

Full Episode Transcript

With Your Hosts

Sarah Michelle and Anna

Welcome to the *Real Deal NP Club*. Whether you're hoping to become a real deal nurse practitioner or you already are one, this is the place for you to get the resources you need as you tackle this massive transition into practice. We're your hosts, Sarah Michelle, Chief Nursing Officer of Blueprint Test Prep, and Anna Miller, Director of Nursing Content. And we're here to hang out with you each week like your best friends in the NP space. Let's dive in.

Anna: Hey, hey everyone and welcome back. Today we have a very exciting guest on our podcast. We have Erica D, the NP Charting Coach, and she specializes in helping nurse practitioners improve charting, which is something we've really never learned in school, so that they can create better work-life balance and overcome the burnout that we all have felt, and we all have that negative impact in our life, right?

And Erica was actually on this podcast way back in July of 2021. It was an episode about combating imposter syndrome, and it's a really great episode if you want to go back and listen to that of her talking with Sarah Michelle, but I'm so thrilled to have you back today.

So Erica, do you want to talk and introduce yourself a little bit and what we're going to talk about?

Erica: Yeah, so thank you for having me on the podcast, and thank you for everything you do for new NPs and NP students, and I just love that we all get to have our area of expertise and really just impact nurse practitioners.

Anna: Yeah, absolutely. So I know you are really like a charting guru, and you have all of the tips and tricks, so I'd love to learn first a little about how you got into this and why this is a passion that really fuels you and your business.

Erica: Yeah, so long story short, I was previously burned out in health care. And at that time I was working as an RN at a busy acute care hospital. We all know the 12-hour shifts were much longer, very stressful, and I became burned out. Fast forward, I did overcome that burnout and became a nurse

practitioner, and that time was about 2020. We all know the burnout was very significant at that time. And I just realized how many other nurse practitioners were struggling with burnout.

So I started working with the burned out NPs and quickly realized that charting had such a significant cause for that. It caused just a lot of work-life imbalance. NPs are staying late at the office, they are bringing their charts home, trying to catch up on evenings and weekends, and it just really disrupts any family time.

So that's when I started the nurse practitioner charting school, and now I specialize in helping nurse practitioners improve their charting so they can create that better work-life balance and stop charting at home.

Anna: That is so huge. I always tell people, try so hard as a new NP, because we're not taught all of these tips and tricks, right? We see it in clinicals, but all I really learned throughout NP school is what I learned from my preceptors, it was never really talked about in classes. And then you get into practice and you underestimate the amount of charting.

And even when you have admin time, if you're lucky enough to have that and you negotiate that into your contract, it can still be overwhelming and so much. And I hear time and time again that people are getting home after an eight to 10 hour clinic day, and then they have four hours of charting to catch up on, or they're charting all weekend so that their charts aren't piling up and getting behind.

So I'm thrilled to have you here and share all of your expertise so that hopefully some of these new grad NPs, even NPs in clinicals, can start applying some of these to their daily life and hopefully see a really, really big improvement.

Erica: You're absolutely right.

Anna: And I think you said you have four main charting tips you wanted to share today for new NPs. Like I said, you can start applying these right away. So what would you say is your first tip?

Erica: Yeah, so I want to go backwards just a little bit, and you touched on it that we really did not learn charting in NP school. I think I had maybe one 30-minute lesson on how to chart plus billing and coding. I was fortunate enough to document in my clinical settings, but I know a lot of my fellow students did not have access to the EHR. And the practice chart notes, SOAP notes that we did had to be very comprehensive, very detailed, and that's just not how you chart in the real world.

So unfortunately, a lot of nurse practitioners are not fully prepared on how to chart. And like you mentioned, it's such a significant part of our practice, it's important to work on it and to learn how to chart and to implement some of these charting tips.

So the first one I want to touch on is just recognizing the differences between RN and NP charting. So as an RN, if you were working in a hospital on an acute care floor, you were with that patient for a 12-hour shift, and you document literally everything. Like your hourly rounding, what medications, pain assessment, if you do a dressing change you have to be very detailed on what the wound looks like.

So as NPs from that RN background, we're just used to documenting all those details. So it's very difficult starting out to recognize that and to kind of change how you chart and what you chart. So that's one of the tips that I have, is just recognizing the differences between RN and NP charting.

