


# Acute Pain module

 New Visit For  
**Jan Dangerfield RN67365209H**

✕ Cancel

✓ Save

Add Pain Assessment

Pain (Rest)

0

1

2

3

4

5

6

7

8

9

10

Pain (Movement)

0

1

2

3

4

5

6

7

8

9

10

FAS

A - No impairment of function due to pain

B - Some impairment of function due to pain

C - Unable to perform the function due to pain

A

B

C

**‘More detailed and reliable records allow for greater accuracy and lead to increased patient safety. Lost paper records are now a thing of the past!’**

Dr Patrick Musto, Consultant Anaesthetist,  
Leicester General Hospital



## Benefits

- Clinicians can manage and document pain rounds electronically and efficiently.
- Patient histories, including anaesthesia and recovery reports, are available at the touch of a button.
- Clinicians can compare modalities, pain scores and other data.

# GCC

*Acute Pain* is a module in the GCC, a fully integrated suite of clinical software modules designed specifically for the acute care environment.

Individual modules automatically capture patient data in the preoperative, intraoperative and postoperative phases and include acute pain management recording.

Each patient’s medical history is collated into a consolidated record that is accessible from any secure portal, ensuring that clinicians can access the right patient information at any time.

GCC modules are accessed via purpose-built Getz Touch medical-grade hardware devices installed in induction bays, operating theatres and PACU/ recovery rooms, or via web-based portals suited for both personal computers and mobile devices.

Our enterprise-level subscription offering is scalable so it grows as your hospital or group of hospitals grows. The architecture of our modules complies with HL7 standards, ensuring seamless interfacing with hospital patient administration systems, theatre booking systems and all models of patient monitoring equipment.

# Module overview

The GCC *Acute Pain* module offers a mobile, point-of-care solution for documenting acute pain service information. Observations and other details that can be documented include:

- pain and nausea scores
- modalities of pain relief
- medications
- side effects
- motor and sensitivity responses
- functional activity scores

Patients may be referred to the acute pain service team via the *Induction*, *IntraOp* or *PACU* modules and new referrals can be created directly in the *Acute Pain* module.

The module is intuitive and easy to use. Case notes are easily accessible to clinicians so interviews are less arduous for patients. Clinicians can schedule patients to be revisited by the acute pain service team, discharge patients from pain rounds and reinstate discharged patients.

At the conclusion of an acute pain service, patients can be discharged with an optional pain management plan.

A copy of the acute pain report and discharge plan is stored in the patient’s file and is uploaded to the GCC *Chronology* module.

**Elegant eHealth solutions  
for every hospital**

**GCC modules are used in hospitals  
and medical centres in four continents**

**50+**



‘We are able to use the consistent and comprehensive records to identify areas to improve outcomes and enhance patient safety.’

Associate Professor Ong Biauwi Chi, Director of Patient Safety and Clinical Governance and Senior Consultant, Department of Anaesthesiology, Singapore General Hospital

# Active Patient List

The Active Patient List enables clinicians to prioritise patients that have been referred to, or are currently being seen by, a hospital’s acute pain service.

Clinicians can search for and add patients to pain rounds. Details of the patient’s last assessment and status for example,

new, visited or overdue are included in the list to help prioritise tasks.

# Patient Summary

The Patient Summary screen displays the patient’s demographic information, alerts and any known drug allergies.

It also displays information on the patient’s medications, surgical history, pain assessments and side effects.

Pain scores and functional activity scores (FAS) are collated in a graphical format to enable clinicians to quickly identify trends.

← Active Patient List (6)

↻ Refresh

+ Add Referral

Discharged

Active

Ward 1 East

Bed No.	Patient ID	Patient Name	Last Assessment	Status
16	RN49262897H	Elanor Breed		New
2	RN6733851H	Elanor Ayre	Ms Kate Knapp - 22-Mar-2016 (Today)	Visited

Ward 4 South

Bed No.	Patient ID	Patient Name	Last Assessment	Status
14	RN40505371H	Kelvin Groeben	Ms Kate Knapp - 22-Mar-2016 (Today)	Visited
3	RN48956065H	Ji Nottage		New

Ward 7 West

Bed No.	Patient ID	Patient Name	Last Assessment	Status
20	RN17958621H	Deanne Sutherland		New
8	RN67365209H	Jan Dangerfield	Ms Kate Knapp - 22-Mar-2016 (Today)	Visited

← Patient Summary

Jan Dangerfield RN67365209H

↻ Discharge

≡ Chronology

+ New Visit

Patient Details

Name

Jan Dangerfield

Patient ID

RN67365209H

Date Of Birth

06-Mar-1940

Age

76y

Gender

Male

Height

178cm

Weight

88kg

BMI

27.77

Address

55 Green St  
Dabee  
NSW  
2849

Home Phone

31204412

Work Phone

26501818

Mobile

0492266493

Email Address

Summary

🔔 Alerts (2)

Warning - Patient Note - Opioid tolerance

Information - Patient Note - Sleep apnoea

View All

💊 Current Medications (2)

Oxycodone - 60mg, bd

Temazepam - 10mg, nocte

View All

Elegant eHealth solutions for every hospital

GCC modules used in 1200 surgical operations every day



# Acute Pain Referral

Most referrals to the acute pain service are made during surgery by an anaesthetist using the GCC *IntraOp* module.

Referrals can also be created within the GCC *PACU* and *Acute Pain* modules.

Where a patient is not referred by an anaesthetist during surgery, they can be referred using the referral screen within the *Acute Pain* module.

←

Add Referral

×

Cancel

✓

Save

Sian Boston RN85240147H

RN85240147H - Sian Boston

Referred By

Referred On Date

22-March-2016

Does this patient have a regional block?

Y

N

Facility

▼

Ward

Room

Bed

Anaesthetic Technique

▼

Actual Procedure

Notes

# Patient Visit

Clinicians can easily create new pain assessments for patients. They can assess patients and create notes, assign medications, record past medications and specify treatment plans.

Clinicians can record pain scores (rest and movement) and Functional Activity Scores (FAS).

They can also score general and regional side effects such as sedation, itch, nausea/vomiting, hypotension, sensory deficit, motor deficit, backache, site inflammation and temperature.

←

New Visit For

×

Cancel

✓

Save

Jan Dangerfield RN67365209H

Add Pain Assessment

Pain (Rest)

0

1

2

3

4

5

6

7

8

9

10

Pain (Movement)

0

1

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FAS

A - No impairment of function due to pain

B - Some impairment of function due to pain

C - Unable to perform the function due to pain

A

B

C

Add Notes

New Note

Seen by PG. Pain increased last night so PCA added

×

+ Add Note

Elegant eHealth solutions  
for every hospital

We have demonstrated well over **500%**  
return on investment for existing customers



# Discharge Patient

The Discharge Patient screen features a list of hospital-configurable requirements that must be met before patients

are discharged from the acute pain service, including any documentation to be provided to patients.

Discharge Patient 'Kelvin Groeben' From Acute Pain Service

Please confirm the following before discharging this patient

☐ Patient given epidural care information

☐ Patient referred to drug and alcohol services

☐ Pain treatment in place

Cancel

Discharge

Age

57 y 1m

Gender

Male

Height

Weight

BMI

Home Phone

57150680

Work Phone

20568871

Mobile

0434179345

Email Address

Summary

Alerts (0)

No details have been entered for this Patient.

Current Medications (0)

This Patient is not currently taking any medication.

# Acute Pain Report

Patient reports can be previewed at any time during an acute pain service to check that essential aspects have been documented.

When a patient is discharged from the service their patient report is automatically saved in their electronic medical record (EMR) and can be viewed in the *Chronology* module. The report can also be printed and included in the patient’s notes.

Getz Clinical

Acute Pain Report

Page 1 of 2

Referring Anaesthetist Dr Gary Jones

Date Referred 21-Mar-2016 13:24

MRN

Episode ID

Name

Date of Birth

Gender

Height

Weight

RN67365209

Jan Dangerfield

06-Mar-1940

Male

178cm

88kg

Loc

Date Discharged

Date Surgery

Surgical Category

Anaes. Tec

Ward - 7 West | Room - 8 | Bed - 8

21-Mar-2016

Alert

Opioid tolerance - Warning

Sleep apnoea - Information

Procedure

Correction left 3rd hammer toe (fusion)

Date	22-Mar-2016 11:42	22-Mar-2016 11:43	22-Mar-2016 11:43	22-Mar-2016 15:24	23-Mar-2016 11:17
Seen By	Kate Knapp	Kate Knapp	Kate Knapp	Kate Knapp	Kate Knapp
Regional Block					
Bupivacaine + Fentanyl					
Date	22-Mar-2016 11:42	22-Mar-2016 11:43	22-Mar-2016 11:43	22-Mar-2016 15:24	23-Mar-2016 11:17
General					
Sedation	1			1	1
Itch	0			1	1
Nausea	2			1	1
Epidural/Regional					
Hypotension	N			N	N
Sensory Deficit	N			N	N
Temperature	36.8				37
Motor Deficit	N			N	N
Backache	N			N	N
Site Inflamed	N			N	N
Pain Assessment					
Date	22-Mar-2016 11:42	22-Mar-2016 11:43	22-Mar-2016 11:43	22-Mar-2016 15:24	23-Mar-2016 11:17
Pain (Rest)	1	2	1	2	2
Pain (Movement)	4	6	3	4	3
FAS	B	B	B	C	B

Pain Assessment

Pain (Rest)

Pain (Movement)

Visit/Assessment Date	Pain (Rest)	Pain (Movement)
12:00 PM	1	4
2:00 PM	2	6
4:00 PM	2	3
6:00 PM	2	3
8:00 PM	2	3
10:00 AM	2	3

Elegant eHealth solutions for every hospital

HIPAA (Health Insurance Portability and Accountability Act) compliant





# Getz Clinical

Getz Clinical is a world leader in perioperative information management systems.

Our solutions, implemented through our GCC suite of software modules, have been deployed in over 50 hospitals and medical centres across Asia, Europe, Africa, Australia and the Pacific.

