

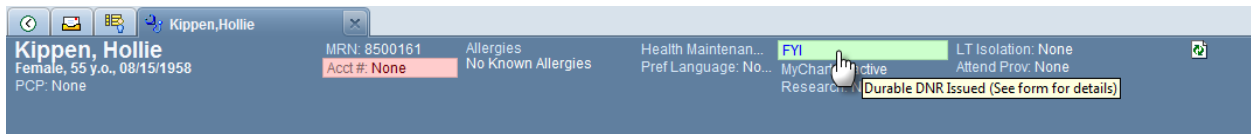
FYI Flags



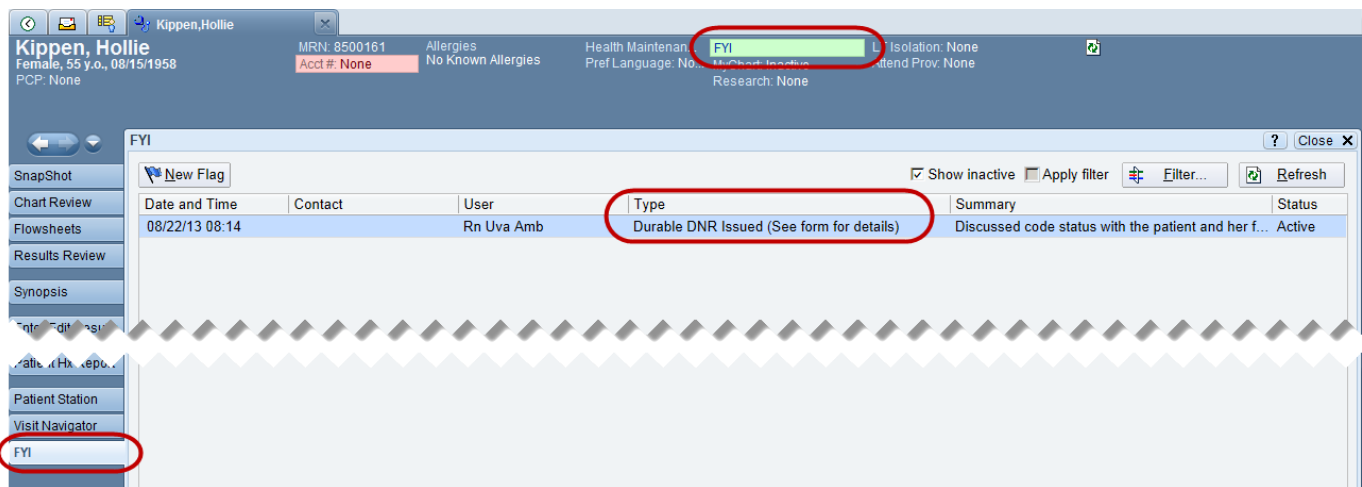
How to use the FYI Flags

FYI Flags are used to communicate clinical information to clinicians across the continuum of care. This Reference Guide will show you how to add, edit or deactivate a FYI flag. It also includes a list of UVA FYI flags, the criteria for use and guidelines for placement and removal.

Note: FYI flags show in the Patient Header. Details of the FYI flag can be seen by hovering over the FYI line and/or double clicking to open the activity.



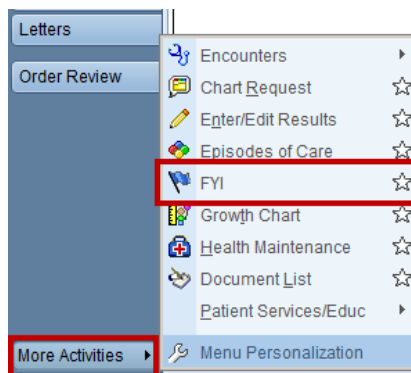
When an FYI flag is added, the FYI activity is added to the list of activities in the far left column.



