



Hafizullah Mahmudi <hefd.hafiz@gmail.com>

Re: Validation range for vital signs

1 message

Hafiza jamily <hafizaajamily@gmail.com>

Tue, May 21, 2019 at 12:20 PM

To: Hafizullah Mahmudi <hefd.hafiz@gmail.com>

Cc: Nisar Niazi <nisarniazi123@gmail.com>, maihan abdullah <afghanpath@hotmail.com>

Dear Ustad Hafiz,

Thank you for your hard work. As discussed in the meeting the changes that needs to be brought in the EMR are the following:

1. adding a variable in by name of stage in the diagnoses section.
2. in the examination field the list should be added like the previous list provided, meaning this should have a box and a sub box.
3. vital signs section should be renamed to nursing care.
4. in the lab test section, doctors should allowed to select multiple options.
5. initial diagnosis should be renamed to impression
6. in the co morbidity section, it should be allowed to select multiple options.
7. recommendation field should be divided into two sections by name of diet recommendation and other recommendations which include blood transfusion, Tab etc .

For clarifying visit option in data base: when the patient is first registered in the EMR it is called new visit. After, when the patient comes for chemotherapy, blood transfusion, examination or other services related to his/her first morbidity, it is called return visit.

Difference between cycle and visit which was your concern: visit can be for anything, for example, blood draws, diagnostic tests, follow up of patient, as well as chemotherapy. However, cycle is only when the patient comes to obtain their chemotherapy medication.

Regarding which tabs may change when the patients have return visits are: besides patient demographic information in every return visit, doctors can make changes to any of the tabs.

And in the cycle plan, which is related to the nurse section, the prescription should be view-able to nurses as they prepare the medication.

Thank you,
Hafiza

On Thu, May 16, 2019 at 12:25 PM Hafiza jamily <hafizaajamily@gmail.com> wrote:

Dear Ustad Hafiz,

Thank you for adding the cycle options. We will see it as we are not able to check it now.

I have also mentioned in a previous list that the doctor just prescribes the medicine list which include chemotherapy medicines and other medicines, and nurse duty is to implement that order to patients.

No, the list of medication is not added in the system yet, but the suggestion is to add an optional section. I asked our pharmacist and he said it would be better to manually add the non chemotherapy medicine for now, and then after a while we can make a non-chemotherapy medicine list.

Blood transfusions are also prescribed by doctors. They write the blood type and blood cc of patients and when the nurses do the blood transfusion, they just write the date of it. Don't add the donor blood option as the patients bring blood from outside of center.

We will come Saturday to discuss if it is confusing.

Thank you.
Hafiza

On Thu, May 16, 2019, 9:34 AM Hafizullah Mahmudi <hefd.hafiz@gmail.com> wrote: