Glossary of Terms

Applications

The following definitions/terms will be helpful in becoming more familiar with Epic, UMass Memorial Health Care’s new electronic health record (EHR) system.

ASAP – The application for the Emergency Department. It has the capacity to do “mini” registrations, has an easy-to-use charting tool and allows for real-time patient tracking.

Beacon – The application for oncology that enables providers to create treatment plans based on standard protocols and make treatment decisions guided by comprehensive decision support.

Beaker – The application for Laboratory that accommodates draw stations, clinic labs, hospital labs and large reference labs. Barcode-enabled workflows allow laboratory technicians to track specimens within and across sites. Dynamic work lists display outstanding and overdue tests in real time.

Cadence Enterprise Scheduling – The application for appointment and procedure scheduling that provides context-specific instructions, conflict checking and solutions for complicated appointment searches.

Canto – An app for the Apple iPad that offers a dashboard-style front-end to check schedules, respond to messages and review lab results from anywhere. Rounding physicians can get up to speed on patients before entering their rooms and dictate notes or send messages immediately after leaving.

Care Everywhere – Provides access at the point-of-care to the patient’s medical records from other organizations and can facilitate the exchange of information between hospital systems. The data retrieved from another system can include problems, medications, allergies, recent vitals, recent lab results and recent procedures.

Cogito – The integrated analytics and reporting application – collectively named Cogito – that delivers current clinical intelligence and business intelligence based on role and workflow. “Intelligence” can mean something different to each user, so Cogito provides a combination of flexible tools, content, data sources, distribution, training and process to support decisions throughout the organization with the best information available.

Cupid – The application for Cardiology that offers multi-modality, procedure-specific clinical documentation along with streamlined consult, follow-up and referral workflow.

Epic Anesthesiology – The application for anesthesia administration. This application is integrated with OpTime and EpicCare to streamline documentation workflows across roles and supports documentation of pre-op evaluations, pre-admission testing, intra-op care, recovery care and post-procedure care – including inpatient follow-ups and post-op phone calls.

EpicCare Ambulatory – The application for ambulatory clinical information for patient care. This application delivers an array of documentation tools, including best-practice alerts and a workflow management function.
APPLICATIONS – continued

**EpicCare Clinical Case Management** – The application for assessing, discharge planning, utilization management and coordinating a patient’s care.

**EpicCare Home Health & Hospice Revenue Cycle** – EpicCare Home Health helps field nurses, therapists and other non-physician caregivers who practice in a patient’s home simply and efficiently document and report on home visits. It is intended for use by both home care and hospice care professionals who work with patients outside of an office setting, such as in the patient’s home or other places where a network connection is unavailable or impractical.

**EpicCare Infection Control** – This application supports surveillance of patients who are at risk for infections and helps identify and monitor patients, as well as submit reportable events to government agencies. The Infection Control application also includes antimicrobial stewardship tools that support organizations’ reporting on antimicrobial usage and submission of data to the National Healthcare Safety Network (NHSN).

**EpicCare Inpatient Clinical System** – The acute care application that spans hospital departments and roles to connect care team members via a single patient record. It ensures that clinical decisions are based on the most up-to-date information and promotes care that is safe and well coordinated.

**EpicCare Link** – This application provides referring physicians secure, web-based access to Epic. Sharing patient information with authorized providers helps them follow the progress of care for the patients they refer to UMass Memorial and improves their ability to coordinate ongoing care.

**Grand Central (formally ADT)** – This application gives users the tools for bed utilization and helps them manage hospital stays from pre-admission through discharge. Clinicians can access an efficient census workspace that allows them to view and update current information on patients in their care, and flexible workqueues help to plan for upcoming admission, discharge and transfer events.

**Haiku** – An app for the Apple iPhone and iPod Touch, and the Android smartphone that offers functionality such as chart review, patient lists, schedule, search, messaging, e-prescribing and clinical image capture.

**Health Information Management (HIM)** – This application is for the management of patient health records, such as chart tracking, release of information and deficiency tracking. It is also the chart and film management system, which is integrated into the appointment scheduling workflow. The system can handle folders, film and fiche, as well as any number of chart types and volumes.

