CPOE EVALUATION TOOL (V5.0)
USER INSTRUCTIONS
(FOR ADULT AND GENERAL HOSPITALS ONLY)
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WHAT'S NEW IN 2023

The CPOE Evaluation Tool is now available immediately upon submission of the Hospital Profile. This allows adult and general hospitals to complete a CPOE Test at their earliest convenience starting on April 1, without having to first complete and affirm Section 2. CPOE Test results will continue to be scored and publicly reported only once the Survey has been submitted.

Additionally, Leapfrog made several content updates for the Adult Inpatient Test. First, the Test Order library was updated as appropriate based on the latest published literature. Second, the Drug Allergy Order Checking Category was removed due to sustained high performance in this category across all hospitals over multiple years. Finally, the Drug Dose (Single) and Drug Dose (Daily) Order Checking Categories were combined into a single Order Checking Category renamed Excessive Dosing which includes both single and daily dose testing scenarios.

Although the total number of Test Orders has decreased, there are no changes to the scoring algorithm for the Adult Inpatient Test.
CHANGE SUMMARY

If substantive changes are made to the CPOE Evaluation Tool after release after April 1, 2023, they will be documented in this Change Summary section.
IMPORTANT NOTES REGARDING VERSION 5.0

Review these instructions completely before taking the Adult Inpatient Test and have them available while completing it.

Because the CPOE Evaluation Tool platform was moved to a new platform on September 12, 2022, all hospitals should carefully review these instructions and complete a Sample Test before starting an Adult Inpatient Test (which is used in public reporting).

BROWSER REQUIREMENTS

Version 5.0 of the CPOE Evaluation Tool is only compatible with Chrome and Microsoft Edge. Internet Explorer is no longer supported.

Prior to initiating the Adult Inpatient Test, we recommend taking a Sample Test on the same computer using the same web browser that will be used to complete the Adult Inpatient Test. Ignoring these instructions may result in an error and your hospital will not be able to retake an Adult Inpatient Test for 120 days.

DEADLINES

The Submission Deadline for the Leapfrog Hospital Survey is June 30. Hospitals are encouraged to ensure that the Adult Inpatient CPOE Test is submitted along with the Survey (i.e., in the same month) to meet the deadlines for the Leapfrog Hospital Survey and Leapfrog’s other programs, such as Top Hospital and the Leapfrog Hospital Safety Grade.
OVERVIEW OF VERSION 5.0

The CPOE Evaluation Tool was designed by medication safety experts and researchers at Brigham and Women's Hospital and the University of Utah to test the ability of inpatient CPOE systems to alert prescribers to frequent serious medication errors known to cause harm to patients. In addition, the Tool was designed to help hospitals improve their use of clinical decision support to reduce adverse drug events and improve medication safety.

The CPOE Evaluation Tool includes two tests: a Sample Test and an Adult Inpatient Test.

Only the Adult Inpatient Test is scored and publicly reported. Once you begin an Adult Inpatient Test (referred to throughout this document as the “test”) and submit the Leapfrog Hospital Survey, you are committing to the public reporting of the test score and overall CPOE score. Once an Adult Inpatient Test has been completed, another test can only be initiated after waiting 120 days after the date and time of the first test completion during the Survey cycle (April 1 – November 30). Therefore, before beginning the Adult Inpatient Test, you are strongly encouraged to complete a Sample Test.

If you do not complete the steps of the Adult Inpatient Test within the time limits (e.g., Steps 1 - 2 within 3 hours and Steps 3 - 6 within 3 hours), the test will be scored as “Incomplete Evaluation,” and you will not be able to retake a test for 120 days.

The test also includes a “Deception Analysis,” which checks for “false positives” (e.g., hospitals reporting advice/information for Test Orders that should not generate any warning in the hospital's CPOE system). Hospitals that “fail” the Deception Analysis are scored as “Incomplete Evaluation” and will not be able to retake an Adult Inpatient Test for 120 days.

The term “prescriber” used throughout these instructions and the Leapfrog Hospital Survey materials refers to all licensed clinicians who are authorized by the state in which the hospital is located to order medications for patients. This includes residents and interns who are authorized to order medications under their own authority.

Please carefully review the Order Checking Categories and the CPOE Evaluation Tool FAQs before you begin a Sample Test or Adult Inpatient Test.

Hospitals do not obtain any rights in the CPOE Evaluation Tool (“Tool”) by virtue of conducting, administering, or participating in the Leapfrog Hospital Survey (“Survey”). Hospitals are permitted to use the Tool solely for purposes of such Survey participation and only within their organization. Hospitals must obtain explicit written permission from The Brigham and Women’s Hospital, Inc., The University of Utah, and The Leapfrog Group to use the Tool for any other purpose or to share the Tool with other entities or with persons other than their direct employees involved in the Survey. For clarity, the Tool includes software and content, including, but not limited to, patient profiles and medication order scenarios, and the restrictions and requirements stated above apply to the entire Tool and any of its components.
HOW THE TEST IS CONDUCTED

TIME LIMITS AND STEPS

Both the Sample Test and the Adult Inpatient Test involve the same seven steps detailed below. Please note the time limits for each of the steps.

While the maximum amount of time to complete Steps 1 - 2 is three hours and the maximum amount of time to complete Steps 3 - 6 is three hours, most hospitals complete the entire test in less than 3 total hours. All steps must be completed back-to-back on the same day within the time limits described below.

<table>
<thead>
<tr>
<th>Time Limits</th>
<th>Steps</th>
</tr>
</thead>
<tbody>
<tr>
<td>Steps 1 - 2 must be completed within 3 hours.</td>
<td>Step 1: Download and print the list of Test Patients, then proceed to Step 2.</td>
</tr>
<tr>
<td></td>
<td>Step 2: Enter the Test Patients into your hospital's production environment (or test environment that mirrors your production environment exactly), then go back to the Tool to confirm completion of Step 2 and proceed to Step 3 before the 3-hour time limit ends.</td>
</tr>
<tr>
<td>Steps 3 - 6 must be completed within 3 hours.</td>
<td>Step 3: Download and print the Orders and Observations Sheets, then proceed to Step 4.</td>
</tr>
<tr>
<td></td>
<td>Step 4: Have a prescriber who routinely orders medications through your inpatient CPOE system enter and sign the Test Order(s) assigned to each Test Patient. The prescriber must record any advice or information they receive from the system onto the Orders and Observations Sheets and discontinue the Test Order(s) before moving on to the next order.</td>
</tr>
<tr>
<td></td>
<td>Note: Do not record any advice or information on the Orders and Observation Sheet that was sent directly to a pharmacist.</td>
</tr>
<tr>
<td></td>
<td>Once advice or information for each of the Test Orders has been recorded on the Observations Sheet, go back to the Tool to confirm completion of Step 4 and proceed to Step 5.</td>
</tr>
<tr>
<td></td>
<td>Step 5: Record the responses from the Orders and Observations Sheets onto the Online Answer Form, review the Online Answer Form for accuracy and completeness, and submit the Online Answer Form.</td>
</tr>
<tr>
<td></td>
<td>Step 6: Complete and submit the Affirmation.</td>
</tr>
<tr>
<td></td>
<td>IMPORTANT NOTE: If you close the browser before submitting the Affirmation, you will not be able to return to the Test for 120 days and your hospital will receive a score of “Incomplete Evaluation”.</td>
</tr>
<tr>
<td></td>
<td>Step 7: View and print your results.</td>
</tr>
</tbody>
</table>

Important Note 1: Any remaining time from Steps 1 and 2 does not carry over to this portion of the test.

