

Northern Light Health. Optum

From the Office of Health Informatics

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

# April 3 – April 9, 2025

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# **Behavioral Health Staff**

# **All Ambulatory & Inpatient Care Areas**

# Nursing Note PowerForm to Replace Annotations – POSTPONED

NOTE: This go-live has been postponed.

- > Original go-live date: April 7, 2025
- New go-live date: TBD

# WHAT: Nursing Note PowerForm

- The **Nursing Note** PowerForm will replace Annotations as the method for documenting a shift summary and/or any patient information that does not have a discreet location for documentation.
  - Nursing and clinical staff will open a new Nursing Note from the Adhoc folder structure for every nursing note entry.
  - The note will be written in reverse chronological order, thus displaying the most recent note at the top. (See example below)
  - Each entry will be dated and timed at the beginning of the note and end with the nurse's full signature (first initial, last name) and credentials. (See example below)
  - The Nursing Note will be **Last Charted Value** meaning it will retain the previous documentation when a new note is opened from the Adhoc folder.
  - **DO NOT clear the information from the form** when opening a new document. The intent of workflow is to have all nursing notes available in one document for the entire length of the patient's stay.
  - **Each** signed Nursing Note creates a new Text Rendition (TR) version of the note making it easy to look back for a specific date/time.
- **NOTE**: **DO NOT modify the nursing note from Form Browser**. This is important because this workflow causes a strikethrough to appear on all previous documentation on the TR version. The TR version is what HIM provides as the legal document to anyone requesting a copy. The strikethroughs give the appearance that all previous documentation is marked in error.

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Nursing Note - TESTING, JKRULES				×
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B/20/25 1005 Third nursing note. Nurse Name RN 3/20/25 0600 Second nurisng note. Nurse Name RN 3/19/25 1800 Initial nursing note. Nurse Name RN				~
<				>
		In F	Progress	

# Accessing the Nursing Note PowerForm

• The Nursing Note will be available in the following **Adhoc** folders:

Nursing Assessments	Critical Care
Surgery/Procedure	ED Forms
<b>OB/GYN</b> Inpatient Documentation	NICU
Behavioral Health	Ambulatory
Physician Practices	Child/Adolescent Assessment
Surgical Navigation	Anemia Management
Dialysis	

The Nursing Note will also be accessible from the Admission
 Documentation component on the Admission Tab (MPage) and Discharge
 Documentation dropdown on the Discharge tab (MPage).

## **Annotations and Patient Info & Story MPage**

- The ability to document an annotation in iView will be removed.
- The **Patient Info & Story MPage** will be removed.
- Annotations previously viewed on the Patient Info and Story MPage can still be found on the flowsheet in Results Review

**NOTE**: Clinical staff will still be able to right click in an iView documentation cell and add a Comment or a Flagged Comment.

# Locating a Completed Nursing Note (Provider View)

• The Nursing note will be available for Providers to view in the **Documentation** component in **Provider View**.

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 To ensure easy access to view the Nursing Note, use the Change Filter button to add Nursing/Care Management Documentation in the Documentation component.

Documents (2)		+ All Visits	Last 7 days La	ast 24 hours	Last 3 mont	ths Last	1 years		.]
	Disp	olay: Multiple note types Ch	hange Filter	Last 50 Note	s My Note	es Only 0	Group by E	Encounter	]
Time of Service 🗸 Subject	Note Type				X	Updated By		View	
▼ In Progress (0)					<u> </u>				
Completed (2)		Provider Documentation	on						
MAR 24, 2025 08:38 Nursing Note	TR_Nursing Note	Admission and Consult	lt Notes		D	TT , ROWEN	IA E	>	
		Clinic Notes					No Outsi	ide Records	5 5
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		<ul> <li>Emergency Document</li> </ul>	tation						
		Nursing/Care Manager	ment Documentat	tion					
		<ul> <li>Cardiology/Neuro Test</li> </ul>	ting						
		Procedure and Operation	tive Notes						
		<ul> <li>Rehabilitation and The</li> </ul>	erapy Documentat	tion					
		All Documents							
		Reset to default		Apply	Cancel				

- The Nursing Note can also be found in:
  - Clinical Notes component in Nurse View Handoff tab
  - Documentation in Menu/Table of Contents
  - **O** Results Review

## **WHY: Nursing Note replaces Annotations**

- Communication breakdowns are the most common cause of medical errors. NLH recognized that Annotations contributed to communication barriers and difficulty seeing the patient story within the EHR.
- A review of current state workflows identified that accessing the Patient Info & Story MPage did not fall within the Providers workflow.
- Nurses needed to remember to select Flagged Annotations for the information to flow to the Patient Infor & Story MPage. If Flagged Annotation was not selected, the information did not flow to the MPage and was only available in Results Review.
- Transitioning from Annotations to the Nursing Note PowerForm makes the note easily viewable in the Documentation and Clinical Notes MPage Components and allows providers to refer to these notes within their workflow in Provider View.

## Patient Info & Story MPage

• With the removal of Annotations from Interactive View and I&O (iView), this MPage is no longer needed to display Annotations.

#### WHEN: TBD

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

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

#### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

- Clinical staff using Annotations
- Nursing staff
- Providers

## **SmartZone Display Update**

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

## **SmartZone Display Panel Closed**

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.

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	TESTING, BBCOC Allergies: No Know Code:	DL n Allergies eLos:	PCP: Primary C Record Ex	ontact: View xchange: Las	Details t sync 12	Notifications
Me	< 🖂 👻 🔒 Amb	ulatory View	💱 Ful	II screen	Print 🥠	2 minutes ago

# Manually Open SmartZone

**NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).

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• Only if a SmartZone alert is triggered while in the patient chart, a pop-up displays in lower, right corner for 20 seconds; as this is an infrequent scenario, click Banner Bar Notifications to display Smart Zone alerts.



- **WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.
- WHEN: Thursday, April 3, 2025

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

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

## 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:

• All Clinical Staff

# **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

Room			Patient Information	Clin	Nurse	Patient	t Details	X		۰.	BP	HR	TEMP	RR	O2 SAT
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♦ SpC	)2 Mo	nit	toring Frequency				Continuo	♦ SpO2	Monit	oring	Freque	ncy			
♦ SpC	2 Loc	ati	ion				<b>Right hand</b>	♦ SpO2	ocati	on					

WHY: The change will **enhance the visibility and communication** of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.

#### WHEN: Monday, April 7, 2025

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

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

#### 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:

All Clinicians

# **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.
- WHEN: Tuesday, April 8, 2025

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

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

#### At the following NLH Member Organization(s):

- All NLH Member Organizations (excluding Mayo)
- **WHO:** The change will affect the following staff at the above noted locations:
  - All Staff

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# Inpatient Only

# Patch Medication Ordering and MAR Task Updates – effective 04/15/25

WHAT: Patch Medications have a MAR task to remove the patch. A MAR task for **Patch-Off ONCE** will now correspond to the last administration, based on the timing of the medication.

Patch Medication	ONCE Patch-Off Timing
Buprenorphine	7 day offset from admin
Fentanyl	Either <b>48 hour</b> <u>or</u> <b>72 hour</b> offset based on Frequency on order
Lidocaine	12 hour offset from admin
Nicotine	Either <b>24 hour</b> offset <u>or</u> "Bedtime" task based on Provider-Entered Removal Details
Nitroglycerin	12 hour offset from admin
Scopolamine	Either <b>12 hours, 24 hour</b> , or <b>72</b> <b>hour</b> offset based on Provider- Entered Removal Details

## **Background-Nursing**

- Currently, MAR tasks can be scheduled tasks for a particular time of day, while others are visible in the PRN section of MAR.
- The MAR task for Patch-off will correspond to the time in which the patch medication was charted and applied.

# **NOTE**: Nurses may have to look slightly ahead or behind current time on the MAR to locate the applicable Patch off task.

## Pharmacist

- The update will allow the ONCE Patch-off order to auto-verify.
- Please be aware, with the update, you will no longer see the previous scheduled or PRN orders in verification queue when verifying medication order for a patch.

## **Provider**

• Nicotine and Scopolamine Patches: a new required field will determine how long after patch application, it should be removed.

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Details for scopolamir	ne (scopolamine 1 mg	/72 hr transdermal film, extended release)		
🔀 Details 🔢 Order Comm	ents 🗋 Diagnoses			
🕂 🔓 lh. 🛛 💐 💈			Remaining Admini	strations: 1
*Remove scopolamine patch:	<b>۱</b>	*Dose:	1	
*Dose Unit:	12 hours post placement 24 hours post placement	• Freetext Dose:		
Drug Form:	72 hours post placement	*Route of Administration:	TRANSDERMAL +	
*Frequency:	Every 72 Hour Interval 🗸	Frequency Instruction:	~	
PRN:	🔿 Yes 🔘 No	PRN Reason:	·	
Indication:	×	Priority:	~	
Patient's Own Meds:	C Yes C No	*Requested Start Date/Time:	03/27/2025 9:00 EDT 🗸	
Duration:	365	Duration Unit:	Days 🗸	
Stop Type:	Hard Stop 🗸	Stop Date/Time:	03/25/2026 🔹 💌 0900	× EC
Rate:		Rate Unit:	~	
Infuse Over:		Infuse Over Unit:	· ·	
Order Comments:		Special Instructions:		1

• Fentanyl patches: the Frequency field will determine offset.

- WHY: To further refine nursing MAR tasking for medication patches, provide a **scheduled** Patch-off task, and increase precise Patch-off tasking and removal.
- WHEN: Tuesday, April 15, 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:
  - Nursing
  - Pharmacists
  - Providers

# **Care Managers**

## **Ambulatory**

## FindHelp Update – Removed, Effective Immediately

# WHAT: This Update has been removed due to extremely slow load times and decreased functionality.

FindHelp will be added to the following workflow MPages:

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- AMB Care Management: Active Case MPage
- Ambulatory Nursing Workflow
- ED Nursing Workflow
- Nurse Discharge Workflow
- WIC Nurse MPage



**WHY:** The addition is to gain more exposure to the FindHelp platform by placing it within the staff workflows to assist patients with barriers they may have.

#### WHEN: Removed – Effective Immediately

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

- Acute/Inpatient (to include ED)
- Ambulatory/WIC

#### At the following NLH Member Organization(s):

• All NLH Hospitals (excluding Mayo and Acadia)

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

- AMB Care Manager
- LPN
- MA
- RN

# SmartZone Display Update

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

## SmartZone Display Panel Closed

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.

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TESTING, BBCOC Allergies: No Known Code:	DL n Allergies eLos:	PCP: Primary Record I	Contact: View Detail Exchange: Last sync	s 12
s < 🖂 🔹 🛉 Ambi	ulatory View	20 F	ull screen 🛛 🖶 Print	2 minutes ago

# Manually Open SmartZone

- **NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).
  - Only if a SmartZone alert is triggered while in the patient chart, a **pop-up** displays in **lower, right corner** for 20 seconds; as this is an infrequent scenario, **click** Banner Bar Notifications to display Smart Zone alerts.



**WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.

#### WHEN: Thursday, April 3, 2025

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

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

#### At the following NLH Member Organization(s):

• All NLH Hospitals (excluding Mayo)

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

# **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

Room	÷		Patient Information	Clin	Nurse	Patient Details	X	₩ 4	BP	HR	TEMP	RR	O2 SAT
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🔷 SpO	2 M	oni	toring Frequency			Continuo	🔷 SpO2 Mo	onitoring	Freque	ncy			
♦ SpO	2 Lo	cat	ion			Right hand	♦ SpO2 Lo	cation					

- WHY: The change will enhance the visibility and communication of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.
- WHEN: Monday, April 7, 2025
- WHERE: The change will affect the following venue(s):
  - Acute/Inpatient (to include ED & Peri-Op)
  - Ambulatory/WIC

#### 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:
  - All Clinicians

# **Patient Demographics Update**

WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.

WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.

#### WHEN: Tuesday, April 8, 2025

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

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

#### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

• All Staff

# **Inpatient**

# SmartZone Display Update

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

## SmartZone Display Panel Closed

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.



# Manually Open SmartZone

**NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).

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• Only if a SmartZone alert is triggered while in the patient chart, a pop-up displays in lower, right corner for 20 seconds; as this is an infrequent scenario, click Banner Bar Notifications to display Smart Zone alerts.



- WHY: The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.
- WHEN: Thursday, April 3, 2025

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

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

## 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:

• Clinical Staff

# **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.



- WHY: The change will **enhance the visibility and communication** of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.
- WHEN: Monday, April 7, 2025

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

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

#### 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:
  - All Clinicians

# Implementation of Multi-Disciplinary Rounds Tool: Task Updates – EMMC CCU P5, ICU & KPO3

WHAT: Clinical staff will start seeing additional tasks within their task lists. Each discipline may receive a task determined by multidisciplinary rounds as identified barriers to patient discharge.

These tasks will now be coming to the tasks list due to a change in the Multidisciplinary rounds process. The manual process is being replaced with a new electronic MDR tool that communicates bidirectionally with Cerner to assist in a more appropriate patient discharge with all needed requirements.

- **WHY:** The implementation will aid in managing patient flow and ensure orders are complete for safe and timely patient discharge.
- WHEN: Tuesday, April 8, 2025
- WHERE: The change will affect the following venue(s):
  - Acute/Inpatient

#### At the following NLH Member Organization(s):

- NL EMMC
- **WHO:** The change will affect the following staff at the above noted locations:
  - <u>Nursing</u>
  - <u>Dietitians</u>
  - <u>Respiratory Therapy</u>

- <u>Rehab Therapy</u>
- <u>Pharmacy</u>
- <u>Care Management/Social</u> Worker

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# **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.
- WHEN: Tuesday, April 8, 2025

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

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

#### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

• All Staff

# **Clinical Decision Support Updates**

## **Weekly Newsletter**

- > Please reference our <u>CDS Portal</u> for additional information and previous newsletters.
- > Any questions should be directed to our <u>CDS Team</u> 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
4/3/2025	Inpatient	Euglycemic DKA Adult	Previously viewed to EMMC only, updated to all sites
4/15/2025	Inpatient	Transfuse Adult Cryoprecipitate	CDS Review. Addition of indications to cryoprecipitate order
4/16/2025	Inpatient	NICU Rapid Sequence Intubation (RSI)	CDS Review. PMA and weight filtering added. EMMC only

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# **Imaging Staff & Radiologists**

# SmartZone Display Update

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

## SmartZone Display Panel Closed

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.



