Physicians' Corner



Effective June 8, 2021 HOUDINI Protocol

Valley Presbyterian Hospital implemented the HOUDINI protocol to decrease hospitalacquired infections. *Cont. on Page 5...*

Effective May 1, 2021 After-hours Add-On Surgical Cases

To improve communication and coordination of after-hours addon surgical cases. *Cont. on Page 8...* Effective July 20, 2021 Imaging Appropriate Use Criteria (AUC)

All Medicare Part B advanced imaging services (i.e. CT, MRI, PET) and nuclear medicine services should consult appropriate use criteria (AUC). *Cont. on Page 9...*





Contact the Help Desk!

(818) 902-3924 or ext. 3924

VPH.Helpdesk2@valleypres.org

Meditech Tips/Tricks Link

Meditech Tips/Tricks documents available by clicking on the globe located in the bottom right corner of any Meditech page.

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VALLEY PRESBYTERIAN HOSPITAL Excellence in all we do

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HOUDINI PROTOCOL

Effective June 8th, 2021 Valley Presbyterian Hospital implemented the HOUDINI protocol to decrease hospitalacquired infections. The ordering of Urinary Catheters is now consolidated into one order: **Insert/Manage Urinary Catheter** to streamline ordering and reporting. This protocol, and its accompanying policy, will authorize nurses to evaluate clinical criteria each shift and remove an indwelling urinary catheter if no HOUDINI criteria is present.

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	Insert/Manage Urinary Catheter	NURSING
<	End of List>	

	Order
	Insert/Manage Urinary Catheter (NUR)
Date	Time Direction
1 5/21/21	1500 09,21
3	Order defaults to "Y". This will
4	allow the protocol. However,
	providers may change to N
	should the protocol not apply to
* Nurses may remove catheter based on HOUDINI Protocol	patient.
* Urinary Catheter Type and Location Indwelling Urinary Cath	¥
Consider using external catheters	the state by MEDITECH
without urinary retention or bladder outlet obstruction	Urinary Catheter Type and Location
Intermittent catheterization is preferable to indwelling	
uretheral or suprapubic catheters in patients with bladder	
* Reason for Indwelling Catheter Urinary Retention	10 (Indwelling Urinary Cath)
Alternative to Indwelling Urinary Catheter	30 (Alternative to Indwelling)
Comment:	
	Alternative to Indwelling Urinary Catheter
1 (Condo	om Cath)
2 (Exter 3 (Quick	Change Wrap)
4 (Stepie	ht Cath)

- Urinary Catheter orders will be consolidated into one order with dropdown options to select catheter type and reason
- Catheter type options for HOUDINI are: Indwelling Catheter and Suprapubic Catheter
- External Catheters will also be ordered via this order. Providers should first order Alternative and then the type

HOUDINI has been shown to improve safety and quality of patient care while decreasing costs and increasing reimbursement.

New Impella Critical Care Order Set

What is it? The Impella Ventricular Support Systems are left-side heart pump systems intended to help pump blood in patients who need short-term support (up to 6 days). The system includes a mini heart pump (Impella 2.5, Impella CP, or Impella 5.0/LD) mounted at the end of a thin, flexible tube (catheter), a console that drives the pump, and an infusion system that flushes the pump.

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1	I: Head Of Bed Elevated (NUR) Today Now .Impella Device placed	Edit
1	I: Vital Signs (NUR) Today Now .Impella Device placed	Edit
	I: Notify MD (NUR) Today Now .Impella Device placed	Edit
~	Insert/Manage Urinary Catheter (NUR) Today Now 09,21	Edit
1	I: Intake and Output (NUR) Today Now .Impella Device placed	Edit
1	I:Change Dressing (NUR) Today Now .Impella Device placed	Edit
1	I: Weigh Patient (NUR) Today Now .Daily (Impella Device)	Edit
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-	Troponin-I (LAB) Today Now - DAILY - COUNT 10	Edit
1	Basic Metabolic Panel (LAB) Today Now - DAILY - COUNT 10	Edit
1	Magnesium (LAB) Today Now - DAILY - COUNT 10	Edit
1	BRAIN NATURIETIC PEPTIDE,PRO (LAB) Today Now - DAILY - COUNT 10	Edit
Ima	ging: Diagnostic studies to be completed upon Admission	
1	CA Echocardiogram w/Doppler (EKG) - STAT Today Now	*Edit*
Ima	iging: Diagnostic studies to be completed DAILY while on Impella S	Support
	XR Cnest 1 View (RAD) Today Now - DAILY - COUNT 10 Exam Reason: Line placement position	Edit

New Insulin Ambulatory Set

The Insulin Discharge Order Set has been added to Meditech Live. This order set, found in the discharge desktop "Med" section, will help facilitate ordering for providers.

