



Oracle Health (Cerner) Millennium EHR Updates

Week of October 1 – October 7, 2026

For more information on how to navigate this Flash Flyer effectively, click [here](#).

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Behavioral Health Staff

Ambulatory

2026-2027 Influenza and COVID Immunization Screening Form Updates

WHAT: Annual updates have been made to both Influenza and COVID Screening Forms.

Highlights

- A highlighted header has been added to remind staff that when screening a patient who is also an NLH employee, selecting **NLH Employee, SHARE with HR/WH** will automatically send the vaccine administration information to Human Resources and WorkHealth. The patient/employee no longer needs to forward this information to their manager.

Influenza Vaccine Screening/ Order Form

Screening period: **SEPTEMBER 1 - APRIL 30**
(Vaccine orders will post via the Rule ONLY during this time frame)

Ask NLH employees for consent to share with NLH HR/ Work Health.
Indicate SHARE or Do NOT Share.

Selecting SHARE transmits vaccine record to Work Health.

☒ NLH Employee, SHARE with HR/wH
☐ NLH Employee, Do NOT Share with HR/wH
☐ Not NLH Employee. Patient, Hospital
☐ Not NLH Employee. Patient, Physician Office/WIC/Outpatient

Employee #:

For patients unable to be screened now, document "Unable to Screen" to set reminder alert in 24 hours.

☒ Vaccine accepted
☐ Vaccine declined
☐ Unable to screen
☐ Vaccine not available

Reason unable to screen:

Has Patient received Influenza Vaccine in THIS 2026-2027 season?

☐ No
☐ Yes and patient was 6 mo to 8 yrs old
☐ Yes and patient was 9 yrs or older

- Step-by-step guidance for the COVID-19 screening forms is available here:
 - [Inpatient COVID-19 Vaccine Immunization Screening Form](#)
 - [Ambulatory COVID-19 Vaccine Immunization Screening Form](#)
 - It is important to note that Covid vaccine schedules will align with influenza. The recommendation currently is to vaccinate between September 1 and April 30.
- Detailed step-by-step guidance for the Influenza screening forms can be found here:
 - [Influenza Vaccine Screening-Order Workflow](#)

IMPORTANT: Inpatient areas: Rule-based ordering from both Influenza and COVID-19 screening forms will generate orders from September 1, 2026 through April 30, 2027.

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WHY: These updates include alignments with the most recent vaccine schedule recommendations and specifically NLH Anti-Microbial Stewardship vaccine guidance.

WHEN: Effective Immediately

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
- Pharmacists
- Providers

Cancelling Orders – Quest

WHAT: Orders canceled in Oracle (Cerner) will now automatically communicate to Quest, ensuring the cancellation is reflected in Quest's system. Continue using the right-click workflow to cancel orders; no additional intervention is needed.

WHY: The enhancement improves order visibility for laboratory staff by ensuring cancellation information is available in Quest, supporting more accurate order management and reducing the risk of processing orders no longer needed.

WHEN: Tuesday, October 6, 2026

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

- Ambulatory/WIC
- PSC Laboratory Location

At the following NLH Member Organization(s):

- All NLH Hospitals (excluding Mayo)
-

From the Office of Health Informatics

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

- Clinical Staff
- Providers
- Quest Laboratory Staff

Ambulatory 724Access Downtime Viewer (*Go-Live October 12*)

WHAT: The **Ambulatory 724Access Downtime Viewer** is being installed on designated workstation devices within the ambulatory practices. Select practices will participate in **Phase 1** of the implementation. The remainder of the ambulatory practices will be rolled out in a future phase.

The Ambulatory 724Access Downtime Viewer provides access to critical patient information during a planned and unplanned Oracle Health (Cerner Millennium) downtimes. Users can view and print:

- Ambulatory **practice schedule**
- Select patient **documents**
- **Continuity of Care Document (CCD)**

Appointment schedules are available for:

- The previous seven days
- The next seven days

Additional Resources:

- Click [here](#) for information on using the Ambulatory 724Access Downtime Viewer.
- Click [here](#) for the complete Ambulatory 724Access Downtime Viewer Manual.

NOTE: The workstations hosting the Ambulatory 724Access Downtime Viewer **may be rebooted if necessary; but must NOT be powered off**. CCDs are generated overnight. If a workstation is turned off and a downtime occurs the following day, patient CCDs will NOT be available through the viewer. Additionally, patients who schedule same day appointments will not have a CCD available in the event of a downtime, as CCDs are only generated during the overnight process.

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WHY: During a planned or unplanned Oracle Health (Cerner Millennium) downtime, access to the electronic health record may be unavailable. The Ambulatory 724Access Downtime Viewer provides authorized staff with timely access to essential patient information, supporting continuity of care and helping practices maintain safe and effective patient care operation during system outages.

Key Benefit: The Ambulatory 724Access Downtime Viewer ensures critical patient information remains accessible during Oracle health downtime events, supporting uninterrupted clinical workflows and patient care delivery.

WHEN: Monday, October 12, 2026

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

- Ambulatory (excludes WIC)

At the following NLH Member Organization(s):

- Acadia Hospital
 - Adult Behavioral Health Bangor Clinic
- AR Gould
 - Cancer Care Presque Isle
 - Cancer Care Presque Isle Treatment
- Eastern Maine Medical Center
 - Cancer Care Brewer Med Onc
 - Cancer Care Brewer Med Onc Treatment
- Maine Coast Hospital
 - Primary Care Ellsworth
- Sebecook Valley Hospital
 - Cardiovascular Care Pittsfield
 - Newport Occupational Therapy
 - Newport Physical Therapy
 - Newport Speech Therapy
 - Primary Care Clinton

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

- Clinical Staff
 - Front Office Staff
 - Providers
-

From the Office of Health Informatics

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Inpatient

2026-2027 Influenza and COVID Immunization Screening Form Updates

WHAT: Annual updates have been made to both Influenza and COVID Screening Forms.

Highlights

- A highlighted header has been added to remind staff that when screening a patient who is also an NLH employee, selecting **NLH Employee, SHARE with HR/WH** will automatically send the vaccine administration information to Human Resources and WorkHealth. The patient/employee no longer needs to forward this information to their manager.

Influenza Vaccine Screening/ Order Form

Screening period: **SEPTEMBER 1 - APRIL 30**
(Vaccine orders will post via the Rule ONLY during this time frame)

Ask NLH employees for consent to share with NLH HR/ Work Health.
Indicate SHARE or Do NOT Share.

Selecting **SHARE** transmits vaccine record to Work Health.

☒ **NLH Employee, SHARE with HR/WH**

☐ NLH Employee, Do NOT Share with HR/WH

☐ Not NLH Employee, Patient, Hospital

☐ Not NLH Employee, Patient, Physician Office/WIC/Outpatient

Employee #:

For patients unable to be screened now, document "Unable to Screen" to set reminder alert in 24 hours.

☒ Vaccine accepted

☐ Vaccine declined

☐ Unable to screen

☐ Vaccine not available

Reason unable to screen:

Has Patient received Influenza Vaccine in THIS 2026-2027 season?

☐ No

☐ Yes and patient was 6 mo to 8 yrs old

☐ Yes and patient was 9 yrs or older

- Step-by-step guidance for the COVID-19 screening forms is available here:
 - [Inpatient COVID-19 Vaccine Immunization Screening Form](#)
 - [Ambulatory COVID-19 Vaccine Immunization Screening Form](#)
 - It is important to note that Covid vaccine schedules will align with influenza. The recommendation currently is to vaccinate between September 1 and April 30.
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IMPORTANT: Inpatient areas: Rule-based ordering from both Influenza and COVID-19 screening forms will generate orders from September 1, 2026 through April 30, 2027.

WHY: These updates include alignments with the most recent vaccine schedule recommendations and specifically NLH Anti-Microbial Stewardship vaccine guidance.

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WHEN: Effective Immediately

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)

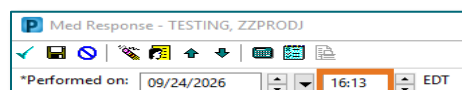
WHO: The change will affect the following staff at the above noted locations:

- Clinical Staff
- Pharmacists
- Providers

Med Response Update

WHAT: The **Med Response PowerForm** has been updated to default to the **Performed Date/Time**.

- Nursing should adjust the date/time as needed to reflect when the medication response assessment was completed if documentation is not entered in real time.
- The change was implemented by Oracle to improve consistency in how the form populated the assessment time.

A screenshot of a software interface titled "Med Response - TESTING, ZZPROD1". Below the title bar is a toolbar with various icons. The main area of the interface shows a label "*Performed on:" followed by a date and time field. The date is "09/24/2026" and the time is "16:13". To the right of the time field is a dropdown menu currently showing "EDT". The date and time fields are highlighted with an orange border.

WHY: Previously, the form behaved differently depending on how it was accessed:

- When it opened from the **MAR**, the form defaulted to the **Task Due Date/Time**.
- When it opened from **Adhoc** or **CareCompass**, the form defaulted to the **Performed Date/Time**.

To standardize the workflow, the Med Response PowerForm now consistently defaults to the Performed Date/Time, recognizing that the medication response assessment may not always occur exactly at the scheduled task due time. The update helps ensure more accurate documentation of the assessment completion time.

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WHEN: Effective Immediately

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

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

At the following NLH Member Organization(s):

- All NLH Hospitals (excluding Mayo)

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

- Nursing

Thinking Skills

WHAT: A new **Thinking Skills** PowerForm will be made available.

This is being incorporated in Inpatient Treatment Plan and made viewable within Scales and Assessment for review and trending.

Scales and Assessments	
	Today 13:43
Attention and Working Memory Score	Medium
Cognitive Flexibility Score	Hard
Emotion- and Self-Regulation Score	Medium
Language and Communication Score	Easy
Social Thinking Score	Hard
Thinking Skills Total Score	Hard

WHY: The new Thinking Skills PowerForm captures how Collaborative Problem Solving is incorporated into the patient's treatment.

WHEN: Tuesday, October 6, 2026

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

- Inpatient

At the following NLH Member Organization(s):

- NL Acadia

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

- Clinicians
 - Providers
-

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Care Managers

Ambulatory

Cancelling Orders – Quest

WHAT: Orders canceled in Oracle (Cerner) will now automatically communicate to Quest, ensuring the cancellation is reflected in Quest's system. Continue using the right-click workflow to cancel orders; no additional intervention is needed.

WHY: The enhancement improves order visibility for laboratory staff by ensuring cancellation information is available in Quest, supporting more accurate order management and reducing the risk of processing orders that are no longer needed.