If you think about the purpose of an NP chart note, it's for three main things. So first off, your continuation of care. So you have to document what you did for that patient, your assessment, your diagnosis, and your plan. And so the next time you see that patient, or if we refer them on to a specialty provider, or if they're seen in the ER, you have to have a very good idea and picture of what you had done for that patient.

The other difference is billing and coding. So after you see that patient, you will sign an evaluation and management code, and that is used to bill the patient's insurance for the services that you provided. And so that's different as an RN. Typically, those notes are not being processed for billing purposes. And so you do need to have a good idea of those evaluation and management codes and know that billing process.

And then the third difference between RN and NP charting is really like the legal issues. So if the patient is involved in a malpractice case, they will use your NP documentation. They look at all the documentation, but really that NP charting is really significant, they'll really focus on that.

So understanding those differences between RN and NP charting is very helpful for how to chart as a nurse practitioner.

Anna: Yeah, absolutely. And I think a lot of that goes back to scope of practice, too, right? As an RN, we're so efficient. After we've gotten acclimated, of course, I know the first year can be a transition, but we're so acclimated to, we're doing our assessment, we're charting our assessment, we're charting real-time vital signs, our vital signs are connecting to the EHR, right? We have all these nifty little things, and it's kind of, at least I felt like a boom, boom, boom, boom, boom. And then, right, we're charting our communication with the provider.

But it's very different than the NP who is charting almost the full story here, right? Because especially if you're in an outpatient setting, which is where my experience is, as an NP you're charting why are they coming in? You are the one still doing the assessment, so what are all of your findings and how are these findings backing up your plan and those codes that you're entering?

You need to make sure you're charting the right assessment findings, and you have assessed the appropriate number of areas. You have to be able to say, hey, this is what I found on my assessment, this is what the patient is saying, and now here's my plan and here's what we're going to do about

it. Here's the treatment, here's the follow-up, here's any procedures I did today. And so it's a lot more encompassing of really painting this whole patient picture.

And we just don't necessarily see that side of things when we're working as an RN and we're so used to charting our task-to-task items.

Erica: Yeah, and that kind of brings me into the next charting tip, because you do have to have all that information in your chart note, but you're also expected to see 20, 30 patients a day. So you can't have very long, detailed chart notes. That's why my second tip is to create problem-focused chart notes.

So as I alluded to before, as an RN you're used to charting everything on that patient. And so then when you're working as a nurse practitioner and they come in to see you, you really focus on, like, the chief complaint, so the reason why you are seeing that patient. And so really the expectation is to just address that problem. So eliminating sentences and stuff that are not relative to that problem, why you're seeing the patient.

I also document in incomplete sentences. So just using phrases. Instead of saying, the patient is experiencing a sore throat, I just put reports sore throat. And so those things, you could use bullet points. Those things are helpful for creating problem-focused chart notes. You're still getting that information across, but it's not paragraphs and paragraphs. It's not taking you all this time to create those chart notes.

Anna: Yeah, absolutely. I love that you brought up earlier the SOAP notes that you write in NP school, because I remember some of those that I'd have to do after clinical and I'd go see a patient in clinical and I'd come back and I'd have to write this whole report. And it was 10 pages long, right? You're going through all of this stuff in detail, in complete sentences, and you're almost like writing an essay.

And that was very helpful to learn the SOAP process and to learn the start to finish patient visit. You're exploring differentials and labs and all of these

things, so it's helping you critically think as an NP, but it is not in any sense realistic to how you actually chart.

And I see new NPs do that all the time, getting into their first day and they're trying to write these very detailed charts, which you of course want to put your detail in there. You want to make sure it's personalized to this visit, but you have to find ways to make it manageable and easy to read for other providers too, right? Because other providers aren't going to sit there and read 10 pages over one quick visit.

Erica: Yeah. And I do have some trainings to teach you that process for creating problem-focused chart notes, but it's really just kind of changing that mindset, taking away what you learned as an RN and stepping into that NP role.

Anna: Yeah, absolutely. So what would you say is another tip for new NPs when it comes to charting?

Erica: Yeah. So something that I found really helpful, I honestly didn't know about this in NP school, it wasn't until I got into practice and realized that this was a charting tip, but that's using smart phrases. So smart phrases, also called dot phrases, but they're those commonly used words or phrases that you're constantly typing into your chart note.

So it could be anything from a history of present illness for a pre-op exam. It could be a comprehensive neurological exam. It could be discharge instructions for a patient or, you know, type two diabetes education. So it's those things, whatever practice setting you're in, you have those commonly used phrases or things that you're constantly typing out.

