Epic Data Sources: Reporting Workbench

Intro to Query Tools for Research

Spring 2021



Epic at a glance

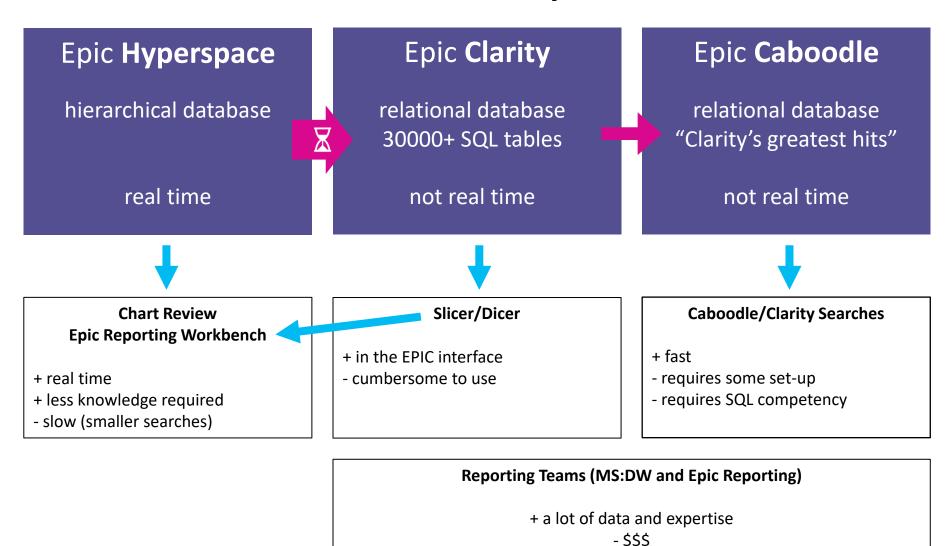
- In place at MSH since 2011, MSQ since 2013
- In clinics since 2008 (now hundreds)

- Documentation from providers, nurses
- Visit details, timestamped events
- Orders, "flowsheets"
- Pulls in data from ADT, Bed Mgmt, Labs, Rads, Muse, Echo, Cath, Path, financials & more

Self Service Tools

- Built in Epic Tools
 - Slicer Dicer
 - Reporting Workbench
- Need to Work with Data Team
 - Caboodle (not self-service)
- Other Sources
 - Mount Sinai Data Warehouse (MSDW)