Important Note 2: We recommend leaving at least 45 minutes to perform Step 5.
Important Notes:

1. Once you start a test, time runs continuously, 24 hours a day, 7 days a week, and is not interrupted or suspended during “non-business hours.”

2. There is no break in time between Steps 1-2 and Steps 3-6.

3. The test will display the time limit for completing the steps of the test (e.g., “You have until 1:11 PM EDT to complete Steps 1 and 2.”). All times appear in Eastern Daylight Time. Please note that your local time zone may be different, and the official time is based on the Tool's server time. The time on your local machine (e.g., the time on your computer, phone, or watch) may not be synchronized exactly, so please note any differences.

4. Do not log out or close your browser while taking the test.

5. If you do not complete the steps within the time limits (e.g., Steps 1 - 2 within 3 hours and Steps 3 - 6 within 3 hours), the test will be scored as “Incomplete Evaluation,” and you will not be able to retake a test for 120 days.

AFFIRMATION

The Leapfrog Hospital Survey requires an individual from each participating hospital to complete an Affirmation of Accuracy at the end of each section of the Survey. Hospitals completing the Adult Inpatient Test will also need to complete an Affirmation of Accuracy once the responses have been submitted. The Affirmation signifies that the hospital has made a good faith effort to exercise the test consistent with the instructions provided and that the responses provided accurately reflect the performance of the hospital's CPOE system as currently used by prescribers to enter inpatient orders electronically. The individual completing the affirmation should be designated by the CEO and will need to provide their name and title.

If you do not to complete Step 6 of 7: Submit Affirmation, the test will be considered incomplete, and the hospital will be scored as “Incomplete Evaluation,” which will be combined with your implementation status as reported in Section 2 for an overall score of “Limited Achievement”. Within a Survey Cycle (April 1 – November 30), a hospital cannot retake a CPOE Evaluation Tool until at least 120 days have passed since their last test.

Once you affirm and submit an Adult Inpatient Test (referred to throughout this document as the “test”), you are committing to the public reporting of the overall score.

PREPARING FOR THE TEST

Important Note: The CPOE Evaluation Tool is available immediately upon submission of the Hospital Profile. This allows adult and general hospitals to complete a CPOE Test at their earliest convenience starting on April 1, without having to first complete and affirm Section 2. CPOE Test results will be scored and publicly reported only once the Survey has been submitted.

Prior to starting the Adult Inpatient Test, the hospital should select a Test Coordinator. The Test Coordinator will be the point-person for the test, log in to the CPOE Tool with the 16-digit security code for the Online Survey Tool, and keep track of time.

1. Make sure you have the 16-digit security code for the hospital. Complete and submit the Hospital Profile of the Online Survey Tool and the Take CPOE Test button will appear on the Survey
Dashboard. See Appendix B: How to Access the Sample Test for help on finding the button and starting a test.

2. Identify and schedule the team that will help you complete the test. The team will set up the Test Patients in your hospital system(s) and enter the Test Orders. There will be 10-15 Test Patients. Carefully review these instructions, including steps and time limits, with your team. Teams generally include individuals with the following expertise:

   a) **A Test Coordinator** to be the point-person and schedule the test, log in to the CPOE Tool with the 16-digit security code for the Online Survey Tool, and keep track of time.
   
   b) **ADT/Registration** to admit/register Test Patients and assign them beds.
   
   c) **Laboratory** to enter laboratory results (i.e., primarily chemistry and hematology) including INR values.
   
   d) **Nursing** to enter patient information, including allergy information and diagnosis, if that is the standard procedure.
   
   e) **At least one prescriber** is required (though some hospitals have recommended having a backup prescriber on-call just in case an emergency comes up) to enter the Test Orders. The minimum time required for the prescriber is 1 hour. The prescriber entering the Test Orders should be the “typical” prescriber who orders inpatient medications on a regular basis. Some hospitals set clinical decision support at different levels for residents, medical students, attending physicians, etc. Hospitals that have set different levels of clinical decision support should enter Test Orders and report the results using the minimum level of medication safety checking. This role cannot be completed by a pharmacist, nurse, or health informatics team member. Failure to ensure that a prescriber completes Step 4 will result in the hospital being scored as “Incomplete.”
   
   f) Optionally, hospitals may want **IT support** available to handle any technical difficulties that may come up, such as browser or printer issues.

3. Once you have assembled your team and reviewed the instructions with them, schedule your test with your team:

   a) Technical or other support persons responsible for setting up the Test Patients (Step 2) in the hospital's systems should be available for the full 3-hour period allotted for Steps 1 - 2.
   
   b) The prescriber responsible for entering the Test Orders and recording advice or information received (Step 4) should be available for the full 3-hour period allotted for Steps 3 - 6 (though the order entry step typically takes about an hour).
   
   c) As a reminder, all steps must be completed back-to-back on the same day, so plan accordingly.
   
   d) If using a remote or decentralized team to conduct the test, you may need to add extra time to complete each step of the test. It is highly recommended that you complete a Sample Test to make sure that your hospital has a process in place for completing the test with a remote team. See Appendix D: Guidance for Testing with Remote Team for additional information.

4. Inform your local IT network administrator that you will be using the following website and have them adjust security settings that would cause technical issues during the test: https://ehr-evaluation-tool.ctsi.utah.edu. If you have data egress policies, this site will need to be an exception because you will be submitting data to the test.

5. If you are not using your production system during the test, ensure that your test system mirrors order management and clinical decision support in the current production system **before** you start the Adult Inpatient Test. If the two are not in sync, either update the test system or plan to conduct the test on the production system. Taking a Sample Test can help identify discrepancies between your test and production CPOE System. If you opt to use your production system, be sure to notify the appropriate departments so that Test Orders are not filled, and bills are not generated for Test Patients.
6. Make sure the computer you are using has a compatible browser: Chrome or Microsoft Edge.

