



From the Office of Clinical Informatics
Northern Light Health
Oncology Project
Clinical EHR Flash Flyer

Friday, November 3, 2023

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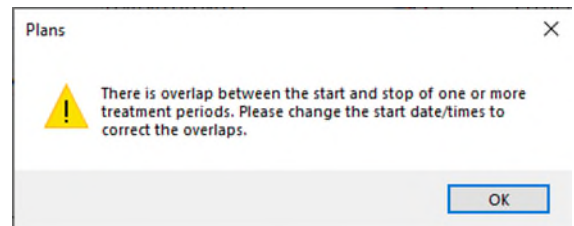
[Click here for the latest Registration, Scheduling, Referral Management, Experian, Charge Management, and other Revenue Cycle updates!](#)

All Staff

Frequently Asked Questions

Overlap in Start/Date & Time Error When Rescheduling

- When rescheduling a day of treatment and an error is received, there is an overlap in the start date/time, expand the phases in the **Change Start Date/Time** window to identify which day there is an overlap.
- For example, in the screenshot below, there is a red exclamation point for Day 8 in the Labs Phase.
 - Notice the time in the **Start Date/Time** field where you choose the new date to reschedule says 0830.
 - The reason there is an error stating there is an overlap is because of the time. The time for Day 8 in the Labs phase is 0700. Update this time to be anything after the time in the box at the top (e.g., 0831 for this example)
 - When the patient is scheduled, the day of treatment will be updated to the actual date and time of the appointment.



Change Start Date/Time

Change Start Date/Time: Chemotherapy (Days 1, 8, 15 to 16) - Days 1

Start Date/Time: EDT Appointment Information: Confirmed 11/9/2023 8:30:00 AM EST Request a new appointment time

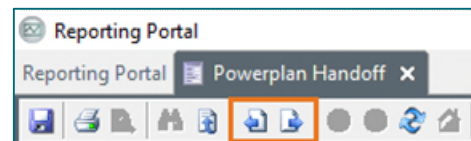
To change the start date/time of a single treatment period/non-DoT phase, enter a new date below.

Automatically adjusts the start date for the selected treatment periods and phase(s)



<input checked="" type="checkbox"/> Adjust	Description	Start Date/Time	Appointment Information	<input checked="" type="checkbox"/> Request New Appointment
<input checked="" type="checkbox"/>	Chemotherapy (Days 1, 8, 15 to 16)			
	Days 8	11/9/2023 08:30 EST	Confirmed 11/16/2023 ...	<input checked="" type="checkbox"/>
	Days 15	11/16/2023 11:00 EST	Confirmed 11/23/2023 ...	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Labs (Days 1, 8, 15)			
	Days 8	11/9/2023 07:00 EST	Confirmed 11/16/2023 ...	<input checked="" type="checkbox"/>
	Days 15	11/16/2023 07:30 EST	Confirmed 11/23/2023 ...	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Clinic Scheduling and Tasks (Days 1, 3, 8, 15)			

Printing Regimen Orders

- When entering the MRN to run the PowerPlan Handoff report to print regimen orders, do **NOT** include any zeros at the beginning of the MRN.
 - For example, if patient's MRN is 012345 – only enter 12345 in the MRN field.
- When running the report, be sure to use the two icons on the toolbar in the report to view other pages.
- For detailed information on printing regimen orders, refer to the [Printing Regimen Orders](#) flyer.



What is the difference between a Regimen and a PowerPlan?

- **Regimens** have a regimen icon  with a prefix of **ONC** followed by the regimen name.
- **PowerPlans** have the PowerPlan icon  with a prefix of **ONCP** followed by the PowerPlan name.

NOTE: Providers – Remember to always order the Regimen – **NOT** the PowerPlan.

Current CPOE Lab Orders

- When pre-loading regimens to patient's charts, cleanup CPOE lab orders on the chart you have placed. Removing old CPOE lab orders will declutter and prevent confusion in the future.
- Keep lab orders needed till 10/8/23.
- Only **Cancel/DC** CPOE labs ordered to be done after **10/9/23** for patients with chemo because labs as the part of the chemotherapy PowerPlans.
- Do **NOT** cancel CPOE lab orders for hematology/surveillance patients, not doing active chemo.

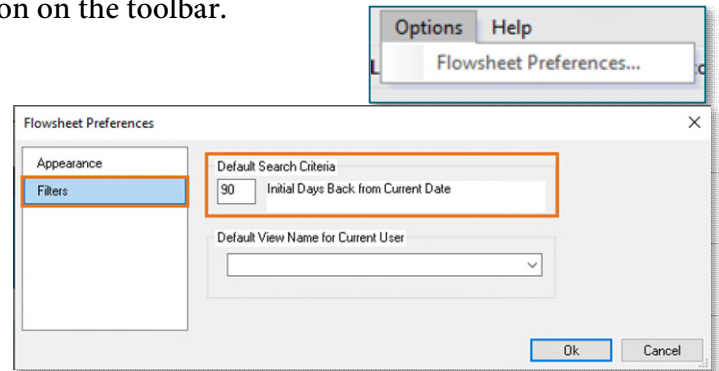
Chart Pull Orders

- There are three chart pull orders embedded in the regimens and available to place as single line orders. These orders use Orders to Scheduling functionality. Once the orders are signed, they are sent to a scheduling request queue to be scheduled.
 - **ONC CHART PULL HEIS**
 - **ONC CHART PULL TRIAGE**
 - **ONC CHART PULL OMMP**
- For staff who want to manually schedule a chart pull in the Scheduling Appointment book, you will use the following appointment type: **ONCM CHART PULL/NO REG/No Order** and schedule to the appropriate resource book.

Oncology Flowsheet Settings

- Providers will need to update their Oncology Flowsheet settings. The setting set at the system level was set for 90 days and was discovered it was causing slowness/lagging when loading the flowsheet.

- Unfortunately, IS has updated the preference in the background but user level preferences are not accepting the updated system level setting.
- To update the Oncology Flowsheet preferences, this is one time change and it will stick once they log out. Be sure they exit through the Exit button on the toolbar.
 - Navigate to the Oncology Flowsheet.
 - On the toolbar, click **Options** and select **Flowsheet Preferences**.
 - Click the **Filters** tab and change the **Default Search Criteria** to **30 Days**, then click **OK**.



Known Issues

Provider Notes – Assessment & Plan

- An issue has been identified with documentation in the **Assessment & Plan** Dyn Doc component of the **Amb Oncology 2023** workflow MPage not flowing to the note.
- The component has been updated so documentation in the Dyn Doc component will flow into the Assessment & Plan section of the note once generated. With the update, orders placed during the office visit will display.
- Enhancements to this component will be part of future project work efforts.

Scheduling Orders – AR Gould & Maine Coast

- An issue has been identified when orders are placed at AR Gould and Maine Coast, scheduling orders are not routing to the respective request queues; they routing to the Brewer request list.
- Cerner and IS have implemented a fix to resolve the issue.

Important Reminders

Entering Orders on the Correct Encounter

- It is important that orders are entered on the new oncology locations and **NOT** on the old locations (HO_T, CCOM, and PEDO).
- Orders entered on the old locations will not flow to the correct request queues or task lists.
 - For example, imaging orders fire to the Multi-Patient Task List based on the location the order is placed on. Staff are not monitoring the task list for the old location, so it is important orders are entered on the correct encounter for your location.

Message Center

➤ Default Location

- With the Oncology Project, new facilities in Cerner were built for AR Gould Cancer Care, CCOM, and Pediatric Oncology.
- The old locations should **NOT** be used (HO_T, CCOM, and PEDO).
- It is important to update the default ambulatory location in Message Center.
- Refer to the [Setting Ambulatory Default Location](#) in Message Center flyer for more information.

