



Northern Light Health Oracle Health (Cerner) Millennium EHR Updates

Week of July 31 – August 6

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Behavioral Health Staff

Ambulatory

Pressure Injury Optimization – Education Open July 7 – Deadline August 3

WHAT: The workflow for documenting a Validated Pressure Injury is changing.

Documentation Changes

- New dynamic group – Validated Pressure Injury
- Updates to the Incision/Wound/Skin dynamic group

WHY: The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.

- Validated Pressure Injury Abnormality Type was being updated back to Pressure Injury – Suspected after the wound was validated resulting in another request for evaluation going to the wound validator.
- Present on Admission documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: Monday, August 4, 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:

- Nursing
- Wound/Ostomy Nurses
- Wound Validators

EDUCATION STRATEGY: Online Promise Point Simulation Education

Nursing

- Curriculum: Annual Pressure Injury Prevention
-

EHR Updates

Week of July 31 – August 6

- Course: NOLH-1425.2025 ACTCLN Document a Suspected Pressure Injury - Duration 12 mins
 - URL: www.promisepoint.com/northernlighthouse

Wound/Ostomy Nurses and Wound Validators

- Curriculum: Pressure Injury Wound Validator
- Course: NOLH-1065.55 ACTCLN Pressure Injury Wound Validator - Duration 16 mins
 - URL: www.promisepoint.com/northernlighthouse

- **Flyer-based education**

HOW:

Required Online Education in the PromisePoint Community

- **Online Simulator Education – Available Now!**
 - URL: www.promisepoint.com/northernlighthouse
 - Username:
 - **NLH Employees:** Seven-digit employee number with leading zeros, e.g., 0098765
 - **Contracted Employees:** Username provided at the time of hire
 - **Initial Password:** password
 - Initial password is all lowercase.
 - If PromisePoint password has been previously set-up, please use that password.
 - **Need a password reset?** [Click this link to reach out to Health Informatics](#) (resets are available M-F, 08:00-16:30).



IMPORTANT: Video education must be completed before go-live.

KEY UPCOMING DATES:

Date: July 7

PromisePoint Simulation Education Opens

Date: August 3

DUE: All Assigned Education

Date: August 4

Go-Live (Focused Rounding by Health Informatics)

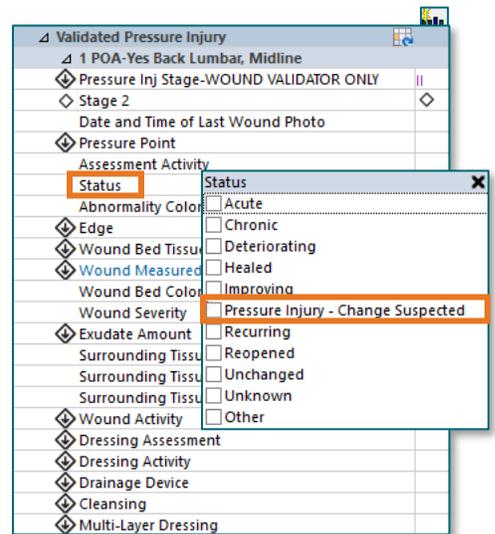
Click to review [Go-Live Support Schedule](#)

Pressure Injury Optimization

WHAT: The workflow for documenting a **Validated Pressure Injury** is changing.

New Validated Pressure Injury Dynamic Group

- Once a wound is **validated** as a **Pressure Injury**, the existing **Incision/Wound/Skin dynamic group** for that wound will be inactivated by the Wound Validator.
- Wound validators will create a new **Validated Pressure Injury dynamic group**.
 - The **Validated Pressure Injury section** will need to be pulled into view by the Wound Validator using **Customize View**.
 - The Validated Pressure Injury dynamic group label will include **Pressure Injury on Admission (POA – Yes or POA – No), Pressure Injury Number, Location, Laterality, and Description** should match the **Incision/Wound/Skin** dynamic group label.



NOTE: POA will not flow to the IRF-PAI Report. POA will need to be entered manually in UDS.

- Nursing will document pressure injury wound assessments and dressings in the new Validated Pressure Injury dynamic group.
- If the wound condition changes, nurses will document the **Status as Pressure Injury- Change Suspected**.

A task for re-evaluation will go to the wound validators

NOTE: Nursing should NOT update the Pressure Injury Stage.

Existing Validated Pressure Injuries

- **Patients** who have an **existing Validated Pressure Injury** at the time of go-live should have the existing **Incision/Wound/Skin** dynamic group **inactivated** and a **new Validated Pressure Injury dynamic group** created.

EHR Updates

Week of July 31 – August 6

- **Pressure Inj on Admission** has been added to the label.
- Document **Pressure Inj Stage-Wound Validators Only**.
- Document the same **Date and Time of Last Wound Photo** as seen in the inactivated Incision/Wound/Skin dynamic group.
 - This will ensure nurses will receive the task to take the next wound photo.
- Document other information as needed.

Other Changes

- **Pressure Injury – Suspected Change** and **Validate Pressure Injury** have been removed from the **Incision/Wound/Skin Abnormality Type**.
- **Next Photo Date** has been removed from the **Incision/Wound/Skin** dynamic group.
 - **Date and Time of Last Wound Photo** will fire a CareCompass task seven days from the entered date prompting nursing to take the next photo.

Click [here](#) for **Wound Care – Pressure Injury Validator**.

Click [here](#) for **Wound Care Inpatient and ED Nurse workflow**.

Click [here](#) for information on the **Wound/Ostomy Care Multi-Patient Task List**.

Click [here](#) for **WOC (Wound/Ostomy/Continence) workflow**.

Click [here](#) for **Media Gallery Workflow**.

WHY: The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.

- **Validated Pressure Injury Abnormality Type** was being updated back to **Pressure-Injury – Suspected** after the wound was validated resulting in another request for evaluation going to the wound validator.
- **Present on Admission** documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: Monday, August 4, 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:

- Nursing
- Wound/Ostomy Nurses
- Wound Validators

Reminder: Activating Correct Lab Orders – *Effective Immediately*

WHAT: We would like to remind all staff of the importance of activating the correct lab orders, especially those ordered in oncology treatment regimens.

WHY: There have been instances where lab or clinical staff inadvertently activated lab orders that were part of a future treatment day within an oncology regimen. This can lead to confusion, delays, or the absence of necessary orders when the patient presents for treatment.

HOW: Please keep the following in mind when activating future lab orders:

- **Do not activate lab orders associated with a treatment regimen** unless the patient is having labs drawn for their treatment.
- **Always verify the lab order date** to ensure it matches the intended date of service. Orders for future treatment days should not be used prematurely.

Reviewing Lab Order Details

In the **Department Order Entry** tool, there are several indicators that a lab order is part of a regimen or was placed by an oncology provider:

- A **PowerPlan icon**  next to the lab order. Hovering over this icon will show which PowerPlan the order belongs to.
 - The **Grace Period date**, which helps determine the appropriate activation window.
-

EHR Updates

Week of July 31 – August 6

- The **Ordering Location** and **Ordering Provider**, which can provide additional context.

Order	Grace Period	Order Date	Provider	Ordering Location	Details
Magnesium Level	03/06/2024 - 03/06/2024	03/05/2024	ONC_E	ONC_E	BLOOD, Expedite, Order for Future Visit (Select NO for Quest), *Est. Start: 03/06/24, ONCE, Cancer, 03/06/24 7:30:00 EST, 0, None, Day 1
CBC with Differential	03/07/2024 - 03/07/2024	01/18/2024	ONC_E	ONC_E	BLOOD, Routine, Order for Future Visit (Select NO for Quest), Start: 03/07/24, ONCE, Cancer, 03/07/24 12:30:00 EST, 0, Days 8
Comprehensive Metabolic Panel	03/07/2024 - 03/07/2024	01/18/2024	ONC_E	ONC_E	BLOOD, Routine, Order for Future Visit (Select NO for Quest), Start: 03/07/24, ONCE, Cancer, 03/07/24 12:30:00 EST, 0, Days 8
CBC with Differential	03/11/2024 - 03/11/2024	01/18/2024	ONC_E	ONC_E	BLOOD, Routine, Order for Future Visit (Select NO for Quest), Start: 03/11/24, ONCE, Cancer, 03/11/24 8:30:00 EDT, 0, Days 8
Order: CBC with Differential		01/18/2024	ONC_E	ONC_E	BLOOD, Routine, Order for Future Visit (Select NO for Quest), Start: 03/11/24, ONCE, Cancer, 03/11/24 8:30:00 EDT, 0, Days 8
PowerPlan:					
ONCP PACLitaxel 80 mg/m2 (D1,8,15,22) + bevacizumab 10 mg/kg		03/05/2024	ONC_E	ONC_E	BLOOD, Expedite, Order for Future Visit (Select NO for Quest), *Est. Start: 03/13/24, ONCE, Cancer, 03/13/24 7:30:00 EDT, 0, None, Day 8
(D1,15), 28D - Cycle 2, Days 8		03/13/2024	ONC_MCH	ONC_MCH	BLOOD, Routine, Order for Future Visit (Select NO for Quest), *Est. Start: 03/14/24, ONCE, Cancer, 03/14/24

To view lab order details in PowerChart, navigate to the **Orders** tab and review the **Order Details** column. This section provides key information such as whether the order was placed as part of a PowerPlan, the estimated start date, and the ordering provider. Reviewing these details helps ensure the correct lab order is activated.

NOTE: Lab staff – please refer to the following [flyer](#) on how to update views in PowerChart.

WHEN: Effective Immediately

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

- Ambulatory/WIC
- Lab Locations

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:

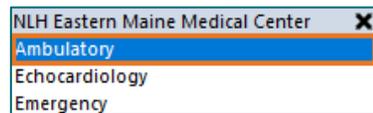
- Clinical Staff
- Lab Staff
- Patient Service Center Staff

Post Fall Evaluation – Ambulatory Location Option Added

WHAT: A new **Ambulatory** option has been added to the list of location selections for each NLH Facility within the **Post Fall Evaluation** section in iView.

Documenting Post Fall Evaluation for an Ambulatory Location

- Select the applicable facility in the **NLH Facility** field.
- Choose **Ambulatory** from the list of locations/areas.



