

Discharge and Urine Orders Update

Go-Live September 16, 2024

Meditech

Update

Discharge Order Update

The **Discharge Order** has been updated to align the *Cardiac Rehab Discharge* options with registry requirements for AMI, CV Surgery and TVT patients. This update affects the **Discharge Order**, **Discharge Order with parameters** and **Ready for Discharge Process**.

Enter/Edit Responses : Discharge Order (Develop)

Procedure Ordered
Discharge Order

Does patient have any of the following conditions at discharge?

1 Stroke/TIA/Carotid Sten. 5 CABG
2 PCI 6 TVT
3 HF 7 None
4 AMI

Does patient have any of the following conditions at discharge? *

<29 Page Screen>

Ok Cancel Help Prev Next

Does patient have any of the following conditions at discharge has a new response:

- TVT (Transcatheter Valve Therapy)

Enter/Edit Responses : Discharge Order (Develop)

Procedure Ordered
Discharge Order

Cardiac rehab phase II referral:

1 Yes
2 No

Cardiac rehab phase II referral: *

Reason for no cardiac rehab referral:
Due to:

<29 Page Screen>

Ok Cancel Help Prev Next

Cardiac rehab phase II referral becomes required if one of the following previous responses are selected from the *Does patient have any of the following conditions at discharge* field:

- AMI
- CABG
- TVT

Note: If HF is selected, the 'Cardiac rehab phase II referral' may be skipped.

If 'Yes' is selected, the provider will automatically skip the next two fields.

Enter/Edit Responses : Discharge Order (Develop)

Procedure Ordered
Discharge Order

Reason for no cardiac rehab referral:

- 1 Patient/Family Refusal
- 2 Medical Reason
- 3 Health system reason

Cardiac rehab phase II referral: No *

Reason for no cardiac rehab referral: *

Due to:

Ok Cancel Help <29 Page Screen> Prev Next

If 'No' is selected for *Cardiac rehab phase II referral*, the *Reason for no cardiac rehab referral* field becomes required.

Enter/Edit Responses : Discharge Order (Develop)

Procedure Ordered
Discharge Order

Due to:
Enter free text.

Cardiac rehab phase II referral: No *

Reason for no cardiac rehab referral: Pat/Family *

Due to: *

Due to is required once the *Reason for no cardiac rehab referral* response is selected.

Enter/Edit Responses : Discharge Order (Develop)

Procedure Ordered
Discharge Order

Due to:
Enter free text.

Cardiac rehab phase II referral: No *

Reason for no cardiac rehab referral: HealthSyst *

Due to: No program in patient area/transportation barrier *

Ok Cancel Help <29 Page Screen> Prev Next

If the 'Health system reason' response is selected, an automatic response will auto-populate in the *Due to* field:

- No program in patient area/transportation barrier

UA Orders Cath Status Update

The Society for Healthcare Epidemiology of America (SHEA) has updated guidelines suggesting that catheter exchange can be considered after 7 days prior to collecting urine for culture with limited evidence for an exchange at 3 days. Frequent catheter exchanges are associated with non-infectious complications. The **Urine Culture** and **UA with Culture if indicated** orders have been updated to reflect the elimination of the 3-day and 14-day option.

Cath Status has updated group responses:

- 7 days or more
- Less than 7 days
- Change contraindicated

The Yellow Information Box has been updated to reflect the rationale of the responses:

Urinary catheters in place 7 days or more may have biofilm present. Consider changing before collection unless contraindicated.

Enter/Edit Responses : UA WITH CULTURE IF INDICATED

Procedure Ordered
UA WITH CULTURE IF INDICATED

Cath Status:

- 1 7 days or more
- 2 Less than 7 days
- 3 Change contraindicated

Urinary catheters in place 7 days or more may have biofilm present. Consider changing before collection unless contraindicated.

Indication for culture: Gross Hematuria * Cath type: IN date: IN time:

Specimen Description: CATHETER * DC date: DC time:

Cath Status: * Elapse time:

Ok Cancel Help Prev Next

Enter/Edit Responses : Urine Culture

Procedure Ordered
Urine Culture

Cath Status:

- 1 7 days or more
- 2 Less than 7 days
- 3 Change contraindicated

Urinary catheters in place 7 days or more may have biofilm present. Consider changing before collection unless contraindicated.

Indication for Culture: GU Surgery w/in 72 hrs * Cath type: IN date: IN time:

Specimen Description: CATHETER * DC date: DC time:

Cath Status: * Elapse time:

Ok Cancel Help Prev Next

EDM Documentation Update

Go-Live September 16, 2024

Meditech
Education

Overview

This document is a high-level overview for end user education purposes about significant changes within the EDM Module screens.

