

Time Management

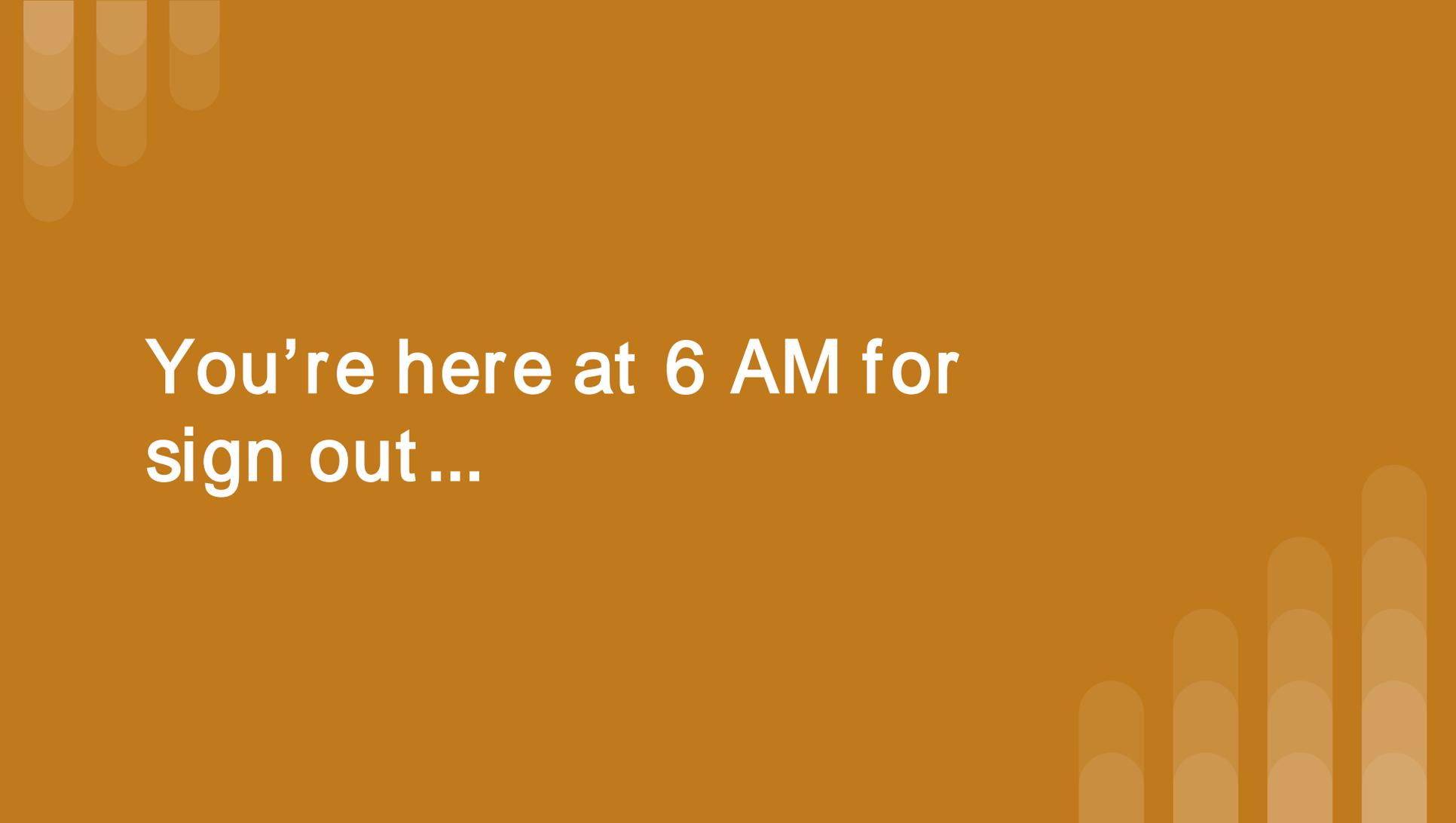
Katarzyna Kadela, MD
Matthew Laubham, DO



Objectives:

