When scheduling a current inpatient for a future outpatient MRI, create a new Orders Only encounter to ensure the appointment will not be attached to the current inpatient visit by following these steps.

1. Click on the Epic button, select Patient Care, Orders Only

Patient <u>C</u> are	🕨 <u> C</u> hart
Sc <u>h</u> eduling	► Sy Encounter
HĪW	Addendum
Enterprise <u>B</u> illing	🕨 <u>म</u> ospital Chart
Reg/ADT	Enter/Edit Results
S <u>u</u> rgery	 M Immunizations
Pharmac <u>v</u>	► 📲 Patient Lists
Referrals	L Telephone Call
Kadiology	Refill Medication
R <u>e</u> ports	Send Letter
Report Management	Crders Only
T!-	

2. Select patient

		Patient Lookup	×
Select Patient (CSN Lookup/Create Patient <u>R</u> ecent Pat	ients	
Name/MRN:	Test, Patient	EPI ID:	
SSN:		Sex:	9
Birth date:		Service area:	BEAUMONT HEALTH SYSTEM 🔎
🗆 <u>U</u> se sounds-lik	(e		
New	Eind Patient Clear]	Accept Cancel

3. Enter ordering provider, then click Accept

	New Encounter for Test, Patient					
<u>D</u> ate:	1/28/2020					
Pro <u>v</u> ider:	SMITH, J M	~				
D <u>e</u> partment:	5 WEST TR					
	<u>A</u> ccept <u>C</u> ancel					

4. Click Add Order on the bottom left of the screen

	Summary Chart I 1/28/2020 visit with Images Questionnaires	teview Results Review Demographics Letters Charges Order Review Orders Only Encounter	€ ⊕ (?)
Test, Patient Male, Styo, 12/1/1967 MNR 9999950 Code: Not on file (no ACP docs) P Search PCP Primary Cory, MEDICARE/MCR P Naregieze Previalin G CrCl: None	ORDERIL OLIV Sign Viet C	P Sign Visit ≠ ≠ Sign Visit ≠	
1/28 ORDERS ONLY No vital signs recorded for this encounter. CARE GAPS 8			
LAST 3YR 9/ Ancillary (9) A No results PROBLEM LIST (1)			
Social Determinants: Not on file			
Start Review	+ ADD ORDER ﷺ	Scroll Back to Top	SIGN ENCOUNTER

5. Type name of procedure then click the + sign or hit enter

	Sr
Start Review	mri 🕂 😝

6. Select appropriate procedure and click Accept

æ			Order Search				_ □	x
Ν	/IRI		ρ		<u>B</u> rowse	Preference Lis	t <u>D</u> ataba	ise
I	🗄 Panels	(No results found)						
I	🛈 Medicat	tions (No results fo	bund)					
I	Di Procedu	ıres ≈						
		Code	Name	Туре	Result Agency Pref	List	Cost to Org	3
	<u>ل</u>	IMG5315	MRI ABDOMEN W AND W/O GADOLINIUM	Imaging	WBH	AMB IMAGI	\$\$\$\$\$	~
	ĥ	IMG5322	MRI BREAST BILATERAL W AND W/O GADOLINIUM	Imaging	WBH	I AMB IMAGI	\$\$\$\$\$	
	۲	IMG5328	MRI CERVICAL SPINE W AND W/O GADOLINIUM	Imaging	WBH	I AMB IMAGI	\$\$\$\$\$	
I	۵	IMG5331	MRI CHEST W AND W/O GADOLINIUM	Imaging	WBH	I AMB IMAGI	\$\$\$\$\$	
	ΰ	IMG5830	MRI FEMUR/THIGH LEFT W AND W/O GADOLINIUM	Imaging	WBH	HAMB IMAGI	\$\$\$\$\$	~
μ	n	IMCE000		Imaging	14/01		*****	
L					Select And Stay	✓ Accept	× <u>C</u> ance	el