Organ/Tissue/Eye Donation

A new **Organ/Tissue/Eye Donation** assessment is now available. All documentation related to the organ/tissue/eye donation process should be documented in the new assessment.

Organ/Tissue/Eye Donation

Name of donor organization:
Enter free text.

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: >
Suitability of tissues: >
Suitability of organs: >

Organ/tissue/eye donation comments: >

(End)

New Organ/Tissue/Eye Donation EDM Assessment:

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*

Organ/Tissue/Eye Donation

Suitability of eyes:
1 Yes
2 No
3 Unknown

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: >
Suitability of tissues: >
Suitability of organs: >

Organ/tissue/eye donation comments: >

(End)

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*

IV Start/Reassess Updates

Current documentation requires nurse to answer “No” to the *IV Site absent of redness, heat, or edema* field to document *IV site condition*. New state will remove the response requirement and allow documentation of *IV site condition* independent of prior response.

' and '(Next Page) '."/>

Peripheral IV 05/08 0916

IV site absent of redness, heat or edema:

1 Yes
2 No

Skin prep used:> _____

IV site dressing: _____

IV site dressing clean, dry and intact:> _____

IV site absent of redness, heat or edema:> _____

IV site condition:> _____

IV site size extravasation or infiltrated cm: _____

Skin color near extravasation or infiltration: _____

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New documentation will allow for a “yes” or “no” response to advance to *IV Site Condition* field.

' and '(Next Page) '."/>

Peripheral IV 05/08 0916

IV site condition: [or free text]

1 Edematous 7 Oozing
2 Extravasation 8 Painful/tender
3 Infiltrated 9 Red streak
4 Inflamed 10 Sutured
5 Leaking 11 Warm
6 Necrotic

Skin prep used:> _____

IV site dressing: _____

IV site dressing clean, dry and intact:> _____

IV site absent of redness, heat or edema:>Yes

IV site condition:> _____

IV site size extravasation or infiltrated cm: _____

Skin color near extravasation or infiltration: _____

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IV Site Condition will not be a required response field. This field allows for more detailed documentation of site condition.

Missing Medication Message

Go-Live September 16, 2024

Meditech

Update

Missing Medication Message Update

The **Missing Medication Message** has been updated to allow the Nurse to select the medication from the patient's active medication list to aid in sending a message to pharmacy regarding a medication issue.

Any Order Lookup

Search on:

Order Description	Category
PHA - Missing Medication	PHARMACY MESSAGES

More

The nurse will search for **Missing Medication** under Orders.

Select **PHA - Missing Medication** to proceed.

Preview/Edit

Orders	Pri	Start/Service	Series	Directions	Qty	Details
<input checked="" type="checkbox"/> Medication Management Messa...	R	05/31			1	Req

Select **Req** to enter the medication message.

Enter/Edit Responses : PHA - Missing Medication

Procedure Ordered
PHA - Missing Medication

Medications requested. Med name/dose: _____ *

Current Pt Location: _____ Time due: _____ *

Reason for request: _____ * Phone/Ext. _____

If other please comment: _____ Contact Name: _____

Pharmacy Comments: _____

Ok Cancel Help Prev Next

Once the Nurse enters into the order, they will land in the *Medication requested* field, press Enter or Tab on the keyboard.

The patient's active medications will display.

Select the missing medication

Free-text is allowed if the medication in question is not included in the patient's active medication list.

Enter/Edit Responses : PHA - Missing Medication

Procedure Ordered
PHA - Missing Medication

Medications requested. Med name/dose: **FUROSEHIDE 10MG/ML VIA 100 MG** *

Current Pt Location: G.1E Time due: 0900*

Reason for request: Dose missing * Phone/Ext. 4993

If other please comment: _____ Contact Name: EISMFB Brown, Mary F.

Pharmacy Comments: _____

Ok Cancel Help Prev Next

The selected medication will display in the *Med name/dose* field.

The nurse will continue filling out the order:

- Current Pt Location
- Time due
- Reason for request
- Phone/Ext
- Contact Name: **Defaults in the current user's mnemonic and name**

Select Ok

Note: If the nurse selects the wrong medication, they must select the Med name/dose field to edit the selected medication.

