



NORTH CAROLINA HEALTH INFORMATION EXCHANGE AUTHORITY

NC PHA Data Summit

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NC Health Information Exchange Authority



North Carolina Health Information Exchange Authority

Overview of Topics



- NC HealthConnex Overview
- User Experience
- Value Added Services
- NC HealthConnex and TCM
- What's New
- Training
- Questions







N.C. Health Information Exchange Authority Overview



What Is a Health Information Exchange?

A health information exchange (HIE) is a secure, electronic network that gives authorized health care providers the ability to access and share health-related information across a statewide information highway.





State-Designated Health Information Exchange: NC HealthConnex

The North Carolina state-designated health information exchange, known as NC HealthConnex, links many different types of providers and health care facilities.





Benefits of a Health Information Exchange



A full "picture" of a person's health, including ambulatory visits, hospitalizations and medications



Reduction in valuable staff time spent phoning and faxing other providers involved in a patient's care to track down health information



Timely access to important health events as they happen to patients (near, real-time notifications)



Improved, more accurate and timely medication reconciliation that reduces errors and avoids unnecessary tests



Access to test results, reducing costly duplicative tests and gaps in treatment



The N.C. Health Information Exchange Authority

The NC HIEA was created in 2015 to oversee and administer the state-designated health information exchange, NC HealthConnex. Providers who provide health care to individuals whose health care is paid for with state funds, like Medicaid or the State's Health Plan, were mandated to connect to NC HealthConnex by January 1, 2023.



Vision: Link all health care providers across North Carolina, enabling participants to access information to support improved health care quality and outcomes.

Mission: We connect health care providers to safely and securely share health information through a trusted network to improve health care quality and outcomes for North Carolinians.



Who is the NC HIEA?



- The North Carolina General Assembly created the North Carolina Health Information Exchange Authority (NC HIEA) in 2015 to facilitate the creation of a modernized HIE to better serve North Carolina's health care providers and their patients. (NCGS 90-414.7)
- Part of the N.C. Department of Information Technology's Data Division.
- Technology partner is SAS Institute.
- Twelve-member <u>Advisory Board</u> made up of various health care representatives that includes the DHHS Secretary, DIT Secretary and EDO Director.



The Vision for Connectivity

North Carolina set out a vision to create communities of connected health care providers electronically across the state.

Health Care Communications Without

NC HealthConnex



Vision for Health Care Communications With NC HealthConnex





The Vision for Connectivity

NC HealthConnex also connects health care providers electronically across the country.

- Connect to providers across state borders in neighboring HIEs through eHealth Exchange.
- Providers are alerted when their patient is seen at an out-of-state facility through the Patient Centered Data Home (PCDH).



Both





Neighboring Connections via eHealth Exchange

- eTHIN (East Tennessee) *
- GaHIN (Georgia's state-designated HIE) *
- MedVirginia (Richmond, VA) *
- SCHIEx (South Carolina) *
- VA HIE (Veterans Health Administration) and DMIX (Dept. of Defense) joint HIE **
- Atrium Health CareConnect HIE (Charlotte, NC) **
- OCHIN (Portland, OR) **
- PULSE (Patient Unified Lookup System for Emergencies) from Ai **
- Carolina Health Network **

* Legacy Point to Point connection** Hub Connection

<u>eHealth Exchange</u> enables query and retrieval of patient records (Continuity of Care Documents – CCDs)



NC HealthConnex Powering Health Care Outcomes

Neighboring Connections via Patient Centered Data Home

- Alabama One Health Record
- Arizona Health Current
- Arkansas SHARE
- California LA Network for Enhanced Services
- California San Diego Health Connect
- California Santa Cruz HIE
- Colorado Quality Health Network
- Colorado Regional Health Information Org
- East Tennessee Health Information Network
- Idaho Health Data Exchange
- Indiana Health Information Exchange
- Indiana HealthLINC
- Indiana Michiana Health Information Network
- Iowa Health Information Network
- Kentucky KHIE
- Louisiana Health Information Exchange

- Maryland Chesapeake Regional Information System
- Michigan Great Lakes Health Connect
- Missouri Health Connection
- Montana Big Sky Care Connect
- Nebraska Health Information Initiative
- Nevada HealthHIE
- New Mexico Health Information Collaborative
- New York HEALTHeLINK
- North Dakota Health Information Network
- Ohio The Health Collaborative
- Oklahoma MyHealth Access Network
- Oregon Reliance eHealth Collaborative
- Texas HASA
- Utah Health Information Network
- West Virginia Health Information Network



Mandate/Connection Overview

- The <u>mandate to connect</u> to NC HealthConnex required that those receiving state funds for providing health care services, such as Medicaid and the State Health Plan, initiate their connection by **January 1, 2023**.
- Signing a <u>participation agreement</u> demonstrates a good-faith effort to meet the connection mandate.
- Actively engaging in the onboarding process with your technical vendor and the NC HIEA also demonstrates a good-faith effort to meet the connection mandate.



- Some provider types are not required to connect but may do so voluntarily. Recent legislation has updated this list to include chiropractors.
- A complete list of providers who needs to sign-up can be found in <u>N.C.G.S. § 90-414.4</u> or on our page <u>What Does the Law Mandate?</u>



Connection Process



Invitation to start intake



Privacy & Security

- The NC HIEA follows the highest information security standards available
- Information is always encrypted and sent over a private network
- NC HealthConnex is compliant with all federal and state privacy and security laws
- Information that identifies patients will not be sold in any way or shared with anyone other than authorized health care providers or organizations that have entered into HIPAA compliant, data-sharing agreements





User Access

We take our role of data stewards seriously and expect that our participants will as well.

