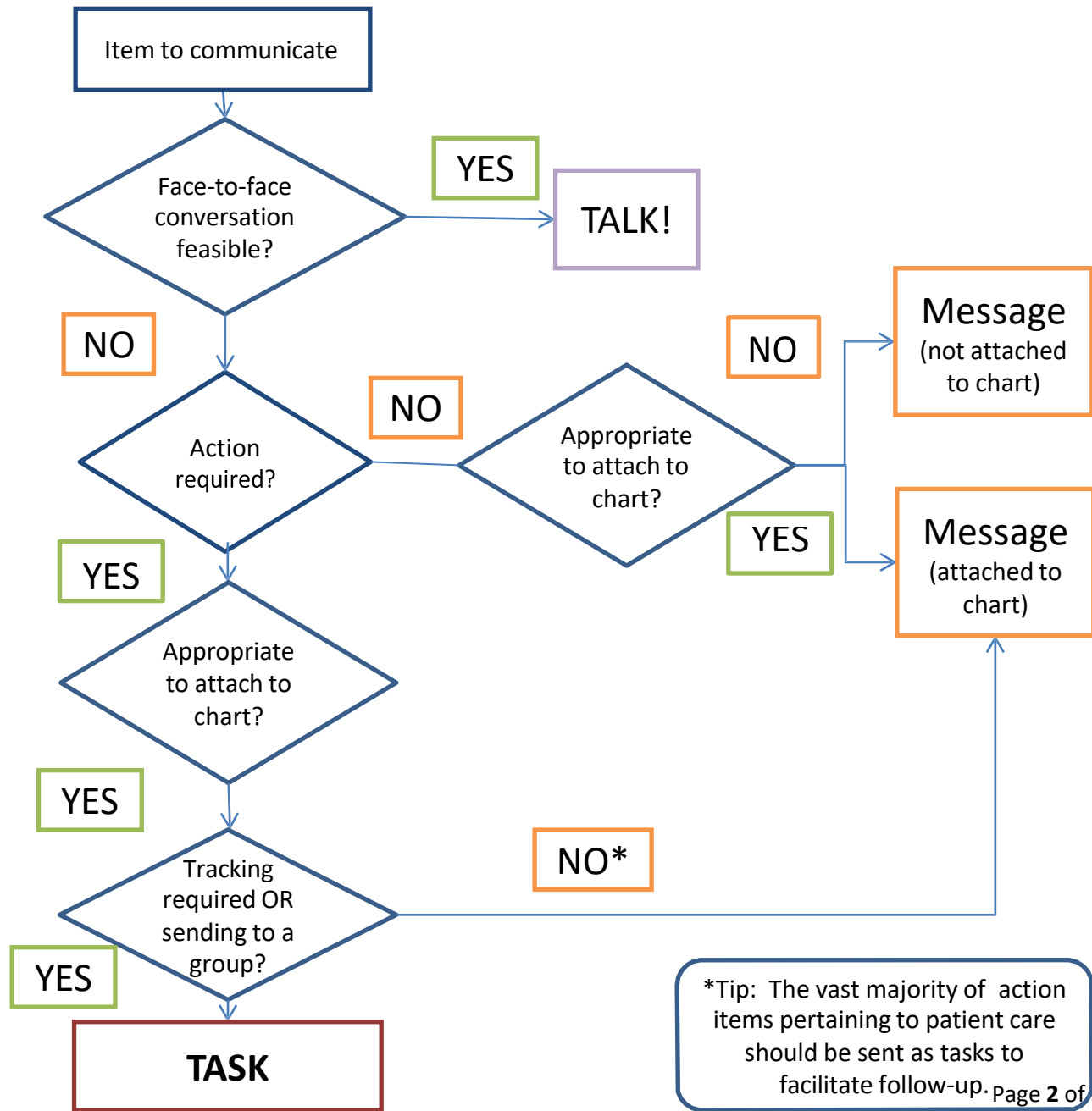


WHEN TO USE EMR MAIL MESSAGES VERSUS TASKS



*Tip: The vast majority of action items pertaining to patient care should be sent as tasks to facilitate follow-up.

TASK Facts:

- You cannot reply to tasks.
- Tasks can be sent to groups of people in a similar role, e.g., Nursing Assistants, allowing someone to take responsibility by “checking it out” and each recipient to see when the task has been completed.
- Tasks are patient-specific; they are **ALWAYS** attached to the patient’s chart.
- Tasks can be tracked; Tasks are site-specific by provider or group of providers (F7) This should be checked at each patient visit. However, Tasks are viewable only within the office owning the Task.
- ONLY by EMR USERS at their offices.
- Tasks should only be used for actions which don’t require a reply and are appropriate to remain part of the permanent medical record.
- Tasks can be assigned importance—regular, urgent, or very urgent. Users can adjust the sensitivity of pop-up reminders (default set to very urgent tasks).
- Examples of tasks: “Please call patient to advise of lab result.” or “please weigh and measure at next visit.”

MESSAGE FACTS:

- Messages are similar to email.
- The envelope icon refers to a new mail message in both the message and task section, leading to potential confusion (request to address labelling has been submitted).
- Messages can be attached to a specific patient or can be non-patient messages.
- Patient-specific messages can either be attached to the chart or not.
- You can reply to messages.
- Messages are generally not appropriate for patient care tasks.
- Examples of a message: “Please review my notes on patient X”, or “Accuro outage will be taking place in 30 min, please save all your work.”

Application:

- These functions do not replace face-to-face conversation
- Use messages to inform colleagues of something; use tasks when something requires action.
- Messages are sometimes confused with the notes section.
- Messages, not the notes section should not be used for discussion between providers e.g. “check my notes on visit x”, or “patient moved from provider x to provider y at 1400 today” (could be patient specific but does not need to be attached to the chart.
- You can task a group of staff either by clicking the header of the group or hold the control key and click the individual staff you wish to send it to.
- Do not send mail messages to a group if you wish an action, e.g. “Please pull chart” if you send this as a message to all the file clerks they can not tell if one of them has done this.
- The notes section is most commonly used by NA/UA/PCAs for noting when consult appointments have been booked, etc. The notes section does not replace progress notes for providers.