

BadgerNet



User Guide
Anaesthetists

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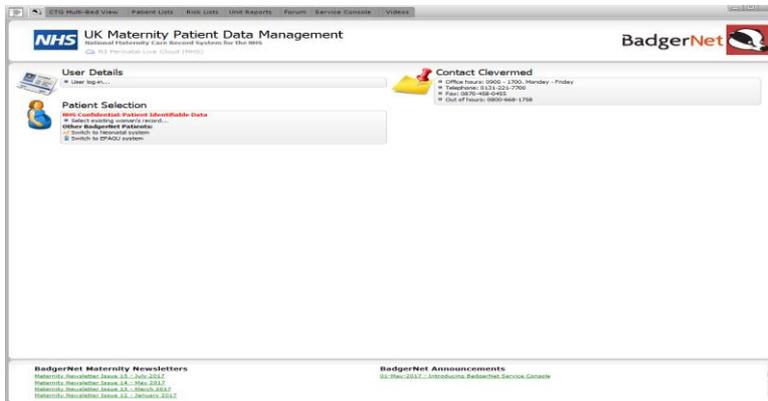
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If you are new to using GNCR and would like a training session, please request one by contacting nuth.gncr@nhs.net

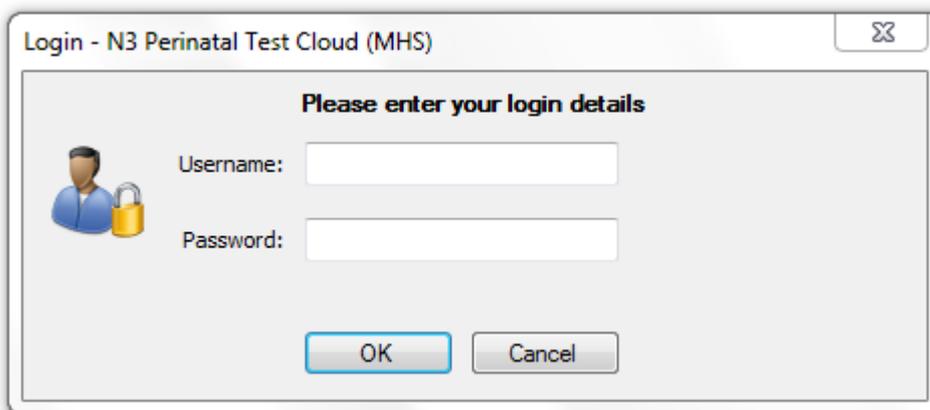
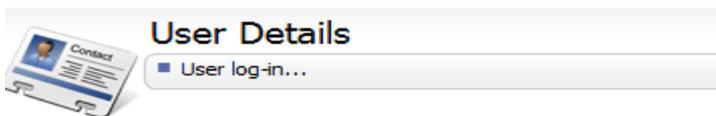
How to access BadgerNet

Open in BadgerNet using icon on desktop or via e-Record

The following screen will appear



Log in by selecting **user log on** – enter network log in



Search for a Patient

Click on Select existing woman's record

Patient Selection

NHS Confidential: Patient Identifiable Data

■ Select existing woman's record...

Other BadgerNet Patients:

👉 Switch to Neonatal system

👉 Switch to EPAGU system

Search by NHS Number. Double click on your patient to open the record

Select existing woman's record or create a new record
Enter the patient's hospital number or other search criteria to check if a record exists on BadgerNet

Open Episodes

2000000 Returned 1 results. Refresh list... Refine this list...

Hospital Number	National ID	Surname	Forename	Date of Birth
2000000		Xxtestxx	Medwayone	09 Dec 86

Select this patient episode...

XXTESTXX, Medwayone ()

- 1 babies born, Induced - Successful

Episode 1 of 1 (Pregnancy)

- Queen Elizabeth Hospital
- Episode opened: 12 Jan 17
- Booked: 12 Jan 17
- Agreed EDD: 30 Jun 17

+ Add a new patient now Select no mother Cancel

How to navigate through a patient's record

The patient's pregnancy summary page gives you an overview of the patient's history and care so far (see below).

