



# Northern Light Health Oracle Health (Cerner) Millennium EHR Updates

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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	<a href="#">Incorrect Immunization Funding Source</a>	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	<a href="#">OP CARD Cath</a>	NPO Communication order updated
4/30/2025	All	<a href="#">Vasopressors epinephrine vasopressin norepinephrine</a>	CDS Review. Updates to include Vasopressin rate change and clarifying titration instructions.
4/30/2025	All	<a href="#">NEDS Management of the Patient Declared Dead by Neurologic Criteria</a>	Vasopressin rate change. EMMC, Mercy only

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### 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**.

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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 tabs for "Details", "Order Comments", and "Diagnoses". The "Details" tab is active. The form contains various fields for patient information, order details, and provider information. The field "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", "Signs/Symptoms/Duration/Location", "Priority", "EMLA? (Outpatient)", "Anesthesia/Sedation (Outpatient)", "Consulting Physician", "Packet Routing (Dept Use Only)", "MaineCare Managed Care? Y/N", "AUC Order Adherence Modifier", "AUC Score", "AUC Acknowledgement Reason", "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

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## 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

**Schedule Coverage**

Selection Criteria: Report Out

Service Line	Profile	Shift Categories
Acute Rehab	Ar_Acute Rehab - 2263	(Ar_Acute Rehab - 2263) 12-12
Behavioral	Ar_ARG OR - 5611	(Ar_Acute Rehab - 2263) zz24
Cardiology	Ar_Cath Lab - 5140	(Ar_ARG OR - 5611) 8-4-4-8
Case Mgmt	Ar_Day Surg - 5616	(Ar_Cath Lab - 5140) zz24
Critical Care	Ar_Emergency - 5701	(Ar_LDRP - 2201) 12-12
Emergency	Ar_LDRP - 2201	(Ar_Med Surg Telemetry - 2076) 4-4-4-8
Float Pool	Ar_Med Surg Telemetry - 2076	(Ar_Med Surg Telemetry - 2076) zz12-12
Inactive	Ar_Nursing Admin - 1096	(Ar_PACU - 5606) 8-4-4-8

Shift Category Partition: 0645 1845 (Spill: Front 30)  
1845 0645 (Spill: Front 30)

Start Date (mm/dd/yyyy): 04 / 13 / 2025

End Date (mm/dd/yyyy): 05 / 24 / 2025  
End Date can be no more than 42 days past the Start Date.

Coverage Option: Report on Over Coverage

Compare Staff Count to: Core Coverage

Report if variance is greater than: 0

Export Type: CSV

**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

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## 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.
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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 shows a search bar with the text 'pharmacist' and a magnifying glass icon. To the right of the search bar are buttons for 'Advanced Options' and 'Type: Inpatient Orders'. Below the search bar, three search results are listed:

- Pharmacist ONLY - COVID-19 Oral Antiviral Treatment
- Pharmacist ONLY - COVID-19 Remdesivir Infusion Outpatient
- Pharmacist Only Restricted Medications (highlighted in blue)

The screenshot shows the details of the 'Pharmacist Only Restricted Medications' PowerPlan. It includes a table of medications and their dosages, along with a section for PCA Orders.

Component	Status	Dose	Details
<b>NOTE:</b> The PowerPlan is intended for Pharmacist use only. Do not add additional orders to phase			
Antimicrobials			Requires ID pharmacist or ID physician approval for use.
etapenem (Inivance)		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 + MVN (DAILY)		10 mL, Soln, IVPR, ONCE, Infuse Over 2 hr	Infuse over 2 Hours
NS 1000mL + MVN + 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
Infliximab (Nucala)			PCA needs to be piggy backed into an IV solution. If a patient does not have a maintenance IV ...
Provider Communication			0.1 mg, Soln, IV Push, Every 2 Minute Interval, PRN, Respiratory Depression
Alertness Score			Up to 0.4 mg for PRN LESS THAN 10 and or patient difficult to arouse. 1. Concentration: 0.4 mg/...
Vital Signs (Frequent)			Nursing to query the PCA pump and document shift totals in the EMR at the end of every shift.
PEDS			Special Instructions: Notify Provider if alertness score is 3 or greater. Exclude PACU
Morphine (morphine PCA)			Initiation of PCA, change in drug or dose, patient event or deterioration in status: Every 15 min...
Sodium Chloride 0.9%			Assessment includes HR, RR, BP, pain level, pulse oximetry (or ventilation monitoring if available).
Notify If			1 syringe, PCA, IV, Every 3 Hour Interval, 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 ...

