

# EBCD MEDITECH Content Updates – 2023.2

## NUR Module

### Height/Weight Measurement



The **Height/Weight Measurement** screens have been updated to alert the clinicians if there is a discrepancy from the last documented weight within the same admission/visit.

The *weight gm* and *weight kg* fields alert as noted below:

- Increased or decreased by 10% or greater for Pediatric population, ages 17 and younger.
- Increased or decreased by 25% or greater for Adult population, ages 18 and older.

If “No” is selected, the field is cleared and the clinician may enter a new weight.

If “Yes” is selected, the clinician is forwarded to the next applicable field.

*Note: This is only for the same admission. For example, if a patient is discharged and returns, the previous weight would not be compared against. The return visit is counted as a new encounter.*

This change affects the following assessments and interventions:

Nursing
Pre-Proc Checklist UP RN Assessment
Six Minute Walk
Height/Weight Measurement
Vital Signs
Critical Care Flowsheet

## ICP Monitoring



For accuracy of trending for the evaluation of patients, the unit of measure of mmH2O for ICP documentation is inaccurate and has been removed.

The *mmH2O* field has been removed.

This change affects the following assessments and interventions:

Nursing
Vital Signs
IV Drip Status
Critical Care Flowsheet

# ICP/Ventriculostomy



The location for the ICP level has been updated to remove the numeric options, reducing clinician confusion.

ICP/Ventriculostomy

**Ventricular device set at mmHg:**  
Enter free text.

Ventricular device: External ventricular \*

Location: Frontal region right \*

Instance list status: Active \*

Ventricular device status: Monitor

**Ventricular device set at mmHg:**

Ventricular device set at cmH2O:

Drain status:

Level:

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*Ventricular device marked at mmHg has changed to Ventricular device set at mmHg.*

ICP/Ventriculostomy

**Ventricular device set at cmH2O:**  
Enter free text.

Ventricular device: External ventricular \*

Location: Frontal region right \*

Instance list status: Active \*

Ventricular device status: Monitor

Ventricular device set at mmHg:

**Ventricular device set at cmH2O:**

Drain status:

Level:

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*Ventricular device marked at cmH2O has changed to Ventricular device set at cmH2O.*

ICP/Ventriculostomy

Level: [for free text]

- 1 Above ext auditory meatus
- 2 At ext auditory meatus
- 3 Below ext auditory meatus

Ventricular device: External ventricular \*

Location: Frontal region right \*

Instance list status: Active \*

Ventricular device status: Monitor

Ventricular device set at mmHg:

Ventricular device set at cmH2O:

Drain status:

Level:

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The *Level* field has removed the numerical responses.

This change affects the following assessments and interventions:

Nursing
Critical Care Flowsheet
Lines/Drains/Airways

## Urinary Catheter



Urinary Catheter

Indication for urinary catheter:

- 1 Accurate I/O and crit ill
- 2 Acute retention/obstruct
- 3 Assist in skin healing
- 4 Chronic
- 5 Gross hematuria/irrigate
- 6 Meets removal protocol
- 7 Palliative care
- 8 Perioperative procedure
- 9 Peripartum
- 10 Prolonged immobilization

Patient should have specific order for chronic indwelling catheter.

Urinary catheter type: Temporary/indwelling \*

Insertion/applied date: 01/18/23\*

Insertion/applied time: 1110\*

Indication for urinary catheter:

Urinary catheter status:

External/condom change date:

External/condom change time:

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If a **Temporary/indwelling** catheter type has been started previously and no discontinue date and time has been recorded, the Temporary/indwelling catheter insertion information will now default in *Uneditable* until the Discontinue has been filed.

An existing “Temporary/indwelling catheter” type will be the only Urinary catheter type available for documentation until it has been documented as discontinued.

If a clinician selects an existing documented **External/condom** urinary catheter, the clinician may now change the *Urinary catheter type* to either “Temporary/indwelling” or “Straight”.

