EDM, PCS, SUR

2024.3

Update

Date of Last Bowel Movement

Previously nurses have been unable to document the date of the last bowel movement on admission.

With this update, the '**Date of last bowel movement**' query will be added to the admission health history. The goal is to allow nurses to document this data when it's most clinically relevant on admission. Throughout admission, bowel movements are captured in I&O.



Medical history	O Yes O He Oserante	The Date of last bowe
None Heart disease	O Yes O No Comment: O Yes O No Comment:	movement has been
Stroke		
Colon cancer	O Yes ⊙ No Comment: O Yes ⊙ No Comment:	added to the Health
Breast cancer	O Yes O No Comment:	
Diabetes	O Yes O No Comment:	History in the
Ovarian cancer	O Yes O No Comment:	
Date of last bowel movement	06/23/24	Admission Health
Date of last dialysis	00/23/24	
Additional medical history details		History assessment.
Additional medical history details		, ,
Additional medical history details		
Additional medical history details		
Additional medical history details		
Additional medical instory details		
Additional medical instory details		

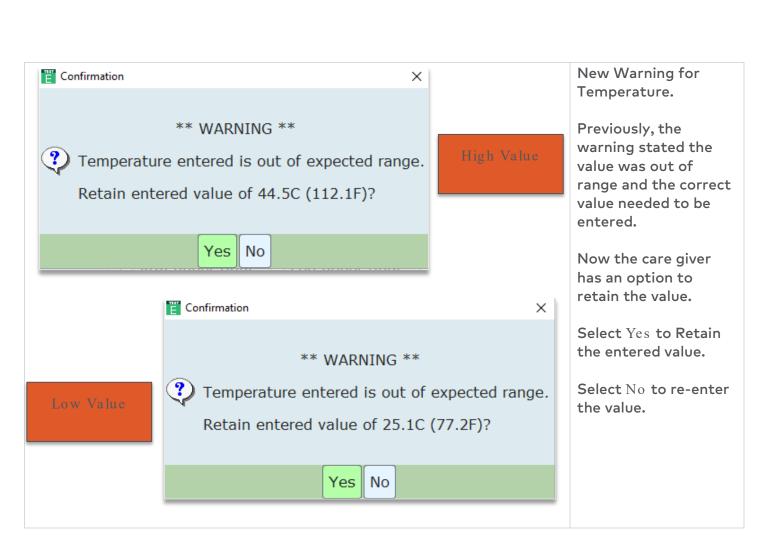


Expanse On-Prem PCS, EDM, SUR Allow Documentation of Out-Of-Range Respiration

Allow Documentation of Out-Of-Range Respiration Rate

Previously, care givers were unable to document on respiratory rates when they were outof-range.

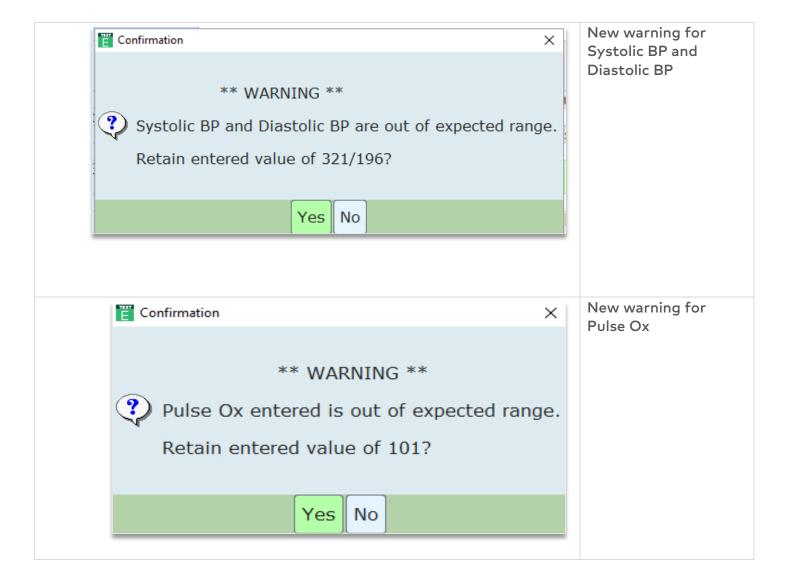
With this enhancement, when documenting vitals, the warning pop-ups will appear, but still allows the user to retain the documented value.