**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

The screenshot displays the Medication Manager interface. The 'Start date' field is set to 03/19/2025 and the 'Time' field is set to 12:30. These fields are highlighted with a red box. The 'Order priority' field is also highlighted with a red box and set to 'STAT'. Other fields include 'Route' (PO), 'Frequency' (ONCE), 'PRN doses' (Custom...), 'PRN reason' (None), 'Physician' (TEST MD, PROVIDER), 'Stop date' (03/19/2025), 'Time' (12:30), 'Stop type' (Physician Stop), 'Previous scheduled administration' (None), 'Next administration' (None), 'Following: EDT' (None), 'Skip' (None), 'Remaining doses' (None), 'Order comments' (None), 'Product notes' (Food / Drug Interaction for Patient Education per Policy: Administer with food Administer with food), 'Dosage form' (Tab), 'Communication type' (Protocol), 'Dispense category' (UD), 'Dispense from location' (SBLA), 'Initial doses' (0), 'Initial quantity' (0), 'Billing formula' (Non Pass Through), 'Price' (\$0.01), 'Cost' (\$0.01), 'Patient's own med' (unchecked), 'Auto calculate initial dose' (checked), 'Reject', 'OK', and 'Cancel' buttons.

**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

**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 Mayo)

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

- Inpatient Pharmacists

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## 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.

**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
-

## 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 for 'Details for US Abdomen Complete 76700'. The form includes tabs for 'Details', 'Order Comments', and 'Diagnoses'. The 'Details' tab is active. The form contains various fields for patient information, order details, and clinical notes. The field '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', 'Priority', 'Latex Allergy?', 'Anesthesia/Sedation (Outpatient)', 'Consulting Physician', 'Packet Routing (Dept Use Only)', 'MaineCare Managed Care Auth #', 'AUC Order Adherence Modifier', 'AUC Score', 'AUC Acknowledgement Reason', 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

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### Inpatient/Emergency/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.

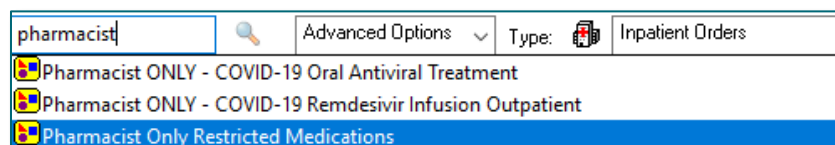
#### Orders Removed from Global Ordering

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    - 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.

**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 shows a search interface with a search bar containing the text 'pharmacist'. To the right of the search bar is a magnifying glass icon and a dropdown menu labeled 'Advanced Options'. Further right is a 'Type:' label followed by a red cross icon and the text 'Inpatient Orders'. Below the search bar is a list of three results, each preceded by a small yellow icon with a red cross. The first two results are 'Pharmacist ONLY - COVID-19 Oral Antiviral Treatment' and 'Pharmacist ONLY - COVID-19 Remdesivir Infusion Outpatient'. The third result, 'Pharmacist Only Restricted Medications', is highlighted with a blue background.

The screenshot displays a software interface for entering medication orders. It includes a list of medications with checkboxes for selection and a detailed description of each order. A red box highlights a note at the top: "NOTE: The PowerPlan is intended for Pharmacist use only. Do not add additional orders to phase".

Component	Status	Dose	Details
<b>NOTE: The PowerPlan is intended for Pharmacist use only. Do not add additional orders to phase</b>			
Antiemetics:			
Requires ID pharmacist or ID physician approval for use.			
ertapenem (Invega)		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.			
NS 1000mL + MVI (DAILY)		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.			
Adult:			
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...	"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 ...
Midazolam (Narcan)		0.1 mg, Soln, IV Push, Every 2 Minute Interval, PRN, Respiratory Depression	Up to 0.4 mg for RR 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...
PEDS:			Assessment includes HR, RR, BP, pain level, pulse oximetry (or ventilation monitoring if available).
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 sentence

**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

## 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**.

## EHR Updates

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

The screenshot displays the 'Details for US Abdomen Complete 76700' form. The 'May Change Order Per Policy #43-105' field is highlighted with an orange box and set to 'Yes'. Other fields include 'Transport Mode', '\*Start Date/Time' (04/04/2025, 1044 EDT), '\*Signs/Symptoms/Duration/Location', '\*Priority' (Routine), 'Latex Allergy? Y/N', 'Anesthesia/Sedation (Outpatient)', 'Consulting Physicians', 'Packet Routing (Dept Use Only)', 'MaineCare Managed Care Auth #', 'Qualified CDSM Utilized', 'AUC DSN', 'AUC Score', 'AUC Acknowledgement Reason', and 'C Acknowledgement Reason Comment'.

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

**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