- Role-based access to control access levels for each authorized user
- Participant Account Administrator (PAA) will be responsible for assigning roles to users; NC HealthConnex Help Desk will provide credentials to these users (<u>PAA Reference Guide</u>)
- Access to patient information granted if established treatment relationship with the patient





NC HIEA Policies

Privacy and Security Policy	Dec. 16, 2021
User Access Policy	April 5, 2021
<u>Behavioral Health Sensitive</u> Data Policy	Nov. 15, 2018
Opt-Out Information	Oct. 2, 2019



Privacy & Security

User Access

Sensitive Data

Opt Out



Opt Out

North Carolina is an opt out state (since 2012). Patients are opted into health information exchange for HIPAA-approved treatment, payment and operations purposes across all information exchanges (public and private).

The HIE Act requires participating health care providers to provide education materials to patients on the benefits of health information exchange and their right to opt out of exchange (or rescind).

The NC HIEA provides:

- Sample notice of privacy practices
- <u>Tri-fold brochure order form</u>
- Talking points, FAQs, Fact sheet
- Employee education materials





Uni-directional Connection (Submission Only)





Electronic Health Record

Clinicians enter data into EHR, and that data is automatically sent to the HIE.







Uni-directional Connection (Full Participant): Clinical Portal







Bi-directional Connection (Full Participant): EHR Integration





Electronic Health Record

Clinicians enter data into their EHR, and that data is automatically sent to the HIE.

Data Sent to EHR

Clinicians who have care relationships with their patients are able to readily access that data via their EHR.





NC HealthConnex Data Targets



NC HealthConnex Onboarding Packet and Technical Specifications



NC HealthConnex Data Targets for BH Providers



NC HealthConnex Onboarding Packet and Technical Specifications





User Experience



Generations Family Practice Wins Healthcare Innovator Award With Help from Use of NC HealthConnex

INNOVATOR AWARDS

Innovator Awards 2024: First-Place Winning Team

Cary Medical Management Leaders Crack the Code on Improving Outcomes and Reducing Costs
Mark Hagland



(left to right:) Alex Tse, M.D., Chief Medical Officer; Amanda Hagar, Revenue Cycle Manager; Siu Tong, Ph.D., CEO; Emily Litzenberger, L.P.N., Clinical Process Improvement Manager; Cliff Tse, M.H.A>, VP Business Development & Operations

NC HIEA July 2023 Update

Leveraging NC Health Connex Data for Significant Cost Savings and Improved Patient Care, Dapper Your Data Day, Office Hours

Author: Jessica Hagins

Health Care Organization Leverages NC HealthConnex Data for Significant Cost Savings and Improved Patient Care

The state-designated health information exchange, NC HealthConnex, is helping one North Carolina management service organization (MSO) achieve significant cost savings and improve their care delivery.

<u>Cary Medical Management</u> (CMM) manages a patient population of 40,000 individuals across 48 clinics through commercial and government value-based care contracts.



Clinical Portal User Experience







Suite of Services At a Glance



NC HealthConnex Use and Value **Participation Agreement Options** Submission Only **Full Participation** Meets the mandate by sending data Meets the mandate by sending data (1)from your EHR to NC HealthConnex from your EHR to NC HealthConnex AND Access to data in NC HealthConnex (2) Access to NC*Notify - Event (3) Notification Service for ADT Alerts. Public Health Reporting such as 4 NCIR and the N.C. Diabetes Registry Access to Direct Secure Messaging (5) 舟 Access to Training Resources (6) Learn more at Meets Promoting Interoperability and 7 NCHealthConnex.gov Meaningful Use quality measures



NC HealthConnex Value-Added Services





NC*Notify (Event Notifications) – How It Works







NC*Notify - Benefits

- Providers are notified when their patients have received care in other settings.
- Providers can schedule follow-up appointments with patients.
- Providers can follow up on medications prescribed or other discharge instructions.
- Insight to provide continuity of care to reduce avoidable readmissions
- Insight to achieve financial goals under value-based care contracts
- Utilize for compliance with state and federal quality initiatives, including Meaningful Use/Promotion Interoperability

Features:

- Auto-attribution
- Self-Service Panel Loader
- NC*Notify Dashboard within the Clinical Portal



Event Notifications Powered by NC **HealthConnex**





Direct Secure Messaging

Direct Secure Messaging

This encrypted email tool allows clinicians to send patients' protected health information through a secure network. Direct Secure Messaging allows providers to message other providers on a secure network.

NC HealthConnex does not accept 42 CFR Part 2 data or psychotherapy notes, DSM can be used to send this data (with patient consent) so that providers can share that data securely. DSM can also be used to attach documents and images to send to providers.



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Controlled Substance Reporting System

Controlled Substance Reporting System

NC HealthConnex is working with the N.C. Department of Health and Human Services and Bamboo Health to combat the opioid epidemic in North Carolina. Within the NC HealthConnex portal, you can access the North Carolina Controlled Substance Reporting System (CSRS) without going to a separate site.



Pre-Submitted Questions

Pharmacy

We display pharmacy dispense data in the system, you can see our <u>updated clinical user guide</u> for more info. The pharmacy source is in the report. Pharmacy data is available in the portal, from September 2023 onward. • Patient Summary Report (Pharmacy): this report shows pharmacy claims dispense data.

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2023-07-27	Mint Hill Pharmacy	Mint Hill Pharmacy	7049102718	Ricardo Souza-Leao Jr. N.P.	123-456-0000	Losartan-Hydrochlorothiazide 100-25 Mg Tab	No	100 mg-25 mg	EA	Tablet	This would be how often, e.g. every 4-6 hours	3	1	30	30
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2023-07-27	Mint Hill Pharmacy	Mint Hill Pharmacy	7049102718	Dr. Liliya Velet MD		Finasteride 5 Mg Tablet	No	5 mg	EA	Tablet		2	0	30	30





TCM and NC HealthConnex


Medicare – Transitional Care Management Components

Interactive Contact

Learn more about TCM Services on the CMS website.

