



Northern Light Health Oracle Health (Cerner) Millennium EHR Updates

April 17 – April 23, 2025

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Behavioral Health Staff

Ambulatory Only

New Behind-The-Glass Substance Use Location

WHAT: NL Acadia Opioid Health Home patients who receive Care Coordination from NL Acadia Behavioral Health Home staff will be registered to a new location in Oracle called NL Case MGMT Opioid Health Home BGR (ACHH_AHC).

WHY: NL Acadia's Opioid Health Home patient records must be kept **confidential**, or behind-the-glass, **per federal regulations (42 CFR, Part 2)**. While keeping revenue streams intact, the new location will allow MHRT documentation to remain segregated when caring for a patient in a substance use program.

Reminder for MHRT Care Coordinator

- How to create a registration-based Patient List for the new location:
 - [Creating a Patient List](#)

NOTE: For Clinical Staff outside of NL Acadia Hospital, the guidelines for use of [Break-The-Glass](#) (BTG) for Substance Use remain unchanged

WHEN: Monday, April 21, 2025

WHERE: The change will affect the following venue(s):

- Ambulatory

At the following NLH Member Organization(s):

- NL Acadia Hospital

WHO: The change will affect the following staff at the above noted locations:

- MHRTs
-

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Clinical Decision Support Updates

Weekly Newsletter

- Please reference our [CDS Portal](#) for additional information and previous newsletters.
- Any questions should be directed to our [CDS Team](#) for review.

To open the links in the table, right-click and select "Open link in new tab."

Release Date	Venues Affected	CDS Tool	Summary
4/28/2025	Ambulatory	Incorrect Immunization Funding Source	New alert. This alert will fire if an incorrect funding source is chosen for immunization orders. This will help to ensure that the correct order is being captured to mitigate inaccurate ImmPACT reporting.
4/30/2025	Inpatient	OP CARD Cath	NPO Communication order updated
4/30/2025	All	Vasopressors epinephrine vasopressin norepinephrine	CDS Review. Updates to include Vasopressin rate change and clarifying titration instructions.
4/30/2025	All	NEDS Management of the Patient Declared Dead by Neurologic Criteria	Vasopressin rate change. EMMC, Mercy only

Imaging Staff & Radiologists

Ultrasound Order Modification Update

WHAT: Ultrasound Orders will have a new option available, **May Change Order**. When selecting **Yes**, this will allow the Radiologist to change the order based on the **Protocol for Ultrasound Order Modification Policy**.

Click [here](#) to view Protocol for Ultrasound Order Modification Policy.

The screenshot shows a medical order form titled "Details for US Abdomen Complete 76700". The form has several tabs: "Details", "Order Comments", and "Diagnoses". The "Details" tab is active. The form contains various fields for order information. A dropdown menu for "May Change Order Per Policy #43-105" is highlighted with an orange box and is set to "Yes". Other fields include "Transport Mode", "Start Date/Time" (04/04/2025 1044 EDT), "Signs/Symptoms/Duration/Location", "Priority" (Routine), "EMLA? (Outpatient)", "Special Instructions", "MaineCare Managed Care? Y/N", "AUC Order Adherence Modifier", "AUC Score", "AUC Acknowledgement Reason", "Anesthesia/Sedation (Outpatient)", "Consulting Physician", "Packet Routing (Dept Use Only)", "MaineCare Managed Care Auth #", "Qualified CDSM Utilized", "AUC DSN", and "C Acknowledgement Reason Comment".

NOTE: Only the Ultrasound Orders with this field marked **Yes**, may be changed without consulting the Ordering Provider.

WHY: The update will reduce the ordering provider’s documentation burden, save valuable time for the patients, and enhance overall patient care.

WHEN: Tuesday, April 22, 2025

WHERE: The change will affect the following venue(s):

- Acute/Inpatient (to include ED & Peri-Op)
- Ambulatory

At the following NLH Member Organization(s):

- All Member Organizations (Excluding NL Acadia and NL Mayo)

WHO: The change will affect the following staff at the above noted locations:

- Providers
- Radiologists

Leadership

Inpatient/Emergency/Peri-Op

Clairvia Schedule Coverage Report Issue

WHAT: The **Clairvia Schedule Coverage Report** does not function appropriately if the start and end dates overlap more than one schedule block. The solution is to only select dates within one schedule time period.