Data in Epic



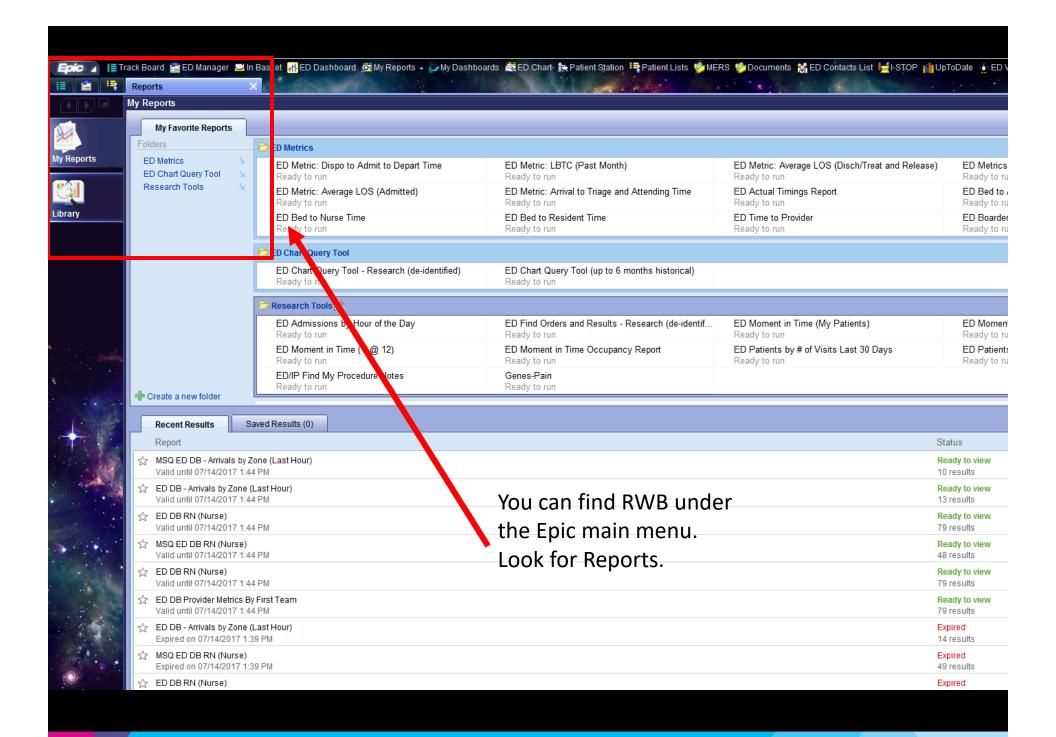
- slower turnaround

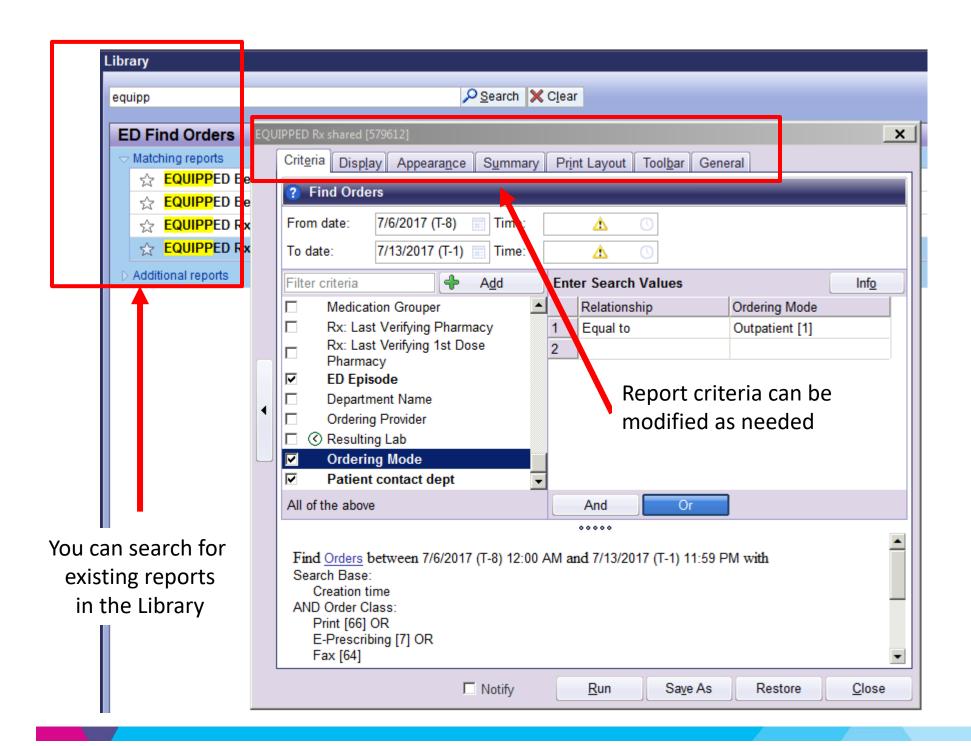
- Hierarchical
 - Slow. And don't bother pre-filtering (sometimes a lack of specificity is good)
- Identify active/recent patients that match specific criteria
- Can return data on 10,000+ fields