WHEN: Tuesday, October 6, 2026

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

- Ambulatory/WIC
- PSC Laboratory Location

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
 - Providers
 - Quest Laboratory Staff
-

Clinical Decision Support Updates

Weekly Newsletter

➤ Any questions should be directed to our [CDS Team](#) for review.

Release Date	Venues Affected	CDS Tool	Summary
10/8/2026	Inpatient	Outside Transfer to Critical Care Adult Protocol	Bedside Glucose Monitoring and insulin orders added, EMMC ONLY
10/13/2026	Ambulatory	Anticholinergic Duplication Alert	New alert for the ambulatory setting, which notifies clinicians when two active anticholinergic medications are ordered for patients age 65 and older, supporting safer medication use.

Lab

Cancelling Orders – Quest

WHAT: Orders canceled in Oracle (Cerner) will now automatically communicate to Quest, ensuring the cancellation is reflected in Quest’s system. Continue using the right-click workflow to cancel orders; no additional intervention is needed.

WHY: The enhancement improves order visibility for laboratory staff by ensuring cancellation information is available in Quest, supporting more accurate order management and reducing the risk of processing orders no longer needed.

WHEN: Tuesday, October 6, 2026

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

- Ambulatory/WIC
- PSC Laboratory Location

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
 - Providers
 - Quest Laboratory Staff
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Leadership

Ambulatory/WIC

Ambulatory 724Access Downtime Viewer (*Go-Live October 12*)

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Additional Resources:

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Key Benefit: The Ambulatory 724Access Downtime Viewer ensures critical patient information remains accessible during Oracle health downtime events, supporting uninterrupted clinical workflows and patient care delivery.

WHEN: Monday, October 12, 2026

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

- Ambulatory (excludes WIC)

At the following NLH Member Organization(s):

- Acadia Hospital
 - Adult Behavioral Health Bangor Clinic
- AR Gould
 - Cancer Care Presque Isle
 - Cancer Care Presque Isle Treatment
- Eastern Maine Medical Center
 - Cancer Care Brewer Med Onc
 - Cancer Care Brewer Med Onc Treatment
- Maine Coast Hospital
 - Primary Care Ellsworth
- Sebecook Valley Hospital
 - Cardiovascular Care Pittsfield
 - Newport Occupational Therapy
 - Newport Physical Therapy
 - Newport Speech Therapy
 - Primary Care Clinton

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

- Clinical Staff
 - Front Office Staff
 - Providers
-

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Omnicell Technology Conversion – Mercy (*Go-Live 10/12 – 11/24/26*)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere RN**, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

WHY: This transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Monday, October 12, 2026 – Tuesday, November 24, 2026

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

- Acute/Inpatient
- ED
- Peri-Op
- WIC (Gorham and Windham)

At the following NLH Member Organization(s):

- Mercy

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

- **Anesthesia and Pharmacy:** Omnicell XT Anesthesia Workstation (*Go-Live: October 12*)
 - **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 26*)
 - **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: November 24*)
-

Emergency

Omnicell Technology Conversion – Blue Hill (Go-Live 10/6 – 10/8/26)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere** RN, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

WHY: The transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Tuesday, October 6, 2026 – Thursday, October 8, 2026

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

- Acute/Inpatient
- ED

At the following NLH Member Organization(s):

- Blue Hill Hospital

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

- **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 6*)
 - **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: October 8*)
-

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Omnicell Technology Conversion – CA Dean Hospital (*Go-Live 10/6 – 10/7/26*)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere RN**, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

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WHY: The transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Tuesday, October 6, 2026 – Wednesday, October 7, 2026

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

- Acute/Inpatient
- ED

At the following NLH Member Organization(s):

- CA Dean Hospital

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

- **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 6*)
 - **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: October 13*)
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Omnicell Technology Conversion – Mercy (Go-Live 10/12 – 11/24/26)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere RN**, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

WHY: This transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Monday, October 12, 2026 – Tuesday, November 24, 2026

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

- Acute/Inpatient
- ED
- Peri-Op
- WIC (Gorham and Windham)

At the following NLH Member Organization(s):

- Mercy

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

- **Anesthesia and Pharmacy:** Omnicell XT Anesthesia Workstation (*Go-Live: October 12*)
 - **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 26*)
 - **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: November 24*)
-

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Inpatient

Omnicell Technology Conversion – Blue Hill (*Go-Live 10/6 – 10/8/26*)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere RN**, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

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WHEN: Tuesday, October 6, 2026 – Thursday, October 8, 2026

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

- Acute/Inpatient
- ED

At the following NLH Member Organization(s):

- Blue Hill Hospital

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

- **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 6*)
 - **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: October 8*)
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- Acute/Inpatient
- ED

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- CA Dean Hospital

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Omnicell Technology Conversion – Mercy (*Go-Live 10/12 – 11/24/26*)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere RN**, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

WHY: This transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Monday, October 12, 2026 – Tuesday, November 24, 2026

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

- Acute/Inpatient
- ED
- Peri-Op
- WIC (Gorham and Windham)

At the following NLH Member Organization(s):

- Mercy

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

- **Anesthesia and Pharmacy:** Omnicell XT Anesthesia Workstation (*Go-Live: October 12*)
 - **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 26*)
 - **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: November 24*)
-

Peri-Op

Omnicell Technology Conversion – Mercy (Go-Live 10/12 – 11/24/26)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere** RN, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

WHY: This transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Monday, October 12, 2026 – Tuesday, November 24, 2026

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

- Acute/Inpatient
- ED
- Peri-Op
- WIC (Gorham and Windham)

At the following NLH Member Organization(s):

- Mercy

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

- **Anesthesia and Pharmacy:** Omnicell XT Anesthesia Workstation (*Go-Live: October 12*)
 - **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 26*)
 - **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: November 24*)
-

EHR Updates

Week of October 1 – October 7, 2026

Nursing, CNA, Medical Assistants

Ambulatory/WIC

2026-2027 Influenza and COVID Immunization Screening Form Updates

WHAT: Annual updates have been made to both Influenza and COVID Screening Forms.

Highlights

- A highlighted header has been added to remind staff that when screening a patient who is also an NLH employee, selecting **NLH Employee, SHARE with HR/WH** will automatically send the vaccine administration information to Human Resources and WorkHealth. The patient/employee no longer needs to forward this information to their manager.

Influenza Vaccine Screening/ Order Form			
Screening period: SEPTEMBER 1 - APRIL 30 (Vaccine orders will post via the Rule ONLY during this time frame)			
Ask NLH employees for consent to share with NLH HR/ Work Health. Indicate SHARE or Do NOT Share.			
Selecting SHARE transmits vaccine record to Work Health.		Employee #:	
☒ NLH Employee, SHARE with HR/WH			
☐ NLH Employee, Do NOT Share with HR/WH			
☐ Not NLH Employee. Patient, Hospital			
☐ Not NLH Employee. Patient, Physician Office/WIC/Outpatient			
For patients unable to be screened now, document 'Unable to Screen' to set reminder alert in 24 hours.		Has Patient received Influenza Vaccine in THIS 2026-2027 season?	
☒ Vaccine accepted		☐ No	
☐ Vaccine declined		☐ Yes and patient was 6 mo to 8 yrs old	
☐ Unable to screen		☐ Yes and patient was 9 yrs or older	
☐ Vaccine not available			

- Step-by-step guidance for the COVID-19 screening forms is available here:
 - [Inpatient COVID-19 Vaccine Immunization Screening Form](#)
 - [Ambulatory COVID-19 Vaccine Immunization Screening Form](#)
 - It is important to note that Covid vaccine schedules will align with influenza. The recommendation currently is to vaccinate between September 1 and April 30.
- Detailed step-by-step guidance for the Influenza screening forms can be found here:
 - [Influenza Vaccine Screening-Order Workflow](#)

IMPORTANT: Inpatient areas: Rule-based ordering from both Influenza and COVID-19 screening forms will generate orders from September 1, 2026 through April 30, 2027.

WHY: These updates include alignments with the most recent vaccine schedule recommendations and specifically NLH Anti-Microbial Stewardship vaccine guidance.

WHEN: Effective Immediately

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
- Pharmacists
- Providers

Mercy Pain Clinic Procedural Documentation

WHAT: The Mercy Pain Clinic procedural documentation will be standardized to align with Surgical Services, Operating Room, and Endoscopy procedural documentation workflows, improving documentation consistency and procedural work capture. As part of the updated workflow, Medical Assistants will have access to a new position titled **Surginet MA Periop**, which will provide procedure-specific MPages and documentation tools to support the procedural documentation process. Updated workflow will include the use of the following documentation tools:

- Capacity Management
- iView
- Medication Administration Record (MAR)
- MPages
- Surginet

NOTE: For more in-depth workflow education, please refer to the detailed educational flyer found [here](#).

EHR Updates

Week of October 1 – October 7, 2026

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WHY: Aligning documentation with Surgical Services will improve workflow efficiency, reduce documentation errors, enhance patient care, and support more consistent procedural work capture across care settings.

WHEN: Monday, October 5, 2026

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

- Ambulatory
- Peri-Op

At the following NLH Member Organization(s):

- Mercy (Pain Clinic)

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

- Medical Assistants
- Nurses

Cancelling Orders – Quest

WHAT: Orders canceled in Oracle (Cerner) will now automatically communicate to Quest, ensuring the cancellation is reflected in Quest's system. Continue using the right-click workflow to cancel orders; no additional intervention is needed.

WHY: The enhancement improves order visibility for laboratory staff by ensuring cancellation information is available in Quest, supporting more accurate order management and reducing the risk of processing orders no longer needed.

WHEN: Tuesday, October 6, 2026

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

- Ambulatory/WIC
- PSC Laboratory Location

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
 - Providers
 - Quest Laboratory Staff
-

Ambulatory 724Access Downtime Viewer (*Go-Live October 12*)

WHAT: The **Ambulatory 724Access Downtime Viewer** is being installed on designated workstation devices within the ambulatory practices. Select practices will participate in **Phase 1** of the implementation. The remainder of the ambulatory practices will be rolled out in a future phase.

The Ambulatory 724Access Downtime Viewer provides access to critical patient information during a planned and unplanned Oracle Health (Cerner Millennium) downtimes. Users can view and print:

- Ambulatory **practice schedule**
- Select patient **documents**
- **Continuity of Care Document (CCD)**

Appointment schedules are available for:

- The previous seven days
- The next seven days

Additional Resources:

- Click [here](#) for information on using the Ambulatory 724Access Downtime Viewer.
- Click [here](#) for the complete Ambulatory 724Access Downtime Viewer Manual.

NOTE: The workstations hosting the Ambulatory 724Access Downtime Viewer **may be rebooted if necessary; but must NOT be powered off**. CCDs are generated overnight. If a workstation is turned off and a downtime occurs the following day, patient CCDs will NOT be available through the viewer. Additionally, patients who schedule same day appointments will not have a CCD available in the event of a downtime, as CCDs are only generated during the overnight process.