Add an FYI Flag

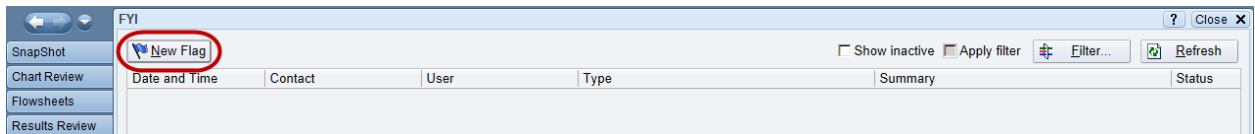
To add an FYI Flag:

1. Click More Activities at the bottom left of a patient's workspace.



2. Click the FYI activity.

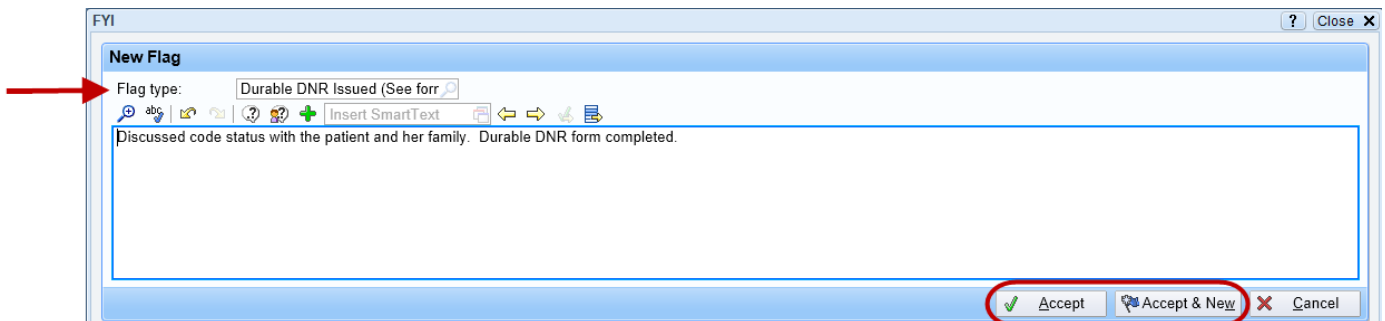
3. Click the New Flag button.



4. In the Flag type field, type the first few letters of the FYI Flag you want to add.

5. Add any relevant comments.

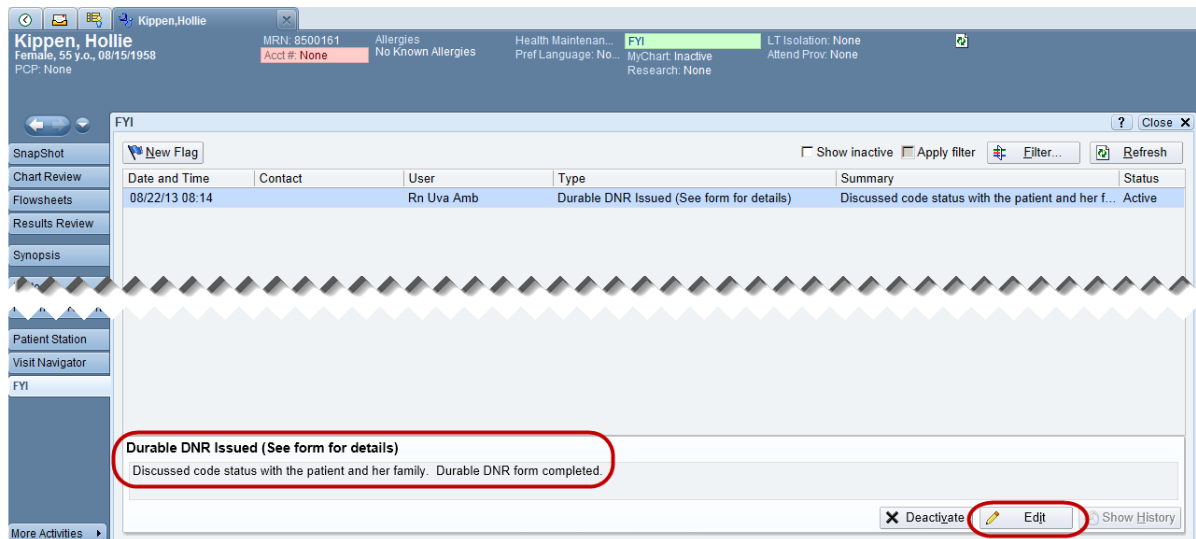
6. Click either Accept if you are done or Accept & New if you have another FYI Flag to add.



