

To improve user experience, we've made some recent adjustments to Lippincott DocuCare. These updates will be available when you access your DocuCare account beginning July 24, 2019. With this release, we've focused on resolving recurring issues in the submission workflow, refining the DocuCare Pre-Populated Case/Chart Library, have made efforts to increase user education and decrease user error, and have continued to closer align DocuCare with real-life experiences. To increase application performance, users may notice slight, but intuitive changes in navigation or display. In addition, the DocuCare Pre-Populated Case/Chart Library index has been updated, and instructors now have access to over 20 new Learning Activity Packets.

## Changes to Submission Workflows

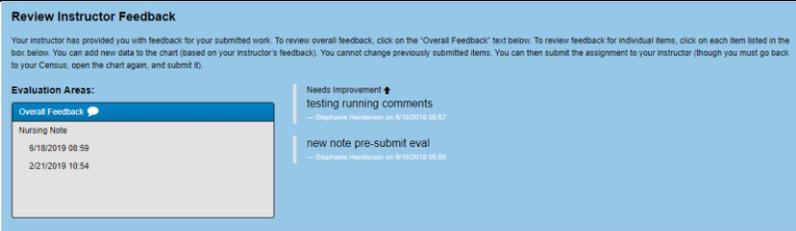
Users were reporting that instructor evaluation feedback would disappear or that student work was not available for instructor evaluation despite the student's confirmation that it was submitted—that issue was addressed earlier this year.

Students should now be able to submit *clinical assignments* (student-initiated or instructor-assigned) more than once only if the instructor is not actively evaluating the assignment. In other words, after a student submits a clinical assignment, so long as the instructor has not started the evaluation, the student should be able to submit the clinical assignment again (so that the students can add data to the chart). This enhancement more closely tracks to what students and instructors are indicating is their typical user behavior. Once the instructor starts the evaluation (triggered the first time the instructor selects "Save Feedback"), the student will not be able to submit again **unless and until** the instructor returns the clinical assignment to the student for resubmission.

Student Experience	
Student Can Submit a Clinical Assignment Multiple Times Prior to Instructor Evaluation	<ul style="list-style-type: none"> <li>Prior to an instructor's evaluation, students can access and submit a clinical assignment multiple times.</li> <li>Once the instructor begins his or her evaluation, the student will not be able to submit again unless and until the instructor returns the clinical assignment to the student for resubmission (the assignment now has a status of "Under review.")</li> </ul>
Instructor Experience	
Instructor Accesses the Clinical Assignment for Evaluation	The instructor can now evaluate all student input from a clinical assignment that has been submitted multiple times. Students can submit assignments until the instructor starts his or her evaluation.

To prevent the same issue for case assignments/patient scenarios, once a student submits a case assignment, the student is no longer able to access it **unless and until** the instructor returns it to the student for re-submission.

In addition, users (both student and instructor) will now see a running thread of previous feedback, allowing users to easily reference student's immediate progress on an assignment.

Student Experience	
Student View of Feedback	<ul style="list-style-type: none"> <li>While reviewing an assignment or completing an assignment for re-submission, students will now be able to view past and present instructor feedback in the form of a running thread.</li> </ul>
	
Instructor Experience	
Instructor View of Feedback	Similarly, instructors are shown a running thread of recent feedback while evaluating an assignment.

Furthermore, specific indicators for the Evaluation and Assignment status have been implemented so that both students and instructors can quickly recognize whether an assignment has been re-submitted or needs re-evaluation.

## Aligning DocuCare with a Real-Life Experience

Always striving to capture a balance between a real EHR experience and an educational tool, the updates below reflect how we addressed that goal during this release.

### No Known Allergies

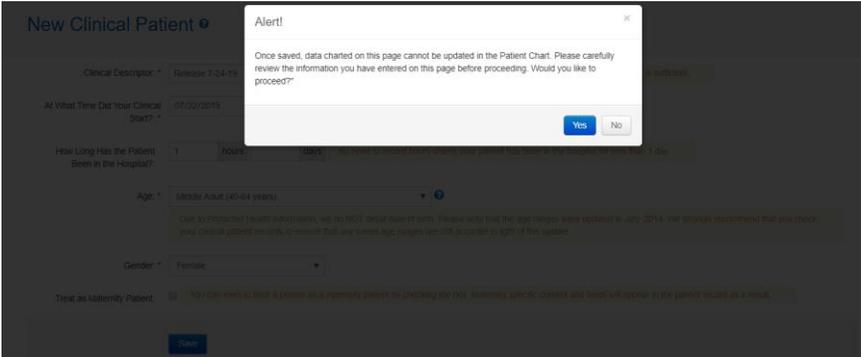
Users can now specifically document No Known Allergies. In addition, users will notice that in the Patient Info summary at the top of the patient's chart, allergies are now listed by each category—Environmental, Food, or Drug.