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Schedule Dates	
4/13/2025	- 5/24/2025
5/25/2025	- 7/5/2025
7/6/2025	- 8/16/2025
8/17/2025	- 9/27/2025
9/28/2025	- 11/8/2025
11/9/2025	- 12/20/2025
12/21/2025	- 1/31/2026
2/1/2026	- 3/14/2026
3/15/2026	- 4/25/2026

WHY: The issue was discovered when running a report for more than one schedule period. Oracle is aware of the issue and has suggested to only run the report for one schedule period.

WHEN: Effective Immediately

WHERE: The change will affect the following venue(s):

- Acute/Inpatient (to include ED & Peri-Op)

At the following NLH Member Organization(s):

- All NLH Hospitals (Including Mayo and/or Acadia)

WHO: The change will affect the following staff at the above noted locations:

- Hospital and Nursing Leadership

Nursing, CNA, Medical Assistants

Ambulatory/WIC

Laboratory Order Update – *Mercy Only*

WHAT: The **Respiratory Virus Panel PCR** single-line order will be available to order in place of using the existing SARS-CoV-2, Influenza and RSV RNA order.

NOTE: Updating Order Favorites will help prevent any delays, as ordering an outdated lab from Order Favorites may result in an error.

WHY: The update is recommended as part of the change with Yarmouth Quest PSC location.

WHEN: Thursday, April 17, 2025

WHERE: The change will affect the following venue(s):

- Ambulatory

At the following NLH Member Organization(s):

- NL Mercy

WHO: The change will affect the following staff at the above noted locations:

- Clinical Staff
- Providers

Pharmacists & Pharmacy Technicians

Inpatient/ED/Peri-Op

Pharmacist Only Restricted PowerPlan Implementation

WHAT: A new PowerPlan type will be created that will allow **only Inpatient Pharmacists** to find and perform order-entry for certain, NLH-approved medications.

Orders Removed from Global Ordering

- The following medication orders will be **removed** from provider ability to search for and order at time of new plan type implementation.
 - Multivitamin Infusions
 - Morphine Patient-Controlled Analgesia (PCA)
 - According to data, Fentanyl and Hydromorphone PCAs are used far more frequently than Morphine.
 - New PCA Pumps implemented on April 22, 2025, are not compatible with current drug manufacturer produced Morphine PCAs.
-

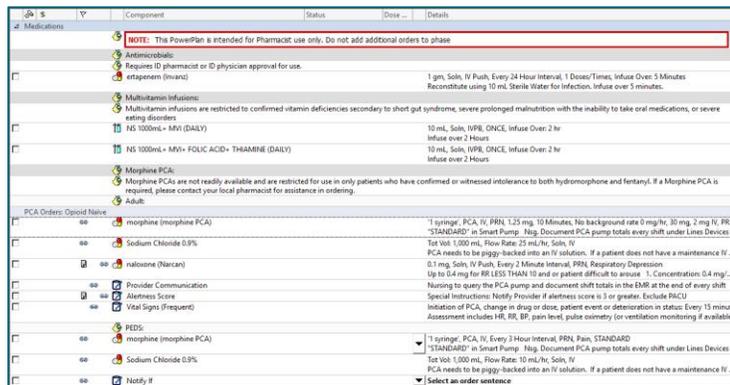
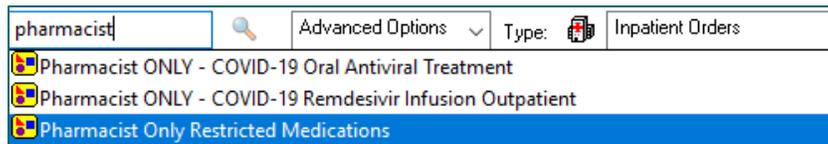
EHR Updates

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NOTE: Order comments will be added to existing PowerPlans noting that removal has occurred and that a call to Pharmacy will be needed for Pharmacist order entry. Providers should not add additional orders to any phase of this plan.

Pharmacist Order Entry

- Pharmacists, upon request or prompt to do so, will need to search for **Pharmacist Only Restricted Medications PowerPlan** from PowerChart to enter orders from this plan.