Major customers include Singapore General Hospital, the University Hospitals of Leicester Trust in the United Kingdom and the Chris Hani Baragwanath Hospital in South Africa. In Australia our solutions are used by Lyell McEwin Hospital and Queensland Health.

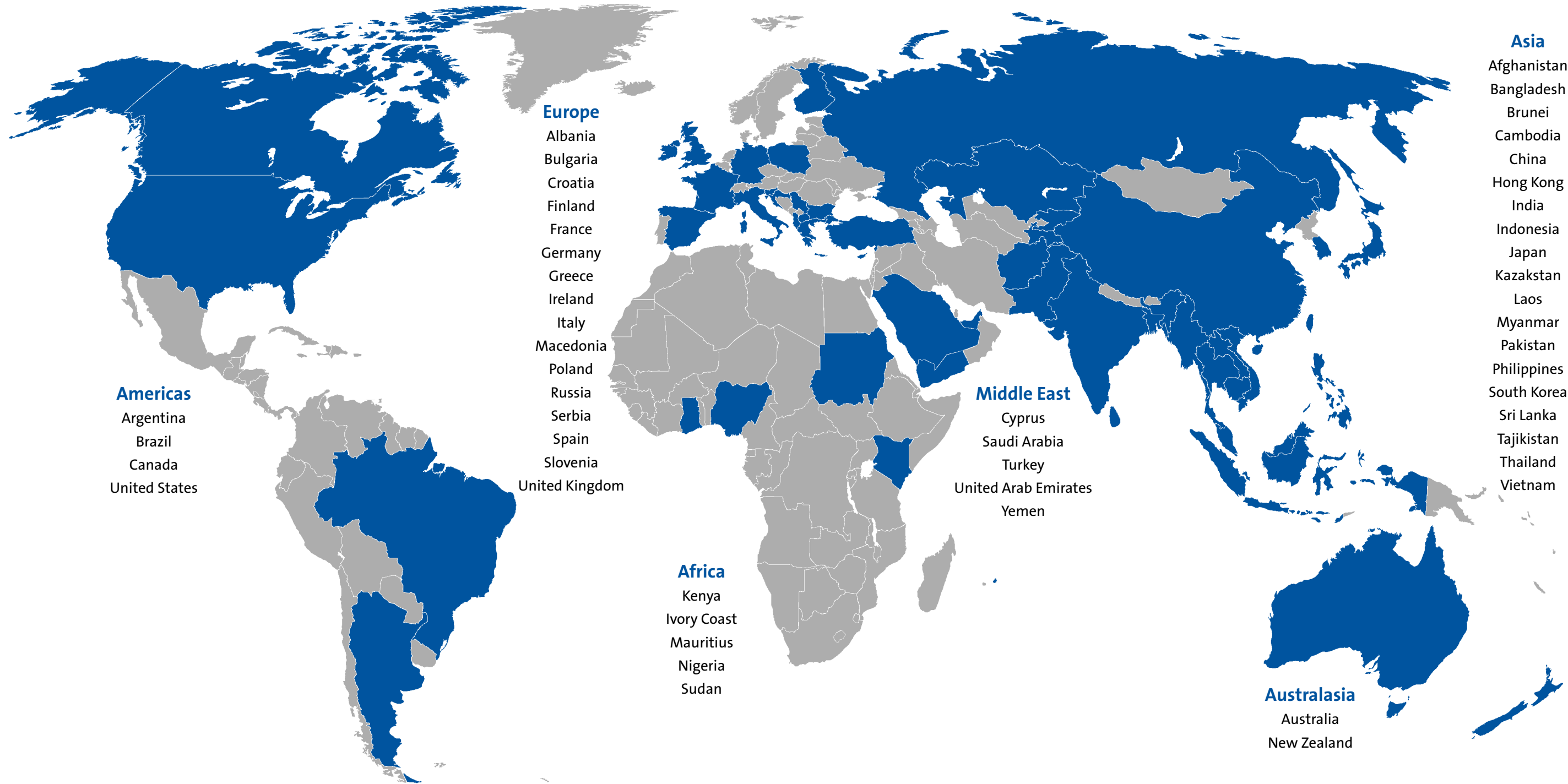
The Queensland Health project, covering 44 hospitals, remains the largest hospital network of its kind in the world.

Getz Clinical has sales and support teams operating out of seven offices in Australia, Singapore, the United Kingdom and the Philippines.

Our team of highly skilled personnel with extensive experience in providing eHealth solutions includes developers, integration specialists, project managers, clinical experts, business analysts, service delivery managers, sales managers and account managers.

Our head office is in Singapore and our development centre is located in Adelaide in South Australia.

Getz Clinical is a subsidiary of the Getz Group of companies. The Getz Group, founded in 1852, is a strategic investment business. Our products and services are delivered by 12,000 employees in 50 countries, with an annual turnover exceeding US\$1.27 billion.



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The Getz Group is a diversified business focusing on healthcare, chemicals, distribution, retailing and hotels.

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