**Healthy Planet** – Functionality that supports population management by providing tools to collect data to aid in identifying patients that may require more immediate attention and to give providers metrics they need to make important clinical decisions.

**Identity Enterprise Master Person Index** – Using sophisticated algorithms, Identity helps to quickly identify the right patient, prevent the creation of duplicate records, and eliminates existing duplicates.

10/11/16
APPLICATIONS – continued

Kaleidoscope – This application offers tools and information tailored for the needs of ophthalmology sub-specialists, including forms for glaucoma, oculoplastics, neuro-ophthalmology and pediatric ophthalmology. Device integration is also available.

Lucy – The Personal Health Record that is not connected to any one particular organization’s electronic health record system. It stays with patients wherever they receive care and allows them to organize their medical information in one place that is readily accessible. Patients can enter health data directly into Lucy, pull in MyChart data or upload standards-compliant Continuity of Care documents from other facilities. Care Everywhere can also retrieve documents from Lucy, making information available to clinicians as part of the electronic chart — essentially patient-guided interoperability.

MyChart – An easy-to-use patient portal that provides patients quick and secure online access to portions of their electronic health record (e.g., lab results). It also allows a patient to schedule appointments, email his/her provider with non-urgent medical questions, review statements online, pay bills online, complete health questionnaires prior to a visit and more.

MyChart Bedside – A system for Apple iPads and Android tablets that helps improve the care experience for hospitalized patients and their families. It provides information on the patient’s treatment team, scheduled procedures, lab results, electronic requests for services, and educational materials via streaming video, images and websites.

Nurse Triage – This application helps users manage more patient calls and deliver timely, effective care advice over the telephone. The system supports nurses throughout the triage process by providing easy access to patient records, proven practice management tools and popular clinical protocols in a user-friendly format. The application is integrated with all other Epic applications, ensuring that call documentation always becomes part of the patient’s record.

OpTime – The application that supports surgical activities and includes tools for all key perioperative processes, including scheduling, preference card management, anesthesia record keeping, pre-op assessments, procedure record and PACU documentation.

Orthopedics – This application includes joint injection support, efficient “one screen” orthopedic documentation workflows, location-based charting and more. This builds on existing workflow management and clinical content for orthopedics workflows.

Phoenix – This application supports the focused clinical workflows and detailed regulatory requirements of solid organ transplants.

Prelude Enterprise Registration – The application used for registration and verification of insurance information. Prelude provides tailored workflows, wizards and extensive error checking to help users complete registrations swiftly and accurately.
APPLICATIONS – continued

**Radiant** – The application for radiology that encompasses procedure scheduling, clinical documentation, results reporting, film tracking and statistical reporting.

**Resolute Hospital Billing** – The application for Hospital Billing that auto-populates appropriate fields and submits claims in HIPAA-compliant transaction formats. Extensive rules-based claim scrubbing accelerates reimbursement and minimizes rejected claims.

**Resolute Professional Billing** – The application for Professional Billing that offers a configurable library of medical necessity checks and charge/claims scrubbing routines that help reduce denials and satisfy payors. The system sends clean, accurate claims using a variety of HIPAA-compliant transaction formats resulting in prompt and accurate reimbursement.

**Rover** – This functionality allows authorized Epic users to have secure access to tools for clinical review, patient list management, medication administration, specimen collection, vitals and I/O right on their Apple iPhone, iPod Touch or Android smartphone.

**Stork** – The application for Obstetrics and Labor & Delivery that organizes the complete course of obstetric care and supports the unique documentation workflow of Labor & Delivery.

**Welcome Patient Kiosk** – This touch-screen-based kiosk provides a variety of self-service options for patients, such as checking in and printing an itinerary and/or map for their appointments. Patients can also make payments and update their registration information. The kiosk offers multi-lingual displays.

**Willow Ambulatory Pharmacy** – The application that automates workflow, communication and decision support in the outpatient pharmacy setting. Like its inpatient counterpart, the system takes advantage of integration to reduce redundant order entry, improve pharmacist access to patient information and streamline everyday pharmacy functions.