And so most EHRs have that smart phrase capability. So you can save those sentences, those phrases, and then pull them over into your chart note. That's why they call them the dot phrases because a lot of them, you know, it's like a period and then you start typing HPI or whatever.

So anytime you are finding yourself constantly typing out or dictating those phrases, save it as a smart phrase so the next time you can save time charting. And I do have a comprehensive list of smart phrases. You get access to 125 smart phrases that I have already created. So you can copy and paste them into your EHR and then adjust for your own practice setting. So you don't have to start from scratch. I provide those so that you can have a way to start using those smart phrases.

Anna: Yeah, I cannot stress the importance of having a template that you can base and then personalize from. It's going to save you so much time and things that you might not have even thought to put in in the first place, especially when you're brand new, but they are absolutely critical. And then you're going to pick and choose those ones that are most applicable to your area.

I remember doing like a pediatric clinical and it's like during cold and flu season, you're seeing the same condition five times a day, right? And the 20 kids that you're seeing that day, a lot of them are going to have an ear infection or a cold or the flu or a sore throat. And so when you start seeing those patterns, I cannot emphasize how important it is to find ways to shortcut that charting by using those smart phrases or dot phrases and creating this template.

And of course, you just always want to make sure that you are editing where appropriate. If there's anything else that you have told this specific patient, any other education, just make sure that you are then personalizing it and adding in anything to that specific visit, that will save you so much time.

Erica: Yeah, absolutely. It's just an easy, you know, quick way to get that information in the chart note. And then, like you said, make sure you personalize it.

Anna: And so what would you say is one final charting tip? I know you are a wealth of knowledge and you have so many things that you can provide all of these new NPs, but what's one final charting tip that you have?

Erica: Yeah, so I encourage nurse practitioners to take time to learn the charting. As we alluded to, you really don't learn this in NP school, and starting out in practice it can be very overwhelming. So take some time. I have tons of resources, you know, YouTube videos, blog posts, I'm on Instagram as well and share charting tips.

But also ask your colleagues. So if you have a mentor in your practice setting, you can ask them what are some templates that you have or the smart phrases or just reviewing other providers charting and seeing what information they're adding, what information maybe they're not adding, how they format their chart note, all of those things.

So just being aware that charting may be a struggle for you starting out, but it doesn't have to be overwhelming. And so I just encourage new nurse practitioners to really take some time, just like you're getting used to assessing and diagnosing and, you know, work on that charting.

Anna: Yeah, absolutely. And I just want to remind everyone that it's okay to be new again. Like we said, this is such a change from what you are used to. Like we have been working as an RN, many of us for many years, and we are so adapted to our daily routine and the charting there. But an NP, just the clinic setting, the patient setting, your responsibilities, the charting, it's all so different.

And I remember that first six months as an RN was such a change, right? It was such a transition, but then you start getting the feel of it. And especially if you're in a higher acuity area, it can take you longer. But then you start getting a little bit more confident in yourself and you're not feeling as new. And then you enter as a new NP and it completely starts over and you feel brand new again.

You're going from this expert RN to a novice NP. And so just give yourself grace and remember that it's going to take time to master all these things. And if there's areas like charting that you're really struggling with, there are resources out there to help you. And so give yourself grace, allow yourself to ask for help, do whatever it is that's going to help you transition.

And just remember that it is, it is a transition and the mental impact of that can be a lot for that first six months to a year, but it does get better. Just like when you were a brand new nurse, it does get better and you will get there, but it just takes time.

Now, Erica, I've seen a lot these days, I'm sure you have too, on AI transcriptions and scribes and all of that and how that impacts charting. So can you share some of your thoughts on AI in relation to charting as an NP?

Erica: Yeah, so when I first heard about using AI as a medical scribe to help save time charting, I was just blown away by the technology. So what you do is you open the AI program and it uses voice recognition. So it starts to abstract the information that you say as a provider, but also what the patient is saying. And then it populates a chart note.

So it's putting the information into like a SOAP note format and essentially writing your history of present illness, and if you vocalize your physical exam and then what your treatment plan is and your diagnoses. So this is definitely a game changer.

I just encourage, you know, new nurse practitioners, I do think it's very important that you learn how to chart. So still learning those parts about how the process goes, what information you should put in there. But once you kind of are familiar with what goes in a SOAP note, utilizing these AI medical scribes can definitely save a ton of time.

