

Fall 2021 Daylight Saving Time: Cardiology Procedural Areas



What's Happening?

- Daylight Saving Time (DST) for Fall 2021 ends Sunday, Nov. 7.
- 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

- Admissions, Discharges, and Transfers should be limited as much as possible during the 2 hours of the Daylight Saving Time event.
- If you are unable to admit or transfer a patient into an open bed during this time, call for assistance (In cases where someone is not available, you should contact the hospital operator.).

Admitting Number:

HMH	713-394-6800
HMB	832-556-6546
HMCL	281-523-2191
HMSL	281-274-0104
HMTW	936-270-2193
HMW	832-522-1170
HMWB	281-737-1500
HMCCCH	281-599-5700

Main Operator:

HMH	713-790-3311
HMB	281-420-8600
HMCL	281-523-2000
HMSL	281-274-7000
HMTW	936-270-2000
HMW	832-522-5522
HMWB	281-737-2500

- Unit staff are responsible for validating the unit census. This will include making sure that all patients are in the correct bed after the Daylight Saving Time Event. If a pool bed was used, you will have to move the patient from the pool bed to the correct bed.

Case Tracking Events

- In order to maintain accurate patient charges and procedure time averages, you must account for the extra hour when documenting case tracking events for patients whose cases take place during the Daylight Saving Time event.
 - To keep the patients' records as accurate as possible:
 - Change case tracking event times so that the amount of time between events is accurate, even if this results in the actual event times themselves being inaccurate. Updating event times in this way ensures that the patient is charged correctly and that surgeons have the appropriate amount of time added to their procedure averages. Sedation time should reflect an accurate number of minutes, even if those are documented into the 0200-0300 hour.

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- Add a nursing note that specifies the actual times at which case tracking events occurred for the patient. This ensures that the actual times at which events occurred are documented in the patient's chart.

Image Resulting

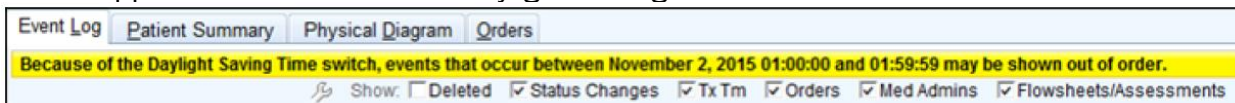
- To avoid any errors for STAT imaging test results received during the second 0100 hour, have the on-call MD call the care team with STAT results and sign the study after 0200.

Documenting Codes, Traumas, Strokes, and STEMIs

- Due to the fast-paced nature of codes, traumas, strokes, and STEMIs, do not document these events in narrators during the Daylight Saving Time event (with exception of STEMI case creation via the STEMI narrator). Instead, to ensure accurate documentation, document these events on paper. If you document these events in narrators, information can appear out of order in the Narrator Event Log. (We would back log the times as appropriate after the daylight savings time event).

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.



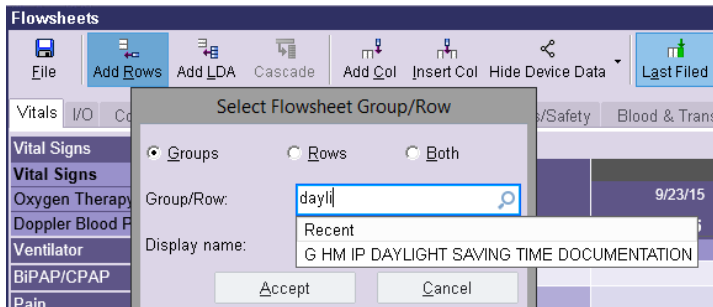
- Reports that show this banner will show all events that occurred during both instances of the repeated hour, to ensure that no data is being filtered inappropriately due to Daylight Saving Time. These events will also appear out of order in other reports, including Clarity and Reporting Workbench reports.

Device Integration/Vital Sign Documentation (applies to Non-Invasive Cardiology ONLY)

(Invasive Cardiology will NOT be affected. The acquisition unit must be rebooted after the daylight savings time event is complete.)

- Data validate will not be available during either hour of the Daylight Saving Time event. Please document all vitals manually during this time. Data validation will be available after 0215 (CST).
 - Add the Daylight Saving Time Documentation Flowsheet Group to your Vitals flowsheet
 - Select the Add Rows button. Make sure the Groups option is selected. In the Group/Row field search for the group. You can find it easily just by entering “daylight” into this field.

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- The flowsheet group will be added to the top of your Vitals flowsheet. Use these rows to document Begin and End times for the Daylight Saving Time event. You can use the comment field of this group to enter more details about a particular time column, if needed.

Daylight Saving Time Documentation	
Fall or Spring?	Fall
Daylight Saving Time Begin	0100
Daylight Saving Time End	0200
Comments	

- Adjust Times on flowsheet rows to keep documentation in the order that it occurred. Because the 0100 hour is repeated, and you cannot have more than one 0100 column on your flowsheet, any vitals taken during this 2-hour period will show as a 1 hour timespan in flowsheets. The example pictured below represents a patient who has Q 15 minute vitals.
- If a clinician finds himself documenting flowsheet values at times that overlap due to DST, Epic recommends that the clinician manually change the time of the second entry to one minute after the first entry. For example, if a clinician documents a value at both the first and second 0130, the clinician should change the time of the second entry to 0131.
- For all values documented during the second 0100 hour, clinicians should add a comment detailing that the value was documented during the second 0100 hour.
- Clinicians should also create a new note in the Notes activity and record the actual times, in chronological order, at which they performed each piece of flowsheet documentation during the two 0100 hours. This allows other clinicians to quickly see what order a patient's flowsheet documentation was performed in.

