

The Big Picture: How the OPOR-CIS will Impact Care Delivery for Mental Health Providers & Psychiatry

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The following document is intended to provide information on the OPOR-CIS. It will detail how its implementation will impact the delivery of patient care for psychiatrists and mental health care providers.

Introduction to the OPOR-CIS Program

One Person One Record (OPOR) is a **multi-year program designed to transform the way we use and share health information in Nova Scotia**. A key aspect of the program is the implementation of a **Clinical Information System (OPOR-CIS)** that will see all NSH and IWK Health facilities transitioning to delivering care within a **single electronic platform**—this means full electronic charting and documentation (supported by front-end dictation), computerized order entry for all orders, biomedical device integration, and inter and intra hospital and care provider communication.

With your participation, the implementation of the OPOR-CIS has the potential to be the most transformative initiative you may see in your medical career.

The OPOR-CIS is being developed with engagement from providers, clinicians, and non-clinical healthcare employees who are experts across the province. These experts are participating in Design Sprint Workshops where our vendor, Oracle Health, demonstrates the system and content, obtains feedback and then validates decisions in real-time for their care areas.

Broader or more impactful decisions about the OPOR-CIS are made via provincial governance groups, with voting members from NSH and IWK Health. which have been meeting regularly for over a year. All decisions are tracked, discussed and escalated through these well-defined working groups until a resolution is reached. For more information on clinical governance for the OPOR-CIS, please see: [OPOR-CIS Clinical Governance](#).

Starting Your Day: In Clinic

You are starting your first shift on the unit with the new OPOR-CIS. After logging in to PowerChart, you are presented the **Ambulatory Organizer** as the home page, exemplified below.



Time	Duration	Patient	Details	Status	Notes
Clinic - MX BH CL					
9:00 AM	1 hr	ZIMMER, TYLER 66 Years, Male	BH New Patient	Checked Out	Reason for Visit : Psychological... Chief Complaint: Patient report...
10:00 AM	1 hr	No appointments			
11:00 AM	1 hr	ROGERS, JILLIAN 27 Years, Female	BH Established Patient	Checked Out	Reason for Visit : Med Check/M... Chief Complaint: Patient report...
12:00 PM	2 hrs	No appointments			
2:00 PM	1 hr	LAIRD, ADAM 37 Years, Male	BH Established Patient	Seen By Physician 3 - Exam Room # 2	Reason for Visit : Hospital follo...
3:00 PM	1 hr	LEONARD, KENDALL 30 Years, Female	BH Established Patient	Seen By Nurse 3 - Exam Room # 1	Reason for Visit : Med Check/M... Chief Complaint: Patient report...
4:00 PM	1 hr	MASON, CASEY 44 Years, Female	BH New Patient	Confirmed	Reason for Visit : Psychological...

Ambulatory Organizer: Copyright © 2023, Oracle. Used under license and/or permission.

The Ambulatory Organizer demonstrates your daily schedule and can be used to determine your future schedules as well. Each appointment includes details on the time, duration, patient, status, and some clinical details such as the reason for visit. To view the full data of a patient, you may simply click on their name, typed in the color blue.

Starting Your Day: Inpatient Consults

When providing a consultation for inpatients, the **multi-purpose Patient Overview Tool** becomes an invaluable resource for tracking your inpatients and their status, as exemplified in the example below. It is key to note that the patients presented are based on the Patient List selected. It is key to note that the patients presented depend on the Patient List selected. These **Patient Lists are generated** based on **location, medical service, or your relationship to the patient**. You can also create and maintain a list **manually**, by adding and removing patients as needed. Once you select the desired patient list, a page such as the following appears.

Patient	Location	Illness Severity	Primary Contact	Ac...	Diagnoses	C.	
Psychiatry (6)							
WILLIAMS, AMBER	41 yrs F	MX BH Ho... 203 - A	Discharging	Tolish MD, Sarah	1	Alcohol abuse	--
CLARK, RANDY	37 yrs M	MX BH Ho... 201 - A	Unstable	Tolish MD, Sarah	2	Antisocial personality disorder	[2] --
GOMEZ, ALICIA	45 yrs F	MX BH Ho... 205 - A	Stable	Tolish MD, Sarah	--	Auditory hallucinations	--
HUDSON, BRYAN	37 yrs M	MX BH Ho... 206 - A	Watch	Tolish MD, Sarah	--	Alcohol abuse	[1] --
JOHNSON, QUINN	22 yrs F	MX BH Ho... 204 - A	Watch	Tolish MD, Sarah	--	Chronic depression	[1] --

Patient Overview: Copyright © 2023, Oracle. Used under license and/or permission.



