



What's Happening?

- Daylight Saving Time (DST) for Fall 2020 ends Sunday, Nov. 1.
- At 0200 the clocks will turn back to 0100.
 - **Central Daylight Time (CDT)** – the first hour is between 0100-0200.
 - **Central Standard Time (CST)** – the second hour is between 0100-0200 (the “fall back hour”).

What Should You Do to Prepare?

Admissions/Discharges/Transfers

- For the ED departments, you will be able to perform ADT workflows as you normally would. The system will automatically combine the two 0100 hours of the Daylight Saving Time event into a single hour for the purposes of recording ADT event times in your ED. Here are a couple of examples to help you understand how the system assigns ADT event times during the Daylight Saving Time event.
 - For events that occur during the first 0100 hour, the system takes the number of minutes after the hour and divides that number in half. So, for example, if an event happens at the first 0116, the system considers that event to have taken place at 0108 during the joint 0100 hour.
 - For events that occur during the second 0100 hour, the system takes the number of minutes after the hour, divides that number in half, and adds 30. So, for example, if an event happens at the second 0138, the system considers that event to have taken place at 0149 during the joint 0100 hour.

ED Event Statuses

- During the second 0100 hour, patients might appear with incorrect ED patient statuses. This situation occurs for patients who had an event that caused a status change during the first 0100 hour. When the second 0100 hour begins, the system incorrectly reverts the patient's status until the event time is reached again. If a patient has an incorrect patient status, he can also be incorrectly filtered from status-based Track Board views that he should appear on.
 - To account for this situation, manually note patients' correct statuses as of the first 0159, either on paper or within the system, and watch for incorrectly reverted patient statuses. You can also use the All Patients Track Board view to help you keep track of all patients that are currently in the ED.
 - After 0200, manually update any remaining incorrect patient statuses by right-clicking the patient's entry on the Track Board and selecting the appropriate status.

Documenting Codes, Traumas, Strokes and STEMIs

- Due to the fast-paced nature of codes, traumas and strokes, do not document these events in narrators during the Daylight Saving Time event. Instead, to ensure accurate documentation,

Fall 2020 Daylight Saving Time: ED



document these events on paper. If you document these events in narrators, information can appear out of order in the Narrator Event Log.

- STEMI (exception) STEMI Case Creation must still be activated STEMI Case .

Viewing Events in Time-Ranged Reports and Narrators

- If the Patient Timeline Report, the Narrator Event Log or any other report that uses a time range contains events from either 0100 hour, a yellow banner appears to warn users that events might appear out of order due to Daylight Saving Time.

Time	Event	Details	User
01:50	Orders Placed	ondansetron (ZOFRAN) 4 MG/5ML solution 4 mg	HM
01:45	Patient roomed in ED	To room WI UHM FAST TRACK 1	HM
01:35	ondansetron (ZOFRAN) 4 MG/5ML solution 4 mg Given	Dose: 4 mg Route: Oral	HM
01:15	Patient arrived in ED		HM
01:10	Vitals	Vital Signs - Temp: 37 °C (98.6 °F) Heart Rate: 98 Heart Rate Source: Monitor Resp: 20 BP: 110/60 BP Location: Right arm BP Method: Automatic	HM

- Reports that show this banner will show all events that occurred during both instances of the repeated hour, to ensure that no data is being filtered inappropriately due to Daylight Saving Time. These events will also appear out of order in other reports, including Clarity and Reporting Workbench reports.

Device Integration/Vital Sign Documentation

- Data validate **will not be available** during second hour of the Daylight Saving Time event. Please document all vitals manually during this time by adjusting the new vitals time with added comment to assure it does not overwrite the first 0100 hour. Data validation will be available after 0215 (CST).

Time taken: 0105 11/03/19

+ Add Row + Add Group Values By + Create Note

ED Quick Vitals

BP 110/60

BP Location Right arm Left arm

Patient Position Lying Sitting Standing Held Other (C...

Comments for BP

Filed in the second 1AM hour

Fall 2020 Daylight Saving Time: ED



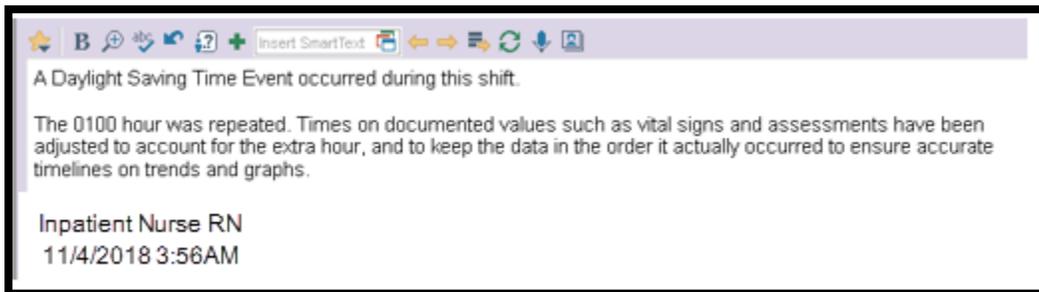
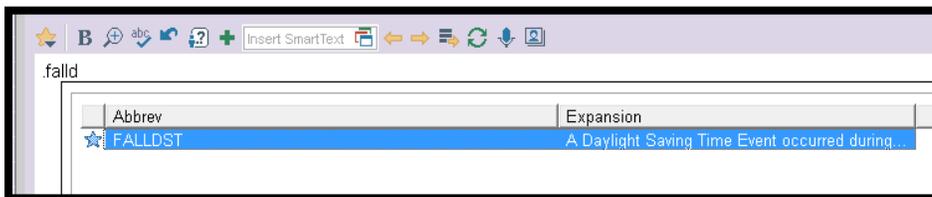
Time	Event	Details	User
01:14	Vitals	Vitals - BP: 110/60 Temp: 98.3 °F src: Oral Pulse: 68	JK
01:05	Vitals	Vitals - BP: 110/60 (Filed in the second 1AM hour) Temp: 98.3 °F (Filed in the second 1AM hour) Temp src: Oral Pulse: 68 (Filed in the second 1AM hour)	JK

