Merge AIMS Quick Tips

UW Medical and Harborview Medical Centers use an Anesthesia Information Management System (AIMS) called Merge AIMS V8 to electronically document timed anesthesia care in their operating rooms.

Starting Merge AIMS in an OR:

- Double click Merge AIMS IntraOp icon on the desktop or launch application from Programs > Merge AIMS > Merge AIMS Intraop
- Merge AIMS IntraOP main login screen has a BLUE background
- Make sure all status items on the left of the main login screen are green before logging in.

Login and selecting patient:

- Use your UW Medicine login ID and password (Same as ORCA login) to log into Merge AIMS
- Once you login, you will see a list of patients scheduled to have surgery that day
- Select the correct patient and press OK button (bottom left) to display a case confirmation screen for the selected patient.
- Do NOT confirm case by pressing the “Yes” button till the patient is in the OR and you have verified that the correct patient has been selected

Documentation in the OR

- Once the case/patient is confirmed, the main documentation screen is presented
- Documented items are displayed on the left while the data input menu buttons are on the right
- Vitals from the patient monitor and ventilation parameters are automatically acquired and either graphed or displayed on data grids. Documented events and comments are displayed below the graph. The top portion displays the patient demographics and case details
- To enter data, start from the top button on the “yellow brick road” of menu buttons and work down as the case progresses
- Medications, fluids, billing codes and items not on the “yellow brick road” can be entered through the menu items below the “yellow brick road”
- “Manual Entry” button is the superset of all data entry options

Participating role:

- Scan your badge using the bar-code scanner on the anesthesia machine OR login through Manual Entry > Staff Selection
- In the “Responsibility and Attestation” screen, touch the button that corresponds to your case participation role (Supervising Anesthesiologist/Resident-Fellow-CRNSolo Anesthesiologist)

Attestations (only for attending anesthesiologists):

- Scan your badge using the bar-code scanner on the anesthesia machine OR login through Manual Entry > Staff Selection
- In the “Responsibility and Attestation” screen, select each attestation and complete all elements
- An attestation should be performed only AFTER the corresponding event. Induction attestation AFTER Induction note, Procedure attestation AFTER invasive line procedure note, Emergence attestation AFTER Emergence note etc.

Procedure notes:

- Template based procedure notes, called Docunotes, are organized under the “Docunotes” button.
- Induction technique, Regional block technique, IV placement, Invasive line placement, antibiotic/betablocker protocol notes etc. are all Docunotes organized under this button
- After selecting a note, the different data elements (denoted by [++++]) can be filled in by selecting from the options presented when pressing the [++++] items

Events:

- Main events such as Anesthesia Start, SCOAP checklists (only at UWMC), Procedure Start/End can be documented via the yellow brick road menu items, or by touching the corresponding case information elements above the graph/grid

Medications and Infusions:

- Bolus and infusion meds can be selected from a pick list through the corresponding buttons on the right
- Enter dose and dose time and then press “Confirm”. NOTE: Antibiotics are entered as bolus drugs
• Documented medications are displayed on the data grid

**Fluids:**
• Manual Entry > Fluids to enter Fluids

**Procedure/Diagnosis/ASA code/Height/Weight:**
• Touch/click the corresponding data item on the Patient demographics/Case details section above the data grid

**Billing items:**
• Find Anesthesia CPT code by pressing F8 button, and searching though the menu items. Enter the code through DocuCode > Add a code > Numeric Procedure Code
• Diagnosis code can be found and entered through the DocuCode > Add a code > Diagnosis Code Search

**Editing items:**
• To edit or delete any data element, touch the procedure note documentation area just below the graph and use “Record Editor” to delete, correct time or change content of each data documented data element
• Meds and items on the grid can be directly edited by touch the corresponding grid element

**Miscellaneous points:**
• Remember to document Antibiotic dose time prior to procedure start (within 60 mins)
• EKG entry button allows documentation of EKG rhythms
• CQI Docunote allows documentation of quality issues and process delays. This note is not part of the anesthesia record.

**Suspending record**
• Before the case is completed press “Missing Required Items” to make sure all required data elements are documented
• You can click on the individual items in the Missing Required Items screen to link to the corresponding screen
• Press “Leave OR” button to suspend the record just before leaving the OR

**Resuming in Recovery**
• After depositing patient in recovery area, find a Merge AIMS closing station (look for labels on the computer screen)
• Open Merge AIMS PostOp from desktop icon. Merge AIMS PostOP has a GREEN background
• Login and select the suspended case.
• For cases older than 24 Hours, use the second button from top right “Edit/Review” to login and select

**Completing Documentation**
• In the Merge AIMS PostOp mode go through the items on the yellow brick road similar to the IntraOp screen.
• Press “Missing Required Items” to find missing items. Complete documentation of missing items, by clicking the link
• Press Finalize and Close button, to get to the Anesthesia Summary Data Entry screen
• If no missing items are left the middle button on the above screen will be either green or yellow and will say “Close record”. Otherwise it will be red in color and will say “Show issues”.
• Touch the Yellow or Green “Close Record” button, authenticate yourself through your login credentials and close the record
• Final Anesthesia record is sent to ORCA in a PDF format

**SAM (Smart Anesthesia Manager)**
• SAM is a decision support system that works in conjunction with Merge AIMS to find issues related to quality of care, billing and compliance.
• If issues are detected, you will be notified via pop-up screens or text pages
• Read the message and perform steps detailed in the message to correct the issue

**Help**
• 24/7 Helpline: UWMC – (206) 598-8695 (ph) / (206) 540-0937 (pg) / docusys@uw.edu
• 24/7 Helpline: HMC – (206) 540-3898 (pg) / H-periop-support@uw.edu
• Help website: https://depts.washington.edu/docusys/