# Manually Open SmartZone

# **NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).

• Only if a SmartZone alert is triggered while in the patient chart, a **pop-up** displays in **lower, right corner** for 20 seconds; as this is an infrequent scenario, **click** Banner Bar Notifications to display Smart Zone alerts.



**WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.

## WHEN: Thursday, April 3, 2025

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

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

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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:

• Clinical Staff

# **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

	Room	Ţ		Patient Information	-	Clin	Nurse	Patient	t Details	X		V	4	BP	HR	TEMP	RR	O2 SAT
	ER,06 NPO		3	*TESTING, PENELO 35y F <b>1</b>	ОРЕ 📿 🍾	М	М	Dx: Al	bdominal pain			/	After				- 20 -	• ! 93
	ER,07			*TESTING, ANDRE	EW (	MC		Dx: No	ontraffic MVA i	njuri		В	efor	e	- 130-	39.3	722	▶ 93
_											_							
	🕹 Оху	gen	Sat	turation				%SA1	93	🚯 Oxy	gen S	Satu	ratior	n			%SAT	93
	♦ SpO	02 M	loni	itoring Frequency	У				Continuo	🔷 SpC	2 Mo	nito	oring	Freque	ency			
	♦ SpC	)2 Lo	ocat	tion					Right hand	♦ SpC	)2 Lo	catio	n					

- WHY: The change will **enhance the visibility and communication** of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.
- WHEN: Monday, April 7, 2025

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

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

#### 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:
  - All Clinicians

# **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.
- WHEN: Tuesday, April 8, 2025

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

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

#### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

All Staff

# Lab

# SmartZone Display Update

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

## SmartZone Display Panel Closed

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.



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## Manually Open SmartZone

**NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).

• Only if a SmartZone alert is triggered while in the patient chart, a **pop-up** displays in **lower, right corner** for 20 seconds; as this is an infrequent scenario, **click** Banner Bar Notifications to display Smart Zone alerts.



- **WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.
- WHEN: Thursday, April 3, 2025

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

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

#### 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:
  - Clinical Staff

## **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

Ro	om	-	1	Patient Information	Clin	Nurse	Patien	t Details	X		₩ 4	BP	HR	TEMP	RR	O2 SAT
	2 <b>,06</b>	3		* <b>TESTING, PENELOPE</b> 35y F 🕄 📿 🏹	Л	М	Dx: A	bdominal pain			After				- 20 -	93 ا 🔶
ER	2 <b>,07</b>			* <b>TESTING, ANDREW (</b> 61y F 👔 👔 👰	л		Dx: N	Iontraffic MVA	injuri		Befor	9	- <b>7130</b> -	39.3	122	▶ 93
_																
4	Oxyge	n Sa	tu	iration			%SA1	93	🐼 Oxyg	en Sati	uration				%SAT	93
<	> SpO2	Mon	it	oring Frequency				Continuo	♦ SpO2	Monit	oring F	requen	cy			
<	> SpO2	Loca	tio	on				<b>Right hand</b>	♦ SpO2	Locati	on					

- WHY: The change will enhance the visibility and communication of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.
- WHEN: Monday, April 7, 2025

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

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

#### 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:

• All Clinicians

# **All F BILI with Calculation Updates**

- WHAT: Laboratory locations will align and use F BILI (with indirect calculation) order, allowing for a standardized reporting for this result across Laboratories performed within the system.
  - WHY: This update will standardize the reporting for Total Bilirubin, Direct Bilirubin, and Indirect sites.
- WHEN: Wednesday, April 9, 2025

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

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

## At the following NLH Member Organization(s):

- NL AR Gould
- NL CA Dean
- NL Maine Coast

Page 26 of 124

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

- Lab Staff
- Providers

# Leadership

# **Ambulatory/WIC**

# Nursing Note PowerForm to Replace Annotations – **POSTPONED**

NOTE: This go-live has been postponed.

- > Original go-live date: April 7, 2025
- New go-live date: TBD

## WHAT: Nursing Note PowerForm

- The **Nursing Note** PowerForm will replace Annotations as the method for documenting a shift summary and/or any patient information that does not have a discreet location for documentation.
  - Nursing and clinical staff will **open a new Nursing Note** from the **Adhoc** folder structure **for every nursing note entry**.
  - The note will be written in reverse chronological order, thus displaying the most recent note at the top. (See example below)
  - Each entry will be dated and timed at the beginning of the note and end with the nurse's full signature (first initial, last name) and credentials. (See example below)
  - The Nursing Note will be Last Charted Value meaning it will retain the previous documentation when a new note is opened from the Adhoc folder.
  - **DO NOT clear the information from the form** when opening a new document. The intent of workflow is to have all nursing notes available in one document for the entire length of the patient's stay.
  - **Each** signed Nursing Note creates a new Text Rendition (TR) version of the note making it easy to look back for a specific date/time.

**NOTE**: **DO NOT modify the nursing note from Form Browser**. This is important because this workflow causes a strikethrough to appear on all previous documentation on the TR version. The TR version is what HIM provides as the legal document to anyone requesting a copy. The strikethroughs give the appearance that all previous documentation is marked in error.

P Nursing Note - TESTING, JKRULES		—		×
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Nsg Note Nursing Note				^
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β/20/25 1005 Third nursing note. Nurse Name RN 3/20/25 0600 Second nurisng note. Nurse Name RN 3/19/25 1800 Initial nursing note. Nurse Name RN				~
<				>
		In F	Progress	

# **Accessing the Nursing Note PowerForm**

• The Nursing Note will be available in the following **Adhoc** folders:

Nursing Assessments	Critical Care
Surgery/Procedure	ED Forms
OB/GYN Inpatient Documentation	NICU
Behavioral Health	Ambulatory
Physician Practices	Child/Adolescent Assessment
Surgical Navigation	Anemia Management
Dialysis	

The Nursing Note will also be accessible from the Admission
 Documentation component on the Admission Tab (MPage) and Discharge
 Documentation dropdown on the Discharge tab (MPage).

## **Annotations and Patient Info & Story MPage**

- The ability to document an annotation in iView will be removed.
- The Patient Info & Story MPage will be removed.
- Annotations previously viewed on the Patient Info and Story MPage can still be found on the flowsheet in Results Review

**NOTE**: Clinical staff will still be able to right click in an iView documentation cell and add a Comment or a Flagged Comment.

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## Locating a Completed Nursing Note (Provider View)

- The Nursing note will be available for Providers to view in the **Documentation** component in **Provider View**.
  - To ensure easy access to view the Nursing Note, use the Change Filter button to add Nursing/Care Management Documentation in the Documentation component.

Documents (2)					+ All Visits	Last 7 days	Last 24 hours	Last 3 m	onths	Last 1 years	4)
				Display: Multi	ple note types	Change Filter	Last 50 Note	s My N	otes Onl	y Group b	y Encounter
Time of Service	$\downarrow$	Subject	Note Type					X	Update	ed By	View
									-		
✓ Completed (2)				🗹 Pr	ovider Documer	itation					
MAR 24, 2025 08:38		Nursing Note	TR_Nursing Note	🗆 Ac	mission and Co	nsult Notes			DTT, R	OWENA E	>
				🗆 Cli	inic Notes					Νο Οι	utside Records
	_			🗆 Di	scharge Docum	entation			_		
				🗌 Er	nergency Docun	nentation					
				🗹 Nu	ursing/Care Man	agement Documer	ntation				
				🗆 Ca	ardiology/Neuro	Testing					
				🗌 Pr	ocedure and Op	erative Notes					
				🗌 Re	habilitation and	Therapy Documer	ntation				
					Documents						
				Reset to	o default		Apply	Cancel			

- The Nursing Note can also be found in:
  - Clinical Notes component in Nurse View Handoff tab
  - **Documentation** in **Menu/Table of Contents**
  - Results Review

## WHY: Nursing Note replaces Annotations

- Communication breakdowns are the most common cause of medical errors. NLH recognized that Annotations contributed to communication barriers and difficulty seeing the patient story within the EHR.
- A review of current state workflows identified that accessing the Patient Info & Story MPage did not fall within the Providers workflow.
- Nurses needed to remember to select Flagged Annotations for the information to flow to the Patient Infor & Story MPage. If Flagged Annotation was not selected, the information did not flow to the MPage and was only available in Results Review.

 Transitioning from Annotations to the Nursing Note PowerForm makes the note easily viewable in the Documentation and Clinical Notes MPage Components and allows providers to refer to these notes within their workflow in Provider View.

## Patient Info & Story MPage

• With the removal of Annotations from Interactive View and I&O (iView), this MPage is no longer needed to display Annotations.

#### WHEN: TBD

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

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

#### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

- Clinical staff using Annotations
- Nursing staff
- Providers

# SmartZone Display Update

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

# SmartZone Display Panel Closed

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.



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## Manually Open SmartZone

**NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).

• Only if a SmartZone alert is triggered while in the patient chart, a **pop-up** displays in **lower, right corner** for 20 seconds; as this is an infrequent scenario, **click** Banner Bar Notifications to display Smart Zone alerts.



- **WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.
- WHEN: Thursday, April 3, 2025

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

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

#### 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:
  - Clinical Staff

## **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

Ro	om	] v		Patient Information	Clin	Nurse	Patient	Details	X	9	₹ 4	BP	HR	TEMP	RR	O2 SAT
ER NP	0		3	*TESTING, PENELOPE 35y F 🕄 📿 🌾	ЭМ	М	Dx: Al	bdominal pain			After				- 20 -	93 ا 🔶
ER	R,07			*TESTING, ANDREW ( 61y F 👔 👔 👰	ЭМ		Dx: No	ontraffic MVA i	njum.	E	Before	8	- <del>- 130</del> -	39.3	722	▶ 93
_																
4	\lambda Oxyg	en S	Sat	uration			%SA1	93	🐼 Oxygen	Satu	iration	n			%SAT	93
<	> SpO2	2 M 0	oni	toring Frequency				Continuo	♦ SpO2 M	onit	oring	Freque	ncy			
<	> SpO2	2 Lo	cat	ion				Right hand	♦ SpO2 Lo	cati	on					
_																

- WHY: The change will enhance the visibility and communication of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.
- WHEN: Monday, April 7, 2025

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

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

#### 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:

• All Clinicians

# **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.
- WHEN: Tuesday, April 8, 2025

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

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

## At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

• All Staff

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# **Emergency**

# Nursing Note PowerForm to Replace Annotations – **POSTPONED**

NOTE: This go-live has been postponed.

- > Original go-live date: April 7, 2025
- New go-live date: TBD

## WHAT: Nursing Note PowerForm

- The **Nursing Note** PowerForm will replace Annotations as the method for documenting a shift summary and/or any patient information that does not have a discreet location for documentation.
  - Nursing and clinical staff will open a new Nursing Note from the Adhoc folder structure for every nursing note entry.
  - The note will be written in **reverse chronological** order, thus displaying the most recent note at the top. (See example below)
  - Each entry will be dated and timed at the beginning of the note and end with the nurse's full signature (first initial, last name) and credentials. (See example below)
  - The Nursing Note will be Last Charted Value meaning it will retain the previous documentation when a new note is opened from the Adhoc folder.
  - DO NOT clear the information from the form when opening a new document. The intent of workflow is to have all nursing notes available in one document for the entire length of the patient's stay.
  - **Each** signed Nursing Note creates a new Text Rendition (TR) version of the note making it easy to look back for a specific date/time.

**NOTE**: **DO NOT modify the nursing note from Form Browser**. This is important because this workflow causes a strikethrough to appear on all previous documentation on the TR version. The TR version is what HIM provides as the legal document to anyone requesting a copy. The strikethroughs give the appearance that all previous documentation is marked in error.

P Nursing Note - TESTING, JKRULES		—		×
🗸 🖬 🛇   🕱 🗖 🛧 🔸   📾 🖾 🔛	Sł	now Sign	Confirm	nation
*Performed on: 03/24/2025	By:	ELLIOTT	r , Rowe	NA E
Nsg Note Nursing Note				^
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β/20/25 1005 Third nursing note. Nurse Name RN 3/20/25 0600 Second nurisng note. Nurse Name RN 3/19/25 1800 Initial nursing note. Nurse Name RN				~
<				>
		In F	Progress	

# **Accessing the Nursing Note PowerForm**

• The Nursing Note will be available in the following **Adhoc** folders:

Nursing Assessments	Critical Care
Surgery/Procedure	ED Forms
<b>OB/GYN</b> Inpatient Documentation	NICU
Behavioral Health	Ambulatory
Physician Practices	Child/Adolescent Assessment
Surgical Navigation	Anemia Management
Dialysis	

The Nursing Note will also be accessible from the Admission
 Documentation component on the Admission Tab (MPage) and Discharge
 Documentation dropdown on the Discharge tab (MPage).

## **Annotations and Patient Info & Story MPage**

- The ability to document an annotation in iView will be removed.
- The Patient Info & Story MPage will be removed.
- Annotations previously viewed on the Patient Info and Story MPage can still be found on the flowsheet in Results Review

**NOTE**: Clinical staff will still be able to right click in an iView documentation cell and add a Comment or a Flagged Comment.

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## Locating a Completed Nursing Note (Provider View)

- The Nursing note will be available for Providers to view in the **Documentation** component in **Provider View**.
  - To ensure easy access to view the Nursing Note, use the Change Filter button to add Nursing/Care Management Documentation in the Documentation component.

Documents (2)					+ All Visits Last 7 days Last 24 hours Last 3 months Last 1 years V
				C	Display: Multiple note types Change Filter Last 50 Notes My Notes Only Group by Encounter
Time of Service	$\downarrow$	Subject	N	ote Type	Updated By View
▼ In Progress (0)					
✓ Completed (2)					Provider Documentation
MAR 24, 2025 08:38		Nursing Note	TF	_Nursing Note	Admission and Consult Notes     DTT , ROWENA E
					Clinic Notes No Outside Record
	-				Discharge Documentation
					Emergency Documentation
					Nursing/Care Management Documentation
					Cardiology/Neuro Testing
					Procedure and Operative Notes
					Rehabilitation and Therapy Documentation
					All Documents
					Reset to default Apply Cancel

- The Nursing Note can also be found in:
  - Clinical Notes component in Nurse View Handoff tab
  - **Documentation** in **Menu/Table of Contents**
  - Results Review

## WHY: Nursing Note replaces Annotations

- Communication breakdowns are the most common cause of medical errors. NLH recognized that Annotations contributed to communication barriers and difficulty seeing the patient story within the EHR.
- A review of current state workflows identified that accessing the Patient Info & Story MPage did not fall within the Providers workflow.
- Nurses needed to remember to select Flagged Annotations for the information to flow to the Patient Infor & Story MPage. If Flagged Annotation was not selected, the information did not flow to the MPage and was only available in Results Review.