**Willow Inpatient Pharmacy** – The application for Inpatient Pharmacy. Pharmacists can monitor medication treatment and improve medical outcomes, improving patient safety, minimizing adverse effects and helping control costs. Orders from EpicCare flow directly to Willow for verification and dispensing, and also appear automatically on the Medication Administration Record (MAR).

**ABN** – An Advance Beneficiary Notice of Non-Coverage (also known as a Medicare Waiver of Liability) is a notification given to Medicare beneficiaries by physicians, providers, or suppliers when they believe Medicare will deny services due to necessity or frequency.

**Access** – This is a term that refers to the areas of scheduling and registration.
IMPLEMENTATION

**Access and Revenue Cycle Readiness (ARCR)** – This is an Epic-sponsored program whereby leads from the areas of Access (scheduling/registration) and Revenue Cycle are identified and charged with ensuring their departments/units take the necessary steps (e.g., complete required training) to ensure providers and staff members are ready for the transition to Epic.

**ACC NCDR** – The National Cardiovascular Data Registry (NCDR®) is the American College of Cardiology’s (ACC) suite of cardiovascular data registries helping hospitals and private practices measure and improve the quality of care they provide.

**Accountable Care Organization (ACO)** – A healthcare organization characterized by a payment and care delivery model that seeks to tie provider reimbursements to quality metrics and reductions in the total cost of care for an assigned population of patients.

**ACS NSQIP** – American College of Surgeons National Surgical Quality Improvement Program® (ACS NSQIP®) collects data that provides fair, in-depth and insightful analysis, helping surgeons and hospitals better understand their quality of care compared to similar hospitals with similar patients.

**Activity** – The place where users enter and view data in Epic. For example, the Order History activity is used to view information for an order and the Medications activity is used to manage a patient’s prescription.

**Ambulatory Surgical Center (ASC)** – A health care facility that specializes in providing surgery, pain management and certain diagnostic services in an outpatient setting.

**At-the-Elbow Support** – A pool of Super Users, Epic team members and staff from Epic who can provide targeted individual help using Epic during go-live and post go-live periods.

**Barcode Medication Administration (BCMA)** – A system that uses barcodes to electronically administer medications in an effort to ensure patients receive the correct medication at the correct time.

**Basic PC Skills** – The fundamental computer skills (e.g., use of a mouse, keyboard, etc.) that everyone will need to have to effectively access and use Epic. Providers and staff are required to complete the Basic PC Skills e-Learning course.

**Best Practice Alert/Advisory (BPA)** – A pop-up that notifies clinicians when they need to tend to important tasks, such as reviewing a patient’s allergies, writing orders and completing charting. BPAs serve as provider reminders or warnings and can appear during clinical workflows based on specific criteria. When used effectively, BPAs serve as a powerful resource in clinical decision support processes.

**BI-RADS** – Breast Imaging-Reporting and Data System, a quality assurance tool originally designed for use with mammography. The system is a collaborative effort of many health groups but is published and trademarked by the American College of Radiology (ACR).
IMPLEMENTATION – continued

**Build Phase** – The Epic Project Team begins building the Epic system based on decisions made by providers and staff during the Collaborative Design Sessions.

**CAHPS** – Consumer Assessment of Healthcare Providers and Systems (CAHPS) database facilitates comparisons of CAHPS patient satisfaction survey results by and among survey sponsors. This enables participants to compare their own results to relevant benchmarks.

**CDT** – Current Dental Terminology, similar to CPT but for dental procedures, is a code set with descriptive terms developed and updated by the American Dental Association (ADA) for reporting dental services and procedures to dental benefits plans.

**Chronicles** – Chronicles is the complete database management system that supports all Epic applications. Each application builds upon the Chronicles unified data model to create inpatient, outpatient, clinical, financial and administrative data sets. Chronicles allows users to run reports and searches, analyze statistics, perform computations, import and export data and manipulate data set structures.

**Clarity** – The relational (non-Caché) database located on your Clarity database server, which stores extracted Clarity data and table definitions.

**Clinical Data Repository (CDR)** – A comprehensive, real-time database that consolidates patient clinical data.

**Clinical Decision Support (CDS)** – The optimal delivery of accurate, valid, timely and useful clinical information at the point-of-need to support efficient, safe patient care. Examples include order sets, protocols, education, rules and alerts.

