Peds Pre-Rounding Information

Must Cover:
- Content of SOAP presentation- ask them to list these so you have an idea of where they are
- Where to find necessary information for pre-rounding, following a template
- Have them go through pre-rounding process with the practice patient
- Video Visits: https://www.youtube.com/watch?v=5kbKdwe_6CU&feature=emb_title
  - Depending on how much time you have, you can show this video
  - Please also be sure to put the link in the chat for students to access at a later time

General Session Outline:
5 min- introduce yourself, give them a quick outline of what you'll be doing
10 min- Log into Practice Environment (have them do this with you so that they can follow along in your explanations)-
15 min- demonstrate useful tabs following a pre-rounding template (here) as a guide
30 min- students practice pre-rounding on a specific patient
15 min- Either in groups or as a larger group, practice translating pre-rounding into a presentation
       Can use breakout rooms vs. larger group

Login: try to have students use different usernames within the range listed below (it will still work if some students use the same log-in but I don't want it to crash if everyone uses the same username)
- **Track E2:** MEDSTU56→ MEDSTU65 (ie- MEDSTU56 or MEDSTU57… or MEDSTU65)
- **Track F:** MEDSTU66→ MEDSTU80 (ie- MEDSTU66 or MEDSTU67… or MEDSTU80)
- Password is **train** for all logins

Context: PED GENERAL LOGIN

Patient to use: Achilles, Jefferson (Pneumonia)
- Be sure to go to "lists" and search all admitted patients (you must be in the current admission to view all the flowsheet data)

Pre-Rounding: Feel free to add to this if you know any tricks that are not included!

1. Go through where to find each piece of information
2. Students will "pre-round"
   - After they have collected information, give them the sign out, physical exam and I/Os
   - They should attempt an assessment and plan (although this is not the focus)

SUBJECTIVE:
- Overnight events
  - Nursing Notes
  - Sign Out: from residents, some rotations have a sign out page
  - Talk to patient
  - MAR- did they get meds for overnight events?

OBJECTIVE:
- Vitals: Peds IP Flowsheet, IP Vitals, IP Vitals Graph
- I/Os: IP Flowsheet, I/O
- Weight: IP Wt, Peds IP Flowsheet
  - NOTE: only one documented for this patient, so no trends
- PE: obviously they have to see the patient
- Labs: Results review
- Imaging: Results review, Chart Review→ Radiology

ASSESSMENT:
- Remind them that this should be more than repeating the one liner!

PLAN:
- Make sure they know this is by PROBLEM (for most Peds services, but some of the specialty services will present by SYSTEM)
- Explain both ways of presenting plan, but have them practice by problem
- Should know what meds the patient is getting (IP MAR)

INFO THEY WILL NOT FIND IN CHART

Sign Out:
- NAEON
- Chest tightness and shortness of breath improved
- Feels close to baseline

PE:
- If time, have them tell you which exam findings they would look for on the patient/which are relevant

- Findings (feel free to add or subtract as you see fit):
  - **Gen:** Sitting in bed.
  - **HEENT:** NCAT. MMM. OP clear.
  - **Neck:** Supple. No LAD.
  - **Chest:** Scattered wheezes. No retractions or increased work of breathing
  - **Heart:** Normal rate and rhythm, no murmurs.
  - **Abd:** Soft. Non-tender, non-distended. No rebound or guarding. BS present.
  - **Ext:** No edema. 2+ peripheral pulses.
  - **Neuro:** Awake, alert. No focal deficits noted.

Additional things you could cover if time allows:
- How to steal a template from other people
- Notes- how to start/share
- Wrench in specialty specific important tabs in MICHART (not the practice environment)
  - **Purpose:** this will allow students to make changes in their own MiChart (so that they stick) without breaking HIPAA
  - [INSTRUCTIONS](#)

MiChart Relevant Info:

Helpful Tabs under the Summary page
- Peds IP flowsheet
- IP Fever
- IP Wt
- I/O (Input/Output)
- IP Apnea/Bradycardia
- IP MAR

Pages to add (or move up) on the main row of tabs:
- Growth Curve - both outpatient and inpatient pediatrics use the growth curve ALL the time to determine if there is a significant disease process occurring that may be interfering with growth
- Immunizations - scroll to the bottom to see if the patient is missing or due for any immunizations

Pages that are helpful in general:
- Results Review
- Flowsheets
- Appt Desk - to see if the patient has upcoming outpatient appointments already scheduled, especially helpful for coordinating complex care or preparing for discharge

Tabs specific to newborn
- Infant screens - all newborn tests and whether or not they have been completed can be found here

- Delivery - should be a link to the mother's chart to find additional and pertinent maternal history
- Pregnancy

**Answer as many questions as you want to about clerkship year in general, if you don't have time, let them know that they can contact their track advisors.