A screenshot of the "Post Fall Evaluation" form. The form has a blue header with a checkmark icon. The fields are:

Date, Time of Patient Fall	07/24/2025 10:12
NLH Facility	Eastern Maine Medical Center
NLH Eastern Maine Medical Center	Ambulatory
EMMC Amb Location	
Parent/Guardian Notified	

- A free-text field opens. Enter the name of the ambulatory location.
- Continue filling out the remaining applicable post fall evaluation fields.

NOTE: The update will apply to all iView bands that include the Post Fall Evaluation section.

WHY: The enhancement provides clinical staff with a designated area to accurately document post-fall evaluations occurring in ambulatory care settings, ensuring more precise and consistent reporting.

WHEN: Wednesday, August 6, 2025

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

- 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
-

EHR Updates

Week of July 31 – August 6

Inpatient

Pressure Injury Optimization – Education Open July 7 – Deadline August 3

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 - **Initial Password:** password
 - Initial password is all lowercase.
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KEY UPCOMING DATES:

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Date: August 3 **DUE: All Assigned Education**

Date: August 4 **Go-Live (Focused Rounding by Health Informatics)**
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EHR Updates

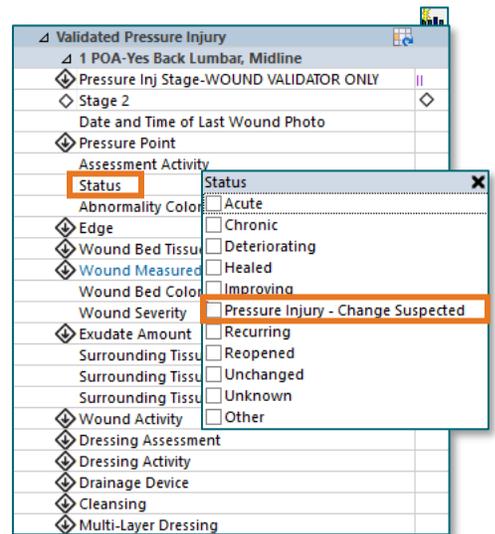
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Click [here](#) for **Wound Care – Pressure Injury Validator**.

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WHEN: Monday, August 4, 2025

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

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

EHR Updates

Week of July 31 – August 6

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
- Wound/Ostomy Nurses
- Wound Validators

Auto-Disassociation with Enhanced Patient2Device Association (EP2DA) Update (Excludes EMMC and Mercy)

WHAT: Rules have been established to auto-disassociate the monitor and ventilator when a patient's registration location changes:

- Transfers from one nursing unit to another.
- One room to another within the same nursing unit.
- Transferred to another bed within the same room.
- When the patient encounter is discharged (already occurring).

NOTE: PACU will need to **manually disassociate** patients from the monitor who are **returning** to a nursing unit.

If a patient encounter is accidentally discharged, the patient needs to be reassociated to the monitor.

When a patient is moved from one location to another, the monitor and ventilator if applicable, will need to be reassociated to the patient.

WHY: Currently monitors and ventilators that are not manually disassociated from a patient remain associated to the patient. When another patient is placed on that monitor, it can lead to wrong information flowing into a patient chart. The auto-disassociation will reduce the likelihood of patient's data going to another patient's chart.

WHEN: Monday, August 4, 2025

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

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

At the following NLH Member Organization(s):

- NL Acadia Hospital
- NL AR Gould Hospital
- NL Blue Hill Hospital
- NL CA Dean Hospital
- NL Maine Coast Hospital
- NL Sebecook Valley Hospital

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

- Nurses
- Nurse Techs
- Respiratory Therapists

Dietary Parameter Update – *Go-Live August 12*

WHAT: Diet Parameters within the Diet Order will be updated to include **Pescatarian.**

The screenshot shows a web-based form titled "Details for Diet". It has several tabs: "Details", "Order Comments", and "Diagnoses". The "Details" tab is active. The form contains various fields for diet orders, including:

- *Start Meal: Breakfast
- *Diet Type: Regular Diet
- Fluid Restriction: (empty dropdown)
- Disposable Tray: Yes No
- Advance End Diet: (empty dropdown)
- Between Meal Nourishment: (empty dropdown)
- Carbohydrates Permitted/meal: (empty dropdown)
- Dietary Protein: (empty dropdown)
- Dietary Phosphorus: (empty dropdown)
- *Order Start Date/Time: 07/28/2025 1317 EDT
- Dietary Parameters: **Pescatarian** (highlighted with a red box)
- Diet Consistency: (empty dropdown)
- Advance As Tolerated: Yes No
- NPO Exception: (empty dropdown)
- Calories Permitted: (empty dropdown)
- Dietary Sodium: (empty dropdown)
- Dietary Potassium: (empty dropdown)
- Dietary Fortifier/Additive: (empty dropdown)

WHY: The update is being implemented to accommodate patient dietary preferences, such as a Regular diet with a Pescatarian option.

WHEN: Tuesday, August 12, 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:

EHR Updates

Week of July 31 – August 6

- Nutritionists
- Providers

Care Managers

Inpatient

Custodial Care Order & Capacity Management Icon Update – EMMC Only – Go-Live August 12

WHAT: PowerChart Update

- The **Custodial Care EMMC** has been added to the **Decision to Admit** order within the **Patient Placement** dropdown.

Details for **Decision to Admit**

Details | Order Comments | Diagnoses

+ | | | |

*Date/Time of Admit Decision: 07/21/2025 1444 EDT Reviewed Date/Time for Accuracy: Yes No

Attending Physician: [] Admitting Physician: []

Patient Placement: **Custodial Care EMMC** Patient Type: **Outpatient Extended Recover...**

Services: [] Disease Alert: []

Isolation: Yes No Reason for Admission: []

Special Placement Needs: [] Plan for OR before moving to floor: Yes No

Duration: [] Duration Unit: []

Transport Mode: [] Special Instructions: []

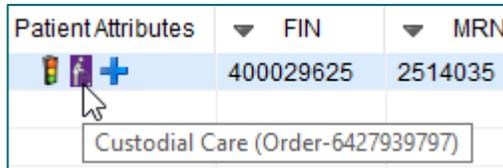
Capacity Management Enhancement

- The Blue Plus icon will appear under the patient attributes on the transfer list when the **Decision to Admit** has been placed in the ED.

Patient Attributes	FIN	MRN	G...	A	Patient
	400029625	2514035	Male	49 y...	Emergency

Placement: Custodial Care (Order-6427937411); Placement: Custodial Care (Order-6427938463)

- Once the Admission order has been placed the **Street Light** icon and a **NEW Custodial Care** icon  indicating the patient's status as Custodial Care.



Patient Attributes	FIN	MRN
	400029625	2514035

Custodial Care (Order-6427939797)

WHY:

- Better Bed Management: Ensures patients are placed in the most appropriate setting based on care needs.
- Improved Workflow: Reduces delays and confusion by clearly identifying custodial care, which is different from acute or skilled nursing care.
- Faster Bed Assignments: Enables quicker and more accurate bed assignments by Bed Managers.
- Clear Visual Cues: The new Custodial Care icon provides an at-a-glance indicator, saving time and reducing errors.
- Enhanced Communication: Aligns clinical staff and the transfer center on patient status for smoother transitions.

WHEN: Tuesday, August 12, 2025

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

- Acute/Inpatient (to include ED)

At the following NLH Member Organization(s):

- EMMC Only

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

- Care Management
 - Nursing
 - Providers
 - Transfer Center
-

EHR Updates

Week of July 31 – August 6

Clinical Decision Support Updates

Weekly Newsletter

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

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

Release Date	Venues Affected	CDS Tool	Summary
8/7/2025	Inpatient	CARD Pacemaker ICD Inpatient	Chlorhexidine update from scannable medication to procedure prep.
8/7/2025	Inpatient	CARD Structural Heart Inpatient	Chlorhexidine update from scannable medication to procedure prep.
8/7/2025	Inpatient	CARD SURG Pre Op	Chlorhexidine update from scannable medication to procedure prep.
8/7/2025	Outpatient	OP CARD Hybrid Afib Ablation Pre Op	Chlorhexidine update from scannable medication to procedure prep.
8/7/2025	Outpatient	OP CARD Pacemaker ICD Ablation	Chlorhexidine update from scannable medication to procedure prep.
8/7/2025	Outpatient	OP CARD Structural Heart	Chlorhexidine update from scannable medication to procedure prep.

Lab

Reminder: Activating Correct Lab Orders – **Effective Immediately**

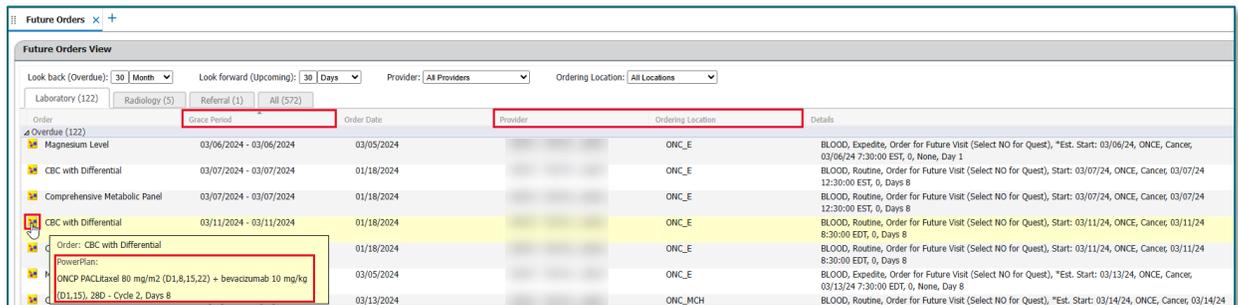
- WHAT:** We would like to remind all staff of the importance of activating the correct lab orders, especially those ordered in oncology treatment regimens.
- WHY:** There have been instances where lab or clinical staff inadvertently activated lab orders that were part of a future treatment day within an oncology regimen. This can lead to confusion, delays, or the absence of necessary orders when the patient presents for treatment.
- HOW:** Please keep the following in mind when activating future lab orders:
- Do not activate lab orders associated with a treatment regimen unless the patient is having labs drawn for their treatment.
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- **Always verify the lab order date** to ensure it matches the intended date of service. Orders for future treatment days should not be used prematurely.

Reviewing Lab Order Details

In the **Department Order Entry** tool, there are several indicators that a lab order is part of a regimen or was placed by an oncology provider:

- A **PowerPlan icon**  next to the lab order. Hovering over this icon will show which PowerPlan the order belongs to.
- The **Grace Period date**, which helps determine the appropriate activation window.
- The **Ordering Location** and **Ordering Provider**, which can provide additional context.