7. Make sure the user logged in to the computer is connected to a printer loaded with paper.

8. Complete a Sample Test (see information below), preferably with the team that will participate in the Adult Inpatient Test.

9. Review information in Appendix E: How to Contact the Leapfrog Help Desk.

**SAMPLE TEST**

Instructions for accessing the Sample Test are available in Appendix B: How to Access the Sample Test.

Note that clicking on Begin Scored & Timed Adult Inpatient Test starts the timed Adult Inpatient Test, which is not the Sample Test.

The Sample Test is designed to give your team, including the prescriber, an opportunity to practice completing the test process (e.g., time limits and steps, review of Order Checking Categories, browser compatibility, lab and ADT links, etc.). The Sample Test:

- is not scored
- consists of only two Test Patients and four Test Orders
- is not fully representative of the Test Patients and Test Orders that will appear in the Adult Inpatient Test (does not include testing scenarios from all Order Checking Categories)
- is not meant to predict your hospital’s score on the Adult Inpatient Test
- takes approximately 30 minutes to complete
- is subject to the same time limits as the Adult Inpatient Test (3 hours for Steps 1 - 2 and 3 hours for Steps 3 - 6), but it will not “time out” if those time limits are exceeded
- will start over from the beginning if the browser is closed at any point
- can be taken as many times as necessary without requesting a reset, but it will include the same Test Patients and Test Orders each time

Use the instructions for the Adult Inpatient Test (starting with Step 1) to complete Steps 1 - 6 of the Sample Test, then meet with your team to decide if you are ready to schedule the Adult Inpatient Test. Before starting the Adult Inpatient Test, make sure browser, printer, or other technical problems encountered during the Sample Test are resolved.

**ADULT INPATIENT TEST INSTRUCTIONS**

Instructions for accessing the Adult Inpatient Test are available in Appendix C: How to Access the Adult Inpatient Test.

**STEP 1 OF 7: PRINT TEST PATIENTS**

**Time Limit:** All times and time limit warnings appear in Eastern Daylight Time. You have 3 hours to complete Steps 1 - 2 and begin Step 3. Step 2 takes up most of that time.

Take note of the time-out time (e.g., “You have until 1:13 PM EDT to complete Steps 1 and 2) at the top of the page. Your local time zone may be different, and the official time is based on the Tool’s server time. The time on your local machine (e.g., the time on your computer, phone, or watch) may not be synchronized exactly, so please note any differences.
1. Click **Download and Print Test Patients PDF** and print the list of Test Patients (see Example A: Step 1 - Test Patients). Confirm immediately that the entire list has been printed successfully for ALL patients and ALL data columns. You will not be able to return to this page again and will be advanced to the next step without the information you need if you proceed to Step 2 before you successfully print.

**DO NOT:**
- (X) Close the browser or window
- (X) Navigate elsewhere
- (X) Proceed to Step 2 until you have successfully printed the Test Patients

If you close out of an Adult Inpatient Test that is in progress:
1. Go back to the Survey Dashboard and click **Take CPOE Tool**. You will be brought back to the CPOE Tool Dashboard and a message at the top will say “This test is underway. Click ‘Continue Test’ to continue.”
2. Scroll down to the bottom of the page and click **Continue Test**. You will be brought to the same step that you were in when you previously clicked out of the tool.

If you accidentally move past Step 1 before confirming that you have successfully downloaded and printed the Test Patients, check for your previously downloaded Test Patients PDF on your computer in the Downloads folder.

2. When you are ready, confirm that the Test Patients have been successfully printed and click **Proceed to Step 2**.

3. Note the time stamp on the page that appears on the page for Step 2. This is the deadline for completing Step 2 (which includes both entering the Test Patients into your system(s) and proceeding to Step 3). If you do not click **Proceed to Step 3** before this time, the test will be scored as “Incomplete Evaluation,” and you will not be able to retake the test for 120 days.

**STEP 2 OF 7: ENTER TEST PATIENTS**

**Time Limit:** All times and time limit warnings appear in Eastern Daylight Time. You have 3 hours to complete Steps 1 - 2 and begin Step 3. Step 2 takes up most of that time.

The procedure for setting up Test Patients is the same for the Sample and the Adult Inpatient versions of the test.

1. The Test Patients printed in Step 1 are each numbered. Assign your own unique patient identifiers so that the Test Patients can be set up in your various hospital system(s) in anticipation of entering Test Orders (e.g., Test Patient 1, Test Patient 2). You can record the unique patient identifier in the Local ID column of the printout. The Orders and Observation Sheet in Step 3 will reference the same patient numbers as those printed in Step 1, so any patient identifiers you assign in this step will need to be mapped to the Test Orders.

2. Each Test Patient has information about patient age, sex, weight, height, known allergies (or no known allergies), lab results, and problem/diagnosis.
   - a) Set up Test Patients in your hospital's appropriate system(s). For example, lab results may need to be initially entered in your hospital's laboratory information system (LIS) and transmitted or initially captured directly in your hospital's EHR or CPOE system. Similarly, problem/diagnosis, age, sex, and allergy information may be initially captured in your ADT system, or initially captured in your EHR system.
b) Enter problems/diagnoses into an electronic problem list or as an admission diagnosis in accordance with your standard practice.

c) If a patient does not have a pregnancy diagnosis, then the patient status should be entered into your system as not pregnant.

**Note regarding serum creatinine**
All Test Patients have a serum creatinine result. Note that some results may be normal as many hospitals require normal creatinine levels prior to ordering renally cleared medications.

**Note regarding Anaphylaxis reaction to penicillin**
Some Test Patients have an anaphylaxis reaction to penicillin. Document this allergic reaction in accordance with your standard practice.

3. Test Patients may only be entered into the hospital's test environment if the test environment is identical to or "mirrors" the production environment, including clinical decision support rules. If using your production system, it may be necessary to alert ancillary departments so that bills will not be generated for Test Patients.

4. Once confident that the Test Patients have been accurately set up in the appropriate hospital system(s), continue to Step 3 of 7: Download & Print Orders and Observations Sheet.

5. Once you check the box to confirm you are ready to move on and select **Proceed to Step 3**, the 3-hour time limit for Steps 3 - 6 begins. Any remaining time from Steps 1 - 2 does not carry over to this portion of the test.

**STEP 3 OF 7: DOWNLOAD & PRINT ORDERS AND OBSERVATIONS SHEET**

**Time Limit:** All times and time limit warnings appear in Eastern Daylight Time. You have 3 hours to complete Steps 3 - 6. You are advised to save about 45 minutes to complete Step 5.