- 1) How to chart review & create a task list
- 2) Prioritizing post-rounds tasks and clinical problems
- 3) Note Writing
- 4) Approaching Sign Out



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**You're here at 6 AM for
sign out...**



Before you receive sign out

Print a patient list of your team

Use this as your “cover sheet” for the day

This is where you'll make check boxes / task list

All check boxes are not created equally



Check Boxes / Task List

“LMNOP”

- L: Lytes
- M: Meds (new meds or med rec -- MAKE SURE MEDS AREN'T FALLING OFF!)
- N: Note
- O: Orders
- P: “Pass off” or sign up



Sign out IS:

- To hear of acute events overnight on your patients
- To hear brief summaries of your new admissions (Presenting symptoms, triage events, likeliest diagnosis and current management)
- Suggestions for improvement (two-way street)
- Professional, without extra patient commentary unrelated to patient-care

Sign out is NOT:

- To be shown up late for
- Time to have to have/hear an entire H&P (that's what the notes are for. E.g. if they have pets, like blueberries, enjoyed the new Spiderman movie)



Immediately Pre-Write Your Note

Strategy:

- 1) Copy forward your previous note ***WITH AMENDMENTS***
- 2) Print note (preferably without using tons of paper)
- 3) Take notes as you're chart reviewing (reviewed in upcoming slide)

*This way, in the afternoon/after rounds, you can update your notes easily



Reviewing your data for rounds

- Like a CXR or EKG, there is no RIGHT way to pre-round. **But do it the same way every time.**
- Suggested:
 - Flowsheets: Vitals, I/Os, lines, +/- ventilator info
 - Read overnight notes: nursing notes, PT notes, SW notes
 - Results review: labs, cultures



Efficient Navigation of Epic for pre-rounds

Rounds Happen





Post-Rounds: What's Next?





#1 Consults



#2 Orders



#3 Continue your notes



Attend Conference

noon depending on your clerkship



Note Writing





Notes:

“A note has never saved a life” - Matt Laubham

“You don’t have to write *great* notes, you just have to write notes”
- Kasia Kadela

*iCOMPARE trial (NEJM, 2018) found that interns in 2010 had only ~13% direct patient activities.

Your job is to be a bedside learner, not a professional note-writer

No esoteric notes w/ minutia



Notes:

- KISS
- SOAP
- These are NOT
mini daily-H&Ps

Patient Name

Date

Service

Subjective/24 Hr Events:

Objective:

Physical Exam

Labs +/- Micro section

New images

Assessment: (2-4 sentences summarizing initial symptoms, your ddx, initial treatment and how they're responding to treatment)

Some people will numerical list problems here

Plan:

Always Sign Note

Write your service and your pager #

Mr. Smith
6/6/18
General Internal Medicine 2

Subjective/24 Hr Events:

No acute events overnight
Cough started to improve yesterday after duoneb therapy started. Slept well overnight.

Objective:

150/80, 90 bmp, 18 RR, 98.7 F, 91% 1 L LFNC

No new labs today
No new imaging

Assessment:

This is a 66 year old male with significant PMH of COPD and unprovoked PE (2010) who presented with acute worsening of cough and shortness of breath. Ruled out for PE given recent travel history, and treated for likely COPD exacerbation, now improving.

- 1) Acute COPD Exacerbation

Plan:

- Continue duoneb therapy every 4 hours
- Will finish 7 day course of levaquin (**D#2/7 today**)
- Offered smoking cessation therapy resources, patient declined
- FEN/GI: PO as tolerated. No IVFs. No scheduled labs.