Patient Overview lists provide you with a **snapshot of your patients' status and pertinent clinical information to help you manage your work**. The columns within the Patient Overview section can be adjusted based on your preference and display information such as your patients **Illness Severity, Diagnoses, Problems and New Results**. The Patient Overview can also serve as a useful tool for **provider-to-provider handoff**.

You can access the patient's chart by clicking on their blue-typed name. Viewing their chart data through these lists, as opposed to searching ad hoc, minimizes the likelihood of selecting the wrong Encounter. **The importance of choosing the right encounter cannot be overstated**—all things stem from the right encounter choice! For example, placing a medication order on an ambulatory encounter in error could result in your patient not receiving essential therapy during their inpatient stay.

You may also be alerted to patients requiring your care via Consult Orders and through **Hand Over (I-PASS)**. In an academic center, you may touch base with the residents to plan for the day and assign patients to residents.

Interacting with Your Message Center

Upon reviewing your ongoing patients and/or daily schedule, the **Message Center** is your next stop. This is the tool within the OPOR-CIS that enables secure messaging and communication between healthcare professionals. Message Center is part of the legal medical record and messages should pertain to patientcare.



Message Center: Copyright © 2023, Oracle. Used under license and/or permission.

Within Message Center (1) you will be able to review notes and orders (2) that have been forwarded to you for co-signature, notes/documentation sent for review and other communications from other providers or clinicians. Open by highlighting the patient and click open (3) or double-click on the patient's name to open. You will also be able to see notes you may have begun, but not yet signed, which will assist in ensuring completed documentation for your patients.



Check back regularly during your shift for messages which may require action on your part.

A summary of notifications from Message Center can also be found on the left hand side of the home page, besides the Ambulatory Organizer, as shown below.

The screenshot shows the 'Ambulatory Organizer' interface. On the left, a sidebar is highlighted with a red box, containing the following categories: 'Inbox Items (0)', 'Work Items (1)', and 'Notifications'. The 'Notifications' category is expanded, showing 'Sent Items', 'Trash', and 'Notify Receipts'. The main area displays a table of appointments for August 30, 2022, for patients Tolish MD, Sarah.

Time	Duration	Patient	Details	Status	Notes
Clinic - MX BH CL					
9:00 AM	1 hr	ZIMMER, TYLER 66 Years, Male	BH New Patient	Checked Out	Reason for Visit : Psychological... Chief Complaint: Patient report...
10:00 AM	1 hr	No appointments			
11:00 AM	1 hr	ROGERS, JILLIAN 27 Years, Female	BH Established Patient	Checked Out	Reason for Visit : Med Check/M... Chief Complaint: Patient report...
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4:00 PM	1 hr	MASON, CASEY 44 Years, Female	BH New Patient	Confirmed	Reason for Visit : Psychological...

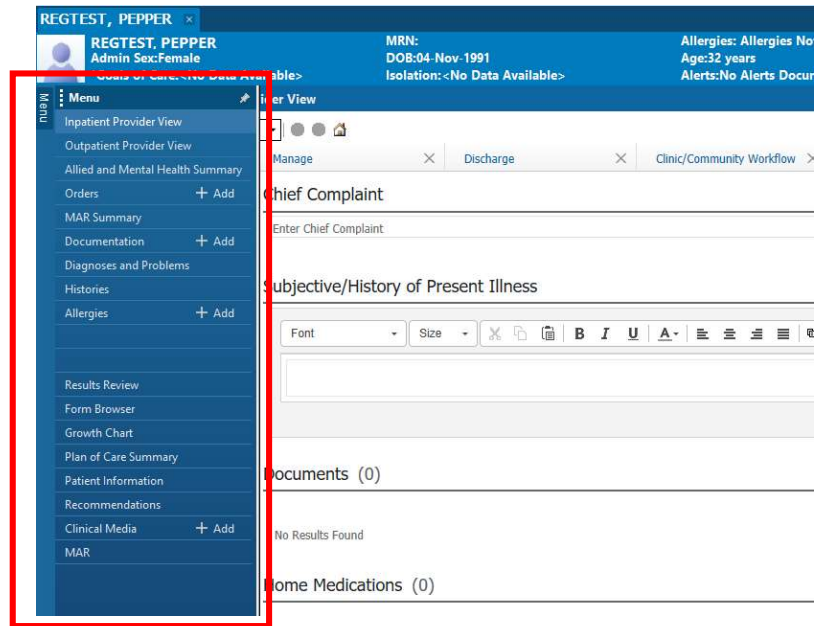
Notifications: Copyright © 2023, Oracle. Used under license and/or permission.