Sets Name Search I Standard Order Sets I + Convenient DME List I - INSULIN Medications NS I Pen Needle, Diabetic (Insulin Pen Needle) 1 EACH - DIS. # 100 EACH MC AS NEED <prn> <reason> <rf> Syrge-Ndl,Ins 0.3 ml Half Mark (Insulin Syringe) 1 EACH - DISP # 100 EACH MC AS NEED <prn> <reason> <rf> I Insulin Glargine* (Lantus*) 100 UNIT/ML - SOLN 1 UNIT SC DAILY <prn> <reason> <days> #1 VIAL <rf> I INIT SUBQ BID <prn> <reason> <days> #1 VIAL <rf> I Insulin Aspart* (Novolog Insulin Pen*) 100 UNIT/ML - SOLN</rf></days></reason></prn></rf></days></reason></prn></rf></reason></prn></rf></reason></prn>
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New Isolation Type Selections

Airborne + Contact + Eye (AGP) Enhanced Contact (C. Auris)

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After-Hours Add-On Surgical Cases

As of May 1, 2021, Valley Presbyterian Hospital implemented a new electronic process for after-hours add-on surgical cases for Surgery and GI.

With this change, surgeons can now enter an order in Meditech for after-hours add-on surgical cases. These are cases planned for the following day. This will eliminate the need to call the Operations Supervisor for these add-on cases and limit the calls to emergent ones for immediate need.

Once the order is entered in Meditech, it will populate on the Add-On Surgical Cases Daily Log for the surgical team to review the following day and they will contact the surgeon to discuss availability.

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+ Nursing (1)						
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Imaging Appropriate Use Criteria (AUC) VPH Go live: 07/20/21

The Protecting Access to Medicare Act (PAMA) of 2014 established a new program to increase the rate of appropriate advanced imaging services. Effective 2022, all Medicare Part B advanced imaging services (i.e. CT, MRI, PET) and nuclear medicine services should consult appropriate use criteria (AUC) through a qualified clinical decision support mechanism. The purpose of the AUC program is to enable providers to order the most appropriate test. The Centers for Medicare and Medicaid Services (CMS) may also monitor such orders.

Place an image procedure as you normally would by utilizing the search bar or ordering within an order set. Click **OK** once the reason for exam has been completed.

		0 Selected	Orders			
By Procedure						
No.	Current Order	Pri	Date	Time Status	Stop/Renew My Link	
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If the wording of the Reason for Exam triggers an appropriate use check, the following window will display:

Imaging Appropriate Use Criteria	×
Imaging Appropriate Use Criteria check in progress	
Relaunch Refresh Proceed without AUC Cancel Order	

The AUC check will open in a Windows browser. Select the clinical indication to display the appropriate use score and appropriateness of alternative orders. Select an order to return to CPOE in Meditech. (Tip: Expand browser for better viewing.)

Waters, Doris	75 Female	02/12/1942	U#: MA00058759	
Location:	D Ordering Pr	rovider: John Cameron		
	Decis	tion Support for	IA CT head/brain wo con	
	Decis	son Support for	IA CT field/ brain wo con	
Please select	a reason for exam			
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🗆 Max	face trauma, penetratin	g (S09.93XA)	8	Confirm Cancel Orde
🖯 Hea	d trauma, visual loss (S	09.90XA)	Cost: \$\$ RRL	222
✓ Hea	d trauma, <mark>h</mark> eadache (80	9.90XA)	IA MR head w con	
🗉 Hea	d trauma, ataxia (809.90	DXA)	7	Replace
🗉 Hea	dache, post trauma (64-	4.309)	TA MR head wo con	
🗏 Max	face trauma blunt (509.	93XA)	Z	Replac
Mer	tal status change (after	trauma) (R41.82)	Cost: \$\$\$	
U Cert	ain early complications	of trauma, NEC (179)	IA MR head/brain w con	
Hea	d trauma, CSF leak susp	ected (S09.90XA)	7	Replac
Hea	d trauma, intracranial ai ted (S09,90XA)	rterial injury	TA MD hand (henin we see	
- Hea	d trauma, penetrating, a	abn neuro exam (S09.8XXA)	7	Berdar
🗉 Hea	d trauma, intracranial w	enous injury	Cost: \$\$\$	
suspec	ted (509.90XA)		IA MR head/brain wo/w con	
🗏 Hea	d trauma, no neuro decl	ine, f/u imaging (509.90XA	7	Replac
and the second se		and the second	Cost: 6666	