 Transitioning from Annotations to the Nursing Note PowerForm makes the note easily viewable in the Documentation and Clinical Notes MPage Components and allows providers to refer to these notes within their workflow in Provider View.

## Patient Info & Story MPage

• With the removal of Annotations from Interactive View and I&O (iView), this MPage is no longer needed to display Annotations.

#### WHEN: TBD

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

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

#### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

- Clinical staff using Annotations
- Nursing staff
- Providers

# SmartZone Display Update

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

# SmartZone Display Panel Closed

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.



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## Manually Open SmartZone

**NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).

• Only if a SmartZone alert is triggered while in the patient chart, a **pop-up** displays in **lower, right corner** for 20 seconds; as this is an infrequent scenario, **click** Banner Bar Notifications to display Smart Zone alerts.



- **WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.
- WHEN: Thursday, April 3, 2025

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

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

#### 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:
  - Clinical Staff

## **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

Room	-		Patient Information	Clin	Nurse	Patient	Details	X	۷	4	BP	HR	TEMP	RR	O2 SAT
ER,06 NPO	3 * <i>TESTING, PENELOPE</i> JM JM		Dx: Al	c: Abdominal pain		After				- 20 -	93 ا 🔶				
ER,07	2,07 *TESTING, ANDREW ( 61y F € Ø Ø Ø				Dx: Nontraffic MVA injuri			Before			- 00-	<b>150 - 39.3 - 722 &gt;</b> 93			
Oxygen Saturation %SA							93	Oxygen Saturation						%SAT	93
🔷 SpO	02 M	oni	toring Frequency	Continuo	SpO2 Monitoring Frequency										
🔷 SpC	)2 Lo	cat	ion				Right hand	♦ SpO2 Location							
- WHY: The change will enhance the visibility and communication of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.
- WHEN: Monday, April 7, 2025

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

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

## 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:

• All Clinicians

## **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.
- WHEN: Tuesday, April 8, 2025

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

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

## At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

• All Staff

# From the Office of Health Informatics EHR Updates April 3 – April 9, 2025

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## Inpatient

## Nursing Note PowerForm to Replace Annotations – **POSTPONED**

NOTE: This go-live has been postponed.

- > Original go-live date: April 7, 2025
- New go-live date: TBD

## WHAT: Nursing Note PowerForm

- The **Nursing Note** PowerForm will replace Annotations as the method for documenting a shift summary and/or any patient information that does not have a discreet location for documentation.
  - Nursing and clinical staff will open a new Nursing Note from the Adhoc folder structure for every nursing note entry.
  - The note will be written in **reverse chronological** order, thus displaying the most recent note at the top. (See example below)
  - Each entry will be dated and timed at the beginning of the note and end with the nurse's full signature (first initial, last name) and credentials. (See example below)
  - The Nursing Note will be Last Charted Value meaning it will retain the previous documentation when a new note is opened from the Adhoc folder.
  - DO NOT clear the information from the form when opening a new document. The intent of workflow is to have all nursing notes available in one document for the entire length of the patient's stay.
  - **Each** signed Nursing Note creates a new Text Rendition (TR) version of the note making it easy to look back for a specific date/time.

**NOTE**: **DO NOT modify the nursing note from Form Browser**. This is important because this workflow causes a strikethrough to appear on all previous documentation on the TR version. The TR version is what HIM provides as the legal document to anyone requesting a copy. The strikethroughs give the appearance that all previous documentation is marked in error.

P Nursing Note - TESTING, JKRULES		—		×
🗸 🖬 🛇   🕱 🗖 🛧 🔸   📾 🖾 🔛	Sł	now Sign	Confirm	nation
*Performed on: 03/24/2025	By:	ELLIOTT	r , Rowe	NA E
Nsg Note Nursing Note				^
Segoe UI 🗸 9 🗸 🕲 🛍 🛱 💆 🖊 등 🗐 🗐				
β/20/25 1005 Third nursing note. Nurse Name RN 3/20/25 0600 Second nurisng note. Nurse Name RN 3/19/25 1800 Initial nursing note. Nurse Name RN				~
<				>
		In F	Progress	

## **Accessing the Nursing Note PowerForm**

• The Nursing Note will be available in the following **Adhoc** folders:

Nursing Assessments	Critical Care
Surgery/Procedure	ED Forms
<b>OB/GYN Inpatient Documentation</b>	NICU
Behavioral Health	Ambulatory
Physician Practices	Child/Adolescent Assessment
Surgical Navigation	Anemia Management
Dialysis	

The Nursing Note will also be accessible from the Admission
 Documentation component on the Admission Tab (MPage) and Discharge
 Documentation dropdown on the Discharge tab (MPage).

## **Annotations and Patient Info & Story MPage**

- The ability to document an annotation in iView will be removed.
- The Patient Info & Story MPage will be removed.
- Annotations previously viewed on the Patient Info and Story MPage can still be found on the flowsheet in Results Review

**NOTE**: Clinical staff will still be able to right click in an iView documentation cell and add a Comment or a Flagged Comment.

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## Locating a Completed Nursing Note (Provider View)

- The Nursing note will be available for Providers to view in the **Documentation** component in **Provider View**.
  - To ensure easy access to view the Nursing Note, use the Change Filter button to add Nursing/Care Management Documentation in the Documentation component.

Documents (2)					+ All Visits	Last 7 days	Last 24 hours	Last 3 m	onths	Last 1 years	4)
				Display: Multi	ple note types	Change Filter	Last 50 Note	s My N	otes Onl	y Group b	y Encounter
Time of Service	$\downarrow$	Subject	Note Type					X	Update	ed By	View
									-		
✓ Completed (2)				🗹 Pr	ovider Documer	itation					
MAR 24, 2025 08:38		Nursing Note	TR_Nursing Note	🗆 Ac	mission and Co	nsult Notes			DTT, R	OWENA E	>
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				🗌 Er	nergency Docun	nentation					
				🗹 Nu	ursing/Care Man	agement Documer	ntation				
				🗆 Ca	ardiology/Neuro	Testing					
				🗌 Pr	ocedure and Op	erative Notes					
				🗌 Re	habilitation and	Therapy Documer	ntation				
					Documents						
				Reset to	o default		Apply	Cancel			

- The Nursing Note can also be found in:
  - Clinical Notes component in Nurse View Handoff tab
  - **Documentation** in **Menu/Table of Contents**
  - Results Review

## WHY: Nursing Note replaces Annotations

- Communication breakdowns are the most common cause of medical errors. NLH recognized that Annotations contributed to communication barriers and difficulty seeing the patient story within the EHR.
- A review of current state workflows identified that accessing the Patient Info & Story MPage did not fall within the Providers workflow.
- Nurses needed to remember to select Flagged Annotations for the information to flow to the Patient Infor & Story MPage. If Flagged Annotation was not selected, the information did not flow to the MPage and was only available in Results Review.

 Transitioning from Annotations to the Nursing Note PowerForm makes the note easily viewable in the Documentation and Clinical Notes MPage Components and allows providers to refer to these notes within their workflow in Provider View.

## Patient Info & Story MPage

• With the removal of Annotations from Interactive View and I&O (iView), this MPage is no longer needed to display Annotations.

## WHEN: TBD

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

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

## At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

- Clinical staff using Annotations
- Nursing staff
- Providers

# SmartZone Display Update

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

## SmartZone Display Panel Closed

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.



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## Manually Open SmartZone

**NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).

• Only if a SmartZone alert is triggered while in the patient chart, a **pop-up** displays in **lower, right corner** for 20 seconds; as this is an infrequent scenario, **click** Banner Bar Notifications to display Smart Zone alerts.



- **WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.
- WHEN: Thursday, April 3, 2025

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

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

#### 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:
  - Clinical Staff

## **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

1	Room	-		Patient Information	Clin	Nurse	Patient	Details	X	¥	4	BP	HR	TEMP	RR	O2 SAT
E	<b>R,06</b>		3	* <b>TESTING, PENELOPE</b> 35y F 👔 📿 🏹	М	М	Dx: Al	bdominal pain		After					- 20 -	93 ا 🔶
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- WHY: The change will enhance the visibility and communication of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.
- WHEN: Monday, April 7, 2025

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

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

## 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:

• All Clinicians

## **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.
- WHEN: Tuesday, April 8, 2025

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

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

## At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

• All Staff

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## Implementation of Multi-Disciplinary Rounds Tool: Task Updates – EMMC **CCU P5, ICU & KPO3**

WHAT: Clinical staff will start seeing additional tasks within their task lists. Each discipline may receive a task determined by multidisciplinary rounds as identified barriers to patient discharge.

These tasks will now be coming to the tasks list due to a change in the Multidisciplinary rounds process. The manual process is being replaced with a new electronic MDR tool that communicates bidirectionally with Cerner to assist in a more appropriate patient discharge with all needed requirements.

- **WHY:** The implementation will aid in managing patient flow and ensure orders are complete for safe and timely patient discharge.
- WHEN: Tuesday, April 8, 2025
- WHERE: The change will affect the following venue(s):
  - Acute/Inpatient

At the following NLH Member Organization(s):

- NL EMMC
- WHO: This change will affect the following staff at the above noted locations:
  - Nursing
  - Dietitians

• Rehab Therapy

• Pharmacy

Respiratory Therapy

 Care Management/Social Worker

## Peri-Op

## Nursing Note PowerForm to Replace Annotations – **POSTPONED**

NOTE: This go-live has been postponed.

- Original go-live date: April 7, 2025
- New go-live date: TBD

## WHAT: Nursing Note PowerForm

- The **Nursing Note** PowerForm will replace Annotations as the method for documenting a shift summary and/or any patient information that does not have a discreet location for documentation.
  - Nursing and clinical staff will **open a new Nursing Note** from the **Adhoc** folder structure **for every nursing note entry**.
  - The note will be written in reverse chronological order, thus displaying the most recent note at the top. (See example below)
  - Each entry will be dated and timed at the beginning of the note and end with the nurse's full signature (first initial, last name) and credentials. (See example below)
  - The Nursing Note will be Last Charted Value meaning it will retain the previous documentation when a new note is opened from the Adhoc folder.
  - **DO NOT clear the information from the form** when opening a new document. The intent of workflow is to have all nursing notes available in one document for the entire length of the patient's stay.
  - **Each** signed Nursing Note creates a new Text Rendition (TR) version of the note making it easy to look back for a specific date/time.
- **NOTE**: **DO NOT modify the nursing note from Form Browser**. This is important because this workflow causes a strikethrough to appear on all previous documentation on the TR version. The TR version is what HIM provides as the legal document to anyone requesting a copy. The strikethroughs give the appearance that all previous documentation is marked in error.



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## Accessing the Nursing Note PowerForm

• The Nursing Note will be available in the following **Adhoc** folders:

Nursing Assessments	Critical Care
Surgery/Procedure	ED Forms
<b>OB/GYN</b> Inpatient Documentation	NICU
Behavioral Health	Ambulatory
Physician Practices	Child/Adolescent Assessment
Surgical Navigation	Anemia Management
Dialysis	

The Nursing Note will also be accessible from the Admission
 Documentation component on the Admission Tab (MPage) and Discharge
 Documentation dropdown on the Discharge tab (MPage).

## **Annotations and Patient Info & Story MPage**

- The ability to document an annotation in iView will be removed.
- The Patient Info & Story MPage will be removed.
- Annotations previously viewed on the Patient Info and Story MPage can still be found on the flowsheet in Results Review

**NOTE**: Clinical staff will still be able to right click in an iView documentation cell and add a Comment or a Flagged Comment.

## Locating a Completed Nursing Note (Provider View)

• The Nursing note will be available for Providers to view in the **Documentation** component in **Provider View**.

 To ensure easy access to view the Nursing Note, use the Change Filter button to add Nursing/Care Management Documentation in the Documentation component.

Documents (2)	+ All Visits	Last 7 days Last 24 hours	Last 3 month	hs Last 1 years	<b>v</b>
	Display: Multiple note types	Change Filter Last 50 Not	es My Notes	s Only Group by	/ Encounter
Time of Service $\psi$ Subject Note Type	e		X	Jpdated By	View
▼ In Progress (0)					
✓ Completed (2)	Provider Documenta	ation			
MAR 24, 2025 08:38 Nursing Note TR_Nursin	ng Note  Admission and Cons	sult Notes	т	TT , ROWENA E	>
	Clinic Notes			No Ou	tside Records
	<ul> <li>Discharge Document</li> </ul>	itation			
	Emergency Docume	entation			
	Nursing/Care Manag	gement Documentation			
	Cardiology/Neuro Te	esting			
	Procedure and Oper	rative Notes			
	<ul> <li>Rehabilitation and T</li> </ul>	herapy Documentation			
	All Documents				
	Reset to default	Apply	Cancel		

- The Nursing Note can also be found in:
  - Clinical Notes component in Nurse View Handoff tab
  - Documentation in Menu/Table of Contents
  - **O** Results Review

## **WHY: Nursing Note replaces Annotations**

- Communication breakdowns are the most common cause of medical errors. NLH recognized that Annotations contributed to communication barriers and difficulty seeing the patient story within the EHR.
- A review of current state workflows identified that accessing the Patient Info & Story MPage did not fall within the Providers workflow.
- Nurses needed to remember to select Flagged Annotations for the information to flow to the Patient Infor & Story MPage. If Flagged Annotation was not selected, the information did not flow to the MPage and was only available in Results Review.
- Transitioning from Annotations to the Nursing Note PowerForm makes the note easily viewable in the Documentation and Clinical Notes MPage Components and allows providers to refer to these notes within their workflow in Provider View.

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## **Patient Info & Story MPage**

• With the removal of Annotations from Interactive View and I&O (iView), this MPage is no longer needed to display Annotations.

#### WHEN: TBD

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

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

#### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

- Clinical staff using Annotations
- Nursing staff
- Providers

## **SmartZone Display Update**

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

## **SmartZone Display Panel Closed**

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.

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## Manually Open SmartZone

**NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).

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- **WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.
- WHEN: Thursday, April 3, 2025

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

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

## 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:

• Clinical Staff

## **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

Room			Patient Information	Clin	Nurse	Patien	t Details	X	¥	4	BP	HR	TEMP	RR	O2 SAT	
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🛛 🕹 Oxy	gen	Sat	uration			%SA1	93	🐼 Oxygen	Satu	ratio	n			%SAT	93	
♦ SpC	SpO2 Monitoring Frequency						Continuo	🛇 SpO2 Monitoring Frequency								
♦ SpC	)2 Lo	cat	ion				Right hand	🔷 SpO2 Lo	catio	n						

WHY: The change will **enhance the visibility and communication** of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.