For more information on Message Center within the OPOR-CIS: [OPOR-CIS Message Center](#).

Viewing Patient Data & Results

Results Review, Clinical Documentation and CPOE

By clicking on your patient's name within Patient Overview in the **Patient Overview Tool**, you can navigate directly to the patient's chart. Upon clicking on the patient's name, you will be brought to the page shown in the following image.



PowerChart: Copyright © 2023, Oracle. Used under license and/or permission.

On the left side of this page, the menu begins with two possible options called “Inpatient Provider View” and “Outpatient Provider View”, reflecting the dual workspaces of many psychiatrists. Selecting either of those options, you will find an “electronic version” of all information found in a current state paper chart, as well as results you would seek out on other electronic platforms in current state. **You may place orders, view results and read documentation, all from this main landing page.** Various parts of the chart can be selected on the left side panel demonstrated in the image below. Specific workflows such as Admission, Rounding and Discharge are captured within unique tabs, allowing you to populate and view information for your patient along their journey in hospital, and Quick Orders pages are also available, enhancing the efficiency and safety of CPOE.



Medication	Responsible Provider	Compliance	Estimated Supply Re...
albuterol (albuterol 90 mcg/inh aerosol inhaler) 2 puffs, Inhale, Once, PRN: as needed for wheezing, 8 g, 0 Refill(s)	--	Still taking, as prescribed	--
citalopram (citalopram 20 mg oral tablet) 20 mg = 1 tab, Oral, Daily, 30 tab, 0 Refill(s)	--	Still taking, as prescribed	--

Document History: Completed by Little RN, James on AUG 01, 2022 at 10:38 Sign

Documents (0) All Visits Last 50 Notes Last 18 months Last 24 hours Last 3 days

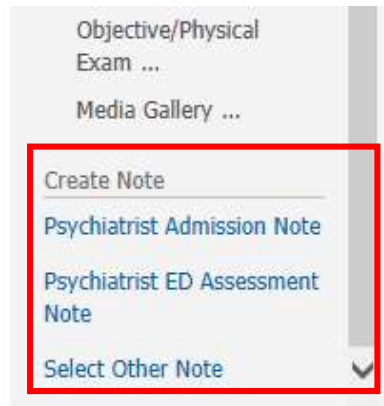
Forms (0) Selected Visit

Navigating PowerChart: Copyright © 2023, Oracle. Used under license and/or permission.

For more information on Results Review within the OPOR-CIS: [OPOR-CIS Results Review](#).

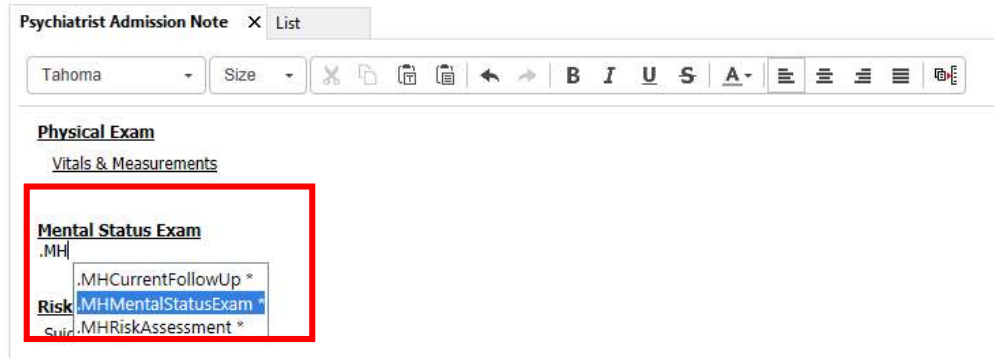
Clinical Documentation

Efficient documentation is a focus of the CIS and several features can be leveraged to save patient and provider time. To document, you can select options from the left menu in the Provider View to document the “Subjective History of Present Illness”, “Review of Systems”, and other clinical information. At the bottom of the left menu, you will find options for documenting notes, such as “Psychiatrist Admission Note”, as seen in the image below.



Documenting Notes: Copyright © 2023, Oracle. Used under license and/or permission.

Documentation (including Admission Notes, Progress Notes, Discharge Notes and all other key pieces of documentation) in the OPOR-CIS, will be standardized into legible, logical **templates** that can be leveraged across many care areas. These templates allow our providers to easily pull in information already captured in the patient's chart by using efficiency-boosters such as **Auto text**.



