

# Emergency Medicine



## One Note Documentation - Attendings

Date Created: March 2024

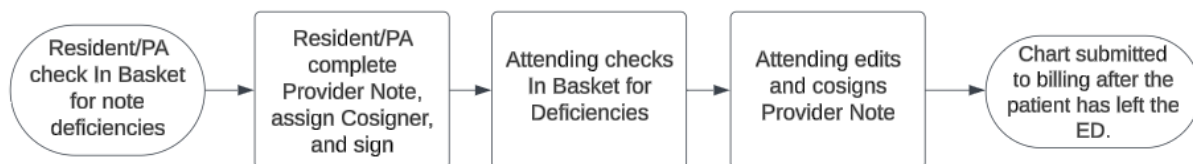
Date Reviewed: 3/19/2024

Reviewed By: B. Connell

### Overview:

The One Note initiative is intended to simplify provider documentation and streamline the process of attestation. This will reduce the number steps required to document care, eliminate the need for multiple attending notes, and allow providers to easily identify next steps in completing their documentation.

### Workflow



### Instructions

#### Using In Basket to Identify, Edit, and Sign Resident/PA Notes Ready for Cosignature

1. To see notes that have been signed by the resident or PA and are awaiting your attestation, check the “**Cosign Notes**” section of the In Basket:

My Incomplete Notes	2/2
Chart Completion	6/6
Cosign Notes	1/1
My Incomplete Charts	2/3

To cosign each note, follow the steps below. (The process varies depending on whether it’s a Provider Note or Procedure Note.)

## For Provider Notes

1. Right-click the note and click **“Edit”**, OR left-click the note and select **“Edit”** from the ribbon:



2. Review and edit the note as needed. Complete the Attending section (**green box**), which now includes the attestation statement (**red box**) as well as space for any additional free text (**blue star**):

**NOTE:** If the patient left without being seen or was seen by the resident/PA but then left before being seen by the attending, you should check the **“Patient left without being seen”** or the **“Patient left prior to attending evaluation”** under Premature Departures to make the attestation deficiency disappear.

NoteWriter Welcome

Chart Review Snapshot Triage Workup Dispo Orders ED Notes

HPI ROS Phys Exam Assessment/Plan/MDM Updates PGY-3 Attending/Attestation

**ED Attestation**

☐ Smoking and Tobacco use cessation counseling visit

☐ Alcohol and Substance Abuse counseling visit

**Attending**

☐ Attending-Only Case

**Resident**

☐ Present, saw, evaluated, and participated in care. Agree with hx, ROS, PMH/FH/SH and PE as documented by the resident, except as noted.

**Medical Student**

☐ Present, saw, and evaluated the patient. Confirmed hx, ROS and PMH/FH/SH, as documented by the student.

**Physician Assistant**

☐ I personally encountered the patient. I personally directed the diagnostic, therapeutic, and consultative decisions. I have reviewed the PA documented history, exam, and MDM. I performed a substantial portion of the patient care.

☐ PA saw patient primarily.

**Scribe**

☐ The documentation recorded by the scribe accurately reflects the service I personally performed and the decisions I made.

**Nurse Practitioner**

☐ I personally encountered the patient. I personally directed the diagnostic, therapeutic, and consultative decisions. I have reviewed the NP documented history, exam, and MDM. I performed a substantial portion of the patient care.

**Premature Departures**

☐ Patient left prior to attending evaluation.

☐ Patient left without being seen.

**Additional Documentation**

Critical care time (excluding procedures) [ ] Advanced Care Planning [ ]

E/M Caveat

Intoxicated Dyspnea Unstable Vital Signs Mental Status Changes

Dementia Language Barrier Intubated Developmental Delay

Insert SmartText

★

**Note:** You only need to write and sign **ONE** note per encounter. There is no longer any need to log in after the encounter, create a separate attestation note, and sign it. We expect this should save you significant time!