# From the Office of Health Informatics EHR Updates April 3 – April 9, 2025

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#### WHEN: Monday, April 7, 2025

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

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

#### 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:
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## **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.
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#### At the following NLH Member Organization(s):

- All NLH Member Organizations (excluding Mayo)
- WHO: The change will affect the following staff at the above noted locations:
  - All Staff

# Nursing, CNA, Medical Assistants

## **Ambulatory/WIC**

# Nursing Note PowerForm to Replace Annotations – **POSTPONED**

NOTE: This go-live has been postponed.

- > Original go-live date: April 7, 2025
- New go-live date: TBD

## WHAT: Nursing Note PowerForm

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  - DO NOT clear the information from the form when opening a new document. The intent of workflow is to have all nursing notes available in one document for the entire length of the patient's stay.
  - **Each** signed Nursing Note creates a new Text Rendition (TR) version of the note making it easy to look back for a specific date/time.

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**NOTE**: **DO NOT modify the nursing note from Form Browser**. This is important because this workflow causes a strikethrough to appear on all previous documentation on the TR version. The TR version is what HIM provides as the legal document to anyone requesting a copy. The strikethroughs give the appearance that all previous documentation is marked in error.

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B/20/25 1005 Third nursing note. Nurse Name RN 3/20/25 0600 Second nurisng note. Nurse Name RN 3/19/25 1800 Initial nursing note. Nurse Name RN	v
<	>
	In Progress

## **Accessing the Nursing Note PowerForm**

• The Nursing Note will be available in the following **Adhoc** folders:

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Surgical Navigation	Anemia Management
Dialysis	

• The Nursing Note will also be accessible from the Admission Documentation component on the Admission Tab (MPage) and Discharge Documentation dropdown on the Discharge tab (MPage).

## **Annotations and Patient Info & Story MPage**

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Documents (2)				+ All Visits Last 7 days Last 24 hours Last 3 months Last 1 years v
			Disp	lay: Multiple note types Change Filter Last 50 Notes My Notes Only Group by Encounter
Time of Service	$\downarrow$	Subject	Note Type	View View
✓ In Progress (0)				
- Completed (2)				Provider Documentation
MAR 24, 2025 08:38		Nursing Note	TR_Nursing Note	Admission and Consult Notes     DTT , ROWENA E
				Clinic Notes No Outside Records
				Discharge Documentation
				Emergency Documentation
				Nursing/Care Management Documentation     Gardialegy/Nurse Testing
				Cardiology/Neuro Tesung     Presedure and Operative Netes
				Reset to default Apply Cancel

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Page 54 of 124

 Transitioning from Annotations to the Nursing Note PowerForm makes the note easily viewable in the Documentation and Clinical Notes MPage Components and allows providers to refer to these notes within their workflow in Provider View.

## Patient Info & Story MPage

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#### WHEN: TBD

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

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

#### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

- Clinical staff using Annotations
- Nursing staff
- Providers

## FindHelp Update – Removed, Effective Immediately

# **WHAT:** This Update has been removed due to extremely slow load times and decreased functionality.

FindHelp will be added to the following workflow MPages:

- AMB Care Management: Active Case MPage
- Ambulatory Nursing Workflow
- ED Nursing Workflow
- Nurse Discharge Workflow
- WIC Nurse MPage

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**WHY:** This addition is to gain more exposure to the FindHelp platform by placing it within the staff workflows to assist patients with barriers they may have.

#### WHEN: Removed – Effective Immediately

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

- Acute/Inpatient (to include ED)
- Ambulatory/WIC

#### At the following NLH Member Organization(s):

• All NLH Hospitals (excluding Mayo and Acadia)

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

- AMB Care Manager
- LPN
- MA
- RN

## SmartZone Display Update

WHAT: SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

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## **SmartZone Display Panel Closed**

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.



## Manually Open SmartZone

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  - Ambulatory/WIC

#### 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:

• Clinical Staff

## **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

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	ER,06 NPO		3	* <b>TESTING, PENELOPE</b> 35y F 🕄 📿 🏹	ЭМ	м	Dx: Abd	ominal pain		After			• ! 93		
	ER,07			* <b>TESTING, ANDREW (</b> 61y F 🕄 👔 🧔	ЭМ		Dx: Non	itraffic MVA in	juri.	Before					
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- WHY: The change will **enhance the visibility and communication** of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.
- WHEN: Monday, April 7, 2025

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

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

## **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.

#### WHEN: Tuesday, April 8, 2025

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

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

#### At the following NLH Member Organization(s):

- All NLH Member Organizations (excluding Mayo)
- WHO: The change will affect the following staff at the above noted locations:
  - All Staff

## Spirometry Recommendation Update: Asthma Action Plan Documentation

WHAT: Asthma Management-Written Action Plan: New Action Items have been added to the dropdown action's menu. When Asthma Assessment-Asthma History is selected, the associated form will open, and user is able to document.

## Please follow the steps outlined:

- Within the **Recommendations** component in the Workflow MPage select the **Asthma Management Written Action Plan**.
  - Within the Asthma Management Written Action Plan that opens there is a reference text link to the NLH Digital Took Kit for Asthma Management Guidelines.
- Click the Actions dropdown (expand) and select Asthma Assessment-Asthma History.



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- WHY: The Asthma Management Written Action Plan guides healthcare providers in managing asthma effectively. The update will enable clinicians to streamline their workflow.
- WHEN: Tuesday, April 8, 2025

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

• Ambulatory

## At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding NL Acadia and Mayo)

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

- Clinical Staff
- Providers

## **Emergency**

## Nursing Note PowerForm to Replace Annotations – **POSTPONED**

NOTE: This go-live has been postponed.

- > Original go-live date: April 7, 2025
- > New go-live date: TBD

## WHAT: Nursing Note PowerForm

- The **Nursing Note** PowerForm will replace Annotations as the method for documenting a shift summary and/or any patient information that does not have a discreet location for documentation.
  - Nursing and clinical staff will **open a new Nursing Note** from the **Adhoc** folder structure **for every nursing note entry**.
  - The note will be written in reverse chronological order, thus displaying the most recent note at the top. (See example below)
  - Each entry will be dated and timed at the beginning of the note and end with the nurse's full signature (first initial, last name) and credentials. (See example below)
  - The Nursing Note will be **Last Charted Value** meaning it will retain the previous documentation when a new note is opened from the Adhoc folder.
  - **DO NOT clear the information from the form** when opening a new document. The intent of workflow is to have all nursing notes available in one document for the entire length of the patient's stay.
  - **Each** signed Nursing Note creates a new Text Rendition (TR) version of the note making it easy to look back for a specific date/time.

**NOTE**: **DO NOT modify the nursing note from Form Browser**. This is important because this workflow causes a strikethrough to appear on all previous documentation on the TR version. The TR version is what HIM provides as the legal document to anyone requesting a copy. The strikethroughs give the appearance that all previous documentation is marked in error.

Nursing Note - TESTING, JKRULES				×
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## **Accessing the Nursing Note PowerForm**

• The Nursing Note will be available in the following **Adhoc** folders:

Nursing Assessments	Critical Care
Surgery/Procedure	ED Forms
<b>OB/GYN</b> Inpatient Documentation	NICU
Behavioral Health	Ambulatory
Physician Practices	Child/Adolescent Assessment
Surgical Navigation	Anemia Management
Dialysis	

The Nursing Note will also be accessible from the Admission
 Documentation component on the Admission Tab (MPage) and Discharge
 Documentation dropdown on the Discharge tab (MPage).

## **Annotations and Patient Info & Story MPage**

- The ability to document an annotation in iView will be removed.
- The **Patient Info & Story MPage** will be removed.
- Annotations previously viewed on the Patient Info and Story MPage can still be found on the flowsheet in Results Review

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**NOTE**: Clinical staff will still be able to right click in an iView documentation cell and add a Comment or a Flagged Comment.

## Locating a Completed Nursing Note (Provider View)

- The Nursing note will be available for Providers to view in the **Documentation** component in **Provider View**.
  - To ensure easy access to view the Nursing Note, use the Change Filter button to add Nursing/Care Management Documentation in the Documentation component.

Documents (2)				+ All Visits Last 7 days Last 24 hours Last 3 months Last 1 years V
			Dis	play: Multiple note types Change Filter Last 50 Notes My Notes Only Group by Encounter
Time of Service	$\downarrow$	Subject	Note Type	View View
- Completed (2)				Provider Documentation
MAR 24, 2025 08:38		Nursing Note	TR_Nursing Note	Admission and Consult Notes     DTT , ROWENA E     No Outside Records
				Discharge Documentation     Emergency Documentation     Cardiology/Neuro Testing     Procedure and Operative Notes     Rehabilitation and Therapy Documentation     All Documents
				Reset to default Apply Cancel

- The Nursing Note can also be found in:
  - o Clinical Notes component in Nurse View Handoff tab
  - Documentation in Menu/Table of Contents
  - Results Review

## **WHY: Nursing Note replaces Annotations**

- Communication breakdowns are the most common cause of medical errors. NLH recognized that Annotations contributed to communication barriers and difficulty seeing the patient story within the EHR.
- A review of current state workflows identified that accessing the Patient Info & Story MPage did not fall within the Providers workflow.
- Nurses needed to remember to select Flagged Annotations for the information to flow to the Patient Infor & Story MPage. If Flagged Annotation was not selected, the information did not flow to the MPage and was only available in Results Review.

 Transitioning from Annotations to the Nursing Note PowerForm makes the note easily viewable in the Documentation and Clinical Notes MPage Components and allows providers to refer to these notes within their workflow in Provider View.

## Patient Info & Story MPage

• With the removal of Annotations from Interactive View and I&O (iView), this MPage is no longer needed to display Annotations.

## WHEN: TBD

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

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

## At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

- Clinical staff using Annotations
- Nursing staff
- Providers

# FindHelp Update – Removed, Effective Immediately

# **WHAT:** This Update has been removed due to extremely slow load times and decreased functionality.

FindHelp will be added to the following workflow MPages:

- AMB Care Management: Active Case MPage
- Ambulatory Nursing Workflow
- ED Nursing Workflow
- Nurse Discharge Workflow
- WIC Nurse MPage

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**WHY:** This addition is to gain more exposure to the FindHelp platform by placing it within the staff workflows to assist patients with barriers they may have.

#### WHEN: Removed – Effective Immediately

- WHERE: The change will affect the following venue(s):
  - Acute/Inpatient (to include ED)
  - Ambulatory/WIC

#### At the following NLH Member Organization(s):

• All NLH Hospitals (excluding Mayo and Acadia)

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

- AMB Care Manager
- LPN
- MA
- RN

## **Newborn Birth Time Registration Field Update**

**WHAT:** A new **Birth Time Registration** field will be added to the Registration Conversation and Quick Registration for individuals born in the last 48 hours.

NLH Add/Modify Person						
Medical Record Number:	Social Security Number:	* Birth Date:	Birth Time:			
		••/••/•••	÷ •	4		

**NOTE**: There is no workflow change only the addition of the Birth Time Registration Field.

- WHY: Registration does not currently have the capability to update birth times for newborns transferred from outside our organization or born enroute to our organization. The enhancement will enable staff who register newborns to accurately document the birth time within 48 hours of birth.
- WHEN: Effective Immediately

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

• Acute/Inpatient (to include ED)

#### At the following NLH Member Organization(s):

• All NLH Member Organizations (Excluding NL Acadia and Mayo)

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

- Registration Staff
- Unit Clerks
- WH Nursing Staff

## SmartZone Display Update

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

## SmartZone Display Panel Closed

• SmartZone alerts will **no longer automatically open** upon accessing the patient chart.

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• To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.

TESTING, BBCOO	LX	← List → 🛅 Recent ▼ MRN	Q, 🗸
TESTING, B Allergies: No Code:	BCOOL Known Allergies eLos:	PCP: Primary Contact: View Details Record Exchange: Last sync 12	Notifications
डू < > 👻 🏫	Ambulatory View	🔀 Full screen 🗧 Print 🎸	2 minutes ago

## Manually Open SmartZone

• Only if a SmartZone alert is triggered while in the patient chart, a **pop-up** displays in **lower, right corner** for 20 seconds; as this is an infrequent scenario, **click** Banner Bar Notifications to display Smart Zone alerts.



**WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.

#### WHEN: Thursday, April 3, 2025

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

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

## 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:
  - Clinical Staff

**NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).

## **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

Room	-		Patient Information	Clin	Nurse	Patient Details	X	Ψ.	BP	HR	TEMP	RR	O2 SAT
ER,06 NPO		3	* <b>TESTING, PENELOPE</b> 35y F 🕄 📿 🏹	ЭМ	м	Dx: Abdominal pain	S 🗖	After	r			- 20 -	93 ا 🔶
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♦ SpO	2 Lo	cat	ion			Right hand	♦ SpO2 Lo	tation					

- WHY: The change will **enhance the visibility and communication** of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.
- WHEN: Monday, April 7, 2025

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

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

#### 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:
  - All Clinicians

## **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.

#### WHEN: Tuesday, April 8, 2025

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

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

#### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

• All Staff

## Patch Medication Ordering and MAR Task Updates – effective 04/15/25

WHAT: Patch Medications have a MAR task to remove the patch. A MAR task for **Patch-Off ONCE** will now correspond to the last administration, based on the timing of the medication.

Patch Medication	ONCE Patch-Off Timing
Buprenorphine	7 day offset from admin
Fentanyl	Either <b>48 hour</b> <u>or</u> <b>72 hour</b> offset based on Frequency on order
Lidocaine	12 hour offset from admin
Nicotine	Either <b>24 hour</b> offset <u>or</u> "Bedtime" task based on Provider-Entered Removal Details
Nitroglycerin	12 hour offset from admin
Scopolamine	Either <b>12 hours, 24 hour</b> , or <b>72</b> <b>hour</b> offset based on Provider- Entered Removal Details

## **Background-Nursing**

- Currently, MAR tasks can be scheduled tasks for a particular time of day, while others are visible in the PRN section of MAR.
- The MAR task for Patch-off will correspond to the time in which the patch medication was charted and applied.

**NOTE**: Nurses may have to look slightly ahead or behind current time on the MAR to locate the applicable Patch off task.

## **Pharmacist**

- The update will allow the ONCE Patch-off order to auto-verify.
- Please be aware, with the update, you will no longer see the previous scheduled or PRN orders in verification queue when verifying medication order for a patch.