- To expand the information click on the 3 bars next to Pregnancy summary
- **Yellow flag** denotes social issues/concerns
- **Risk factors**, which are updated throughout the pregnancy (includes anaesthetic risks)
- **Alerts** (you can manually create your own critical alerts)
- **Key Links**- allow direct access to certain forms
- **Management Plan**- Direct link to the management plan which should be reviewed and updated at every Dr's appointment

You can click on the appropriate part of the screen to get further information, however remember to 'cancel' out rather than 'save & close' if you are just viewing the record. Only click on 'save' if you have made any updates

The screenshot shows the patient record for Xtesting Berry, NOT RECORDED, 2133299. The interface includes a patient banner at the top with gestation (19+1/40), EDD (01 May 2019), and blood group (A+). A yellow flag icon is visible in the top right corner. The main content area is divided into several sections: Obstetric History, Care Plan Administration, Medical History, Scan Results, Risk Factors, Management Plan, Guideline Recommendations, Fetal Medicine Management Plan, and Social Plan. A left-hand navigation menu includes options like 'Enter new note...', 'Pregnancy Summary', 'Notes During Pregnancy', 'Labour and Birth', 'Postnatal', 'Full Notes', 'Episode Import', 'Social', 'Anaesthetic Summary', 'Perinatal Mental Health', 'Clinical Narrative', 'Task List', 'New Notes', 'Reports', 'Charts', 'Maternity Notes', and 'Administration'. At the bottom, there are sections for 'Mother's Critical Incidents', 'Baby Critical Incidents', 'Alerts', 'Screening and Tests', 'Baby Alerts', and 'Switch User'.

Click on bars to get more information

Patient banner – Shows current gestation, EDD, blood group and demographic details.

Yellow flag denotes social

Risk factors that may affect the pregnancy- updated throughout

Management Plan

Extended Banner Alerts including Allergies, any recorded Anaesthetic risk factors and commencement of LMWH

New Feature of New View- 'Enter new note' allows you to search for any new form in the

Anaesthetic Summary

Badgernet has a tab called 'Anaesthetic Summary'. This has been designed for anaesthetic users to be able to:

1. **Review** any information recorded in relation to anaesthetic events/contacts
2. Enter any new information into the system using 'Key Links'

Xttest, Acme14 - Deceased - NOT RECORDED, 5920195
22 Oct 83 (Age at Death: 35) | Date of Death: 01 Nov 18 | Queen Elizabeth Hospital, GATESHEAD, Tyne and Wear, NE9 6SX
G2 P2+0 | Date of Delivery: 22 Oct 18 at 23:40 (40+3/40) | Number of Babies: 1 | Booking BMI: 34.95 | Current BMI: 36.33 | Blood Group: A-

Anaesthetic Summary Notes: Collapsed

Obstetric History
2013 Outcome: Livebirth (1) | Maternal Problems (Pregnancy): Gestational Diabetes | Anaesthetic: Epidural | Anaesthetic Problems: Hypotension, Difficult or prolonged spinal/epidural insertion | Maternal Problems (Labour): Prolonged labour | Maternal Problems (Post Delivery): PPH with blood transfusion | Type of Delivery: Ventouse (1) | Reason for Ventouse: Failure to Progress | Current Status: Alive (1)

Risk Factors
Date Recorded: 13 Dec 18 at 09:22
Gestation: PN 7wks, 3d
Medical: Liver disorders, Thrombophilia, BMI more than 30, Latex Allergy, Smoker <= 20 per day
Mental Health: Anxiety
Gynaecological: Large Fibroids
Past Obstetric: Gestational Diabetes, Previous PPH with Blood Transfusion
Family History: Other: Family history of CHD
Current Pregnancy: Antibiotic Resistant Infection, Infertility Treatment
Social: Can't speak or understand English, Social Services Involvement
Anaesthetic: Clotting disorders, Difficult airway or laryngoscopy, Latex allergy