➤ Creating Between Visit Encounters

- Between visit encounters are created to document contact with a patient not seen in the office and to place orders for a patient outside an office visit.
- Refer to the [Creating a Between Visit Encounter](#) flyer for more information

Freezing Due to Copy Forward

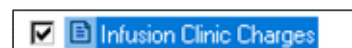
- When Providers are **Copying Forward Days of Treatment**, the Routing Location is not holding onto the ePrescribe Retail Pharmacy data.
 - After that the system does not fire an alert or warning of any **missing details**. This is causing providers PowerChart sessions to freeze.
- Other **“Required Fields”** in other orders they are copying do not copy forward either. Users also do not get alerts for these either.
 - After that the system does not fire an alert or warning of any **missing details**. This is causing providers PowerChart sessions to freeze.
- Providers **Copying Forward Days of Treatment** need to **MAKE SURE** they are addressing all "blue circles/required fields" before they sign.

Printing Requisitions to the Blood Bank

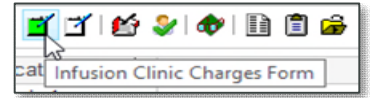
- On Monday 10/16 when an Oncology Blood Transfusion PowerPlan Day of Treatment is “Activated” from any of the (3) Cancer Centers, those requisitions will now auto print to the Blood Bank with the correct order details.
- Going Forward there will be no need for the nurses to navigate to the “child order” in the PowerPlan and re-print the requisition.

Infusion Clinic Charges Form

- When documenting charges via your PowerForm Via ASD-Hoc make sure you are selecting the correct form! The Infusion Clinic Charges Form.



- To avoid this, you can also use the Infusion Clinic Charges Form Button on the Oncology Tracking Board.
- Failure to use the correct form results in charges not dropping or flowing incorrectly!



Placing a ServiceNow Ticket

- When placing a ticket for Oncology Pre-Loading, add as much detail as you can regarding the issue or request.
- When placing a ticket, make sure to provide the MRN and correct patient identifiers (FIN/MRN etc.) when getting ticket opened. This will ensure the appropriate team has the exact example for research or investigation.

Pharmacists

NEW: Investigational trastuzumab hyaluronidase is lacking strength and components

- When Pharmacists manually build Investigational IV Sets on Patients' med profile, the "real" medication ingredient line needs to be in the first position and make the second line be the "dummy" Investigational med line.
- Proper order of ingredients:

M Modify Med Protocol Order Days 1			
Drug:			
Δ	Drug	Dose	Ordered As
Δ	hyaluronidase-trastuzumab 10,000 units-...	5 mL	hyaluronidase-trastuzumab-oy...
σσ	Herceptin Hylecta 10,000 units-600 mg/5 mL Soln (NF-Med)		
σσ	INVESTIGATIONAL hyaluronidase-trastuzumab		

- Incorrect order of ingredients:

M Verify Med Protocol Order Days 1			
Drug:			
Δ	Drug	Dose	Ordered As
Δ	INVESTIGATIONAL hyaluronidase-trastuz...	5 mL	hyaluronidase-trastuzumab-oy...
σσ	INVESTIGATIONAL hyaluronidase-trastuzumab		
σσ	Herceptin Hylecta 10,000 units-600 mg/5 mL Soln (NF-Med)		

NEW: IV Set not available for Product Selection when Verifying:

- IV Sets are not available to be manually selected when verifying because there is not a one-to-one match for all the ingredients from PowerChart Order Entry to Med Manager outside of PowerPlans.
- The Pharmacist needs to build the set manually when verifying. It was a conscious decision to hide IV Sets from being ordered as stand-alone orders in PowerChart.

Oncology Project

Providers

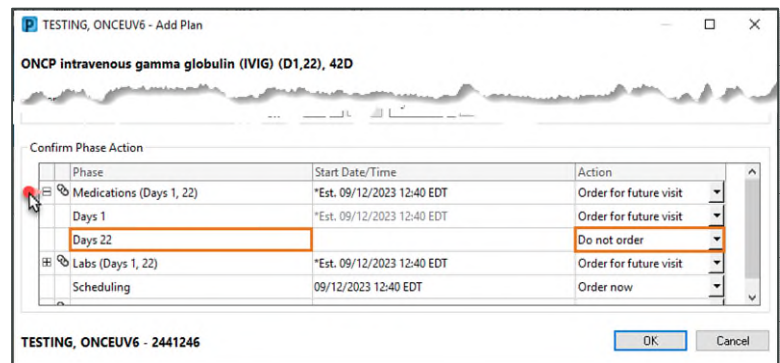
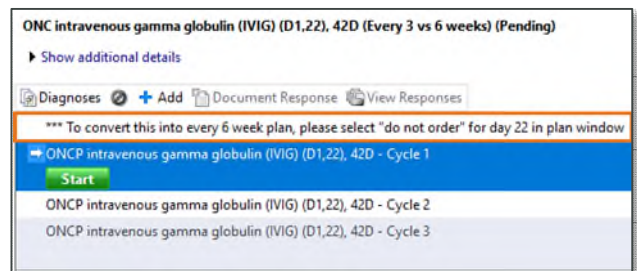
Frequently Asked Questions

Ordering Future Cycles

- Providers will order cycles until the next provider visit.
 - If you are seeing the patient every cycle – order 1-2 cycles.
 - If you are seeing the patient every 3rd or 4th cycle – order 4 cycles.
- Recommendation is at least ordering one cycle in advance to get it scheduled.
 - Example:
 - Patient was seen today for Cycle 2. Cycle 2 was ordered on Cycle 1 – Day 1.
 - At today’s visit for Cycle 2 – Day 1, you will place orders for Cycle 3.

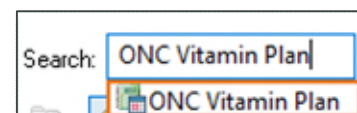
How do I order an every 6-week IVIG regimen?

- Be sure to review the notes in the regimen.
- For example, in the IVIG regimen, the note states:
 - **“To convert this into every 6-week plan, please select “Do Not Order” for Day 22 in the plan window.”**
 - When you start Cycle 1, providers will expand the **Medication Phase** and change the **Action** in the for Day 22 to **Do Not Order**.
 - Be sure to update the Action for all the phases that include a Day 22 to **Do Not Order**.
 - This workflow would also be used for other regimens with notes on indicating how to convert the regimen to a different frequency (every 4 weeks vs every 12 weeks)



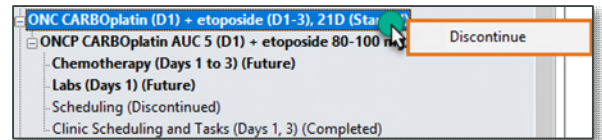
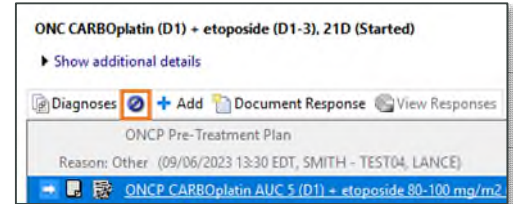
How do I order a cyanocobalamin (Vitamin B-12) regimen?

- When placing orders for cyanocobalamin (Vitamin B-12), providers will order the **ONC Vitamin Plan weekly, 28D** regimen; do **NOT** order the ONCP cyanocobalamin (Vitamin B-12) 1mg IM.
- Ordering the regimen ensures the appropriate scheduling orders are placed.



How do I discontinue a regimen?

- To discontinue an entire regimen, navigate to the regimen and select the **Discontinue** button.
- Fill out the **Discontinue** reason and click **OK**.
- You can also right-click the regimen and select **Discontinue**.

