

## HEPMA tips

1. Remember to **prescribe oxygen** on HEPMA

### When transcribing

2. Remember to allocate the patient to the appropriate group in the **Monitoring and Assessment** tab, otherwise this might delay nurses administering drugs.
3. For PRNs, (e.g. paracetamol) **prescribe every 6 hours** instead of QDS (7 am, 12 pm, 5 pm, 10 pm). This will enable nurses to administer the medication outside of the QDS window, without asking doctors on the ward to amend it.
4. When transcribing (e.g. PRN salbutamol 100 or 200microgram) you can enter PRN 200 microgram in the dosage and specify in the PRN notes 'PRN 100 or 200 microgram', then nurses can administer 100 or 200 microgram.
5. When transcribing from the paper Kardex, specify under **Order Note** the start date of antibiotic/steroid (if a stop date has not been put in place yet). This will aid the team to decide on when to stop antibiotics/steroids later on.

### Shortcuts

6. To resume/discontinue/suspend a medication, hover over the medication and right-click, instead of clicking into the medication then choosing **Order Modify** etc.
7. To resume/discontinue/suspend multiple medications, you can select multiple medications under **Bulk change**.
8. Suspend all orders e.g. when the patient is transferred to a non-HEPMA ward or if the patient dies. Go to **Inpatient Rx**, click **All orders**, then **Suspend all orders** and select the appropriate reason.

### Others

9. For inhalers, select **Will self-administer this drug** on the **Order Modify** page.
10. To record allergy/sensitivity for combination drugs (e.g. co-amoxiclav), you will need to record separately both as 'amoxicillin' and 'clavulanic acid'.
11. **Add order note** is under **Order Modify**, not **Order Notes**.
12. Previous admission record: To view previous admission HEPMA record for patients that are not currently inpatients, click **Patient** on the home page, enter the patient's details, select **Previous Care Episode**, select the relevant episode, then **View episode**.
13. To see all protocols, click **Show all** when in the **Protocol** section. Example of available protocols include:
  - a. Anticipatory palliative care medicines
  - b. SC/PO/IV – cyclizine, metoclopramide, ondansetron (PO/IV)
  - c. Exacerbation of COPD
14. For palliative care SC infusion (e.g. 24 hour SC morphine infusion) search for '<drug> AS CHARTED subcutaneous infusion' under **Drug** and prescribe it as PRN.
15. Either/Or Protocol (e.g. for salbutamol): You are able to prescribe a variable dose of salbutamol in this Either/Or protocol. For example if the default is set as 2.5mg or 5 mg, nurses would be able to administer 2.5mg or 5mg. The dose can be adjusted as needed by the prescriber.



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