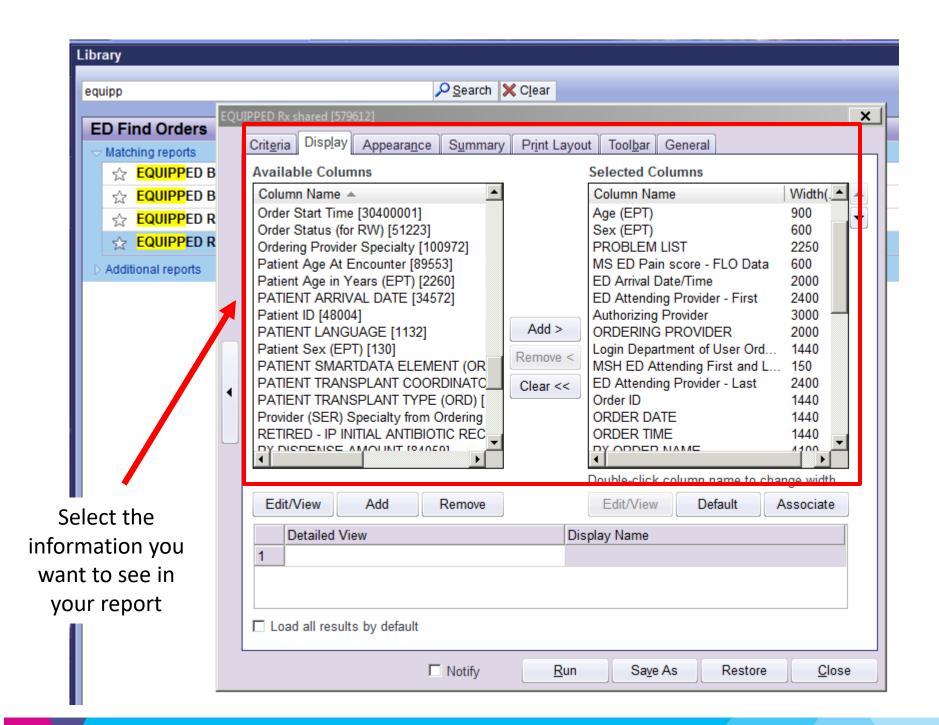
- ALWAYS PHI
 - Links to chart
 - Very precise
- Current Uses
 - Administrative/Operations Reports
 - Data-gathering before meetings
 - Abstracts (May require IRB)
 - Grant proposals (May require IRB)

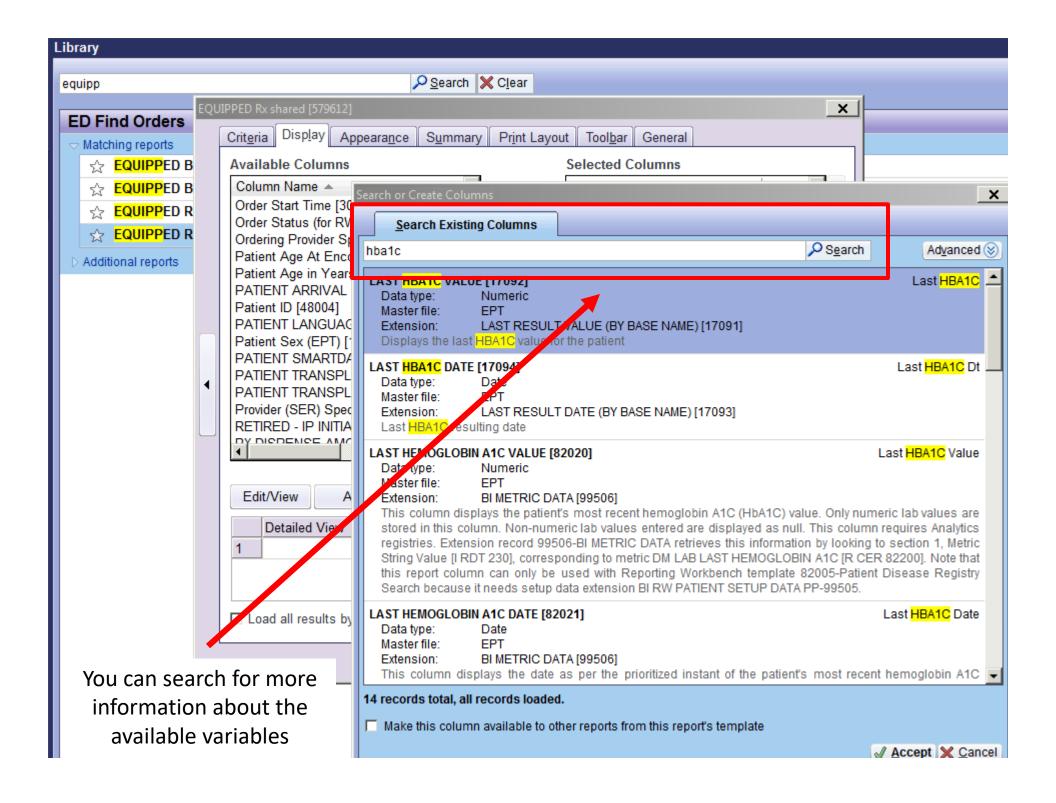
- Admin Use Examples:
 - Who currently meets sepsis criteria in ED?
 - Among patients discharged 24+ hours ago, which providers haven't signed their notes?
 - What is the turnaround time for nurses on 10C to acknowledge new orders?
 - Which patients got procedural sedation last week (and was the documentation satisfactory?)