To view lab order details in PowerChart, navigate to the **Orders** tab and review the **Order Details** column. This section provides key information such as whether the order was placed as part of a PowerPlan, the estimated start date, and the ordering provider. Reviewing these details helps ensure the correct lab order is activated.

NOTE: Lab staff – please refer to the following [flyer](#) on how to update views in PowerChart.

WHEN: Effective Immediately

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

- Ambulatory/WIC
- Lab Locations

EHR Updates

Week of July 31 – August 6

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
- Lab Staff
- Patient Service Center Staff

Leadership

Ambulatory/WIC

Pressure Injury Optimization – Education Open July 7 – Deadline August 3

WHAT: The workflow for documenting a Validated Pressure Injury is changing.

Documentation Changes

- New dynamic group – Validated Pressure Injury
- Updates to the Incision/Wound/Skin dynamic group

WHY: The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.

- Validated Pressure Injury Abnormality Type was being updated back to Pressure Injury – Suspected after the wound was validated resulting in another request for evaluation going to the wound validator.
- Present on Admission documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: Monday, August 4, 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:

- Nursing
- Wound/Ostomy Nurses
- Wound Validators

EDUCATION STRATEGY: **Online Promise Point Simulation Education**

Nursing

- Curriculum: Annual Pressure Injury Prevention
- Course: NOLH-1425.2025 ACTCLN Document a Suspected Pressure Injury - Duration 12 mins
 - URL: www.promisepoint.com/northernlighthouse

Wound/Ostomy Nurses and Wound Validators

- Curriculum: Pressure Injury Wound Validator
- Course: NOLH-1065.55 ACTCLN Pressure Injury Wound Validator - Duration 16 mins
 - URL: www.promisepoint.com/northernlighthouse

○ **Flyer-based education**

HOW: **Required Online Education in the PromisePoint Community**

• **Online Simulator Education – Available Now!**

○ URL: www.promisepoint.com/northernlighthouse

○ Username:

- **NLH Employees:** Seven-digit employee number with leading zeros, e.g., 0098765
- **Contracted Employees:** Username provided at the time of hire

○ **Initial Password:** password

- Initial password is all lowercase.
- If PromisePoint password has been previously set-up, please use that password.

○ **Need a password reset?** [Click this link to reach out to Health Informatics](#) (resets are available M-F, 08:00-16:30).



IMPORTANT: Video education must be completed before go-live.

EHR Updates

Week of July 31 – August 6

**KEY
UPCOMING
DATES:**

Date: July 7

PromisePoint Simulation Education Opens

Date: August 3

DUE: All Assigned Education

Date: August 4

Go-Live (Focused Rounding by Health Informatics)
Click to review [Go-Live Support Schedule](#)

Emergency

Pressure Injury Optimization – Education Open July 7 – Deadline August 3

WHAT: The workflow for documenting a Validated Pressure Injury is changing.

Documentation Changes

- New dynamic group – Validated Pressure Injury
- Updates to the Incision/Wound/Skin dynamic group

WHY: The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.

- Validated Pressure Injury Abnormality Type was being updated back to Pressure Injury – Suspected after the wound was validated resulting in another request for evaluation going to the wound validator.
- Present on Admission documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: Monday, August 4, 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:

- Nursing
 - Wound/Ostomy Nurses
 - Wound Validators
-

EDUCATION STRATEGY: **Online Promise Point Simulation Education**

Nursing

- Curriculum: Annual Pressure Injury Prevention
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Wound/Ostomy Nurses and Wound Validators

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Date: July 7

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Date: August 3

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Date: August 4

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EHR Updates

Week of July 31 – August 6

Inpatient

Pressure Injury Optimization – Education Open July 7 – Deadline August 3

WHAT: The workflow for documenting a Validated Pressure Injury is changing.

Documentation Changes

- New dynamic group – Validated Pressure Injury
- Updates to the Incision/Wound/Skin dynamic group

WHY: The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.

- Validated Pressure Injury Abnormality Type was being updated back to Pressure Injury – Suspected after the wound was validated resulting in another request for evaluation going to the wound validator.
- Present on Admission documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: Monday, August 4, 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:

- Nursing
- Wound/Ostomy Nurses
- Wound Validators

EDUCATION STRATEGY: Online Promise Point Simulation Education

Nursing

- Curriculum: Annual Pressure Injury Prevention
-

- Course: NOLH-1425.2025 ACTCLN Document a Suspected Pressure Injury - Duration 12 mins
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Wound/Ostomy Nurses and Wound Validators

- Curriculum: Pressure Injury Wound Validator
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○ **Flyer-based education**

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IMPORTANT: Video education must be completed before go-live.

**KEY
UPCOMING
DATES:**

Date: July 7 **PromisePoint Simulation Education Opens**

Date: August 3 **DUE: All Assigned Education**

Date: August 4 **Go-Live (Focused Rounding by Health Informatics)**

Click to review [Go-Live Support Schedule](#)

EHR Updates

Week of July 31 – August 6

Peri-Op

Pressure Injury Optimization – Education Open July 7 – Deadline August 3

WHAT: The workflow for documenting a Validated Pressure Injury is changing.

Documentation Changes

- New dynamic group – Validated Pressure Injury
- Updates to the Incision/Wound/Skin dynamic group

WHY: The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.

- Validated Pressure Injury Abnormality Type was being updated back to Pressure Injury – Suspected after the wound was validated resulting in another request for evaluation going to the wound validator.
- Present on Admission documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: Monday, August 4, 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:

- Nursing
- Wound/Ostomy Nurses
- Wound Validators

EDUCATION STRATEGY: Online Promise Point Simulation Education

Nursing

- Curriculum: Annual Pressure Injury Prevention
-

- Course: NOLH-1425.2025 ACTCLN Document a Suspected Pressure Injury - Duration 12 mins
 - URL: www.promisepoint.com/northernlighthealth

Wound/Ostomy Nurses and Wound Validators

- Curriculum: Pressure Injury Wound Validator
- Course: NOLH-1065.55 ACTCLN Pressure Injury Wound Validator - Duration 16 mins
 - URL: www.promisepoint.com/northernlighthealth

○ **Flyer-based education**

HOW:

Required Online Education in the PromisePoint Community

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IMPORTANT: Video education must be completed before go-live.

**KEY
UPCOMING
DATES:**

Date: July 7 **PromisePoint Simulation Education Opens**

Date: August 3 **DUE: All Assigned Education**

Date: August 4 **Go-Live (Focused Rounding by Health Informatics)**
Click to review [Go-Live Support Schedule](#)

EHR Updates

Week of July 31 – August 6

Nursing, CNA, Medical Assistants

Ambulatory/WIC

Pressure Injury Optimization – Education Open July 7 – Deadline August 3

WHAT: The workflow for documenting a Validated Pressure Injury is changing.

Documentation Changes

- New dynamic group – Validated Pressure Injury
- Updates to the Incision/Wound/Skin dynamic group

WHY: The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.

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- Present on Admission documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: Monday, August 4, 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:

- Nursing
- Wound/Ostomy Nurses
- Wound Validators

EDUCATION STRATEGY: Online Promise Point Simulation Education

Nursing

- Curriculum: Annual Pressure Injury Prevention
-

- Course: NOLH-1425.2025 ACTCLN Document a Suspected Pressure Injury - Duration 12 mins
 - URL: www.promisepoint.com/northernlighthealth

Wound/Ostomy Nurses and Wound Validators

- Curriculum: Pressure Injury Wound Validator
- Course: NOLH-1065.55 ACTCLN Pressure Injury Wound Validator - Duration 16 mins
 - URL: www.promisepoint.com/northernlighthealth

- **Flyer-based education**

HOW:

Required Online Education in the PromisePoint Community

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IMPORTANT: Video education must be completed before go-live.

KEY UPCOMING DATES:

Date: July 7 **PromisePoint Simulation Education Opens**

Date: August 3 **DUE: All Assigned Education**

Date: August 4 **Go-Live (Focused Rounding by Health Informatics)**
Click to review [Go-Live Support Schedule](#)

EHR Updates

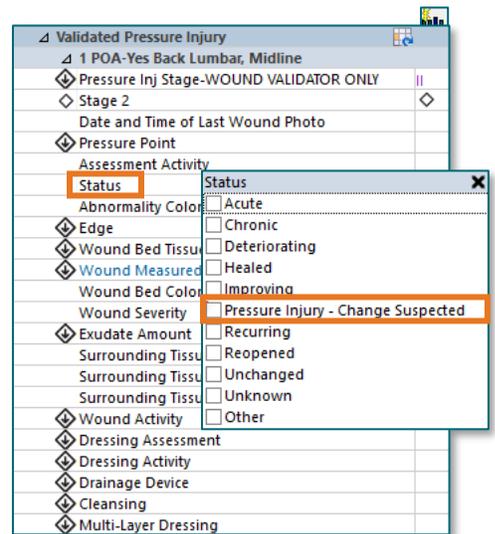
Week of July 31 – August 6

Pressure Injury Optimization

WHAT: The workflow for documenting a **Validated Pressure Injury** is changing.

New Validated Pressure Injury Dynamic Group

- Once a wound is **validated** as a **Pressure Injury**, the existing **Incision/Wound/Skin dynamic group** for that wound will be inactivated by the Wound Validator.
- Wound validators will create a new **Validated Pressure Injury dynamic group**.
 - The **Validated Pressure Injury section** will need to be pulled into view by the Wound Validator using **Customize View**.
 - The Validated Pressure Injury dynamic group label will include **Pressure Injury on Admission (POA – Yes or POA – No), Pressure Injury Number, Location, Laterality, and Description** should match the **Incision/Wound/Skin dynamic group label**.



NOTE: POA will not flow to the IRF-PAI Report. POA will need to be entered manually in UDS.

- Nursing will document pressure injury wound assessments and dressings in the new Validated Pressure Injury dynamic group.
- If the wound condition changes, nurses will document the **Status as Pressure Injury- Change Suspected**.

A task for re-evaluation will go to the wound validators

NOTE: Nursing should NOT update the Pressure Injury Stage.

Existing Validated Pressure Injuries

- **Patients** who have an **existing Validated Pressure Injury** at the time of go-live should have the existing **Incision/Wound/Skin dynamic group inactivated** and a **new Validated Pressure Injury dynamic group** created.