Edit an FYI Flag

An FYI Flag can be edited or deactivated if the patient's situation changes. To edit an FYI Flag:

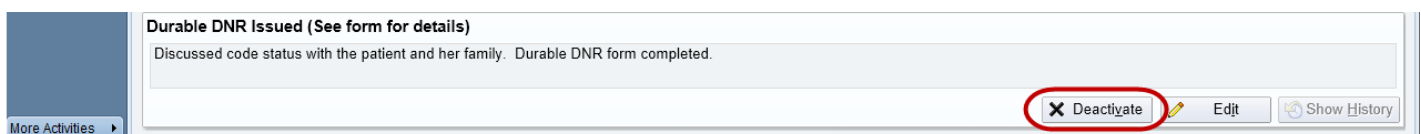
1. Click the Edit button in the bottom right corner of the FYI workspace.
2. Make any changes to the comments regarding the FYI.



Deactivate an FYI Flag

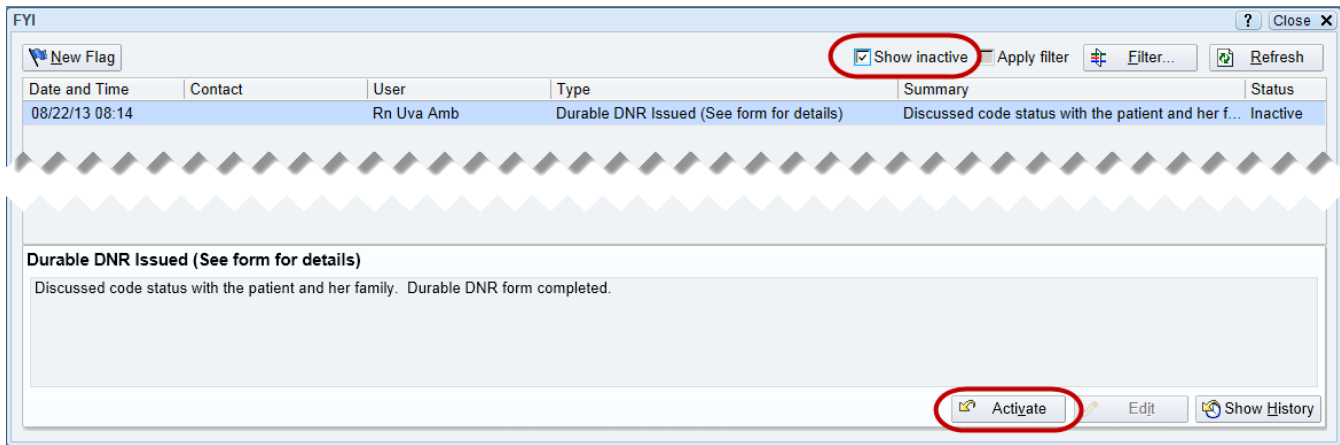
To deactivate an FYI Flag:

1. Click the Deactivate button in the bottom right corner of the FYI workspace.



If you deactivated an FYI Flag by mistake:

1. Select Show inactive.
2. Click Activate.



FYI Flag Criteria and Guidelines

FYI Flag 08/13	Criteria - why used across encounters	Guidelines for placement and removal
Airway Risk	Patient has documented or suspected compromised airway or has displayed difficulty with intubation.	If LIP assesses risk - Add flag. Add to problem list. Flag permanent.
Blood Product Refusal	Add if patient refused blood products with reason	If patient refuses blood products the person noting the issue enters the flag.
Blood Transfusion Reaction	Add if patient experiences reaction to blood transfusion with details	If patient has blood transfusion reaction the person noting the issue enters the flag.
Delirium Risk	History of delirium screening (CAM ICU or CAM) positive during hospitalization. Patients with positive delirium screening are more at risk for development of delirium during future hospitalizations, also may have residual effects post discharge. When Delirium is added to Problem List add FYI flag.	Enter FYI after 2nd positive CAM or CAM ICU screening. Ambulatory follow-up should consider neuropsych testing for pt's with new cognitive changes. Patients ≥ 65 years old should have permanent FYI flag. For others flag removed if no lasting effects of Delirium 1 year after positive screening.
Durable DNR Issued (See form for details)	Patients with Durable DNR Order - completion of State Form, signed by patient/surrogate and MD (approximately 500/year based on form use). This is the alert to show all providers that a Durable DNR form has been issued (not scanned into the EMR – patient just show form).	When a DDNR order is issued the provider enters Alert. Also write note providing information about conversation with patient/surrogate. If patient revokes DDNR, flag is removed. Before acting on flag, clinicians must see DDNR Form.
e-GFR <45 AKI Risk	If lab results show e-GFR<45 then patient at risk for acute kidney failure. Flag triggers Nephrology Consult	Entered by any clinician to stay permanently once a patient has had an egfr <45
Fall Risk	History of fall during hospital admission or in ambulatory settings. Patients with permanent risks for falls; criteria for consideration includes: blindness, lower extremity amputation, paralysis, chronic neuromuscular disease with deficit or gait disturbance. Score of >45 on Morse Fall Scale or >12 on Humpty Dumpty during hospital admission for patients expected to be fall risk following discharge.	Entered based on validated Morse/Humpty Dumpty Scale scores for patients expected to be at risk for falls during admission and after discharge. Entered for patients identified as based on specified diagnoses or validated tool scoring in Emergency Department, ambulatory areas or Procedure Area RN adds flag. Entered by Fall Prevention Chair upon review of QRs. Alert remains on patients with permanent risk criteria. Flag removed if deemed no longer fall risk.