1-9 scale for scoring:

- 1-3 Not Appropriate
- 4-6 May or may not be appropriate
- 7-9 Appropriate

An appropriate score is indicated by a green background color.

Select the order to process and close window when prompted to return to CPOE in Meditech. For orders with scores 1-3, select an acknowledgement reason or add free text to continue processing the order.

Please confirm the exam IA CT head/brain w	below: con (score: 2)	3
Please choose an ackn	owledgement reason before proceeding:	
	Consultad with Radiology	
	Comment:	
	Consulted with Other Specialist	
	Previous imaging result was equivocal or non-diagnostic	
	Disagree with appropriateness score	
	Contraindication to modality	

Orders may also be canceled at any time during the appropriate clinical indication routine.

	0	Iniun/trauma_maxillofacial \$4			
ITaulitia	4	injury/u auna, maxiloracian			
Indica	tion Search Results	Appropriaten	ess rankings for a 75 year old Female		
🖉 Injury/trauma, max	illofacial (509.93XA)		Display Evidenc		
Maxface trauma, per	netrating (509.93XA)	IA CT head/brain	w con		
🗉 Head trauma, visual	loss (509.90XA)	2	Confirm Cancel Ord		
🔍 Head trauma, heada	che (S09.90XA)	Cost: \$\$	RRL: COCC		
🔍 Head trauma, ataxia	(509.90XA)	IA CI head/brain	IA CT head/brain wo con		
Headache, post trau	ma (644.309)	Cost: \$\$	RRL:		
Headache, post trau	ma (644.309)	Cost: \$\$	RRL: ****		
Headache, post trau Maxface trauma blue Maxface trauma blue Please select a reason for ex	ma (644.309) at (600.0374) Decision Suppor	Cost: \$\$	RRL: ****		
Headache, post trau Maxface trauma blue Please select a reason for ex Trauma	ma (G44309) Decision Suppor tam	Cost: \$\$ t for IA CT head/brai	RRL: *****		

Diet Order Changes/Additions

Renal Pre-Dialysis diet orders are renamed to **Renal No-Dialysis.** These diets are intended for renal patients who are not scheduled for dialysis.

Search renal no dial					
0 Selected Items.					
Order	Category 🗣 📿 Clear				
DIET (Renal No Dialysis Cardiac)	DIETARY				
DIET (Renal No Dialysis Cons Carb 4)	DIETARY				
DIET (Renal No Dialysis Cons Carb 5)	DIETARY				
DIET (Renal No Dialysis Low Protein)	DIETARY				

Renal Diet has been removed—Renal No-Dialysis and Renal Dialysis specify protein allowances that will better meet the needs of these populations.

The following diets were not regularly used and have been eliminated to better streamline the diet ordering process:

- Very Low Fat
- ED Carbohydrate Controlled
- Pediatric Consistent Carb

Additionally, a new diet order has been added:

 Oral Grat Diet—this diet order is for patients who are on a tube feeding and would also benefit from receiving a certain amount of PO food. This diet does not typically provide 3 full meals per day. With this new diet, the patients can have tube feeding as their primary source of nutrition and they are also able to have trays of food ordered.

	Search oral di					
	0 Selected Items.					
	Order	Category 🗣 📿 Clear				
Į	DIET (Oral GRAT Tube Feeding)	DIETARY				

Locating Daily Weight in Meditech

Laborations A	DPIAT-Damier Modnity Assessment 1001
Laboratory	VTE Risk Factor Management
Microbiology 🔘	Safety Precautions
Blood Bank	Isolation Precaution
biood barik	Change of Shift Review
Pathology 👲	Daily Weight Right Click
	Tracheostomy Assessment
Imaging 🖉	Critical Results Notification
Other Reports 🧧	Diet Feeding Intervention
· · · · · · · · · · · · · · · · · · ·	RT Additional Interventions
Care Trends 🛛 📩 🛣	Cardiac Rhythm Assessment EKG
Care Activity	SS Case Mgmt Database and Discharge Plan
History 🔎 🚈	
Summary 🕞	Display Reset Earlier Later Gr

Change in Level of Patient Care: Order for Hospice Care

1) Place a Change in Level of Care order in Meditech.