WHY: During a planned or unplanned Oracle Health (Cerner Millennium) downtime, access to the electronic health record may be unavailable. The Ambulatory 724Access Downtime Viewer provides authorized staff with timely access to essential patient information, supporting continuity of care and helping practices maintain safe and effective patient care operation during system outages.

EHR Updates

Week of October 1 – October 7, 2026

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Key Benefit: The Ambulatory 724Access Downtime Viewer ensures critical patient information remains accessible during Oracle health downtime events, supporting uninterrupted clinical workflows and patient care delivery.

WHEN: Monday, October 12, 2026

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

- Ambulatory (excludes WIC)

At the following NLH Member Organization(s):

- Acadia Hospital
 - Adult Behavioral Health Bangor Clinic
- AR Gould
 - Cancer Care Presque Isle
 - Cancer Care Presque Isle Treatment
- Eastern Maine Medical Center
 - Cancer Care Brewer Med Onc
 - Cancer Care Brewer Med Onc Treatment
- Maine Coast Hospital
 - Primary Care Ellsworth
- Sebecook Valley Hospital
 - Cardiovascular Care Pittsfield
 - Newport Occupational Therapy
 - Newport Physical Therapy
 - Newport Speech Therapy
 - Primary Care Clinton

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

- Clinical Staff
 - Front Office Staff
 - Providers
-

Omnicell Technology Conversion – Mercy (Go-Live 10/12 – 11/24/26)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere RN**, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

WHY: This transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Monday, October 12, 2026 – Tuesday, November 24, 2026

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

- Acute/Inpatient
- ED
- Peri-Op
- WIC (Gorham and Windham)

At the following NLH Member Organization(s):

- Mercy

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

- **Anesthesia and Pharmacy:** Omnicell XT Anesthesia Workstation (*Go-Live: October 12*)
 - **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 26*)
 - **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: November 24*)
-

EHR Updates

Week of October 1 – October 7, 2026

Emergency

2026-2027 Influenza and COVID Immunization Screening Form Updates

WHAT: Annual updates have been made to both Influenza and COVID Screening Forms.

Highlights

- A highlighted header has been added to remind staff that when screening a patient who is also an NLH employee, selecting **NLH Employee, SHARE with HR/WH** will automatically send the vaccine administration information to Human Resources and WorkHealth. The patient/employee no longer needs to forward this information to their manager.

The screenshot shows the 'Influenza Vaccine Screening/ Order Form' with a green header. Below the header, the screening period is 'SEPTEMBER 1 - APRIL 30'. The form is divided into several sections. The first section, 'Ask NLH employees for consent to share with NLH HR/ Work Health.', has a highlighted header: 'Indicate SHARE or Do NOT Share. Selecting SHARE transmits vaccine record to Work Health.' Below this, there are four radio button options: 'NLH Employee, SHARE with HR/WH' (which is selected), 'NLH Employee, Do NOT Share with HR/WH', 'Not NLH Employee, Patient, Hospital', and 'Not NLH Employee, Patient, Physician Office/WIC/Outpatient'. An orange arrow points from the highlighted header to the 'NLH Employee, SHARE with HR/WH' option. The second section, 'Employee #:', has a yellow background. The third section, 'For patients unable to be screened now, document "Unable to Screen" to set reminder alert in 24 hours.', has four radio button options: 'Vaccine accepted' (selected), 'Vaccine declined', 'Unable to screen', and 'Vaccine not available'. The fourth section, 'Has Patient received Influenza Vaccine in THIS 2026-2027 season?', has three radio button options: 'No', 'Yes and patient was 6 mo to 8 yrs old', and 'Yes and patient was 9 yrs or older'.

- Step-by-step guidance for the COVID-19 screening forms is available here:
 - [Inpatient COVID-19 Vaccine Immunization Screening Form](#)
 - [Ambulatory COVID-19 Vaccine Immunization Screening Form](#)
 - It is important to note that Covid vaccine schedules will align with influenza. The recommendation currently is to vaccinate between September 1 and April 30.
- Detailed step-by-step guidance for the Influenza screening forms can be found here:
 - [Influenza Vaccine Screening-Order Workflow](#)

IMPORTANT: Inpatient areas: Rule-based ordering from both Influenza and COVID-19 screening forms will generate orders from September 1, 2026 through April 30, 2027.

WHY: These updates include alignments with the most recent vaccine schedule recommendations and specifically NLH Anti-Microbial Stewardship vaccine guidance.

From the Office of Health Informatics

EHR Updates

Week of October 1 – October 7, 2026

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WHEN: Effective Immediately

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
- Pharmacists
- Providers

Reminder: Nursing Handoff and Transfer Communication

WHAT: This reminder reviews documentation of nursing handoffs and transfer communication in the Nursing Handoff/Transport Communication section of any Quick View band within Interactive View and I&O (iView).

NOTE: Document nurse report given whenever care is handed off to another nurse, including shift change, break coverage, return from a procedure, or transfer.

Document For Each Handoff:

- Report Given, including whether the report occurred at the bedside
- Name of the person who gave and received the report
- Handoff comments as applicable
- Whether the Orders and Plan of Care were reviewed
- Lines traced when a line is present at the time of handoff; otherwise select N/A (not applicable)

The screenshot displays the EHR interface. On the left, the 'Adult Quick View' band is visible, listing various patient care items. The 'Nursing Handoff/Transport Communication' item is highlighted. On the right, the 'Nursing Handoff/Transport Communication' section is expanded, showing a list of items to be documented. A dropdown menu is open for 'Report Given', with options 'At bedside' and 'Not at bedside'.

Find Item	Critical
Result	

09/15/2026 13:02 EDT

Report Given
Report Given
Nurse Giving Report
Nurse Receiving Report
Handoff Comments
Orders Reviewed
Plan of Care Reviewed
Lines Traced
Transfer
Mode of Arrival
Transport Destination
Patient Equipment
Shift Summary
On Unit
Off Unit

EHR Updates

Week of October 1 – October 7, 2026

NOTE: Only one nurse needs to document each handoff. Follow department or manager guidance to determine whether the nurse giving or receiving the report completes the documentation.

NOTE: Review the [Nurse Handoff MPage flyer](#) for additional details on nurse handoff.

WHY: Chart audits have identified low compliance with documenting nurse handoff/transfer communication.

[Northern Light Health Policy 30-101](#), Patient Assessment, Education, and Documentation, states that high-quality documentation is an integral component of care delivery. Comprehensive and accurate documentation ensures accurate communication and reflects the care, treatment, and services provided by the care team.

The policy also states that documentation is an essential element of safe, quality, evidence-based nursing practice; contributes to the patient story; and should be completed in near real time unless patient circumstances dictate otherwise.

A. Adult Med-Surg/Intermediate Level of Care Minimum Assessment and Documentation Guidelines	
Admission Assessment and Documentation <i>Utilizing the Admission Workflow MPage Required within 24 hours of Admission</i>	Patient Assessment and Documentation Every Shift <i>OR</i> as Ordered, Per Policy, or Change in Patient Condition
Allergies Admission History Adult Infectious Disease Risk Screening General Info Interpreter Services – per patient need Advance Directive CSSRS (Columbia Suicide Severity Rating Scale) Nutrition Sexuality and Reproductive Spiritual / Visitors Social History (<i>Tobacco, Alcohol, Substance Use, Abuse/Neglect, Vaping</i>) Social Determinates of Health Procedure History Education Needs	Adult Systems Assessment iView Band Head to Toe Physical Assessment Morse Fall Risk Scale Braden Assessment Annotated Narrative Note bCAM for patients 65 years of age and older BMAT (Bedside Mobility Assessment Tool) Adult Lines Devices Procedures iView Band Central Line Necessity Foley Catheter Necessity Adult Quick View iView Band Nursing Handoff/Transport Communication Patient Education iView Band Education related to disease process, medication regimen, pain management, and plan of care

NOTE: Above is a screenshot from the Northern Light Health Policy 30-101. Although the screenshot states this is for Adult Med-Surg, this applies to all areas. Please review the policy for specifics based on location.

WHEN: Effective immediately

EHR Updates

Week of October 1 – October 7, 2026

WHERE: The reminder 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 and Acadia)

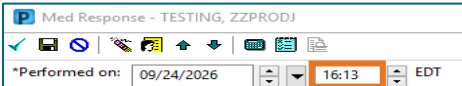
WHO: The reminder will affect the following staff at the above noted locations:

- Nursing Staff

Med Response Update

WHAT: The **Med Response PowerForm** has been updated to default to the **Performed Date/Time**.

- Nursing should adjust the date/time as needed to reflect when the medication response assessment was completed if documentation is not entered in real time.
- The change was implemented by Oracle to improve consistency in how the form populated the assessment time.



The screenshot shows a software window titled "Med Response - TESTING, ZZPROD". Below the title bar is a toolbar with various icons. At the bottom of the window, there is a field labeled "*Performed on:" followed by a date and time selector. The date is set to "09/24/2026" and the time is set to "16:13" in a dropdown menu, with "EDT" as the time zone. The time dropdown is highlighted with an orange border.

WHY: Previously, the form behaved differently depending on how it was accessed:

- When it opened from the **MAR**, the form defaulted to the **Task Due Date/Time**.
- When it opened from **Adhoc** or **CareCompass**, the form defaulted to the **Performed Date/Time**.

To standardize the workflow, the Med Response PowerForm now consistently defaults to the Performed Date/Time, recognizing that the medication response assessment may not always occur exactly at the scheduled task due time. The update helps ensure more accurate documentation of the assessment completion time.

WHEN: Effective Immediately

EHR Updates

Week of October 1 – October 7, 2026

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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:

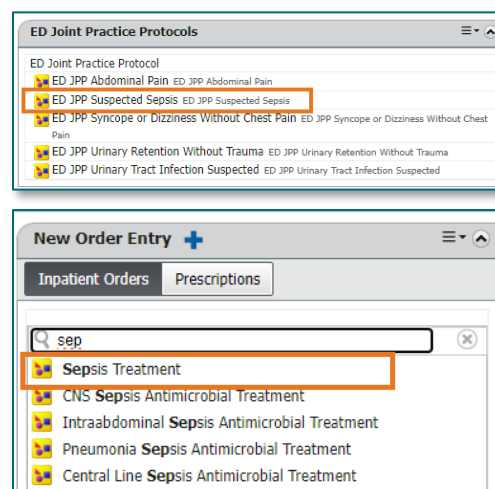
- Nursing

Inactivation of ED JPP Suspected Sepsis PowerPlan

WHAT: To support a consistent and streamlined approach to sepsis care, the **ED JPP Suspected Sepsis PowerPlan** will be inactivated.