Matthew Laubham, DO
Gen Med 2 x97123

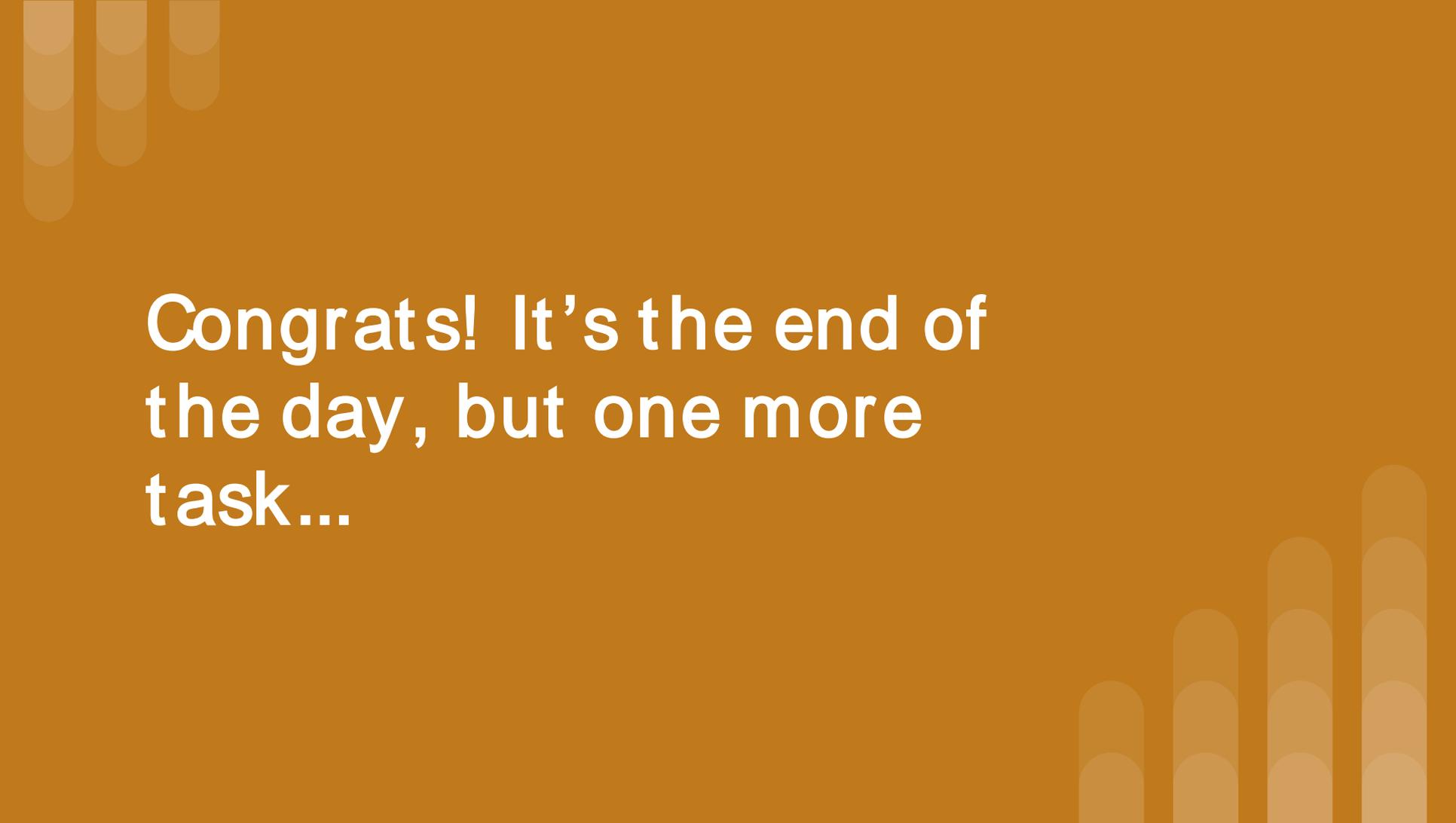
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**It's afternoon, things
have slowed down a bit...**



An admit or consult is just around the corner, let's keep up our time management! We're in the home stretch!

- 1) ALWAYS be working on sign out in *drip fashion*, not *bolus fashion*
 - a) Consider writing an updated sign out as soon as your notes are done (things are fresh!)
- 2) Follow up consults from the morning
- 3) **MOST IMPORTANT**: Stop by your patient's room to see with your own eyes if the treatment you have prescribed is working

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**Congrats! It's the end of
the day, but one more
task...**



Sign Out

- Refer to do/dont's of sign out.

Questions?