- **Pressure Inj on Admission** has been added to the label.
- Document **Pressure Inj Stage-Wound Validators Only**.
- Document the same **Date and Time of Last Wound Photo** as seen in the inactivated Incision/Wound/Skin dynamic group.
 - This will ensure nurses will receive the task to take the next wound photo.
- Document other information as needed.

Other Changes

- **Pressure Injury – Suspected Change** and **Validate Pressure Injury** have been removed from the **Incision/Wound/Skin Abnormality Type**.
- **Next Photo Date** has been removed from the **Incision/Wound/Skin** dynamic group.
 - **Date and Time of Last Wound Photo** will fire a CareCompass task seven days from the entered date prompting nursing to take the next photo.

Click [here](#) for **Wound Care – Pressure Injury Validator**.

Click [here](#) for **Wound Care Inpatient and ED Nurse workflow**.

Click [here](#) for information on the **Wound/Ostomy Care Multi-Patient Task List**.

Click [here](#) for **WOC (Wound/Ostomy/Continence) workflow**.

Click [here](#) for **Media Gallery Workflow**.

WHY: The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.

- **Validated Pressure Injury Abnormality Type** was being updated back to **Pressure-Injury – Suspected** after the wound was validated resulting in another request for evaluation going to the wound validator.
- **Present on Admission** documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: Monday, August 4, 2025

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

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

EHR Updates

Week of July 31 – August 6

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
- Wound/Ostomy Nurses
- Wound Validators

Reminder: Activating Correct Lab Orders – **Effective Immediately**

WHAT: We would like to remind all staff of the importance of activating the correct lab orders, especially those ordered in oncology treatment regimens.

WHY: There have been instances where lab or clinical staff inadvertently activated lab orders that were part of a future treatment day within an oncology regimen. This can lead to confusion, delays, or the absence of necessary orders when the patient presents for treatment.

HOW: Please keep the following in mind when activating future lab orders:

- **Do not activate lab orders associated with a treatment regimen** unless the patient is having labs drawn for their treatment.
- **Always verify the lab order date** to ensure it matches the intended date of service. Orders for future treatment days should not be used prematurely.

Reviewing Lab Order Details

In the **Department Order Entry** tool, there are several indicators that a lab order is part of a regimen or was placed by an oncology provider:

- A **PowerPlan icon**  next to the lab order. Hovering over this icon will show which PowerPlan the order belongs to.
 - The **Grace Period date**, which helps determine the appropriate activation window.
-

- The **Ordering Location** and **Ordering Provider**, which can provide additional context.

Order	Grace Period	Order Date	Provider	Ordering Location	Details
Magnesium Level	03/06/2024 - 03/06/2024	03/05/2024		ONC_E	BLOOD, Expedite, Order for Future Visit (Select NO for Quest), *Est. Start: 03/06/24, ONCE, Cancer, 03/06/24 7:30:00 EST, 0, None, Day 1
CBC with Differential	03/07/2024 - 03/07/2024	01/18/2024		ONC_E	BLOOD, Routine, Order for Future Visit (Select NO for Quest), Start: 03/07/24, ONCE, Cancer, 03/07/24 12:30:00 EST, 0, Days 8
Comprehensive Metabolic Panel	03/07/2024 - 03/07/2024	01/18/2024		ONC_E	BLOOD, Routine, Order for Future Visit (Select NO for Quest), Start: 03/07/24, ONCE, Cancer, 03/07/24 12:30:00 EST, 0, Days 8
CBC with Differential	03/11/2024 - 03/11/2024	01/18/2024		ONC_E	BLOOD, Routine, Order for Future Visit (Select NO for Quest), Start: 03/11/24, ONCE, Cancer, 03/11/24 8:30:00 EDT, 0, Days 8
Order: CBC with Differential		01/18/2024		ONC_E	BLOOD, Routine, Order for Future Visit (Select NO for Quest), Start: 03/11/24, ONCE, Cancer, 03/11/24 8:30:00 EDT, 0, Days 8
PowerPlan: ONCP PACLitaxel 80 mg/m2 (D1,8,15,22) + bevacizumab 10 mg/kg		03/05/2024		ONC_E	BLOOD, Expedite, Order for Future Visit (Select NO for Quest), *Est. Start: 03/13/24, ONCE, Cancer, 03/13/24 7:30:00 EDT, 0, None, Day 8
(D1,15), 28D - Cycle 2, Days 8		03/13/2024		ONC_MCH	BLOOD, Routine, Order for Future Visit (Select NO for Quest), *Est. Start: 03/14/24, ONCE, Cancer, 03/14/24

To view lab order details in PowerChart, navigate to the **Orders** tab and review the **Order Details** column. This section provides key information such as whether the order was placed as part of a PowerPlan, the estimated start date, and the ordering provider. Reviewing these details helps ensure the correct lab order is activated.

NOTE: Lab staff – please refer to the following [flyer](#) on how to update views in PowerChart.

WHEN: Effective Immediately

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

- Ambulatory/WIC
- Lab Locations

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
- Lab Staff
- Patient Service Center Staff

Post Fall Evaluation – Ambulatory Location Option Added

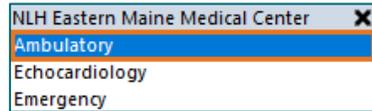
WHAT: A new **Ambulatory** option has been added to the list of location selections for each NLH Facility within the **Post Fall Evaluation** section in iView.

Documenting Post Fall Evaluation for an Ambulatory Location

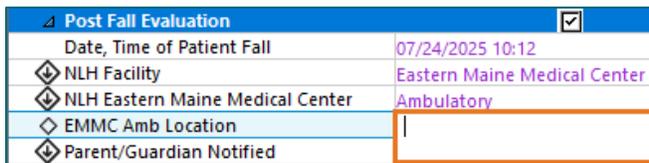
EHR Updates

Week of July 31 – August 6

- Select the applicable facility in the **NLH Facility** field.
- Choose **Ambulatory** from the list of locations/areas.



NLH Eastern Maine Medical Center	X
Ambulatory	
Echocardiology	
Emergency	



Post Fall Evaluation		<input checked="" type="checkbox"/>
Date, Time of Patient Fall	07/24/2025 10:12	
NLH Facility	Eastern Maine Medical Center	
NLH Eastern Maine Medical Center	Ambulatory	
EMMC Amb Location		
Parent/Guardian Notified		

- A free-text field opens. Enter the name of the ambulatory location.
- Continue filling out the remaining applicable post fall evaluation fields.

NOTE: The update will apply to all iView bands that include the Post Fall Evaluation section.

WHY: The enhancement provides clinical staff with a designated area to accurately document post-fall evaluations occurring in ambulatory care settings, ensuring more precise and consistent reporting.

WHEN: Wednesday, August 6, 2025

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

- 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

Emergency

Pressure Injury Optimization – Education Open July 7 – Deadline August 3

WHAT: The workflow for documenting a Validated Pressure Injury is changing.

Documentation Changes

- New dynamic group – Validated Pressure Injury
- Updates to the Incision/Wound/Skin dynamic group

- WHY:** The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.
- Validated Pressure Injury Abnormality Type was being updated back to Pressure Injury – Suspected after the wound was validated resulting in another request for evaluation going to the wound validator.
 - Present on Admission documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: Monday, August 4, 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:
- Nursing
 - Wound/Ostomy Nurses
 - Wound Validators

EDUCATION STRATEGY: **Online Promise Point Simulation Education**

Nursing

- Curriculum: Annual Pressure Injury Prevention
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 - URL: www.promisepoint.com/northernlighthouse

Wound/Ostomy Nurses and Wound Validators

- Curriculum: Pressure Injury Wound Validator
- Course: NOLH-1065.55 ACTCLN Pressure Injury Wound Validator - Duration 16 mins
 - URL: www.promisepoint.com/northernlighthouse

- **Flyer-based education**
-

EHR Updates

Week of July 31 – August 6

HOW: **Required Online Education in the PromisePoint Community**

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IMPORTANT: Video education must be completed before go-live.

KEY UPCOMING DATES:

Date: July 7

PromisePoint Simulation Education Opens

Date: August 3

DUE: All Assigned Education

Date: August 4

Go-Live (Focused Rounding by Health Informatics)

Click to review [Go-Live Support Schedule](#)

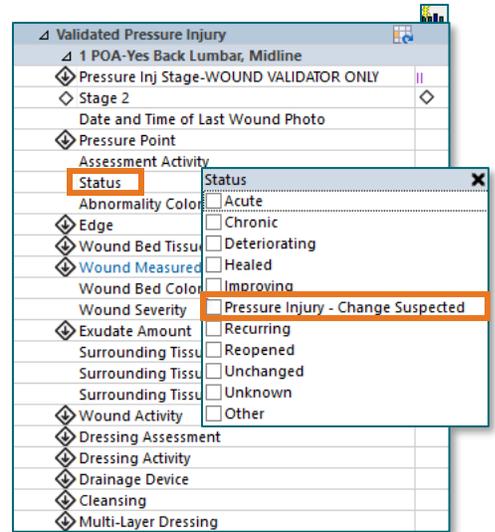
Pressure Injury Optimization

WHAT: The workflow for documenting a **Validated Pressure Injury** is changing.

New Validated Pressure Injury Dynamic Group

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 - Wound validators will create a new **Validated Pressure Injury dynamic group**.
-

- The **Validated Pressure Injury section** will need to be pulled into view by the Wound Validator using **Customize View**.
- The Validated Pressure Injury dynamic group label will include **Pressure Injury on Admission (POA – Yes or POA – No)**, **Pressure Injury Number**, **Location, Laterality**, and **Description** should match the **Incision/Wound/Skin** dynamic group label.



NOTE: POA will not flow to the IRF-PAI Report. POA will need to be entered manually in UDS.

- Nursing will document pressure injury wound assessments and dressings in the new Validated Pressure Injury dynamic group.
- If the wound condition changes, nurses will document the **Status as Pressure Injury- Change Suspected**.
A task for re-evaluation will go to the wound validators

NOTE: Nursing should NOT update the Pressure Injury Stage.

Existing Validated Pressure Injuries

- **Patients** who have an **existing Validated Pressure Injury** at the time of go-live should have the existing **Incision/Wound/Skin** dynamic group **inactivated** and a **new Validated Pressure Injury dynamic group** created.
 - **Pressure Inj on Admission** has been added to the label.
 - Document **Pressure Inj Stage-Wound Validators Only**.
 - Document the same **Date and Time of Last Wound Photo** as seen in the inactivated Incision/Wound/Skin dynamic group.
This will ensure nurses will receive the task to take the next wound photo.
 - Document other information as needed.