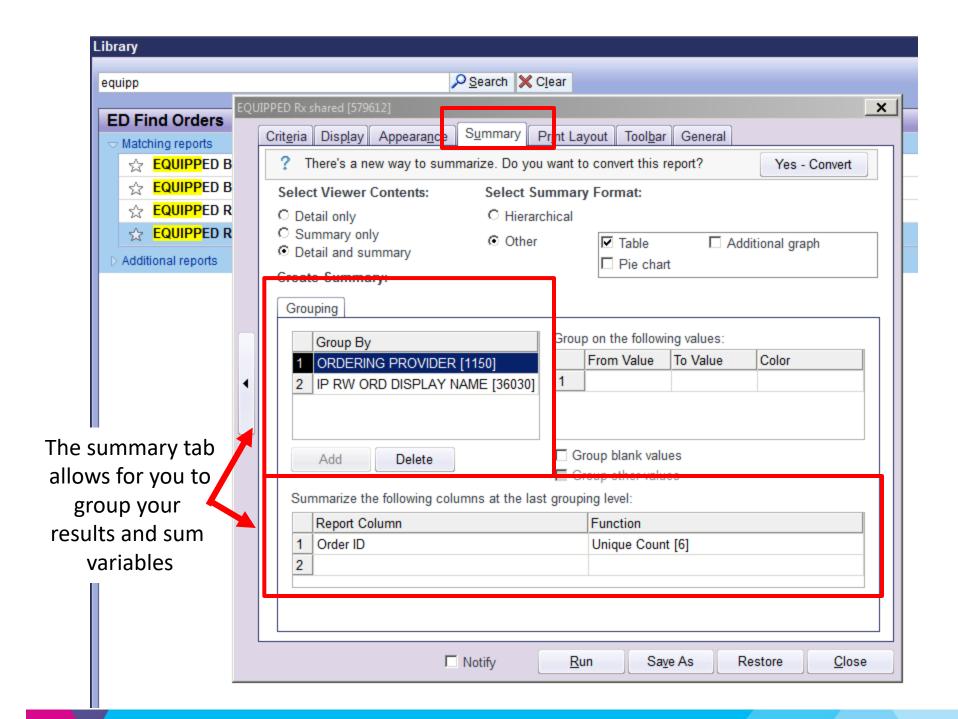
- Research Use Examples:
 - Providers ignoring BEERS criteria upon elderly d/c
 - Is "10/10" pain more likely to be admitted?
 - What are patient characteristics in mis-triaged visits?













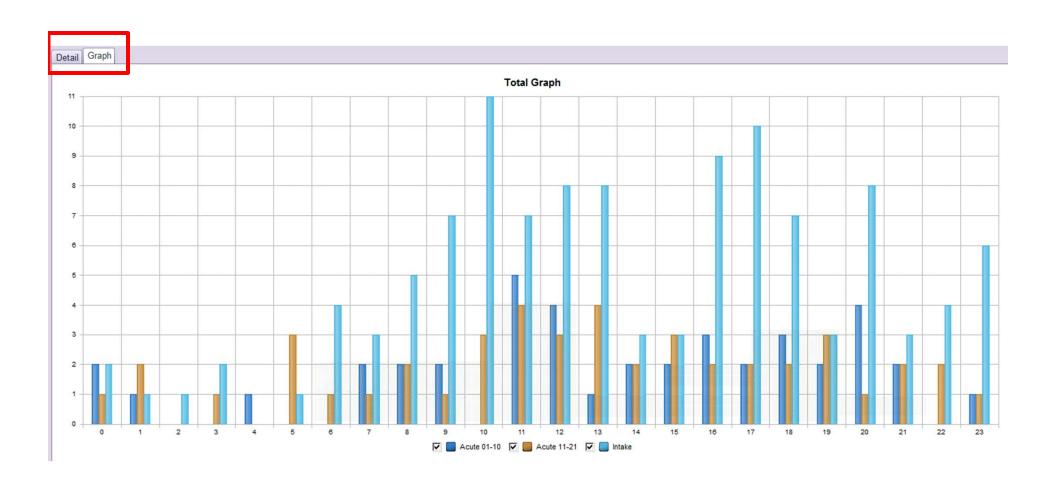
Be Patient! Some reports may take time to run

Make sure you load all of your encounters before any sorting. Large reports may be truncated initially.