**Clinical Readiness (CR)** – This is an Epic-sponsored program whereby clinical leads are identified and charged with ensuring their departments/units take the necessary steps (e.g., complete required training) to ensure providers and staff members are ready for the transition to Epic.

**Collaborative Build** – The design/build of Epic that reflects UMMHC’s workflows and best practices resulting from collaboration by Subject Matter Experts from across the organization.

**Collaborative Design Sessions (CDS)** – Nearly 380 sessions that will provide the opportunity for nearly 1,000 Subject Matter Experts from across UMMHC to review the Epic foundation system and make decisions that will drive the configuration of Epic to best meet the needs of UMMHC.

**Completion Matching** – Entering a partial word in a search field instead of a whole word when looking up an item in Epic. The system looks for words starting with the characters entered and displays the results in a selection list.

**Computerized Physician Order Entry (CPOE)** – An order entry and decision support system that allows direct entry of orders into Epic.
IMPLEMENTATION – continued

Configuration – Changes or additions made by the UMMHC Epic Project Team to the foundation system to best suit the UMMHC workflows and/or content. This includes modifying the content of a foundation system Critical Care order set to align with the UMMHC best practices and/or selecting from drop-down menu options.

Contact Serial Number (CSN) – The CSN is a unique identifier for each patient visit, such as an appointment or admission. CSNs are assigned when a visit is created, regardless of whether the encounter takes place in a hospital or clinic setting.

Core Grouping Software – Core Grouping Software (CGS) processes both inpatient and outpatient claims based on Medicare and non-Medicare payment methodologies.

CPT Code – Current Procedural Terminology from the American Medical Association; the most widely accepted medical nomenclature used to report medical procedures and services under public and private health insurance programs.

Credentialed Trainer (CT) – An individual who will leave their operational role for a period of time to train their colleagues on the Epic system and provide at-the-elbow support during go-live.

Current-State Assessment – Includes Groundwork Questionnaires completed by each UMMHC entity followed by a site visit from the Epic Project Team and Epic staff to understand current-state workflows in order to help guide future-state design.

Current-State Device Inventory – UMass Memorial technicians visit departments across the organization and record device (e.g., computer, printer, scanner) information in order to determine if equipment or upgrades are needed for the Epic implementation.

Customization – Changes to the underlying code of Epic. Minimal customization is expected and will be evaluated on a case-by-case basis, as necessary.

Device Workflow Walkthroughs – Members of the Epic Technical Team, in partnership with the Epic Transformation Team and our partners at Epic, tour each department/site to understand what hardware will be required to support the use of Epic. The walkthroughs include assessing the need for computers, where they will be located, computer-related ergonomics, etc.

Dress Rehearsal – An opportunity for staff and providers to practice Epic-related workflows in their own department/practice. Staff and providers use patient scenarios to validate their understanding of the new workflows and help them become proficient in using the system prior to go-live.
IMPLEMENTATION – continued

**EAP** – The master procedures file within the Epic system that contains the procedure records used by nearly all clinical and billing applications. These records incorporate procedure orders, and hospital and professional charges. Some examples include requests for services, lab and imaging orders, performable procedures, level-of-service codes, and hospital billing charge description master codes.

**Electronic Health Record (EHR)** – A longitudinal electronic record of patient health information generated by one or more encounters in any care delivery setting. Epic includes information like patient demographics, progress notes, problems, medications, vital signs, past medical history, immunizations, laboratory data and radiology reports.

**Encounter** – A clinical contact with a patient in Epic, such as an office visit. Billing is associated with completed encounters.

**End Users** – All operational staff members – representing clinical, revenue cycle and practice management – who will use Epic.

**Enterprise Design Team** – Comprised of Physician Champions, Project Champions and Enterprise Design Subject Matter Experts, this group represents all UMMHC entities and is responsible for guiding the design/configuration of Epic and related workflows.

**Enterprise Master Person Index (EMPI)** – Database of patient and provider/staff identifiers that allows all information about an individual to be tied together, regardless of which application or affiliate is providing or accessing the data.