## **Provider**

- Nicotine and Scopolamine Patches: a new required field will determine how long after patch application, it should be removed.
- Fentanyl patches: the Frequency field will determine offset.

■ Details for Scopolamir	ne (scopolamine 1 mg	72 hr transdermal film, extended release)								
📸 Details 📗 Order Comm	ients 🛛 🗋 Diagnoses									
🕂 🖀 hi. 🔍 🖉	🕂 🐕 h.  🕴 Remaining Administrations: 12									
*Remove scopolamine patch:		> *Dose:	1							
*Dose Unit:	12 hours post placement 24 hours post placement	• Freetext Dose:								
Drug Form:	72 hours post placement	*Route of Administration:	TRANSDERMAL 🗸							
*Frequency:	Every 72 Hour Interval	Frequency Instruction:	·							
PRN:	🔿 Yes 🔘 No	PRN Reason:	×							
Indication:	~	Priority:	·							
Patient's Own Meds:	🔿 Yes 🔿 No	*Requested Start Date/Time:	03/27/2025 9:00 EDT 🗸							
Duration:	365	Duration Unit:	Days 🗸							
Stop Type:	Hard Stop 🗸	Stop Date/Time:	03/25/2026 🔹 💌 0900	EDT						
Rate:		Rate Unit:	~							
Infuse Over:		Infuse Over Unit:	·							
Order Comments:		Special Instructions:								

- WHY: To further refine nursing MAR tasking for medication patches, provide a **scheduled** Patch-off task, and increase precise Patch-off tasking and removal.
- WHEN: Tuesday, April 15, 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:
  - Nursing
  - Pharmacists
  - Providers

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## Inpatient

## Nursing Note PowerForm to Replace Annotations – **POSTPONED**

NOTE: This go-live has been postponed.

- > Original go-live date: April 7, 2025
- New go-live date: TBD

## WHAT: Nursing Note PowerForm

- The **Nursing Note** PowerForm will replace Annotations as the method for documenting a shift summary and/or any patient information that does not have a discreet location for documentation.
  - Nursing and clinical staff will open a new Nursing Note from the Adhoc folder structure for every nursing note entry.
  - The note will be written in **reverse chronological** order, thus displaying the most recent note at the top. (See example below)
  - Each entry will be dated and timed at the beginning of the note and end with the nurse's full signature (first initial, last name) and credentials. (See example below)
  - The Nursing Note will be Last Charted Value meaning it will retain the previous documentation when a new note is opened from the Adhoc folder.
  - **DO NOT clear the information from the form** when opening a new document. The intent of workflow is to have all nursing notes available in one document for the entire length of the patient's stay.
  - **Each** signed Nursing Note creates a new Text Rendition (TR) version of the note making it easy to look back for a specific date/time.

**NOTE**: **DO NOT modify the nursing note from Form Browser**. This is important because this workflow causes a strikethrough to appear on all previous documentation on the TR version. The TR version is what HIM provides as the legal document to anyone requesting a copy. The strikethroughs give the appearance that all previous documentation is marked in error.

Nursing Note - TESTING, JKRULES				×
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Nsg Note Nursing Note				^
Segoe UI - 9 · · · · · · · · · · · · · · · · · ·	3			
B/20/25 1005 Third nursing note. Nurse Name RN 3/20/25 0600 Second nurisng note. Nurse Name RN 3/19/25 1800 Initial nursing note. Nurse Name RN				~
<				>
		In	Progress	

## **Accessing the Nursing Note PowerForm**

• The Nursing Note will be available in the following **Adhoc** folders:

Nursing Assessments	Critical Care
Surgery/Procedure	ED Forms
<b>OB/GYN</b> Inpatient Documentation	NICU
Behavioral Health	Ambulatory
Physician Practices	Child/Adolescent Assessment
Surgical Navigation	Anemia Management
Dialysis	

The Nursing Note will also be accessible from the Admission
 Documentation component on the Admission Tab (MPage) and Discharge
 Documentation dropdown on the Discharge tab (MPage).

## **Annotations and Patient Info & Story MPage**

- The ability to document an annotation in iView will be removed.
- The **Patient Info & Story MPage** will be removed.
- Annotations previously viewed on the Patient Info and Story MPage can still be found on the flowsheet in Results Review

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**NOTE**: Clinical staff will still be able to right click in an iView documentation cell and add a Comment or a Flagged Comment.

## Locating a Completed Nursing Note (Provider View)

- The Nursing note will be available for Providers to view in the **Documentation** component in **Provider View**.
  - To ensure easy access to view the Nursing Note, use the Change Filter button to add Nursing/Care Management Documentation in the Documentation component.

Documents (2)				+ All Visits Last 7 days Last 24 hours Last 3 months Li	ast 1 years 🗸 🗸
			Dist	play: Multiple note types Change Filter Last 50 Notes My Notes Only	Group by Encounter
Time of Service	$\downarrow$	Subject	Note Type	Vpdated	By View
- Completed (2)				Provider Documentation	
MAR 24, 2025 08:38		Nursing Note	TR_Nursing Note	Admission and Consult Notes     DTT , RO     Clinic Notes	VENA E > <u>No Outside Records</u>
	_			Discharge Documentation	
				Emergency Documentation	
				Cardiology/Neuro Testing	
				Procedure and Operative Notes	
				Rehabilitation and Therapy Documentation	
				All Documents	
				Reset to default Apply Cancel	

- The Nursing Note can also be found in:
  - o Clinical Notes component in Nurse View Handoff tab
  - Documentation in Menu/Table of Contents
  - Results Review

## **WHY: Nursing Note replaces Annotations**

- Communication breakdowns are the most common cause of medical errors. NLH recognized that Annotations contributed to communication barriers and difficulty seeing the patient story within the EHR.
- A review of current state workflows identified that accessing the Patient Info & Story MPage did not fall within the Providers workflow.
- Nurses needed to remember to select Flagged Annotations for the information to flow to the Patient Infor & Story MPage. If Flagged Annotation was not selected, the information did not flow to the MPage and was only available in Results Review.
Transitioning from Annotations to the Nursing Note PowerForm makes the note easily viewable in the Documentation and Clinical Notes MPage Components and allows providers to refer to these notes within their workflow in Provider View.

### Patient Info & Story MPage

• With the removal of Annotations from Interactive View and I&O (iView), this MPage is no longer needed to display Annotations.

### WHEN: TBD

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

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

### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

- Clinical staff using Annotations
- Nursing staff
- Providers

## FindHelp Update – Removed, Effective Immediately

# **WHAT:** This Update has been removed due to extremely slow load times and decreased functionality.

FindHelp will be added to the following workflow MPages:

- AMB Care Management: Active Case MPage
- Ambulatory Nursing Workflow
- ED Nursing Workflow
- Nurse Discharge Workflow
- WIC Nurse MPage

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**WHY:** This addition is to gain more exposure to the FindHelp platform by placing it within the staff workflows to assist patients with barriers they may have.

### WHEN: Removed – Effective Immediately

- WHERE: The change will affect the following venue(s):
  - Acute/Inpatient (to include ED)
  - Ambulatory/WIC

### At the following NLH Member Organization(s):

• All NLH Hospitals (excluding Mayo and Acadia)

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

- AMB Care Manager
- LPN
- MA
- RN

## **Newborn Birth Time Registration Field Update**

**WHAT:** A new **Birth Time Registration** field will be added to the Registration Conversation and Quick Registration for individuals born in the last 48 hours.

NLH Add/Modify Person				
Medical Record Number:	Social Security Number:	* Birth Date:	Birth Time:	
		••/••/•••	1	

**NOTE**: There is no workflow change only the addition of the Birth Time Registration Field.

- WHY: Registration does not currently have the capability to update birth times for newborns transferred from outside our organization or born enroute to our organization. The enhancement will enable staff who register newborns to accurately document the birth time within 48 hours of birth.
- WHEN: Effective Immediately

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

• Acute/Inpatient (to include ED)

### At the following NLH Member Organization(s):

• All NLH Member Organizations (Excluding NL Acadia and Mayo)

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

- Registration Staff
- Unit Clerks
- WH Nursing Staff

## SmartZone Display Update

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

### SmartZone Display Panel Closed

• SmartZone alerts will **no longer automatically open** upon accessing the patient chart.

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• To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.

TESTING, BBCOOL	×	← List → 🛅 Recent ▾ MRN	Q, 🗸
TESTING, BB Allergies: No K Code:	COOL nown Allergies eLos:	PCP: Primary Contact: View Details Record Exchange: Last sync 12	Notifications
डू < > 🝷 🍙 🗸	Ambulatory View	🔀 Full screen 🗧 Print 🍫	2 minutes ago

## Manually Open SmartZone

• Only if a SmartZone alert is triggered while in the patient chart, a **pop-up** displays in **lower, right corner** for 20 seconds; as this is an infrequent scenario, **click** Banner Bar Notifications to display Smart Zone alerts.



**WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.

### WHEN: Thursday, April 3, 2025

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

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

### 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:
  - Clinical Staff

**NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).

## **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

Room	-		Patient Information	Clin	Nurse	Patient Details	X	Ψ.	BP	HR	TEMP	RR	O2 SAT
ER,06 NPO		3	* <b>TESTING, PENELOPE</b> 35y F 🕄 📿 🏹	ЭМ	м	Dx: Abdominal pain	S 🗖	After	r			- 20 -	93 ا 🔶
ER,07			* <b>TESTING, ANDREW (</b> 61y F 🕄 👔 🧔	ЭМ		Dx: Nontraffic MVA i	njuri.	Befor	e	- 120-	39.3	T22	▶ 93
							_						
🚯 Охус	jen	Sat	uration			%SAT 93	🐼 Oxygen S	Saturatio	n			%SAT	93
🔷 SpO	2 M	oni	toring Frequency			Continuo	🔷 SpO2 Mo	nitoring	Freque	ency			
♦ SpO	2 Lo	cat	ion			Right hand	♦ SpO2 Lo	tation					

- WHY: The change will **enhance the visibility and communication** of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.
- WHEN: Monday, April 7, 2025

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

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

### 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:
  - All Clinicians

### **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.

#### WHEN: Tuesday, April 8, 2025

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

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

### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

All Staff

## Implementation of Multi-Disciplinary Rounds Tool: Task Updates – EMMC CCU P5, ICU & KPO3

WHAT: Clinical staff will start seeing additional tasks within their task lists. Each discipline may receive a task determined by multidisciplinary rounds as identified barriers to patient discharge.

These tasks will now be coming to the tasks list due to a change in the Multidisciplinary rounds process. The manual process is being replaced with a new electronic MDR tool that communicates bidirectionally with Cerner to assist in a more appropriate patient discharge with all needed requirements.

- **WHY:** The implementation will aid in managing patient flow and ensure orders are complete for safe and timely patient discharge.
- WHEN: Tuesday, April 8, 2025
- WHERE: The change will affect the following venue(s):
  - Acute/Inpatient

### At the following NLH Member Organization(s):

- NL EMMC
- **WHO:** The change will affect the following staff at the above noted locations:
  - <u>Nursing</u>
  - <u>Dietitians</u>
  - <u>Respiratory Therapy</u>

- <u>Rehab Therapy</u>
- <u>Pharmacy</u>
- <u>Care Management/Social</u> Worker

## Patch Medication Ordering and MAR Task Updates – effective 04/15/25

WHAT: Patch Medications have a MAR task to remove the patch. A MAR task for Patch-Off ONCE will now correspond to the last administration, based on the timing of the medication.

Patch Medication	ONCE Patch-Off Timing
Buprenorphine	7 day offset from admin
Fentanyl	Either <b>48 hour</b> <u>or</u> <b>72 hour</b> offset based on Frequency on order
Lidocaine <b>12 hour</b> offset from admin	
Nicotine	Either <b>24 hour</b> offset <u>or</u> "Bedtime" task based on Provider-Entered Removal Details
Nitroglycerin	12 hour offset from admin
Scopolamine	Either <b>12 hours, 24 hour</b> , or <b>72</b> <b>hour</b> offset based on Provider- Entered Removal Details

### Background-Nursing

- Currently, MAR tasks can be scheduled tasks for a particular time of day, while others are visible in the PRN section of MAR.
- The MAR task for Patch-off will correspond to the time in which the patch medication was charted and applied.

# **NOTE**: Nurses may have to look slightly ahead or behind current time on the MAR to locate the applicable Patch off task.

### **Pharmacist**

- The update will allow the ONCE Patch-off order to auto-verify.
- Please be aware, with the update, you will no longer see the previous scheduled or PRN orders in verification queue when verifying medication order for a patch.

### **Provider**

• Nicotine and Scopolamine Patches: a new required field will determine how long after patch application, it should be removed.

• Fentanyl patches: the Frequency field will determine offset.

Order Comm	ents 🧕 Diagnoses			
🕂 🔓 lh. 🛛 🔍 🗧			Remaining Admin	istratio
Remove scopolamine patch:	 	> *Dose:	1	7
*Dose Unit:	12 hours post placement 24 hours post placement	• Freetext Dose:		
Drug Form:	72 hours post placement	*Route of Administration:	TRANSDERMAL ~	·
*Frequency:	Every 72 Hour Interval 🔹	Frequency Instruction:	· ·	·
PRN:	C Yes 🔘 No	PRN Reason:	·	·
Indication:	<b>~</b>	Priority:	· ·	·
Patient's Own Meds:	C Yes C No	*Requested Start Date/Time:	03/27/2025 9:00 EDT	·
Duration:	365	Duration Unit:	Days 🗸	·
Stop Type:	Hard Stop 🗸	Stop Date/Time:	03/25/2026 🔹 💌 0900	
Rate:		Rate Unit:	· ·	·
Infuse Over:		Infuse Over Unit:	· ·	·
Order Comments:		Special Instructions:		٦

- WHY: To further refine nursing MAR tasking for medication patches, provide a **scheduled** Patch-off task, and increase precise Patch-off tasking and removal.
- WHEN: Tuesday, April 15, 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:
  - Nursing
  - Pharmacists
  - Providers

## Peri-Op

## Nursing Note PowerForm to Replace Annotations – **POSTPONED**

### NOTE: This go-live has been postponed.

- > Original go-live date: April 7, 2025
- New go-live date: TBD

### WHAT: Nursing Note PowerForm

- The **Nursing Note** PowerForm will replace Annotations as the method for documenting a shift summary and/or any patient information that does not have a discreet location for documentation.
  - Nursing and clinical staff will open a new Nursing Note from the Adhoc folder structure for every nursing note entry.
  - The note will be written in reverse chronological order, thus displaying the most recent note at the top. (See example below)
  - Each entry will be dated and timed at the beginning of the note and end with the nurse's full signature (first initial, last name) and credentials. (See example below)
  - The Nursing Note will be **Last Charted Value** meaning it will retain the previous documentation when a new note is opened from the Adhoc folder.
  - DO NOT clear the information from the form when opening a new document. The intent of workflow is to have all nursing notes available in one document for the entire length of the patient's stay.
  - **Each** signed Nursing Note creates a new Text Rendition (TR) version of the note making it easy to look back for a specific date/time.
- **NOTE**: **DO NOT modify the nursing note from Form Browser**. This is important because this workflow causes a strikethrough to appear on all previous documentation on the TR version. The TR version is what HIM provides as the legal document to anyone requesting a copy. The strikethroughs give the appearance that all previous documentation is marked in error.