TEST, PHAVACI - 46/F DOB 10/13/77 ADM IN G.1E 6.103/01 U/A 6000000540/600000005867

Allergies/ADRs: No Known Allergies

Category	Orders	Pri	Date/Time	Status	Stop	My
+ MEDICATIONS (2)						
- Other (1)						
PHA - Missing Medication (PHANS6)			08/19 0949	Active		

Review Order Document Sign Back

Once complete, the order will show on the Order screen.

Change Order

Medication Management Message (MMM) Add to Favorites

Quantity: 1

Start: 05/31

Procedure	Priority	Service Date/Time	Qty	Queries	Providers
Medication Management Message (MMM)	R	05/31	1	*	*

Status	Active
Medications requested	.
Med name/dose:	Tylenol Extra Strength 500 MG
Current Pt Location:	
Time due:	1449
Reason for request:	Dropped on floor
Phone/Ext.	
Contact Name:	
If other please comment:	
Pharmacy Comments:	

Any comments from the Pharmacy to Nursing will be located within order under *Pharmacy Comments*.

The nurse will not receive an alert, but the comments can be viewed from the **View/Change** option.

NUR Documentation Update

Go-Live September 16, 2024

Meditech
Education

Overview

This document is a high-level overview for end user education purposes about significant changes within the Nursing Module screens.

How to use this guide

Please read the MEDITECH selected prompts and follow the yellow information boxes onscreen as you become aware of changes in the documentation.

Status Board

The Vaccine query has been updated on the status boards below to align with updated Vaccine documentation. The column header updated from **Vaccine** to **Flu Vaccine**.

Query: Patient/caregiver agrees to receive influenza vaccine:

- Responses: Yes, accepts
- No, refuses
- Give per CDC guidelines

Charge Nur Check status board

Charge Nur Check WFD Std 09/24			
Fall Risk	Cardiac Mon	Iso	MDRO
Date/Tm	NIH	1stPOC	Flu Vaccine

Infection Control status board

Infection Ctrl WFD Std 09/24		
Fall Risk	Activity	
Date/Tm	Flu Vaccine	

Safety/Risk/Reg

Safety/Risk/Reg WFD Std 09/24		
Suic Risk	Sepsis	Flu Vaccine
Date/Tm	Date/Tm	Date/Tm

BH Outcomes

BH Outcomes WFD Std 09/24			
Suic Assess	Sepsis	Flu Vaccine	
Date/Tm	Date/Tm	Date/Tm	

Manage/Refer/Contact/Notify

Current documentation related to Organ procurement documented in the **Manage/Refer/Contact/Notify** intervention will be removed. A new intervention titled **Organ/Tissue/Eye Donation** will be available. All documentation related to the organ/tissue/eye donation process should be documented in the new intervention.

The screenshot shows the 'Manage Refer Contact Notify' form. At the top, there is a section for 'Entity attempted/notified: [or free text]'. Below this is a grid of checkboxes for various notification categories, including Assisted living facility, Case management, Child protective services, Cardiac rehab, Chaplain, Coroner, Court representative, Employer representative, Environmental services, Family member, Funeral home, Home health, Infection control, and Law enforcement. A 'Lookup' window is open, displaying a list of options for 'Entity attempted/notified: Lookup'. The options include Nurse, Nursing home, Nutrition, Occupational therapy, Organ procurement agency (highlighted with a red box), Pastoral care, Pharmacist, Physical therapy, Post-acute care, Probate officer, Respiratory therapy, Speech therapy, Social work, Security, Senior services, Significant other, Surrogate, Swallow therapy, Telemetry tech, and Wound/ostomy care. The 'Organ procurement agency' option is selected.

Manage/Refer/Contact/Notify has been updated with the **removal** of the following:

- Organ procurement agency (within the *Entity attempted/notified* field)
- *Organ procurement referral number*

This update affects the following intervention:

Nursing
Manage/Refer/Contact/Notify

Organ/Tissue/Eye Donation

A new intervention titled **Organ/Tissue/Eye Donation** is available. All documentation related to the organ/tissue/eye donation process should be documented in the new intervention.

Organ/Tissue/Eye Donation

Name of donor organization:
Enter free text.

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: _____
Suitability of tissues: _____
Suitability of organs: _____

Organ/tissue/eye donation comments: _____

(End)

New Organ/Tissue/Eye Donation 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*

Organ/Tissue/Eye Donation

Suitability of eyes:
1 Yes
2 No
3 Unknown

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:>
Suitability of tissues: _____
Suitability of organs: _____

Organ/tissue/eye donation comments: _____

(End)

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*

Please select unknown for suitability. Typically a medical specialist will evaluate the patient history for suitability.