**Environment** – This is the platform for different instances of Epic that are utilized for different purposes. For example, the Epic Production Environment is where end users log into to perform their job duties. It is also referred to as the “live” environment. The Playground Environment is used for practice once someone has completed their Epic training so that they can practice their new skills.

**Epic** – The name of the software vendor. Epic is a privately held company located in Verona, Wisconsin.

**Epic Application Coordinator (AC)** – The primary owner, contact and Epic representative for a specific application.

**Epic Application Manager (AM)** – Works closely with the Epic Application Coordinator to ensure a successful installation by providing guidance and experience about best practices and system functionality specific to a particular application.

**Epic Design Parameters (EDPs)** – The Epic Executive Steering Committee made decisions regarding the 47 EDPs that will guide the nearly 380 Collaborative Design Sessions.
IMPLEMENTATION – continued

**Epic Executive Steering Committee** – Comprised of UMMHC executive officers, this committee is responsible for providing leadership and guidance throughout the Epic Project. They monitor the overall plan and budget, ensure the commitment of clinical and operational resources, and are the final decision-making and issue-resolution body.

**Epic Technical Coordinator (TC)** – The primary contact for UMMHC’s project leadership after applications are live, the TC is a member of the Technical Services team and oversees live application support, integrated technical areas and large projects such as upgrades.

**EUPA** – The End User Proficiency Assessment is designed to test a student’s knowledge after completing required coursework.

**FQHC** – Federally qualified health centers (FQHCs) include all organizations receiving grants under Section 330 of the Public Health Service Act (PHS). FQHCs qualify for enhanced reimbursement from Medicare and Medicaid, as well as other benefits. FQHCs must serve an underserved area or population, offer a sliding fee scale, provide comprehensive services, have an ongoing quality assurance program, and have a governing board of directors.

**Go-Live** – The first day employees and physicians begin using Epic, scheduled for July 1, 2017 at UMass Memorial Medical Center, UMass Memorial Medical Group, Clinton and Marlborough, as well as the Medical School Clinical Data Repository Interface, Academic EHR and Population Health modules, and all ambulatory sites. Go-live dates for HealthAlliance and Community Healthlink will be determined at a later time.

**Good Install** – Program offered by Epic that gives organizations an opportunity to earn a rebate that can be applied to future Epic-related costs if specific criteria for a successful installation are met. An example would be the percentage of staff that pass the proficiency assessments, as well as other key indicators.

**HCPCS Codes** – The Healthcare Common Procedure Coding System (HCPCS).

**HIMSS Analytics Stage 7** – Healthcare Information and Management Systems Society (HIMSS) is an international organization established with the mission of improving healthcare quality, safety, cost-effectiveness and access through the efficient use of information technology. In 2005, its HIMSS Analytics division developed an Electronic Medical Record Adoption Model (EMRAM), which measures the progress and impact of electronic medical record systems on hospitals. There are eight stages (0-7) that measure a hospital’s implementation and utilization of information technology applications. Stage 7 represents the most advanced level of electronic health record adoption. This requires an effectively paperless environment. One must also implement decision support and demonstrate improved outcomes for a sustained period of time to qualify for Stage 7. The validation process includes a site visit by an executive from HIMSS and chief information officers to ensure an unbiased evaluation.
IMPLEMENTATION – continued

Hospital Account Records (HAR) – HAR are used to keep track of charges, payments and adjustments related to hospital or technical fee billing. They are usually specific to a single patient encounter, and must be linked to a single patient and a single guarantor account. HAR allow an entity to bill for hospital services.

Hospital Outpatient Department (HOD)/Hospital Service Department (HSD) – This is typically an outpatient department – physical therapy, radiology or lab, for example – that utilizes services from the hospital to complete patient visits. These departments oftentimes see both admitted inpatients and scheduled outpatients. Services include registration, pharmacy, diagnostics and others.

HyperSpace – The integrated platform that hosts most Epic applications. When you log into Epic, you’re logging into HyperSpace.


