



CommunityWorks Monthly Update

Wednesday, May 27, 2026

Table of Contents

All Venues	2
Interpreter Services.....	2
After-Hours Imaging	2
Ambulatory	2
Referral Management	2
Anticoagulation Therapy	2
Inpatient.....	3
Pressure Ulcer Stage Values.....	3
Decision to Admit	3
Surgery	3
Visit Instructions	3
Future Changes.....	4
To Be Determined.....	4

[Click here for the latest Registration, Scheduling, Referral Management, Experian, Charge Management, and other Revenue Cycle updates!](#)

All Venues

Interpreter Services

- The **Interpreter Services Declined Reason** and **Interpreter Services Declined Reason for Caregiver** fields, within the **Interpreter Services** and **Interpreter Services for Caregiver** forms respectively, will be updated to include the following options:
 - In-language services provided
 - Interpreter need on file is inaccurate
 - Unsatisfied with available interpreter services
 - Other

After-Hours Imaging

- **Reminder:** After-hours X-ray interpretation timing may vary. Results Review, **In Progress**, and Preliminary Report statuses **do not** confirm that imaging has been performed or interpreted. The best practice solution is to verify exam status within **Orders**. The exam order status will reliably progress to Exam Completed once the imaging has been performed.
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Ambulatory

Referral Management

- The character limit for the Referral Reason field on the Referral Management order is being reduced from 255 characters to 195 characters.

Anticoagulation Therapy

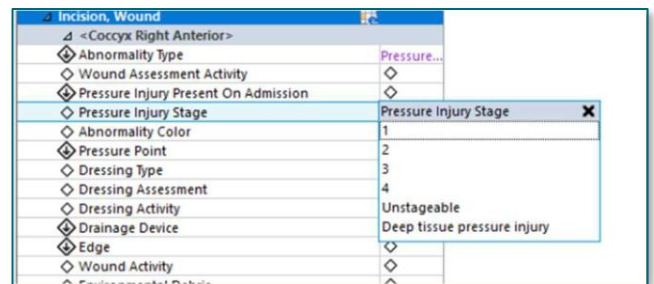
- The Warfarin Management Trending component is removed.
 - To support safe and effective anticoagulation management, please transition to one or more of the following supported options: Lab Component, Medication Component, or Anticoagulation Dosing Flowsheet.
- The Anticoagulation Therapy Management Old form is depreciated and will be replaced with the new Anticoagulation Therapy Management Form.

Inpatient

Pressure Ulcer Stage Values

➤ Updates to pressure injury stage selections in IView.

- Removed values:
 - Unstageable - non removable dressing/device
 - Unstageable - slough and/or eschar
 - Unstageable - suspect deep tissue injury evolving
- Added values:
 - Deep tissue pressure injury
 - Unstageable



Decision to Admit

➤ The Decision to Admit order is updated to **Decision to Hospitalize** to align with Joint Commission naming recommendations.

	\$	Order Name	Status	Dose...	Details
4		Admission/Transfer/Discharge			
	☒	Decision To Hospitalize	Ordered	03/23/26 16:25:00 EDT, Critical Care, Pain, Anticipated LOS 1 midnight or less, ZZCAH (Cerner 39), CAH LP Pr...	
4		Patient Care			
	☒	Document Home Meds	Ordered	02/18/26 17:06:57 EST, Stop Date 02/18/26 17:06:57 EST	Order placed due to patient arrival to the Emergency Department
	☒	ED Intake - Adult	Ordered	02/18/26 17:06:57 EST, 02/18/26 17:06:57 EST	Order placed due to patient arrival to the Emergency Department
4		Consults			
	☒	Consult to Infection Control Prac...	Ordered	02/18/26 17:15:56 EST	

Surgery

Visit Instructions

➤ Ambulatory Surgery Instructions template reorganized to present information into clearly defined sections, including next steps, visit summary details, medications, and educational materials, to improve readability and streamline the patient experience.