3. Once all sections of the note are complete and accurately reflect the ED encounter up to that time, sign the note. Once the note has been signed by the Attending, and the patient has left the ED, it will be automatically sent to billing.
4. The deficiency should drop from your In Basket.

**Note:** When reviewing resident notes, you can opt to chart using EITHER style:

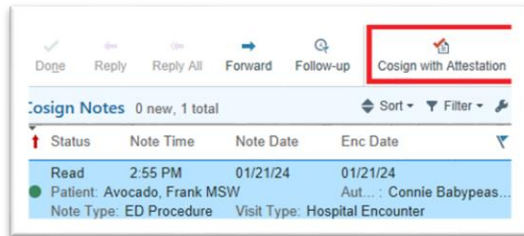
- **“Single Shared Note”**: edit resident note (HPI/ROS/PE/MDM); click resident box in attestation section; sign
- **Separate attending Note**: click resident box in attestation section; write separate note in attending section; sign

#### **Important Notes:**

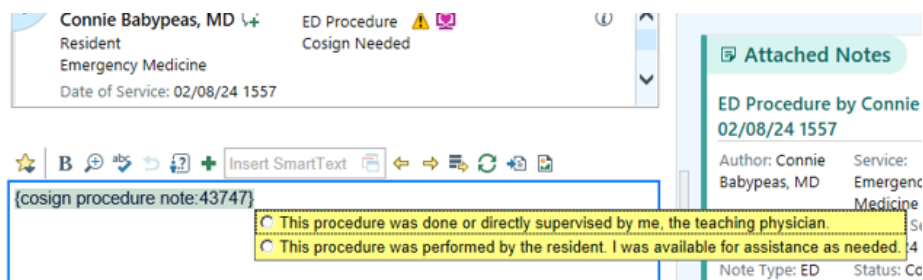
- **Most importantly**: if you edit the Attending section of the Provider Note BEFORE the Resident/PA has completed and signed their portions of the note (HPI, ROS, PE, and MDM), **it is essential that you Pend (or Share) the note instead of signing.**
  - Why? Once the Attending signs the note, it is considered complete. If you sign the note prematurely, the Resident/PA will no longer see a charting deficiency in their In Basket, and therefore won't know to complete the note. Then, when our billing team reviews the note several days later, they will have to send it back to you to complete.
- All residents and PAs now receive charting deficiencies in their In Basket for incomplete notes. This allows them to easily identify remaining documentation tasks. (Attendings will continue to receive these deficiencies as well.)
- You can sign a note, including the attestation statement, as soon as it is complete. You no longer need to wait until after the encounter to sign.
- If the Resident or PA edits and resigns the note, it will return to the Attending In Basket for cosignature.
  - Why? This is by design, so that you can review their changes.
- Additions to the ED Course automatically appear in the Provider Note, and do not require re-signing the note.
- To send the note to billing, one of the attestation checkboxes in the Attending section must be checked. If the note is signed, but an attestation checkbox is not checked, then starting one hour after the patient leaves the ED, you will see an In Basket deficiency asking you to enter an attestation statement.

## For Procedure Notes

1. Right-click the note and click **“Cosign with Attestation”**, OR left-click the note and select **“Cosign with Attestation”** from the ribbon:



2. Click on the text box and press **F2**. This will show two possible attestation statements:
  - This procedure was done or directly supervised by me, the teaching physician.
  - This procedure was performed by the resident. I was available for assistance as needed.



3. **To bill for the procedure, select the first statement “This procedure was done or directly supervised by me.”**
  - a. For uncommon cases where a resident performed a minor procedure, such as the insertion of an intravenous line, and you did not directly supervise the procedure, you can select the second statement (“This procedure was performed by the resident. I was available for assistance as needed.”) In that case, the procedure will **not** be billed.
4. Sign the note.

## Notes:

- Each procedure note must be signed individually and separately.
- Residents must specify a cosigner. This is optional for PAs.
- If the procedure note is sent to the wrong attending, you can reassign it.

[END OF ATTENDING INSTRUCTIONS]