 **CHC: Most common UDAs Nursing 2023**

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| **UDA** | **When to Use** |
| **1 LN: Initial Event Documentation** | **Manually open when there is an Accident/Incident:** New Wounds, Falls, etc. Triggers other UDAs, please check "+sign". See triggered UDA's Document  |
| **2. LN: New Order- - V 2.0** | **ALL New orders** Triggers other UDAs, check "+sign" |
| 3 LN: Pre-Dialysis Note | Manually open and complete Before Resident leaves for dialysis |
| 4 LN: Post-Dialysis Note | Triggers to complete within 8 hours of 3LN Pre-Dialysis note. Complete within 15 minutes of resident's return from facility |
| 5. LN: LOA/ER Visit Return | Manually open Within 15 minutes of their return from LOA/ER |
| **6 LN:Admission/Readmission Evaluation Part 1 and 6 LN:Admission/Readmission Evaluation Part 2** | Triggers upon admission/readmission. See triggered UDA’s document for all triggered UDA's. |
| **7.LN: Comprehensive Care Path V2.** | Triggers for Daily charting for first 7 days on new admissions but will continue for up to 100 days. Complete daily for skilled charting stop schedule for non-skilled residents on day 8, completed once a day for 7 days during look back periods with MDS |
| 8 LN: Charting by Exception Note | Complete this UDA when no other UDA's match the reason for charting Examples: Discussion with Resident/Family member not education, Lab/Diagnostic Results: awaiting response from provider/No new orders from results. Food/Fluid/Dietary, Immunization, Clarification of Order Note, Pharmacy Conversations, Provider Conversations (MD/PA/NP), AMA Discharge |
| **eINTERACT Change in Condition Evaluation - V 5.1 (System)** | **Complete for all changes with resident condition.** Creates SBAR for communication with provider |
| eINTERACT Transfer Form - V 5.0 (System) | Complete for all transfers to acute care. Used to track and prevent rehospitalizations. system will ask if you want to complete now or schedule when you complete the quick ADT action of transfer out |
| IDT to Rehabilitation Referral Form v1 | Complete when there is a need for therapy screening or eval  |
| **LN: Behavior Monitoring** | Triggered by 1 LN (A&I) and 8ln if you answer that you are writing about behaviors. Behavior charting for existing behaviors is written in behavior order. 1 ln initial event is for new or worsening behaviors |
| LN: Bladder Screener | Complete in between Annual/Quarterly assessments if there is a change in bladder continence or incontinence. |
| **LN: Weekly Skin/ Braden Scale for Predicting Pressure Sore Risk** | Auto populates from an admission x 3 weeks, then LN Weekly Skin starting on week 4 |
| LN: Catheter Evaluation | Triggered upon admission if urinary catheter present or complete if one is inserted while admitted |
| LN: Focused Clinical Evaluation: Anticoagulation Monitoring | Triggers from 2LN if new or change in Warfarin order |
| **LN: Focused Clinical Evaluation: Infections** | Triggers from 2LN: Complete for all Infections every shift until infection resolves/3 days post anti-infective agent completed or as per clinical guidelines with active covid  |
| LN: GG Self-Care & Mobility EvaluationLN: GG Self-Care & Mobility Evaluation IPALN: GG Self-Care & Mobility Evaluation OBRA- KS | Complete as scheduled r/t MDS assessment requirements |
| **LN: McGeers Criteria** | Triggers from 2LN if new antibiotic is selected. Must complete section 1 for Licensed Nurse prior to administering 1st dose |
| LN: Pain Evaluation- | Triggered by 2LN: New order for pain Complete immediately then in 2 weeks |
| LN: Pharmacy Recommendations | Complete if pharmacy recommendations received/reviewed by a provider but did not include a new order. Complete 2ln new order if new order received. |
| **LN: Physical Function Monitoring-** | Triggers from 1LN Complete post fall follow up q shift for 3 days |
| **LN: Psychoactive Medication Change** | Triggers from 2LN New order with change in psych med |
| **LN: Weekly Skin Monitoring V2 - V 3.0** | Auto-populates 7 days following admission: (edit schedule for facility/resident preference) |
| LN: Wound Evaluation (Weekly) | Used for weekly wound documentation including wound rounds. May need to reschedule to match wound round day or edit schedules to combine duplicates |
| Rehabilitation Response to IDT Referral - | Therapy completes in response to IDT to Rehab Referral UDA. Review for resident changes.  |
| Resident/Resident Representative Education | Used by any member of the IDT team if they give resident/resident representative education |
| RN: Abnormal Involuntary Movement Scale (AIMS) | Completed within the UM: Quarterly, Admission, and manually as clinically indicated. |
| Team IDT: Baseline Care Plan | Completed by IDT with new Admissions/Readmission RN's responsible to make sure completed |
| RN: Wound Assessment (Initial) | RN only, Auto populates form 1LN Initial Event Documentation |
| RN: Narrative Assessment | Triggers from 1LN if documentation not completed by a RN |
| RN: Side Rail/Restraint Assessment | Found Within Admission, Quarterly. Complete if new side rails/restraints are being considered outside of those events |
| Team: IDT Meetings and Evaluations | Complete for all evaluations and meetings completed by the IDT team. Triggers based on some events. Review schedule reason to determine need if showing as scheduled. Otherwise click on new to start new. Most often used by nurses for self-evaluation of meds  |
| Team: IDT Discharge Instructions | Instructions for planned discharges. Resident must sign last page and we keep copy.  |
| UM: Pain Interview (3.0) | Completed on day 5 following admission/ readmission, prior to a planned discharge, and within the UM: Quarterly |
| UM: Quarterly Evaluation  | Complete every quarter and annually along with MDS schedule for Reimbursement and for Clinical Consideration and review. UM: May delegate some sections to LN |