<pre> ** WARNING ** Pulse entered is out of expected range. Retain entered value of 281? Yes No</pre>	New Warning for Pulse value.
Confirmation × ** WARNING ** Respiratory rate entered is out of expected range. Retain entered value of 101? Yes No	New warning for Respiratory rate value





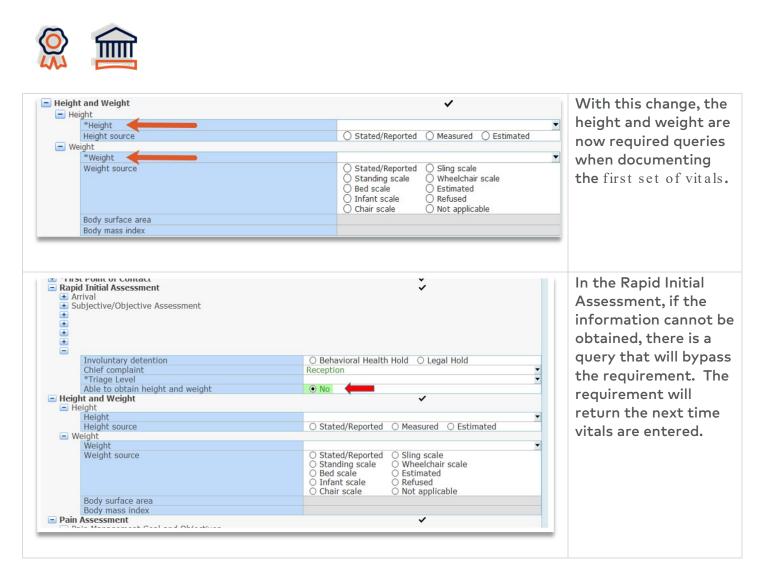


Expanse On-Prem EHR PCS, EDM, SUR 2024.3 Update

Weight Requirements

Weight is currently not required/hard stop in Expanse On-Prem when documenting the first set of vitals for any patient population. Weight is a necessity when providing care to patients. Examples include sepsis fluid administration, antibiotic dosing, thrombolytic dosing, and pediatric medication administration.

With this change, the Height and Weight queries will now be required on all patients for the first documentation.







Expanse On-Prem

EDM, PCS, SUR

EHR

2024.3

Update

Pediatric Weight Source Updates

Solution Summary: Pediatric weights are essential for weight-based medication dosing. The Weight source field has been updated with two new soft stops when Estimated or Refused is selected for Pediatric patients. The Weight source field has also been updated with a hard stop for a response of Stated/Reported.



 Assessments Height and Weight Height 		✓		Height and Weight Intervention
*Height Height source Head circumfe (cm) - Weight	ence	d ○ Measured ○ Estimated	• •	When Estimated is used as a weight source, the following alert appears as a soft stop.
*Weight Weight source Body surface a Body mass inc			O Not applicable	'Estimated' should not be used for patients less than 18 years old. An accurate weight must be documented for medication dosing and administration.
	i 'Estimated' should not be An accurate weight must	used for less than 18 years old. be documented for medication dosing an OK	d administration.	After selecting 'OK' for the alert, the response will remain, but the cursor will not advance, allowing the clinician to change their weight source response.