Take note of the time-out time (e.g., “You have until 4:13 PM EDT to complete Steps 3-6) at the top of the page. Your local time zone may be different, and the official time is based on the Tool’s server time. The time on your local machine (e.g., the time on your computer, phone, or watch) may not be synchronized exactly, so please note any differences.

1. Click **Download and Print Orders and Observations Sheet PDF** to print this document (see Example B: Step 3 - Orders and Observation Sheet). Confirm immediately that the entire list has printed successfully for ALL orders and ALL data columns shown online. The document will be 19 pages for the Adult Inpatient Test and is formatted so the prescriber can record the relevant advice and/or information they received while entering the Test Orders.

**DO NOT:**
(X) Close the browser or window
(X) Navigate elsewhere
(X) Proceed to Step 4 until you have successfully printed the Orders and Observation Sheet

If you close out of an Adult Inpatient Test that is in progress:
1. Go back to the Survey Dashboard and click **Take CPOE Tool**. You will be brought back to the CPOE Tool Dashboard and a message at the top will say "This test is underway. Click 'Continue Test' to continue."
2. Scroll down to the bottom of the page and click **Continue Test**. You will be brought to the same step that you were in when you previously clicked out of the tool.
If you accidentally move past Step 3 before confirming that you have successfully downloaded and printed the Orders and Observation Sheet, check for your previously downloaded Orders and Observation Sheet PDF on your computer in the Downloads folder.

2. When you are ready, confirm that the Orders and Observations Sheet has successfully printed and click **Proceed to Step 4**.

3. Note the time stamp on the page that appears at the top of Step 4 of 7: Enter Orders and Complete Observations Sheet and on the cover page of the Orders and Observations Sheet. This is the deadline for completing Steps 4 - 6 (which includes submitting and affirming your responses). If you do not complete Steps 4 - 6 before this time, the test will be scored as “Incomplete Evaluation” and you will not be able to retake the test for 120 days.

**STEP 4 OF 7: ENTER ORDERS AND COMPLETE OBSERVATIONS SHEET**

**Time Limit:** All times and time limit warnings appear in Eastern Time. You have 3 hours to complete Steps 3 - 6. You are advised to save about 45 minutes to complete Step 5. Therefore, hospitals should aim to complete Step 4 in 2 hours.

*The procedure for entering orders and recording the advice and information is the same for the Sample and the Adult Inpatient versions of the test.*

1. The Test Orders included on the Orders and Observation Sheet printed in Step 3 are assigned to one of the Test Patients set up in Step 2.
   a) **Note that a single Test Patient may have multiple Test Orders assigned to them. Be sure to note the patient and order number as you complete this step.**
   b) The next patient in the list of orders will be marked with blue text and “Next” in parentheses.

2. Test Orders are numbered and may include more than one medication. For example, a Test Order may consist of a pair of medications or a single medication. If the Test Order is for a pair of medications, the second medication will start on a new line (see **Example C: Step 4 – Pair of Orders**).

3. The **prescriber** should carefully review the **Order Checking Categories** in this document so that they understand the specific types of clinical decision support for which the Tool is designed to test.

4. The **prescriber** should enter the Test Orders for each Test Patient in the manner that is customary practice in your hospital. This includes using structured orders (e.g., order strings, order sentences, etc.) and medication order sets if that is the practice. The **prescriber** should sign every order as some clinical decision support may not appear until orders are electronically signed.

5. The **prescriber** should record any relevant advice or information presented to the **prescriber** during or after entering each numbered Test Order with the specific dose/route/frequency on the Orders and Observations Sheet.

   Relevant advice or information includes a) interruptive decision support (e.g., an alert or warning requiring a response) and non-interruptive decision support (e.g., a flag or side display that calls attention to an unsafe lab value), and b) message to monitor via labs via a drug level or chemistry test, as well as an actual monitoring order displayed for selection.

   Relevant advice or information does not include information that the prescriber needs to click in to view.
6. The Orders and Observations Sheet must be used to record relevant information that will be used to complete the Online Answer Form in Step 5.

7. The checkbox options are organized according to the types of information conveyed by decision support (e.g., dose, route, type of contraindication, etc.). The terminology corresponds to the terminology used when submitting results via the Online Answer Form in Step 5. Only record advice or information received by the prescriber entering orders (i.e., do not record any advice or information sent to a pharmacist or other type of user).

**Note regarding the Use of Structured Fields or Standard Orders (e.g., picklists, and drop-down menus)**

If the prescriber enters the Test Order and the dose, route, and frequency are available on a pick-list or a drop-down menu as a standard dose/route/frequency, and there are no warnings or alerts, then the prescriber would NOT record receiving any advice or information on the Orders and Observation Sheet.

If the prescriber attempts to enter the Test Order and either the dose, route or frequency is not available on a pick-list or drop-down menu as a standard dose/route/frequency, the prescriber should attempt to enter the order manually.

If at any point, the prescriber is not able to enter the complete order, they should record the point at which they were stopped from moving on (i.e., could not enter dose, route, or frequency).

**Note regarding Anticoagulants and INRs**

When ordering anticoagulants that have drug interactions, we understand that some systems may not display a specific drug interaction alert but may instead suggest a repeat INR. In that specific situation, we suggest that you order a new INR if a type of Inappropriate Medication Combinations alert is displayed to the prescriber, which should be recorded as such on the Orders and Observation Sheet.

**Note regarding Dose per Protocol or Pharmacy**

If the prescriber is only able to enter a dose for the Test Orders as “per protocol” or “per pharmacy” and is not able to enter the specific test dose at all, even manually (e.g., vancomycin), the prescriber should select "(B) Could not enter order with specified dose."

**Note regarding Generic and Brand Names**

Except for Bactrim and Aspirin, medications are specified as generics except for cases where we are testing for duplicate medication or class using the brand name and their generic bioequivalent. If the generic is not available, it is acceptable to choose the brand name and continue with the order. Similarly, if the brand name is specified but not available, the generic bioequivalent is acceptable.

**Note regarding Substitutions**

Except for generic and brand names, the CPOE Evaluation Tool is not designed to recognize substitutions unless specifically listed in the Test Order (e.g., enalapril maleate 10 mg po twice daily or lisinopril 10 mg po daily or ramipril 10 mg po daily). If a medication is not available in your hospital’s formulary, do not substitute a similar medication, even if your system generates an automatic substitution. If a medication is not available in your hospital’s formulary, choose "(A) Medication not electronically orderable in any formulation."

If the prescriber can enter the Test Order, even though the medication is not on the hospital's formulary, then the prescriber should do so and proceed with ordering.
If the prescriber tries to enter the Test Order and the system automatically substitutes the medication for another (i.e., there is no way to enter the Test Order), then the prescriber should mark on the Orders and Observation Sheet in Step 4 that the “Medication was not electronically orderable in any formulation.”