This update affects the following intervention:

Nursing
Organ/Tissue/Eye Donation

Peripheral IV (Lines/Drains/Airways)

Current documentation requires nurse to answer “No” to the *IV Site absent of redness, heat, or edema* field to document a peripheral *IV site condition*. New state will remove the response requirement and allow documentation of a peripheral *IV site condition* independent of prior response.

Peripheral IV 05/08 0916

IV site absent of redness, heat or edema:

1 Yes
2 No

Skin prep used:> _____

IV site dressing: _____

IV site dressing clean, dry and intact:> _____

IV site absent of redness, heat or edema:> _____

IV site condition:> _____

IV site size extravasation or infiltrated cm: _____

Skin color near extravasation or infiltration: _____

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New documentation will allow for a “yes” or “no” response to advance to *IV Site Condition* field.

Peripheral IV 05/08 0916

IV site condition: [or free text]

1 Edematous 7 Oozing
2 Extravasation 8 Painful/tender
3 Infiltrated 9 Red streak
4 Inflamed 10 Sutured
5 Leaking 11 Warm
6 Necrotic

Skin prep used:> _____

IV site dressing: _____

IV site dressing clean, dry and intact:> _____

IV site absent of redness, heat or edema:> Yes

IV site condition:> _____

IV site size extravasation or infiltrated cm: _____

Skin color near extravasation or infiltration: _____

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IV Site Condition will not be a required response field. This field allows for more detailed documentation of site condition.

This update affects the following interventions:

Nursing
Lines Drains Airways
Critical Care Flowsheet

Teach/Educate: Anticoagulation Teaching

Current documentation for anticoagulation teaching involves specific references to warfarin. Newer anticoagulants are being prescribed that have a different mechanism of action than warfarin. Unique references to warfarin will be removed, and the documentation will allow nurses to document on anticoagulation broadly.

The screenshot shows the 'Patient/Family Teaching' window with a list of checkboxes: Health Behavior, Medication, Safety, and Condition Specific. The 'Condition Specific' checkbox is highlighted. A 'Condition Specific' Lookup dialog box is open, showing a list of options where 'Anticoagulation teaching' is selected and highlighted. The list includes: Adverse drug reactions, Anticoagulation teaching, Asthma education, CHF information, Compliance with instructions, CV information, Dietary needs, Postpartum information, Post sedation instructions, Sepsis information, and Stroke information.

The anticoagulation teaching topic within the **Teach/Educate** intervention has been updated.

The screenshot shows the 'Anticoagulation Teaching' window. At the top, there is a text field with the label 'Written information regarding anticoagulation provided to primary learner:'. Below this, there are several checkboxes for various topics: 'Maintain a consistent amount of vitamin K foods if indicated:', 'Consult MD before changes in dietary habit:', 'Potential drug or food interactions:', 'Consult MD before adding or stopping prescription or OTC meds:', 'Anticoagulants increase bleeding risk:', 'Take medication exactly as instructed:', 'Importance of scheduled blood tests if indicated:', 'Monitoring and follow-up post-discharge:', and 'When to call provider or seek emergency care:'. The first checkbox is checked.

Written information regarding anticoagulation provided to primary learner has been updated to reflect anticoagulation education. If the end user selects Yes regarding written information on anticoagulation, all proceeding fields will default to Yes. These fields are editable where appropriate.

- *Written information regarding anticoagulation provided to primary learner*
- *Maintain a consistent amount of Vitamin K foods if indicated.*
- *Consult MD before changes in dietary habit*
- *Potential drug for food interactions*
- *Consult MD before adding or stopping prescription OTC meds*
- *Anticoagulants increase bleeding risk*
- *Take medication exactly as instructed*
- *Importance of scheduled blood tests if indicated*
- *Monitoring and follow-up post-discharge*
- *When to call provider or seek emergency care*

This update affects the following intervention:

Nursing
Teach/Educate

Vaccine Screening (Flu update)

Go-Live September 16, 2024

Meditech

Update

Vaccine Screening Assessment

The Vaccine Screening Assessment workflow has been updated. Nurses will continue to screen all patients 6 months of age and older; however, the nursing documentation will now reflex an Influenza vaccine order for eligible patients of 18 years of age and older. Providers will continue to receive Influenza flags on the Rounding List for pediatric patients 6 months of age to less than 18 years of age and all Pneumococcal flags for patients 65 years of age or greater.

The Discharge process has been updated to accommodate scenarios when the patient is ready for discharge but the nurse is still unable to collect the vaccine history.