Autotext: Copyright © 2023, Oracle. Used under license and/or permission.

In the example above, typing and selecting “MHMentalStatusExam” (boxed in the example below) will automatically populate a template for a mental status exam and the relevant data for your patient, with dropdowns enabling you to adjust the content.

You may also edit the template, further explained in the following document: [Autotext & SMART Templates](#)

The system will also **automatically populate information** such as HPI, Active and Chronic Problems, Procedures, Allergies or Medications into the relevant sections of your notes, minimizing the need to type or dictate this information ad hoc. This process saves time and is a more efficient method of documenting notes.

You can also **leverage well-written content found in other clinician’s notes**. For example, if a consulting provider laid out a comprehensive A&P, you can copy and paste this into your Progress Note, automatically denoted with a superscript, to preserve the integrity of the documentation.

The OPOR-CIS is also fully supported by **Dragon Medical One** dictation software, which can also be available on your mobile device (Dragon Mic Mobile).

Draft notes can be saved and returned to at a later point in time—this will also display in your Message Center under your In Progress notes. Once documentation is complete, you click Sign, allowing in to be immediately available within the patient’s medical record. It may be forwarded to other members of the care team (primary care physician, specialist, etc.)

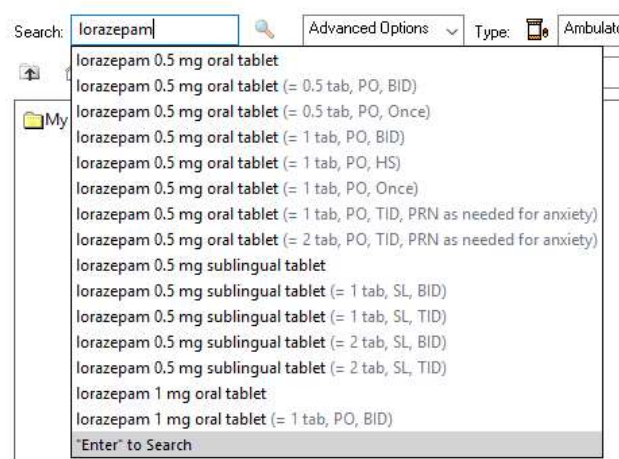
For more information on Documentation in the OPOR-CIS: [OPOR-CIS Documentation](#).



Order Placement

As part of your daily delivery of care, you will place all orders electronically via Computerized Provider Order Entry (CPOE). This means orders that are currently written on paper will now be electronically entered by you within the OPOR-CIS, and flow directly to the appropriate services and individuals for actioning. For example, a placed order will directly enter the dedicated nurse's dashboard. The transition to CPOE means orders no longer require transcription, faxing and other inefficient and error-prone methods.

There are several efficient ways to place orders in the OPOR-CIS including **Quick Orders** pages and **Order Sets (also known as Powerplans in the OPOR-CIS)**. You also have the option to manually search an order however, it is the least efficient method. Regardless of the tool used, all orderable items are accompanied by an **Order Sentence containing key details such as medication dosage, route of administration, and frequency**. Many orderable items have multiple possible order sentences. In the example below, we are manually searching an order and we can see that there are several order sentences possible for lorazepam.



Order Sentences: Copyright © 2023, Oracle. Used under license and/or permission.

Upon selecting an order sentence, the CIS will prompt you to review administration details and will allow you to modify the order sentence, as shown in the image below.



▼ Details for **lorazepam (lorazepam 0.5 mg oral tablet)** Send To: **Select Routing** ▼

Details | Order Comments

Dose	*Route of Administra...	*Frequency	Duration	*Dispense	*Refill
0.5 tab	PO	BID		30 90	0

PRN:

Requested Refill Date: Ameri

Indication:

Type Of Therapy: Acute Maintenance

No Sub: Yes No

Samples:

Dispense Form: **TAB**

3 Missing Required Details | | | |

Order Details: Copyright © 2023, Oracle. Used under license and/or permission.

Quick Orders contain the most common orders used within your area of clinical practice. The orders are categorized into folders such as Medication or Diagnostic Imaging, to enhance user navigation. They are also accompanied by order sentences, as shown in the example below. Using these pages will enable a faster order placement workflow and can be customized for your practice.