Sepsis Treatment PowerPlan

- The **ED JPP Suspected Sepsis PowerPlan** will **no longer** be available for use by ED providers and nurses.
- Nursing should continue to escalate concerns for **suspected sepsis** to the treating provider based on clinical assessment and established sepsis screening workflows.
- When clinically appropriate, providers should **initiate** the **Sepsis Treatment PowerPlan** to support timely evaluation and treatment of patients with suspected sepsis.



WHY: Early collection of sepsis labs is essential for **timely evaluation and treatment**. The **Sepsis Treatment PowerPlan** contains the standardized **laboratory orders** needed to support **sepsis workup**.

WHEN: Monday, October 5, 2026

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

- Acute/Inpatient (to include ED)

At the following NLH Member Organization(s):

- All NLH Hospitals (excluding Acadia and Mayo)

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

- ED Providers
- Nursing

Omnicell Technology Conversion – Blue Hill (Go-Live 10/6 – 10/8/26)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere** RN, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

WHY: The transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Tuesday, October 6, 2026 – Thursday, October 8, 2026

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

- Acute/Inpatient
- ED

At the following NLH Member Organization(s):

- Blue Hill Hospital
-

EHR Updates

Week of October 1 – October 7, 2026

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

- **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 6*)
- **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: October 8*)

Omnicell Technology Conversion – CA Dean Hospital (*Go-Live 10/6 – 10/7/26*)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere** RN, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

WHY: The transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Tuesday, October 6, 2026 – Wednesday, October 7, 2026

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

- Acute/Inpatient
- ED

At the following NLH Member Organization(s):

- CA Dean Hospital
-

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

- **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 6*)
- **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: October 13*)

Omnicell Technology Conversion – Mercy (Go-Live 10/12 – 11/24/26)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere RN**, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

WHY: This transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Monday, October 12, 2026 – Tuesday, November 24, 2026

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

- Acute/Inpatient
- ED
- Peri-Op
- WIC (Gorham and Windham)

At the following NLH Member Organization(s):

- Mercy
-

EHR Updates

Week of October 1 – October 7, 2026

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

- **Anesthesia and Pharmacy:** Omnicell XT Anesthesia Workstation (*Go-Live: October 12*)
- **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 26*)
- **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: November 24*)

Inpatient

2026-2027 Influenza and COVID Immunization Screening Form Updates

WHAT: Annual updates have been made to both Influenza and COVID Screening Forms.

Highlights

- A highlighted header has been added to remind staff that when screening a patient who is also an NLH employee, selecting **NLH Employee, SHARE with HR/WH** will automatically send the vaccine administration information to Human Resources and WorkHealth. The patient/employee no longer needs to forward this information to their manager.

Influenza Vaccine Screening/ Order Form			
Screening period: SEPTEMBER 1 - APRIL 30 (Vaccine orders will post via the Rule ONLY during this time frame)			
Ask NLH employees for consent to share with NLH HR/ Work Health. Indicate SHARE or Do NOT Share.		For patients unable to be screened now, document 'Unable to Screen' to set reminder alert in 24 hours.	
Selecting SHARE transmits vaccine record to Work Health.		Reason unable to screen:	
☒ NLH Employee, SHARE with HR/WH		☒ Vaccine accepted	
☐ NLH Employee, Do NOT Share with HR/WH		☐ Vaccine declined	
☐ Not NLH Employee, Patient, Hospital		☐ Unable to screen	
☐ Not NLH Employee, Patient, Physician Office/WIC/Outpatient		☐ Vaccine not available	
Employee #:			
Has Patient received Influenza Vaccine in THIS 2026-2027 season?			
☐ No			
☐ Yes and patient was 6 mo to 8 yrs old			
☐ Yes and patient was 9 yrs or older			

- Step-by-step guidance for the COVID-19 screening forms is available here:
 - [Inpatient COVID-19 Vaccine Immunization Screening Form](#)
 - [Ambulatory COVID-19 Vaccine Immunization Screening Form](#)
 - It is important to note that Covid vaccine schedules will align with influenza. The recommendation currently is to vaccinate between September 1 and April 30.

- Detailed step-by-step guidance for the Influenza screening forms can be found here:
 - [Influenza Vaccine Screening-Order Workflow](#)

IMPORTANT: Inpatient areas: Rule-based ordering from both Influenza and COVID-19 screening forms will generate orders from September 1, 2026 through April 30, 2027.

WHY: These updates include alignments with the most recent vaccine schedule recommendations and specifically NLH Anti-Microbial Stewardship vaccine guidance.

WHEN: Effective Immediately

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
- Pharmacists
- Providers

Reminder: Nursing Handoff and Transfer Communication

WHAT: This reminder reviews documentation of nursing handoffs and transfer communication in the Nursing Handoff/Transport Communication section of any Quick View band within Interactive View and I&O (iView).

NOTE: Document nurse report given whenever care is handed off to another nurse, including shift change, break coverage, return from a procedure, or transfer.

EHR Updates

Week of October 1 – October 7, 2026

Document For Each Handoff:

- Report Given, including whether the report occurred at the bedside
- Name of the person who gave and received the report
- Handoff comments as applicable
- Whether the Orders and Plan of Care were reviewed
- Lines traced when a line is present at the time of handoff; otherwise select N/A (not applicable)

The screenshot displays the 'Adult Quick View' interface. On the left, a list of tasks includes 'Vital Signs', 'Caregiver Rounding', 'Activities of Daily Living', 'Equipment/Devices', 'Environmental Safety Management', 'Ice/Warm Pack Application', 'Bladder Scan/ Postvoid Residual', 'Provider Notification', 'Nursing Handoff/Transport Communication' (highlighted), 'Family Involvement', and 'Post Skin Response'. On the right, a form contains a 'Find Item' search bar, a 'Critical' checkbox, and a 'Result' field. Below these, a date and time stamp shows '09/15/2026 13:02 EDT'. A dropdown menu for 'Report Given' is open, showing options 'At bedside' and 'Not at bedside'. Other sections include 'Anticipated Discharge ...', 'Patient ID Band on and ...', 'Report Given', 'Nurse Giving Report', 'Nurse Receiving Report', 'Handoff Comments', 'Orders Reviewed', 'Plan of Care Reviewed', 'Lines Traced', 'Transfer', 'Mode of Arrival', 'Transport Destination', 'Patient Equipment', 'Shift Summary', 'On Unit', and 'Off Unit'.

NOTE: Only one nurse needs to document each handoff. Follow department or manager guidance to determine whether the nurse giving or receiving the report completes the documentation.

NOTE: Review the [Nurse Handoff MPage flyer](#) for additional details on nurse handoff.

WHY: Chart audits have identified low compliance with documenting nurse handoff/transfer communication.

[Northern Light Health Policy 30-101](#), Patient Assessment, Education, and Documentation, states that high-quality documentation is an integral component of care delivery. Comprehensive and accurate documentation ensures accurate communication and reflects the care, treatment, and services provided by the care team.

From the Office of Health Informatics

EHR Updates

Week of October 1 – October 7, 2026

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The policy also states that documentation is an essential element of safe, quality, evidence-based nursing practice; contributes to the patient story; and should be completed in near real time unless patient circumstances dictate otherwise.

A. Adult Med-Surg/Intermediate Level of Care Minimum Assessment and Documentation Guidelines	
Admission Assessment and Documentation Utilizing the Admission Workflow MPage Required within 24 hours of Admission	Patient Assessment and Documentation Every Shift OR as Ordered, Per Policy, or Change in Patient Condition
Allergies Admission History Adult Infectious Disease Risk Screening General Info Interpreter Services – per patient need Advance Directive CSSRS (Columbia Suicide Severity Rating Scale) Nutrition Sexuality and Reproductive Spiritual / Visitors Social History (Tobacco, Alcohol, Substance Use, Abuse/Neglect, Vaping) Social Determinates of Health Procedure History Education Needs	Adult Systems Assessment iView Band Head to Toe Physical Assessment Morse Fall Risk Scale Braden Assessment Annotated Narrative Note bCAM for patients 65 years of age and older BMAT (Bedside Mobility Assessment Tool) Adult Lines Devices Procedures iView Band Central Line Necessity Foley Catheter Necessity Adult Quick View iView Band Nursing Handoff/Transport Communication Patient Education iView Band Education related to disease process, medication regimen, pain management, and plan of care

NOTE: Above is a screenshot from the Northern Light Health Policy 30-101. Although the screenshot states this is for Adult Med-Surg, this applies to all areas. Please review the policy for specifics based on location.

WHEN: Effective immediately

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

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

At the following NLH Member Organization(s):

- All NLH Hospitals (excluding Acadia and Mayo)

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

- Nursing Staff

Med Response Update

WHAT: The **Med Response PowerForm** has been updated to default to the **Performed Date/Time**.

- Nursing should adjust the date/time as needed to reflect when the medication response assessment was completed if documentation is not entered in real time.

The screenshot shows a software interface for a 'Med Response' form. At the top, it says 'Med Response - TESTING, ZZPROD'. Below this is a toolbar with various icons. The main section of the form has a label '*Performed on:' followed by a date field containing '09/24/2026' and a time field containing '16:13'. The time field is highlighted with an orange box. To the right of the time field is a dropdown menu currently set to 'EDT'.

EHR Updates

Week of October 1 – October 7, 2026

- The change was implemented by Oracle to improve consistency in how the form populated the assessment time.

WHY: Previously, the form behaved differently depending on how it was accessed:

- When it opened from the **MAR**, the form defaulted to the **Task Due Date/Time**.
- When it opened from **Adhoc** or **CareCompass**, the form defaulted to the **Performed Date/Time**.

To standardize the workflow, the Med Response PowerForm now consistently defaults to the Performed Date/Time, recognizing that the mediation response assessment may not always occur exactly at the scheduled task due time. The update helps ensure more accurate documentation of the assessment completion time.

WHEN: Effective Immediately

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

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

At the following NLH Member Organization(s):

- All NLH Hospitals (excluding Mayo)

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

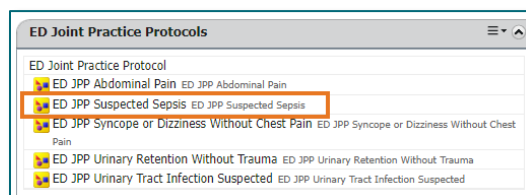
- Nursing

Inactivation of ED JPP Suspected Sepsis PowerPlan

WHAT: To support a consistent and streamlined approach to sepsis care, the **ED JPP Suspected Sepsis PowerPlan** will be inactivated.

Sepsis Treatment PowerPlan

- The **ED JPP Suspected Sepsis PowerPlan** will **no longer** be available for use by ED providers and nurses.

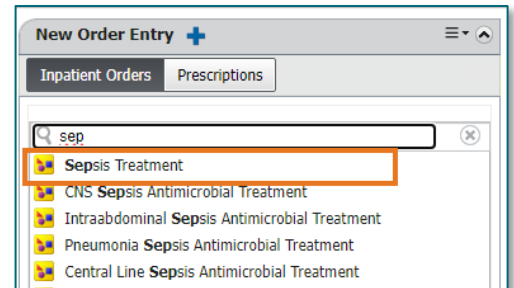


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- Nursing should continue to escalate concerns for **suspected sepsis** to the treating provider based on clinical assessment and established sepsis screening workflows.
- When clinically appropriate, providers should **initiate** the **Sepsis Treatment** PowerPlan to support timely evaluation and treatment of patients with suspected sepsis.



WHY: Early collection of sepsis labs is essential for **timely evaluation** and **treatment**. The **Sepsis Treatment** PowerPlan contains the standardized **laboratory orders** needed to support **sepsis workup**.

WHEN: Monday, October 5, 2026

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

- Acute/Inpatient (to include ED)

At the following NLH Member Organization(s):

- All NLH Hospitals (excluding Acadia and Mayo)

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

- ED Providers
- Nursing

Omniceil Technology Conversion – Blue Hill (*Go-Live 10/6 – 10/8/26*)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omniceil** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere** RN, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

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WHY: The transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Tuesday, October 6, 2026 – Thursday, October 8, 2026

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

- Acute/Inpatient
- ED

At the following NLH Member Organization(s):

- Blue Hill Hospital

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

- **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 6*)
- **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: October 8*)

Omnicell Technology Conversion – CA Dean Hospital (*Go-Live 10/6 – 10/7/26*)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere** RN, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

WHY: The transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Tuesday, October 6, 2026 – Wednesday, October 7, 2026

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

- Acute/Inpatient
- ED

At the following NLH Member Organization(s):

- CA Dean Hospital

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

- **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 6*)
- **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: October 13*)

Omnicell Technology Conversion – Mercy (*Go-Live 10/12 – 11/24/26*)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere** RN, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

WHY: This transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Monday, October 12, 2026 – Tuesday, November 24, 2026

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

- Acute/Inpatient
 - ED
 - Peri-Op
 - WIC (Gorham and Windham)
-

EHR Updates

Week of October 1 – October 7, 2026

At the following NLH Member Organization(s):

- Mercy

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

- **Anesthesia and Pharmacy:** Omnicell XT Anesthesia Workstation (*Go-Live: October 12*)
- **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 26*)
- **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: November 24*)

Peri-Op

2026-2027 Influenza and COVID Immunization Screening Form Updates

WHAT: Annual updates have been made to both Influenza and COVID Screening Forms.

Highlights

- A highlighted header has been added to remind staff that when screening a patient who is also an NLH employee, selecting **NLH Employee, SHARE with HR/WH** will automatically send the vaccine administration information to Human Resources and WorkHealth. The patient/employee no longer needs to forward this information to their manager.

Influenza Vaccine Screening/ Order Form

Screening period: **SEPTEMBER 1 - APRIL 30**
(Vaccine orders will post via the Rule ONLY during this time frame)

Ask NLH employees for consent to share with NLH HR/ Work Health.
Indicate SHARE or Do NOT Share.

Selecting **SHARE** transmits vaccine record to Work Health.

Employee #:

For patients unable to be screened now, document 'Unable to Screen' to set reminder alert in 24 hours.

Has Patient received Influenza Vaccine in THIS 2026-2027 season?

- Step-by-step guidance for the COVID-19 screening forms is available here:
 - [Inpatient COVID-19 Vaccine Immunization Screening Form](#)
 - [Ambulatory COVID-19 Vaccine Immunization Screening Form](#)
-

- It is important to note that Covid vaccine schedules will align with influenza. The recommendation currently is to vaccinate between September 1 and April 30.
- Detailed step-by-step guidance for the Influenza screening forms can be found here:
 - [Influenza Vaccine Screening-Order Workflow](#)

IMPORTANT: Inpatient areas: Rule-based ordering from both Influenza and COVID-19 screening forms will generate orders from September 1, 2026 through April 30, 2027.

WHY: These updates include alignments with the most recent vaccine schedule recommendations and specifically NLH Anti-Microbial Stewardship vaccine guidance.

WHEN: Effective Immediately

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
- Pharmacists
- Providers

Reminder: Nursing Handoff and Transfer Communication

WHAT: This reminder reviews documentation of nursing handoffs and transfer communication in the Nursing Handoff/Transport Communication section of any Quick View band within Interactive View and I&O (iView).

NOTE: Document nurse report given whenever care is handed off to another nurse, including shift change, break coverage, return from a procedure, or transfer.

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Document For Each Handoff:

- Report Given, including whether the report occurred at the bedside
- Name of the person who gave and received the report
- Handoff comments as applicable
- Whether the Orders and Plan of Care were reviewed
- Lines traced when a line is present at the time of handoff; otherwise select N/A (not applicable)

The screenshot displays the 'Adult Quick View' interface in an EHR system. On the left, a sidebar lists various clinical categories, with 'Nursing Handoff/Transport Communication' selected. The main area shows a 'Find Item' search bar and a 'Critical' checkbox. Below these, a list of items is displayed, each with a checkbox for 'Report Given'. The 'Nursing Handoff/Transport Communication' section is expanded, revealing a detailed list of items to be documented, including 'Anticipated Discharge', 'Patient ID Band on and', 'Report Given', 'Nurse Giving Report', 'Nurse Receiving Report', 'Handoff Comments', 'Orders Reviewed', 'Plan of Care Reviewed', 'Lines Traced', 'Transfer', 'Mode of Arrival', 'Transport Destination', 'Patient Equipment', 'Shift Summary', 'On Unit', and 'Off Unit'. A date and time stamp '09/15/2026 13:02 EDT' is visible in the top right corner.

NOTE: Only one nurse needs to document each handoff. Follow department or manager guidance to determine whether the nurse giving or receiving the report completes the documentation.

NOTE: Review the [Nurse Handoff MPage flyer](#) for additional details on nurse handoff.

WHY: Chart audits have identified low compliance with documenting nurse handoff/transfer communication.

[Northern Light Health Policy 30-101](#), Patient Assessment, Education, and Documentation, states that high-quality documentation is an integral component of care delivery. Comprehensive and accurate documentation ensures accurate communication and reflects the care, treatment, and services provided by the care team.

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The policy also states that documentation is an essential element of safe, quality, evidence-based nursing practice; contributes to the patient story; and should be completed in near real time unless patient circumstances dictate otherwise.

A. Adult Med-Surg/Intermediate Level of Care Minimum Assessment and Documentation Guidelines	
Admission Assessment and Documentation Utilizing the Admission Workflow MPage Required within 24 hours of Admission	Patient Assessment and Documentation Every Shift OR as Ordered, Per Policy, or Change in Patient Condition
Allergies Admission History Adult Infectious Disease Risk Screening General Info Interpreter Services – per patient need Advance Directive CSSRS (Columbia Suicide Severity Rating Scale) Nutrition Sexuality and Reproductive Spiritual / Visitors Social History (Tobacco, Alcohol, Substance Use, Abuse/Neglect, Vaping) Social Determinates of Health Procedure History Education Needs	Adult Systems Assessment iView Band Head to Toe Physical Assessment Morse Fall Risk Scale Braden Assessment Annotated Narrative Note bCAM for patients 65 years of age and older BMAT (Bedside Mobility Assessment Tool) Adult Lines Devices Procedures iView Band Central Line Necessity Foley Catheter Necessity Adult Quick View iView Band Nursing Handoff/Transport Communication Patient Education iView Band Education related to disease process, medication regimen, pain management, and plan of care

NOTE: Above is a screenshot from the Northern Light Health Policy 30-101. Although the screenshot states this is for Adult Med-Surg, this applies to all areas. Please review the policy for specifics based on location.

WHEN: Effective immediately

WHERE: The reminder 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 and Acadia)

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

- Nursing Staff

Med Response Update

WHAT: The **Med Response PowerForm** has been updated to default to the **Performed Date/Time**.

- Nursing should adjust the date/time as needed to reflect when the medication response assessment was completed if documentation is not entered in real time.

The screenshot shows a software interface for a 'Med Response' form. At the top, it says 'Med Response - TESTING, ZZPROD'. Below that is a toolbar with various icons. The main section is labeled '*Performed on:' and contains two dropdown menus. The first dropdown shows the date '09/24/2026' and the second dropdown shows the time '16:13'. The time dropdown is highlighted with an orange box.

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Week of October 1 – October 7, 2026

- The change was implemented by Oracle to improve consistency in how the form populated the assessment time.

WHY: Previously, the form behaved differently depending on how it was accessed:

- When it opened from the **MAR**, the form defaulted to the **Task Due Date/Time**.
- When it opened from **Adhoc** or **CareCompass**, the form defaulted to the **Performed Date/Time**.

To standardize the workflow, the Med Response PowerForm now consistently defaults to the Performed Date/Time, recognizing that the mediation response assessment may not always occur exactly at the scheduled task due time. The update helps ensure more accurate documentation of the assessment completion time.

WHEN: Effective Immediately

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

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

At the following NLH Member Organization(s):

- All NLH Hospitals (excluding Mayo)

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

- Nursing

Mercy Pain Clinic Procedural Documentation

WHAT: The Mercy Pain Clinic procedural documentation will be standardized to align with Surgical Services, Operating Room, and Endoscopy procedural documentation workflows, improving documentation consistency and procedural work capture. As part of the updated workflow, Medical Assistants will have access to a new position titled **Surginet MA Periop**, which will provide procedure-specific MPages and documentation tools to support the procedural documentation process. Updated workflow will include the use of the following documentation tools:

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- Capacity Management
- iView
- Medication Administration Record (MAR)
- MPages
- Surginet

NOTE: For more in-depth workflow education, please refer to the detailed educational flyer found [here](#).

WHY: Aligning documentation with Surgical Services will improve workflow efficiency, reduce documentation errors, enhance patient care, and support more consistent procedural work capture across care settings.