Note: The red Flu Season banner will display the standard flu season of 09/01 to 03/31.

Vaccine Screening Assessment

Assess vaccine history:

- 1 Yes
- 2 No, unable to assess
- 3 No, discharging patient

Nurses to collect previous pneumococcal, influenza, and COVID vaccine administrations.

Influenza orders will reflex from this intervention for candidates 18 years or older.

When appropriate, providers will place influenza orders for pediatric patients and pneumococcal orders for patients 65 years or older.

If unable to assess on discharge, complete vaccine screening with any known information and administer influenza vaccine if indicated per CDC guidelines.

-- Flu Season: 09/01/23 thru 08/31/24 --

Assess vaccine history: *

Reason unable to assess:

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Assess vaccine history has been updated with a new response:

- No, discharging patient

The Yellow Information Box outlines the assessment:

Nurses to collect previous pneumococcal, influenza, and COVID vaccine administrations.

Influenza orders will reflex from this intervention for candidates 18 years or older.

Providers will place influenza orders for pediatric patients and pneumococcal orders for patients 65 years or older.

If unable to assess on discharge, complete vaccine screening with any known information and administer influenza vaccine if indicated per CDC guidelines.

Note: If 'No, unable to assess' or 'No, discharging patient' is selected, the Reason unable to assess is required.

Vaccine Screening Assessment

Influenza vaccine contraindication:

- 1 None
- 2 Hx of anaphylaxis
- 3 Unknown

-- Flu Season: 09/01/23 thru 08/31/24 --

Estimated COVID-19 vaccine admin date: 05/21/23

Estimated influenza vaccine admin date: _____

Influenza vaccine contraindication: _____ *

Patient/caregiver agrees to receive influenza vaccine: _____ *

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Influenza vaccine contraindication is a new, required field if the patient does not have a current influenza vaccine admin date.

The field has the following responses:

- None
- Hx of anaphylaxis
- Unknown

If “Hx of anaphylaxis” is selected, an Influenza vaccine order will not reflex.

Vaccine Screening Assessment

Patient/caregiver agrees to receive influenza vaccine:

- 1 Yes, accepts
- 2 No, refuses
- 3 Give per CDC guidelines

Select Yes if patient accepts to receive the influenza vaccine.
Select No if patient refuses to receive the influenza vaccine.

The option to Give per CDC guidelines is automatically selected when the user has indicated that the vaccine history cannot be assessed upon discharge.

-- Flu Season: 09/01/23 thru 08/31/24 --

Estimated COVID-19 vaccine admin date: 05/21/23

Estimated influenza vaccine admin date: _____

Influenza vaccine contraindication: None *

Patient/caregiver agrees to receive influenza vaccine: _____ *

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Patient/caregiver agrees to receive influenza vaccine is a new field and is required if there are no disqualifying factors.

The field has the following responses:

- Yes, accepts
- No, refuses
- Give per CDC guidelines

The Yellow Information Box guides the clinician to select the appropriate response:

Select Yes if patient accepts to receive the influenza vaccine.
Select No if patient refuses to receive the influenza vaccine.

The option to Give per CDC guidelines is automatically selected when the user has indicated that the vaccine history cannot be assessed upon discharge.

If “No, refuses” is selected, the patient has refused the Influenza vaccine and the order will not reflex.

Note: This field will not be required for patients with an

Note: The ‘Give per CDC guidelines’ response is automatically selected when “No, discharging patient” for the Assess Vaccine History field is selected. Nurses will receive an error message if this option is otherwise selected.

Adult patient >= 18 years old and < 65 years old

anaphylactic reaction history.

Provider to review vaccine history/order displays the Provider Rounding List flag/action needed.

Adult (18 years or greater but less than 65 years) flags are as follows:

- Blank
 - The patient is 18 years or greater but less than 65 years of age. The provider does not assess for the influenza or pneumococcal vaccines for this age group.

Influenza vaccine status defaults from the Nursing documentation and displays candidacy for the influenza vaccine nursing order.

Adult (18 years or greater but less than 65 years) candidacy are as follows:

- Not a candidate
 - The patient is 18 years or greater and is up to date, has a contraindication or refused the vaccine
- Candidate
 - The patient is 18 years or greater, but less than 65 years and agrees to receive the influenza vaccine
- Out of stock
 - The patient is 18 years or greater, agrees to receive the influenza vaccine but the appropriate dose is not available.

Vaccine Screening Assessment

Vaccine comment:
Enter free text.

Provider to review vaccine history/order: displays the provider rounding list flag/action needed.