And I personally use Freed AI. So they do offer 10 free visits, so you can feel free to give it a try. When you're ready to subscribe, I have an affiliate coupon code. It's NP charting, which will get you \$50 off your first month.

But there's tons of different AI medical scribe companies out there and they're all relatively similar. Freed AI is just a separate website, so it does not integrate into your EHR, but there are other systems out there that do.

And I think that this will be the future of healthcare. I think that very soon we will have those AI medical scribes into the EHR so you don't even have to like copy and paste, it just creates your chart note for you. So it's definitely going to help nurse practitioners save a lot of time charting.

Anna: Yeah, I agree. It's kind of inevitable in our future. I mean, we're seeing it everywhere and it's just more and more prevalent. And so it's all about how can we utilize it safely and how can we utilize it to be more efficient and take better care of our patients. And when we're not backed up on 20 charts, that absolutely helps.

Are there any downsides or cons that you're seeing right now of using an Al scribe?

Erica: Yeah, so we always need to be aware to make sure we have a HIPAA compliant tool. And most of them are, but just be careful of that. And then kind of what I alluded to, you know, not being too reliant. So in case your internet were to go down or that AI scribe is not available, you still know how to write a chart note. So that is definitely important. And then also, getting the patient's consent to record the visit.

So those are some downfalls. But I think, like you mentioned, this is going to be the future of healthcare. And I think we need to be aware of the pros and cons of using AI in healthcare, but also realize that it's going to be those nurse practitioners who are comfortable using AI and that will definitely set them apart for future jobs.

Anna: Yeah. Just remember, it does not replace your brain. I love what Erica said, where it's so important that you're learning to chart. You need to learn the ins and outs of writing your own note, of charting your own smart phrases, knowing all of those things is absolutely foundational to being an

NP. An Al scribe does not replace that, but it can be a very, very helpful tool.

And I love that you brought up patient consent because that is so important. And a lot of times what I've seen is if you're going in and just explaining to the patient at the beginning of the visit, like, hey, this is what this is. It is completely private and confidential and this is how it helps. Is it okay if I use it? So many are open to it, right? It's becoming such a thing in our community that I think it's going to get more and more accepted.

And if you're in one of those crazy days where you don't get to charting until the end of the day, I've also found it just really helpful that it's taking notes from you. And like, you have that to fall back on because we've all been there where we're like, oh man, what did they say? Or, oh, what was this? And it takes you a while to think about it.

So just having something that has been at least transcribing some things for you during the visit can just help jog your memory and help you write that personalized note that you are going to be an expert on, but it can just help pull it all together and make sure you're capturing that full patient story.

Erica: Absolutely.

Anna: So Erica, if any of our listeners are interested in your resources, where would be the best place to find you?

Erica: Yeah, so going to my website, NP Charting School. I'm also on YouTube and Facebook, the Nurse Practitioner Charting School. I'm most active on Instagram, Erica D, the NP Charting Coach. And then I do have a free preview of those smart phrases that I was talking about. So I can share that link with you guys. So if you just want an idea of what a smart phrase even is, you know, what should be in there, you can take a look at that.

Anna: Yeah, that would be amazing. And I just want to say thank you for all you're doing for new NPs. We know that in today's society, especially after Covid and the pandemic, that burnout is such a real thing that nurses and

NPs are facing. And work-life balance is so tough to navigate, especially when you're new.

And we're seeing that impact the job satisfaction and the transition into becoming an NP and people leaving the workforce altogether. And so any resources that you are giving NPs is making such a difference and just helping that transition be a little bit easier, helping people feel less burned out. Having that work-life balance is so important so that you can leave work at work and you can go home and have your whole life as well, especially if you have a family or a loved one or a home life.

And so all of these resources, I cannot emphasize how valuable they are. And so definitely make sure you check Erica out. But Erica, thank you so much for joining us.

Erica: Yeah, thank you for having me.

Anna: And we will see everybody in a couple weeks for our next episode.

As an extra bonus friends, if you're looking for support no matter what phase of your nurse practitioner journey that you're currently in, I have communities available for both students and new nurse practitioners. In these communities, we work to uplift one another and grow this profession together every single day. Links to join will be included for you in the show notes.

Thanks for listening to the *Real Deal Nurse Practitioner Club*. If you want more information about the different types of support that we offer to students and new nurse practitioners, you can visit npreviews, with an S, dot com. We'll see you next week.