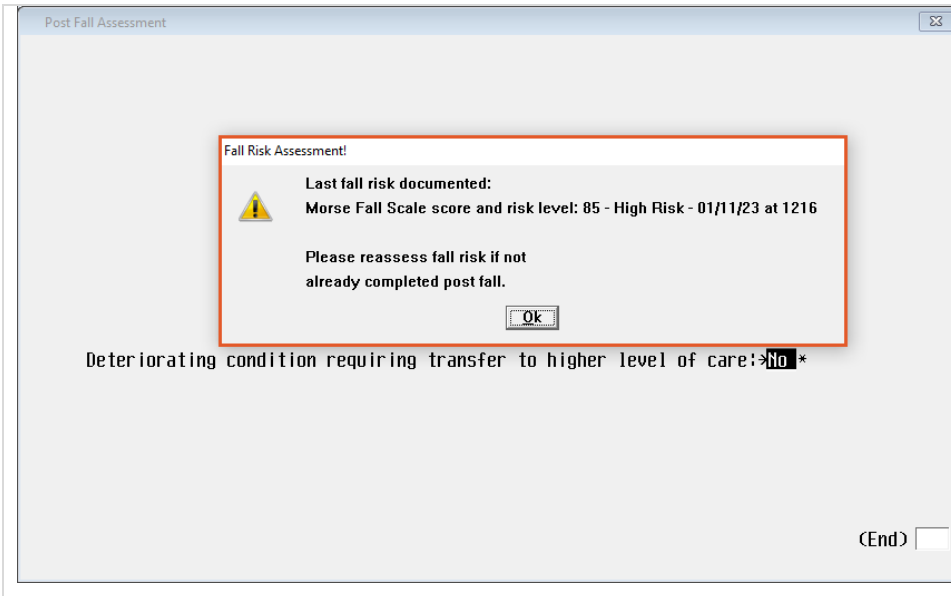
Upon change, the defaulted *Insertion date* and *time* will be cleared and a new “Start” for the new *Urinary catheter type* must be documented.

This will convert the **External/condom** urinary catheter to the new *Urinary catheter type*

This change affects the following assessments and interventions:

Nursing
Critical Care Flowsheet
Lines/Drains/Airways – Urinary Catheter

## Post Fall Assessment Alert

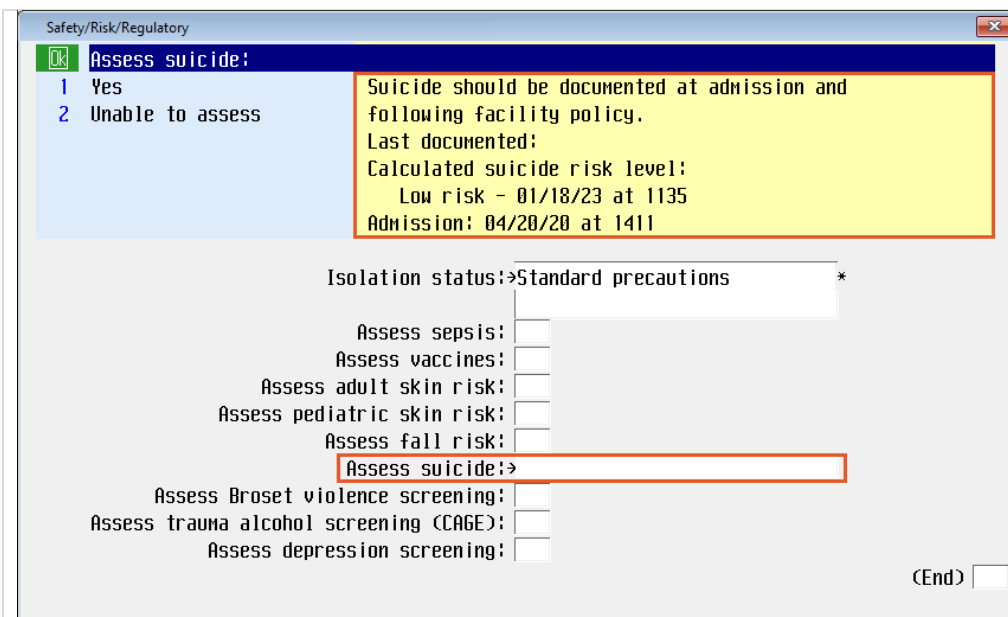


The **Post Fall Assessment** displays the last documented fall risk with the score, risk level, date and time displayed.

## Safety/Risk/Regulatory



The Yellow Information Box has been updated for the *Assess suicide* field in the **Safety/Risk/Regulatory** intervention to include the Admission date and time. This update allows for clinicians to quickly identify whether the suicide assessment was completed in the Emergency Department and needs to be readdressed in Inpatient Nursing.



The Yellow Information Box has been updated and allows the clinician to assess if the suicide assessment has been completed previously:

Suicide should be documented at admission and following facility policy.  
Last documented:  
Calculate suicide risk level:  
Admission: 00/00/00 at 0000