If the prescriber receives a suggested substitution but can enter the Test Order, the prescriber should enter the specified Test Order (i.e., not the suggested substitution) and proceed with signing the order.

8. If the medication is not available to be ordered in any formulation, choose "Medication not electronically orderable in any formulation." If the medication can be ordered, but not with the dose, frequency, or route in the Test Order, choose "(B) Could not enter order with specified..." and "Dose," "Frequency," and/or "Route," as appropriate.

   a) If the Test Order includes two orders (i.e., an order pair), and one of the two medications is not electronically orderable in any formulation, record "Medication not electronically orderable in any formulation."

   b) If the Test Order includes two orders (i.e., an order pair), and one of the two medications can be ordered, but not with the dose, frequency, or route in the Test Order, choose "(B) Could not enter order with specified..." and "Dose," "Frequency," and/or "Route," as appropriate.

9. After recording the advice or information presented to the prescriber on the Orders and Observations Sheet, select the Test Order and discontinue it. Signed orders must be DISCONTINUED before moving to the next Test Order for the same patient. If the prescriber is receiving an alert for a medication that is not in the order (because he/she is getting alerts for medications that were ordered and then discontinued), then the prescriber should only record the alerts for the current Test Order.

10. Not every Test Order should generate advice or information from the CPOE system. If no advice or information was received, “Order entered and signed, no advice or information received” should be noted on the Orders and Observation Sheet.

11. Once confident that the Orders and Observations Sheet has been completed by the licensed prescriber, click Proceed to Step 5 to enter responses in the Online Answer Form.

    Note: If you click Proceed to Step 5 after the 3-hour time limit for Steps 3 - 6, you will be informed that the time limit has expired, and the test will be scored as “Incomplete Evaluation.” You will not be able to retake the test for 120 days.

**STEP 5 OF 7: RECORD RESPONSES**

*Time Limit:* All times and time limit warnings appear in Eastern Daylight Time. You have 3-hours to complete Steps 3 - 6. You are advised to save about 45 minutes to complete Steps 5 and 6.

Take note of the time-out time (e.g., you have until 4:13 PM EDT to complete Steps 3-6) at the top of the page. This is the deadline for completing Steps 5 – 6. If you do not complete Steps 5 and 6 before this time, the test will be scored as “Incomplete Evaluation” and you will not be able to retake the test for 120 days. Your local time zone may be different, and the official time is based on the Tool’s server time. The time on your local machine (e.g., the time on your computer, phone, or watch) may not be synchronized exactly, so please note any differences.

*The procedure for entering recorded responses onto the Online Answer Form is the same for the Sample and the Adult Inpatient versions of the test.*
1. Each Test Order from the Orders and Observations Sheet from Step 4 appears in the same numbered order on the Online Answer Form in Step 5.

2. For each of the Test Orders, select the radio button that corresponds to the advice or information recorded by the prescriber on the Orders and Observations Sheet from Step 4. Note that the specific radio button response options may differ from order to order. You can only select one radio button for each Test Order.

3. If the Test Order could not be entered as specified (i.e., “Medication not electronically orderable in any formulation” or “Could not enter with the specified dose, frequency, or route”), select the appropriate radio button.

4. Otherwise, select the radio button which best describes the advice or information received by the prescriber (e.g., “Received advice/information concerning inappropriate/contraindicated medication combination”). If the prescriber did not receive the specific advice or information noted on the Online Answer Form for the Test Order, select the appropriate radio button (e.g., “No advice/information received concerning inappropriate/contraindicated medication combination”).

5. As a reminder, not every Test Order should generate advice or information from the CPOE system.

6. Once the Online Answer Form is complete and accurate, click Submit and Proceed at the bottom of the page to submit your responses.
   a) If any responses are missed, the Submit and Proceed button will be greyed out. If you click it, a yellow box will appear on the bottom left of the page and the missing orders will be outlined in red.

7. A pop-up modal will appear so that you can review your responses once again before submitting them. Click Submit Responses once you have confirmed that your responses are accurate, and then complete the affirmation page in Step 6.

Do not close your browser window or navigate elsewhere until you complete and submit the Affirmation in Step 6. If you close your browser window or navigate elsewhere before submitting the Affirmation in Step 6, your test will time out and be scored as “Incomplete Evaluation” and you will not be able to retake the test for 120 days.

**STEP 6 OF 7: SUBMIT AFFIRMATION**

**Time Limit:** All times and time limit warnings appear in Eastern Daylight Time. You have 3 hours to complete Steps 3 - 6.

*The procedure for completing and submitting the Affirmation of Accuracy is the same for the Sample and the Adult Inpatient versions of the test.*

After submitting your responses in Step 5, you will immediately be taken to the affirmation page. Your responses have not been submitted and will not be scored until the affirmation has been submitted. Enter your name and title in the fields below the affirmation statement and click **Affirm Test Responses and Proceed to Scored Results**.

Your responses will be scored immediately, and you will be taken to a results page that should be viewed and printed for your records.
STEP 7 OF 7: VIEW RESULTS

The test is immediately scored, and results are displayed. You can print the results now or retrieve them later by clicking on the View CPOE results hyperlink next to Section 2 on the Survey Dashboard and then Return to CPOE Tool to view detailed results.

Once on the CPOE Dashboard, click the green button for View Results.

To go back to the Survey Dashboard, click Exit to Leapfrog Dashboard.

For a detailed explanation of your hospital’s test results, download the 2023 Leapfrog Hospital Survey Scoring Algorithm on the Scoring and Results webpage. As a reminder, the score from your Adult Inpatient Test will be combined with the percentage of inpatient medication orders reported in Section 2 in the Online Survey Tool to determine an overall score for Leapfrog’s CPOE Standard.

For specific guidance to improve your clinical decision support functionality based on the results of the Adult Inpatient Test, please download the CPOE Tool Guidance for Leapfrog Reporting Hospitals.

Hospitals that completed a CPOE Test on September 12, 2022, or later will be able to view their previous test history by expanding the option for Previous Test History. Hospitals that completed a CPOE Test prior to September 12, 2022 will need to contact the Leapfrog Help Desk for a copy of their previous CPOE Test results.

DISCLAIMER

The Leapfrog CPOE Evaluation Tool is intended only to provide hospitals with guidance about its implementation of Computerized Physician Order Entry systems. It is not intended, nor should it be considered by hospitals, consumers, or any other users of any test results as a comprehensive audit or verification of any CPOE system.