Component	Status	Dose	Details
NOTE: The PowerPlan is intended for Pharmacist use only. Do not add additional orders to phase			
Antimicrobials			Requires ID pharmacist on ID physician approval for use.
Entaprenem (Inzanc)		1 gm, Soln, IV Push, Every 24 Hour Interval, 1 Doses/Times, Infuse Over: 5 Minutes	Reconstitute using 10 mL Sterile Water for Injection. Infuse over 5 minutes.
Multivitamin Infusions			Multivitamin infusions are restricted to confirmed vitamin deficiencies secondary to short gut syndrome, severe prolonged malnutrition with the inability to take oral medications, or severe eating disorders
NS 1000ml - MVI (D4EY)		10 mL, Soln, IVPR, ONCE, Infuse Over: 2 hr	Infuse over 2 Hours
NS 1000ml - MVI+ FOLIC ACID+ THIAMINE (DAILY)		10 mL, Soln, IVPR, ONCE, Infuse Over: 2 hr	Infuse over 2 Hours
Morphine PCA:			Morphine PCAs are not readily available and are restricted for use in only patients who have confirmed or witnessed intolerance to both hydromorphone and fentanyl. If a Morphine PCA is required, please contact your local pharmacist for assistance in ordering.
PCA Orders: Opioid Narcotics			
morphine (morphine PCA)		1 syringe, PCA, IV, PRN, 1.25 mg, 10 Minutes, No background rate 0 mg/hr, 30 mg, 2 mg IV, PRN, STANDARD in Smart Pump	Neg. Document PCA pump totals every shift under Lines Devices ...
Sodium Chloride 0.9%		Tot Vol: 1,000 mL, Flow Rate: 25 mL/hr, Soln, IV	PCA needs to be piggy backed into an IV solution. If a patient does not have a maintenance IV ...
naloxone (Narcan)		0.1 mg, Soln, IV Push, Every 2 Minute Interval, PRN, Respiratory Depression	Up to 0.4 mg for MR LESS THAN 10 and/or patient difficult to arouse 1. Concentration: 0.4 mg/...
Provider Communication			Nursing to query the PCA pump and document shift totals in the EMR at the end of every shift.
Alertness Score			Special Instructions: Notify Provider if alertness score is 3 or greater. Exclude PACU
Vital Signs (Frequent)			Initiation of PCA, change in drug or dose, patient event or deterioration in status: Every 15 min... Assessment includes HR, RR, BP, pain level, pupil reactivity (or ventilation monitoring if available...
PEDS			
morphine (morphine PCA)		1 syringe, PCA, IV, Every 3 Hour Interval, PRN, Pain, STANDARD	STANDARD in Smart Pump Neg. Document PCA pump totals every shift under Lines Devices ...
Sodium Chloride 0.9%		Tot Vol: 1,000 mL, Flow Rate: 10 mL/hr, Soln, IV	PCA needs to be piggy backed into an IV solution. If a patient does not have a maintenance IV ...
Notify If			Select an order instance

WHY: The new PowerPlan type will allow inpatient Pharmacy staff to better manage medication orders for products that have specific reasons to be restricted and controlled by Pharmacy.

NOTE: An SBAR will be distributed by Pharmacy leaders to Chiefs of Service and Senior Physician Executives related to the removal of Morphine PCAs from general ordering.

WHEN: Monday, April 21, 2025

WHERE: The change will affect the following venue(s):

- Acute/Inpatient (to include ED & Peri-Op)

At the following NLH Member Organization(s):

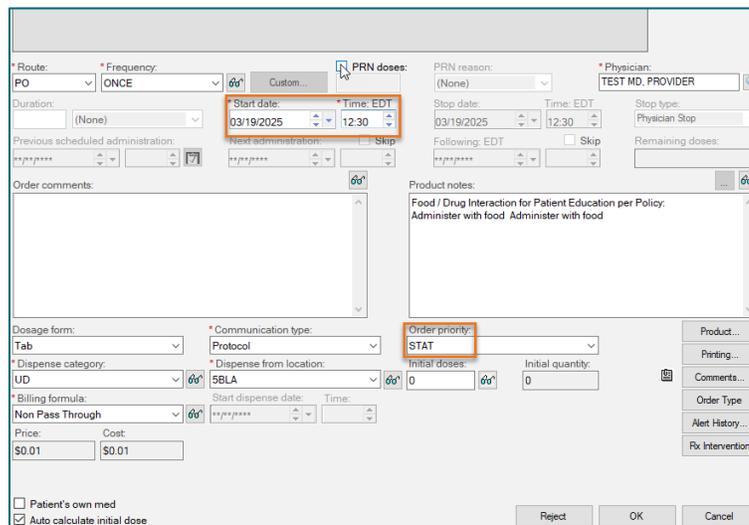
- All NLH Hospitals (excluding Acadia and Mayo)