Admission | Manage | Discharge | Clinic/Community Workflow | **Inpt Quick Orders** | No Severity

Ambulatory - In Office (Meds in Office) | Ambulatory (Meds as Rx) | All

Medications

- Anti Anxiety/ Benzodiazepines
 - lorazepam 0.5 mg, PO, TAB, q4h, PRN agitation
 - lorazepam 2 mg, PO, TAB, q4h, PRN agitation
 - lorazepam 1 mg, PO, TAB, q2h, PRN agitation
 - lorazepam 0.5 mg, PO, TAB, q2h, PRN agitation
 - clonazepam 1 mg, PO, TAB, TID, anxiety
 - clonazepam 0.5 mg, PO, TAB, TID, anxiety
 - clonazepam 0.25 mg, PO, TAB, TID, anxiety
 - alprazolam 1 mg, PO, TAB, QID, PRN anxiety
 - alprazolam 0.5 mg, PO, TAB, QID, PRN anxiety
 - diazepam 5 mg, PO, TAB, TID, PRN anxiety
 - diazepam 2 mg, PO, TAB, TID, PRN anxiety
 - lorazepam 2 mg, PO, TAB, q8h, PRN anxiety
 - lorazepam 1 mg, PO, TAB, q8h, PRN anxiety
 - lorazepam 0.5 mg, PO, TAB, q8h, PRN anxiety
 - lorazepam 2 mg, PO, TAB, q8h, PRN anxiety
 - lorazepam 1 mg, PO, TAB, q8h, PRN anxiety
 - lorazepam 0.5 mg, PO, TAB, q8h, PRN anxiety
 - lorazepam 1 mg, PO, TAB, q4h, PRN anxiety
- Anti Anxiety/Other
 - Agitation Monotherapy
 - Agitation Haloperidol+LORazepam Combination
 - Severe Agitation Monotherapy

Additional Medications

- Sleep (single dose only)
- Sleep (single PLUS repeat dose)
- Nausea/Vomiting
- Nicotine
- Analgesia
- Bowel Regimen
- Blood Pressure
- Respiratory Meds
- Common Concerns
- Electrolytes, Vitamins and Minerals

Consults

- Consult to Hospitalist
- Consult to Psychology
- Consult to Wound Care

Labs and Imaging

- ECG
- Labs
- Imaging

Order Sets

- Patient Admission Orders Patient Admission Orders

Mental Health Forms and Leaves

- Observation Level
- Forms
- Therapeutic Leaves

New Order Entry

Ambulatory - In Office (Meds in Office)

Ambulatory (Meds as Rx)

Search New Order

Personal | Public | Shared

No Favorites Found

Outstanding Orders (1)

Selected Visit

US Biopsy Thyroid 1 Site	Status	Ordered
	Ordered	08/18/23 12:12

Problems

Quick Orders: Copyright © 2023, Oracle. Used under license and/or permission.

For more information on Quick Orders in the OPOR-CIS: [OPOR-CIS Quick Orders.](#)

Finally, the **OPOR-CIS will come with electronic Order Sets to support care delivery across the province.** Order Sets contain a predefined group of orders and tasks, commonly used for a specific condition, procedure, or clinical scenario. For example, you may place order sets such as Nicotine Replacement Therapy or Management of Alcohol Withdrawal Syndrome, in addition to other therapies which include evidence-based content such as medications, care instructions, laboratory, diagnostic imaging, diets, etc.



Current state paper Order Sets (also known as pre-printed orders or PPOs) in use across the province which are already updated and standardized are being leveraged to develop content in the OPOR-CIS. In collaboration with experts in your field across the province, all Order Sets are being closely reviewed to **ensure the content aligns with recent guidelines and will support evidence-based care deliver across the province**. Order sets from other jurisdictions have also been evaluated for potential benefit and inclusion.

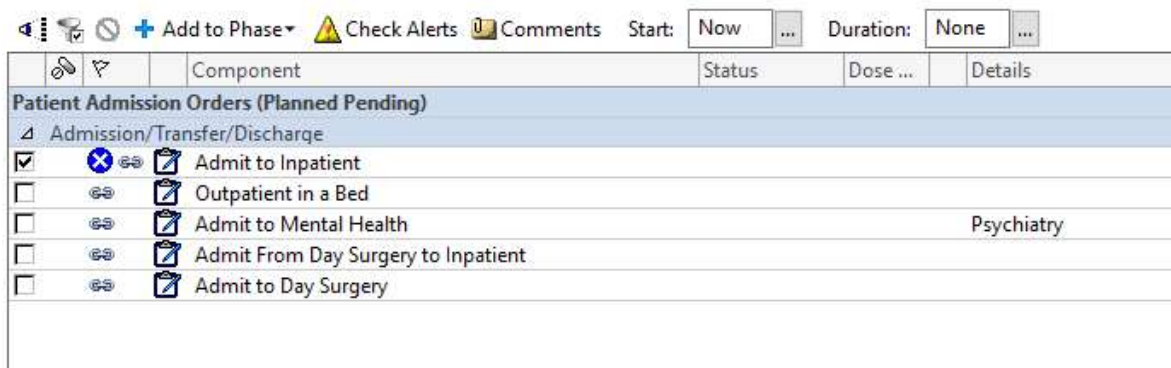
Ordering within the OPOR-CIS with significantly improve efficiencies – reducing chase time for and a manual completion of forms – as well as allowing for ordering remotely and being able to track and monitor any new information or requests made by other providers.