The Tool is offered on an as-is basis and The Leapfrog Group, The Brigham and Women’s Hospital, Inc., and The University of Utah do not warrant or guarantee the accuracy or rigor of the test protocols or implementation of the Tool or its use by hospitals and testers.
EXAMPLE A: STEP 1 - TEST PATIENTS

Step 1 of 7: Print Test Patients

You have until 09:33 PM EDT to complete Steps 1 - 2 and proceed to Step 3.

Click “Download and Print Test Patients PDF” to download the Test Patient information. Once you confirm that the PDF has downloaded, click “Proceed to Step 2.”

DO NOT close this window or browser or navigate elsewhere during the Adult Inpatient Test.

Download and Print Test Patients PDF  Proceed to Step 2
EXAMPLE B: STEP 3 - ORDERS AND OBSERVATIONS SHEET

Step 3 of 7: Download & Print Orders and Observations Sheet

You have until 00:37 PM EDT to complete Steps 3 - 6.

Click “Download and Print Orders and Observations Sheet PDF” to download the Orders and Observations Sheet. Once you confirm that the PDF has downloaded, click “Proceed to Step 4.”

DO NOT close this window or browser or navigate elsewhere during the Adult Inpatient Test.

Download and Print Orders and Observations Sheet PDF  Proceed to Step 4
## EXAMPLE C: STEP 4 - PAIR OF ORDERS

<table>
<thead>
<tr>
<th>Pt # 1</th>
<th>Order # 2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Clarithromycin 500 mg po twice daily</td>
</tr>
<tr>
<td></td>
<td>Warfarin 5 mg po daily</td>
</tr>
</tbody>
</table>
APPENDIX A: ORDER CHECKING CATEGORIES

Seven of the eight order checking categories included in the CPOE Evaluation Tool represent an area where a serious adverse drug event (ADE) could occur if the CPOE system’s clinical decision support fails to alert the prescriber. The eighth order checking category includes Test Orders that, if presented interruptedly, could contribute to over-alerting, which has been shown to contribute to alert fatigue and physician burnout.

The CPOE Evaluation Tool is designed to test for two types of clinical decision support:

1. **Scenario-Specific Advice/Information**: Information related to the Test Order, which may include the medication’s specific dose, route, and frequency, and the Test Patient, which includes specific patient demographics (e.g., age, gender) and clinical information such as problems/diagnoses and lab values, as applicable. The scenario-specific advice/information may also involve the combination of two specific medication orders.

2. **Medication-Specific Advice/Information**: General information that might appear any time the medication is ordered for any patient and is not specifically related to the Test Patient (see the Drug Monitoring Order Checking Category).

The table below includes descriptions of each Order Checking Category included in the CPOE Evaluation Tool, as well as examples and the type of clinical decision support (i.e., scenario-specific advice/information or medication-specific advice/information) being tested.

<table>
<thead>
<tr>
<th>Order Checking Category</th>
<th>Description</th>
<th>Example</th>
<th>Type of Clinical Decision Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inappropriate Medication Combinations</td>
<td>Medication combinations to avoid ordering together or ones to use with caution</td>
<td>Using clonazepam and lorazepam together</td>
<td>Scenario-specific advice/information</td>
</tr>
<tr>
<td>Excessive Dosing</td>
<td>Specified dose of medication or frequency of administration exceeds safe range for single or daily dose.</td>
<td>Tenfold overdose of digoxin</td>
<td>Scenario-specific advice/information</td>
</tr>
<tr>
<td>Drug Route</td>
<td>Specified route of administration is inappropriate and potentially harmful</td>
<td>Use of hydroxyzine intravenously</td>
<td>Scenario-specific advice/information</td>
</tr>
<tr>
<td>Drug Diagnosis</td>
<td>Medication is inappropriate/contraindicated based on documented problem/diagnosis</td>
<td>Non-selective beta-blocker in patient with asthma</td>
<td>Scenario-specific advice/information</td>
</tr>
<tr>
<td>Drug Age</td>
<td>Medication dose inappropriate/contraindicated based on patient age</td>
<td>Prescribing diazepam for a patient over 65 years old</td>
<td>Scenario-specific advice/information</td>
</tr>
<tr>
<td>Drug Laboratory</td>
<td>Medication dose inappropriate/contraindicated based on documented laboratory test results (includes renal status)</td>
<td>Use of nitrofurantoin in patient with severe renal failure or ordering digoxin for a patient with hypokalemia</td>
<td>Scenario-specific advice/information</td>
</tr>
<tr>
<td>Order Checking Category</td>
<td>Description</td>
<td>Example</td>
<td>Type of Clinical Decision Support</td>
</tr>
<tr>
<td>-------------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------</td>
<td>--------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Drug Monitoring</strong></td>
<td>Medication for which the standard of care includes subsequent monitoring of the drug level or lab value including baseline labs to avoid harm</td>
<td>Prompt to monitor drug levels when ordering aminoglycosides or INR/PT when ordering warfarin or checking baseline LFTs when starting a statin</td>
<td>Medication-specification advice/information</td>
</tr>
<tr>
<td><strong>Excessive Alerts</strong></td>
<td>Low-priority medication combinations, such as drug interactions or therapeutic duplications, that should not trigger decision support warnings.</td>
<td>Concurrent use of hydrochlorothiazide and captopril</td>
<td>Scenario-specific advice/information</td>
</tr>
</tbody>
</table>

If a prescriber reported receiving advice/information for the Test Orders in the Excessive Alerts category or reports not receiving advice/information for the Test Orders that are fatal, these Test Orders are listed in the CPOE Results.

The Adult Inpatient Test also includes a “Deception Analysis,” which checks for “false positives” (e.g., hospitals reporting advice/information for Test Orders that should not generate any warning in the hospital’s CPOE system). Hospitals that “fail” the Deception Analysis are scored as “Incomplete Evaluation” and will not be able to retake an Adult Inpatient Test for 120 days.
APPENDIX B: HOW TO ACCESS THE SAMPLE TEST

1. Log in to the Online Hospital Survey Tool using your hospital's 16-digit security code. If you are logging in for the first time, you will be required to first complete and submit your Hospital Profile. If you have already submitted the Hospital Profile, you will be brought directly to the Survey Dashboard. Select the Take CPOE Tool button on the Survey Dashboard. You will be taken to the CPOE Tool Dashboard page in the same window (this does not start a timed test).

2. Click Take Sample Test from the menu options at the top.

3. Scroll to the bottom of the page and click Begin Sample Test. To exit back to the CPOE Dashboard, click Exit Sample Test.

4. Follow the instructions for completing the Sample Test using the Adult Inpatient Test starting with Step 1 of 7: Print Test Patients.

The Sample Test can be taken multiple times without requesting to have it reset. If the Sample Test is closed during a test, it cannot be resumed. You will need to go back to the Survey Dashboard and click Take CPOE Tool to return to the CPOE Evaluation Tool Dashboard.