WHO: The change will affect the following staff at the above noted locations:

- Inpatient Pharmacists
- Inpatient Providers

Medication Manager Enhancement: Ability to Modify Start Date/Time

WHAT: The **Start Date/Time** field on new orders will **no longer be dithered** when an order is being **verified AFTER the Start Date/Time**. When clinically appropriate, pharmacists may manually adjust the Start Date/Time in Medication Manager



NOTE: This action will re-fire MAR tasks after it is manually updated. If it is not, the MAR tasks in the past will not update and fail barcode scanning.

WHY: To allow inpatient pharmacists to better manage medication orders and the related MAR tasks.

NOTE: Pharmacists may change a dose upon initial order review. The update allows pharmacists to modify the order start time so that the MAR first task aligns with the clinical change.

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WHEN: Wednesday, April 23, 2025

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At the following NLH Member Organization(s):

- All NLH Hospitals (excluding Mayo)

WHO: The change will affect the following staff at the above noted locations:

- Inpatient Pharmacists

Physicians, Physician Assistants, Nurse Practitioners

Ambulatory/WIC

Laboratory Order Update – *Mercy Only*

WHAT: The **Respiratory Virus Panel PCR** single-line order will be available to order in place of using the existing SARS-CoV-2, Influenza and RSV RNA order.

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WHO: The change will affect the following staff at the above noted locations:

- Clinical Staff
 - Providers
-

Ultrasound Order Modification Update

WHAT: Ultrasound Orders will have a new option available, **May Change Order**. When selecting **Yes**, this will allow the Radiologist to change the order based on the **Protocol for Ultrasound Order Modification Policy**.

Click [here](#) to view Protocol for Ultrasound Order Modification Policy.

The screenshot shows a web-based form titled "Details for US Abdomen Complete 76700". The form has several tabs: "Details", "Order Comments", and "Diagnoses". The "Details" tab is active. The form contains various fields for patient information and order details. A red box highlights the field "May Change Order Per Policy #43-105", which is currently set to "Yes". Other fields include "Transport Mode", "Start Date/Time" (04/04/2025), "Priority" (Routine), "EMLA? (Outpatient)", "Special Instructions", "MaineCare Managed Care? Y/N", "AUC Order Adherence Modifier", "AUC Score", "AUC Acknowledgement Reason", "Signs/Symptoms/Duration/Location", "Latex Allergy? Y/N", "Anesthesia/Sedation (Outpatient)", "Consulting Physician", "Packet Routing (Dept Use Only)", "MaineCare Managed Care Auth #", "Qualified CDSM Utilized", "AUC DSN", and "C Acknowledgement Reason Comment".

NOTE: Only the Ultrasound Orders with this field marked **Yes**, may be changed without consulting the Ordering Provider.

WHY: The update will reduce the ordering provider’s documentation burden, save valuable time for the patients, and enhance overall patient care.

WHEN: Tuesday, April 22, 2025

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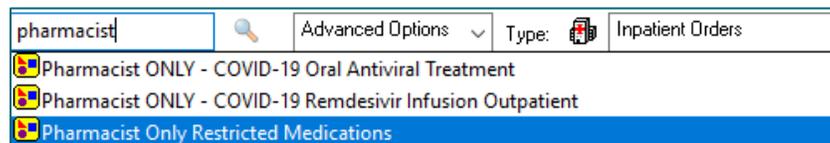
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NOTE: Order comments will be added to existing PowerPlans noting that removal has occurred and that a call to Pharmacy will be needed for Pharmacist order entry. Providers should not add additional orders to any phase of this plan.

Pharmacist Order Entry

- Pharmacists, upon request or prompt to do so, will need to search for **Pharmacist Only Restricted Medications** PowerPlan from PowerChart to enter orders from this plan.