WHEN: Monday, October 5, 2026

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

- Ambulatory
- Peri-Op

At the following NLH Member Organization(s):

- Mercy (Pain Clinic)

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

- Medical Assistants
- Nurses

Omnicell Technology Conversion – Mercy (*Go-Live 10/12 – 11/24/26*)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere** RN, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

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WHY: This transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Monday, October 12, 2026 – Tuesday, November 24, 2026

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

- Acute/Inpatient
- ED
- Peri-Op
- WIC (Gorham and Windham)

At the following NLH Member Organization(s):

- Mercy

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

- **Anesthesia and Pharmacy:** Omnicell XT Anesthesia Workstation (*Go-Live: October 12*)
- **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 26*)
- **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: November 24*)

Pharmacists & Pharmacy Technicians

Ambulatory/WIC

2026-2027 Influenza and COVID Immunization Screening Form Updates

WHAT: Annual updates have been made to both Influenza and COVID Screening Forms.

Highlights

- A highlighted header has been added to remind staff that when screening a patient who is also an NLH employee, selecting **NLH Employee, SHARE with HR/WH** will automatically send the vaccine administration information to Human Resources and WorkHealth. The
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patient/employee no longer needs to forward this information to their manager.

Influenza Vaccine Screening/ Order Form

Screening period: SEPTEMBER 1 - APRIL 30
(Vaccine orders will post via the Rule ONLY during this time frame)

Ask NLH employees for consent to share with NLH HR/ Work Health.
Indicate SHARE or Do NOT Share.

Selecting SHARE transmits vaccine record to Work Health.

☒ NLH Employee, SHARE with HR/WH
☐ NLH Employee, Do NOT Share with HR/WH
☐ Not NLH Employee, Patient, Hospital
☐ Not NLH Employee, Patient, Physician Office/WIC/Outpatient

Employee #:

For patients unable to be screened now, document "Unable to Screen" to set reminder alert in 24 hours.

☒ Vaccine accepted
☐ Vaccine declined
☐ Unable to screen
☐ Vaccine not available

Reason unable to screen:

Has Patient received Influenza Vaccine in THIS 2026-2027 season?

☐ No
☐ Yes and patient was 6 mo to 8 yrs old
☐ Yes and patient was 9 yrs or older

- Step-by-step guidance for the COVID-19 screening forms is available here:
 - [Inpatient COVID-19 Vaccine Immunization Screening Form](#)
 - [Ambulatory COVID-19 Vaccine Immunization Screening Form](#)
 - It is important to note that Covid vaccine schedules will align with influenza. The recommendation currently is to vaccinate between September 1 and April 30.
- Detailed step-by-step guidance for the Influenza screening forms can be found here:
 - [Influenza Vaccine Screening-Order Workflow](#)

IMPORTANT: Inpatient areas: Rule-based ordering from both Influenza and COVID-19 screening forms will generate orders from September 1, 2026 through April 30, 2027.

WHY: These updates include alignments with the most recent vaccine schedule recommendations and specifically NLH Anti-Microbial Stewardship vaccine guidance.

WHEN: Effective Immediately

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
- Pharmacists
- Providers

Cancelling Orders – Quest

WHAT: Orders canceled in Oracle (Cerner) will now automatically communicate to Quest, ensuring the cancellation is reflected in Quest's system. Continue using the right-click workflow to cancel orders; no additional intervention is needed.

WHY: The enhancement improves order visibility for laboratory staff by ensuring cancellation information is available in Quest, supporting more accurate order management and reducing the risk of processing orders that are no longer needed.

WHEN: Tuesday, October 6, 2026

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

- Ambulatory/WIC
- PSC Laboratory Location

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
- Providers
- Quest Laboratory Staff

Omnicell Technology Conversion – Mercy (Go-Live 10/12 – 11/24/26)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere RN**, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

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NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

WHY: This transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Monday, October 12, 2026 – Tuesday, November 24, 2026

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

- Acute/Inpatient
- ED
- Peri-Op
- WIC (Gorham and Windham)

At the following NLH Member Organization(s):

- Mercy

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

- **Anesthesia and Pharmacy:** Omnicell XT Anesthesia Workstation (*Go-Live: October 12*)
 - **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 26*)
 - **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: November 24*)
-

EHR Updates

Week of October 1 – October 7, 2026

Inpatient/ED/Peri-Op

2026-2027 Influenza and COVID Immunization Screening Form Updates

WHAT: Annual updates have been made to both Influenza and COVID Screening Forms.

Highlights

- A highlighted header has been added to remind staff that when screening a patient who is also an NLH employee, selecting **NLH Employee, SHARE with HR/WH** will automatically send the vaccine administration information to Human Resources and WorkHealth. The patient/employee no longer needs to forward this information to their manager.

The screenshot shows the 'Influenza Vaccine Screening/ Order Form' with a green header. Below the header, the screening period is 'SEPTEMBER 1 - APRIL 30'. The form is divided into several sections. The first section, 'Ask NLH employees for consent to share with NLH HR/ Work Health. Indicate SHARE or Do NOT Share.', has a highlighted option: 'NLH Employee, SHARE with HR/WH'. An orange arrow points from this option to the 'Employee #' field. The second section, 'For patients unable to be screened now, document "Unable to Screen" to set reminder alert in 24 hours.', has options: 'Vaccine accepted', 'Vaccine declined', 'Unable to screen', and 'Vaccine not available'. The third section, 'Has Patient received Influenza Vaccine in THIS 2026-2027 season?', has options: 'No', 'Yes and patient was 6 mo to 8 yrs old', and 'Yes and patient was 9 yrs or older'.

- Step-by-step guidance for the COVID-19 screening forms is available here:
 - [Inpatient COVID-19 Vaccine Immunization Screening Form](#)
 - [Ambulatory COVID-19 Vaccine Immunization Screening Form](#)
 - It is important to note that Covid vaccine schedules will align with influenza. The recommendation currently is to vaccinate between September 1 and April 30.
- Detailed step-by-step guidance for the Influenza screening forms can be found here:
 - [Influenza Vaccine Screening-Order Workflow](#)

IMPORTANT: Inpatient areas: Rule-based ordering from both Influenza and COVID-19 screening forms will generate orders from September 1, 2026 through April 30, 2027.

WHY: These updates include alignments with the most recent vaccine schedule recommendations and specifically NLH Anti-Microbial Stewardship vaccine guidance.

EHR Updates

Week of October 1 – October 7, 2026

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WHEN: Effective Immediately

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
- Pharmacists
- Providers

Omnicell Technology Conversion – Blue Hill (*Go-Live 10/6 – 10/8/26*)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere** RN, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

WHY: The transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Tuesday, October 6, 2026 – Thursday, October 8, 2026

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

- Acute/Inpatient
- ED

At the following NLH Member Organization(s):

- Blue Hill Hospital
-

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

- **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 6*)
- **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: October 8*)

Omnicell Technology Conversion – CA Dean Hospital (*Go-Live 10/6 – 10/7/26*)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere** RN, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

WHY: The transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Tuesday, October 6, 2026 – Wednesday, October 7, 2026

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

- Acute/Inpatient
- ED

At the following NLH Member Organization(s):

- CA Dean Hospital
-

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

- **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 6*)
- **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: October 13*)

Omnicell Technology Conversion – Mercy (Go-Live 10/12 – 11/24/26)

WHAT: Northern Light Health is moving from its existing BD Pyxis system to the modern **Omnicell** platform. This transition will introduce automated dispensing cabinets, anesthesia workstations, central pharmacy dispensing solutions, and **Anywhere** RN, which enables remote medication queuing for Omnicell dispensing within **PowerChart** and **FirstNet**.

NOTE: For more information about Oracle Cerner Omnicell Anywhere RN, click [here](#). Additional training materials and resources are available on the Omnicell Training [website](#), and education for this transition will be provided through [HealthStream](#).

WHY: This transition standardizes and modernizes medication management technology across Northern Light Health to support a smoother, more efficient process for managing medications in daily patient care and pharmacy settings.

WHEN: Monday, October 12, 2026 – Tuesday, November 24, 2026

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

- Acute/Inpatient
- ED
- Peri-Op
- WIC (Gorham and Windham)

At the following NLH Member Organization(s):

- Mercy
-

EHR Updates

Week of October 1 – October 7, 2026

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

- **Anesthesia and Pharmacy:** Omnicell XT Anesthesia Workstation (*Go-Live: October 12*)
- **Clinical Staff and Pharmacy:** Omnicell XT Automated Dispensing Cabinets (*Go-Live: October 26*)
- **Pharmacy:** Omnicell Controlled Substance Manager (*Go-Live: November 24*)

Physicians, Physician Assistants, Nurse Practitioners

Ambulatory/WIC

NEW PREVENT Score PowerForm

WHAT: A new **PREVENT Score** PowerForm is available. The current EMR only includes the ASCVD PCE 2018 risk assessment calculator. Beginning August 2025, the American Heart Association (AHA) recommends using the **PREVENT** Calculator for ASCVD risk assessment.

From the Office of Health Informatics

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NOTE: Providers can access the PREVENT Score PowerForm from Recommendations if the patient has a Cardiovascular Risk Assessment Recommendation, Clinical Entry Workspace, or within the AdHoc component.

The screenshot shows the 'PREVENT Cardiovascular Risk Score' interface. It includes instructions to access the calculator online at <https://professional.heart.org/en/guidelines-and-statements/prevent-calculator>. It prompts the user to enter the last recorded values for the 10 Year CVD Risk Score, 10 Year ASCVD Risk Score, 30 year CVD Risk Score, and 30 year ASCVD Risk Score. It also shows a section for 'Most Recent Recorded Results' with values for eGFR (CKD-EPI) and Body Mass Index. At the bottom, there is a section for 'Previously Documented Risk Scores' which currently shows 'No qualifying results found.'

PREVENT Cardiovascular Risk Score		
ACCESS THE PREVENT CALCULATOR ON THE INTERNET AT THIS ADDRESS: https://professional.heart.org/en/guidelines-and-statements/prevent-calculator Consider making it a favorite. <i>Below find the last recorded values that you will need for the calculator.</i> <i>Once you have completed the calculator, enter the results in these boxes.</i>		
10 Year CVD Risk Score	10 Year ASCVD Risk Score	Most Recent Recorded Results
		eGFR (CKD-EPI): 88 (03/23/2026 09:07) Body Mass Index: 25.71 kg/m2 (09/03/2026 12:59)
30 year CVD Risk Score	30 year ASCVD Risk Score	
Previously Documented Risk Scores		
No qualifying results found.		

PREVENT Score PowerForm

- Providers will access the **PREVENT** calculator through the external internet website.
- Providers will complete all required calculator fields and generate the risk assessment results.
- The calculated results from the **PREVENT** calculator will then need to be documented in the **PREVENT Score** PowerForm.
- If any previously documented **PREVENT** risk scores have been documented, those results will be displayed at the bottom of the **PREVENT Score** PowerForm for reference.

NOTE: Filling out the 10-year risk will satisfy the recommendation for 5 years.

WHY: The PowerForm was developed to help align current EMR tools with the latest AHA guidance, support ASCVD risk assessment, and improve preventive care documentation across the PCSL.

