EDIS

Flow Process after the Veteran is placed in a bed the chart goes up for the “provider to see”

1. **Assign your name to that Veteran that you will see immediately in EDIS (this has to be done by you) & within 44 minutes of arrival.**
2. Review Veteran’s chart (this should take appx. **5 minutes**)
3. If emergent issues or uncertainty in what to do next, discuss with attending immediately.
4. If no emergent issues: Place orders on the Veteran (please note – attempt to order all labs/radiology at that time, since placing orders in “bits-n’-pieces” prolongs/delays the Veteran’s disposition (move on to the next Veteran).
5. Present to the attending (discuss if additional work-up needs to be completed)
6. Make certain that the attending adds their name to EDIS (this **MUST** be done by the **Attending**).
7. As soon as a **disposition** is known (home/admit) please change that in EDIS.

**Expectation** for last resident patient is 5:50pm. A full work-up does not need to be completed, but patient can be eyeballed and imaging/labs entered and patient signed out**
NOTE:

_Items on EDIS Currently Being Monitored On a National Level_

Door → Triage time:  Goal is → < 15 minutes (nursing driven)

Door → Provider time:  Goal is → < 45 minutes

Door → Disposition:  Goal is → 3 hours

**IMPORTANT:**

You must assign only yourself to the patient; no one can do it for you since this is a performance measure.

**WHY is this important??????**

1. Improved Veteran outcomes, care, & satisfaction.
2. Improved patient flow and decrease ER wait times
3. Assists in decreasing left without being seen/AMA.
Assign yourself to the Veteran as soon as possible when you know the disposition change it appropriately.

Continue to update status as you progress & use comment section for appropriate communication.