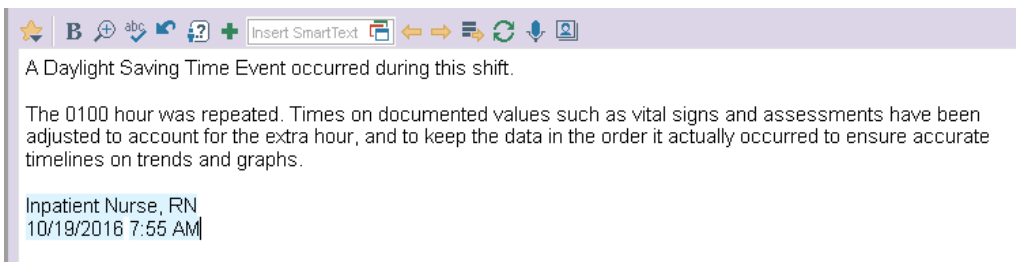
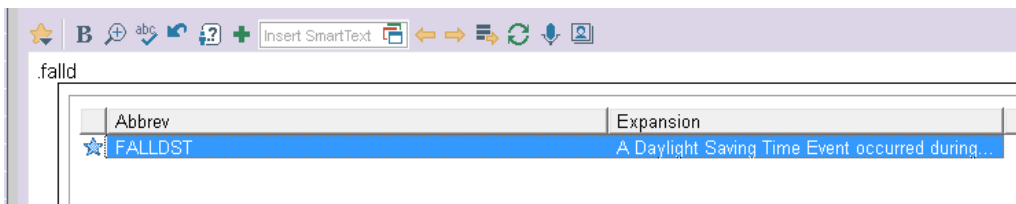
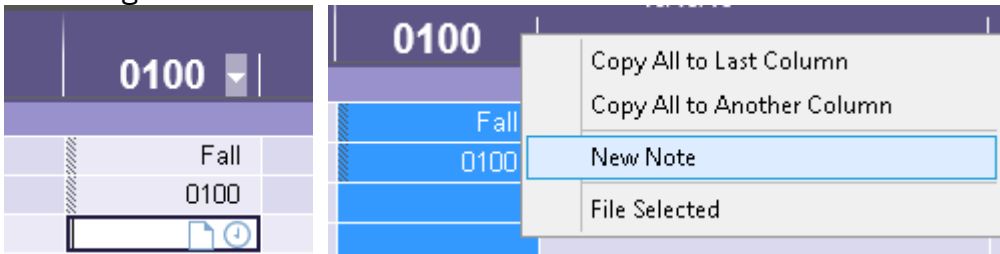
Add a Nursing Note to each patient's record.

- Select the drop down arrow next to the time in the column. Select New Note. Enter the Fall Daylight Saving Time SmartPhrase (.falldst + space or enter) into the blank note, or search for the Fall

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Daylight Saving Time Event Note in the Search SmartText field. Add any additional information and sign the note.



Other Flowsheet Documentation

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

Intake and Output

- I&O totals will be for 25 hours for Nov. 7.
- Automatic infusion group volume calculations in the Flowsheets activity 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. Add a column after 0200 and manually calculate and document the volume for all active infusion groups. After you manually calculate these volumes, you can resume using the auto-calculate and rate verify features.

Medication Administration Documentation

Scheduled Medications

- Use the same time adjustment method as used for flowsheets for documenting medication administration.

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Frequently Given Medications

- For frequently scheduled medications you may receive an alert about the administration being too close to another.
- For medications with a frequency greater than once an hour, clinicians must use the MAR to document administrations that occur after the time change as occurring one hour earlier. For example, if a medication with a frequency of Q3H has due times of 0015, 0315, and 0615, clinicians should document the 0315 administration at 0215 and the 0615 administration at 0515, so that the medication is still given every three hours.
- For medications with frequencies equal to or shorter than once an hour, clinicians must use the MAR to document any additional administrations that need to occur as a result of the second 0100 hour. For example, if a medication with a frequency of once every half hour has due times of 0145, 0215, and 0245, clinicians should document and give an administration at the second 0115 and 0145 as well, so that the medication is still given once every half hour. Additionally, clinicians should add a comment to any administrations documented during the second 0100 hour, to show that they were given because of DST.
- If a medication with a frequency equal to or shorter than once an hour has a fixed number of doses, clinicians should also adjust the medication's schedule to account for the additional administrations documented during the second 0111 hour. Continuing the previous example, if the medication had only those three doses scheduled, and clinicians created two new administrations during the second 0100 hour, they should cancel the 0215 and 0245 administrations.

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.

BestPractice Advisories (BPA)

- The system does not include the second 0100 hour in its calculations when determining whether BestPractice 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 will not appear to you again until 0300, despite the extra hour added by the time change.

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- Similarly, lookback settings for advisories that include medications, procedures, flowsheets, or results criteria also do 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.