

Uploader Role

Louisiana Physician Orders for Scope of Treatment

REGISTRY

This tipsheet will walk you through the process of uploading scanned LaPOST documents to the LaPOST Registry.

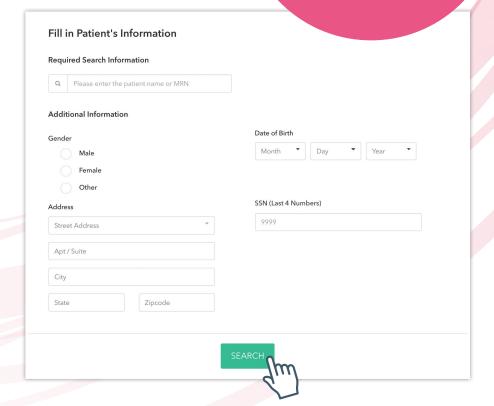
Steps to Follow

NOTE: This workflow assumes that a LaPOST document has been scanned and exists on the workstation you are accessing the LaPOST registry from.

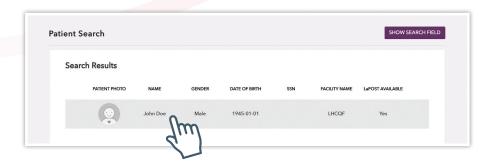
You may also start by scanning the hard copy into the computer you are using with a scanner or other device connected to your PC.

The uploader
role is intended
for CLERICAL,
ADMINISTRATIVE and
CLINICAL STAFF who
handle and maintain
patient medical records
and are trained in
HIPAA compliance.

Once logged into the registry, enter the patient name, gender and as much additional information as is available in the appropriate fields, then click "Search".

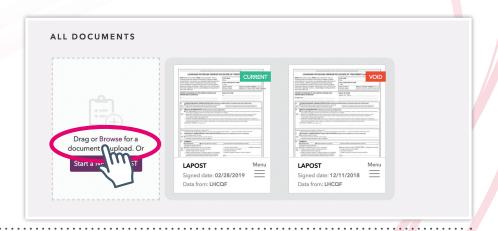


Review the search results and select the correct patient.

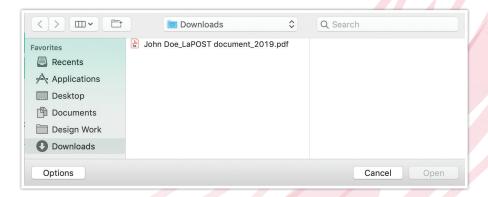


Uploader Role

Click "Browse" under the "All Documents" section towards the bottom left of the screen to locate the LaPOST document which was uploaded to your computer.



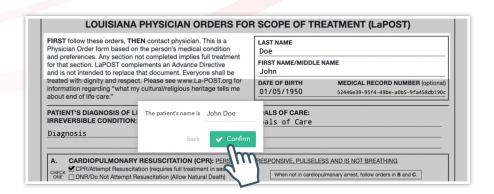
A Now browse to the location of the scanned LaPOST document you wish to upload. Select and open the document.



You will get a dialogue window confirming the document type as LaPOST. Click the "Confirm" button.



You will next see the patient's name displayed in the dialogue window. You should have already verified the patient's name in the patient's chart. Select "Confirm".



Uploader Role

7 The next dialogue window questions whether the LaPOST document has a valid physician signature.

If not, the system will not allow you to proceed with the upload.

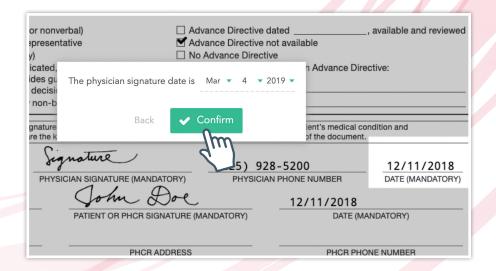
If there is a valid physician signature, select "Yes" and "Confirm".