Future Changes

To Be Determined

- Instead of using POC PowerForms, POC result values can be entered into the Point of Care Result Entry tool. Coming by end of year 2026.
- Reverse Interaction Checking will automatically run each time new allergies are entered and can be run at any time by clicking **Reverse Allergy Check** button.
 - **Interaction is found:** Red warning populates with details. This is not auto dismissed.
 - **No interaction is found:** Green checkmark with text **Success. No Drug Interaction found.** This message will auto-dismiss after 5 seconds.
- MyExperience Replacement
 - **MyExperience will be replaced with Role Profiles.** In the future, if more than one role exists there will be a prompt to choose a role when logging into an application.
- Problem List Cloud
 - New tools for evolving problems, improved classification filters, problem summaries, and HCC indicators, with details below:
 - Problems component will be renamed to **Problem List**.
 - Separation and filtering of Problems into **This Visit** and **Ongoing**.
 - Improved Nomenclature Search.
 - Display of Classification Filters such as Dietary, Family History, Medical, Nursing, Past Medical History, Patient Stated, SDOH, Social History, Surgical History.
 - Ability to **Evolve** Problems; a new ability to change the problem's code as the problem evolves. It also allows the ability to view a timeline of the problem's evolution.
 - Narrative for Problem Summary can be viewed from the problem detail pane.
 - **Resolve** action allows a treated or managed problem that is now considered clinically stable to be resolved . The problem will now show as part of the patient's problem history
 - **Remove** action is the ability to remove an incorrect problem on the patient's chart.
 - The problem will be cancelled but still discoverable

Priority	Problem Name	Onset	Code	Flags	Actions
1	Chronic obstructive pulmonary disease with (acute) exacerbation	--	J44.1	HCC	☒ This Visit ☐ Ongoing Evolve
2	Knee pain	--	M25.562	--	☒ This Visit ☒ Ongoing Evolve
3	DMDD (disruptive mood dysregulation disorder)	--	F34.81	--	☒ This Visit ☐ Ongoing Evolve
4	Diabetes type I	--	E10.9	HCC	☒ This Visit ☐ Ongoing Evolve

Ongoing Resolved

Classification Filter: - Select -

Problem Name	Onset	Code	Flags	Actions
Tobacco user	--	17325014	--	☐ This Visit ☒ Ongoing Evolve

- Ability to Favorite Problems
- Problem Summary is a narrative summary to all ongoing problems. This is intended to provide a brief synopsis of the management of that problem and current state.
 - If multiple problem summaries exist, the user can see all prior problem summaries by selecting the “View History” hyperlink. A comment icon will display if problem summary or comments are documented.
- HCC will now display in the **Flags** column.
 - HCC are tracked and reset on a calendar year basis (January 1 – December 31).
 - Diagnosis captured during this period determines the patient’s Risk Adjustment Factor (RAF) for the following year’s payment. Even if a condition is ongoing, it must be re-documented every year to be included in the risk score.

The screenshot shows the 'Vital Signs' and 'Problem List' interface. The 'Problem List' table has columns for 'Priority', 'Problem Name', and 'Onset'. It lists 'Acute chest pain' (Priority 1) and 'CHF exacerbation' (Priority --). The 'CHF exacerbation' row is highlighted. To the right, the 'Problem Detail' for 'CHF exacerbation' is shown, including a 'Problem Summary' (Acute exacerbation of chronic congestive heart failure likely due to fluid overload and medication noncompliance. Symptoms consistent with NYHA Class III-IV CHF.), 'Problem Information' (Confidential, Classification Medical, Confirmation Confirmed, Status Active, Responsible Provider Richard, Paul CLWX, Reviewed Date/Time Aug 18, 2025 13:09), and 'Actions' (This Visit, Ongoing, Modify).

Ongoing Resolved					
Classification Filter: Medical X Nursing X					
Problem Name	Onset	Code	Flags	Actions	
CHF exacerbation	--	2973838013	HCC - Due	☐ This Visit	☒ Ongoing
Tobacco user	--	175325014	--	☐ This Visit	☒ Ongoing

For questions regarding process and/or policies, please contact your unit’s Clinical Educator. For questions regarding workflow, please [place a ticket](#) to Health Informatics. For any other questions please contact the Customer Support Center at: 207-973-7728 or 1-888-827-7728.