- You (or clinical staff under your direction) must contact the patient or their caregiver by phone, email or face-to-face within 2 business days after the patient's discharge from the inpatient or partial hospitalization setting.
 - "Clinical staff" means someone who is supervised by a physicians or other qualified health care professional and is allowed by law, regulation and facility policy to perform or assist in a specialized professional service but doesn't individually report that professional service.
- The interactive contact must be performed by clinical staff who can address patient status and needs beyond scheduling follow-up care.
- You may report the service if you make 2 or more unsuccessful separate contact attempts in a timely manner (and if you meet the other service requirements, including a timely face-to-face visit).
- Document your attempts in the patient's medical record.
- Continue trying to contact the patient until you're successful.
- If the face-to-face visit isn't within the required timeframe, you can't bill TCM services (see the face-to-face section).



Medicare – Transitional Care Management Components

Non-Face-to-Face Services

Physician or NPP Non-Face-to-Face Services

- You and your clinical staff (as appropriate) must provide patients medically reasonable and necessary non-face-to-face services within the 30-day TCM service period.
- Clinical staff under your direction may provide certain non-face-to-face services.

Physicians or Non-Physician Practitioners (NPPs) may provide these non-face-to-face services:

- Review discharge information (for example, discharge summary or continuity-of-care documents)
- Review the patient's need for, or follow up on, diagnostic tests and treatments
- Interact with other health care professionals who may assume or reassume care of the patient's system-specific problems
- Educate the patient, family, guardian or caregiver
- Establish or re-establish referrals and arrange needed community resources
- Help schedule required community providers and services follow-up



Medicare – Transitional Care Management Components

- You must provide 1 face-to-face visit within the timeframes described by these 2 CPT codes:
 - **99495** Transitional care management services with the following required elements: Communication (direct contact, telephone, electronic) with the patient and/or caregiver within 2 business days of discharge. At least moderate level of medical decision making during the service period face-to-face visit, within 14 calendar days of discharge.
 - **99496** Transitional care management services with the following required elements: Communication (direct contact, telephone, electronic) with the patient and/or caregiver within 2 business days of discharge. High level of medical decision making during the service period face-to-face visit, within 7 calendar days of discharge.

Don't report the TCM face-to-face visit separately.



Face-to-Face Visit

NC Medicaid – Tailored Care Management

Medicaid - TCM

Under TCM, beneficiaries will have a single care manager equipped to manage all the beneficiary's needs, spanning physical health, behavioral health, I/DD, Traumatic Brain Injury, pharmacy, long-term services and supports (LTSS) and unmet health-related resource needs. Tailored Care Managers may be an Advance Medical Home Plus (AMH+), Care Management Agency (CMA) or provided through the beneficiary's health plan. Tailored Care Managers will:

- Develop care management comprehensive assessments and care plans/individual support plans with beneficiaries
- Coordinate/refer/monitor all services (medical, pharmacy, behavioral health, waiver services, food, housing, transportation, community resources supports)
- Support beneficiaries in a crisis (with planning supports)
- Arrange for annual physicals

- Convene and consult with a multidisciplinary care team
- Provide management for beneficiaries with chronic, highrisk, high-cost care management needs
- Help with medication monitoring
- Monitor Hospital Admission Discharge and Transfer (ADT) alerts and ensure beneficiaries any admissions, discharges or transfers are followed
- Support transitions out of hospitals and nursing facilities



Toolkit: Transition to Tailored Plans

How Can NC HealthConnex Help?

- NC*Notify can alert providers that their patient has been admitted, discharged, or transferred. This helps with timely follow-up for both Medicare TCM and Medicaid TCM.
- Utilizing the clinical portal, providers can review hospital information to help them meet the parameters of a Medicare TCM follow-up.
- Utilizing NC*Notify and the Provider Clinical Portal can help providers coordinate and monitor services under Medicaid TCM.
- With the "High-Utilizer" alert from NC*Notify, providers can help provide management for beneficiaries that have "high-risk, high-cost" needs.
- Use Direct Secure Messaging inside the Clinical Portal to coordinate follow-ups, make referrals and share images.





What's New



Portal Updates – Health-Related Social Needs (HRSN)



NC Notify Maintenance: NC*Notify will be undergoing scheduled maintenance on February 26th from 9:00PM - 12:00 AM. All notifications and messages will be queued and delivered after maintenance is complete.

The Technical Support Team will be transitioning from Sirius to ServiceNow CSM as our ticketing system on January 27th. Please continue to send your requests to hiesupport@sas.com to create a ticket. After the transition, confirmation of the request you submitted will include a Case Number that begins with HIE (for example, Case: HIE0000123).

To avoid access issues, please update your bookmarked URL to https://portal.nchealthconnex.net

If you experience downtime or delays in accessing our services, please call the Help Desk at 919-531-2700 or email us at HIESupport@sas.com

Log In

Domain

Announcements

%HS Default

Username

NCHIEA.Kimberly.Webster

USER EXPRESSLY CONSENTS TO MONITORING

This system is provided by the State of North Carolina and is for authorized users ONLY. Unauthorized access may result in disciplinary action, civil and criminal penalties. Users have no expectation of privacy.

PAA (Participant Account Administrator)



h

NC HIEA Website Chatbot



- How to access the chatbot?
- What questions can you ask the chatbot?
- Does the chatbot
 collect data on
 users or accept or
 display Personally
 Identifiable
 Information (PII) or
 Protected Health
 Information (PHI)?
- Be advised chatbot answers may not be correct every time!



NC HIEA Website Chatbot



Potential State Health Plan Filter Issue

If you accept the State Health Plan and submit data to NC HealthConnex, it is important to update any filters you have in place to remain in compliance with the state mandate. More Info





Training



Training Opportunities



*Participants can request Teams training through <u>a booking link</u>.