Most of the **Order Sets are named with standardized prefixes** (example: RESP, CARD, PED). Orders within an Order Set are bundled by category, for example Activity, Vital Signs, Patient Care, followed by Medication, Laboratory, etc. Most frequently ordered items are at the top of their order category, and orders that are required or very commonly ordered are often pre-checked, reducing the need for multiple clicks. All Order Sets share an icon, as shown in the example below.



Example of Order Set (PowerPlan): Copyright © 2023, Oracle. Used under license and/or permission.

Upon selecting an order, you can modify select appropriate orders, as shown below.



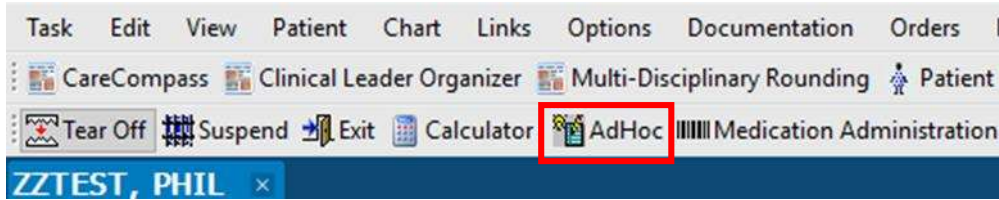
Order Selection: Copyright © 2023, Oracle. Used under license and/or permission.

For more information on Order Sets in the OPOR-CIS: [Order Sets Key Features & Benefits in the CIS](#)



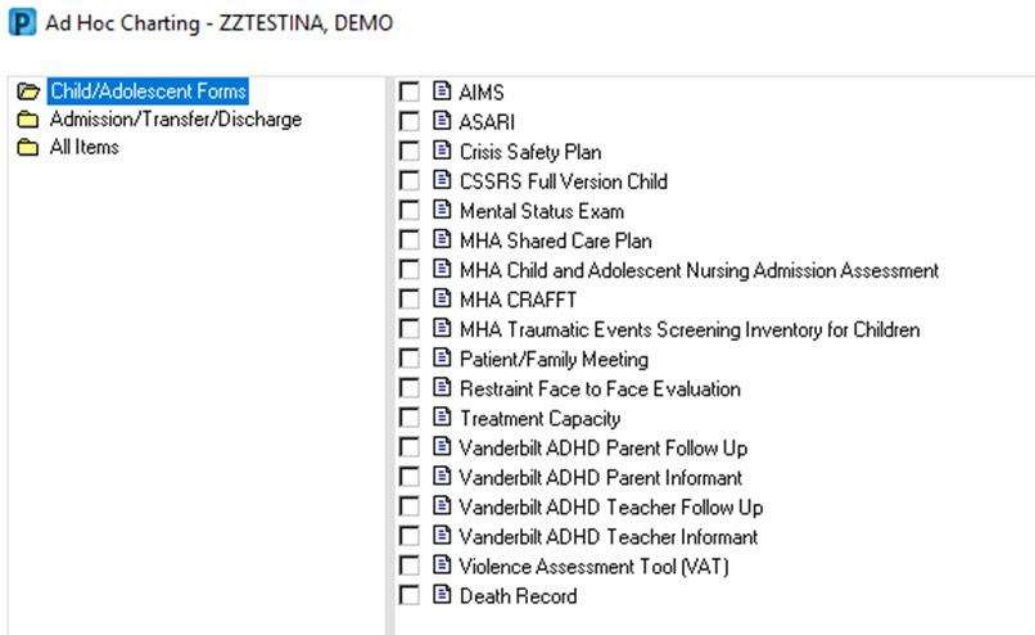
Accessing Forms

PowerForms are electronic forms aiming to minimize the need for typing data to facilitate efficiency and enabling the use of discrete data points. All forms on the CIS will be a PowerForm. To search for a form, click on the “Ad-hoc” button on the top banner, shown below.