Search change in le 1 Sel	ected Items.
Order	Category 🕈 Clear)
Change in Level of Care	ADMITTING DEPT
<end list="" of=""></end>	

	Change in Level of Care (ADM)
	Order Change in Level of Care (ADM)
* Priority R Quantity 6 * Date 6 Time 1	✓ Series? Directions ✓ 503 Stop Date Stop Time ✓ Count ✓
* Location: Message to Admitting	ICU Hospice Care

2) Contact Operations Supervisor to initiate Hospice care. (818) 902-5251 or ext. 5251

Restraint Orders

Restraint orders must be renewed within 24 hours of last placement or renewal. Only one restraint order should be placed as an initial order, and all others should follow as renewals.

Please refer to instructions below:

Select the current "Active" restraint order to highlight it green.

er	Sets						
(I	No. Current Order	Pri	Date	Time	Status	Stop/Renew	My Link
E	Medications (7)						
E	Laboratory (9)						
E	Microbiology (2)						
E	Dietary (1)						
E	DO NOT EDIT (3)						
E	Nursing (31)						
E	Physical Ther (2)						
E	ISOLATION ORDER (1)						
E	Renewable Order (2)						
С	58 Soft Limb (RESTRAINT)	R	10/30/20	1342	Active	10/31/20	*
U	• Other (2)						
	Orders Meds Sets		C	Transfer	Notificat	ions) Assoc D	ata)

On the bottom of the page, click "Renew" to renew the restraint order or "Stop" to stop the order within 24 hours of last placement or renewal.



To confirm renewal of the restraint order, status will display "Renew". Complete order renewal by clicking "Save" at the bottom right of order screen and enter 4-digit PIN to finalize.

No	o. Current Order	Pri	Date	Time	Status	Stop/Renew	My Link
+	Medications (7)						
+	Laboratory (9)						
+	Microbiology (2)						
+	Dietary (1)						
+	DO NOT EDIT (3)						
+	Nursing (31)						
+	Physical Ther (2)						
+	ISOLATION ORDER (1)						
Ξ	Renewable Order (2)						
5	58 Soft Limb (RESTRAINT)	R	10/30/20	1342	Renew	10/31/20	*
+	+ Other (2)						
	Orders Meds Sets Transfer Notifications Assoc Data						

Tips:

Utilize the status board and select the "Restraint" header to group patients who may be in restraints at the top of the status board.

New Results	Visit Reason	Restraint	Isolation	
COVID-19 Res	Problems	Sepsis	Admit Status	
New Results	UTI SEPSIS	Yes	Contact	
Encephalopathy chronic		No Definite Risk	Admitted Inpa	
New Results	SHUNT MALFUNCTION	Yes	Standard/Univ	

Utilize the Desktop to view all upcoming renewable restraint orders.

	Date	Time 🔻		Patient Name		Desktop	9 PR
-	Renewal R	equests (8)	*6 New			Status Board	Ŷ
*	10/6/20	0000			Renewable Orders	Emorgonov	1
	5/13/19	1445			Renewable Orders	Emergency	-
*	8/17/17	0921			Renewable Orders	Oncology	

Anesthesia/OB Transfer Routine

Anesthesia:

When patient in Labor and Delivery, order "ANES OR/ OB Recovery" Order Set per usual routine.

Once ANES OR/ OB recovery Order Set has been finalized, signed, and saved, select "Transfer".

Orde E	avorites Category Name	Transfer (Notifications) Assoc Data Cont rron Amb Oncology
	0 Select	ed Items.
Standard Or	der Sets	🛨 PED-Surgical
NICU-General		Adult-Surgical
PICU-Gener	al	ANES ICU PostOp Recovery Order

Next, select on "Add Sets"



Select "ANES OB Post Neuraxial" order set.