- On Demand Training
 - <u>NC HIEA Training Modules</u>
- Live Training
 - Training Requests
- Online Webinars
 - NC HealthConnex Teletown Hall
 - <u>NC HIEA Office Hours</u>



Requesting Live Training through Microsoft Booking Demo



N.C. Health Information Exchange Authority New Strategic Initiatives

The NC HIEA recently released a strategic document outlining its 5-year plan for expanding NC

HealthConney services supporting value-based care and public health and achieving equitable



NC Health Connex Clinical Portal Demo







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Questions?



Thank You!



For more information visit,

www.nchealthconnex.gov

Tel: 919-754-6912

E-mail: hiea@nc.gov

kimberly.f.webster@nc.gov



Clinical Portal Quick Reference Guide – Logging In

Go to hiea.nc.gov or <u>nchealthconnex.gov</u>

Click on "Clinical Portal Login" at the top of the page.



Getting Started With NC HealthConnex



Clinical Portal Quick Reference Guide – Logging In

You will see <u>the login screen</u> for the NC HealthConnex Clinical Portal.

Enter your username and password. Note that the Domain field should show "%HS_Default."

*****Note:** You <u>will not</u> be prompted to create a challenge question and answer upon your first login. Please take the time to <u>create one in the</u> <u>**Profile** tab</u> found in the user menu in the upper right corner.



(i) SYSTEM MAINTENANCE THIS WEEKEND: From Saturday April 20 2024 at 7:00 a.m. ET. to Sunday April 21 2024 at 5:00 p.m. ET.

Log In







Forgot Password?



Help Desk/System Admin contact information: Support Line: 919-531-2700 <u>hiesupport@sas.com</u> <u>Provider Help</u>

Announcements

USER EXPRESSLY CONSENTS TO MONITORING

This system is provided by the State of North Carolina and is for authorized users ONLY. Unauthorized access may result in disciplinary action, civil and criminal penalties. Users have no expectation of privacy.

PAA (Participant Account Administrator)

You must attest to facility user activity for the Q1-2024 quarter. Login with your PAA account and review user activity on your PAA home page. When ready, click the "Attest to Audit" button to complete the audit.

Important Information

Please contact the Help Desk if you are having trouble logging in. Note that 5 invalid attempts will result in a disabled account and the Forgot Password function will not work. See Log In Section in the User Guide for more details.



Clinical Portal Quick Reference Guide – Logging In

Upon successful login, you will see the disclaimer that we do not accept 42 CFR Part two data or psychotherapy notes into NC HealthConnex.

Click "Agree" to proceed.

DISCLAIMER

Please read the following information. It will be updated on an ongoing basis. By using this application, you consent and agree to abide by all applicable federal and state law and the NC Health Information Exchange Authority (NC HIEA) Participation Agreement.

Confidentiality Notice for Alcohol and Drug Abuse Information

Confidentiality of Alcohol and Drug Abuse Patient Records Regulations: (42 C.F.R. Part 2). The federal regulations prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 C.F.R. Part 2. A general authorization for the release of medical or other information is not sufficient for this purpose.

Confidentiality Notice for Psychotherapy Information

Confidentiality of psychotherapy notes: (45 C.F.R. 164.501). This information has been disclosed to you from records whose confidentiality is protected by the HIPAA Privacy and Security Rule. You are prohibited from making any further disclosure of it without the specific written consent of the person to whom it pertains, or as otherwise permitted by the HIPAA Privacy & Security Rule. A general authorization for the release of medical or other information is not sufficient for this purpose.

Physician Responsibility

All or some of a particular patient's information may not always be available through the HIE network. You, as the patient's physician or health care provider, have the ultimate responsibility for obtaining your patient's complete medical history. When treating your patients, always consult them about prior treatments, diagnoses and medications prescribed. You also have the responsibility to collect and retain a patient's written authorization to disclose certain protected health information to other health care providers in compliance with federal law and regulations, where applicable.

Disagree	Agree



Clinical Portal Quick Reference Guide – User Interface

Left Global Menu - Displays at the top left of the screen upon logging in to the Clinical Portal and on certain screens.

NC HealthConnex Powering Health Care Outcomes

🗉 PAA Tools

Search/Chartbook

Messages

> û NC*Notify

🔹 Set Default Application

This menu displays links to various screens depending on your role:

• **PAA Tools:** This view is only available to those with a PAA role. If you **only** have a PAA role, this is the only menu item you will see.

If you have the PAA role and the Clinical role, you will see additional options:

- Search/Chartbook: This link takes you to the Patient Search screen.
- **Messages:** This link takes you to your inbox **if enrolled** in Direct Secure Message (DSM) Webmail through the NC HIEA.
- NC*Notify: If enrolled, this link will allow you to access a dashboardlike view of patient activity through event notifications.
- CSRS (Controlled Substance Reporting System) Report: This link allows you to access CSRS Reports within the clinical viewer. You must be a prescribing provider and **enrolled** in this service to see this option.



Clinical Portal Quick Reference Guide – Patient Search

Below is the patient search screen. You can search by MRN or patient demographics.

Patient Search		×
Patient Search	Patient Search Results	2 ^
MRN	No Results	
Assigned By	Minimum Patient Search Requirements:	
Last Name	- Enter both an MRN Identifier and select an Assigned By (Assigning Authority / Facility Name) value OR	
First Name	- Enter Last Name and either First Name, DOB, or SSN (Last Name and First Name must be a minimum of two characters)	
Middle Name		
Date of Birth		
Social Security Number		



Clinical Portal Quick Reference Guide – Patient Search

Patient Search

Social Security Number

Clear

Search

Patient Search	Patient Search Results	1 D	eclare Patien	t Relationship fo	or records with this warning.	O Declare Patient Relationship	2 ^
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Middle Name		the re	eason	you are	viewing that p	oatient's record.	
Date of Birth							



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Clinical Portal Quick Reference Guide – Declare Relationship

Patient Search	^	Patient Search Resul	ts 🏮	Declare Patie	nt Relationship fo	or records with this warning . 🛛 🎯	Declare Patient Relationshi	P 🗸 ^
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record.