Ad-Hoc Form Search: Copyright © 2023, Oracle. Used under license and/or permission.

A list of PowerForms will appear as demonstrated. *Please note that the following forms are merely examples and may not reflect the final PowerForms used.*



Selecting PowerForms: Copyright © 2023, Oracle. Used under license and/or permission.

Upon selecting the appropriate PowerForm, the form will automatically open. In the example below, the provider wishes to complete an assessment for suicide & risk.



Assessment of Suicide and Risk Inventory

THIS INVENTORY IS FOR DOCUMENTATION PURPOSES ONLY
Suicide risk assessment may be performed by many methods, including patient & collateral interviews, review of documentation and the use of standardized screening tools.

Screening Question
See below for example of a screening pathway

Collateral Sources

Denies suicidal thinking
 Endorses suicidal thinking

Chronic Risk Factors

Suicide Specific	Patient Related	System Related
<input type="checkbox"/> Prior suicide attempt <input type="checkbox"/> History of suicidal thinking or behaviour	<input type="checkbox"/> History of psychotic or major affective disorder <input type="checkbox"/> Male sex <input type="checkbox"/> History of aggression <input type="checkbox"/> Ethnic or cultural risk group <input type="checkbox"/> Chronic illness causing severe pain or disability	<input type="checkbox"/> Family history of mental health disorder <input type="checkbox"/> Family history of suicide <input type="checkbox"/> History of parental or sibling loss <input type="checkbox"/> History of trauma, abuse, neglect <input type="checkbox"/> History of frequent change of address

Acute Risk Factors

Suicide Specific	Patient Related	System Related
<input type="checkbox"/> Recent suicidal thinking or behaviour <input type="checkbox"/> Active suicidal ideation <input type="checkbox"/> Accessibility to suicidal means <input type="checkbox"/> Lethality of suicidal plan or attempt	<input type="checkbox"/> High anxiety / Agitation on interview <input type="checkbox"/> Current psychiatric illness <input type="checkbox"/> Current substance misuse <input type="checkbox"/> No compliance or response to treatment <input type="checkbox"/> Impulsivity <input type="checkbox"/> Hopelessness	<input type="checkbox"/> Recent loss or major life change <input type="checkbox"/> Lack of social supports <input type="checkbox"/> Lack of professional supports <input type="checkbox"/> Caregiver unavailable or inappropriate

Completing a PowerForm: Copyright © 2023, Oracle. Used under license and/or permission. Please note that this is only an example and may not reflect the future-state form.

You can also access forms when reviewing the patient’s chart in the “Forms” section of PowerChart below. To open the pop-up window listing the PowerForms, click on the plus sign indicated below. Once the form is complete, this section will be updated and reflect that data.

The screenshot shows a sidebar menu on the left with options like 'Inpatient/ In Office Medications', 'Allergies (2)', 'Histories', 'New Order Entry', 'Problem List', 'Intake and Output', 'Vital Signs', 'Labs', 'Order Profile (14)', and 'Forms (0)'. The main content area has sections for 'Forms (0)', 'Diagnostics (0)', 'Visits (5)', and 'Local Record'. The 'Forms (0)' section has a plus sign icon highlighted with a red box, and a 'Selected Visit' dropdown menu to its right. Below the 'Diagnostics (0)' section, there are filters for 'All Visits' and time periods: 'Last 1 months', 'Last 6 months', 'Last 12 months', and 'Last 18 months'.

Selecting PowerForms from Chart: Copyright © 2023, Oracle. Used under license and/or permission.

Charting Clinical Data

To chart a patient, you must first open their PowerChart. Once open, select the “Interactive View and I&O” option from the left dark-blue menu highlighted below. You will then open the iView page where you can use the lighter-blue menu to navigate the chart for documentation. In the example below, the provider wishes to chart the Mental Status Exam, selected from the options on the left menu. The components of this exam are then presented on the right panel, where the provider can directly input the data.



Result	Comments	Flag	Date
			16-May-2024 13:15 ADT
Mental Status Exam			
Orientation Assessment			
Level of Consciousness			
Affect Range			
Affect Quality			
Affect Congruence			
Behaviour			
Appearance			
Mood			
Memory			
Memory Comments			
Concentration			
Thought Content			
Thought Content Comments			
Hallucinations Present			
Hallucination Comments			
Delusions			
Delusions Comments			

Selecting PowerForms from Chart: Copyright © 2023, Oracle. Used under license and/or permission.