Orders Meds Sets Favorites Category Name	Cont from Amb Oncology
Search	
1 Selecte	ed Items.
🗄 Standard Order Sets	🛨 PED-Surgical
🛨 NICU-General	Adult-Surgical
🛨 PICU-General	ANES ICU PostOp Recovery Order
🛨 PED-General	ANES Malignant Hyperthermia
🛨 ICU-General	ANES OB Post Neuraxial
🛨 CATHLAB-General	ANES OB Pre-Cesarean Section
🛨 GILAB-General	ANES OR / OB PCA orders
🛨 ED-General	ANES OR / OB Recovery
	ANES OR Neuraxial/Nerve Block

Continue with ordering and select "OK" when done.

6	
Ar	nesth OB Post Neuraxial:
	During epidural administration and post-infusion time frames, follow only Anesthesia orders for pain,sleep,nausea and itching. Do not follow any other pain or comfort orders during the post-injection time frame. Post Injection Time Frames. Morphine (Duramorph) = 24 hours Fentany (Sublimaze) = 5 hours Marcaine and Fentany! = 8 hours
Tr	ansfer To:
	I: Transfer to PACU Post Op (NUR) Today Now .Post Op PACU Edit
A	tivity:
	I: Bedrest (NUR) Today Now .Post Neuraxial Edit
N	ursing:
	I: Monitor Pulse Oximetry (NUR)

Once, "OK" is selected, the provider will be guided back to the transfer routine. Always select "OK" and never "Process Transfer".



Transfer patient to Postpartum and "Save". These orders will then be processed when the patient arrives to the Postpartum unit.

	Order		
	Transfer to		
* Priority Quantity * Date Time	R 12/8/20 0916	Series? Directions Stop Date Stop Time Count	<u> </u>
Undate -Transf * Transfer to: All Transfer Or	erring Location section below as appropriate Postpartum dens Reconciled (res	<u> </u>	

OB/Laborist:

To prevent the inadvertent discontinuation of anesthesia orders and improve OB workflow, Anesthesia will be processing Anesthesia OR and OB recovery orders when patients are in Labor and Delivery. They will then put in Postpartum Orders that will be queued until patient arrives to postpartum. These orders will not require OB reconciliation if OB providers click on "Continue to POM" and not "Manage Transfer".



Please note that you may see this pop up on some patients:

E-Rx of Non-Controlled Substances Go Live 7/27/21

To improve patient experience, non-controlled substances will be transmitted to the pharmacy as soon as a provider signs and electronically prescribes a prescription. Previously, controlled substances were automatically sent to the pharmacy, where non-controlled substances were queued and sent once the discharge desktop was finalized. Starting July 27th, providers can simultaneously transmit both controlled and non-controlled prescriptions.

E-x of Controlled Substances

Providers can now seamlessly send electronic prescriptions for controlled substances and access CURES data through the EMR at discharge.



If interested, please go to your app or play store and download the application 'VIP Access.'

Once downloaded, please contact the HelpDesk to register for E-Rx of controlled substances.

Federal EPCS Requirement

As of January 1, 2022, the SUPPORT Act requires all controlled substance prescriptions under Medicare's Part D drug plan to be transmitted electronically. While the Centers for Medicare & Medicaid Services (CMS) is considering a delay to this mandate, providers should take steps now to comply with the new requirement.

State EPCS Requirements

California	
PDMP	EPCS
Mandatory Pr <mark>escriber Review:</mark> Yes Integration Available: Yes State Website: CURES State License Subsidy Available: N/A	Mandatory Requirement: Future Requirement Enforcement Date: January 1, 2022

.11 🗢 🚺

Care Team

Yesterday

Jun 13

Jun 13

Δ



HIPAA Compliant, Improved Patient Safety, Available for ALL Providers and Care Team Members

VPH's HIPAA compliant communication application, **Telmediq**, now offers notifications of critical patient lab values. To receive alerts, providers must add themselves to the patient's care team.

Instructions for adding self to care team:



WIFI For iPhone Users

1. Launch your iPhone Settings



2. Click on Wifi.

÷	Airplane Mode		O)
?	Wi-Fi			>
8	Bluetooth		On	>
1	Cellular			
0	Personal Hotspot		Off	

3. Select VPH2

vph_public	• 🕕
VPH_SECURED	• 🕈 🕕
VPH_SVOICE	• 🕈 🕕
VPHI	• 🕈 🕕
VPH2	≜ ≑ (i)
Other	

4. Enter your computer credentials



5. Click Trust for the Certificate.



*DISCLAIMER: IF YOU HAD PREVIOUS WIRELESS CONNECTIVITY ON YOUR CURRENT PHONE, YOU MAY EXPERIENCE WIRELESS CONNECTIVITY ISSUES UNTIL WE DISCONTINUE THE OLD ENVIRONMENT. TO PREVENT THIS, PLEASE DISCONNECT AND FORGET ALL PREVIOUS VPH CONNECTIONS.