☑ Patient (Patient has ca	pacity) Personal Health Care Rep	presentative (PHCR)				
se orders is: ration (can be oral or nonverbal) nal Health Care Representative nt without capacity)	Does the form have a valid physician signatu Yes No	re?, availa				
ice Directive, if indicated, patient has ocument that provides guidance for 'she loses medical decision-making	Back Confirm	dvance Directive:				
vould be medically non-beneficial.	Phone:					
voluntary and the signatures below indicate that the physician orders are consistent in the patient's medical condition treatment plan and are the known desires or in the best interest of the patient who is the subject of the document.						
Signatur	(225) 928-52	200 1				
I'S NAME PHYSICIAN SIGN	NATURE (MANDATORY) PHYSICIAN PHO	ONE NUMBER DA				
Jo	hu Doe	12/11/2018				
R PHCR NAME PATIENT	T OR PHCR SIGNATURE (MANDATORY)	DATE (MANDATO				

8 The next dialogue window prompts you to confirm the physician signature date.

NOTE: If you need to change this date, click on the date digits and you can navigate back and forth using the navigation arrows for month and year.

If the date is correct, or once the date has been corrected, click on "Confirm".



The next dialogue window asks if the document has a valid patient or personal health care representative signature.

If not, the system will not allow you to proceed with the upload.

If there is a valid patient or personal health care representative signature, select "Yes" and "Confirm".

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ation (can be oral or nonv	rerbal)	☐ Advance Direct	ive dated	, availal
al Health Care Represer	tativo	M Advance Direct	ive not availa	ble
it without capacity) ce Directive, if indicated.	Does the form have a val	id patient or PHCR s	ignature??	Advance Directive:
cument that provides gushe loses medical decision	✓ Yes No			
ould be medically non-b	Back	✓ Confirm		
voluntary and the signature reatment plan and are the ki	nown desires or in the best inte	rest of the mile	is the subject	ent's medical condition a of the document.
Si	gnature	(225)	928-520) 12
S NAME PHYS	SICIAN SIGNATURE (MANDATO	ORY) PHYS	ICIAN PHONE	NUMBER DAT
	John D	oe	12.	/11/2018
PHCR NAME	PATIENT OR PHCR SIGNA	TURE (MANDATORY)		DATE (MANDATO)
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Uploader Role

The next dialogue window prompts you to confirm the patient or personal health care representative signature date.

NOTE: If you need to change this date, click on the date digits and you can navigate back and forth using the navigation arrows for day, month and year.

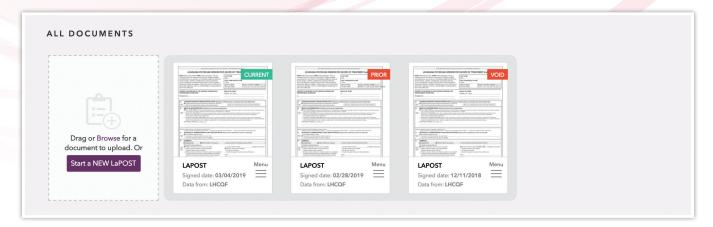
If the date is correct, or once the date has been corrected, click on "Confirm".



Once the signed date is confirmed, your upload will be complete.



The LaPOST document is now visible in the "All Documents" section at the bottom of the Advance Care Planning Dashboard.



NOTE: It is important to note that if the LaPOST document that was just uploaded has a Physician signature that is older than the Current LaPOST document in the registry, it will show as a Prior document in the All Documents section.

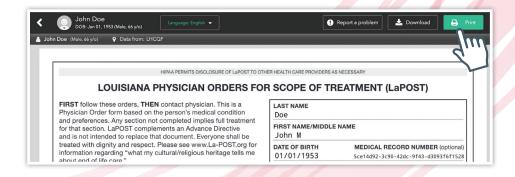
Uploader Role

You will see the thumbnail image of that patient's uploaded LaPOST document displayed in the same space instead of the color-coded thumbnails.

You can open the LaPOST document by clicking on "View LaPOST" near the top right of the dashboard or by clicking on the menu button of the current LaPOST thumbnail in the all documents section at the bottom of the screen.



You can print the document by clicking on the "Print" button located on the top right section of the screen.



You can also report a problem by clicking the "Report a Problem" button.