EHR Updates

Week of July 31 – August 6

Other Changes

- **Pressure Injury – Suspected Change** and **Validate Pressure Injury** have been removed from the **Incision/Wound/Skin Abnormality Type**.
- **Next Photo Date** has been removed from the **Incision/Wound/Skin** dynamic group.
 - **Date and Time of Last Wound Photo** will fire a CareCompass task seven days from the entered date prompting nursing to take the next photo.

Click [here](#) for **Wound Care – Pressure Injury Validator**.

Click [here](#) for **Wound Care Inpatient and ED Nurse workflow**.

Click [here](#) for information on the **Wound/Ostomy Care Multi-Patient Task List**.

Click [here](#) for **WOC (Wound/Ostomy/Continence) workflow**.

Click [here](#) for **Media Gallery Workflow**.

WHY: The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.

- **Validated Pressure Injury Abnormality Type** was being updated back to **Pressure-Injury – Suspected** after the wound was validated resulting in another request for evaluation going to the wound validator.
- **Present on Admission** documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: Monday, August 4, 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:

- Nursing
 - Wound/Ostomy Nurses
 - Wound Validators
-

Auto-Disassociation with Enhanced Patient2Device Association (EP2DA) Update (Excludes EMMC and Mercy)

WHAT: Rules have been established to auto-disassociate the monitor and ventilator when a patient's registration location changes:

- Transfers from one nursing unit to another.
- One room to another within the same nursing unit.
- Transferred to another bed within the same room.
- When the patient encounter is discharged (already occurring).

NOTE: PACU will need to **manually disassociate** patients from the monitor who are **returning** to a nursing unit.

If a patient encounter is accidentally discharged, the patient needs to be reassociated to the monitor.

When a patient is moved from one location to another, the monitor and ventilator if applicable, will need to be reassociated to the patient.

WHY: Currently monitors and ventilators that are not manually disassociated from a patient remain associated to the patient. When another patient is placed on that monitor, it can lead to wrong information flowing into a patient chart. The auto-disassociation will reduce the likelihood of patient's data going to another patient's chart.

WHEN: **Monday, August 4, 2025**

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

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

At the following NLH Member Organization(s):

- NL Acadia Hospital
 - NL AR Gould Hospital
 - NL Blue Hill Hospital
 - NL CA Dean Hospital
 - NL Maine Coast Hospital
 - NL Sebecook Valley Hospital
-

EHR Updates

Week of July 31 – August 6

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

- Nurses
- Nurse Techs
- Respiratory Therapists

Custodial Care Order & Capacity Management Icon Update – EMMC Only – Go-Live August 12

WHAT: PowerChart Update

- The **Custodial Care EMMC** has been added to the **Decision to Admit** order within the **Patient Placement** dropdown.

Capacity Management Enhancement

- The Blue Plus icon will appear under the patient attributes on the transfer list when the **Decision to Admit** has been placed in the ED.

Patient Attributes	FIN	MRN	G...	A.	Patient
	400029625	2514035	Male	49 y...	Emergency
Placement: Custodial Care (Order-6427937411); Placement: Custodial Care (Order-6427938463)					

- Once the Admission order has been placed the **Street Light** icon and a **NEW Custodial Care** icon  indicating the patient's status as Custodial Care.

Patient Attributes	FIN	MRN
	400029625	2514035
Custodial Care (Order-6427939797)		

- WHY:**
- Better Bed Management: Ensures patients are placed in the most appropriate setting based on care needs.
 - Improved Workflow: Reduces delays and confusion by clearly identifying custodial care, which is different from acute or skilled nursing care.
 - Faster Bed Assignments: Enables quicker and more accurate bed assignments by Bed Managers.
 - Clear Visual Cues: The new Custodial Care icon provides an at-a-glance indicator, saving time and reducing errors.
 - Enhanced Communication: Aligns clinical staff and the transfer center on patient status for smoother transitions.

WHEN: Tuesday, August 12, 2025

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

- Acute/Inpatient (to include ED)

At the following NLH Member Organization(s):

- EMMC Only

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

- Care Management
- Nursing
- Providers
- Transfer Center

Inpatient

Pressure Injury Optimization – Education Open July 7 – Deadline August 3

WHAT: The workflow for documenting a Validated Pressure Injury is changing.

Documentation Changes

- New dynamic group – Validated Pressure Injury
- Updates to the Incision/Wound/Skin dynamic group

WHY: The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.

EHR Updates

Week of July 31 – August 6

- Validated Pressure Injury Abnormality Type was being updated back to Pressure Injury – Suspected after the wound was validated resulting in another request for evaluation going to the wound validator.
- Present on Admission documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: Monday, August 4, 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:

- Nursing
- Wound/Ostomy Nurses
- Wound Validators

EDUCATION STRATEGY: Online Promise Point Simulation Education

Nursing

- Curriculum: Annual Pressure Injury Prevention
- Course: NOLH-1425.2025 ACTCLN Document a Suspected Pressure Injury - Duration 12 mins
 - URL: www.promisepoint.com/northernlighthealth

Wound/Ostomy Nurses and Wound Validators

- Curriculum: Pressure Injury Wound Validator
- Course: NOLH-1065.55 ACTCLN Pressure Injury Wound Validator - Duration 16 mins
 - URL: www.promisepoint.com/northernlighthealth

○ **Flyer-based education**

HOW:

Required Online Education in the PromisePoint Community

- **Online Simulator Education – Available Now!**
 - URL: www.promisepoint.com/northernlighthouse
 - Username:
 - **NLH Employees:** Seven-digit employee number with leading zeros, e.g., 0098765
 - **Contracted Employees:** Username provided at the time of hire
 - **Initial Password:** password
 - Initial password is all lowercase.
 - If PromisePoint password has been previously set-up, please use that password.
 - **Need a password reset?** [Click this link to reach out to Health Informatics](#) (resets are available M-F, 08:00-16:30).



IMPORTANT: Video education must be completed before go-live.

**KEY
UPCOMING
DATES:**

Date: July 7

PromisePoint Simulation Education Opens

Date: August 3

DUE: All Assigned Education

Date: August 4

Go-Live (Focused Rounding by Health Informatics)

Click to review [Go-Live Support Schedule](#)

Pressure Injury Optimization

WHAT: The workflow for documenting a **Validated Pressure Injury** is changing.

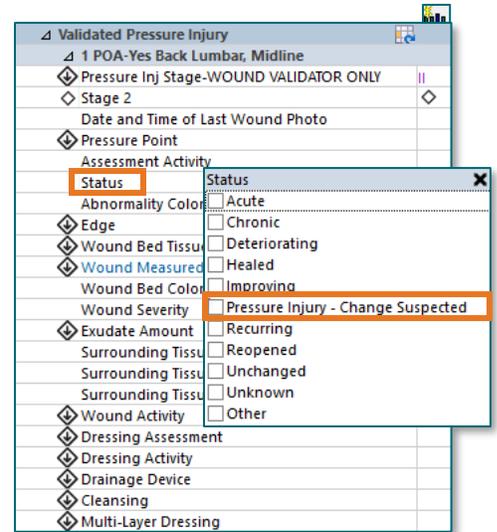
New Validated Pressure Injury Dynamic Group

- Once a wound is **validated** as a **Pressure Injury**, the existing **Incision/Wound/Skin dynamic group** for that wound will be inactivated by the Wound Validator.
 - Wound validators will create a new **Validated Pressure Injury dynamic group**.
-

EHR Updates

Week of July 31 – August 6

- The **Validated Pressure Injury section** will need to be pulled into view by the Wound Validator using **Customize View**.
- The Validated Pressure Injury dynamic group label will include **Pressure Injury on Admission (POA – Yes or POA – No)**, **Pressure Injury Number**, **Location, Laterality**, and **Description** should match the **Incision/Wound/Skin** dynamic group label.



NOTE: POA will not flow to the IRF-PAI Report. POA will need to be entered manually in UDS.

- Nursing will document pressure injury wound assessments and dressings in the new Validated Pressure Injury dynamic group.
- If the wound condition changes, nurses will document the **Status as Pressure Injury- Change Suspected**.
A task for re-evaluation will go to the wound validators

NOTE: Nursing should NOT update the Pressure Injury Stage.

Existing Validated Pressure Injuries

- **Patients** who have an **existing Validated Pressure Injury** at the time of go-live should have the existing **Incision/Wound/Skin** dynamic group **inactivated** and a **new Validated Pressure Injury dynamic group** created.
 - **Pressure Inj on Admission** has been added to the label.
 - Document **Pressure Inj Stage-Wound Validators Only**.
 - Document the same **Date and Time of Last Wound Photo** as seen in the inactivated Incision/Wound/Skin dynamic group.
This will ensure nurses will receive the task to take the next wound photo.
 - Document other information as needed.

Other Changes

- **Pressure Injury – Suspected Change** and **Validate Pressure Injury** have been removed from the **Incision/Wound/Skin Abnormality Type**.
- **Next Photo Date** has been removed from the **Incision/Wound/Skin** dynamic group.
 - **Date and Time of Last Wound Photo** will fire a CareCompass task seven days from the entered date prompting nursing to take the next photo.

Click [here](#) for **Wound Care – Pressure Injury Validator**.

Click [here](#) for **Wound Care Inpatient and ED Nurse workflow**.

Click [here](#) for information on the **Wound/Ostomy Care Multi-Patient Task List**.

Click [here](#) for **WOC (Wound/Ostomy/Continence) workflow**.

Click [here](#) for **Media Gallery Workflow**.

WHY: The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.

- **Validated Pressure Injury Abnormality Type** was being updated back to **Pressure-Injury – Suspected** after the wound was validated resulting in another request for evaluation going to the wound validator.
- **Present on Admission** documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: **Monday, August 4, 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:**

- Nursing
 - Wound/Ostomy Nurses
 - Wound Validators
-

EHR Updates

Week of July 31 – August 6

Auto-Disassociation with Enhanced Patient2Device Association (EP2DA) Update (Excludes EMMC and Mercy)

WHAT: Rules have been established to auto-disassociate the monitor and ventilator when a patient's registration location changes:

- Transfers from one nursing unit to another.
- One room to another within the same nursing unit.
- Transferred to another bed within the same room.
- When the patient encounter is discharged (already occurring).