Clinical Decision Support Tools

Inherent to the OPOR-CIS is **Clinical Decision Support**. For example, when you order Medication orders, they are automatically screened for allergies, duplicates, contraindications, and interactions. While **Clinical Decision Support** is a useful tool to reduce medical errors, the goal is also not to create too many alerts that cause alert fatigue.

For more information on Clinical Support for Medications: [OPOR-CIS: Medications Related Clinical Decision Support](#).

We Are Here to Support You

If you've reached this point in this document, you have likely grasped that the implementation of a CIS is a major transformational initiative. It involves a commitment from leaders and clinicians at all levels to successfully adopt the system and achieve the significant benefits of that adoption. Change is challenging. The OPOR team is committed to supporting you through it. **Education and Learning** and **At the Elbow Support** during go live will ensure that you are prepared and supported. While this guide provided a brief overview, the **OPOR Education and Learning team** will prepare you with detailed content and experience leading up to the CIS implementation.

For more information on the Education and Learning Strategy: [Education & Learning Strategy](#)

For Additional Information on Psychiatry & Mental Health Care within the OPOR-CIS: Demonstration videos are available on the opor.nshealth.ca website.



The following link will take you a video from Oracle Cerner that will guide you through the OPOR-CIS: [Nova Scotia Day in the Life](#)

Please contact CMIO@nshealth.ca for any questions about the OPOR-CIS and **how you can be part of this process to ensure it meets your clinical needs.**

Document Version

Version 01	April 5 2024
Version 02	May 20 2024
Version 03	May 25 2024

Appendix A: Glossary of Terms

At-The-Elbow (ATE)	At-The-Elbow (ATE) support during the OPOR-CIS Go-Live events refers to the direct, on-site assistance provided by software consultants to healthcare employees as they navigate and use the new system in real time. This hands-on support is crucial for addressing immediate questions, solving problems as they arise, and ensuring a smooth transition to the new system, minimizing disruptions to patient care. ATE support teams work closely with healthcare professionals, offering targeted training, workflow integration guidance, and immediate issue resolution to foster confidence and competency in the new CIS environment.
Cerner Canadian Reference Model (CCRM)	The CCRM acts as a starting point of recommendations, workflows, and best practices.
Clinical Decision Support	Provides healthcare providers with real-time, evidence-based guidance to enhance patient care. Integrates with the electronic health records, offering suggestions for diagnoses



	and treatment plans based on the latest clinical guidelines and patient-specific information, thus supporting more informed and effective decision-making.
Computerized Provider Order Entry (CPOE)	The process of providers entering and sending treatment instructions including medication, laboratory, and radiology orders via a computer application rather than paper, fax, or telephone.
Dynamic Documentation	Automates the creation of a clinical note relating to care delivery. The note aggregates chart information from clinical documentation entered using a variety of methods to meet the needs of physicians in varied care settings.
Interactive View & I/O (iView)	A menu item in the patient chart used by nurses, allied health and other healthcare providers that supports flowsheet-style documentation for vitals, measurements, ins/outs, assessments, etc. The data entered in iView allows for trending and comparison.
OPOR-Clinical Information System (CIS)	Computer program designed to collect, store, manipulate and share information in the healthcare delivery process. Components: electronic documentation, dictation and speech recognition, computerized order entry, clinical decision support, NSH & IWK Health Network clinical information access, and closed loop medication management
PowerChart	PowerChart is highly interactive and designed to address the needs of care providers and medical staff. It streamlines the workflow process into one desktop application, which provides access to the functions that support the Electronic Health Record (EHR). Use PowerChart as a tool to access patient lists, view pertinent patient information such as demographics and results, and perform functions that support clinical practices such as entering clinical documents. There are two main views: Organizer and Patient Chart.
PowerForms	The electronic equivalent of standardized documentation in the OPOR-CIS.
PowerPlans	Electronic order sets in the OPOR-CIS.
Quick Orders	The Quick Orders tab presents the most common orders and order sets used within your area of clinical practice. This



	enables a faster order placement workflow and can be customized for your practice.
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Appendix B: Helpful Links

- [Care Coordination Centre \(C3\)](#)
- [OPOR-CIS BPMH and Medications Reconciliation](#)
- [OPOR-CIS Message Center](#)
- [OPOR | One Person One Record \(nshealth.ca\)](#)
- [OPOR-CIS Clinical Governance](#)
- [OPOR-CIS Documentation](#)
- [OPOR-CIS Results Review](#)
- [OPOR-CIS CPOE Key Features and Benefits](#)
- [OPOR-CIS Quick Orders](#)
- [ReferralsNS - Nova Scotia eReferral Resource Hub](#)
- [YourHealthNS](#)