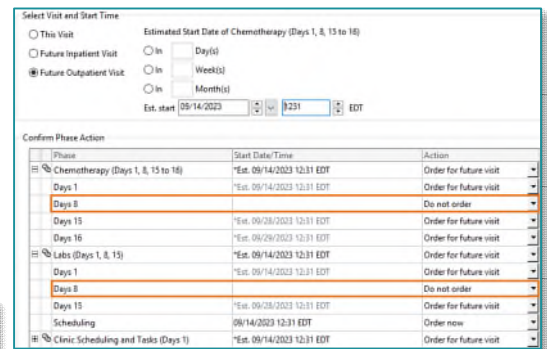
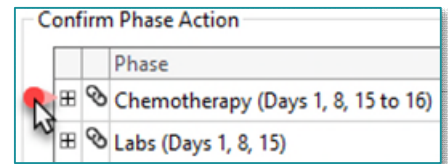


How do I not order a day of treatment when placing cycle orders?

➤ If you do not want to order a day of treatment when placing cycle orders, you will make changes in the **Add Plan** window.

➤ For example, for a gemcitabine + abraxane regimen that has Days 1, 8, 15 every 28 days, but you only plan to give Days 1 and 15 every 28 days.

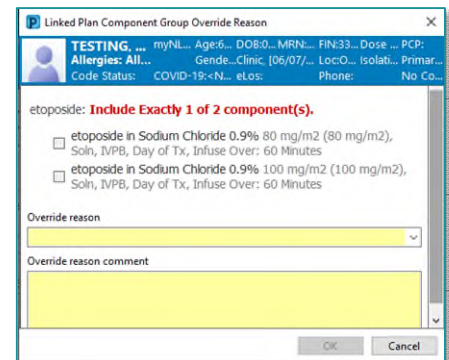
- Order the regimen and click **Start** to order the cycle.
- When you start the cycle, expand the **Chemotherapy and Labs Phases**.
- In the **Action** column, click the dropdown and select **Do Not Order** for the days you do not want to order (e.g., Day 8).
- Click **OK**.
- Day 8 has been deleted from the **Chemotherapy and Labs Phases**.



1,8,15), 28D - Cycle 1, Chemotherapy (Days 1, 8, 15)	
Days 1	Days 15
Future Pending	Future Pending
*Est. 09/13/2023 13:35...	*Est. 09/27/2023 13:35...
Actions	Actions
Planned	Planned

Linked Plan Component Alert

➤ When attempting to sign cycle orders and a linked plan component has not been satisfied, you cannot choose the order in the alert window. You will need to cancel the alert and navigate to the appropriate phase (e.g., Chemotherapy) and select the desired order.



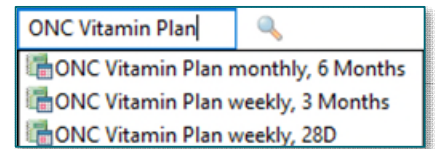
Dosing Calculator

➤ If a provider or pharmacist cannot modify the actual weight, adjusted weight, serum creatinine in the Dosing Calculator, click the Refresh button. This will allow you to modify.

Oncology Project

New Vitamin Plans

- Two additional ONC Vitamin Plans have been created. All the plans have folate, Vitamin B-12, copper/trace elements included.
- Providers still need to choose which vitamin to give and the corresponding infusion/injection time in the plan.
 - **ONC Vitamin Plan weekly, 28D** – use this regimen for patients with one off weekly Vitamin-B12 injection, who are not consistently getting them.
 - **ONC Vitamin Plan weekly, 3 Months** – use this regimen for patients needing weekly injections from trace elements and/or Vitamin-B12 for more than one month. You can order 3 months' worth in this one plan.
 - **ONC Vitamin Plan monthly, 6 Months** – use this regimen for patients with monthly Vitamin-B12 injections. This will allow you to order 6 months in one plan.



What orders do I need to place for patients not on treatment?

- Regimens for patients receiving IV, oral, or combo IV/PO chemotherapy have lab and office visit orders built into the plans, so there is no need to place extra lab/office visit orders.
- For patients who are on surveillance, benign hematology, etc., place the appropriate orders for the type of follow-up needed following your locations process.
 - If the patient is getting labs AND an office visit, two orders need to be placed:
 - ONC LAB/INTAKE/VITAL
 - Applicable Office Visit Order (i.e., ONC OFFICE VISIT MD 30 MIN, ONC OFFICE VISIT MD 30 MIN/NP 40 MIN, etc.)
 - If the patient is only coming for an office visit and NO labs are needed, only one order is needed:
 - Applicable Office Visit Order (i.e., ONC OFFICE VISIT MD 30 MIN, ONC OFFICE VISIT MD 30 MIN/NP 40 MIN, etc.)

Oral Chemo – Ordering Hydrea

- Most oral chemo plans have their own differences. Hydrea is an exception to all plans in the fashion that it will function similarly to PDF.
- Hydrea is used for many indications, frequency, and dose changes very often. Therefore, this was unable to be put into a fixed regimen/PowerPlan.
- Process for ordering Hydrea:
 - Provider will order the regimen and only one PowerPlan at the initial dose (new start)/current dose (already on it during pre-load).

- The Prior Auth/Teaching to Oral Chemo Pharmacy order in the plan will send a message to the OMMP Staff Pool in Message Center that hydreia is ordered and for what indication. The OMMP staff will arrange for the chemo teach with the patient.
- Provider will place all lab orders needed via clicking Add in the Orders Profile or using the Oncology Quick Orders MPage.

NOTE: Do not place any orders by using Add to Phase.

- Follow-up orders and need for Chart Pull – will be communicated via Message Center to the scheduler and OMMP staff (like in current state).
- You do not have to renew or order second PowerPlan.
- Refills will be communicated via Message Center to the OMMP staff (like in current state).

Why is the problem not listed in the Staging tool?

- Only problems marked as **Chronic** in the Problem List will appear in the Problem field in the Staging tool.

Controlled substances component on Amb Oncology 2023 MPage

- It was identified in the project the Oncology Provider Workflow MPage did not have the Controlled substances component. It has been added and available for use.
- The **Controlled Substances** component allows provider to review PDMP reports within Cerner.

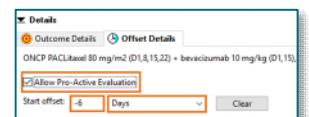
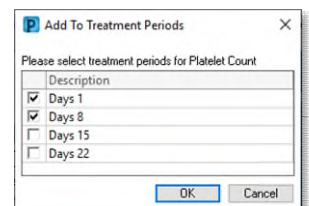
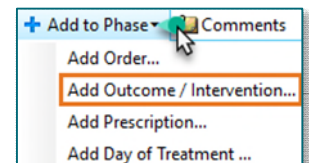
NOTE: This is only available to providers and pharmacists. Registered nurses and medical assistants will continue to review the PMP by proxy on the Prescription Monitoring Program website.

How do I add a pre-chemo metric not listed when placing cycle orders?

- Within the Chemotherapy phase, click **Add to Phase**.
- Select **Add Outcome/Intervention**.
- Search and select the outcome.
- Select the treatment days to add this pre-chemo metric to, then click **OK**.
- Go to **Offset Details Tab**, place a check in the box **Allow Pro-Active Evaluation**.
- Set the desired lookback range to pull in lab results in the **Start offset:** field (e.g., -6 Days).

NOTE: An offset can only be set when ordering a regimen. Once it is signed, you cannot add offset.

- Set the desired lookback range to pull in lab results in the **Start offset:** field (e.g., -6 Days)

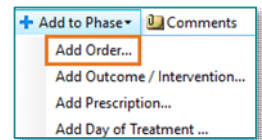


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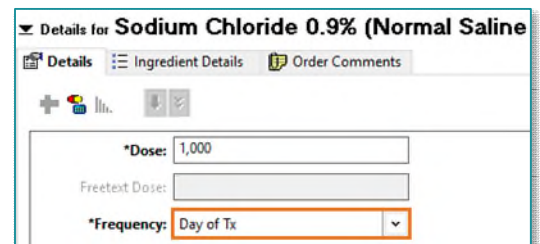
- The new outcome is listed in the Additional Orders/Indicators section of the applicable days of treatment.