7. Fill out form, then click Accept

MRI CHEST W A	ND W/O GADOLINIUM		✓ <u>A</u> ccept X <u>C</u> ancel
Status:	Normal Standing Future		^
	Expected Date: 2/4/2020	Tomorrow 1 Week 2 Weeks 1 Month	3 Months 6 Months 1 Year Approx.
	Comment: Before Surc	ext Appt Before Surgery Other (specify)	
	Expires: 1/28/2021 🗔 1 Month	2 Months 3 Months 4 Months 6 M	Ionths 1 Year 18 Months
Priority:	Routine 🔎		
Class:	Ancillary Pe 🔎		
Reason for		P	
Exam:			
	Access center transcribed order	🗹 Dyspnea, chronic	Lung nodule, 6-8mm, follow up
	Bronchiectasis	Lung nodule, < 6mm, high cancer risk, initial follow up exam	Lung nodule, multiple < 6mm, follow up exam
	Cardiomyopathy, non-ischemic suspected	Lung nodule, < 6mm, low cancer	Lymphadenopathy, chest or
	Diminished pulses or	Lung nodule, > 8mm, follow up	Shortness of breath
		exam	
	Mesothelioma, initial workup	 Non-small cell lung cancer, post treatment, no evidence of disease Small cell lung cancer, initial 	Small cell lung cancer, monitor
		workup	
	Chest trauma, blunt, high energy	Chest trauma, blunt, low energy	Chest trauma, penetrating
	Other Reasons	,	,,,,,
	Congenital pneumonia		
	Reason for Exam (Free Text):		
Record Decisio Support inform	n Yes No lation?		
Is the patient a contrast? @	llergic to Yes No		
Is there renal insufficiency?	Yes No		
Anesthesia req	uired? Yes No		
CC Results:	Recipient	Modifier Add PCP 🗸	
		Add My List 🗸	
		Build My Lists	
		Clear All	~
Next Required			✓ <u>A</u> ccept X <u>C</u> ancel

8. Click Sign Orders



9. Associate diagnosis

Associate Diagnoses	X
Test, Patient	
Add diagnosis + Problems -	
	Dizziness
	\$
MRI CHEST W AND W/O GADOLINIUM	~
✓ <u>A</u> ccept	× <u>C</u> ancel

10. Enter Provider, then click Accept

	Providers	×
Authorizing Providers For procedures		Filter: 🗌 Nearby
SMITH, J M		<i>,</i> ○ №
Cosigners For procedures		Cosign required
		✓ <u>A</u> ccept X <u>C</u> ancel

- 11. Scheduler opens Appointment Desk, selects appropriate patient, and selects the Active Requests tab of the appointment/requests section
- 12. Select appropriate request and click Schedule button at bottom of screen

	Appt Desk	Desk Make Appt	ilk In 📋 Sc <u>h</u> edule ▾ 🛱 <u>R</u> equest	• 🗏 Reports +	Patient Op	otio <u>n</u> s 🗸 🖶 Printing 🗸	Ê <u>R</u> egistration	
Test, Patient Male, 52y.o., 12/01/1967 Phone: 248-555-5555 MRN: 9999950 Pt Verf: ELP ✓ MyChart: Inactive	Patient Summa Test,Patient 1234 S. Elm St. STERLING HEIC	<mark>ary (Edit)</mark> t GHTS MI 48310		MRN: DOB: SSN: Home: Email:	9999995 12/1/19 xxx-xx- 248-55	i0 167 XXXX 5-5555	Sex: Age: Lang: Work:	Male 52 yrs English 248-555-5566
Peters, David W, MD PCP COVERAGE & FINANCIAL INFO MEDICARE/MCR PARTS A AND B (+2) Guarantor: P/F - No Relationship (+9) Total Self-Pay: \$0.00	Temporary Addr Confidential Add	ntor Accounts	Guarantor Account 1200020	#	Status	Service Area	Type D/F_▲	-
NO SHOWS 78 % All departments	Creation Date E	E-S Procedure MRI CHEST W AND W/O GADOLINIUM	Category WBH IMG MRI ORDERABLES	Class Ancillary Performed	Priority Routine	Notes	F/S	Expected Date 02/04/2020
	06/14/2019	MRI THORACIC SPINE W/O GADOLINIUM	WBH IMG MRI ORDERABLES	Ancillary Performed	Routine			06/14/2019
	06/14/2019	MRI LUMBAR SPINE W/O GADOLINIUM	WBH IMG MRI ORDERABLES	Ancillary Performed	Routine			06/14/2019
	06/14/2019	MRI CERVICAL SPINE W/O GADOLINIUM	WBH IMG MRI ORDERABLES	Ancillary Performed	Routine			06/14/2019
	Schedule Walk In	Edit Notes Ed	lit View CC Results					