Clinical Portal Quick Reference Guide – Patient Search

Select the reason you are breaking the seal/accessing the patient information from the drop-down menu.

Patient Search				>							
Patient Search	Patient Search Results										
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	>	Declare Patient Relationship	×	EVE STREET, NOTAREAL TOWN NC 20050							
Assigned By		Data in NC HealthConnex does not indicate that you have been granted full c with the patient you have searched. In order to gain one-time access to a pat record, you must "Break the Seal".	onsent ient's	\rightarrow \rightarrow							
Last Name		This declaration will be audited once you have selected a patient.									
demo		Click "Declare Relationship" to continue, or click "Cancel" to return to the									
First Name		search results.									
aduit		Reason For Override*									
Middle Name		Select Reason	~								
		I am a clinician treating this patient									
Date of Birth		Care coordination Conducting a quality audit check Conducting a privacy/administrative audit									
Social Security Number											
Clear Search											



Clinical Portal Quick Reference Guide – Patient Search

Patient Search

Patient Search	Patient Search Resul	Patient Search Results			data that you are not permitted to view. 💿 Override Applied 🖍	
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Last Name						
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First Name	Patient	Index num	ber) wil	l turn blu	ue, indicating it is a	
adult	clickabl	e link to op	en the I	patient's	s chartbook.	
Middle Name						
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Date of Birth	clicked	to expand	and see	e multiple	e MRNs (Medical	
	Resour	ce Number	rs) for a	patient.	Υ.	
Social Security Number	•					
Clear Search						



Clinical Portal Quick Reference Guide – Chartbook

Now you can see the patient's information. The landing screen is the summary which shows the most recent documents.

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	F	DEMO, ADULT F 49y 07/07/1975 MPI: 10	0000021						There ma data that permitted © Ove	y still be restricted you are not l to view. erride Applied
> û		Back to: Patient Search								<u>A</u> <u>A</u>
*		Chartbook 《	→ Aller	gies	🚭 Sorted	by Last Updated, Status	∨ Medi	cations	Sor	ted by Start Date
		Clinical Summary	Details	Category	Allergen	Reaction	Details	Medication	Status 🗘	Start
		Conditions		Propensity to adverse reactions to drug	Ragweed	Other (See Comments)	:	acetaminophen (TYLENOL) 500 MG tablet	In	05/04/2020
	2	Allergies	:	Propensity to adverse reactions to drug	House Dust	Other (See Comments)	:	albuterol (ACCUNEB) 0.63 mg/3 mL nebulizer	In	05/04/2020
		Documents	:	Propensity to adverse reactions to drug	Aspirin	Nausea	:	<u>cetirizine (ZYRTEC) 10 mg capsule</u>	Inactive	05/04/2020
		Immunizations	:	Propensity to adverse reactions to drug	Cyclobenzaprine Itching		:	cinacalcet (SENSIPAR) 60 MG tablet	Inactive	05/04/2020
		Vital Signs	:	Propensity to adverse reactions to	Latex	Rash	:	<u>clopidogrel (PLAVIX) 75 mg tablet</u>	In Progress	05/04/2020
		Lab Results		drug				Page 1 <u>Next ></u>		
		Diagnostic Studies				inite Data Asticity Times				d hu Daault Data
		Procedures	∨ Docu	ments	Sorted by Ac	Livity Date, Activity Time	✓ Lab R	Order ⁶	Posulta Pos	ed by Result Date
		Histories	Details	Doc Туре	Document	Parsed	:	Comprehensive Metabolic Panel (CMP)	Results 04/	23/2020 06:42
		Encounters	:	Consolidated CDA R2.1 Structured Body Document	Continuity of Care Yes Document			Complete Blood Count (CBC)	Results 04/	23/2020 06:09



Clinical Portal Quick Reference Guide – Chartbook

Each section is now searchable, allowing you to get the information you need more quickly.

DEMO, ADULT F 49y 07/07/1975 MPI:	10000021							There may still be restricted data that you are not permitted to view.
Back to: Chart >							1	A A
Chartbook 《	Medication	15						
Clinical Summary	✓ Curre	ent Medications						vancomycin Q
Conditions	Details	Medication	Dose	Frequency		Status	Source	Start Date
Allergies	✓ Histo	rical Medications					Search	Q Sorted by Start Date
Medications	Details	Medication 🗘			Dose	Frequency	Status 🗘	Source Start Date 🗘
Documents		cetirizine (ZYRTEC) 10 mg capsule			10 mg	QD	Inactive	05/04/2020 10:52
Terrereiterti	-	cinacalcet (SENSIPAR) 60 MG tablet			60 mg	QD	Inactive	05/04/2020 10:52
Immunizations	-	diphenhydrAMINE (ALLERGY RELIEF,DIPHE	NHYDRAMIN,) 25 mg	tablet	25 mg	Q1H	Inactive	05/04/2020 10:52
Vital Signs	_	docusate (COLACE) 100 MG capsule			100 mg	Q1H	Inactive	05/04/2020 10:52
Lab Results		guaifenesin (MUCUS RELIEF CHEST ORAL)				Q1H	Inactive	05/04/2020 10:52
Diagnostic Studies		levothyroxine (LEVOXYL) 100 MCG tablet			100 ug	QD	Inactive	05/04/2020 10:52
Procedures		midodrine (PROAMATINE) 10 MG tablet			10 mg	Q.333333333333333333333333	Inactive	05/04/2020 10:52
Histories	:	olopatadine (PAZEO) 0.7 % ophthalmic solu	tion		1 [drp]	QD	Inactive	05/04/2020 10:52
Encounters	:	sevelamer carbonate (RENVELA) 800 mg tal	olet		800 mg	Q.3333333333333333333333	Inactive	05/04/2020 10:52



Clinical Portal Quick Reference Guide – Chartbook

Search results will appear with a yellow highlight.