Other Documentation

- Use the time labeling convention described above for any other types of documentation during this period such as Assessments, I&O, LDAs, Cares/Safety, Restraints, Respiratory documentation, etc.

Add a DST Nursing Note to each patient's record.

- Select the **ED Quick Note** to access notes. Select **New Note**. Enter the **Fall Daylight Saving Time Smart Phrase** (.falldst + SPACE or ENTER) into the blank note, or search for the Fall Daylight Saving Time Event Note in the Search SmartText field. Add any additional information and sign the note.



Intake and Output

- I&O totals will be for **25 hours** for Nov. 1.
- Automatic infusion group volume calculations do not add the extra 0100 hour and any volume infused during that hour into their calculations, so you must manually account for the extra hour after the Daylight Saving Time Event ends. After 0200 manually calculate and document the volume for all active infusion groups. After you manually calculate these volumes, you can reopen running IV med given from the event log or the MAR and edit administration with a comment of the missed volume calculated in associated flow sheet row.

Fall 2020 Daylight Saving Time: ED



Associated Flowsheet Rows:

New Value: Date: 11/4/18 Time: 2209	Check the box to link to previous value if no new assessment is needed
piperacillin-tazobactam (ZOSYN) 3.375 g in sodium chloride 0.9 % 50 mL IVPB-ADV	
Volume (mL) 50	No data filed
Comment: DST unaccounted IV volume 12.5ml infused at 0210	
<input type="button" value="Restore"/> <input type="button" value="User Taken By"/>	

Medication Administration Documentation

- **Scheduled Medications**

- Use the MAR for time adjustment in documenting medication administration
 - If a medication is scheduled for the first 0100 hour (DCT), document this dose as given at 0100. Enter a comment to denote this dose was given during the first 0100 hour during DST.
 - If a medication is scheduled for the second 0100 hour (DST), document this dose as given at 0130. Enter a comment to denote this dose was given during the second 0100 hour during DST.

Action: Given	Date: 10/22/2016	Time: 0130	Comment: Daylight Saving Time. Med due at 0200. Given at second 0100
Route: inhalation	Site:		

- **Frequently Given Medications**

- For frequently scheduled medications you may receive an alert about the administration being too close to another.
- Ex. You have an order for fentanyl 25mcg IV push every hour as needed for pain. You administer a dose for a patient's complaint of pain at the first 0130 occurrence. Adjust your Given Time in the MAR to 0115 (take the minutes and divide by 2) and enter a comment. An hour later, the second 0130 occurrence, the patient is in need of another dose. When documenting this dose, you will receive an alert. Review and verify that this is an appropriate administration and select Accept.

Based on the ordered frequency, this medication is possibly being administered too close to another administration. Please review previous administrations to verify appropriateness.

Accept

Cancel

- Adjust your Given Time in the MAR to 0145 (take the minutes and divide by 2 and then add 30) and enter a comment.

Fall 2020 Daylight Saving Time: ED



Action: Given	Date: 11/4/2018	Time: 0145	Comment: Daylight Saving Time. Given at the second 0130
Route: intravenous	Site:		

- **Medications Ordered for a set number of doses**
 - Adjust your administration times that fall within the 2-hour Daylight Saving Time event using the above described method.
 - Ensure that the total number of doses is correct. If necessary cancel the last scheduled dose. (Ex. Two doses are given 60 minutes apart, but the charting time is 0100 and 0130.
- **Infusion Changes/Blood Transfusions**
 - The time of infusion titrations needs to match the corresponding vital signs.
 - Example- if the BP was 70/56 and the Dopamine increased, both should have similar times.
 - Blood administrations times should correspond with appropriate vital signs.
- **Best Practice Advisories (BPA)**
 - The system does not include the second 0100 hour in its calculations when determining whether Best Practice Advisories that use lockout times should appear to a user again.
 - Example- if a BPA with a lockout time of three hours appears to you at 0000 during the morning of the Daylight Saving Time event that BPA won't appear to you again until 0300, despite the extra hour added by the time change.
 - Similarly, lookback settings for advisories that include medications, procedures, or results criteria also don not include the second 0100 hour in their calculations. This could result in advisories based on these criteria appearing or not appearing at incorrect times.
 - Example- A BPA is set to appear if a patient has not had a pain assessment documented within the last hour. If you document a pain assessment for a patient at the first 0100 hour, the advisory will not appear to remind you to document an assessment during the second 0100 hour.
- **Special Considerations for ED Managers/Charge Reviewers**
 - Patients who are arrived/discharged/admitted during the 2 hours of the Daylight Saving Time event may not have all documentation represented in the facility charge calculator. Please review all of the patients with those events during this hour to ensure proper level charging.