Placing Acute Medication Orders

- Place add on acute medications depending on the scenarios:
 - To add to a phase in the cycle: Click **Add to Phase**, then select **Add Order**.
 - Example: Adding hydration to a day of treatment.



NOTE: When adding a medication to the PowerPlan using Add to Phase, be sure to pay attention to the frequency. It is important to update the Frequency to **Day of Tx**. Additionally, avoid all other frequencies.

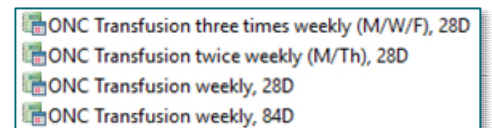


- To add acute orders via a regimen, order the applicable regimen (i.e., **ONC Fluids/Magnesium/Potassium, weekly, 28D OR ONC Acute Medication Orders**).
- If adding a single standalone medication order to be given during treatment, the order must be placed on the treatment encounter.

NOTE: Providers can quickly access the patient's treatment encounter by going to the Onc Tracking Board and opening the patient's chart from here.

How do I order standing blood transfusion orders?

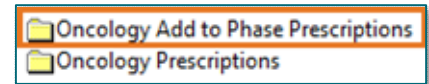
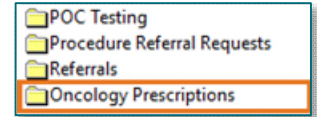
- To order standing blood transfusions, use the following regimens:
 - **ONC Blood Transfusion three times weekly (M/W/F), 28D**
 - **ONC Blood Transfusion twice weekly (M/Th), 28D**
 - **ONC Blood Transfusion weekly, 28D**
 - **ONC Blood Transfusion weekly, 84D**
- Ensure to select the pre-treatment parameters applicable for the patient.
- Tentative transfusion infusion chair time and labs are pre-selected.



Day of Treatment Antiemetics Prescriptions

- **Oncology Prescriptions:** Contains all the same prescriptions within the ONCP Pre-Treatment PowerPlan
- **Oncology Add to Phase Prescriptions:** Contains prescriptions with specific interval frequencies that will work within Day of Treatment PowerPlans

- To add a prescription from the **Antiemetic ESCALATION** subphase to a day of treatment, complete the following steps.
 - Within the **Chemotherapy** phase, click **Add to Phase** and select **Add Prescriptions**.
 - Click the **Oncology Prescriptions** folder.
 - Click the **Oncology Add to Phase Prescriptions** folder.
 - Select the desired prescription.
 - In the **Add to Treatment Periods** window, select the applicable day.



NOTE: Do **NOT** alter the interval frequencies that are preset. If the preset prescription interval is changed, this may cause PowerChart to freeze.

Oral Chemotherapy

- If patient is cleared for treatment
 - Provider will place the **Okay to Treat** order, select the appropriate option in the **Type of Chemo Treatment** field, and enter any additional details (i.e., extra medications added, special instructions)

NOTE: When **Combination Treatment** OR **Oral Chemo/Treatment** is selected in the **Type of Chemo Treatment** field, a message will automatically be sent to the designated pool for your location.

A screenshot of a software form titled "Details for Okay to Treat". The form includes fields for "Requested Start Date/Time" (10/05/2023, 2105 EDT), "Type of Chemo Treatment" (a dropdown menu with options: Combination Treatment, Inj/IV Chemo/Treatment, Oral Chemo/Treatment), "Okay to Treat Reasons" (a dropdown menu), "Okay to Treat Comments" (a text input field), and "Scheduling Location" (a dropdown menu with "LFCl Adult Clinic" selected). The "Type of Chemo Treatment" dropdown is highlighted with an orange border.

- If the patient is **NOT** cleared for oral chemo during provider visit:
 - Provider will send a message to the OMMP pool via Message Center.
 - Provider should **NOT** modify the prescriptions in the oral chemo plans; this will be done by the pharmacist.
 - Any changes to any prescriptions in the oral chemo plans will be either communicated via Message Center.

Research Patient Transition

- The workflow for a patient on study that then goes off study would be the provider will discontinue the **"RES / on study"** regimen and order a new regimen **"PER / off study."**

Oncology Project

➤ Pediatric Regimens

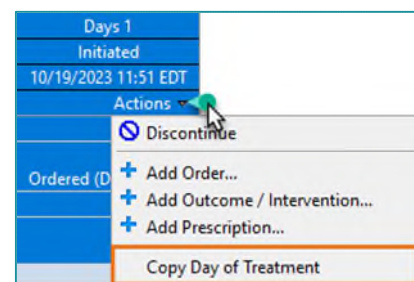
- **PED ONC RES** – These regimens will be used if a patient is on a research trial.
- **PED ONC PER** – These regimens will be used if the patient is being treated per the guidelines of a protocol.

Copy Day of Treatment – Labs Phase

- Prior to updating a privilege for the Oncology provider positions, providers were unable to copy a day of treatment in the labs when lab orders.
 - For example, the provider sees the patient and is not cleared for treatment. The provider wants to re-order the labs to be done on the rescheduled day.
- Oncology provider positions now have the ability to copy a day of treatment in the Labs Phase when lab orders are in any of the following Ordered statuses.
 - Ordered (In-Lab)
 - Ordered (Collected)
 - Ordered (Dispatched)

IMPORTANT: Do NOT modify lab orders in an Ordered state as any modification to a lab order in an Ordered state will NOT be seen by the lab staff.

- To copy the day of treatment lab orders in an Ordered state:
 - Go to the **Labs** phase.
 - In the day of treatment column with lab orders that need to be copied, click **Activate Actions**.
 - Select **Copy Date of Treatment**.
 - Adjust the **Est* Start Date/Time** to ensure it matches the date used for the copied day of treatment in the Chemotherapy phase.
 - Click **OK**.
 - Click **Orders for Signature**.
 - Click **Sign**, then click **Refresh**.



Inpatient Discharge Medication Reconciliation

- Inpatient providers will **NOT** have the ability to interact with certain chemotherapy Regimen/PowerPlan orders in the Discharge Medication Reconciliation window.
- The update to this system setting will prevent potential errors in cancelling chemotherapy orders, decrease extra calls to the pharmacy, and maintaining patient safety.

- The update to this setting only applies to Regimens/PowerPlans that use the day of treatment architecture.
- The update does **NOT** affect any of the current inpatient PowerPlans.
 - NOTE:** Providers will still have the ability to interact with oral chemo/non-chemo prescriptions that are part of oncology plans.
 - Only oncology providers should be interacting with the oral chemotherapy prescriptions.
- To discontinue any regimen or cycle orders, do so from the **Orders** tab in the patient's chart – **NOT** from the Discharge Med Rec window.

Before Updated Setting

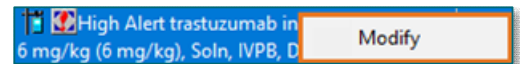
Order Name/Details	Status			
ondansetron (Zofran) 8 mg = 1 TAB, PO, Day of Tx, Days 1, 8, 15	Ordered	○	○	○
PAClitaxel protein-bound 280 mg, IVPB, Day of Tx, Days 1, 8, 15	Ordered	○	○	○

After Updated Setting

Order Name/Details	Status			
ondansetron (Zofran) 8 mg = 1 TAB, PO, Day of Tx, Days 1, 8, 15	Ordered			
PAClitaxel protein-bound 280 mg, IVPB, Day of Tx, Days 1, 8, 15	Ordered			

NEW: How do I make a Dose Adjustment?