P Nursing Note - TESTING, JKRULES	– 🗆 🗙
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*Performed on: 03/24/2025 • 09:23 • EDT	By: ELLIOTT , ROWENA E
Nsg Note Nursing Note	^
Segoe UI 🗸 9 🗸 🕸 🛍 🖪 💆 Z 🔂 🖺 🗏 🧵	
8/20/25 1005 Third nursing note. Nurse Name RN 3/20/25 0600 Second nurisng note. Nurse Name RN 3/19/25 1800 Initial nursing note. Nurse Name RN	
<	>
	In Progress

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### Accessing the Nursing Note PowerForm

• The Nursing Note will be available in the following **Adhoc** folders:

Nursing Assessments	Critical Care
Surgery/Procedure	ED Forms
<b>OB/GYN</b> Inpatient Documentation	NICU
Behavioral Health	Ambulatory
Physician Practices	Child/Adolescent Assessment
Surgical Navigation	Anemia Management
Dialysis	

The Nursing Note will also be accessible from the Admission
 Documentation component on the Admission Tab (MPage) and Discharge
 Documentation dropdown on the Discharge tab (MPage).

## **Annotations and Patient Info & Story MPage**

- The ability to document an annotation in iView will be removed.
- The Patient Info & Story MPage will be removed.
- Annotations previously viewed on the Patient Info and Story MPage can still be found on the flowsheet in Results Review

**NOTE**: Clinical staff will still be able to right click in an iView documentation cell and add a Comment or a Flagged Comment.

## Locating a Completed Nursing Note (Provider View)

• The Nursing note will be available for Providers to view in the **Documentation** component in **Provider View**.

 To ensure easy access to view the Nursing Note, use the Change Filter button to add Nursing/Care Management Documentation in the Documentation component.

Documents (2)		+ All Visits Last 7 days L	Last 24 hours Last 3 i	months La	ast 1 years	رئ 🗸
	Disp	lay: Multiple note types Change Filter	Last 50 Notes My	Notes Only	Group by	Encounter
Time of Service $\psi$ Subject	Note Type		>	<b>V</b> pdated	Ву	View
▼ In Progress (0)			L	-		
✓ Completed (2)		Provider Documentation				
MAR 24, 2025 08:38 Nursing No	ote TR_Nursing Note	Admission and Consult Notes		DTT , ROV	VENA E	>
		Clinic Notes			No Outs	side Records
		<ul> <li>Discharge Documentation</li> </ul>		_		
		Emergency Documentation				
		Nursing/Care Management Documenta	ation			
		<ul> <li>Cardiology/Neuro Testing</li> </ul>				
		Procedure and Operative Notes				
		<ul> <li>Rehabilitation and Therapy Documenta</li> </ul>	ation			
		All Documents				
		Reset to default	Apply Cance			

- The Nursing Note can also be found in:
  - Clinical Notes component in Nurse View Handoff tab
  - Documentation in Menu/Table of Contents
  - **O** Results Review

### **WHY: Nursing Note replaces Annotations**

- Communication breakdowns are the most common cause of medical errors. NLH recognized that Annotations contributed to communication barriers and difficulty seeing the patient story within the EHR.
- A review of current state workflows identified that accessing the Patient Info & Story MPage did not fall within the Providers workflow.
- Nurses needed to remember to select Flagged Annotations for the information to flow to the Patient Infor & Story MPage. If Flagged Annotation was not selected, the information did not flow to the MPage and was only available in Results Review.
- Transitioning from Annotations to the Nursing Note PowerForm makes the note easily viewable in the Documentation and Clinical Notes MPage Components and allows providers to refer to these notes within their workflow in Provider View.

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### **Patient Info & Story MPage**

• With the removal of Annotations from Interactive View and I&O (iView), this MPage is no longer needed to display Annotations.

### WHEN: TBD

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

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

### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

- Clinical staff using Annotations
- Nursing staff
- Providers

## SmartZone Display Update

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

### SmartZone Display Panel Closed

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.

TESTING, BBCOOL 🗵		← List → 🛅 Recent ▾	MRN	Q, 🗸
TESTING, BBCOO Allergies: No Known	L Allergies	PCP: Primary Contact: View I Record Exchange: Last	Details	Notifications
s < > - Ambu	latory View	5C Full screen	Print C	2 minutes ago

## Manually Open SmartZone

**NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).

• **Only if** a SmartZone alert is triggered **while** in the patient chart, a **pop-up** displays in **lower, right corner** for 20 seconds; as this is an infrequent scenario, **click** Banner Bar Notifications to display Smart Zone alerts.



- **WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.
- WHEN: Thursday, April 3, 2025

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- Acute/Inpatient (to include ED & Peri-Op)
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### At the following NLH Member Organization(s):

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

Clinical Staff

## Vital Signs Update

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

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ER,06 NPO		3	*TESTING, PENELOPE 35y F 🕄 📿 🏹	ЭМ	М	Dx: Abdominal	pain 📢		ŀ	\fter				- 20 -	93 ا 🔶
ER,07			* <b>TESTING, ANDREW (</b> 61y F 👔 👔 👰	М		Dx: Nontraffic N	1VA injuri		В	efor	e	- 6120-	39.3	<b>722</b>	▶ 93
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🔷 Sp	O2 Lo	ocat	tion			Right h	and <	> SpO2 Lo	catio	n					

WHY: The change will **enhance the visibility and communication** of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.

## From the Office of Health Informatics EHR Updates April 3 – April 9, 2025

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### WHEN: Monday, April 7, 2025

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

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- Ambulatory/WIC

### 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:

• All Clinicians

## **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.
- WHEN: Tuesday, April 8, 2025

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

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

### At the following NLH Member Organization(s):

- All NLH Member Organizations (excluding Mayo)
- **WHO:** The change will affect the following staff at the above noted locations:
  - All Staff

## Patch Medication Ordering and MAR Task Updates – effective 04/15/25

WHAT: Patch Medications have a MAR task to remove the patch. A MAR task for Patch-Off ONCE will now correspond to the last administration, based on the timing of the medication.

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### Background-Nursing

- Currently, MAR tasks can be scheduled tasks for a particular time of day, while others are visible in the PRN section of MAR.
- The MAR task for Patch-off will correspond to the time in which the patch medication was charted and applied.

# **NOTE**: Nurses may have to look slightly ahead or behind current time on the MAR to locate the applicable Patch off task.

### **Pharmacist**

- The update will allow the ONCE Patch-off order to auto-verify.
- Please be aware, with the update, you will no longer see the previous scheduled or PRN orders in verification queue when verifying medication order for a patch.

### Provider

• Nicotine and Scopolamine Patches: a new required field will determine how long after patch application, it should be removed.

• Fentanyl patches: the Frequency field will determine offset.

😵 Details 🔢 Order Comm	ents 🔯 Diagnoses			
🕂 🔓 lh. 🔍 🖇			Remaining Adm	inistrati
*Remove scopolamine patch:		*Dose:	1	
*Dose Unit:	12 hours post placement 24 hours post placement	• Freetext Dose:		
Drug Form:	72 hours post placement	*Route of Administration:	TRANSDERMAL	~
*Frequency:	Every 72 Hour Interval 🗸	Frequency Instruction:		•
PRN:	C Yes 🔘 No	PRN Reason:		*
Indication:	<b>~</b>	Priority:		~
Patient's Own Meds:	C Yes C No	*Requested Start Date/Time:	03/27/2025 9:00 EDT	*
Duration:	365	Duration Unit:	Days	~
Stop Type:	Hard Stop 🗸	Stop Date/Time:	03/25/2026	
Rate:		Rate Unit:		•
Infuse Over:		Infuse Over Unit:		~
Order Comments:		Special Instructions:		

- WHY: To further refine nursing MAR tasking for medication patches, provide a **scheduled** Patch-off task, and increase precise Patch-off tasking and removal.
- WHEN: Tuesday, April 15, 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:
  - Nursing
  - Pharmacists
  - Providers

## **Nutrition**

### **Inpatient Only**

## Implementation of Multi-Disciplinary Rounds Tool: Task Updates – EMMC CCU P5, ICU & KPO3

WHAT: Clinical staff will start seeing additional tasks within their task lists. Each discipline may receive a task determined by multidisciplinary rounds as identified barriers to patient discharge.

These tasks will now be coming to the tasks list due to a change in the Multidisciplinary rounds process. The manual process is being replaced with a new electronic MDR tool that communicates bidirectionally with Cerner to assist in a more appropriate patient discharge with all needed requirements.

- **WHY:** The implementation will aid in managing patient flow and ensure orders are complete for safe and timely patient discharge.
- WHEN: Tuesday, April 8, 2025
- WHERE: The change will affect the following venue(s):
  - Acute/Inpatient

### At the following NLH Member Organization(s):

- NL EMMC
- **WHO:** The change will affect the following staff at the above noted locations:
  - <u>Nursing</u>
  - <u>Dietitians</u>
  - <u>Respiratory Therapy</u>

- <u>Rehab Therapy</u>
- Pharmacy
- <u>Care Management/Social</u>
   <u>Worker</u>

## SmartZone Display Update

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

## SmartZone Display Panel Closed

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.



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### **Manually Open SmartZone**

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- WHEN: Thursday, April 3, 2025

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### At the following NLH Member Organization(s):

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

## **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

Room	-		Patient Information	Clin	Nurse	Patient	Details	X		4	BP	HR	TEMP	RR	O2 SAT
ER,06 NPO		3	* <b>TESTING, PENELOPE</b> 35y F 👔 📿 🌾	ЭМ	М	Dx: Al	bdominal pain			After				<del>- 20</del> -	93 ا 🔶
E <b>R,07</b>			*TESTING, ANDREW ( 61y F 🕄 👔 👰	м		Dx: N	ontraffic MVA i	njurn.	E	efor	e	- 00-	39.3	-† <b>2</b> 2	€9 🗲
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♦ SpO	2 Lo	cat	ion				Right hand	♦ SpO2 Lo	catio	on					

- WHY: The change will enhance the visibility and communication of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.
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- **WHO:** The change will affect the following staff at the above noted locations:
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- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
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• All NLH Member Organizations (excluding Mayo)

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

• All Staff

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## **Patient Service Representatives**

## **Ambulatory/WIC Only**

## SmartZone Display Update

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

## SmartZone Display Panel Closed

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.



## Manually Open SmartZone

- **NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).
  - Only if a SmartZone alert is triggered while in the patient chart, a **pop-up** displays in **lower, right corner** for 20 seconds; as this is an infrequent scenario, **click** Banner Bar Notifications to display Smart Zone alerts.



- **WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.
- WHEN: Thursday, April 3, 2025
- WHERE: The change will affect the following venue(s):
  - Acute/Inpatient (to include ED & Peri-Op)
  - Ambulatory/WIC

### 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:

• Clinical Staff

## **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.

### WHEN: Tuesday, April 8, 2025

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

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

### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

All Staff

## Pharmacists & Pharmacy Technicians

## Ambulatory/WIC

## SmartZone Display Update

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

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### **SmartZone Display Panel Closed**

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.



### Manually Open SmartZone

**NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).

• Only if a SmartZone alert is triggered while in the patient chart, a pop-up displays in lower, right corner for 20 seconds; as this is an infrequent scenario, click Banner Bar Notifications to display Smart Zone alerts.



- **WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.
- WHEN: Thursday, April 3, 2025

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

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

### 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:

• Clinical Staff

## **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

	Room	-		Patient Information	Clin	Nurse	Patient Details	X	Ψ.	BP	HR	TEMP	RR	O2 SAT
	ER,06 NPO		3	* <b>TESTING, PENELOPE</b> 35y F 🕄 📿 🏹	ЭМ	м	Dx: Abdominal pain	S 🗖	After	r			- 20 -	93 ا 🔶
	ER,07			* <b>TESTING, ANDREW (</b> 61y F 🕄 👔 🧔	ЭМ		Dx: Nontraffic MVA i	njuri.	Befor	e	- 130-	▶ 93		
								_						
	🚯 Охус	jen	Sat	uration			%SAT 93	Oxygen Saturation %SA						93
SpO2 Monitoring Frequency					Continuo	SpO2 Monitoring Frequency								
♦ SpO2 Location						Right hand	♦ SpO2 Lo	tation						

- WHY: The change will **enhance the visibility and communication** of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.
- WHEN: Monday, April 7, 2025

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

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

### 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:
  - All Clinicians

### **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.

#### WHEN: Tuesday, April 8, 2025

## From the Office of Health Informatics EHR Updates April 3 – April 9, 2025

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

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

### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

All Staff

## Inpatient/ED

## SmartZone Display Update

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

### **SmartZone Display Panel Closed**

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.



## Manually Open SmartZone

**NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).

• **Only if** a SmartZone alert is triggered **while** in the patient chart, a **pop-up** displays in **lower, right corner** for 20 seconds; as this is an infrequent scenario, **click** Banner Bar Notifications to display Smart Zone alerts.



- **WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.
- WHEN: Thursday, April 3, 2025

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

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

### 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:

• Clinical Staff

## Vital Signs Update

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

Room	-		Patient Information	-	Clin	Nurse	Patient Details		¥	4	BP	HR	TEMP	RR	O2 SAT
ER,06		3	*TESTING, PENELOPE	K	М	MC	Dx: Abdominal pain	S 🗖	/	After				<del>- 20</del> -	93 ! 🔶
ER,07			*TESTING, ANDREW ( 61y F 🚯 🔹 🔅		MC		Dx: Nontraffic MVA	njuri	Before		e	- 7130-	39.3	722	€ م
								_							
🚯 Ox	ygen	Sat	turation				%SAT 93	Oxygen Saturation %SA						%SAT	93
SpO2 Monitoring Frequency						Continuo	SpO2 Mo	nito	oring	Freque	ncy				
♦ SpO2 Location						Right hand	♦ SpO2 Lo	catio	n						

WHY: The change will **enhance the visibility and communication** of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.