As a reminder, the Sample Test is not scored or publicly reported. Answers for the Sample Test are provided below.

SAMPLE TEST ANSWERS

The table below shows correct response(s) from Step 5 of the Sample Test. As a reminder, the Sample Test is not scored or publicly reported.

<table>
<thead>
<tr>
<th>Order #</th>
<th>Order(s)</th>
<th>Correct response</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>clarithromycin 500 mg po twice daily</td>
<td>Received advice/information concerning inappropriate/contraindicated medication combination</td>
</tr>
<tr>
<td></td>
<td>warfarin 5 mg po daily</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>phenytoin 1000 mg po daily</td>
<td>Could not enter order with specified dose or frequency</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Received advice/information concerning excessive dose</td>
</tr>
<tr>
<td>3</td>
<td>lanoxin 0.125 mg po daily</td>
<td>Received advice/information concerning inappropriate/contraindicated medication combination</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Medication</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>digoxin 0.5 mg po daily</td>
<td></td>
</tr>
</tbody>
</table>
| 4 hydroxyzine 50 mg IV times one dose | Could not enter order with specified route  
|                    | Received advice/information concerning route of administration |
APPENDIX C: HOW TO ACCESS THE ADULT INPATIENT TEST

Important Note: The timed test starts when you click on Begin Scored & Timed Adult Inpatient Test. Hospitals are strongly encouraged to take the Sample Test before starting an Adult Inpatient Test. Clicking on Begin Scored & Timed Adult Inpatient Test starts the timed Adult Inpatient Test, not the Sample Test.

1. Log in to the Online Hospital Survey Tool using your hospital’s 16-digit security code. If you are logging in for the first time, you will be required to first complete your Hospital Profile. If you have already submitted the Hospital Profile, you will be brought directly to the Survey Dashboard. Select the Take CPOE Tool button on the Survey Dashboard. You will be taken to the CPOE Tool Dashboard page in the same window (this does not start a timed test).

2. If you are ready to take the Adult Inpatient Test, scroll to the bottom of the page and click Begin Scored & Timed Adult Inpatient Test and the timing for Steps 1 – 2 will start. Otherwise, click Logout & Return Later. Once you take an Adult Inpatient Test, it can only be taken again after 120 days have passed.

3. Once you click Begin Scored & Timed Adult Inpatient Test, a pop-up will appear that asks if you are sure you want to start the scored and timed test. The timed portion of the test starts once you click Confirm.

Are you sure you want to start the Adult Inpatient Test that is timed and scored?

If you meant to take the Sample Test, click ‘Close’ to return the CPOE Dashboard.

If you accidentally start an Adult Inpatient Test, contact the Leapfrog Help Desk for assistance.
APPENDIX D: GUIDANCE FOR TESTING WITH REMOTE TEAM

Prior to starting the Adult Inpatient Test, the hospital should select a Test Coordinator. The Test Coordinator must review the information provided in Preparing for the Test. If conducting the CPOE Test with a remote team, the additional steps below may be necessary:

1. Identify devices and software that may be needed:
   a. Virtual meeting software (e.g., Zoom, Microsoft Teams, etc.) installed and tested in advance on each computer/tablet that will be used during the test. It may be helpful to use software with a video recording feature in case the team would like to go back and check previous steps (i.e., check alerts that were received in Step 4 of the test).
   b. The Test Coordinator's computer/tablet should be connected to a printer to print the Orders and Observation Sheet in Step 3 and record the advice/information received by the prescriber in Step 4.
   c. The prescriber's computer/tablet should be connected to a printer (to print the Orders and Observation Sheet in Step 4), or the prescriber will need two computers/tablets:
      i. One to display the Orders and Observations sheet, and
      ii. One to enter the Test Orders. The computer/tablet used to enter the Test Orders should be operating the virtual meeting software. While the prescriber will be instructing the Test Coordinator as to what type of advice/information he/she received (if any), it may also be helpful for the prescriber to share their screen with the Test Coordinator while entering the test orders into CPOE system.

2. Identify modes of communication that will be used with team members during the test (e.g., phone, email, texting, instant messaging, etc.).

3. Set schedule for each person's role and a send calendar invite with information about how to join the virtual meeting. See example of time estimates in the table below. Note that these are estimates and you may want to communicate with team members during the test to adjust the schedule as needed.

EXAMPLE OF SCHEDULE AND ADMINISTRATION WITH REMOTE TEAM

<table>
<thead>
<tr>
<th>Time</th>
<th>Test Step</th>
<th>Remote Test Administration Instructions</th>
<th>Personnel Involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00 – 9:10 AM</td>
<td><strong>Step 1:</strong> Download and print the list of Test Patients, then proceed to Step 2.</td>
<td><strong>Test Coordinator</strong> starts virtual meeting and:</td>
<td><strong>Test Coordinator</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>1. Logs in to CPOE Evaluation Tool and selects <strong>Begin Scored &amp; Timed Adult Inpatient Test</strong> from the CPOE Dashboard.</td>
<td><strong>IT support</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>2. Downloads the Test Patients (PDF) and saves the PDF in a shared folder or email the PDF to team members involved in Step 2.</td>
<td></td>
</tr>
<tr>
<td>9:10 – 10:40 AM</td>
<td><strong>Step 2:</strong> Enter the Test Patients into your hospital's production environment (or test environment that mirrors)</td>
<td><strong>ADT/Registration, laboratory, and nursing</strong> join the virtual meeting, and then:</td>
<td><strong>Test Coordinator</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>ADT/Registration</strong> and <strong>Laboratory</strong></td>
<td></td>
</tr>
<tr>
<td>10:40 – 10:50 AM</td>
<td><strong>Step 3:</strong> Download and print the Orders and Observations Sheets, then proceed to Step 4.</td>
<td><strong>Test Coordinator</strong> downloads PDF of Orders and Observation sheet, prints a hard copy for to use in Step 4 and sends it to <strong>licensed prescriber</strong> (or saves it in shared folder for licensed prescriber to access).</td>
<td><strong>Test Coordinator</strong> IT support</td>
</tr>
<tr>
<td>-----------------</td>
<td>-------------------------------------------------</td>
<td>-----------------------------------------------------------------</td>
<td>------------------</td>
</tr>
<tr>
<td>10:50 – 11:50 AM</td>
<td><strong>Step 4:</strong> Have a prescriber who routinely orders medications through your inpatient CPOE system enter and sign the test order(s) assigned to each Test Patient. The prescriber must record any advice or information he/she receives from the system onto the Orders and Observations Sheets and discontinue the Test Order(s) before moving onto the next order. Note: Do not record any advice or information on the Orders and Observation Sheet that was sent directly to a pharmacist.</td>
<td><strong>Prescriber</strong> logs into the hospital’s CPOE system, joins <strong>Test Coordinator</strong> in a virtual meeting, shares the CPOE system screen with the <strong>Test Coordinator</strong>, and then: 1. <strong>Prescriber</strong> enters orders from Orders and Observation Sheet into CPOE system, which are read on a separate device (tablet, laptop, printed Orders and Observation Sheet, etc.). 2. <strong>Prescriber</strong> instructs <strong>Test Coordinator</strong> to record the specific advice/information displayed, if any, for each order on the Orders and Observation Sheet. For example, <em>if the prescriber enters an order for ibuprofen every three hours, and the prescriber receives scenario-specific advice</em></td>
<td><strong>Test Coordinator</strong> IT support <strong>Clinical information systems coordinator</strong> <strong>Licensed prescriber</strong> IT support</td>
</tr>
</tbody>
</table>
stating that the specified frequency results in a daily dose that exceeds the safe range for a daily dose, then the prescriber would instruct the Test Coordinator to mark “excessive daily dose” next to the Daily Dose category on the Orders and Observation Sheet.