User Experience	
<p>Documenting No Known Allergies</p> <ul style="list-style-type: none"> <li>Both Students and Instructors can now document No Known Allergies</li> <li>The list of allergies that appear in the Patient Information summary at the top of the patient chart is now divided by each descriptive category—Environmental, Food, or Drug</li> <li>Once documented for any particular category, a user must delete any No Known Allergy records before recording a new allergy for that category</li> <li>Other functionality remains the same and Students cannot alter instructor-authored data.</li> </ul>	

### Documenting Patient Info

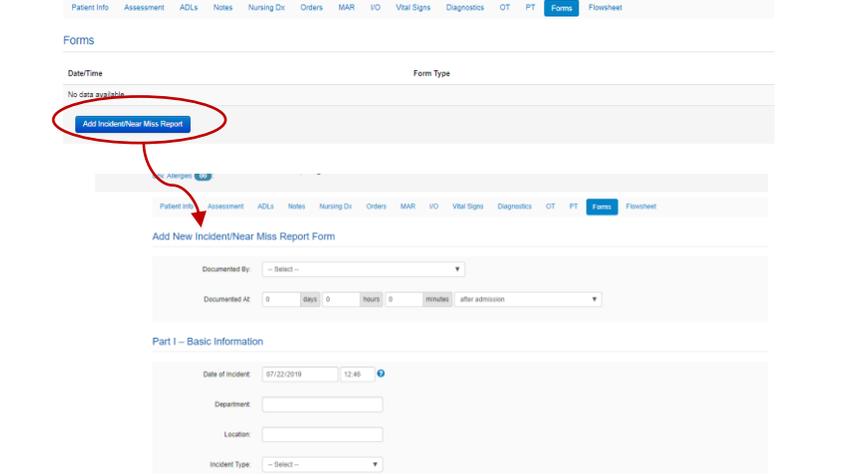
Students are now able to edit certain Demographic and Current Visit information within the Patient Info tab.

Student Experience	
<p>Updates to New Clinical Patient Screen</p> <ul style="list-style-type: none"> <li>Because students are now able to edit certain demographic and current visit information, when a student chooses Add New Patient, they will notice that the fields specific to those areas have been removed to from the New Clinical Patient Screen.</li> <li>This screen has been reduced to the only the fields students cannot change once Save.</li> </ul>	

<p>Documenting Demographics</p>	<ul style="list-style-type: none"> <li>Students can now chart/update:             <ul style="list-style-type: none"> <li>Height</li> <li>Weight</li> <li>Marital Status</li> <li>Religion</li> <li>Race</li> <li>Ethnic Category</li> <li>Ethnicity</li> <li>Primary Language</li> </ul> </li> </ul>	
<p>Documenting Current Visit</p>	<ul style="list-style-type: none"> <li>Students can now chart/update             <ul style="list-style-type: none"> <li>Primary and subordinate admitting diagnoses</li> <li>Isolation Precaution</li> <li>Advance Directive</li> </ul> </li> </ul>	
<p><b>Instructor Experience</b></p>		
<p>Documenting Patient Info</p>	<p>The instructor's experience has not changed. Additionally, students cannot alter instructor-authored Demographic or Current Visit data.</p>	

### Forms—Incident/Near Miss Report

The new primary Forms tab was created to capture data that may not be normally or entirely addressed within an EHR but are still relevant to the student's knowledge and a patient's care, such as Incident Reports. In the future, we see this as a space to house similar forms, like Home Health assessments.