- To make a Dose Adjustment:
 - In the applicable cycle of treatment, click **Chemotherapy phase**.
 - Right-click desired medication to make a dose adjustment and select **Modify**.
 - Click the **Dosage Calculator** icon.
 - Using the up/down arrow on **Line 3) Dose Adjustment** for percentile dose adjustment.
 - Fill out **Line 7) Adjust Reason**. Use **comment field** to additional information, if needed.
 - Click **Apply Dose**.
 - Drug details will appear with adjusted dose.
 - Click **Orders for Signature**.
 - Click **Sign**, then click **Refresh**.
 - Order Details will update with Dose Adjustment and indicate % reduction in red.



Details for trastuzumab 6 mg/kg + Overfill Volume (ap				
Ingredients				
trastuzumab	6 mg/kg	Rate	Infuse Over	
Sodium Chloride 0.9% (Intermittent)	250 mL			30 Minutes
Overfill Volume (approx.)	31 mL			
Total Volume				250 mL

Dosage Calculator

trastuzumab

Dose Values:

1) Target dose: 6 mg/kg

2) Calculated dose: 360 mg

3) Dose Adjustment: 324 mg (5.3333 %)

4) Final dose: 320 mg

5) Standard dose: mg mg/kg

6) Rounding rule: Nearest ten

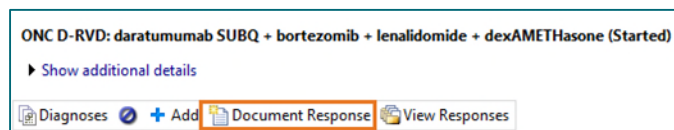
7) Adjust Reason: [Yellow box]

8) Route: IVPB

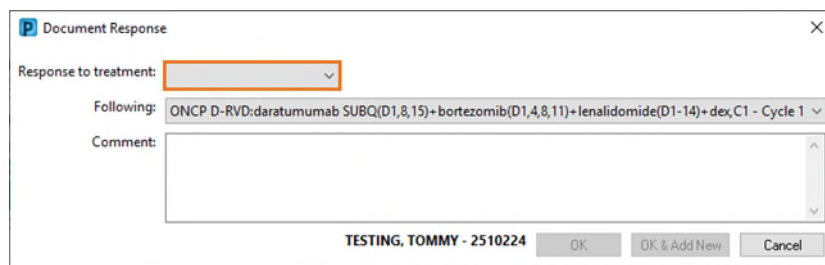
NEW: Documenting Responses in a Regimen


➤ To document a response in a regimen, complete the following steps:

- In the patient's chart, access the **Orders** tab.
- Select the regimen.
- Click **Document Response**. The Document Response dialog box is displayed.
- Make a selection from the **Response to Treatment** list.



- **CR** – Complete Remission
- **PD** – Progressive Disease
- **PR** – Partial Remission
- **SD** – Stable Disease
- **NED** – No Evidence of Disease



- Enter a comment in the **Comment** box if appropriate.
- Click **OK** or **OK and Add New**.
- The most recent response is displayed on the toolbar. Click the **View Responses** button to see all documented responses. 

Important Reminders

NEW: Signing Orders

- When in certain phases of a plan, you may see options to Future Initiate, Plan for Late, or Initiate Now, and not Orders for Signature.
 - If you only see Future Initiate, Plan for Late, or Initiate Now in the phase, do **NOT** click one of these options.
 - To sign the orders, navigate to another phase of the plan and click **Orders for Signature**.

Managing Orders in Multiple Regimen

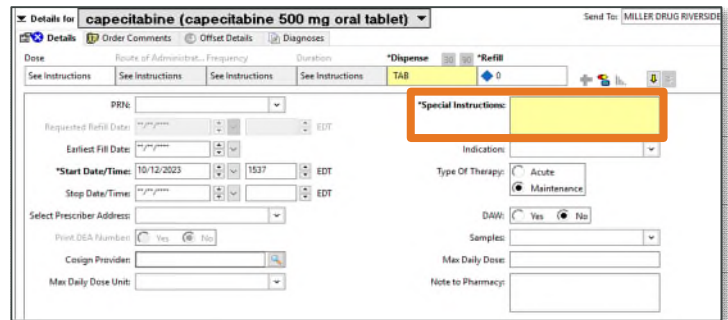
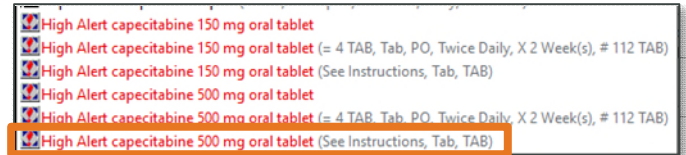
- It is important to review orders in all the regimens ordered for the patient to prevent duplicate orders. Pay attention to orders included in all regimens such as, lab orders, lab, and office visits, etc.

Bone Marrow Biopsy Orders

- When placing Bone Marrow Biopsy orders, it is important to review each phase in the plan and select the orders you want done. Only orders that are placed will be collected during the bone marrow biopsy.

Capecitabine Orders

- To make the process of ordering **capecitabine prescription** easier and less error-prone, and an additional order sentence for **capecitabine, See Instructions** has been added.
- Then the prescriber would only have to fill out the # of tabs in **Special Instructions**.
- If the providers use these “see instructions” order sentences, the pharmacists should be able to activate these prescriptions without needing to modify anything.




How do I place blood transfusion orders?

- To order one-time blood transfusions, staff can use the prebuilt regimens and remove the unwanted days:
 - **ONC Blood Transfusion three times weekly (M/W/F), 28D**
 - **ONC Blood Transfusion twice weekly (M/Th), 28D**
 - **ONC Blood Transfusion weekly, 28D**
 - **ONC Blood Transfusion weekly, 84D**
- Skip the pre-treatment plan as applicable if needed for the patient.
- Tentative transfusion infusion chair time and labs are pre-selected. They can be updated as needed.



Placing the Okay to Treat Order

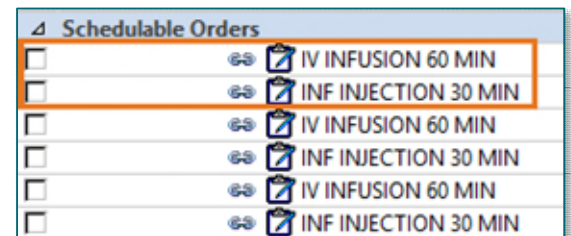
- The **Okay to Treat** order should **NOT** be placed **WITHIN** the plan.
- The **Okay to Treat** order is to be placed outside of the plan by clicking the **+Add** button  on the Orders profile.

Selecting Scheduling Orders in Regimens

- When ordering any of the following type of regimens, it is important to select **ALL** the appropriate scheduling orders in the plans that do not have pre-selected scheduling orders.
 - IV and Oral Chemo Custom Regimens
 - ONC Acute Medication Orders
 - ONC Fluids/Magnesium/Potassium
 - ONC Transfusion Orders

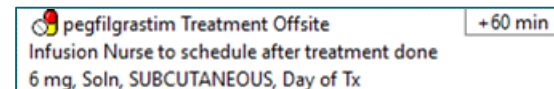
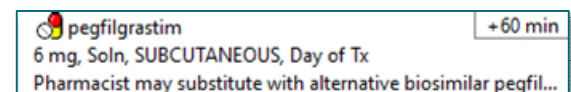
Oncology Project

- ONC Blood Transfusion three times weekly (M/W/F), 28D
 - ONC Blood Transfusion twice weekly (M/Th), 28D
 - ONC Blood Transfusion weekly, 28D
 - ONC Blood Transfusion weekly, 84D
 - ONC Vitamin Plan
 - ONC Vitamin Plan weekly, 28D
 - ONC Vitamin Plan weekly, 3 Months
 - ONC Vitamin Plan monthly, 6 Months
- For the Vitamin Plans, it is important to select the TOP (first) scheduling order in the appropriate grouping (**IV INFUSION 60 MIN** vs. **INF INJECTION 30 MIN** scheduling orders).
- Each group of scheduling orders is built with linking based on an anchor order, which is the top (first) order in each group.
- For example, if provider selects the first IV INFUSION 60 MIN anchor order, all the subsequent IV INFUSION 60 MIN scheduling orders will auto select for each day of treatment.
- Due to the linking, providers will only be able to select scheduling orders from one grouping - not both.