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		Clinical Summary	↓ Curre	ent Medications					Ţ,	vancomycin Q
		Conditions	Details	Medication	Dose	Frequency	Status	Sour	ce Sta	rt Date
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		Documents		<mark>vancomycin</mark> (VANCOCIN) 1 g in sodium	n chloride 0.9 % 250 mL IVP	В	1 g	Inactive		04/23/2020 00:00
		Transverigations	-	<mark>vancomycin</mark> (VANCOCIN) 1 g in sodium	n chloride 0.9 % 250 mL IVP	B	1 g	Inactive	Sample Provider	04/22/2020 06:00
		Immunizations	-	<mark>vancomycin</mark> (VANCOCIN) 1 g in sodium	n chloride 0.9 % 250 mL IVP	B	1 g	Inactive		04/21/2020 06:00
	Ι.	Vital Signs	_	vancomycin (VANCOCIN) in 0.9% sodiu	m chloride IVPB 2.5 g/500	mL	2.5 g	Inactive	Sample Provider	04/20/2020 16:46
		Lab Results		Vancomycin to be dosed by nephrology	у			Inactive		04/20/2020 14:40
		Diagnostic Studies	-	vancomycin pharmacy consult				Inactive		04/20/2020 13:21
		Procedures		<mark>vancomycin</mark> (VANCOCIN) 1 g in sodium	n chloride 0.9 % 250 mL IVP	B	1 g	Inactive		11/16/2019 06:00
		Histories	:	vancomycin (VANCOCIN) in 0.9% sodiu	m chloride IVPB 1.5 g/250	mL	1.5 g	Inactive		11/15/2019 15:43
		Encounters	•	Vancomycin - Nephrology to dose in Hl	D patient.			Inactive	Sample Provider	11/15/2019 12:05



	ealth Care	Connex												Pat	ient Selection $ \!$			
	ł	DEMO, ADULT = 49y 07/07/1975	MPI: 1	10000002	21											Ther data pern ©	e may still be rest that you are not nitted to view. Override Applie	t ricted
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· ··· ·		Chartbook	«	M	edications													
		Clinical Summary		`	 Currer 	nt Medication	ns									var	ncomycin	Q
		Conditions		1.5	Details		Medication		Dose	Frequency	/		Status	Sour	rce	Start l	Date	
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		Documents			•	vancomycin (\	VANCOCIN) 1 g in so	odium chloride	e 0.9 % 250 mL IV	PB		1 g		Inactive			04/23/2020 00:0	10
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				11	:	vancomycin (\	VANCOCIN) 1 g in so	odium chloride	e 0.9 % 250 mL IV	PB		1 g		Inactive			04/21/2020 06:0	0
	١.	Vital Signs		11	:	vancomycin (VANCOCIN) in 0.9% s	sodium chlorid	de IVPB 2.5 g/500	0 mL		2.5 g		Inactive	Sample Provider		04/20/2020 16:4	16
		Lab Results		11	:	<mark>Vancomycin</mark> t	o be dosed by neph	rology						Inactive			04/20/2020 14:4	10
		Diagnostic Studies			:	<mark>vancomycin</mark> p	harmacy consult							Inactive			04/20/2020 13:2	!1
		Procedures			:	vancomycin (\	VANCOCIN) 1 g in so	odium chloride	e 0.9 % 250 mL IV	PB		1 g		Inactive			11/16/2019 06:0	0
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		Encounters			:	Vancomycin -	Nephrology to dose	e in HD patient	i.					Inactive	Sample Provider		11/15/2019 12:0	15
		Appointments		-														

To print, click on the horizontal ellipses (meatball menu) on the right of the screen.



iii B	DI F	EMO, ADULT 49y 07/07/1975 MPI: 1	0000021									There may still be restricted data that you are not permitted to view.
> Ļ	B	ack to: Chart >								Patient Reports		
۵	(Chartbook 《 Clinical Summary Conditions	Medication Curre Details	ns ent Medications Medication	Do	ose	Frequency		Status			
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	>	Medications Documents	Details	Medication 💝 vancomycin (VANCOCIN) 1	g in sodium chloride 0.9 %	% 250 mL IVP	'B	Dose 1 g	Frequer	ment		Fallent Reports .
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		Vital Signs	-	vancomycin (VANCOCIN) ir	0.9% sodium chloride IVF	PB 2.5 g/500	mL	2.5 g]			
		Lab Results		Vancomycin to be dosed by	nephrology							
		Diagnostic Studies		vancomycin pharmacy con	sult							
		Procedures	:	vancomycin (VANCOCIN) 1	g in sodium chloride 0.9 %	% 250 mL IVF	РВ	1 g	9			
		Histories	:	vancomycin (VANCOCIN) ir	0.9% sodium chloride IVF	PB 1.5 g/250	mL	1.5 g	9			



Make sure "View As" is set to "Patient Summary (PDF)" and that "Report" is set to either "Expanded" (for full chart view) or "Pharmacy" (for pharmacy dispense information).

	DEMO, ADULT F 49y 07/07/1975	MPI: 10000021						There may still be restricted data that you are not permitted to view.		
• ¢	Back to: Chart >			_				A A		
	Download Summary ::= ∀ ~ ∀	View As: Patient Summary (PDF Draw ~ & II Patient Summary Repor	۲) ۹۳ t for ADULT DEMO,	 Report: Patient Summary R Patient Summary F Patient Summary F Patient Summary F 	eport eport eport Expanded) eport (Pharmacy)	ort port (Expanded) port (Pharmacy)				
		Name	Date Of Birth	Gender	Identification Number	Phone	Address			
		ADULT DEMO	1975-07-07	F	MRN: ADULTDEMO	(919) 5707334	7777 MAKE BELIEVE STREET NOTAREAL TOWN NC 20050			
		Allergies Onset Date Inactive	Date Allergen	Category Last Updated A	Medications t Date Medication	Form Strength	Duration Source			



You can use the magnifying glass icon to search the PDF for specific information such as medications or vaccinations.