			_	
 Assessments Height and Weight Height *Height 		v	•	When Refused is used as a weight source, the followin
Height source Head circumference (cm) Weight	○ Stated/Reported ○ Meas	ured () Estimated	•	alert appears as a soft stop
*Weight Weight source	O Standing scale O Chair	it scale O Wheelchair scale O Not applicable scale O Estimated scale O Refused		'Refused' should not be use patients less than 18 years of
Body surface area Body mass index	ssage	×		An accurate weight must b documented for medicatio dosing and administration.
Ģ.	'Refused' should not be used fo An accurate weight must be do	or less than 18 years old. cumented for medication dosing and administration.		After selecting 'OK' for the
		OK		alert, the response will rem but the cursor will not adva
				allowing the clinician to cha their weight source respon
- Assessments				When Stated/Reported is a sa weight source, the
 Height and Weight Height *Height 		✓	•	following alert appears as a stop .
Height source Head circumference (cm)	○ Stated/Reported ○ Me		•	
*Weight Weight source Body surface area	Message	fant scale O Wheelchair scale O Not applicable		'Stated/Reported' cannot k used be used for patients k
Body mass index	- 🗘 'Stated/Reported' canı	not be used for less than 18 years old.		than 18 years old.
		OK		After selecting 'OK' for the alert, the response will be cleared but the cursor will r advance, allowing the clinic correct their weight source response.
 Assessments MRI Procedure Screening MRI Procedure Screening 		✓		MRI Procedure Screenin
MRI screening informati		Caregiver Guardian Patient Family Next of kin Significant other		The MRI Procedure Screeni uses the same Weight sour alert programming for Ped
*Height Height source *Weight		○ Stated/Reported ○ Measured ○ Estimated	•	patients.
*Weight source		○ Stated/Reported ○ Sling scale		

Standing scale Bed scale

O Infant scale

O Chair scale

С

O Sling scale O Wheelchair scale

O Estimated

O Not applicable

○ Refused

ht source, the following appears as a soft stop. sed' should not be used for nts less than 18 years old. curate weight must be mented for medication g and administration. selecting 'OK' for the the response will remain, he cursor will not advance, ing the clinician to change weight source response. n Stated/Reported is used weight source, the wing alert appears as a **hard** ed/Reported' cannot be be used for patients less 18 years old. selecting 'OK' for the the response will be ed but the cursor will not nce, allowing the clinician to ect their weight source onse. IRI Procedure Screening Intervention MRI Procedure Screening the same Weight source programming for Pediatric nts.



 Assessments Newborn Admit *Admission 	~	Memorial Health Meadows only:
 Admission Procedures Vital Signs APGAR Measurements 		Newborn Admit and Newborn Addendum: Measurements
Birth Wt GM		- Addendom, Measorements
*Weight Weight source	 ○ Stated/Reported ○ Standing scale ○ Standing scale ○ Wheelchair scale ○ Bed scale ○ Estimated ○ Infant scale ○ Refused ○ Chair scale ○ Not applicable 	 Both sections use the same Weight source alert
 Assessments Newborn Addendum: Measurements Measurements 	*	programming for Pediatric patients.
*Weight Weight source	○ Stated/Reported ○ Infant scale ○ Wheelchair scale ○ Not applicable ○ Standing scale ○ Chair scale ○ Estimated ○ Bed scale ○ Sling scale ○ Refused	



Expanse On-Prem PCS, EDM Infusion and Titration

This update to the IV drip titration screen supports nursing documentation when rapid titration of medication is necessary. The update provides discrete queries to capture initiation of Block Charting including Start time and dose, Max dose, End dose and time and Titrate parameters.



Medication	Start	Stop	Status		Â	A new Block Charti
Nexterone 360 mg/200 mL Premix	ocare	ocop	otatab			
360 mg In 200 ml @ 33 mls/hr IV ONCE ONE Current Rate: 33 mls/hr Bag Volume: 200 mls Duration: 6 hr 4 min Generic: Amiodarone in Dextrose	05/22/24 10:48	05/22/24 16:51	Active			question set, collapsed, has been added to the IV
Label Comments: 1) Start at 1 mg/min (33.3 mL/hr) x 6 hours. 2) Decrease rate to 0.5 mg/min (17 mL/hr x 18 hours. Use 0.22 micron filter and PVC tubing for administration.						Infusion/Titration MAR documentatio
		1	1 May 22 L2:00 y CMR		•	
Source Nex	terone 360 mg/200			33 mls/hr IV ONCE ONE		
 Assessments IV Infusion and Titration Block Charting Dosing *Infusion rate (mls/hr) 33 		l	<mark>] Start</mark>]✔			
Dose rate Increase\Decrease Star	tod					
Cumulative dose (mg)	icu -					
Container volume 200 Waste amount 0						
Time Elapsed time (minutes) 0m						
 IV Infusion Sites IV Infusion Sites 			~			
	ous				-	