## From the Office of Health Informatics EHR Updates April 3 – April 9, 2025

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### WHEN: Monday, April 7, 2025

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

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

### 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:

• All Clinicians

## **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.
- WHEN: Tuesday, April 8, 2025

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

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

### At the following NLH Member Organization(s):

- All NLH Member Organizations (excluding Mayo)
- **WHO:** The change will affect the following staff at the above noted locations:
  - All Staff

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# Implementation of Multi-Disciplinary Rounds Tool: Task Updates – EMMC CCU P5, ICU & KPO3

WHAT: Clinical staff will start seeing additional tasks within their task lists. Each discipline may receive a task determined by multidisciplinary rounds as identified barriers to patient discharge.

These tasks will now be coming to the tasks list due to a change in the Multidisciplinary rounds process. The manual process is being replaced with a new electronic MDR tool that communicates bidirectionally with Cerner to assist in a more appropriate patient discharge with all needed requirements.

- **WHY:** The implementation will aid in managing patient flow and ensure orders are complete for safe and timely patient discharge.
- WHEN: Tuesday, April 8, 2025

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

• Acute/Inpatient

### At the following NLH Member Organization(s):

• NL EMMC

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

- <u>Nursing</u>
- <u>Dietitians</u>
- <u>Respiratory Therapy</u>

- <u>Rehab Therapy</u>
- <u>Pharmacy</u>
- <u>Care Management/Social</u> <u>Worker</u>

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## Patch Medication Ordering and MAR Task Updates – effective 04/15/25

WHAT: Patch Medications have a MAR task to remove the patch. A MAR task for Patch-Off ONCE will now correspond to the last administration, based on the timing of the medication.

Patch Medication	ONCE Patch-Off Timing
Buprenorphine	7 day offset from admin
Fentanyl	Either <b>48 hour</b> <u>or</u> <b>72 hour</b> offset based on Frequency on order
Lidocaine	12 hour offset from admin
Nicotine	Either <b>24 hour</b> offset <u>or</u> "Bedtime" task based on Provider-Entered Removal Details
Nitroglycerin	12 hour offset from admin
Scopolamine	Either <b>12 hours, 24 hour</b> , or <b>72</b> <b>hour</b> offset based on Provider- Entered Removal Details

### Background-Nursing

- Currently, MAR tasks can be scheduled tasks for a particular time of day, while others are visible in the PRN section of MAR.
- The MAR task for Patch-off will correspond to the time in which the patch medication was charted and applied.

### **Pharmacist**

- The update will allow the ONCE Patch-off order to auto-verify.
- Please be aware, with the update, you will no longer see the previous scheduled or PRN orders in verification queue when verifying medication order for a patch.

### **Provider**

• Nicotine and Scopolamine Patches: a new required field will determine how long after patch application, it should be removed.

**NOTE**: Nurses may have to look slightly ahead or behind current time on the MAR to locate the applicable Patch off task.

## From the Office of Health Informatics EHR Updates April 3 – April 9, 2025 Page 101 of 124

• Fentanyl patches: the Frequency field will determine offset.

Details for SCOPOLAMI     Details for SCOPOLAMI	ne (scopolamine 1 mg	/72 hr transdermal film, extended release)		
+ <b>%</b> h. 🔍 🗉			Remaining Admini	strations: 1
*Remove scopolamine patch:	· · ·	*Dose:	1	]
*Dose Unit:	12 hours post placement 24 hours post placement	o Freetext Dose:		]
Drug Form:	72 hours post placement	*Route of Administration:	TRANSDERMAL	
*Frequency:	Every 72 Hour Interval 🔹	Frequency Instruction:	· ·	
PRN:	🔿 Yes 💿 No	PRN Reason:	~	
Indication:	•	Priority:	~	
Patient's Own Meds:	C Yes C No	*Requested Start Date/Time:	03/27/2025 9:00 EDT	]
Duration:	365	Duration Unit:	Days 🗸	
Stop Type:	Hard Stop 🗸	Stop Date/Time:	03/25/2026 🔹 💌 0900	► ED
Rate:		Rate Unit:	~	
Infuse Over:		Infuse Over Unit:	·	
Order Comments:		Special Instructions:		

- WHY: To further refine nursing MAR tasking for medication patches, provide a **scheduled** Patch-off task, and increase precise Patch-off tasking and removal.
- WHEN: Tuesday, April 15, 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:
  - Nursing
  - Pharmacists
  - Providers

## Physicians, Physician Assistants, Nurse Practitioners

## **Ambulatory**

## Nursing Note PowerForm to Replace Annotations – **POSTPONED**

NOTE: This go-live has been postponed.

- > Original go-live date: April 7, 2025
- > New go-live date: TBD

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### WHAT: Nursing Note PowerForm

- The **Nursing Note** PowerForm will replace Annotations as the method for documenting a shift summary and/or any patient information that does not have a discreet location for documentation.
  - Nursing and clinical staff will open a new Nursing Note from the Adhoc folder structure for every nursing note entry.
  - The note will be written in **reverse chronological** order, thus displaying the most recent note at the top. (See example below)
  - Each entry will be dated and timed at the beginning of the note and end with the nurse's full signature (first initial, last name) and credentials. (See example below)
  - The Nursing Note will be Last Charted Value meaning it will retain the previous documentation when a new note is opened from the Adhoc folder.
  - **DO NOT clear the information from the form** when opening a new document. The intent of workflow is to have all nursing notes available in one document for the entire length of the patient's stay.
  - **Each** signed Nursing Note creates a new Text Rendition (TR) version of the note making it easy to look back for a specific date/time.
- **NOTE**: **DO NOT modify the nursing note from Form Browser**. This is important because this workflow causes a strikethrough to appear on all previous documentation on the TR version. The TR version is what HIM provides as the legal document to anyone requesting a copy. The strikethroughs give the appearance that all previous documentation is marked in error.

Nursing Note - TESTING, JKRULES				×	
🗸 🖬 🛇   🕱 💏 🛧 🕂   🚥 🕮 🖻	Sh	now Sign	Confirm	natio	n
*Performed on: 03/24/2025 • 09:23 • EDT	By:	ELLIOTT	r, ROWI	ENA E	:
Nsg Note Nursing Note					^
Segoe UI 🗸 9 🗸 🕲 🛍 🔀 🙂 🖌 등 🧮 🚍			<b>.</b>		
\$/20/25 1005 Third nursing note. Nurse Name RN 3/20/25 0600 Second nurisng note. Nurse Name RN 3/19/25 1800 Initial nursing note. Nurse Name RN					~
<				>	
		In P	rogress		

### Accessing the Nursing Note PowerForm

• The Nursing Note will be available in the following **Adhoc** folders:

Nursing Assessments	Critical Care
Surgery/Procedure	ED Forms
OB/GYN Inpatient Documentation	NICU
Behavioral Health	Ambulatory
Physician Practices	Child/Adolescent Assessment
Surgical Navigation	Anemia Management
Dialysis	

The Nursing Note will also be accessible from the Admission
 Documentation component on the Admission Tab (MPage) and Discharge
 Documentation dropdown on the Discharge tab (MPage).

## **Annotations and Patient Info & Story MPage**

- The ability to document an annotation in iView will be removed.
- The **Patient Info & Story MPage** will be removed.
- Annotations previously viewed on the Patient Info and Story MPage can still be found on the flowsheet in Results Review

**NOTE**: Clinical staff will still be able to right click in an iView documentation cell and add a Comment or a Flagged Comment.

## Locating a Completed Nursing Note (Provider View)

• The Nursing note will be available for Providers to view in the **Documentation** component in **Provider View**.

- Page 104 of 124
- To ensure easy access to view the Nursing Note, use the Change Filter button to add Nursing/Care Management Documentation in the Documentation component.

Documents (2)	+ All Visi	ts Last 7 days Last 24 hours	Last 3 month	s Last 1 years	<b>v</b> 5
	Display: Multiple note types	Change Filter Last 50 N	otes My Notes	Only Group by	Encounter
Time of Service 🗸 Subject Note Ty	/pe		X UI	odated By	View
✓ In Progress (0)					
✓ Completed (2)	Provider Docume	entation			
MAR 24, 2025 08:38 Nursing Note TR_Nurs	sing Note 🗌 Admission and C	onsult Notes	от	F , ROWENA E	>
	Clinic Notes			No Ou	tside Records
	<ul> <li>Discharge Docum</li> </ul>	nentation			
	Emergency Docu	mentation			
	Nursing/Care Ma	nagement Documentation			
	Cardiology/Neuro	o Testing			
	Procedure and O	perative Notes			
	Rehabilitation an	d Therapy Documentation			
	All Documents				
	Reset to default	Apply	Cancel		

- The Nursing Note can also be found in:
  - Clinical Notes component in Nurse View Handoff tab
  - Documentation in Menu/Table of Contents
  - **O** Results Review

### **WHY: Nursing Note replaces Annotations**

- Communication breakdowns are the most common cause of medical errors. NLH recognized that Annotations contributed to communication barriers and difficulty seeing the patient story within the EHR.
- A review of current state workflows identified that accessing the Patient Info & Story MPage did not fall within the Providers workflow.
- Nurses needed to remember to select Flagged Annotations for the information to flow to the Patient Infor & Story MPage. If Flagged Annotation was not selected, the information did not flow to the MPage and was only available in Results Review.
- Transitioning from Annotations to the Nursing Note PowerForm makes the note easily viewable in the Documentation and Clinical Notes MPage Components and allows providers to refer to these notes within their workflow in Provider View.

### Patient Info & Story MPage

• With the removal of Annotations from Interactive View and I&O (iView), this MPage is no longer needed to display Annotations.

### WHEN: TBD

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

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

### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

- Clinical staff using Annotations
- Nursing staff
- Providers

### **SmartZone Display Update**

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

### **SmartZone Display Panel Closed**

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.

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	TESTING, BBCOC Allergies: No Know Code:	DL n Allergies eLos:	PCP: Primary Co Record Exc	ontact: View De change: Last s	etails sync 12	Notifications
Me	< 🖂 👻 🔒 Amb	ulatory View	💱 Full	l screen 🛛 🖶 🖡	رم Print	2 minutes ago

### Manually Open SmartZone

**NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).

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• Only if a SmartZone alert is triggered while in the patient chart, a pop-up displays in lower, right corner for 20 seconds; as this is an infrequent scenario, click Banner Bar Notifications to display Smart Zone alerts.



- **WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.
- WHEN: Thursday, April 3, 2025

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

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

### 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:

• Clinical Staff

## **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

Room	Ŧ		Patient Information	Clin	Nurse	Patien	t Details	X		۰.	BP	HR	TEMP	RR	O2 SAT	
ER,06 NPO		3	*TESTING, PENELOPE 35y F 🕄 📿 🏹	JM	М	Dx: A	Dx: Abdominal pain		After							
ER,07	7		*TESTING, ANDREW ( 61y F 🕄 👔 🧔	М		Dx: N	ontraffic MVA i	njuri.	E	Befo	re	- 130-	39.3	722	€9 🗲	
	_								_	_						
🚯 Оху	gen S	at	uration			%SA1	93	Oxygen Saturation %SA						%SAT	93	
SpO2 Monitoring Frequency						Continuo	. 🔷 SpO2 Monitoring Frequency									
SpO2 Location						<b>Right hand</b>	♦ SpO2 Lo	cati	on							

WHY: The change will **enhance the visibility and communication** of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.

### WHEN: Monday, April 7, 2025

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

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

### 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:

• All Clinicians

## **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.
- WHEN: Tuesday, April 8, 2025

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

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

### At the following NLH Member Organization(s):

- All NLH Member Organizations (excluding Mayo)
- **WHO:** The change will affect the following staff at the above noted locations:
  - All Staff

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## **Spirometry Recommendation Update: Asthma Action Plan Documentation**

WHAT: Asthma Management-Written Action Plan: New Action Items have been added to the dropdown action's menu. When Asthma Assessment-Asthma History is selected, the associated form will open, and user is able to document.

### Please follow the steps outlined:

- Within the **Recommendations** component in the Workflow MPage select the **Asthma Management Written Action Plan**.
  - Within the Asthma Management Written Action Plan that opens there is a reference text link to the NLH Digital Took Kit for Asthma Management Guidelines.
- Click the Actions dropdown (expand) and select Asthma Assessment-Asthma History.


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- WHY: The Asthma Management Written Action Plan guides healthcare providers in managing asthma effectively. The update will enable clinicians to streamline their workflow.
- WHEN: Tuesday, April 8, 2025
- WHERE: The change will affect the following venue(s):
  - Ambulatory

### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding NL Acadia and Mayo)

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

- Clinical Staff
- Providers

# **All F BILI with Calculation Updates**

- WHAT: Laboratory locations will align and use F BILI (with indirect calculation) order, allowing for a standardized reporting for this result across Laboratories performed within the system.
  - WHY: The update will standardize the reporting for Total Bilirubin, Direct Bilirubin, and Indirect sites.
- WHEN: Wednesday, April 9, 2025

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

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

### At the following NLH Member Organization(s):

- NL AR Gould
- NL CA Dean
- NL Maine Coast

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

- Lab Staff
- Providers

# Inpatient/ED/Peri-Op

# Nursing Note PowerForm to Replace Annotations – **POSTPONED**

NOTE: This go-live has been postponed.

- > Original go-live date: April 7, 2025
- New go-live date: TBD

## WHAT: Nursing Note PowerForm

- The **Nursing Note** PowerForm will replace Annotations as the method for documenting a shift summary and/or any patient information that does not have a discreet location for documentation.
  - Nursing and clinical staff will **open a new Nursing Note** from the **Adhoc** folder structure **for every nursing note entry**.
  - The note will be written in reverse chronological order, thus displaying the most recent note at the top. (See example below)
  - Each entry will be dated and timed at the beginning of the note and end with the nurse's full signature (first initial, last name) and credentials. (See example below)
  - The Nursing Note will be Last Charted Value meaning it will retain the previous documentation when a new note is opened from the Adhoc folder.
  - **DO NOT clear the information from the form** when opening a new document. The intent of workflow is to have all nursing notes available in one document for the entire length of the patient's stay.
  - **Each** signed Nursing Note creates a new Text Rendition (TR) version of the note making it easy to look back for a specific date/time.
- **NOTE**: **DO NOT modify the nursing note from Form Browser**. This is important because this workflow causes a strikethrough to appear on all previous documentation on the TR version. The TR version is what HIM provides as the legal document to anyone requesting a copy. The strikethroughs give the appearance that all previous documentation is marked in error.