Influenza vaccine status: displays candidacy for nursing ordering of an influenza vaccine.

-- Flu Season: 09/01/23 thru 08/31/24 --

Provider to review vaccine history/order:

Influenza vaccine status: Not a candidate

Vaccine comment: >

(Prev Page) (End)

Vaccine Screening Assessment

Vaccine comment:
Enter free text.

Provider to review vaccine history/order: displays the provider rounding list flag/action needed.

Influenza vaccine status: displays candidacy for nursing ordering of an influenza vaccine.

-- Flu Season: 09/01/23 thru 08/31/24 --

Provider to review vaccine history/order:

Influenza vaccine status: Candidate

Vaccine comment: >

(Prev Page) (End)

Adult patient 65 years old and up

Provider to review vaccine history/order displays the Provider Rounding List flag/action needed.

Adult (65 years or greater) flags are as follows:

- PNU
 - The patient is 65 years or greater and is a candidate for the pneumococcal vaccine
- Not eligible
 - The patient is 65 years or greater and not a candidate for the pneumococcal vaccine
- Out of stock
 - The patient is 65 years or greater and a candidate for the pneumococcal vaccine but no pneumococcal doses are available

Influenza vaccine status defaults from the Nursing documentation and displays candidacy for the influenza vaccine nursing order.

Adult (65 years or greater) candidacy are as follows:

- Not a candidate
 - The patient is 18 years or greater and is up to date, has a contraindication or refused the vaccine
- Candidate 65+
 - The patient is 65 years or greater and agrees to receive the influenza vaccine
- Out of stock
 - The patient is 18 years or greater, agrees to receive the influenza vaccine but the appropriate dose is not available.

Vaccine Screening Assessment

Vaccine comment:
Enter free text.

Provider to review vaccine history/order: displays the provider rounding list flag/action needed.

Influenza vaccine status: displays candidacy for nursing ordering of an influenza vaccine.

-- Flu Season: 09/01/23 thru 08/31/24 --

Provider to review vaccine history/order: PNU
Influenza vaccine status: Not a candidate

Vaccine comment: >

(Prev Page) (End)

Vaccine Screening Assessment 06/13 1038 J00021296259 DEMO,SAMBINK

Vaccine comment:
Enter free text.

Provider to review vaccine history/order: displays the provider rounding list flag/action needed.

Influenza vaccine status: displays candidacy for nursing ordering of an influenza vaccine.

-- Flu Season: 09/01/23 thru 08/31/24 --

Provider to review vaccine history/order: PNU
Influenza vaccine status: Candidate 65+

Vaccine comment: >

(Prev Page) (End)

Linked Orders

Review Patient's Orders Tue, Jun 11

Current ALL Session

Category	Orders	Pri	Date/Time	Status	Stop	My
+ Laboratory (13)						
+ Dietar						
+ Nursing						
+ Medical						
+ Other						

Order Management

Ordering Provider

Other Provider

Order Source

OK Cancel

Submit

Review Order Document Sign Back

If a patient is a candidate for the Flu vaccine, the order screen will appear.

Enter the *Ordering Provider* "Attending", and *Order Source* "z"

Preview/Edit

Add More Add to Favorites
Clear Unchecked Save as Set

Orders	Pri	Start/Service	Series	Directions	Qty	Details
<input checked="" type="checkbox"/> Review Vaccine History (CPHA...	R	09/03 1057				Req

Done Cancel Help

The appropriate vaccine order will reflex. To place the order, select the red **req**.

Enter/Edit Responses : Review Vaccine History

Procedure Ordered
Review Vaccine History

Order influenza 18-64 yrs:

1 Yes INFLUENZA CDC RECOMMENDATION

2 No Give Influenza vaccine

Click box to display Vaccine History documentation ->

Order influenza 6-35 mo: <-Unavailable Order influenza 18-64 yrs: Yes
Order influenza 36 mo-17 yrs: <-Unavailable Order influenza >= 65 yrs: <-Unavailable

Reason influenza vaccine not ordered/indicated:

Ok Cancel Help Prev Next

The vaccine order will display on the screen for the nurse. The appropriate influenza vaccine will be selected per the age of the patient.

Nursing may not modify this order.

