ATTENDING CODING FAQ

1) Do I need to be the last signature on the chart even though I have signed it earlier?
   • NO.

2) How do I insert an attestation statement?
   • Left click on the blue “M” next to Addendum at the bottom of the note. A list of macros should pop up. Select the one that is most appropriate.
   • If you do not see a list of macros when you do this, left click on the blue “M”, select more, a menu will pop up, select include shared macros and then select the most appropriate macro. Click ok.
   • For mid-level charts only, you must document some HPI and PE to bill.
   • If you receive a message from the coders that your current attestation is not adequate, go ahead and clear your current attestation by right clicking on “Addendum” and selecting clear. Then follow the above instructions to re-insert the attestation macro.

3) Do I need to insert an attestation statement even though it was my note originally, but a resident edited it afterwards?
   • Yes. It is a shared note if a resident edits the note in any fashion because their signature is on the chart. We can’t bill for resident documentation without an attestation.

4) Do I need to insert an attestation on a chart that was originally seen by me independently (ex. in First Track) and then signed out to a midlevel only (not a midlevel/attending team)?
   • No. You cannot attest to their work after you have left the shift. They will bill for your chart.

5) How do I document a procedure?
   • Right click on “Procedure”, click insert sentence, and select your procedure. This will place a blank procedure paragraph that is specific to the procedure you selected into your note.
   • Most procedures have macros associated with them to help you be more efficient. Look for the blue “M” next to the title at the top of your procedure note (i.e. next to Laceration).
   • Left click on the blue “M” next to your Procedure title at the top of your procedure note. A list of macros should pop up. Select the one that is most appropriate. If you do not see a list of macros when you do this, left click on the blue “M”, select more, a menu will pop up, select include shared macros and then select the most appropriate macro. Click ok.
   • Fill in the pertinent details.
   • In the “Performed by” sentence, you MUST enter your name under “Physician Search” or “Name/Initials-text” to bill for the procedure.
6) How do I attest to a procedure done by a resident?
   • In the procedure note, make sure the resident entered their name in the “Performed by” sentence, under “Physician Search” or “Name/Initials-text” to bill for the procedure.
   • Next, enter your name in the “Physician Search” or “Name/Initials-text” field, whichever one isn’t taken.
   • Attest to the resident procedure. Do this by using the procedure attestation macro under Addendum at the very bottom of your power note.
   • Left click on the blue “M” next to Addendum at the bottom of the note. A list of macros should pop up. Select “Resident Procedure Supervision Attestation”. If you do not see a list of macros when you do this, left click on the blue “M”, select more, a menu will pop up, select include shared macros and then select “Resident Procedure Supervision Attestation”. Click ok.
   • In the Addendum, it is NOT sufficient to simply select “procedure” under “Participated in pt care”. Use the macro to ensure compliance.

7) Do I need to have multiple attestations for multiple procedures?
   • No, only one attestation is required. It is not necessary, but if you wanted to list the procedures you supervised in your addendum, that would be appropriate.

8) How do I document critical care?
   • Right click on “Procedure”, click insert sentence, and select “Critical care note”. This will place a blank critical care paragraph your note.
   • Left click on the blue “M” next to the “Critical care note” title at the top of your procedure note. A list of macros should pop up. Select the critical care macro. If you do not see a list of macros when you do this, left click on the blue “M”, select more, a menu will pop up, select include shared macros and then select the critical care macro. Click ok.
   • Fill in the pertinent details including the total time of critical care.
   • In the “Performed by” sentence, you MUST enter your name under “Physician Search” or “Name/Initials-text” to bill for the procedure. Please note that you cannot enter the resident name in this field because residents cannot bill for critical care.

9) How do I document my plan to have the patient observed in the Observation Unit?
   • Under Impression and Plan >> Disposition >> Admit, enter the time and select Obs.
   • Type the reasons why you are placing the patient in observation, and what care they are to receive (IVF, meds, monitoring, consults, etc.) in the “Other” field.
   • In Power Orders, activate the appropriate observation power plan.

10) How do I document a discharge note for a patient out of the observation unit?
• Start a new Power Note, but select the note type as ED Note – Observation and change the reason for visit to Addendum. To do this, type Addendum in the yellow search field, hit enter and double click on it until it shows up under Reason for Visit. Click ok.
• Fill in the pertinent details, including the physical examination, disposition and diagnosis. You may include an update on the patient’s status under “Notes” in medical decision making (ex. the patient is chest pain free and cardiology has cleared the patient for discharge).
• Discharge per usual.
• Please take care to change your note type back to ED Note – Provider after you write the observation note because the program will default to the last note type you selected for your future patients.

11) How do I sign out a patient?
• Under Impression and Plan >> Disposition >> Pt care transitioned to, enter the time and the name of the physician to whom you are transferring care. Enter the pending work up in the “Other” field.
• If more than one sign out has happened, right click on “Pt care transitioned to” and select repeat to document a second transition of care.
• Should you get a message from the coders asking for incomplete elements, AND you transitioned the chart to another provider, simply reply to the coders to this effect and copy the attending you transitioned the care to.

12) Do I have to sign out all my patients?
• While all patients are checked out to the next team at shift change, not all charts should be signed over to the next attending.
• Only sign out patients using the “Pt care transitioned to” field that you feel are pending further work up, or have an unclear diagnosis/disposition at change of shift. If you sign out your chart to another provider, expect that provider to bill for that pt.

13) How do I unlock a note?
• When you go to edit the chart, you will get a screen that says the following:

![Note in Use](image)
• You have one of two options. You can copy the note to a new note and in error the old one. Or, you can open the note and lose the changes since the last time you signed.

14) How do I copy an existing note? (This may be useful in situations where you want to use the existing MSE documentation or for locked notes.)

• Add a new powernote.
• Click the “Existing” tab.

Select Copy to a new note, select the note you want copied from the list and select okay.