EHR Updates

Week of October 1 – October 7, 2026

WHEN: Tuesday, September 22, 2026

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

- Ambulatory (excludes WIC)

At the following NLH Member Organization(s):

- All NLH Hospitals (excluding Acadia and Mayo)

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

- Providers

2026-2027 Influenza and COVID Immunization Screening Form Updates

WHAT: Annual updates have been made to both Influenza and COVID Screening Forms.

Highlights

- A highlighted header has been added to remind staff that when screening a patient who is also an NLH employee, selecting **NLH Employee, SHARE with HR/WH** will automatically send the vaccine administration information to Human Resources and WorkHealth. The patient/employee no longer needs to forward this information to their manager.

Influenza Vaccine Screening/ Order Form

Screening period: **SEPTEMBER 1 - APRIL 30**
(Vaccine orders will post via the Rule ONLY during this time frame.)

Ask NLH employees for consent to share with NLH HR/ Work Health.
Indicate SHARE or Do NOT Share.
Selecting SHARE transmits vaccine record to Work Health.

☒ NLH Employee, SHARE with HR/WH
☐ NLH Employee, Do NOT Share with HR/WH
☐ Not NLH Employee, Patient, Hospital
☐ Not NLH Employee, Patient, Physician Office/WIC/Outpatient

Employee #:

For patients unable to be screened now, document 'Unable to Screen' to set reminder alert in 24 hours.

☒ Vaccine accepted
☐ Vaccine declined
☐ Unable to screen
☐ Vaccine not available

Has Patient received Influenza Vaccine in THIS 2026-2027 season?

☐ No
☐ Yes and patient was 6 mo to 8 yrs old
☐ Yes and patient was 9 yrs or older

- Step-by-step guidance for the COVID-19 screening forms is available here:
 - [Inpatient COVID-19 Vaccine Immunization Screening Form](#)
 - [Ambulatory COVID-19 Vaccine Immunization Screening Form](#)
 - It is important to note that Covid vaccine schedules will align with influenza. The recommendation currently is to vaccinate between September 1 and April 30.
- Detailed step-by-step guidance for the Influenza screening forms can be found here:

EHR Updates

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- [Influenza Vaccine Screening-Order Workflow](#)

IMPORTANT: Inpatient areas: Rule-based ordering from both Influenza and COVID-19 screening forms will generate orders from September 1, 2026 through April 30, 2027.

WHY: These updates include alignments with the most recent vaccine schedule recommendations and specifically NLH Anti-Microbial Stewardship vaccine guidance.

WHEN: Effective Immediately

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
- Pharmacists
- Providers

NL Home Care and Hospice EMR Update

WHAT: NL Home Care and Hospice will transition its electronic medical record to MatrixCare effective October 1, 2026.

The transition will improve Oracle integration by routing NL Home Care and Hospice orders and documents to the appropriate providers' Cerner Message Center for signature, eliminating the need to sign paper orders or use the electronic portal.

IMPORTANT: Documents must be signed by the originally requested provider, not by proxy personnel.

WHY: The change supports NL Home Care and Hospice's transition from Netsmart to the MatrixCare electronic medical record.

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WHEN: Thursday, October 1, 2026

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

- Acute/Inpatient
- Ambulatory

At the following NLH Member Organization(s):

- All NLH Hospitals (excluding Acadia and Mayo)

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

- Providers

Cancelling Orders – Quest

WHAT: Orders canceled in Oracle (Cerner) will now automatically communicate to Quest, ensuring the cancellation is reflected in Quest's system. Continue using the right-click workflow to cancel orders; no additional intervention is needed.

WHY: The enhancement improves order visibility for laboratory staff by ensuring cancellation information is available in Quest, supporting more accurate order management and reducing the risk of processing orders that are no longer needed.

WHEN: Tuesday, October 6, 2026

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

- Ambulatory/WIC
- PSC Laboratory Location

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
 - Providers
 - Quest Laboratory Staff
-

Ambulatory 724Access Downtime Viewer (*Go-Live October 12*)

WHAT: The **Ambulatory 724Access Downtime Viewer** is being installed on designated workstation devices within the ambulatory practices. Select practices will participate in **Phase 1** of the implementation. The remainder of the ambulatory practices will be rolled out in a future phase.

The Ambulatory 724Access Downtime Viewer provides access to critical patient information during a planned and unplanned Oracle Health (Cerner Millennium) downtimes. Users can view and print:

- Ambulatory **practice schedule**
- Select patient **documents**
- **Continuity of Care Document (CCD)**

Appointment schedules are available for:

- The previous seven days
- The next seven days

Additional Resources:

- Click [here](#) for information on using the Ambulatory 724Access Downtime Viewer.
- Click [here](#) for the complete Ambulatory 724Access Downtime Viewer Manual.

NOTE: The workstations hosting the Ambulatory 724Access Downtime Viewer **may be rebooted if necessary; but must NOT be powered off**. CCDs are generated overnight. If a workstation is turned off and a downtime occurs the following day, patient CCDs will NOT be available through the viewer. Additionally, patients who schedule same day appointments will not have a CCD available in the event of a downtime, as CCDs are only generated during the overnight process.

WHY: During a planned or unplanned Oracle Health (Cerner Millennium) downtime, access to the electronic health record may be unavailable. The Ambulatory 724Access Downtime Viewer provides authorized staff with timely access to essential patient information, supporting continuity of care and helping practices maintain safe and effective patient care operation during system outages.

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Key Benefit: The Ambulatory 724Access Downtime Viewer ensures critical patient information remains accessible during Oracle health downtime events, supporting uninterrupted clinical workflows and patient care delivery.

WHEN: Monday, October 12, 2026

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

- Ambulatory (excludes WIC)

At the following NLH Member Organization(s):

- Acadia Hospital
 - Adult Behavioral Health Bangor Clinic
- AR Gould
 - Cancer Care Presque Isle
 - Cancer Care Presque Isle Treatment
- Eastern Maine Medical Center
 - Cancer Care Brewer Med Onc
 - Cancer Care Brewer Med Onc Treatment
- Maine Coast Hospital
 - Primary Care Ellsworth
- Sebecook Valley Hospital
 - Cardiovascular Care Pittsfield
 - Newport Occupational Therapy
 - Newport Physical Therapy
 - Newport Speech Therapy
 - Primary Care Clinton

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

- Clinical Staff
 - Front Office Staff
 - Providers
-

Emergency

2026-2027 Influenza and COVID Immunization Screening Form Updates

WHAT: Annual updates have been made to both Influenza and COVID Screening Forms.

Highlights

- A highlighted header has been added to remind staff that when screening a patient who is also an NLH employee, selecting **NLH Employee, SHARE with HR/WH** will automatically send the vaccine administration information to Human Resources and WorkHealth. The patient/employee no longer needs to forward this information to their manager.

Influenza Vaccine Screening/ Order Form			
Screening period: SEPTEMBER 1 - APRIL 30 (Vaccine orders will post via the Rule ONLY during this time frame)			
Ask NLH employees for consent to share with NLH HR/ Work Health. Indicate SHARE or Do NOT Share. Selecting SHARE transmits vaccine record to Work Health. ☒ NLH Employee, SHARE with HR/WH ☐ NLH Employee, Do NOT Share with HR/WH ☐ Not NLH Employee: Patient, Hospital ☐ Not NLH Employee: Patient, Physician Office/WIC/Outpatient	Employee #:	For patients unable to be screened now, document 'Unable to Screen' to set reminder alert in 24 hours. ☒ Vaccine accepted ☐ Vaccine declined ☐ Unable to screen ☐ Vaccine not available	Has Patient received Influenza Vaccine in THIS 2026-2027 season? ☐ No ☐ Yes and patient was 6 mo to 8 yrs old ☐ Yes and patient was 9 yrs or older

- Step-by-step guidance for the COVID-19 screening forms is available here:
 - [Inpatient COVID-19 Vaccine Immunization Screening Form](#)
 - [Ambulatory COVID-19 Vaccine Immunization Screening Form](#)
 - It is important to note that Covid vaccine schedules will align with influenza. The recommendation currently is to vaccinate between September 1 and April 30.
- Detailed step-by-step guidance for the Influenza screening forms can be found here:
 - [Influenza Vaccine Screening-Order Workflow](#)

IMPORTANT: Inpatient areas: Rule-based ordering from both Influenza and COVID-19 screening forms will generate orders from September 1, 2026 through April 30, 2027.

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WHY: These updates include alignments with the most recent vaccine schedule recommendations and specifically NLH Anti-Microbial Stewardship vaccine guidance.

WHEN: Effective Immediately

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
- Pharmacists
- Providers

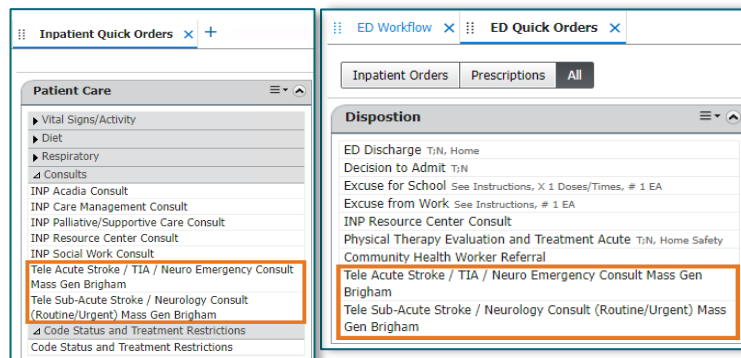
Mass General Brigham TeleStroke Consult

WHAT: Mass General Brigham TeleStroke Consultation requests and documentation will be integrated into Oracle Cerner.

Consult Orders and Neurology Consult Note

- **NL Mercy Emergency and Inpatient Providers** will have access to one of two Mass General Brigham consult orders, based on the patient's clinical presentation:
 - **Tele Acute Stroke / TIA / Neuro Emergency Consult Mass Gen Brigham**
 - **Tele Sub-Acute Stroke / Neurology Consult (Routine/Urgent) Mass Gen Brigham**

- Emergency and Inpatient Providers at **NL AR Gould, Blue Hill, CA Dean, Maine Coast, and Seabiscow Valley Hospitals** will use **Tele Acute Stroke / TIA / Neuro Emergency Consult Mass Gen Brigham**.



- Upon signature by the Mass General Brigham physician, the neurology consultation note is automatically returned to Oracle Cerner and can be accessed through **Provider Handoff, Documentation, Notes, and Message Center Results FYI**.

NOTE: Click [here](#) to review the Mass General Brigham TeleStroke Consult flyer for the complete workflow, order locations, downtime process, and support information.