Back too: Chart Image: Chart Summary (PDF) Report: Patient Summary Report (Expanded) Sord. Image: Image: Chart Summary Report for ADULT DEMO Image: Chart Summary Report for ADULT DEMO Image: Chart Summary Report for ADULT DEMO Patient Summary Report for ADULT DEMO Image: Chart Summary Report for ADULT DEMO Image: Chart Summary Report for ADULT DEMO Image: Report Summary Report for ADULT DEMO Image: Report Summary Report for ADULT DEMO Image: Report Summary Report for ADULT DEMO Image: Report Summary Report for ADULT DEMO Image: Report Summary Report for ADULT DEMO Image: Report Summary Report Summary Report for ADULT DEMO Image: Report Summary Report for ADULT DEMO Image: Report Summary Report Su	DEMO, ADULT F 49y 07/07/1975 M	I PI: 10000021							There may still be restricted data that you are not permitted to view.	
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Patient Summary Report for ADULT DEMO Patient Demographics ADULT DEMO 1975-07-07 F MRN: ADULTDEMO (919) 5707334 7777 MAKE BELIEVE STREET NOTAREAL TOWN NC 2005-02-03 Altergies Altergies 2016-12-13 Ragewed Propensity to mark cartering DUIS	Download Summary View	w As: Patient Summa	iry (PDF)	✓ Report: Pat	ient Summary Repo	ort (Expanded) 🗸 Send				1
Print (Ctrl+P) Patient Summary Report for ADULT DEMO Print (Ctrl+P) Patient Demographics Advance Piece Allergies Allergies Oriset Date Allerge Direct Date Allerge Operation Duths Direct Date Allerge Advance Directions Advance Directions		Draw ~ 🖉 (T) A	-	+ + +	1 of 115 🥥 🖽				
Name Date Of Birth Gender Identification Number Phone Address ADULT DEMO 1975-07-07 F MRN: ADULTDEMO (919) 5707334 7777 MAKE BELIEVE STREET STREET Image: Street in the ima	>	Patient Summary Patient Demograph	Report for ADUL	JT DEMO					Print (Ctrl+P)	
ADULT DEMO 1975-07-07 F F MRN: ADULTDEMO (919) 5707334 7777 MAKE BELIEVE STREET NOTAREAL TOWN NC 20050 Altergies Altergies Alters (none) Alters (none) Advance Directives		Name	Date Of I	Birth Gender		Identification Number	Phone	Address		
Allergies Alerts Onset Date Inactive Date Allergen Category Last Updated At (none) 2016-12-13 Ragweed Propensity to adverse reactions DUHS adverse reactions Advance Directives		ADULT DEMO	1975-07-0	07 F		MRN: ADULTDEMO	(919) 5707334	7777 MAKE BELIEVE STREET NOTAREAL TOWN NC 20050		
Onset Date Inactive Date Allergen Category Last Updated At 2016-12-13 Ragweed Propensity to adverse reactions DUHS Advance Directives		Allergies	· · · · ·	i		Alorte				
2016-12-13 Ragweed Propensity to adverse reactions DUHS Advance Directives		Onset Date	Inactive Date All	lergen Category	Last Updated At	(none)				
to arug		2016-12-13	Ra	gweed Propensity to adverse reactions to drug	DUHS	Advance Directives	Directive Two	a Status		

Click the printer icon to print the chosen record.

DEMO, ADULT F 49y 07/07/1975	MPI: 10000021						There may still be restricted data that you are not permitted to view.
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•	Patient Summary Rep	port for ADULT DEMO					Print (Ctrl+P)
	Name	Date Of Birth	Gender	Identification Number	Phone	Address	
	ADULT DEMO	1975-07-07	F	MRN: ADULTDEMO	(919) 5707334	7777 MAKE BELIEVE STREET NOTAREAL TOWN NC 20050	
	Allergies Onset Date Inact	tive Date Allergen	Category Last Undated At	Alerts (none)			
	2016-12-13	Ragweed	Propensity to adverse reactions to drug	Advance Directives	Directive	Type Status	



Select which pages you want to print and click the "print" button.

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Patient Summary Report for ADULT DEMO

Medication	Date	Status	Form	Strength	Duration	Qty	Indications	Instruction	Refills	Source
DS) 800-160 m g tablet										
loratadine (CL ARITIN) 10 m g tablet	2014-08-21	Executed			1892 days			Take by mouth	0	Duke University Health System
ciprofloxacin H Cl (CIPRO) 25 0 MG tablet	2012-05-19	Executed			2716 days			Take by mouth	0	Duke University Health System
aspirin 325 M G tablet	2011-03-31	Executed			3131 days			Take by mouth	0	Duke University Health System
b complex mul tivitamin (NEP HROCAPS) 1 mg capsule	2011-03-29	Executed		1 {capsule}				Take 1 capsule by mouth once daily.	0	Duke University Health System
famotidine (PE PCID) 20 MG tablet	2011-03-29	In-Progress		20 mg				Take 20 mg by mouth once daily.	0	Duke University Health System
b complex mul tivitamin (NEP HROCAPS) 1 mg capsule	2011-03-29	In-Progress		1 {capsule}				Take 1 capsule by mouth once daily.	0	Duke University Health System
omeprazole (P RILOSEC) 20 MG DR capsu le	2008-03-18	Executed		20 mg				Take by mouth	0	Duke University Health System
ferrous fumara te-folic acid 32 4 mg (106 mg i ron)-1 mg	2007-11-21	Executed						Take by mouth	0	Duke University Health System
Vaccine		Date		Route		Site		Source		