Labour and Birth
Current Summary
Onset of labour: Spontaneous
22 Oct 18 at 11:05
First stage started: 22 Oct 18 at 11:05
First stage notes: Feeling rectal pressure, VE performed fully dilated
Second stage started: 22 Oct 18 at 21:00
Second stage notes: Fetal distress and delay in second stage
Date/time placenta delivered: 22 Oct 18 at 23:50
Episiotomy: Yes
Tear: No
Blood Loss (first 24h): 200 ml
PPH: No
Rupture of Membranes: 22 Oct 18 at 09:00
Method: Spontaneous
Liquour state: clear
Date of Birth: 22 Oct 18 at 23:40

Anaesthetics
Anaesthesia recorded during labour/birth:
Spinal, Epidural, General Anaesthetic
No epidural/spinal assessment recorded

Anaesthetic Consent

Notes recorded (05 Feb 18 at 14:03 - 13 Dec 18 at 15:14)

- > Anaesthetic 22 Oct 18 23:35
- > Anaesthetic Pre-op Review 20 Nov 18 10:50
- > Specialist Review 20 Nov 18 11:21
Corinne Blackburn
- > Anaesthetic Follow-up 20 Nov 18 13:10
- > Anaesthetic 20 Nov 18 13:49
- > Anaesthetic 23 Nov 18 10:44
- > Clinical Note or Review 23 Nov 18 10:47
Ade Anaesthetist
- > Anaesthetic Follow-up 23 Nov 18 13:13

Mother's Critical Incidents
■ Caesarean Section in 2nd Stage - Recorded on 24 Oct 18 at 14:22
■ Secondary HPT 500 ml or more -

Baby Critical Incidents
Baby 1
■ Failed instrumental - Recorded on 24 Oct 18 at 14:22

Alerts
■ Contact anaesthetist on Admission
■ NBS Number not recorded
■ Genetix Pathways Commented

Screening and Tests

Baby Alerts
Baby 1
■ needs help to void
■ NBS Number not recorded

Switch User
- Switch user...

Anaesthetic Summary Tab Information

- Obstetric history
- Risk factors, Medical history, Surgical and Anaesthetic history
- Medication
- Summary of labour and birth (if applicable)
- Anaesthesia given and Anaesthetic consent
- Analgesia given
- WHO checklist
- Any notes recorded by an anaesthetic user
- Key Links (appears at the bottom)-common forms used to record documentation

What to record where

1. Consent

- Record consent either in Powerchart or Badgernet (not both!) depending on your preference
- The following Powerchart autotexts are available for you to use:
 - @@Obs_Spinal_Consent
 - @@Obs_Epidural_Consent
 - @@Obs_GA_Consent

2. Theatre anaesthesia (e.g. spinal / GA / epidural top up for procedure in theatre)

- Record these in the Anaesthesia App like other theatre areas
- Record minimum details in Badgernet (for follow-up list / audit purposes, instead of The Book)
- Send referral to Anaesthetic PROMS from within Badgernet
- If requires face to face follow-up (e.g. all GAs, pain during procedure, anything that didn't go to plan), flag this in Badgernet - see page 11

3. Epidurals

- Record insertion details in Badgernet
- Record top-ups in the room for analgesia in Badgernet
- Sign paper prescription (we're hoping to move it to Badgernet when it can do standardised prescriptions)
- Send referral to Anaesthetic PROMS from within Badgernet
- If requires face to face follow-up, flag this in Badgernet - see page 11

4. Follow-up

- Routine follow-up
 - via PROMs system as per current practice
 - if something needs to be documented in notes (e.g. history of headache), do this in Badgernet using New Anaesthetic Follow-up
- Face to face (all GAs, any case where something hasn't gone to plan) document in Badgernet using New Anaesthetic Follow-up

5. Reviews (ante/intra/post-partum)

- Write a note in Badgernet – Specialist Review

6. Referrals (e.g. to antenatal/postnatal anaesthetic clinic)

- Send referral to Anaesthetics from within Badgernet

Documenting consent in Badgernet

1. Select '**New Anaesthetic Assessment and Consent**' note from key links
2. Fill in the form with as much information as required
3. Save & Close

Theatre anaesthesia minimum data

In Badgernet, record anaesthetic given in '**New Anaesthesia**' note in Badger with the following **minimum data items**:

- Date and time given
- Type of anaesthesia
- Name of anaesthetist
- Anaesthetic complications
- Time completed

