



SCC-LIS_TIP OF THE WEEK

MODULE: SoftLab/SoftMic	SOFTWARE VERSION: 4.0.8
TOPIC: Newborn-Mother Test Ordering Restrictions	ISSUE DATE: 23OCT2017
DISTRIBUTION: End Users_All	PAGE: 1 of 1
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TOPIC/QUESTION:

I'm trying to order a baby CORD testing under the mother's LIS demographics but the LIS won't let me. What do I do?

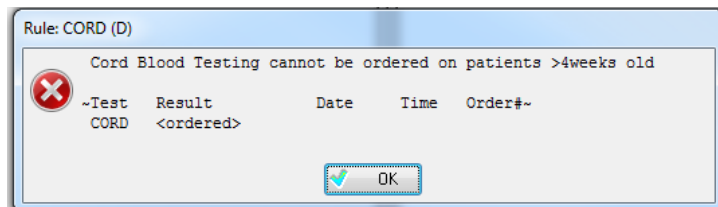
ANSWER/TIP:

There are RBS rules in place that restrict the ordering of Cord sample testing on patient's >4 weeks old. This is to prevent the ordering of cord blood testing under the mother's information since the sample isn't coming from the mother. If the baby is not yet entered into Medipatient but the testing is needed ASAP, create a NEW Patient in the LIS from the Order Entry Screen. Follow the NWT Data Process and Standards Cheat Sheet for naming processes for the unregistered newborn. The LIS Administrators will merge the NEW patient record to the correct Medipatient record once the baby is registered in Medipatient.

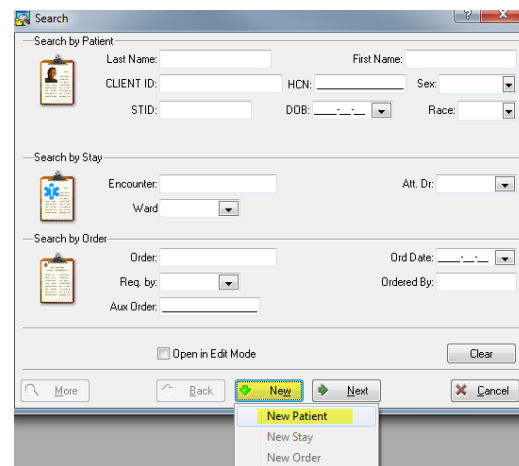
NOTE: electronic transmission of results will NOT occur until the LIS merge the clients with a proper Medipatient stay/client.

EXAMPLE:

Example of the RBS rule firing



Order Entry: NEW → New Patient





DATA PROCESS AND STANDARDS CHEAT SHEET

PATIENT SEARCH

Conducting a thorough and exhaustive Patient Search is the first step in ensuring that a patient is uniquely identified. Search by:

- Last Name
- First Name
- Health Care Number
- Date of Birth

A search is considered exhaustive when:

- All available demographic data for a patient has been entered into the search screen.
- At least 2 searches have been attempted for the patient, and in neither circumstance do the records return a matching patient. In subsequent searches, variations of the patient's name and date of birth have been entered (ie: **William** or **Bill** or **d/m/y**).
- Staff has confirmed that the patient's demographic information matches government issued identification.

IDENTIFY PATIENT

Legal Name

Patient's Last Name/First Name:

- If name is *known*, enter it in both *first* and *last* name fields, ensure spelling is correct.
- If name is *unknown*, enter **Unknown** + **System's Unique Identifier** in both *first* and *last* name fields.

Unnamed Newborn (When newborn's legal names are not yet available):

- For *first* name enter: **NBF, NBM** or **NBU**
- For *last* name enter: **Mother's surname, Father's surname, or a combination of Mother and Father's surname**

Unnamed Newborn Multiple Births:

Newborn Twins:

- For *first* name enter: **Twln A, Twln B**
- For *last* name enter: **Mother's surname, Father's surname, or a combination of Mother and Father's surname**

Newborn Triplets:

- For *first* name enter: **Triplet A, Triplet B, Triplet C**
- For *last* name enter: **Mother's surname, Father's surname, or a combination of Mother and Father's surname**

Date of Birth

- If the date of birth is *unknown*, or only part of the date of birth is *known*, enter: **01 Jan 1800**

Gender

- For *male* enter: **M**
- For *female* enter: **F**
- For *unknown* enter: **U**

Identifiers

- Patients can be identified with: System's Unique Identifier and/or Health Care Number
- Health Care Numbers should be verified upon each visit

- More Information on Other Side -

COLLECTION AND VALIDATION OF KEY DATA ELEMENTS

Patient information will change. Before making changes, be sure that the new information is entered accurately. Do not use slang, abbreviated names, or nicknames when entering individual's name.

Address

Three address types are available:

- Current Mailing Address
- Unknown
- Indigent

Current Mailing Address:

- The *only* special characters accepted by the System are: - (dash) and . (period)
- When entering a Post Office Box use Box plus number, ie: **Box 123**
- Use dash between apartment and street number, ie: **302-5203 52 St.**
- Use abbreviations for street, road, crescent, etc, ie: **St., Rd., or Cres.**
- Postal Codes *must* be included.

Unknown Address:

- Address line 1, enter: **Unknown**
- Address line 2: **leave blank**
- City: **enter the city/town where treatment occurs**
- Country: **leave blank**
- Postal Code: **leave blank** if system allows, or enter: **T1T 1T1**

Indigent (Homeless, Transient):

- Address line 1, enter: **NFA** (No fixed address)
- Address line 2: **leave blank**
- City: **enter the city/town where treatment occurs**
- Country: **leave blank**
- Postal Code: **leave blank** if system allows, or enter: **T1T 1T1**

Patient's Emergency Contact Information

- Please enter Full Name of contact person
- Contact Number

Telephone Numbers

- For Main, Work, or Alternate numbers use *this* format: **111 111-1111**

SYSTEM CONTACT INFORMATION

Health & Social Services (HQ)
Data Integrity Coordinator - **873-7429**

Hay River Health & Social Services Authority
Client Records Supervisor - **874-T125**

Fort Smith Health & Social Services Authority
Pitance Supervisor - **872-6272**

Beaufort Delta Health & Social Services Authority
Supervisor Clinics - **777-8041**

Stanton Territorial Health Authority
Registration Supervisor - **669-4156**

Yellowknife Health & Social Services Authority
EMR Implementation & Support Officer - **929-8800**

Revised July 2009