Ordering Pegfilgrastim to be given at another facility

- When providers are placing orders for pegfilgrastim to be given at another **NLH Oncology location** (i.e., AR Gould, Maine Coast, Lafayette in Brewer) they need to choose the pegfilgrastim medication order and **NOT** the **pegfilgrastim treatment offsite** order.
- Selecting the pegfilgrastim medication order allows for nursing to activate the order and for pharmacy to perform their verification upon activation.
- If the patient is to receive pegfilgrastim at a Non-Chemo NLH Infusion Clinic OR and Non-NLH Facility, the provider will select the **pegfilgrastim Treatment Offsite** order and select the appropriate order location in the Place of Service field.



Requesting New Appointments when Rescheduling a Day of Treatment

- When rescheduling a day of treatment, it is important to place a check in the box for **Request a New Appointment** in the rescheduling window.
- When the checkbox for Request a New Appointment is **NOT** selected, it will not fire a request to the scheduler to reschedule.

Clinical Charge Entry

Frequently Asked Questions

What happens when a wrong charge is entered unknowingly by the provider?

- Coding will pick up the wrong charge and correct it.

What do I do if I need to delete a charge that was entered in error?

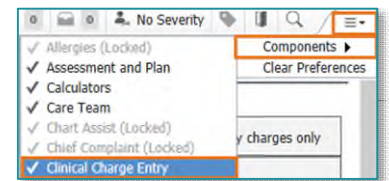
- A charge can be deleted after it was submitted from the Clinical Charge Entry component.
 - For more information on how to delete charges, click [here](#).

I cannot see the Clinical Charge Entry component from the MPage? How do I find it?

- To begin using the Clinical Charge Entry component, providers need to ensure the component is on view within the workflow MPage.

STEP 1: From the component level menu, select **Components**.

STEP 2: Select the **Clinical Charge Entry** component, placing a checkmark to the left, indicating the component is being added on view.



Who runs reports for missing charges?

- Coding will run reports for missing charges and will notify the provider to enter the charge.
- For more information on adding charges, click [here](#).

Can I enter Clinical Charges for ambulatory patients?

- The Clinical Charge Entry component will only appear for notes documented on inpatients seen at the bedside.

Can I charge for a procedure performed in the OR?


- Procedure charges can be added only if performed at the patient bedside.

Clinical Staff

Frequently Asked Questions

Pre-Chemo Metrics Result PowerForm

- When doing chart pulls or patient review clinical staff should be documenting **Ejection Fraction** results and **QTcF and B** results on the **Pre-Chemo Metrics Results** PowerForm.

- The form can be accessed via **Ad-Hoc**  in the **Oncology** subfolder and via the form dropdown in the **Performance Status and Toxicities** component.
- Documentation on the Pre-Chemo Metrics Results PowerForm can be viewed in the **Performance Status and Toxicities** component.



Scheduling Orders – Day of Treatment

- When placing regimen orders, providers will update the **Scheduling Location** field in the applicable day(s) of treatment to reflect where the patient needs to be scheduled for those days (i.e., Grant 6, an outside facility, etc.)
- When the following options are selected in the **Scheduling Location**, these will not flow to a Request List to be scheduled.
 - **EMMC Hospital Treatment (Non-sched)**
 - **Outside Facility (Non-sched)**
- The treatment nurse will review the patient’s orders and follow the process of manually scheduling it or coordinating with the outside facility.
- **Important to do:**
 - The scheduling orders will be in a **Future (On Hold)** status, so once the appointment has been manually scheduled or coordinated with the outside facility, the nurse will need to activate and complete the order.
- To **Activate** and **Complete** the order:
 - Right-click the applicable scheduling order and select **Activate**.
 - Select **Orders for Signature** and then **Sign**.
 - Refresh your screen to reflect the updated Ordered status.
 - Now, right-click the order again and select **Complete**.
 - Select **Orders for Signature** and then **Sign**.

Day of Treatment - Pegfilgrastim

- Nursing will need to discontinue a day of treatment where there is no pegfilgrastim ordered.
- If there is no pegfilgrastim indicated, when nursing is activating the previously DOT, they should discontinue the pegfilgrastim day of treatment.

Outside Labs Documentation

- When documenting outside lab results in the Outside Labs Form, it is important to not include spaces before or after the result in the field, as this will result in the pre-chemo metric not recognizing the result.

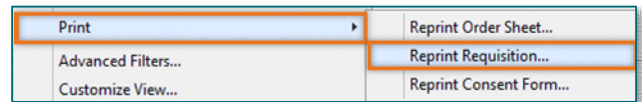
- When documenting an Absolute Neutrophil Count (ANC) in the Outside Labs PowerForm, it is important to document the result without decimals.
 - For example, an Absolute Neutrophil Count (ANC) result of 3500 should be documented as 3500. It should not be documented as 3.5.
 - If the result is entered with a decimal, the pre-chemo metric will display a red X, indicating the results does not meet the parameter, when in fact it does.

How do I print treatment orders to be done at another facility?

- Refer to the [Printing Regimen Orders flyer](#) for more details on this workflow.

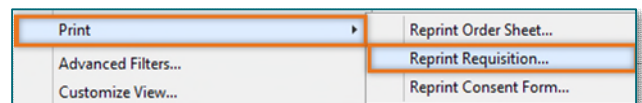
How to print labs to be done outside of NLH from day of treatment?

- In the **Labs Phase**, right-click the lab order in the applicable day of treatment column.
- Select **Print** from the menu.
- Choose **Reprint Requisition** from the submenu.
- Select the appropriate H printer from the list.



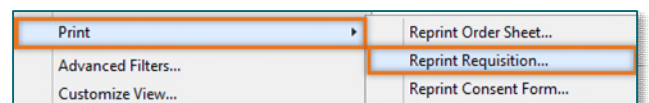
How to print labs to be done outside of NLH NOT in a day of treatment?

- From the **Orders** profile, locate the lab orders to be printed.
- Select one of the lab orders to be printed.
 - If there is more than one lab order requisition to print, press and hold the **CTRL** button on your keyboard while clicking the remainder of the orders.
- Right-click the order.
- Select **Print** from the open menu.
- Choose **Reprint Requisition** from the submenu.
- Select the appropriate H Printer in the list and click **OK**.



How do I print an order for pegfilgrastim to be given at another facility?

- In the **Chemotherapy Phase**, right-click the **pegfilgrastim Treatment Offsite** order in the applicable day of treatment column.
- Select **Print** from the menu.
- Choose **Reprint Requisition** from the submenu.
- Select the appropriate H printer from the list.

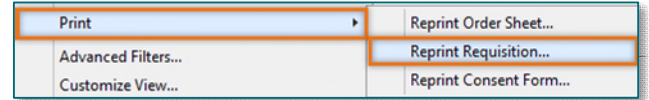


How do I print a Blood Transfusion Requisition?

- When activating blood transfusion orders, the order will **NOT** auto-print to the blood bank.