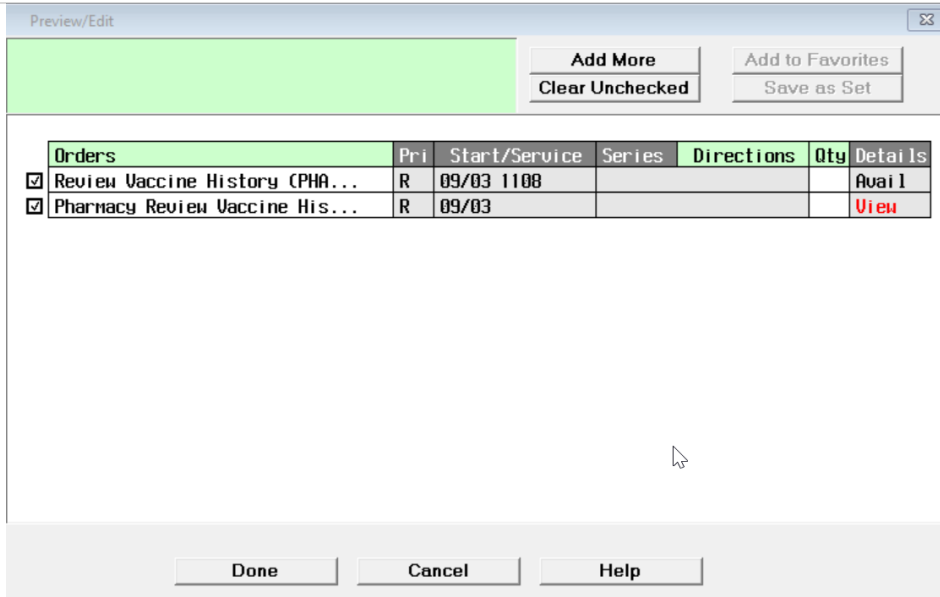
Select Ok to continue



An alert message will appear:

One order has been reflexed, modifications may be needed.

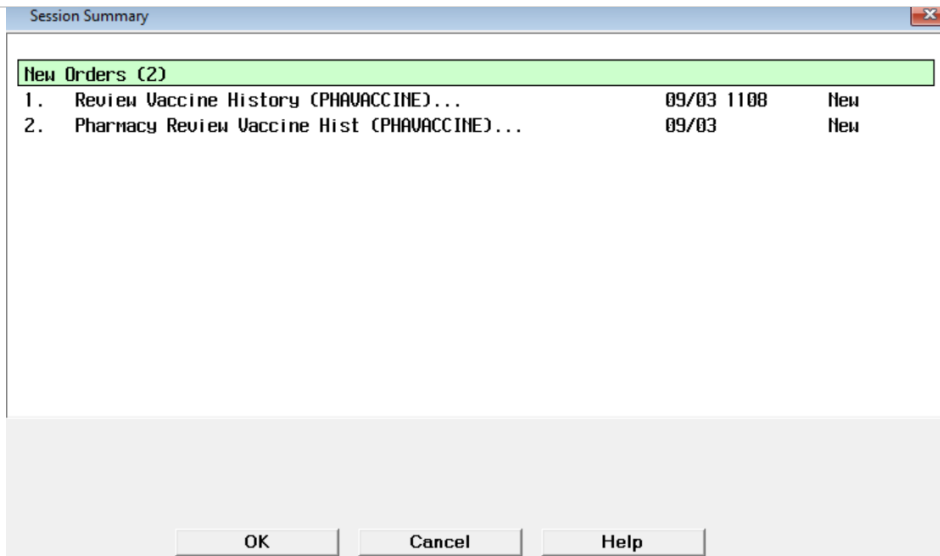
Select Ok



The **Review Vaccine History** order and the appropriate vaccine will display on the order screen.

Select Done to continue.

To file the orders, select Submit.



The Session Summary screen displays.

Click OK

Vaccine Screening (Alerts)

Vaccine Screening Assessment

Reason unable to assess:

Enter free text. Reason required if unable to fully assess vaccines.

-- Flu Season: 09/01/23 thru 08/31/24 --

Assess vaccine history: No, discharging patient *

Reason unable to assess: *

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Discharging but unable to assess

If documenting the Vaccine Screening prior to completing the discharge instructions and the vaccine history is unknown, select 'No, discharging patient' from *Assess vaccine history*.

Reason unable to assess will become required.