WHY: The integrated workflow is intended to **streamline stroke consultation requests, support automatic documentation, reduce manual steps, and promote efficient, timely delivery of stroke care**.

WHEN: Thursday, October 1, 2026

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

- Acute/Inpatient (to include ED)

At the following NLH Member Organization(s):

- All NLH Hospitals (excluding Acadia, EMMC, and Mayo)

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

- Emergency Providers
 - Inpatient Providers
-

EHR Updates

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Inpatient

2026-2027 Influenza and COVID Immunization Screening Form Updates

WHAT: Annual updates have been made to both Influenza and COVID Screening Forms.

Highlights

- A highlighted header has been added to remind staff that when screening a patient who is also an NLH employee, selecting **NLH Employee, SHARE with HR/WH** will automatically send the vaccine administration information to Human Resources and WorkHealth. The patient/employee no longer needs to forward this information to their manager.

The screenshot shows the 'Influenza Vaccine Screening/ Order Form'. At the top, it states 'Screening period: SEPTEMBER 1 - APRIL 30' with a note '(Vaccine orders will post via the Rule ONLY during this time frame)'. Below this, there are three main sections. The first section, 'Ask NLH employees for consent to share with NLH HR/ Work Health. Indicate SHARE or Do NOT Share.', has a highlighted header: 'Selecting SHARE transmits vaccine record to Work Health.' Below this header are four radio button options: 'NLH Employee, SHARE with HR/WH' (which is selected), 'NLH Employee, Do NOT Share with HR/WH', 'Not NLH Employee. Patient, Hospital', and 'Not NLH Employee. Patient, Physician Office/WIC/Outpatient'. An orange arrow points from the highlighted header to the selected option. The second section, 'For patients unable to be screened now, document "Unable to Screen" to set reminder alert in 24 hours.', has four radio button options: 'Vaccine accepted' (selected), 'Vaccine declined', 'Unable to screen', and 'Vaccine not available'. The third section, 'Has Patient received Influenza Vaccine in THIS 2026-2027 season?', has three radio button options: 'No', 'Yes and patient was 6 mo to 8 yrs old', and 'Yes and patient was 9 yrs or older'.

- Step-by-step guidance for the COVID-19 screening forms is available here:
 - [Inpatient COVID-19 Vaccine Immunization Screening Form](#)
 - [Ambulatory COVID-19 Vaccine Immunization Screening Form](#)
 - It is important to note that Covid vaccine schedules will align with influenza. The recommendation currently is to vaccinate between September 1 and April 30.
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WHY: These updates include alignments with the most recent vaccine schedule recommendations and specifically NLH Anti-Microbial Stewardship vaccine guidance.

WHEN: Effective Immediately

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
- Pharmacists
- Providers

Mass General Brigham TeleStroke Consult

WHAT: Mass General Brigham TeleStroke Consultation requests and documentation will be integrated into Oracle Cerner.

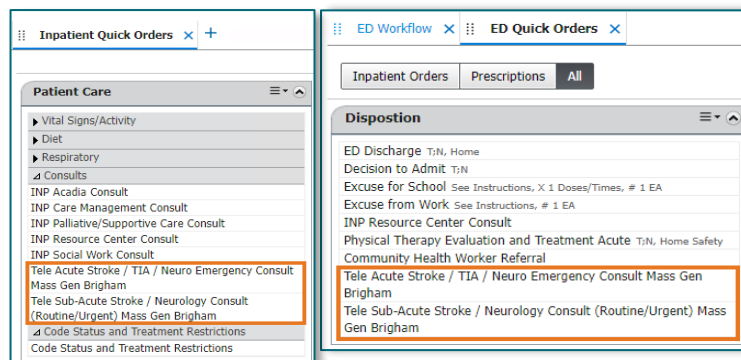
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 - **Tele Sub-Acute Stroke / Neurology Consult (Routine/Urgent) Mass Gen Brigham**

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- Upon signature by the Mass General Brigham physician, the neurology consultation note is automatically returned to Oracle Cerner and can be accessed through **Provider Handoff, Documentation, Notes, and Message Center Results FYI**.

NOTE: Click [here](#) to review the Mass General Brigham TeleStroke Consult flyer for the complete workflow, order locations, downtime process, and support information.

WHY: The integrated workflow is intended to **streamline stroke consultation requests, support automatic documentation, reduce manual steps, and promote efficient, timely delivery of stroke care.**

WHEN: Thursday, October 1, 2026

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

- Acute/Inpatient (to include ED)

At the following NLH Member Organization(s):

- All NLH Hospitals (excluding Acadia, EMMC, and Mayo)

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

- Emergency Providers
 - Inpatient Providers
-

NL Home Care and Hospice EMR Update

WHAT: NL Home Care and Hospice will transition its electronic medical record to MatrixCare effective October 1, 2026.

The transition will improve Oracle integration by routing NL Home Care and Hospice orders and documents to the appropriate providers' Cerner Message Center for signature, eliminating the need to sign paper orders or use the electronic portal.

IMPORTANT: Documents must be signed by the originally requested provider, not by proxy personnel.

WHY: The change supports NL Home Care and Hospice's transition from Netsmart to the MatrixCare electronic medical record.

WHEN: Thursday, October 1, 2026

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

- Acute/Inpatient
- Ambulatory

At the following NLH Member Organization(s):

- All NLH Hospitals (excluding Acadia and Mayo)

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

- Providers

Peri-Op

2026-2027 Influenza and COVID Immunization Screening Form Updates

WHAT: Annual updates have been made to both Influenza and COVID Screening Forms.

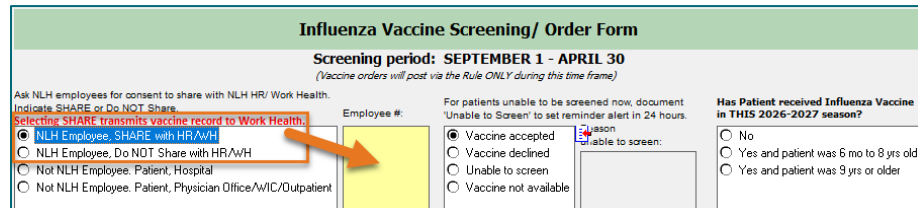
Highlights

- A highlighted header has been added to remind staff that when screening a patient who is also an NLH employee, selecting **NLH Employee, SHARE with HR/WH** will automatically send the vaccine administration information to Human Resources and WorkHealth. The
-

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patient/employee no longer needs to forward this information to their manager.



The form is titled "Influenza Vaccine Screening/ Order Form". It includes a screening period of "SEPTEMBER 1 - APRIL 30" and a note that vaccine orders will post via the Rule ONLY during this time frame. The form is divided into several sections. The first section asks NLH employees for consent to share with NLH HR/ Work Health, with options to "SHARE" or "Do NOT Share". The second section asks for the employee's name and ID number. The third section asks for the reason if the patient is unable to be screened now, with options: "Vaccine accepted", "Vaccine declined", "Unable to screen", and "Vaccine not available". The fourth section asks if the patient has received an influenza vaccine in the 2026-2027 season, with options: "No", "Yes and patient was 6 mo to 8 yrs old", and "Yes and patient was 9 yrs or older". An orange arrow points to the "Vaccine accepted" option in the third section.

- Step-by-step guidance for the COVID-19 screening forms is available here:
 - [Inpatient COVID-19 Vaccine Immunization Screening Form](#)
 - [Ambulatory COVID-19 Vaccine Immunization Screening Form](#)
 - It is important to note that Covid vaccine schedules will align with influenza. The recommendation currently is to vaccinate between September 1 and April 30.
- Detailed step-by-step guidance for the Influenza screening forms can be found here:
 - [Influenza Vaccine Screening-Order Workflow](#)

IMPORTANT: Inpatient areas: Rule-based ordering from both Influenza and COVID-19 screening forms will generate orders from September 1, 2026 through April 30, 2027.

WHY: These updates include alignments with the most recent vaccine schedule recommendations and specifically NLH Anti-Microbial Stewardship vaccine guidance.

WHEN: Effective Immediately

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
 - Pharmacists
 - Providers
-

Therapies: Occupational, Physical, Speech, & Respiratory

All Ambulatory & Inpatient Areas

Rehab Content Updates (*Go-Live October 14*)

WHAT: Documentation within **Physical Therapy (PT)**, **Occupational Therapy (OT)**, and **Speech-Language Pathology (SLP) PowerForms** has been updated to improve workflow efficiency, documentation consistency, and goal tracking.

New Content and Documentation Options

- **New sections** have been added to select PowerForms.
- Additional **dropdown options** are now available for certain documentation fields.
- Some documentation fields have been **relocated** for improved workflow.

Documentation Relocation

- Orders and **Pain Present** have been moved to **General Information** from the Review/Treatments Provided section.

Grid Enhancements

- New grid columns have been added:
 - **Start Date** and **Target Date** added to **Short** and **Long-Term Goals**
 - **Treatment Location** for select treatment grids.
- The **Completed Today** column has been renamed to **Completed** and moved to the first position.
- Additional rows have been added to certain treatment grids.
- New documentation fields have been introduced within select grids.

Additional Improvements

- **Last Charted Value** is now displayed for selected documentation fields and grids.
 - Updates have been made to documentation field names within the **Plan** section:
 - **Duration Value** replaces **Duration**.
 - Enter a numeric value and select the appropriate **Duration Unit**.
-

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- **Expected Intensity** replaces **Estimated Hours per Day**.

Plan			
Frequency	Duration Value	Duration Unit	Expected Intensity
☐ 1-2 times per day	☐ 1-2 times per month	☐	☐ 1 hour per day
☐ Daily	☐ 1 time per week	☐	☐ 90 minutes per day
☐ Twice daily	☐ 2 times per week	☐	☐ 2 hours per day
☐ Three times a day	☐ 3 times per week	☐	☐ 3 hours per day
☐ 1-2 times per week	☐ 4 times per week	☐	☐ Other:
☐ 3-4 times per week	☐ 5 times per week	☐	
☐ 3-5 times per week	☐ 6 times per week	☐	
☐ 4-6 times per week	☐ 7 times per week	☐	
☐ 5-7 times per week	☐ 1 time per month	☐	

Click [here](#) for detailed information on the updates.

WHY: Updating the Rehab documentation content ensures therapists have access to the latest Oracle Cerner enhancements while improving documentation efficiency, workflow consistency, and goal tracking within the EHR. These updates are designed to streamline documentation processes, support more accurate data capture, and enhance overall user experience.

WHEN: Wednesday, October 14, 2026

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

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

At the following NLH Member Organization(s):

- All NLH Hospitals (excluding Acadia and Mayo)

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

- Occupational Therapists and Assistants
- Physical Therapists and Assistants
- Rehab Managers
- Speech Therapists