Implementation Director (ID) – The primary contact for UMMHC’s project manager, the ID is not tied to any one application and oversees all of the applications that are being installed, including interfaces, EMPI, Clarity, and server and personal computer systems.

Implementation Executive (IE) – A liaison between UMMHC’s executives and the Epic Project Team, the IE is not tied to any one application and oversees all of the applications being installed, including interfaces, EMPI, Clarity, and server and personal computer systems.

In Basket: The electronic messaging system used within Epic.

Integrated Work Group (IWG) – Governing workgroup comprised of Enterprise Design Team Members, Subject Matter Experts, and IS representatives, usually spanning more than one product or user group. They are responsible for determining scope, resolving conflicts and providing the design/direction for the build team for the respective integrated area (e.g., Order Sets, Facility Structure, Legal Medical Record).

Interactive Voice Response (IVR) – A voice recognition phone capability that allows Epic users to speak into a phone and have their message transcribed. IVR is commonly used by patients/clients to schedule appointments or place pharmacy orders.

Key Performance Indicator (KPI) – Identified metrics that are taken before and after go-live to measure performance in such areas as productivity, quality, cost, revenue and utilization. This may also be referred to as a Key Performance Measure.
IMPLEMENTATION – continued

**Licensed Independent Providers (LIPs)** – An individual permitted by law and the organization to provide care, treatment and services without direct supervision. An LIP operates within the scope of his/her license, consistent with individually granted clinical privileges. This includes, but is not limited to, attending physicians, residents, physician assistants, certified registered nurse anesthetists, psychologists, Licensed Independent Clinical Social Workers (LICSW) and nurse practitioners functioning in an expanded role.

**Manager Orders Activity (MOA)** – The central hub from which UMMHC clinicians review and place orders. By giving clinicians easier access to ordering information and clinical documentation, it helps them make better-informed decisions more quickly. Additionally, the activity helps prevent duplicate orders by highlighting groups of similar orders during order entry.

**Managed Care Network (MCN)** – Managed care plans are a type of health insurance. They have contracts with health care providers and medical facilities to provide care for members at reduced costs. These providers make up the plan’s network.

**Meaningful Use (MU)** – A program driven by the federal government to improve the quality of care and patient outcomes by “meaningfully using” any certified Electronic Medical Record (EMR) or Electronic Health Record (EHR).

**Medication Administration Record (MAR)** – An electronic entry and documentation of drugs administered to a patient.

**Navigator** – A series of sections meant to guide an end user through a particular workflow, such as an office visit, or medication reconciliation.

**NCCN** – National Comprehensive Cancer Network.

**NUBC** – National Uniform Billing Committee (NUBC) was formed in 1975 to develop and maintain a single billing form and standard data set to be used nationwide by institutional, private and public providers and payers for handling health care claims.

**Nursing and Clinical Ancillary Providers** – All other nurses and clinical professionals, with the exception of Licensed Independent Providers.

**Order Sets** – Inpatient order sets, which are a compilation of several orders, will be developed utilizing evidence-based research and consensus decision-making by specialty groups of UMMHC physicians, pharmacists and nursing staff.

**PACS** – Picture Archiving and Communication System (PACS) is a medical imaging technology which provides economical storage and convenient access to images from multiple modalities (source machine types).
IMPLEMENTATION – continued

**Partnership Council** – Governing workgroup comprised of Enterprise Design Team Members, Subject Matter Experts, and IS representatives, usually spanning one application or user group. They are responsible for determining scope, resolving conflicts, and providing the design/direction for the build team for their respective application/user group (e.g., ASAP, Beacon, Beaker).

**Patient Header** – Top of the patient chart within Epic, which allows the end user to quickly see some key patient information (e.g., age, height, weight, allergies).

**Personalization** – Changes to Epic that are individual-specific (personal) to increase efficiency and save favorites. For example, creating order set defaults for commonly used order sets. We will have dedicated time the months before Go-Live for all providers to personalize Epic.

**Physician Champion** – Physician leader representing and championing the Epic system and implementation, especially for particular applications.

**Playground** – The Epic Playground Environment is a replica of the Epic training environment (with the same patient and user information used in training) that allows physicians and employees to practice what they learned in Epic training.