Oncology Project

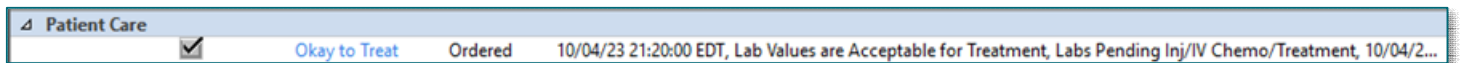
- After activating the day of treatment, in the **Transfusion Phase**, right-click the **TRANSFUSE [RED BLOOD CELLS/PLATELETS]** order in the applicable day of treatment column.
- Select **Print** from the menu.
- Choose **Reprint Requisition** from the submenu.
- Select the appropriate H printer from the list.



NOTE: To print the order requisition directly to the EMMC Blood Bank, select the **h149 – ww blood bnk** for the printer.

Adults - Okay to Treat Order

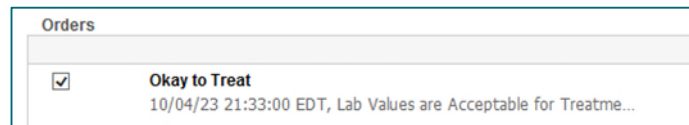
- **Okay to Treat** order for adults is viewable in the **Nursing Orders** section in **Orders**.



- It is also viewable on the **Oncology Flowsheet**.

NOTE: The **Okay to Treat** order will also flow to **Care Compass** when placed on an Inpatient encounter.

- **Care Compass Task**



Important Reminders

Activating Orders on the Correct Encounter

- It is important that orders are activated on the correct encounter. Treatment orders should be activated on the treatment location encounter for your location.

Oncology Treatment Locations	
Location Name	Location Display
NL Cancer Care Brewer Med Onc Treatment	ONCTR_E
NL Cancer Care Presque Isle Med Onc Treatment	ONCTR_T
NL Cancer Care Ellsworth Treatment	ONCTR_MCH
NL Pediatric Cancer Care Treatment	PEDONTR_E

- Inpatient encounters will be activated on the inpatient encounter.

Infusion Visit Charges

- At the end of the patient's treatment visit, clinical staff will place treatment related charges using the Oncology IV Billing MPage and the Infusion Clinic Charges PowerForm.
- The Oncology IV Billing MPage will be used to place the correct infusion charges for IV and IV piggyback medications.
- The **Infusion Clinic Charges Form** will be used to submit all other infusion related charges for the visit not captured in the Oncology IV Billing MPage.
- For detailed information on submitting treatment visit charges, refer to the [Infusion Visit Charges](#) flyer.

ONC Port Access Order

- The ONC Port Access order will show on the orders profile as just one day. The order is good for 365 days from date of placing the order.

NL Cancer Care Brewer Medical Oncology Only Topics

Frequently Asked Questions

Provider Communication with Treatment Room Nurses

- For scenarios where the patient is seen for a provider visit and is determined during the provider visit the patient is not getting treatment today:
 - Change the Start Date of the plan you want to delay and adjust the future appointment to the date that you would like the patient to return for treatment. This will send a scheduling request to the scheduler, and they will reschedule the patient appointments based on the date selected.
 - The provider will also send a message in Message Center to the infusion nurse pool, **CCOM Infusion Nurses**, stating the patient is not receiving treatment today.

CCOM Infusion RN Scheduling Grant 6 Weekend / Holiday Patient

- When placing regimen orders, providers will update the **Scheduling Location** field in the applicable day(s) of treatment to reflect where the patient needs to be scheduled for those days (i.e., Grant 6, an outside facility, etc.)
- In reviewing the orders, nursing will review the orders placed for treatment orders to be done on Grant 6, pump unhooks on Grant 6, outside facility, etc.
- CCOM Infusion RNs will schedule the patient to the **E CCOM GRANT 6 CHEMO** book using the **ONC GRANT 6 PROCEDURE** appointment type.
- When scheduling the appointment, you will be prompted to create an encounter. Create the encounter with the following details:
 - **Location:** G6OP

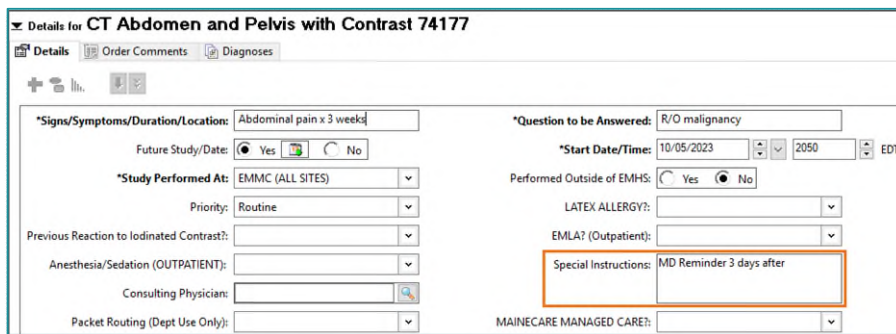
- **Encounter type:** Outpatient
- Instruct the patient to pre-register for the Grant 6 appointment.

Consent to Treat Workflow

➤ Refer to the [Creating Treatment Consent](#) flyer for more details on this workflow.

Imaging Orders – Special Instructions – HEIS Chart Pull

- Providers will use the **Special Instructions** field in imaging orders to notify the staff of the need to schedule a chart pull for HEIS.
- Scheduling staff will schedule a chart pull to alert the provider imaging results need to be reviewed.

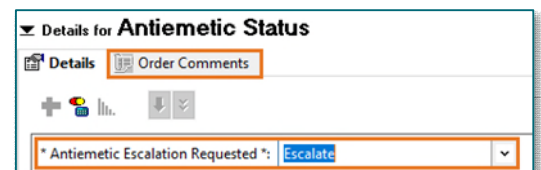


Antiemetic Status Order – Escalation

- The Antiemetic Status order it is a required order that conveys the default Emetogenic Potential of the chemo being ordered.

▪ **Pharmacist Managed Antiemetics**

- Provider will right-click the **Antiemetic Status** order and select **Modify**.
- To escalate, select **Escalate** in the ***Antiemetic Escalation Requested*** field:



- Add comments to provide additional relevant information in the **Order Comments** tab.

▪ **Provider Managed Antiemetics**

- For sites where providers manage the patient’s antiemetic orders, the provider would not need to modify the Antiemetic Status order to select the Escalate option.
- Providers can choose medication options from the Antiemetic Escalation subphase if the intention is to add to each day of treatment.
- Otherwise, the provider can add medication order(s) to the PowerPlan (at the bottom of the plan) and specify the day of treatment to which they apply.

What is the workflow for CCOM Providers seeing patients at an outreach clinic (i.e., Dover, MDI, MRH)?

➤ **Outreach Locations**

Facility	Location Description	Location Display
NL CANCER CARE BREWER MED ONC	NL Cancer Care Brewer Outreach – Dover-Foxcroft	ODONC_E
	NL Cancer Care Brewer Outreach – MDI	OMDIONC_E
	NL Cancer Care Brewer Outreach – Millinocket	OMILONC_E

➤ **Scheduler**

- Register and schedule the patient to the applicable outreach clinic location.
- Create the schedule and send list of patients to be seen to the provider.

➤ **Provider**

- Use the **Ambulatory Organizer** to access the patient’s chart on the outreach clinic encounter.
- Place regimen orders on the outreach clinic encounter
- Print the regimen orders when seeing the patient and provide to staff.
- Document office note on the outreach clinic encounter.
- Outreach clinic pharmacy enters orders into their system.

Cancer Research

- **Adult Research Plans** have also been created.
- Refer to the Clinical Trial section on the PDF to know the name of the trial and use that to search for the regimen. Just type first few and you will find it.
- Reach out to one of the research nurses to help, if needed.
- All the requirement by clinical trial for drug, labs are included in the plan.
 - Make sure to match the research PDF with the plan for dose modification.
 - Research Nurses will review research regimens. If there is something missing or a lab was identified that needs to be added to a day, the nurse would add it to that day by proposing it.