P Nursing Note - TESTING, JKRULES		- 🗆	×	
🗸 🖬 🛇   🕱 🛐 🛧 🔸   📾 📓 🗟	Sho	w Sign Confirm	nation	
*Performed on: 03/24/2025 • 09:23 • EDT	By: E	LLIOTT , ROWE	NA E	
Nsg Note Nursing Note			1	1
Segoe UI 🗸 9 🗸 🖷 💼 🖪 🙂 / S 🖺 🗮 🧮				
β/20/25 1005 Third nursing note. Nurse Name RN 3/20/25 0600 Second nurisng note. Nurse Name RN 3/19/25 1800 Initial nursing note. Nurse Name RN				
<			>	
		In Progress		

# Accessing the Nursing Note PowerForm

• The Nursing Note will be available in the following **Adhoc** folders:

Nursing Assessments	Critical Care
Surgery/Procedure	ED Forms
<b>OB/GYN</b> Inpatient Documentation	NICU
Behavioral Health	Ambulatory
Physician Practices	Child/Adolescent Assessment
Surgical Navigation	Anemia Management
Dialysis	

The Nursing Note will also be accessible from the Admission
 Documentation component on the Admission Tab (MPage) and Discharge
 Documentation dropdown on the Discharge tab (MPage).

## **Annotations and Patient Info & Story MPage**

- The ability to document an annotation in iView will be removed.
- The Patient Info & Story MPage will be removed.
- Annotations previously viewed on the Patient Info and Story MPage can still be found on the flowsheet in Results Review

**NOTE**: Clinical staff will still be able to right click in an iView documentation cell and add a Comment or a Flagged Comment.

# Locating a Completed Nursing Note (Provider View)

• The Nursing note will be available for Providers to view in the **Documentation** component in **Provider View**.

 To ensure easy access to view the Nursing Note, use the Change Filter button to add Nursing/Care Management Documentation in the Documentation component.

Documents (2)	+ All Vi	sits Last 7 days	Last 24 hours	Last 3 mon	nths Last 1 y	rears 🗸 🧹	(f)
	Display: Multiple note type	5 Change Filter	Last 50 Note	s My Not	tes Only Gro	up by Encour	nter
Time of Service 🗸 Subject Note Typ	pe			X	Updated By	Vie	ew
✓ In Progress (0)							
✓ Completed (2)	Provider Docum	entation					
MAR 24, 2025 08:38 Nursing Note TR_Nursi	ing Note	Consult Notes			OTT , ROWENA	E >	>
	Clinic Notes				N	lo Outside Re	ecords
	<ul> <li>Discharge Docu</li> </ul>	mentation			_		_
	Emergency Doc	umentation					
	Nursing/Care M	anagement Document	ation				
	Cardiology/Neu	ro Testing					
	Procedure and	Operative Notes					
	Rehabilitation a	nd Therapy Document	ation				
	All Documents						
	Reset to default		Apply	Cancel			

- The Nursing Note can also be found in:
  - Clinical Notes component in Nurse View Handoff tab
  - Documentation in Menu/Table of Contents
  - **O** Results Review

## **WHY: Nursing Note replaces Annotations**

- Communication breakdowns are the most common cause of medical errors. NLH recognized that Annotations contributed to communication barriers and difficulty seeing the patient story within the EHR.
- A review of current state workflows identified that accessing the Patient Info & Story MPage did not fall within the Providers workflow.
- Nurses needed to remember to select Flagged Annotations for the information to flow to the Patient Infor & Story MPage. If Flagged Annotation was not selected, the information did not flow to the MPage and was only available in Results Review.
- Transitioning from Annotations to the Nursing Note PowerForm makes the note easily viewable in the Documentation and Clinical Notes MPage Components and allows providers to refer to these notes within their workflow in Provider View.

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### **Patient Info & Story MPage**

• With the removal of Annotations from Interactive View and I&O (iView), this MPage is no longer needed to display Annotations.

#### WHEN: TBD

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

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

#### At the following NLH Member Organization(s):

• All NLH Member Organizations (excluding Mayo)

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

- Clinical staff using Annotations
- Nursing staff
- Providers

## **SmartZone Display Update**

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

## **SmartZone Display Panel Closed**

- SmartZone alerts will **no longer automatically open** upon accessing the patient chart.
- To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.

TESTING, BBCOOL 🗵		← List → 🛅 Recent マ MRN	Q, 🗸
TESTING, BBCOOL Allergies: No Known Allerg	gies	PCP: Primary Contact: View Details Record Exchange: Last sums 12	Notifications
≤ < > ▼ 🔒 Ambulatory	View	SC Full screen	2 minutes ago

## **Manually Open SmartZone**

**NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).

• **Only if** a SmartZone alert is triggered **while** in the patient chart, a **pop-up** displays in **lower, right corner** for 20 seconds; as this is an infrequent scenario, **click** Banner Bar Notifications to display Smart Zone alerts.



- **WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.
- WHEN: Thursday, April 3, 2025

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

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

## 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:

Clinical Staff

# **Vital Signs Update**

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.

Room			Patient Information	Clin	Nurse	Patient	t Details	X	¥	4	BP	HR	TEMP	RR	O2 SAT
ER,06 NPO		3	* <b>TESTING, PENELOPE</b> 35y F 🕄 🖸 🏹	М	MC	Dx: Al	bdominal pain	S 🗖		Aftei				- 20 -	93 !
ER,07			* <b>TESTING, ANDREW (</b> 61y F 👔 👔 🧔	М		Dx: N	ontraffic MVA i	njuri	В	efor	e	- 7130-	39.3	722	► 93
🚯 Оху	gen	Sat	turation			%SA1	93	🐼 Oxygen	Satu	ratio	n			%SAT	93
♦ SpC	2 M	oni	itoring Frequency				Continuo	SpO2 M	onito	oring	Freque	ncy			
♦ SpC	)2 Lo	cat	tion				<b>Right hand</b>	SpO2 Lo	catio	n					

WHY: The change will **enhance the visibility and communication** of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.

# From the Office of Health Informatics EHR Updates April 3 – April 9, 2025

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#### WHEN: Monday, April 7, 2025

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

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

#### 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:

• All Clinicians

## **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.
- WHEN: Tuesday, April 8, 2025

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

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

#### At the following NLH Member Organization(s):

- All NLH Member Organizations (excluding Mayo)
- **WHO:** The change will affect the following staff at the above noted locations:
  - All Staff

## **All F BILI with Calculation Updates**

- WHAT: Laboratory locations will align and use F BILI (with indirect calculation) order, allowing for a standardized reporting for this result across Laboratories performed within the system.
  - WHY: The update will standardize the reporting for Total Bilirubin, Direct Bilirubin, and Indirect sites.
- WHEN: Wednesday, April 9, 2025

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

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

#### At the following NLH Member Organization(s):

- NL AR Gould
- NL CA Dean
- NL Maine Coast

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

- Lab Staff
- Providers

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## Patch Medication Ordering and MAR Task Updates – effective 04/15/25

WHAT: Patch Medications have a MAR task to remove the patch. A MAR task for Patch-Off ONCE will now correspond to the last administration, based on the timing of the medication.

Patch Medication	ONCE Patch-Off Timing
Buprenorphine	7 day offset from admin
Fentanyl	Either <b>48 hour</b> <u>or</u> <b>72 hour</b> offset based on Frequency on order
Lidocaine	12 hour offset from admin
Nicotine	Either <b>24 hour</b> offset <u>or</u> "Bedtime" task based on Provider-Entered Removal Details
Nitroglycerin	12 hour offset from admin
Scopolamine	Either <b>12 hours, 24 hour</b> , or <b>72</b> <b>hour</b> offset based on Provider- Entered Removal Details

## Background-Nursing

- Currently, MAR tasks can be scheduled tasks for a particular time of day, while others are visible in the PRN section of MAR.
- The MAR task for Patch-off will correspond to the time in which the patch medication was charted and applied.

### **Pharmacist**

- The update will allow the ONCE Patch-off order to auto-verify.
- Please be aware, with the update, you will no longer see the previous scheduled or PRN orders in verification queue when verifying medication order for a patch.

### **Provider**

• Nicotine and Scopolamine Patches: a new required field will determine how long after patch application, it should be removed.

**NOTE**: Nurses may have to look slightly ahead or behind current time on the MAR to locate the applicable Patch off task.

# From the Office of Health Informatics EHR Updates April 3 – April 9, 2025 Page 119 of 124

• Fentanyl patches: the Frequency field will determine offset.

Details for SCOPOLAMI     Details for SCOPOLAMI	ne (scopolamine 1 mg	/72 hr transdermal film, extended release)		
+ <b>%</b> h. 🔍 🗉			Remaining Admini	strations: 1
*Remove scopolamine patch:	· · ·	*Dose:	1	]
*Dose Unit:	12 hours post placement 24 hours post placement	o Freetext Dose:		]
Drug Form:	72 hours post placement	*Route of Administration:	TRANSDERMAL	
*Frequency:	Every 72 Hour Interval 🔹	Frequency Instruction:	· ·	
PRN:	🔿 Yes 💿 No	PRN Reason:	~	
Indication:	•	Priority:	~	
Patient's Own Meds:	C Yes C No	*Requested Start Date/Time:	03/27/2025 9:00 EDT	]
Duration:	365	Duration Unit:	Days 🗸	
Stop Type:	Hard Stop 🗸	Stop Date/Time:	03/25/2026 🔹 💌 0900	► ED
Rate:		Rate Unit:	~	
Infuse Over:		Infuse Over Unit:	·	
Order Comments:		Special Instructions:		

- WHY: To further refine nursing MAR tasking for medication patches, provide a **scheduled** Patch-off task, and increase precise Patch-off tasking and removal.
- WHEN: Tuesday, April 15, 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:
  - Nursing
  - Pharmacists
  - Providers

# **Registration Staff**

# **Newborn Birth Time Registration Field Update**

**WHAT:** A new **Birth Time Registration** field will be added to the Registration Conversation and Quick Registration for individuals born in the last 48 hours.

NLH Add/Modify Person				
Medical Record Number:	Social Security Number:	* Birth Date:	Birth Time:	
		••/••/•••	1 ×	

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**NOTE**: There is no workflow change only the addition of the Birth Time Registration Field.

- WHY: Registration does not currently have the capability to update birth times for newborns transferred from outside our organization or born enroute to our organization. The enhancement will enable staff who register newborns to accurately document the birth time within 48 hours of birth.
- WHEN: Effective Immediately

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

• Acute/Inpatient (to include ED)

#### At the following NLH Member Organization(s):

• All NLH Member Organizations (Excluding NL Acadia and Mayo)

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

- Registration Staff
- Unit Clerks
- WH Nursing Staff

# Therapies: Occupational, Physical, Speech, & Respiratory

## **All Ambulatory & Inpatient Areas**

## **SmartZone Display Update**

**WHAT:** SmartZone notification alerts will **no longer automatically open** when accessing the patient chart.

## **SmartZone Display Panel Closed**

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• To **view** an alert, click **Notifications** within the **Banner Bar** to open the SmartZone panel display.

TESTING, BBCOOL 🗵		← List → 🛅 Recent マ MRN	Q, 🕶
TESTING, BBCOOI Allergies: No Known	_ Allergies	PCP: Primary Contact: View Details	Notifications
Code:	eLos:	Record Exchange: Last sync 12	
🔮 < 🔿 🝷 👘 Ambula	atory View	🔀 Full screen 🗧 Print 🌈	2 minutes ago

# Manually Open SmartZone

- **NOTE:** It is **important to click the Notifications Bell Icon** in the Banner Bar to view the SmartZone alert(s).
  - Only if a SmartZone alert is triggered while in the patient chart, a **pop-up** displays in **lower, right corner** for 20 seconds; as this is an infrequent scenario, **click** Banner Bar Notifications to display Smart Zone alerts.



- **WHY:** The SmartZone display panel overlaps important clinical data, forcing clinicians to immediately close the SmartZone panel each time.
- WHEN: Thursday, April 3, 2025
- WHERE: The change will affect the following venue(s):
  - Acute/Inpatient (to include ED & Peri-Op)
  - Ambulatory/WIC

## 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:

• Clinical Staff

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# Vital Signs Update

WHAT: Oxygen Saturation and SpO2 vitals will reflect normal and critical ranges when documented in the patient chart. These ranges will change color, depending on the result value.



- WHY: The change will **enhance the visibility and communication** of Oxygen Saturation and SpO2 out-of-range results, as previously these vitals did not have any set values.
- WHEN: Monday, April 7, 2025

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

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

#### 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:
  - All Clinicians

## **Patient Demographics Update**

- WHAT: Relationships, located within Demographics on the table of contents menu, is being removed. Utilize the Insurance table of contents menu option to locate the relationships and contact information for the patient.
  - WHY: The Patient Insurance & Demographics within the Insurance table of contents area of the chart provides the most up to date patient relationships and should be used to review a patient's guardian, NOK, or other pertinent relationships.

#### WHEN: Tuesday, April 8, 2025

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

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

### At the following NLH Member Organization(s):

- All NLH Member Organizations (excluding Mayo)
- **WHO:** The change will affect the following staff at the above noted locations:
  - All Staff

## **Inpatient**

# Implementation of Multi-Disciplinary Rounds Tool: Task Updates – EMMC CCU P5, ICU & KPO3

WHAT: Clinical staff will start seeing additional tasks within their task lists. Each discipline may receive a task determined by multidisciplinary rounds as identified barriers to patient discharge.

These tasks will now be coming to the tasks list due to a change in the Multidisciplinary rounds process. The manual process is being replaced with a new electronic MDR tool that communicates bidirectionally with Cerner to assist in a more appropriate patient discharge with all needed requirements.

- **WHY:** The implementation will aid in managing patient flow and ensure orders are complete for safe and timely patient discharge.
- WHEN: Tuesday, April 8, 2025
- WHERE: The change will affect the following venue(s):
  - Acute/Inpatient

## At the following NLH Member Organization(s):

• NL EMMC

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

- Nursing
- <u>Dietitians</u>
- <u>Respiratory Therapy</u>

- <u>Rehab Therapy</u>
- <u>Pharmacy</u>
- <u>Care Management/Social</u>
   <u>Worker</u>

For questions regarding process and/or policies, please contact your unit's Clinical Educator or Health Informaticist. For any other questions please contact the Customer Support Center at: 207-973-7728 or 1-888-827-7728.