Detail Summa		200000000000000000000000000000000000000									2002 Pro 0.000
Results loaded: 50 of 833 Results shown: 50 of 50									Reload Select All Show Al		
MS IP RWIUC	Department	Svc Date	Admit Instant	Patient Name	MRN	Procedure	Px Code	Charge Flag	Qtv	Billing Provider	Created By
MSQ PHYSICAL THERAPY	MSQ PHYSICAL THERAPY	04/07/2013	03/28/2013 2013		11	PT THERAPEUTIC EXERCISES 15 MIN	45101478	MODIFIED	1	MASTAKOURIS, THOMAS	GREY, JAMECE
MSQ PHYSICAL THERAPY	MSQ PHYSICAL THERAPY	04/07/2013	03/28/2013 2013		2.7 H	PT FUNCTIONAL THERAPEUTIC ACTIVITIES 15 MINS	45101484	VOIDED	1	MASTAKOURIS, THOMAS	GREY, JAMECE
MSQ PHYSICAL THERAPY	MSQ PHYSICAL THERAPY	04/07/2013	03/28/2013 2013		2 2 H	PT GAIT & STAIRS TRAINING 15 MIN	45101470	MODIFIED	1	MASTAKOURIS, THOMAS	GREY, JAMECE
MSQ PHYSICAL THERAPY	MSQ PHYSICAL THERAPY	04/07/2013	03/28/2013 2013		2.7 H	PT NEUROMUSCULAR RE-EDUCATION & BALANCE 15 MIN	45101494	MODIFIED	1	MASTAKOURIS, THOMAS	GREY, JAMECE
MSQ RESP THERAPY	MSQ RESP THERAPY	04/07/2013	03/02/2013 2132	*** ** * *		RT AIRWAY INHALATION TREATMENT	44294640	MODIFIED	1	PLOKAMAKIS, MICHAEL	RENE, LESLY
MSQ RESP THERAPY	MSQ RESP THERAPY	04/07/2013	04/01/2013 0559		1 441	RT NASAL CANNULA	44201263	MODIFIED	1	DI SCALA, RENO	RENE, LESLY
MSQ RESP THERAPY	MSQ RESP THERAPY	04/07/2013	03/30/2013 0554	:	7 6	RT NASAL CANNULA	44201263	MODIFIED	1	TRUONG, KEN	CHARLEMAGNE, STEPHANIE
MSQ RESP THERAPY	MSQ RESP THERAPY	04/07/2013	04/04/2013 1439		***	RT AEROSOL TREATMENT SUBS	44201278	MODIFIED	1	JAWAID, MOHAMMAD	CHARLEMAGNE, STEPHANIE
MSQ RESP THERAPY	MSQ RESP THERAPY	04/07/2013	04/04/2013 1439	**** * * *	414	RT NASAL CANNULA	44201263	MODIFIED	1	JAWAID, MOHAMMAD	CHARLEMAGNE, STEPHANIE
MSQ RESP THERAPY	MSQ RESP THERAPY	04/07/2013	03/07/2013 0153	•	** * 1	RT AEROSOL TREATMENT SUBS	44201278	MODIFIED	1	PATEL NIMESHA	CHARLEMAGNE, STEPHANIE
MSQ RESP THERAPY	MSQ RESP THERAPY	04/07/2013	04/05/2013 1123		117	RT NON-REBREATHER 02 MASK	44201381 (CPT®)	MODIFIED	1	ZOUBTSOVA MINZALIA	SALAZAR, ANGELA

This is the what your report will look like. Each encounter will be one row of data with each of the columns you selected .

RWB Graphing Capabilities



Pros:

- No external costs
- Very precise
- Can adapt existing reports for your own needs
- Can return almost anything related to a visit
- Easy to export to Excel or jump into chart
- Some reports can be automated/e-mailed

Cons:

- Struggles above "visit-level" (patient, department)
- Limited within visits information (flowsheets, movements)
- Slooooooowwwww
- Requires Epic access (read only is fine)
- May require two queries (e.g. orders+notes) and join tables

Important to Remember

- How are you using the data:
 - Research requires an IRB!!!
 - Speak with research faculty about requirements
 - IRB determines if study is exempt
- Start with least amount of PHI necessary
- You are responsible for your data
 - Keep data secure (computer, email, drives)
 - Reported data must be aggregated for research purposes

Next Steps

- Read and complete the attestation
- If you are unsure of how to proceed:
 - Submit a <u>request</u> to the EM Analytic Core
 - Review the tutorials
 - Discuss your project with a research faculty member
- Check out the research trainings offered