Record everything else in the **Anaesthesia app** or **Powerchart** the same as we do in the rest of the hospital:

Anaesthetic charts / Prescribing / Requesting lab tests

Epidural documentation

In Badgernet, record epidurals using the 'New Anaesthesia' note:

The screenshot shows a form for recording an epidural. It includes the following fields and options:

- Ease of Insertion (Epidural): Easy
- Depth of Epidural Space: 5cm
- Length of Epidural Catheter at skin: 10.0cm
- Meniscus Drop: Yes No Not tested
- Negative aspiration: Yes No
- Epidural Complications: No immediate complications
- Date and Time Anaesthetic Sited: 30 Nov 22 at 16:30
- Additional Epidural Notes: (Empty text area)
- Buttons: Epidural Prescription, Epidural Bolus, Epidural/Spinal Assessment
- Event Completed: 30 Nov 22 at 16:30

Please continue to complete paper prescription for Epidurals as per current process. (This may change if/when Badgernet allows us to use a standardised prescription)

However, please document electronically that you have used the standard Programmed Intermittent Epidural Bolus (PEIB / PIB) prescription:

- Click on the Epidural Prescription button at the bottom of the form
- Select PIEB if standard prescription (see screen shot). If epidural prescription is not 'PIEB' the record details of the prescription here.

The screenshot shows the 'Epidural Prescription' form with the following fields and options:

- Date and Time Infusion Commenced: 08 Nov 22 at 20:16
- Epidural Modality: PIEB
- Pump Ref Number: (Empty)
- Pump set up by: (User selection)
- Pump checked by: (User selection)
- Epidural Drug Infusion Prescription: (Empty)
- Infusion Batch Number: (Empty)
- Expiry Date: (Empty)
- Infusion Commenced By: Authorise
- Checked By: Authorise
- Epidural Rate: (Empty) ml/hr
- Total Volume to be Infused: (Empty) ml
- PCEA Bolus: (Empty) ml

Other epidural documentation

- Enter epidural assessments in BadgerNet using "New Epidural/Spinal Assessment"
- Enter epidural observations in BadgerNet
- Enter epidural top-ups in the room for analgesia in BadgerNet using "New Epidural Bolus"

Recording an Anaesthetic review (e.g. face to face or telephone appointments in clinic)

1. Select 'New Specialist Review' from key links
2. Complete the form as required

3. Update the risk assessment using the quick link to the forms in the right hand side panel if any new risks identified following the review

4. Save and close once completed

Important information

Patients who require an anaesthetic review in the ANC need to have a referral completed in Badger. These referral's will be sent to a generic inbox and will be triaged by the anaesthetic consultants and an appointment will be allocated if required. **See** How to complete an anaesthetic referral ([page 14](#)) **for more information regarding referrals**

How to Flag for face to face follow-up

If a patient requires a face to face follow up, please complete a 'new anaesthetic follow up' straight after you record your anaesthetic documentation.

1. Click on **'New Anaesthetic Follow up'** using Key Links
2. Select 'Yes' to further follow up required. This is drop the patient onto the patient list named 'further follow up required' so that the team can see with ease who requires a face to face review.
3. Select a **date and time required**

Anaesthetic Follow-Up

Test, Express2 (NHS: NOT RECORDED | Hospital Number: T1999827)
09 Aug 88 (Current Age: 34) | 99 Test lane, Test, NE3 3QJ
G3 P2+0 | LMP: ? | Booked: 02 Nov 22 at 14:27 | EDD (Final): 08 May 23 | Current Gest: 14+1 | Babies on scan: ? | Booking BMI: ?
NHS Confidential: Patient Identifiable Data

Anaesthetic Follow Up

Discharged home without follow up Yes No

Date and Time Completed 08 Nov 22 at 20:47 Gestation 14weeks, 1days

Carried Out By

Type of Follow-Up

Additional Notes

Additional Notes

Further Follow-Up and Actions

Further Follow-Up Required Yes No

Date/Time required at

Is a follow-up clinic appointment indicated

Reason for Further Follow-Up

A follow-up clinic appointment is recommended for PDPH, awareness under GA, neurological injury, intra-operative pain, conversion to GA, failed epidural, or any other reasons where it would likely be of benefit.

