitive  
sciences and  
business/management  
to advance the U.S.  
health care system.

IOM's 1999 landmark  
study *To Err is  
Human* estimated that

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between 44,000 and 98,000 lives are lost every year due to medical errors. This call to action has led to a number of efforts to reduce errors and provide safe and effective health care. Information technology (IT) has been identified as a way to enhance the safety and

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effectiveness of care. In an effort to catalyze its implementation, the U.S. government has invested billions of dollars toward the development and meaningful use of effective health IT. Designed and properly applied, health IT can be a positive transformative force

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for delivering safe health care, particularly with computerized prescribing and medication safety.

However, if it is designed and applied inappropriately, health IT can add an additional layer of complexity to the already complex delivery of health



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care. Poorly designed IT can introduce risks that may lead to unsafe conditions, serious injury, or even death. Poor human-computer interactions could result in wrong dosing decisions and wrong diagnoses. Safe implementation of health IT is a complex, dynamic process that requires

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a shared responsibility between vendors and health care organizations. Health IT and Patient Safety makes recommendations for developing a framework for patient safety and health IT. This book focuses on finding ways to mitigate the risks of health IT-assisted

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care and identifies areas of concern so that the nation is in a better position to realize the potential benefits of health IT. Health IT and Patient Safety is both comprehensive and specific in terms of recommended options and opportunities for public and private interventions that may

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improve the safety of care that incorporates the use of health IT.

This book will be of interest to the health IT industry, the federal government, healthcare providers and other users of health IT, and patient advocacy groups.

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