**Pools** – An In Basket messaging group created by administrators. When a message is sent to the pool, all recipients share a single message, so the action taken by one individual is seen by everyone in that pool.

**Preference List** – A set of frequently used orders.

**Principal Trainers (PT)** – These individuals are Epic-certified trainers who develop lesson plans and implement Epic end-user training programs. They also build and maintain the Epic training environment; train credential trainers (CTs), Super Users and end users prior to go-live; as well as provide ongoing support to Epic end users and new staff after the initial go-live.

**Remote Access** – The ability for authorized and authenticated users of Epic to access the system over a secure Internet connection. Remote access provides the ability to perform essentially all Epic functions from home or from a clinical site not on the network.

**Scope** – The parameters that define what is included in the Epic implementation, such as applications, interfaces, clinical content, etc.

**SmartSet** – A documentation template that groups orders, notes, chief complaints, etc. Using SmartSets reduces data entry time. These are used in the ambulatory setting and are somewhat analogous to order sets in the inpatient setting, except that they can include documentation as well.

**SmartText** – A text template for charting that can include text, SmartPhrases, SmartLists and SmartkLinks.

10/11/16
IMPLEMENTATION – continued

**SmartPhrase** (also known as a “dot phrase”) – Text that can be populated by typing a period then the shortcut name (e.g., .H+P could expand to “History and Physical”).

**SmartList** – A series of items that can be selected from a drop-down list. These may be built by the Epic Project Team or by the user.

**SmartLink** – A tool that allows information stored elsewhere in the patient's record to be automatically pulled into a note (e.g., vital signs can be automatically added to a note by using a SmartLink).

**SNOMED** – Systematized Nomenclature of Medicine.

**Specialist Trainer (ST)** – Physicians and advanced care practitioners selected to become experts in using the Epic system, help develop training curriculum for physicians in their area of specialty, and train their peers before go-live.

**Specialists Training Specialists Program** – Physicians selected to participate in this 12-month program will train their peers in the eight weeks prior to go-live as well as take part in training-related activities.

**Star** – The Cogito Data Warehouse. Cogito Star brings together information from varied sources within and outside of UMass Memorial for improved data management and analytics. Star provides an analytics platform that is intuitive, flexible and customizable.

**Subject Matter Experts (SMEs)** – Individuals from across the organization with extensive business or clinical operations experience that participate in creating the content and the design/configuration of the Epic system.

**Super User** – An individual who receives additional training in order to assist peers and provide support during and after go-live.

**Testing (Integrated)** – Testing to ensure that all integrated workflows operate as expected. Testers will utilize patient scenarios in which a patient moves from department to department (e.g., from the emergency room into surgery, etc.) to test the system’s integration among the applications.

**Testing (Unit)** – The use of patient scenarios to test each application and related workflows independently of other Epic applications.

**Testing (Usability)** – A test where physicians, nurses, and all other roles use test scripts with patient scenarios to validate the system’s functionality and to identify any issues.

**Training (End User)** – Instruction delivered either in a classroom setting or online (also referred to as e-Learning) that allows physicians and employees hands-on experience using Epic. Courses vary by department and job description.
IMPLEMENTATION – continued

User ID – The User ID is a unique identification number assigned to each Epic user. Unique User IDs and passwords are required to log into the Epic system.

Workflow – Organization of tasks in day-to-day work.

Workflow Adoption – During the Collaborative Workflow Build phase there will be three Workflow Adoption Sessions to refine and validate the Epic system. Workflows decided upon during the CDS will be reviewed and validated by the Subject Matter Experts and Enterprise Design Team.

Workflow Adoption Sessions – An opportunity for Collaborative Design Session (CDS) attendees to review and validate via Epic, the workflows decided upon during CDS.

Workflow Walkthrough (WFWT) – A demonstration of validated integrated workflows conducted at the start of integrated testing. The WFWT is meant to be both a celebration and recognition of completing the system build, and a means to build excitement prior to training.

Workqueue – A generic term for a work list for Epic end users. Common examples include patient, follow-up, claim edit and charge review workqueues.

Workgroup – A group of selected individuals to provide input on Epic-related subject matter.