4. **Save and close** once completed
5. Check the patient has appeared on one of the Further Follow-up lists (which one they go onto depends on how long ago the anaesthetic was):

Go to **'Woman Lists'** tab at the top / **'Anaesthesia'** section down the left hand side /

- a. Further Follow Up Required
 - b. Further Follow Up In Next 7 Days
 - c. Further Long Term Follow Up
6. Then use the same note to record the documentation when patient is followed up on the ward prior to discharge

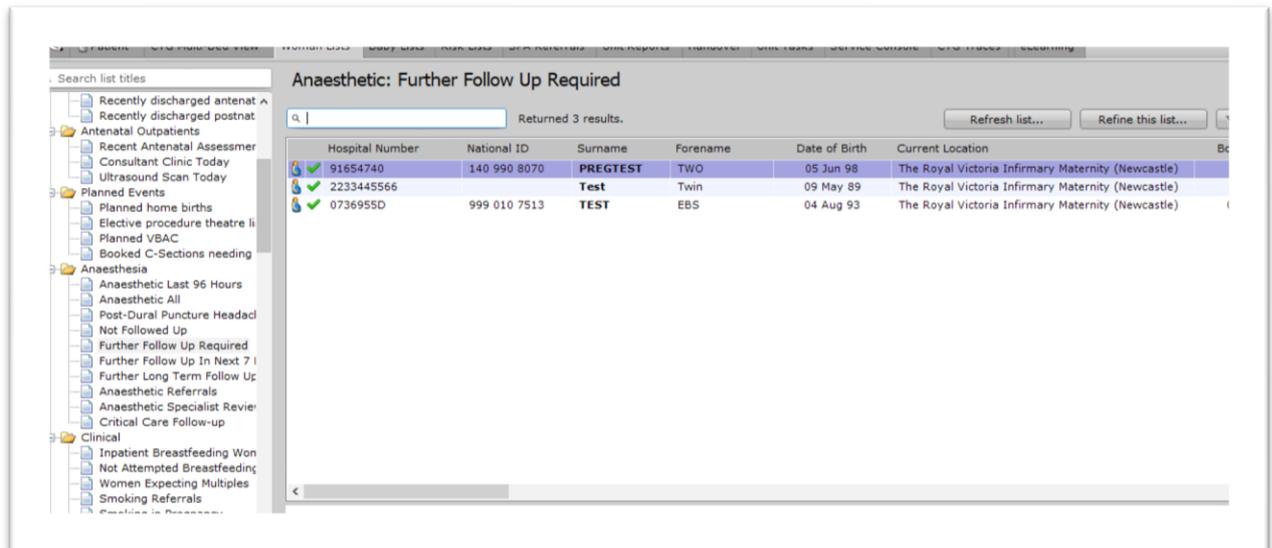
Useful tips

Reviewing information within the record

Key information can be found in the anaesthetic summary tab and within Full Notes

Woman Lists

In the Anaesthesia tab there are a number of lists. This gives you information on all patients who require a **'Follow up'** or if **'Further follow up required'**



Hospital Number	National ID	Surname	Forename	Date of Birth	Current Location
91654740	140 990 8070	PREGTEST	TWO	05 Jun 98	The Royal Victoria Infirmary Maternity (Newcastle)
2233445566		Test	Twin	09 May 89	The Royal Victoria Infirmary Maternity (Newcastle)
0736955D	999 010 7513	TEST	EBS	04 Aug 93	The Royal Victoria Infirmary Maternity (Newcastle)

Creating alerts

1. Create your own **Critical Alerts** (for example 'please contact anaesthetist on admission'). Use the 'Enter new note' box to search for critical alert as shown below. Once alert completed will appear on the extended banner under 'Alerts'



Xxtest, Acme14 - Deceased - NOT RECO
22 Oct 83 (Age at Death: 35) | Date of Death: 01 Nov 18 | Queen Elizabeth I
G2 P2+0 | Date of Delivery: 22 Oct 18 at 23:40 (40+3/40) | Number of Babies: 1 | Bookin

Enter new note... Search crit [X]

