

ED Documentation

ED Cares Assessment and ED Universal Protocol

ED Cares Assessment

Care/Event
section

- Document events that occurred with this patient during your shift.
- Use to record if your help was required with a procedure and how many minutes was involved. When extra people are required to help with a procedure this documentation enables the hospital to charge for those services.

Bedside
Procedure

Certain procedures require a Time Out Verification. Use the **ED Universal Protocol Assessment** to document the Time Out. Check your hospital policy.

Code section

Record Code details and that Code Meds were documented on the eMAR.

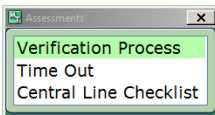
Critical Result
section

Nurses use this section to record when the result was phoned to the physician.

Report Hand-
off section

This is where the nurse documents that she completed the Shift Handoff.

ED Universal Protocol



Use this group assessment to document when you are assisting with a procedure; typically used by an RN or ED CCT for an invasive procedure and we want to verify the correct site/side.



When done documenting the **Verification Process**, click the **Go to** footer button. The Assessments menu appears. Select **Time Out**. Document. When done, click **Save**. Both assessments are filed. Also includes **Central Line Checklist**.

Note: if a Central Line is placed, you will also document on the **ED IV**

Invasive Line Assessment.