Vaccine Screening Assessment

Patient/caregiver agrees to receive influenza vaccine:

- Yes, accepts
- No, refuses
- Give per CDC guidelines

-- Flu Season: 09/01/23 thru 08/31/24 --

Estimated COVID-19 vaccine admin date:

Estimated influenza vaccine admin date:

Influenza vaccine contraindication: None *

Patient/caregiver agrees to receive influenza vaccine: Give per CDC guidelines *

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Vaccine Screening Assessment

Patient/caregiver agrees to receive influenza vaccine:

- Yes, accepts
- No, refuses
- Give per CDC guidelines

-- Flu Season: 09/01/23 thru 08/31/24 --

Estimated COVID-19 vaccine admin date:

Estimated influenza vaccine admin date:

Influenza vaccine contraindication: Unknown *

Patient/caregiver agrees to receive influenza vaccine: Give per CDC guidelines *

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Discharging but unable to assess

Influenza vaccine contraindication is required.

If 'None' or 'Unknown' is selected, *Patient/caregiver agrees to receive influenza vaccine* automatically defaults to 'Give per CDC guidelines' and is not editable.

Vaccine Screening Assessment 09/03 1136 G0000005936 TEST,WATHREE

Vaccine comment:
Enter free text.

Provider to review vaccine history/order: displays the provider rounding list flag/action needed.

Influenza vaccine status: displays candidacy for nursing ordering of an influenza vaccine.

-- Flu Season: 09/01/24 thru 08/31/25 --

Provider to review vaccine history/order:

Influenza vaccine status:

Vaccine comment:

(Prev Page) (End)

Discharging but unable to assess

Influenza vaccine status defaults from the nursing documentation and displays candidacy for the influenza vaccine nursing order.

Influenza vaccine status options

- Candidate
- Not a Candidate
- Out of Stock

***** The linked order will display to enter**

Non-BH Patient Alerts

The nurse will receive the following alert when attempting to document on the Discharge Instructions if:

- The status for the Vaccine Screening Assessment is still "Unable to assess"

If Yes is selected, the nurse will exit and document the Vaccine Screening Assessment.

If No is selected, the nurse will document known vaccine history and continue on to document Discharge Instructions.

OR


The nurse will receive the following alert when attempting to document discharge if:

- The Vaccine Screening Assessment has not been completed

If Yes is selected, the nurse will exit and document the Vaccine Screening Assessment.

If No is selected, the nurse will continue to document Discharge Instructions.

Vaccination Alert




***** ATTENTION: VACCINATION ALERT *****

Vaccine status is currently "No, unable to assess".

Click YES to exit and document vaccine(s).
Click NO to continue documenting on Discharge Instructions.

Vaccination Alert



***** ATTENTION: VACCINATION ALERT *****

Vaccine status is currently "Not assessed".

Click YES to exit and document vaccine(s).
Click NO to continue documenting on Discharge Instructions.

Vaccination Alert



*** ATTENTION: VACCINATION ALERT ***

This patient has vaccine(s) ordered and has not yet received it/them.

Select YES to exit and document vaccine(s) in EMAR.

Select NO to continue.

Yes

No

DISCHARGE INSTRUCTIONS

Non-BH Patient Alerts

The nurse will receive an alert when attempting to document discharge and the patient has not received an ordered vaccine(s):

Select Yes to exit and document the vaccine in eMAR.

Select No to continue documenting the Discharge Process.

Vaccination Alert



*** ATTENTION: VACCINATION ALERT ***

Vaccine status is currently "No, unable to assess".

Click YES to exit and document vaccine(s).

Click NO to continue documenting on Discharge Instructions.

Yes

No

Behavioral Health Patients Alert

The nurse will receive the following alert when attempting to document discharge if:

- The status for the Vaccine Screening Assessment is still "Unable to assess"

The nurse selects Ok and exits the Discharge Instructions to complete the Vaccine Screening.

Vaccination Alert



*** ATTENTION: VACCINATION ALERT ***

This patient has vaccine(s) ordered and has not yet received it/them.

Please document vaccine(s) in EMAR.

Click Ok to exit screen.

Ok

Behavioral Health Patients Alert

The nurse will receive an alert when attempting to document discharge and the patient has not received an ordered vaccine(s).

Select Ok to exit the screen and document the vaccine(s) in eMAR.

This update affects the following interventions:

Nursing	Surgery	Behavioral Health
Safety/Risk/Regulatory	SURG: Admission Assessment	Safety/Risk/Regulatory
Admission/Shift Assessment - Neonatal	SURG: Admission Assessment Int	Admission/Shift Assessment
Discharge Instructions	SURG: Safety/Risk/Regulatory	Vaccine Screening Assessment
Vaccine Screening Assessment	SURG: Safety/Risk/Regulatory Int	BH: Discharge Instructions Home
Admission/Shift Assessment	SURG: Safety/Risk/Regulatory PAC	BH: Discharge Nursing Assessment
	SURG: Discharge Instructions PAC	