NOTE: PACU will need to **manually disassociate** patients from the monitor who are **returning** to a nursing unit.

If a patient encounter is accidentally discharged, the patient needs to be reassociated to the monitor.

When a patient is moved from one location to another, the monitor and ventilator if applicable, will need to be reassociated to the patient.

WHY: Currently monitors and ventilators that are not manually disassociated from a patient remain associated to the patient. When another patient is placed on that monitor, it can lead to wrong information flowing into a patient chart. The auto-disassociation will reduce the likelihood of patient's data going to another patient's chart.

WHEN: Monday, August 4, 2025

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

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

At the following NLH Member Organization(s):

- NL Acadia Hospital
 - NL AR Gould Hospital
 - NL Blue Hill Hospital
 - NL CA Dean Hospital
 - NL Maine Coast Hospital
 - NL Seabcoook Valley Hospital
-

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

- Nurses
- Nurse Techs
- Respiratory Therapists

Custodial Care Order & Capacity Management Icon Update – EMMC Only – Go-Live August 12

WHAT: PowerChart Update

- The **Custodial Care EMMC** has been added to the **Decision to Admit** order within the **Patient Placement** dropdown.

Details for **Decision to Admit**

Details | Order Comments | Diagnoses

+ | | |

*Date/Time of Admit Decision: 07/21/2025 1444 EDT Reviewed Date/Time for Accuracy: Yes No

Attending Physician: [Search] Admitting Physician: [Search]

Patient Placement: **Custodial Care EMMC** Patient Type: **Outpatient Extended Recover...**

Service: [Dropdown] Disease Alert: [Dropdown]

Isolation: Yes No Reason for Admission: [Text]

Special Placement Needs: [Dropdown] Plan for OR before moving to floor: Yes No

Duration: [Text] Duration Unit: [Dropdown]

Transport Mode: [Dropdown] Special Instructions: [Text]

Capacity Management Enhancement

- The Blue Plus icon will appear under the patient attributes on the transfer list when the **Decision to Admit** has been placed in the ED.

Patient Attributes	FIN	MRN	G...	A.	Patient
	400029625	2514035	Male	49 y...	Emergency
Placement: Custodial Care (Order-6427937411); Placement: Custodial Care (Order-6427938463)					

- Once the Admission order has been placed the **Street Light** icon and a **NEW Custodial Care** icon  indicating the patient's status as Custodial Care.

EHR Updates

Week of July 31 – August 6

Patient Attributes	FIN	MRN
  	400029625	2514035
Custodial Care (Order-6427939797)		

WHY:

- Better Bed Management: Ensures patients are placed in the most appropriate setting based on care needs.
- Improved Workflow: Reduces delays and confusion by clearly identifying custodial care, which is different from acute or skilled nursing care.
- Faster Bed Assignments: Enables quicker and more accurate bed assignments by Bed Managers.
- Clear Visual Cues: The new Custodial Care icon provides an at-a-glance indicator, saving time and reducing errors.
- Enhanced Communication: Aligns clinical staff and the transfer center on patient status for smoother transitions.

WHEN: Tuesday, August 12, 2025

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

- Acute/Inpatient (to include ED)

At the following NLH Member Organization(s):

- EMMC Only

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

- Care Management
- Nursing
- Providers
- Transfer Center

Peri-Op

Pressure Injury Optimization – Education Open July 7 – Deadline August 3

WHAT: The workflow for documenting a Validated Pressure Injury is changing.

Documentation Changes

- New dynamic group – Validated Pressure Injury
 - Updates to the Incision/Wound/Skin dynamic group
-

- WHY:** The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.
- Validated Pressure Injury Abnormality Type was being updated back to Pressure Injury – Suspected after the wound was validated resulting in another request for evaluation going to the wound validator.
 - Present on Admission documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: Monday, August 4, 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:
- Nursing
 - Wound/Ostomy Nurses
 - Wound Validators

EDUCATION STRATEGY: **Online Promise Point Simulation Education**

Nursing

- Curriculum: Annual Pressure Injury Prevention
- Course: NOLH-1425.2025 ACTCLN Document a Suspected Pressure Injury - Duration 12 mins
 - URL: www.promisepoint.com/northernlighthouse

Wound/Ostomy Nurses and Wound Validators

- Curriculum: Pressure Injury Wound Validator
- Course: NOLH-1065.55 ACTCLN Pressure Injury Wound Validator - Duration 16 mins
 - URL: www.promisepoint.com/northernlighthouse

- **Flyer-based education**
-

EHR Updates

Week of July 31 – August 6

HOW: **Required Online Education in the PromisePoint Community**

- **Online Simulator Education – Available Now!**
 - URL: www.promisepoint.com/northernlighthouse
 - Username:
 - **NLH Employees:** Seven-digit employee number with leading zeros, e.g., 0098765
 - **Contracted Employees:** Username provided at the time of hire
 - **Initial Password:** password
 - Initial password is all lowercase.
 - If PromisePoint password has been previously set-up, please use that password.
 - **Need a password reset?** [Click this link to reach out to Health Informatics](#) (resets are available M-F, 08:00-16:30).



IMPORTANT: Video education must be completed before go-live.

KEY UPCOMING DATES:

Date: July 7

PromisePoint Simulation Education Opens

Date: August 3

DUE: All Assigned Education

Date: August 4

Go-Live (Focused Rounding by Health Informatics)

Click to review [Go-Live Support Schedule](#)

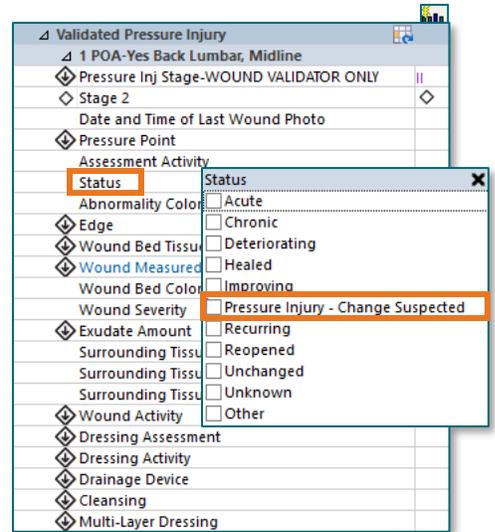
Pressure Injury Optimization

WHAT: The workflow for documenting a **Validated Pressure Injury** is changing.

New Validated Pressure Injury Dynamic Group

- Once a wound is **validated** as a **Pressure Injury**, the existing **Incision/Wound/Skin dynamic group** for that wound will be inactivated by the Wound Validator.
 - Wound validators will create a new **Validated Pressure Injury dynamic group**.
-

- The **Validated Pressure Injury section** will need to be pulled into view by the Wound Validator using **Customize View**.
- The Validated Pressure Injury dynamic group label will include **Pressure Injury on Admission (POA – Yes or POA – No)**, **Pressure Injury Number**, **Location, Laterality**, and **Description** should match the **Incision/Wound/Skin** dynamic group label.



NOTE: POA will not flow to the IRF-PAI Report. POA will need to be entered manually in UDS.

- Nursing will document pressure injury wound assessments and dressings in the new Validated Pressure Injury dynamic group.
- If the wound condition changes, nurses will document the **Status as Pressure Injury- Change Suspected**.
A task for re-evaluation will go to the wound validators

NOTE: Nursing should NOT update the Pressure Injury Stage.

Existing Validated Pressure Injuries

- **Patients** who have an **existing Validated Pressure Injury** at the time of go-live should have the existing **Incision/Wound/Skin** dynamic group **inactivated** and a **new Validated Pressure Injury dynamic group** created.
 - **Pressure Inj on Admission** has been added to the label.
 - Document **Pressure Inj Stage-Wound Validators Only**.
 - Document the same **Date and Time of Last Wound Photo** as seen in the inactivated Incision/Wound/Skin dynamic group.
This will ensure nurses will receive the task to take the next wound photo.
 - Document other information as needed.

EHR Updates

Week of July 31 – August 6

Other Changes

- **Pressure Injury – Suspected Change** and **Validate Pressure Injury** have been removed from the **Incision/Wound/Skin Abnormality Type**.
- **Next Photo Date** has been removed from the **Incision/Wound/Skin** dynamic group.
 - **Date and Time of Last Wound Photo** will fire a CareCompass task seven days from the entered date prompting nursing to take the next photo.

Click [here](#) for **Wound Care – Pressure Injury Validator**.

Click [here](#) for **Wound Care Inpatient and ED Nurse workflow**.

Click [here](#) for information on the **Wound/Ostomy Care Multi-Patient Task List**.

Click [here](#) for **WOC (Wound/Ostomy/Continence) workflow**.

Click [here](#) for **Media Gallery Workflow**.

WHY: The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.

- **Validated Pressure Injury Abnormality Type** was being updated back to **Pressure-Injury – Suspected** after the wound was validated resulting in another request for evaluation going to the wound validator.
- **Present on Admission** documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: Monday, August 4, 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:

- Nursing
 - Wound/Ostomy Nurses
 - Wound Validators
-

Auto-Disassociation with Enhanced Patient2Device Association (EP2DA) Update (Excludes EMMC and Mercy)

WHAT: Rules have been established to auto-disassociate the monitor and ventilator when a patient's registration location changes:

- Transfers from one nursing unit to another.
- One room to another within the same nursing unit.
- Transferred to another bed within the same room.
- When the patient encounter is discharged (already occurring).

NOTE: PACU will need to **manually disassociate** patients from the monitor who are **returning** to a nursing unit.

If a patient encounter is accidentally discharged, the patient needs to be reassociated to the monitor.

When a patient is moved from one location to another, the monitor and ventilator if applicable, will need to be reassociated to the patient.

WHY: Currently monitors and ventilators that are not manually disassociated from a patient remain associated to the patient. When another patient is placed on that monitor, it can lead to wrong information flowing into a patient chart. The auto-disassociation will reduce the likelihood of patient's data going to another patient's chart.

WHEN: **Monday, August 4, 2025**

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

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

At the following NLH Member Organization(s):

- NL Acadia Hospital
 - NL AR Gould Hospital
 - NL Blue Hill Hospital
 - NL CA Dean Hospital
 - NL Maine Coast Hospital
 - NL Sebecook Valley Hospital
-

EHR Updates

Week of July 31 – August 6

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

- Nurses
- Nurse Techs
- Respiratory Therapists

Nutrition

Inpatient Only

Dietary Parameter Update – **Go-Live August 12**

WHAT: Diet Parameters within the Diet Order will be updated to include **Pescatarian**.