General	For any alert need other than what is on the list. Please add details	Place and remove flag as appropriate to issue noted.
HIM Hidden Encounter	Encounter is not viewable due to a patient request, a legal request, or closed adoption.	HIS Leadership validates and approves the use of this flag.
Home Oxygen (O2)	Patient on oxygen at home and will need to ensure enough oxygen for visit (especially when there is no wall oxygen available).	When patient seen or discharged with oxygen set up add flag. Remove if patient no longer on oxygen.
Medication Contract	If patient signs a contract for use of narcotics or other medications. (Ambulatory Clinics or Palliative)	If patient signs Medication Contract (Form #100766 or #100768) enter flag. When contract no longer valid remove flag.
Narcotic Risk	Patient has either a poor response or sensitive to therapeutic narcotic use.	If LIP assesses risk, add flag. Consider adding relevant issue to problem list. Prescribe any narcotics judiciously.
No BP in Left Arm	If patient with mastectomy or dialysis fistula or other clinical reason to avoid arm for BP or venipuncture.	When risk identified either during history taking or when taking BP and patient provides data, add flag
No BP in Right Arm	If patient with mastectomy or dialysis fistula or other clinical reason to avoid arm for BP or venipuncture.	When risk is identified either during history taking or when taking BP and patient provides data, add flag
OSA Risk	OSA Risk-Add Score from Stop Bang tool. Enter actual score and date completed in Comments.	For patients having moderate or deep sedation - Score ≥ 3 means order consult for a sleep eval (study should be ordered before any surgery). Score ≥ 5 or + OSA means increased monitoring after anesthesia - Inpt add care plan.
Post-Transplant Pt	To identify patients who have had any organ or tissue transplant	Entered by Transplant Coordinator to alert staff of special needs of transplant patient.
Pre Transplant Pt	To identify patients who are preparing for any organ or tissue transplant	Entered by Transplant Coordinator to alert staff of possible urgent admission for patient to receive transplant.
Release restriction	Patient requests documentation to not be released without their explicit authorizations.	HIS Leadership validates and approves the use of this flag.
Security Concerns	Provide Detail - Elopement, Abduction, Suicide, Prisoner, and Threat Assessment in Comments. If any reference is made to a threat or physical violence call Security and have them conduct a Threat Assessment (PIC 1647).	Patients are assessed. Patients with issues related to elopement, abduction, suicide have a care plan added on inpatient. Threat Assessment/Risk Screening is conducted by Security (PIC 1647). Security must also be notified if a Prisoner is admitted. Staff works with the Bed Center 4-5018 or PIC 1405 if an alias or Registration actions must be taken. The flag is remove when no longer in danger or at discharge.
Sensory Deficit	Hearing, Vision, Dementia, Need to adapt communication/teaching	If patient with a permanent communication barrier (other than language) the flag would get placed after conducting a learning/communication screening.
Similar Name	To designate a chart where there are issues related to patients with the same or similar names	Staff enter comments to describe the specific situation

Test Patient	To designate a patient with the last name "Test". This is not a Test patient. Please refrain from using this patient for testing, training or other purposes.	HIS staff enter a notice to alert those seeking to test in the system to use patient with last name of "Testpatient" NOT "Test"
Visitor restriction	Patient or legal surrogate may make requests to restrict visitors (or may provide a short list of names of those who MAY visit).	If the patient states he/she wants to restrict visitors the names should be entered into the comments field with last and first name (visitors will be required to show an ID and the name entered must match). Occasionally patients will request that a limited list of patients MAY visit. In this case the names in the comment section with clear designation that the names represent those who MAY visit. Any questions or concerns should be directed to Bed Center (4-5018 or PIC 1405). The flag is changed based on patient request and removed at discharge.