The screenshot displays a software interface for managing medication orders. At the top, there are tabs for 'Component', 'Status', 'Dose', and 'Details'. A prominent red-bordered note states: 'NOTE: The PowerPlan is intended for Pharmacist use only. Do not add additional orders to phase'. Below this, several medication orders are listed with checkboxes for selection. The orders include:

- Antiemetics:** Requires ID pharmacist or ID physician approval for use. Order: 1 gm, Soln, IV Push, Every 24 Hour Interval, 1 Dose/Time, Infuse Over: 5 Minutes. Reconstitute using 10 mL Sterile Water for Injection. Infuse over 5 minutes.
- Multivitamin Infusions:** Multivitamin infusions are restricted to confirmed vitamin deficiencies secondary to short gut syndrome, severe prolonged malnutrition with the inability to take oral medications, or severe eating disorders. Order: NS 1000ml - MVI (DAILY), 10 mL, Soln, IVPR, ONCE, Infuse Over: 2 hr, Infuse over 2 Hours.
- Morphine PCA:** Morphine PCAs are not readily available and are restricted for use in only patients who have confirmed or witnessed intolerance to both hydromorphone and fentanyl. If a Morphine PCA is required, please contact your local pharmacist for assistance in ordering. Order: NS 1000ml - MVI+ FOLIC ACID+ THIAMINE (DAILY), 10 mL, Soln, IVPR, ONCE, Infuse Over: 2 hr, Infuse over 2 Hours.
- PCA Orders: Opioid Narc:**
 - morphine (morphine PCA): 1 syringe, PCA, IV, PRN, 1.25 mg, 10 Minutes, No background rate 0 mg/hr, 30 mg, 2 mg IV, PR...
 - Sodium Chloride 0.9%: Tot Vol: 1,000 mL, Flow Rate: 23 mL/hr, Soln, IV
 - naloxone (Narcan): 0.1 mg, Soln, IV Push, Every 2 Minute Interval, PRN, Respiratory Depression
 - Provider Communication: Nursing to query the PCA pump and document shift totals in the EMR at the end of every shift.
 - Alertness Score: Special Instructions: Notify Provider if alertness score is 3 or greater. Exclude PACU
 - Vital Signs (Frequent): Initiation of PCA: Change in drug or dose, patient event or deterioration in status: Every 15 min...
 - PEDS: Assessment includes HR, RR, SpO2, pain level, pupil reactivity (or ventilation monitoring if available).
 - morphine (morphine PCA): 1 syringe, PCA, IV, Every 3 Hour Interval, PRN, Pain, STANDARD
 - Sodium Chloride 0.9%: Tot Vol: 1,000 mL, Flow Rate: 10 mL/hr, Soln, IV
 - Notify if: PCA needs to be piggy-backed into an IV solution. If a patient does not have a maintenance IV...

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EHR Updates

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The screenshot shows a web-based form for an ultrasound order. The title is 'Details for US Abdomen Complete 76700'. There are tabs for 'Details', 'Order Comments', and 'Diagnoses'. The 'Details' tab is active. The form contains several fields: 'Transport Mode' (dropdown), '*Start Date/Time' (04/04/2025, 1044 EDT), '*Signs/Symptoms/Duration/Location' (highlighted in yellow), '*Priority' (Routine), 'May Change Order Per Policy #43-105' (Yes, highlighted with an orange box), 'EMLA? (Outpatient)', 'Special Instructions', 'MaineCare Managed Care? Y/N', 'AUC Order Adherence Modifier', 'AUC Score', 'AUC Acknowledgement Reason', 'Anesthesia/Sedation (Outpatient)', 'Consulting Physician', 'Packet Routing (Dept Use Only)', 'MaineCare Managed Care Auth #', 'Qualified CDSM Utilized', 'AUC DSN', and 'C.Acknowledgement Reason Comment'.

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WHY: This update will reduce the ordering provider’s documentation burden, save valuable time for the patients, and enhance overall patient care.

WHEN: Tuesday, April 22, 2025

WHERE: The change will affect the following venue(s):

- Acute/Inpatient (to include ED & Peri-Op)
- Ambulatory

At the following NLH Member Organization(s):

- All Member Organizations (Excluding NL Acadia and NL Mayo)

WHO: The change will affect the following staff at the above noted locations:

- Providers
- Radiologists