WIFI

For Android Users

*Setting may look different for different Android Phones *

1. Launch your Android Settings



2. Click on Wifi.



3. Select VPH2

	On 🍅
*	vgih, igni, fighe Commenter
	uner.
•	VPH2
•	sgR_device
•	vgit, igel

4. Login with the following information:

EAP method : **PEAP** Phase 2 Authentication : **MSCHAPV2** CA Certificate : **Do not validate** Identity : **DR####** Password : **Your computer password**

EAP method		
PEAP		*
Phase 2 authentication		
MSCHAPV2		*
CA certificate		
Do not validate		*
No certificate specified. Your connection will	not be priv	ote.
Identity		
21 cm		
Anonymous identity		
Anonymous identity		
Anonymous identity Password		
Anonymous identity Password		
Anonymous identity Password		
Anonymous identity Password Show password		
Anonymous identity Password Show password Advanced options		~
Anonymous identity Password Show password Advanced options		~

*DISCLAIMER: IF YOU HAD PREVIOUS WIRELESS CONNECTIVITY ON YOUR CURRENT PHONE, YOU MAY EXPERIENCE WIRELESS CONNECTIVITY ISSUES UNTIL WE DISCONTINUE THE OLD ENVIRONMENT. TO PREVENT THIS, PLEASE DISCONNECT AND FORGET ALL PREVIOUS VPH CONNECTIONS.

Remotely Accessing VPH portal for EMR

To access the EMR from your personal computer:

- 1. Go to <u>www.valleypres.org</u>
- 2. Scroll down and click on 'Physician Portal'



3. Select 'Click here' to download the new version of Horizon View Client



4. Select the 'Go to Downloads' link for Windows PC (1) or Mac (2).

~	VMware Horizon Client for Windows		
	VMware Horizon Client for Windows	2020-10-15	GO TO DOWNLOADS
~	VMware Horizon Client for Windows 10 UWP		
	VMware Horizon Client for Windows 10 UWP from the Microsoft store	2019-09-17	GO TO DOWNLOADS
~	VMware Horizon Client for Mac		
	VMware Horizon Client for macOS	2020-10-15	2 GO TO DOWNLOADS

5. Click the Download button and follow the prompts to complete the installation.

File	Information
VMware Horizon Client for Windows File size: 230.4 MB File type: exe	DOWNLOAD NOW
Read More	

- 6. When you are prompted to add the server name, enter: portal.valleypres.org
- 7. Enter your log-in information (DR number and password you currently use to log in onsite), doubleclick on VPH VDI and you will be connected to the Physician Portal.

Remotely Accessing VPH portal for EMR

To access the EMR from your cellphone/tablet:



1. Go to your app or play store and download 'VMware Horizon Client'

_	
VMware Horizon	
Server Address	
Description (optional)	
Connect	

2. Once the app is launched, it will ask for a 'Server Address'. Please enter portal.valleypres.org for the server address. The description can be left blank. Once complete, click 'Connect'.

VMware H	lorizon
https://portal.va	lleypres.org (!)
Username	
Password	
Domain	VPHIT

3. Enter your credentials to log-in.

Your Username is your DR# and your password is the password you use to login to the computers at VPH. The Domain will auto default.

4. Double click on the VPH VDI icon to launch into the Virtual Desktop Environment.

Provider Tips & Tricks Documents

Additional Tips & Tricks available upon request.