Woman Notes

- Critical Alert - Woman
- Critical Incident - Woman

Mother's Critical Incidents

- Caesarean Section in 2nd Stage - Recorded on 24 Oct 18 at 14:22
- Secondary PPH 500 mls or more -

Baby Critical Incidents

Baby 1

- Failed instrumental - Recorded on 24 Oct 18 at 14:27

Alerts

- Contact anaesthetist on Admission
- NHS Number not recorded
- Sensic 6 Pathway Commenced

Screening and Tests

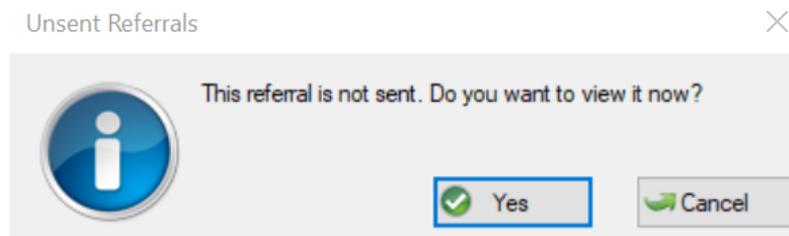
Accessing reports

There is a huge range of reports that can be accessed from within Badger within the unit reports tab

How to complete an anaesthetic referral

This is required for Antenatal **AND** Postnatal Clinic Reviews (e.g. long term followup after DPDH, pain during CS etc.)

1. In the enter new note box, search for 'referral'
2. Select 'anaesthetic' in referral type
3. Complete referral note to include reason for referral
4. Save and close
5. Message will display asking to send referral- select 'yes'



6. PDF will display. Click confirm and send. Select email that is auto populated nuth.obstetric.anaesthetic.referrals@nhs.net
7. Authorise- log in details
8. Message will display that says successfully sent

How to action an anaesthetic referral

1. Access shared mailbox nuth.obstetric.anaesthetic.referrals@nhs.net
2. Review referrals received
3. If appointment required- follow current process. When the appointment is made on SchApptBook this will display in Badgernet
4. If appointment not required- anaesthetic consultant to open up 'Specialist Review' note in Badger and document reason why appointment not required.

How to complete an Anaesthetic PROMs referral

This is required for all patients who have had an anaesthesia unless SMS follow-up is considered inappropriate (e.g. intrauterine death)

1. In the enter new note box, search for 'referral'
2. Select 'anaesthetic PROMs' in referral type
3. Complete referral note. In the reason for referral please ensure you select a response for each of the following **-Procedure, Priority, Neuraxial, GA** and **Block**. There should always be a total of 5 categories selected (see screen shot). This information is required for PROM's.

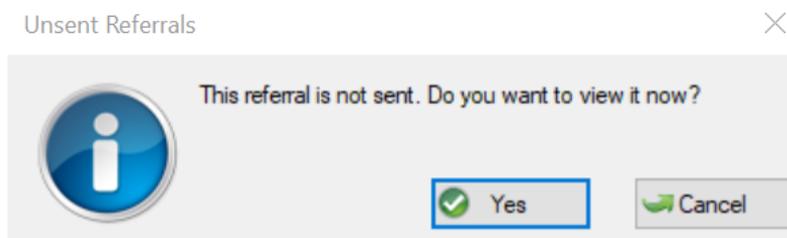
Find

Procedure: Penneal repair
Procedure: Bleeding haemostasis
Procedure: ECV
Procedure: Cervical suture
Procedure: N/a
Priority:1
Priority:2
Priority:3
Priority:4
Priority: N/A
Neuraxial: Spinal
Neuraxial: Epidural for labour
Neuraxial: Epidural topup
Neuraxial: CSE
Neuraxial: None
GA: Yes
GA: No
Block: Yes
Block: No
Block: Attempted

1 **Procedure: Epidural for labour**
2 **Priority: N/A**
3 **Neuraxial: Epidural for labour**
4 **GA: No**
5 **Block: Attempted**

Accept and Close
Clear Selected

4. Save and close
5. Message will display asking to send referral- select 'yes'



5. PDF will display. Click confirm and send. Select email that is auto populated wjbyqwufis@in.docparser.com
6. Authorise - log in details
7. Message will display that says successfully sent