

MAIN MENU	SUB-MENU 1	SUB-MENU 2	Definition
DIRECT PATIENT CARE			All tasks directly related to patient communication and contact, including communication with family in the presence of the patient
	Initial		Patient's first visit from the observed Hospitalist of the day
		Evaluation	Primary purpose of communication between observed hospitalist and patient is evaluation of patient, includes patient examination
		Education	Primary purpose of communication between observed hospitalist and patient is patient education (answering questions, explaining plan of care, explaining procedures, etc.)
	Follow Up		Any routine visit from the observed hospitalist, following their initial visit of the day
		Same as above	
	Reassess		Visiting the patient in response to a new pain or by request of family, nurse staff, etc. (non-emergent)
		Same as above	
	DCI		Visiting the patient with the primary goal of explaining patient's discharge instructions
	Emergent Response		Visiting the patient in response to an emergent call
		Same as above	
	Phone		Communicating with the patient on the telephone
	Transfer		Accompanying the patient to a new floor/unit, includes travel time
OTHER INDIRECT PATIENT CARE			Activities directly related to patient care, not involving the patient,
	Rx		Filling out prescription slips
	Dictation		Recording dictation regarding patient
	Finding and/or Reviewing Results		Tracking down and reviewing test/study results, including viewing an image (x-ray, echo, etc.) and listening to the associated dictation, includes travel time and any conversation directly associated with the finding of the results
		Cardiology	Results related to cardiology (echo, etc.)
		Radiology	Results related to radiology (x-ray, etc.)
		Other	All other results
	Internet Search – Med know		Internet search for any medical knowledge including: accessing up-to-date, google, or searching medication dosage

	Internet Search – non Med know		Internet search related to patient care but not regarding medical knowledge, i.e. searching for PCP phone numbers, etc.
	Telemetry		Reading Telemetry monitors
	Paper Chart		Finding and Reading Patient's non-electronic chart, includes patient's printed history and physical

COMMUNICATION			Any communication regarding professional activities, not directly involving the patients
	Telephone		Communicating via the telephone, includes incoming and outgoing calls,
		Hospitalist	Communicating with another Hospitalist
		PCP	Communicating with a Primary care physician
		Specialist	Communicating with any other non-hospitalist physician, that is not the PCP
		PCC	Communicating with Patient Care Coordinator
		Nursing Staff	Communicating with Nurse
		Ancillary Staff	Communicating with ST, OT, PT, Lab Tech, Rad
		Pharmacy	Communicating with inpatient or outpatient pharmacy
		Utilization Staff	Communicating with social worker, diabetes educator, care facilitator, case manager
		Family	Communicating with patient's family, without the patient present
	Face-to-Face		Communicating face-to-face
		Same as above	
	Send Page		Sending a text page, timing begins when hospitalist opens WebPaging
		Doctor	
		Nurse	
		Other	
	Receive Page		Receiving a page
		Doctor	
		Nurse	
		Other	
	E-mail		Sending a professional related e-mail
	Fax		Time spent locating a fax number and faxing

EMR			
	Other		Updating records, adding patients to patient care list, etc.
	Read/ Review		Accessing any of the options of the EMR solely to read or review the information
		Current H&P and Notes	Patient's History and Physical and any notes regarding the patient written by Specialist or Hospitalist
		Past Records	Includes patient's past H&P, Notes, and Discharge
		Clinical Records	Reviewing results of patient's labs or radiology, patient's vitals, 7Days, Ins and Outs, patient's medications (MAR), radiology results. This reading and reviewing may include time spent writing hand written notes about the patient's results and vitals.
		Current Discharge	Patient's written discharge from current hospitalization (primarily occurs with Hospitalists who do not write their patient's discharge)
		PACS	Viewing images
		Epic	Accessing, Reading or Reviewing Patient's records in Epic
	Write		Documenting the time typing any of the below activities includes time spent looking at other notes or necessary materials (vitals, etc.). For example, a Hospitalist may be writing and switch to a different interface inside the EMR to look at medications to include in their writing, this entire time will be documented as writing.
		H&P	Patient's History and Physical
		Progress Notes	Patient's Progress Notes
		Discharge Instructions	Discharge instructions for the patient
		Discharge Summary	Discharge summary written for documentation
		Med Rec	Medication Reconciliation
		Sign Out	Form completed before the Hospitalist leaves for the day
	Order		
		Admission	This includes only admission orders.
		Other	This includes all non-admission orders.
Prof. Development			
	Read Articles		Reading scholarly articles
	Attend Meeting/		Attending a meeting or conference

	Conference		
	Other		Performing any activities related to professional development not already identified, i.e. any activities related to committee involvement, any activities related to quality improvement projects, DIMAIC, etc.
Travel			This will include time spent walking, riding elevators, using the stairs, etc.
	Within current unit		Travel within assigned unit
	Outside current unit		Any travel in which hospitalist leaves assigned unit
Idle			Any idle time, does not include time spent waiting for EMR
Personal			Documentation of personal time will include any time spent related to personal activities, i.e. breaks, lunch, communication not regarding hospital activities, etc.