<p><b>User Experience</b></p>		
<p>Incident/Near Miss Report</p>	<ul style="list-style-type: none"> <li>Both Students and Instructors can now document incidents or near misses involving the patient or others.</li> <li>Located within the Forms tab, the user will see listed each recorded incident listed in a tabular format.</li> <li>The form is divided into 3 parts:             <ul style="list-style-type: none"> <li>Basic Information</li> <li>Incident Type &amp; Details (for Falls, Medications, and Other incident types)</li> <li>Contributing Factors and Corrective Actions</li> </ul> </li> <li>Note that students cannot alter instructor-authored data</li> </ul>	

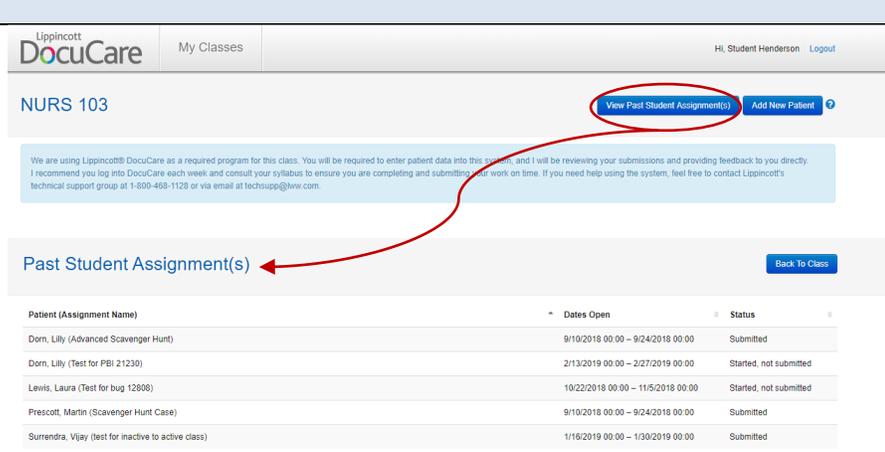
Additionally...

To reflect a more clinical setting, while previewing an assignment, users will not see any data that has been hidden until release or scheduled to appear a certain after the student launches the assignment (whether specifically, or because the data is not scheduled to release for some time after admission).

We have expanded all the Additional Notes fields in the Assessment tabs to 1500 characters, allowed students to add Other Diagnostics, users can now document Recommended Actions and Notes fields for the Braden Scale assessment, and a Date Inserted field has been added to the form for Vascular Access.

## Navigation/Display Changes (Increasing Application Performance)

To increase navigational consistency throughout the application and performance for high-volume/power use, users will notice slight but intuitive changes to certain dashboards. Overall, content-loaded, action-oriented pop-up modals have been converted to new screens. Items such as Past Assignments (for both students and instructors), archived or inactive content, and the DocuCare Pre-Populated Library are now all displayed as new screens.

Student Experience	
View Past Assignments (Class Dashboard)	<ul style="list-style-type: none"> <li>Instructors can now find Past Assignments for a specific class by navigating to the Class Dashboard and choosing View Past Student Assignment(s)</li> <li>Selecting the action button will bring users to a new screen</li> </ul>
	
Instructor Experience	
Viewing Past, Inactive, or Archived content	Like students, instructors will now view past or inactive content in new screens. Please see the instructor-specific release notes for more detail.

## Auto-Populate Documented At

Users will notice that the Documented At fields throughout the application are now, by default, pre-populated with the current real or simulation time.

## In-App User Education

Users may notice new Tooltips or safety checks throughout the application, including those to confirm disenrollment and deleting an assignment and those to explain the various ways to preview an assignment.

## Content Updates

Listed below are the new Learning Activity Packets now available in DocuCare's Instructor Resources.

### Critical Care:

- Septic Shock: John French
- Acute Respiratory Failure: Phillip Townsend

### Gerontology:

- ACES Type 2 Diabetes: Sherman "Red" Yoder
- ACES Lunch Cancer: Julia Morales

**Health Assessment**

- Cystic Fibrosis: Christopher Parrish
- Total Knee Arthroplasty: Jared Griffin
- Rectal Cancer: Marvin Hayes

**Maternity**

- Active Labor: Brenda Patton
- Umbilical Cord Prolapse: Carla Hernandez
- Postpartum Hemorrhage: Fatime Sanogo
- Preeclampsia: Oliva Jones
- Shoulder Dystocia: Amelia Sung

**Medical-Surgical**

- Fluid/Electrolyte Imbalance: Stan Checkettes
- Pneumonia & Anaphylactic Shock: Kenneth Bronson
- Post-Operative Anemia: Lloyd Bennett
- Pulmonary Embolism: Vernon Watkins

**Mental Health**

- Severe Anxiety: Linda Waterfall
- Manic Episode: Sharon Cole

**Pediatrics**

- Gastroenteritis: Eva Madison
- Generalized Tonic-Clonic Seizure: Jackson Weber

**Pharmacology**

- Severe Angina: Junetta Cooper
- Pulmonary Embolism: Rachel Heidebrink
- Appendicitis: Yoa Li