The screenshot shows a web-based form titled "Details for Diet". It has several tabs: "Details", "Order Comments", and "Diagnoses". The "Details" tab is active. The form contains various fields for diet orders, including:

- *Start Meal: Breakfast (dropdown)
- *Diet Type: Regular Diet (dropdown)
- Fluid Restriction: (dropdown)
- Disposable Tray: Yes (radio), No (radio)
- Advance End Diet: (dropdown)
- Between Meal Nourishment: (dropdown)
- Carbohydrates Permitted/meal: (dropdown)
- Dietary Protein: (dropdown)
- Dietary Phosphorus: (dropdown)
- *Order Start Date/Time: 07/28/2025 1317 EDT
- Dietary Parameters: **Pescatarian** (dropdown, highlighted with a red box)
- Diet Consistency: (dropdown)
- Advance As Tolerated: Yes (radio), No (radio)
- NPO Exception: (dropdown)
- Calories Permitted: (dropdown)
- Dietary Sodium: (dropdown)
- Dietary Potassium: (dropdown)
- Dietary Fortifier/Additive: (dropdown)

WHY: The update is being implemented to accommodate patient dietary preferences, such as a Regular diet with a Pescatarian option.

WHEN: Tuesday, August 12, 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:

- Nutritionists
- Providers

Physicians, Physician Assistants, Nurse Practitioners

Emergency

**Custodial Care Order & Capacity Management Icon Update – EMMC Only –
Go-Live August 12**

WHAT: PowerChart Update

- The **Custodial Care EMMC** has been added to the **Decision to Admit** order within the **Patient Placement** dropdown.

Capacity Management Enhancement

- The Blue Plus icon will appear under the patient attributes on the transfer list when the **Decision to Admit** has been placed in the ED.

Patient Attributes	FIN	MRN	G...	A	Patient
	400029625	2514035	Male	49 y...	Emergency

Placement: Custodial Care (Order-6427937411); Placement: Custodial Care (Order-6427938463)

- Once the Admission order has been placed the **Street Light** icon and a **NEW Custodial Care** icon  indicating the patient's status as Custodial Care.

Patient Attributes	FIN	MRN
	400029625	2514035

Custodial Care (Order-6427939797)

EHR Updates

Week of July 31 – August 6

- WHY:**
- Better Bed Management: Ensures patients are placed in the most appropriate setting based on care needs.
 - Improved Workflow: Reduces delays and confusion by clearly identifying custodial care, which is different from acute or skilled nursing care.
 - Faster Bed Assignments: Enables quicker and more accurate bed assignments by Bed Managers.
 - Clear Visual Cues: The new Custodial Care icon provides an at-a-glance indicator, saving time and reducing errors.
 - Enhanced Communication: Aligns clinical staff and the transfer center on patient status for smoother transitions.

WHEN: Tuesday, August 12, 2025

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

- Acute/Inpatient (to include ED)

At the following NLH Member Organization(s):

- EMMC Only

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

- Care Management
- Nursing
- Providers
- Transfer Center

Dietary Parameter Update – **Go-Live August 12**

WHAT: Diet Parameters within the Diet Order will be updated to include **Pescatarian**.

Details for Diet

Details | Order Comments | Diagnoses

*Start Meal: Breakfast

*Diet Type: Regular Diet

Fluid Restriction:

Disposable Tray: Yes No

Advance End Diet:

Between Meal Nourishment:

Carbohydrates Permitted/meal:

Dietary Protein:

Dietary Phosphorus:

*Order Start Date/Time: 07/28/2025 1317 EDT

Dietary Parameters: **Pescatarian**

Diet Consistency:

Advance As Tolerated: Yes No

NPO Exception:

Calories Permitted:

Dietary Sodium:

Dietary Potassium:

Dietary Fortifier/Additive:

WHY: The update is being implemented to accommodate patient dietary preferences, such as a Regular diet with a Pescatarian option.

WHEN: Tuesday, August 12, 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:

- Nutritionists
- Providers

Inpatient

Custodial Care Order & Capacity Management Icon Update – EMMC Only – Go-Live August 12

WHAT: PowerChart Update

- The **Custodial Care EMMC** has been added to the **Decision to Admit** order within the **Patient Placement** dropdown.

Details for Decision to Admit

Details | Order Comments | Diagnoses

*Date/Time of Admit Decision: 07/21/2025 1444 EDT Reviewed Date/Time for Accuracy: Yes No

Attending Physician: [Search] Admitting Physician: [Search]

Patient Placement: **Custodial Care EMMC** Patient Type: **Outpatient Extended Recover...**

Service: [Dropdown] Disease Alert: [Dropdown]

Isolation: Yes No Reason for Admission: [Text]

Special Placement Needs: [Dropdown] Plan for OR before moving to floor: Yes No

Duration: [Text] Duration Unit: [Dropdown]

Transport Mode: [Dropdown] Special Instructions: [Text]

Capacity Management Enhancement

- The Blue Plus icon will appear under the patient attributes on the transfer list when the **Decision to Admit** has been placed in the ED.

EHR Updates

Week of July 31 – August 6

Patient Attributes	FIN	MRN	G...	A.	Patient
	400029625	2514035	Male	49 y...	Emergency
Placement: Custodial Care (Order-6427937411); Placement: Custodial Care (Order-6427938463)					

- Once the Admission order has been placed the **Street Light** icon and a **NEW Custodial Care** icon indicating the patient's status as Custodial Care.

Patient Attributes	FIN	MRN
	400029625	2514035
Custodial Care (Order-6427939797)		

WHY:

- Better Bed Management: Ensures patients are placed in the most appropriate setting based on care needs.
- Improved Workflow: Reduces delays and confusion by clearly identifying custodial care, which is different from acute or skilled nursing care.
- Faster Bed Assignments: Enables quicker and more accurate bed assignments by Bed Managers.
- Clear Visual Cues: The new Custodial Care icon provides an at-a-glance indicator, saving time and reducing errors.
- Enhanced Communication: Aligns clinical staff and the transfer center on patient status for smoother transitions.

WHEN: Tuesday, August 12, 2025

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

- Acute/Inpatient (to include ED)

At the following NLH Member Organization(s):

- EMMC Only

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

- Care Management
 - Nursing
 - Providers
 - Transfer Center
-

Dietary Parameter Update – *Go-Live August 12*

WHAT: Diet Parameters within the Diet Order will be updated to include **Pescatarian**.

The screenshot shows a web-based form titled "Details for Diet". It has several tabs: "Details", "Order Comments", and "Diagnoses". The "Details" tab is active. The form contains various fields for diet orders, including:

- *Start Meal: Breakfast
- *Diet Type: Regular Diet
- Fluid Restriction: (empty dropdown)
- Disposable Tray: Yes (selected), No
- Advance End Diet: (empty dropdown)
- Between Meal Nourishment: (empty dropdown)
- Carbohydrates Permitted/meal: (empty dropdown)
- Dietary Protein: (empty dropdown)
- Dietary Phosphorus: (empty dropdown)
- *Order Start Date/Time: 07/28/2025 1317 EDT
- Dietary Parameters: **Pescatarian** (highlighted with a red box)
- Diet Consistency: (empty dropdown)
- Advance As Tolerated: Yes, No
- NPO Exception: (empty dropdown)
- Calories Permitted: (empty dropdown)
- Dietary Sodium: (empty dropdown)
- Dietary Potassium: (empty dropdown)
- Dietary Fortifier/Additive: (empty dropdown)

WHY: The update is being implemented to accommodate patient dietary preferences, such as a Regular diet with a Pescatarian option.

WHEN: Tuesday, August 12, 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:

- Nutritionists
- Providers

EHR Updates

Week of July 31 – August 6

Peri-Op

Dietary Parameter Update – **Go-Live August 12**

WHAT: Diet Parameters within the Diet Order will be updated to include **Pescatarian**.

The screenshot shows a web-based form titled "Details for Diet". It has several tabs: "Details", "Order Comments", and "Diagnoses". The "Details" tab is active. The form contains various fields for diet orders, including:

- *Start Meal: Breakfast
- *Diet Type: Regular Diet
- Fluid Restriction: (empty dropdown)
- Disposable Tray: Yes (selected), No
- Advance End Diet: (empty dropdown)
- Between Meal Nourishment: (empty dropdown)
- Carbohydrates Permitted/meal: (empty dropdown)
- Dietary Protein: (empty dropdown)
- Dietary Phosphorus: (empty dropdown)
- *Order Start Date/Time: 07/28/2025 1317 EDT
- Dietary Parameters: **Pescatarian** (highlighted with a red box)
- Diet Consistency: (empty dropdown)
- Advance As Tolerated: Yes (selected), No
- NPO Exception: (empty dropdown)
- Calories Permitted: (empty dropdown)
- Dietary Sodium: (empty dropdown)
- Dietary Potassium: (empty dropdown)
- Dietary Fortifier/Additive: (empty dropdown)

WHY: The update is being implemented to accommodate patient dietary preferences, such as a Regular diet with a Pescatarian option.

WHEN: Tuesday, August 12, 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:

- Nutritionists
- Providers

Quest Patient Services Centers – PSC Staff

Reminder: Activating Correct Lab Orders – **Effective Immediately**

WHAT: We would like to remind all staff of the importance of activating the correct lab orders, especially those ordered in oncology treatment regimens.

WHY: There have been instances where lab or clinical staff inadvertently activated lab orders that were part of a future treatment day within an oncology regimen. This can lead to confusion, delays, or the absence of necessary orders when the patient presents for treatment.