- 13. Complete any applicable questionnaires
- 14. Select requested date and search for availability at desired location

€→	Appt Desk Appt Entry	y							
Recommended Solution									
ii 0	1/31/2020 - 03/02/2020	✓ Multiple solutions	Group by center	🗖 Visits in an <u>y</u> order					Patient Options v
	Date	Arrive By	Time	Length	Visit Type	Provider	Department	Center	Hold
			10:00 AM		MRI CHEST	TRMROSC OPEN 1.5	RAD MRI OSCSH	Troy Hosp	
	2/17/2020 (Mon)	<u>7:40 PM</u>	7:40 PM	80 min	MRI CHEST	TRMROSC OPEN 1.5	RAD MRI OSCSH	Troy Hosp	
•	2/17/2020 (Mon)	<u>8:20 PM</u>	8:20 PM	80 min	MRI CHEST	TRMROSC OPEN 1.5	RAD MRI OSCSH	Troy Hosp	
	2/17/2020 (Mon)	<u>9:00 PM</u>	9:00 PM	80 min	MRI CHEST	TRMROSC OPEN 1.5	RAD MRI OSCSH	Troy Hosp	
•	2/18/2020 (Tue)	<u>9:00 AM</u>	9:00 AM	80 min	MRI CHEST	TRMROSC OPEN 1.5	RAD MRI OSCSH	Troy Hosp	

15. Click Schedule on desired appointment and verify pop up window has Outpatient selected

	Арро	intment Review	
Sunday Feb 16, 2020 Appt at 10:00 AM (80 min)	TRMROSC OPEN 1.5	RAD MRI OSCSH at Troy Hospital	^
MRI CHEST		C Outpatient ☐ Inpatient	
Insurance MEDICARE MCR PARTS A AND B Effective Dates 9/06/12 -		Center Troy Hospital [21] Location Instructions Beaumont Medical Park, Sterling Heights, 44250 Dequindre Rd. located on the east side of Dequindre. Enter the Outpatient Services Center at the south entrance door closest to the flag pole. If these doors are locked, press the button on the right that has the picture of the phone on it and someone will let you in. Check in at the registration desk on your left. If your appointment is scheduled on Saturday or Sunday between 7am - 3pm, please enter the Outpatient Services Center at the atrium entrance located in front of the circle drive. Proceed left, down the hallway and check in at the Registration Desk. If your appointment is scheduled on Saturday or Sunday between 330p -7pm, enter the Outpatient Services Center at the south entrance door closest to the flag pole. Procedure MRI CHEST W AND W/O GADOLINIUM Patient Instructions **You must arrive 30 minutes prior to the scheduled appointment time.** A Physician's order is required for this exam. We will not be able to do your exam without an electronic or written order from your physician. Please bring the following items:	~
		Accept Cance	əl

16. Follow Registration process and create a new Outpatient HAR

Registration			
Travel Screening Appt Desk	紹 位 序 西部 <u>P</u> CP Audit Trail Claim Inf <u>o</u> MSP <u>0</u>	와 <u>MSP</u> (* Q. Referrals View MSPQ Patient FYI	Auth/Cert Linkage Auth/Cert Benefit Collect
Test, Patient	Patient class: Outpatient	Guarantor acct type:	Personal/Family
Provider / Ref Provid	This Encounter Encounter Type: 🛱 Appt	Unit/Dept: RMOSCSH	Diagnosis:
Documents	Service: Guarantor: P/F Coded Dx:	Encounter Date: 2/16/20 Hosp Acct Type: N/A No. of Encounters: N/A	Provider: Trmrosc Open* Patient Class: Outpatient
	Select a hospital account for t	nis encounter	
	Create New Hospital Account Account ID - Guarantor 1290029 - TEST,PATIENT Add Guarantor	Relation to Patient DOB Self 12/1/1967	Address 1234 S. Elm St.
	O <u>v</u> erride		Create Ne <u>w</u> Account