- 🔸 Centricity
- 🔸 Dragon
- 🔸 Encrypted Emails

- -EMR Tips/Tricks
- -ED Specific Tips/Tricks
- -EPCS Registration

- -MD-Report
- 🔸 -NihonKoden
- 🕹 -Telmediq

IT Word Search

ILCXRBKSZJHKAOWKJHEH G E O B P Q H G A S M G O P V Q P O W D P V P Y W Q W M H X X R E V K | X P P D OHSCGXOKNY|APLESCEXO WIYFSMIAAUAMPCRXIREC ARXSPFNGVGZIDMUWKAGU IEDNIBOSKMWNKRUTCTXM TRWRVCBRHZIYTUEFAI DF ZOORAFIZTOCBTGTPYVBN Y X M V E G O A P G N L O P M V O E L T B S X W M G O | N D B Y E B H E Z R M | ZBEIEWSNELEZMLDENETC NHUEDEVSOIIIMETWBPAS LESCSELASMFAQBDUXOIF IVIDISCHARGEIUXIRREF VCRDUMZRIDQLRSBRTTGN BHWBPZYXCMBSWXOBYEVT VAGCOIODORHNIBFNODCY EDZIBPIVNORDERIHDETH WLECTDWPFXUCHUCIDTZW

Physician Liaison	Discharge	MDReports	Meditech
Dragon	Order	Document	EPCS
ERX	ΙТ	Operative Report	

VPH Directory

DEPARTMENT	EXT	UNIT	EXT
MAIN ADMITTING	2907	1WM ICU (1WEST)	2975
ER ADM/ER GREETER	5162 5229 1328	2WM NICU (2WEST)	2978
ADMINISTRATION	2902	2WM PICU (2WEST)	5771
BIO-MED	2895	3WM POST PARTUM (3WEST)	2983
BLOOD BANK	2695	4WM MED/SURG (4WEST)	5750
BUSINESS OFFICE (BILLING)	2913	5WM TELEMETRY (5WEST	2931
CAFETERIA	1089	6WM TELEMETRY (6WEST	5144
TRANSLATION	3456	RECOVERY	2723 2724
CASE MANAGER/SOCIAL WORK	2944	EMERGENCY DEPARTMENT	2990
CATH LAB	5737	SAME DAY SURGERY	5254 3513
CENTRAL SUPPLY	5722	2NW L&D	2999
DIETARY	1085	2NE MED/SURG (2NE)	2988
DIETICIAN OFFICE	2976	2EC MED/SURG (2ECIRCLE	5242
DISTRIBUTION	2860	2SC PEDIATRICS (2SCIRCLE) 5723
EDUCATION DEPARTMENT	2982	3EC BARLOW (3ECIRCLE) 8360
EMERGENCY LINE	4444	3WC EAU (3WCIRCLE) 7973 1773
EMPLOYEE HEALTH	2948	4SC VRC (4SCIRCLE) 5752
ENGINEERING	3968 1075	WOUND CARE/APC (4 CIR)	5755 3908
ESCORT OFFICE	2580	5EC MED/SURG SMU (5ECIRCLE) 5258
FAST TRACK ER	5182	RADIOLOGY	EXT
GI LAB	2936	CAT SCAN	2326
GIFT SHOP	2795	CARDIOLOGY	2934
HELP DESK	3924	ECHO TECH	2680
HOUSEKEEPING (EVS)	2358 2258	EKG TECH	2679
HUMAN RESOURCES	2927	NUCLEAR MEDICINE	2959
INFECTION CONTROL	2998	RADIATION THERAPY	(818) 997-1522
INFORMATION DESK	1008	RADIOLOGY	2951
LABORATORY	2960	RENAISSANCE MRI	1015
LINEN ROOM	2807	TRANSPORT	4000
MEDICAL RECORDS	2647	ULTRASOUND	2449
MICROBIOLOGY	3993		
NURSING OFFICE	2950	CONSULTANT	
NURSING SUPERVISOR	5251	DIABETIC EDUCATOR	5153
O/R CHARGE	1890	FINANCIAL COUNSELOR	5174
O/R HOLDING	5156	LACTATION CONSULTANT	3912
PARKING OFFICE	4078	ROSE ONYEKWE (PSYCH)	(818) 424-6794
PATHOLOGY	2961	SPEECH THERAPY	5239
PAYROLL	5729	WOUND CARE NURSE	7921
PHARMACY	2989	RESOURCES	EXT
PHYSICAL THERAPY	2941	VITAS HOSPICE	(800) 757-4242
PHYSICIAN REF	(877) 237-9522	SIZE WISE (HERCULES)	(800) 814-9389
PRE CASE MANAGER	5143	DA VITA DIALYSIS	(800) 234-0771
PRE-OP NURSE	5155	AMBULNZ	(877) 311-5555
RESPIRATORY THERAPY/LEAD	2940 5196	TRANSCRIPTION DOCTORS ONLY	3981
SECURITY	1078 5131	IR/VAD NURSES	2327