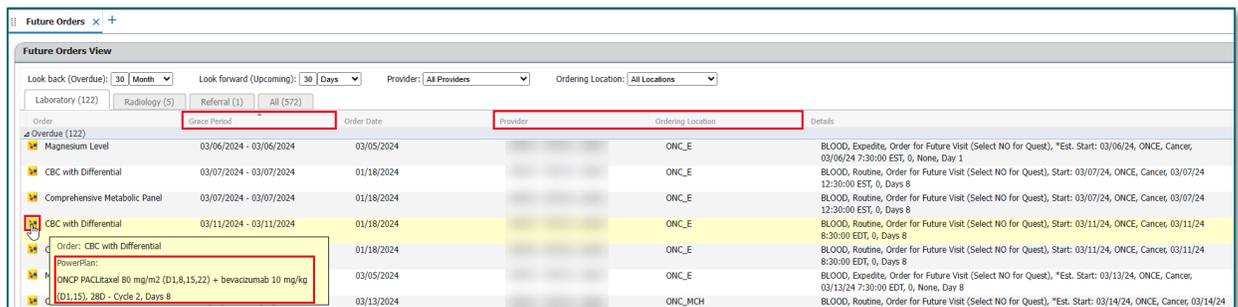
HOW: Please keep the following in mind when activating future lab orders:

- **Do not activate lab orders associated with a treatment regimen** unless the patient is having labs drawn for their treatment.
- **Always verify the lab order date** to ensure it matches the intended date of service. Orders for future treatment days should not be used prematurely.

Reviewing Lab Order Details

In the Department Order Entry tool, there are several indicators that a lab order is part of a regimen or was placed by an oncology provider:

- A **PowerPlan icon** next to the lab order. Hovering over this icon will show which PowerPlan the order belongs to.
- The **Grace Period date**, which helps determine the appropriate activation window.
- The **Ordering Location and Ordering Provider**, which can provide additional context.



To view lab order details in PowerChart, navigate to the **Orders** tab and review the **Order Details** column. This section provides key information such as whether the order was placed as part of a PowerPlan, the estimated start date, and the ordering provider. Reviewing these details helps ensure the correct lab order is activated.

NOTE: Lab staff – please refer to the following [flyer](#) on how to update views in PowerChart.

EHR Updates

Week of July 31 – August 6

WHEN: Effective Immediately

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

- Ambulatory/WIC
- Lab Locations

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
- Lab Staff
- Patient Service Center Staff

Therapies: Respiratory

Inpatient

Auto-Disassociation with Enhanced Patient2Device Association (EP2DA) Update (Excludes EMMC and Mercy)

WHAT: Rules have been established to auto-disassociate the monitor and ventilator when a patient's registration location changes:

- Transfers from one nursing unit to another.
- One room to another within the same nursing unit.
- Transferred to another bed within the same room.
- When the patient encounter is discharged (already occurring).

NOTE: PACU will need to **manually disassociate** patients from the monitor who are **returning** to a nursing unit.

If a patient encounter is accidentally discharged, the patient needs to be reassociated to the monitor.

When a patient is moved from one location to another, the monitor and ventilator if applicable, will need to be reassociated to the patient.

WHY: Currently monitors and ventilators that are not manually disassociated from a patient remain associated to the patient. When another patient is placed on that monitor, it can lead to wrong information flowing into a patient chart. The auto-disassociation will reduce the likelihood of patient's data going to another patient's chart.

WHEN: Monday, August 4, 2025

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

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

At the following NLH Member Organization(s):

- NL Acadia Hospital
- NL AR Gould Hospital
- NL Blue Hill Hospital
- NL CA Dean Hospital
- NL Maine Coast Hospital
- NL Seabrook Valley Hospital

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

- Nurses
- Nurse Techs
- Respiratory Therapists

Transfer Center

Custodial Care Order & Capacity Management Icon Update – EMMC Only – Go-Live August 12

WHAT: PowerChart Update

- The **Custodial Care EMMC** has been added to the **Decision to Admit** order within the **Patient Placement** dropdown.
-

EHR Updates

Week of July 31 – August 6

Capacity Management Enhancement

- The Blue Plus icon will appear under the patient attributes on the transfer list when the **Decision to Admit** has been placed in the ED.

Patient Attributes	FIN	MRN	G...	A.	Patient
	400029625	2514035	Male	49 y...	Emergency
Placement: Custodial Care (Order-6427937411); Placement: Custodial Care (Order-6427938463)					

- Once the Admission order has been placed the **Street Light** icon and a **NEW Custodial Care** icon  indicating the patient's status as Custodial Care.

Patient Attributes	FIN	MRN
	400029625	2514035
Custodial Care (Order-6427939797)		

WHY:

- **Better Bed Management:** Ensures patients are placed in the most appropriate setting based on care needs.
- **Improved Workflow:** Reduces delays and confusion by clearly identifying custodial care, which is different from acute or skilled nursing care.
- **Faster Bed Assignments:** Enables quicker and more accurate bed assignments by Bed Managers.
- **Clear Visual Cues:** The new Custodial Care icon provides an at-a-glance indicator, saving time and reducing errors.
- **Enhanced Communication:** Aligns clinical staff and the transfer center on patient status for smoother transitions.

WHEN: Tuesday, August 12, 2025

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

- Acute/Inpatient (to include ED)

At the following NLH Member Organization(s):

- EMMC Only

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

- Care Management
- Nursing
- Providers
- Transfer Center

Wound Validators

Pressure Injury Optimization – Education Open July 7 – Deadline August 3

WHAT: The workflow for documenting a Validated Pressure Injury is changing.

Documentation Changes

- New dynamic group – Validated Pressure Injury
- Updates to the Incision/Wound/Skin dynamic group

WHY: The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.

- Validated Pressure Injury Abnormality Type was being updated back to Pressure Injury – Suspected after the wound was validated resulting in another request for evaluation going to the wound validator.
- Present on Admission documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: Monday, August 4, 2025

EHR Updates

Week of July 31 – August 6

- 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:**
- Nursing
 - Wound/Ostomy Nurses
 - Wound Validators

EDUCATION STRATEGY: **Online Promise Point Simulation Education**

Nursing

- Curriculum: Annual Pressure Injury Prevention
- Course: NOLH-1425.2025 ACTCLN Document a Suspected Pressure Injury - Duration 12 mins
 - URL: www.promisepoint.com/northernlighthealth

Wound/Ostomy Nurses and Wound Validators

- Curriculum: Pressure Injury Wound Validator
- Course: NOLH-1065.55 ACTCLN Pressure Injury Wound Validator - Duration 16 mins
 - URL: www.promisepoint.com/northernlighthealth

○ **Flyer-based education**

HOW:

Required Online Education in the PromisePoint Community

- **Online Simulator Education – Available Now!**
 - URL: www.promisepoint.com/northernlighthouse
 - Username:
 - **NLH Employees:** Seven-digit employee number with leading zeros, e.g., 0098765
 - **Contracted Employees:** Username provided at the time of hire
 - **Initial Password:** password
 - Initial password is all lowercase.
 - If PromisePoint password has been previously set-up, please use that password.
 - **Need a password reset?** [Click this link to reach out to Health Informatics](#) (resets are available M-F, 08:00-16:30).



IMPORTANT: Video education must be completed before go-live.

**KEY
UPCOMING
DATES:**

Date: July 7

PromisePoint Simulation Education Opens

Date: August 3

DUE: All Assigned Education

Date: August 4

Go-Live (Focused Rounding by Health Informatics)

Click to review [Go-Live Support Schedule](#)

Pressure Injury Optimization

WHAT: The workflow for documenting a **Validated Pressure Injury** is changing.

New Validated Pressure Injury Dynamic Group

- Once a wound is **validated** as a **Pressure Injury**, the existing **Incision/Wound/Skin dynamic group** for that wound will be inactivated by the Wound Validator.
 - Wound validators will create a new **Validated Pressure Injury dynamic group**.
-

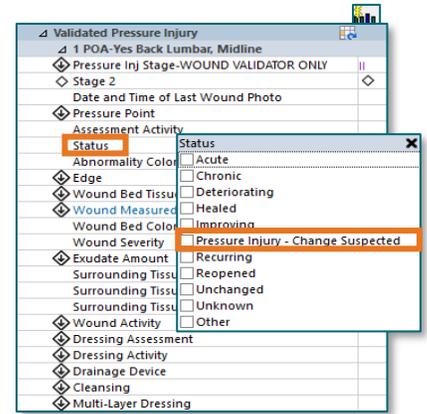
EHR Updates

Week of July 31 – August 6

- The **Validated Pressure Injury** section will need to be pulled into view by the Wound Validator using **Customize View**.
- The Validated Pressure Injury dynamic group label will include **Pressure Injury on Admission** (POA – Yes or POA – No).

Pressure Injury **Number, Location, Laterality,** and **Description**

should **match** the **Incision/Wound/Skin** dynamic group label.



NOTE: POA will not flow to the IRF-PAI Report. POA will need to be entered manually in UDS.

- Nursing will document pressure injury wound assessments and dressings in the new Validated Pressure Injury dynamic group.
- If the wound condition changes, nurses will document the **Status** as **Pressure Injury- Change Suspected**.

A task for re-evaluation will go to the wound validators

NOTE: Nursing should **NOT** update the Pressure Injury Stage.

Existing Validated Pressure Injuries

- **Patients** who have an **existing Validated Pressure Injury** at the time of go-live should have the existing **Incision/Wound/Skin** dynamic group **inactivated** and a **new Validated Pressure Injury dynamic group** created.
 - **Pressure Inj on Admission** has been added to the label.
 - Document **Pressure Inj Stage-Wound Validators Only**.
 - Document the same **Date and Time of Last Wound Photo** as seen in the inactivated Incision/Wound/Skin dynamic group.

This will ensure nurses will receive the task to take the next wound photo.
 - Document other information as needed.

Other Changes

- **Pressure Injury – Suspected Change** and **Validate Pressure Injury** have been removed from the **Incision/Wound/Skin Abnormality Type**.

- **Next Photo Date** has been removed from the **Incision/Wound/Skin** dynamic group.
 - **Date and Time of Last Wound Photo** will fire a CareCompass task seven days from the entered date prompting nursing to take the next photo.

Click [here](#) for **Wound Care – Pressure Injury Validator**.

Click [here](#) for **Wound Care Inpatient and ED Nurse workflow**.

Click [here](#) for information on the **Wound/Ostomy Care Multi-Patient Task List**.

Click [here](#) for **WOC (Wound/Ostomy/Continence) workflow**.

Click [here](#) for **Media Gallery Workflow**.

WHY: The workflow for documenting a Validated Pressure Injury is changing to improve workflow efficiencies.

- **Validated Pressure Injury Abnormality Type** was being updated back to **Pressure-Injury – Suspected** after the wound was validated resulting in another request for evaluation going to the wound validator.
- **Present on Admission** documentation fluctuated on the same wound resulting in inaccurate documentation.

WHEN: Monday, August 4, 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:

- Nursing
- Wound/Ostomy Nurses
- Wound Validators