Influenza HV3 IM pres_free 2016_09_01

Duke University Health System



Clinical Portal Quick Reference Guide – Documents

	NC He Powering H	ealthCo fealth Care O	DINNEX					Patient Selection	✓ S NCHIEA.
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	\square	E	Back to: Chart >						<u> </u>
Visit/Hospital	> ¢		Chartbook	Documents	5				
Information will	\$	T	Clinical Summary	∨ Docu	ments			Search	Q Sorted by Event Date
be in			Conditions	Warning: D	ownloading documents may pres	ent security and privacy risks. Downloade	d documents should be removed from the loc	al device after use.	
Documents			Allergies	Details	Document 🗘	Source 🗘 Facility 🗘 Duke University Health System		Ev	vent Date 🗘
		5	Medications	:	Continuity of Care Document			05	5/04/2020 11:12
		2	Documents		<u>Continuity of Care Document</u>		Duke University Health System	04	4/27/2020 10:25
			Immunizations	:	Continuity of Care Document		Duke University Health System	04	4/24/2020 12:20
			Vital Signs	:	<u>Continuity of Care Document</u>		Duke University Health System	04	4/23/2020 14:16
		T	Lab Results	:	<u>Continuity of Care Document</u>		Duke University Health System	04	4/20/2020 12:08
			Diagnostic Studies	:	<u>Continuity of Care Document</u>		Duke University Health System	04	4/19/2020 00:12
			Procedures	:	<u>Continuity of Care Document</u>		Duke University Health System	04	4/13/2020 10:24
			Histories	:	Continuity of Care Document		Duke University Health System	03	3/09/2020 13:14
			Encounters	:	Continuity of Care Document		Duke University Health System	02	2/26/2020 18:13
			Appointments	:	<u>Continuity of Care Document</u>		Duke University Health System	02	2/24/2020 00:16
				•					10010000000



Clinical Portal Quick Reference Guide – Documents

> 🗅 Lab Results: Anything abnormal will be in red.

	ealth Care	Connex							Patient Selection	CHIEA.
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		Allergies Medications	Order Complete Blood Count (CBC)	Trend	Result 1	Result 2	Result 3	Result 4	Result 5	Result 6
3	>	Documents Immunizations Vital Signs Lab Results	Comprehensive Metabolic Panel (CMP)		Duke University Health System	Duke University Health System	Duke University Health System 04/20/2020 12:39 Duke University Health System	Duke University Health System 01/04/2020 11:43 Duke University Health System	Duke University Health System 10/01/2019 12:31 Duke University Health System	Duke University Health System 09/09/2019 10:10 Duke University Health System
		Diagnostic Studies Procedures Histories	POC Glucose Whole Blood		04/22/2020 05:26 Duke University Health System	i icolui systeiii	, icolul system	reau system	ricalul system	-
		Encounters Appointments	POC Critical Panel (DRH Only)	≣≣	<u>04/21/2020</u> <u>07:19</u>	<u>02/24/2020</u> <u>13:33</u>	<u>01/27/2020</u> <u>12:47</u>	<u>10/01/2019</u> <u>12:39</u>	<u>09/07/2019</u> <u>15:49</u>	



Clinical Portal Quick Reference Guide – Documents

Diagnostic Studies contains imaging reports.

	ealth Health Ca	Connex re Outcomes					Patient Selection $$
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		Conditions	-1	Details	Study 🗘	Ordering Clinician	Test Date 💲
		Allergies	-1	•	IR dialysis fistulagram		
	L	Medications	- 1	:	IR dialysis fistulagram		
	>	Documents	1	•	IR dialysis fistulagram		
		Immunizations		•	<u>US hemodialysis access</u>		
		Vital Signs			IR dialysis fistulagram		
	١.	Lab Results		:	IR dialysis fistulagram		
		Diagnostic Studies		:	<mark>In his histulagram</mark>		
		Procedures		:	<u>US regional anesthesia images</u>		
		Histories		:	<u>US regional anesthesia images</u>		
		Encounters		:	IR central venous catheter placement		
		Annointments			IR central venous catheter placement		


Clinical Portal Quick Reference Guide – Documents

Histories includes the Social Determinants or Health Related Social Needs (HRSN)

	NC HealthConnex				Patient Selection	NCHIEA.	
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	•	Back to: Chart >				A A A	••••
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\$	>	Clinical Summary	V Medical History			Search	ર
		Conditions	Details Description Onset Fac	cility	Last Updated		-1
		Allergies	✓ Social History	Search	Q Sorted	by Last Updated, Descript	ion
		Medications	Details Description 🗘 Onset 🗘 Faci	lity		Last Updated 🗘	
		Documents	Alcohol intake 09/07/2019 Duk	e University Health Syste	m		
		Terrentert	Never smoker 02/06/2019 Duk	e University Health Syste	em		
		Immunizations	Exposure to SARS-CoV-2 (event) (Not sure) Duk	e University Health Syste	em	04/20/2020 10:52	
		Vital Signs					
		Lab Results	 Family History 			Search	2
		Diagnostic Studies	Details Description Onset Fac	cility	Last Updated		
		Procedures	Social Determinants	Search	Q 🚽 Sort	ted by Entry Date, Descript	ion
		Histories	Description 🗘	Valu	e Status 🗘 Source	Facility Entry Date 🗘	
_	T	Encounters	At any time in the past 12 months, were you homeless or living in a shelter (including now)?	No		DUHS 02/10/202516	5:40
			In the last 12 months, was there a time when you were not able to pay the mortgage or rent on time?	No		DUHS 02/10/202516	5:40
		Appointments	In the past 12 months, has lack of transportation kept you from medical appointments or from getting medi	cations? No		DUHS 02/10/202516	5:40 💌