For facility approved medications, the nurse can expand the Block Charting question set to complete all required information.



Expanse On-Prem Organ/Tissue/Eye Donation (EDM, PCS, SUR)

2024.3

Update

Organ, Tissue, and Eye Donation Updates

Solution Summary: Current documentation related to Organ/Tissue/Eye donation is documented in existing **Manage/Refer/Contact/Notify** and **Post Mortem Care** interventions. These fields will be removed from the current interventions and a new intervention titled **Organ/Tissue/Eye Donation** will be created. All documentation related to the organ/tissue/eye donation process should be documented in the new intervention. This intervention will be available in PCS and EDM modules but is not applicable to SUR.



	by SR	Manage/Refer/Contact/Notify
Entity attempted/notified	Assisted living facility Assisted living facility Case management Occupational therapy	
	Child protective services Organ procurement agency	has been updated with the
	Cardiac rehab Pastoral care Chaplain Pharmacist	removal of the following:
	Coroner Pharmacist	removal of the following.
	Court representative Post-acute care	
	Employer representative Probate officer Environmental services Respiratory therapy	Organ procurement agency
	Family member Speech therapy	
	Funeral home Social work Home health Security	(within the <i>Entity</i>
	Infection control Services	attempted/notified field)
	Law enforcement Significant other	
	Listed emergency contact Surrogate Meals on wheels Swallow therapy	
	Mental health therapist Telemetry tech	Organ procurement referral
	Nurse Wound/ostomy care	number
Organ procurement referral number		nomber
Provider		
Family member notified Chain of command contact name		
Other notification comments		
Assessments		1
Post Mortem	✓	Post Mortem Care has been
Post Mortem Care Date of death		
Time of death		updated with the <u>removal</u> of the
Propounced by Time organ donor services called		following:
Name of organ donor person		ronowing.
called		
Medical examiner name		• Time organ donor services
Tubes removed O Yes O		
In restraints past 24 hours (AII) Mechar Transported () To morg		called.
Funeral home name		
Emergency contact notified O Yes O Family	No Comment:	Name of organ donor person
Family support O Chapel I	ocation	called
		called



		Wed May 22 13:04 by RN1	-
Interven	tions	by NVI	
	in-Tissue-Eye Donation PRN Nur	~	
Assessm	ients		
	an/Tissue/Eye Donation	~	
- 0	Organ/Tissue/Eye Donation		
	Name of donor organization		
	Donor organization referral number		
	Date of initial contact with donor organization		•
	Time of initial contact with donor organization		•
	Suitability of eyes	○ Yes ○ No ○ Unknown	
	Suitability of tissues	O Yes O No O Unknown	
	Suitability of organs Organ/tissue/eye donation comments	○ Yes ○ No ○ Unknown	

New Organ/Tissue/Eye Donation PCS/EDM Intervention:

The following fields will be free text:

- Name of donor organization
- Donor organization referral number (this will default in the last filed value but be editable)
- Organ/tissue/eye donation comments

Date of initial contact with donor organization and Time of initial contact with donor organization will utilize the calendar or keypad function.

The following fields will have preset answers to select:

- Suitability of eyes
- Suitability of tissues
- Suitability of organs





Portacath Present on Arrival

With this enhancement, when a port is documented as being accessed prior to arrival, the patient's admit date/time will default into the 'Date/Time accessed' queries.