3. **Test Coordinator** confirms completion of Step 4 and proceeds to Step 5 in the CPOE Tool.

<table>
<thead>
<tr>
<th>Time</th>
<th>Step 5: Record the responses from the Orders and Observations Sheets onto the Online Answer Form, review the Online Answer Form for accuracy and completeness, and submit the Online Answer Form.</th>
<th>Test Coordinator shares screen and enters responses from Orders and Observations Sheet into Online Answer Form while <strong>prescriber</strong> reviews each response to ensure accuracy of radio button selection.</th>
<th>Test Coordinator completes and submits Affirmation.</th>
<th>Test Coordinator completes and submits Affirmation.</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:50 – 12:20 PM</td>
<td><strong>Step 5:</strong> Record the responses from the Orders and Observations Sheets onto the Online Answer Form, review the Online Answer Form for accuracy and completeness, and submit the Online Answer Form.</td>
<td>Test Coordinator shares screen and enters responses from Orders and Observations Sheet into Online Answer Form while prescriber reviews each response to ensure accuracy of radio button selection.</td>
<td>Test Coordinator completes and submits Affirmation.</td>
<td>Test Coordinator completes and submits Affirmation.</td>
</tr>
<tr>
<td>12:20 – 12:25 PM</td>
<td><strong>Step 6:</strong> Complete and submit the Affirmation.</td>
<td>Test Coordinator completes and submits Affirmation.</td>
<td>Test Coordinator completes and submits Affirmation.</td>
<td>Test Coordinator completes and submits Affirmation.</td>
</tr>
<tr>
<td></td>
<td><strong>Step 7:</strong> View and print your results.</td>
<td>Test Coordinator prints test results and exits out of CPOE Tool to Survey Dashboard.</td>
<td>Test Coordinator prints test results and exits out of CPOE Tool to Survey Dashboard.</td>
<td>Test Coordinator prints test results and exits out of CPOE Tool to Survey Dashboard.</td>
</tr>
</tbody>
</table>
APPENDIX E: HOW TO CONTACT THE LEAPFROG HELP DESK

If you need assistance during the test, contact the Leapfrog Help Desk by clicking on Contact the Leapfrog Help Desk on the CPOE Dashboard, then submit a ticket at https://leapfroghelpdesk.zendesk.com.

You can also email helpdesk@leapfrog-group.org.

Include the following information in the request:

- State that you are currently in an Adult Inpatient Test
- Describe the issue you are experiencing
- Provide any applicable screen shots
- Provide the name and address of the hospital
- Provide a contact phone number

After submitting a request, you will receive a response via email from support@leapfroghelpdesk.zendesk.com within 10 minutes during Help Desk hours (M – F, 9:00 AM – 5:00 PM ET) if you are in the middle of taking a test.
APPENDIX F: CPOE FAQS

1. Can we take one test for our entire hospital system if all our hospitals use the same CPOE system?
   No. Because of differences in implementation and usage between separate hospital locations, the test must be taken by each hospital consistent with Leapfrog’s policy on multi-campus hospital systems.

2. Can a central team conduct a separate test for multiple hospitals from a central site?
   Yes, if needed, each separate test can be conducted at a central location if the clinical decision support and other CPOE settings being used mirror the local hospital’s instance exactly and a local prescriber who regularly orders inpatient medications completes the order entry part of the test (Step 4). A CPOE Test would still need to be completed for each campus.

3. Can our pharmacist enter the Test Orders during the test?
   No, the Test Orders should be entered by a prescriber who routinely writes inpatient medication orders. Nurses, health informatics team members, and test coordinators are also prohibited from completing the Step 4 Order Entry.

4. Our CPOE system is designed so that certain alerts go to the pharmacist, not the prescriber. Can we use these alerts in reporting on the CPOE Evaluation Tool?
   No, hospitals should only report on those alerts that were received at the point of order entry by the prescriber. If the prescriber is only able to enter a dose for the Test Orders as “per protocol” or “per pharmacy” and is not able to enter the specific test dose at all, even manually (e.g., vancomycin), the prescriber should select “(B) Could not enter order with specified dose.”

5. When should we take the CPOE Evaluation Tool?
   The CPOE Evaluation Tool is a core element of Leapfrog’s CPOE Standard. Hospitals are urged to ensure that the Adult Inpatient CPOE Test is submitted along with the Survey (i.e. in the same month) to meet the deadlines for Leapfrog Hospital Survey and Leapfrog’s other programs such as Top Hospital and the Leapfrog Hospital Safety Grade.

   Within a Survey Cycle (April 1 – November 30), a hospital cannot retake a CPOE Evaluation Tool until at least 120 days have passed since their last test.

6. What level of feedback will the CPOE Evaluation Tool provide for our hospital about our CPOE system?
   Hospitals will be provided with feedback on those scenarios that were responded to incorrectly in that would be potentially fatal to a patient and shoes in the Excessive Alerts category. Due to the costs associated with developing the patients and orders for the tool, the database of orders and patients is limited. Therefore, revealing all of the incorrect or missed alerts would provide hospitals that have taken the tool before a potential advantage over hospitals with recent CPOE implementations.

   For specific guidance related to improving your clinical decision support functionality based on the results of the Adult Inpatient Test, please download the CPOE Tool Guidance for Leapfrog Reporting Hospitals.
7. If we update our responses to Section 2A questions #3 and #4, do we need to re-take the CPOE Test?
No, hospitals are not required to retake the CPOE Evaluation Tool if making updates to Section 2A CPOE. Retaking a test is only recommended if a hospital has made changes to their CPOE system and would like to try to improve their score.