Oral Investigation Medication Workflow

- The Investigational Drug Reconciliation Forms will replace the paper medication diary used by research nurses and pharmacists. There are five different forms. One form will be used for a single clinical trial medication.

- Investigational Drug Reconciliation 1 Form
 - Investigational Drug Reconciliation 2 Form
 - Investigational Drug Reconciliation 3 Form
 - Investigational Drug Reconciliation 4 Form
 - Investigational Drug Reconciliation 5 Form
- Charting Investigational Medications on MAR
- When the provider orders a regimen with an oral investigational drug, the pharmacy will verify the medication and prepare it to be dispensed home with the patient.
 - The Research Nurse will navigate to the patient's chart and go to the MAR.
 - Follow the BCMA process for documenting the patient was give the medication to take home.

Inpatient Nursing

Important Reminders

Where are the online resources on the intranet pharmacy page?

- Previously pharmacy had a resource book which was posted to the intranet for nurses. This contained additional information that may not have been included on PDF orders.
- Plans have been built with notes, communication orders, and administration offsets providing that reference/guidance.

Important Notes for Inpatient Chemotherapy Workflows:

- It is important the day of treatment is rescheduled **PRIOR** to activating the day of treatment.
- Rescheduling treatment is dependent on the situation.
 - If it is earlier in the day, nursing will reschedule the treatment by at least two hours to allow for the pharmacy in Brewer to review the orders, prepare the medication, and get the drug over to the hospital.
 - If they are rescheduling for the next day, reschedule to 10am or later.

Activating Orders

- Nurses should not be activating initial treatment until a patient's parameters have been met **OR** the provider has entered an **Okay to Treat** order.
- If a parameter is not met, the nurse is to reach out to the provider for either:
 - An **Okay to Treat** order that specifies to proceed with treatment, despite a parameter not being met.

- For verification that treatment will be held/rescheduled/dose reduced.

Activating Order with Multiple Day Inpatient Treatments

- For multiple day, inpatient treatments (when the treatment parameters apply to day 1 only) – once the patient has met all parameters, been cleared for treatment, and day 1 has been activated, the nurse should then activate all consecutive treatment days at that time.
- Some examples of situations like this include:
 - REPOCH or EPOCH (once day 1 is activated, nurse should activate all remaining days of the cycle)
 - Decitabine (usually a 5-day treatment, all 5 days should be activated when day 1 is activated)
 - Azacitidine (usually a 7-day treatment, all 7 days should be activated when day 1 is activated)
 - Carboplatin + etoposide or Cisplatin + etoposide (3-day treatment, all 3 days should be activated when day 1 is activated)
 - RCHOP (the prednisone is given daily x 5 days, if the prednisone is ordered inside of the treatment plan, then all days should be activated when day 1 is activated)
 - Myeloma plans that contain multi-day dexamethasone (ex. CyBorD or Bortezomib + dex)- all consecutive days of dexamethasone should be activated when day 1 is activated.
 - Any plan that contains pegfilgrastim (Neulasta or Fulphila) when day 1 is activated, the nurse must also activate the treatment day for pegfilgrastim (which will be the day after chemo, usually day 2)
- It is important the correct phases are activated in plans that include different inpatient and outpatient phases.
 - Nurses in the outpatient setting will activate phases labeled **Outpatient**.
 - Nurses in the inpatient setting will activate phases labeled **Inpatient**.
 - For example, the high dose methotrexate plans include both a **Pre-Hydration [Outpatient]** and **Pre-Hydration [Inpatient]**.



High Dose Methotrexate Plans

- Patient's receiving high dose methotrexate, CCOM pharmacy will send the medication over the day before it is due.
- Nursing will change the start date and time to accurately reflect the true start date and time.
- The High Dose methotrexate plans are built differently and do not use the day of treatment architecture for the chemotherapy phase.

Oncology Project

- To change the Start Date/Time:

The screenshot shows a medication order interface. At the top, there are fields for '*Est. Start:' (10/18/2023 7:00 EDT), '*Est. Stop:' (None), and '*Est. Time Zero:' (10/18/2023 8:00 EDT). Below these are buttons for 'Offset', 'Component', 'Status', 'Dose ...', and 'Details'. The 'Est. Start' field is highlighted with an orange box.

- Click the ellipsis icon next to the ***Est Start Time**.
- In the **Change Start Date/Time** window, update the **Est* Start Date/Time** field.
 - Select a time that you will administer the methotrexate. Ensure you are selecting a time that you can administer the medication.
- Fill out the **Reschedule Reason**, then click **OK**.

The screenshot shows the 'Change Start Date / Time' dialog box. It has a title bar with a close button. The main area contains:

- '*Est. Start Date / Time' field with a date of 10/18/2023 and a time of 0700 EDT. This field is highlighted with an orange box.
- '*Est. Time Zero' field with a value of 10/18/2023 8:00 EDT.
- '*Reschedule Reason:' dropdown menu.
- 'Comment:' text area.
- A table with columns: Adjust, Offset, Component, Start Date / Time, Status, and Order Details.
- 'OK' and 'Cancel' buttons at the bottom right.

Adjust	Offset	Component	Start Date / Time	Status	Order Details
<input checked="" type="checkbox"/>	-60 min	Antiemetic Status	*Est. 10/18/2023	Future	Maintain at baseline, EA, MODerate on Day(s) 1, Pharmacy to Manage
<input checked="" type="checkbox"/>	0 hr	Zero Hour	*Est. 10/18/2023	Future	
<input checked="" type="checkbox"/>	0 min	*Communication Order (AVOID (Med))	*Est. 10/18/2023	Future	See Comments, Misc, MISC, Day of Tx, Diagnosis: Cancer, Routine, *Est. 10/18/2023, Future Order Hold all of the following (1) on the day of High Dose Methotrexate

- When the Chemotherapy phase for methotrexate cycle is activated, it is going to activate all the orders in that phase, which includes the methotrexate level orders.
- The methotrexate level orders have offsets built into them when they are due. By rescheduling the date/time to a time you plan to administer the methotrexate, this will ensure the times for the methotrexate lab level orders are accurate; therefore, will not require staff to cancel and re-order.

NOTE: As mentioned above, it is important the day of treatment is rescheduled **PRIOR** to activating the day of treatment.

If the chemotherapy phase is activated **PRIOR** to rescheduling, then the methotrexate levels **WILL NOT** reschedule according to their predetermined offsets.

Pediatric Oncology

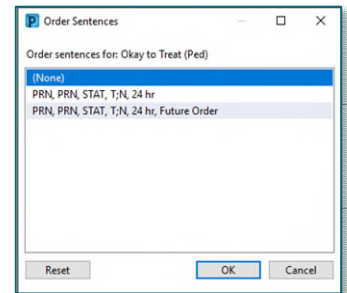
Providers

Placing the Okay to Treat (Ped) Order

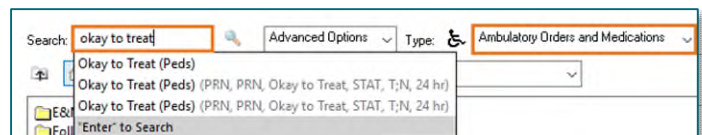
- An **Okay to Treat (Ped) order** will always be placed by the pediatric oncologists.
- **UPDATE:** Pediatric Oncology providers will no longer document the Meets Criteria Outcome via the Document in Plan tab.
 - Providers will place the **Okay to Treat (Ped)** order which will count as documentation that all medication specific parameters have been met.
 - If any are **NOT** met, the provider will add a comment within the Okay to Treat (Ped) order specifying it is okay to treat with the reason OR if the patient is only cleared to receive certain medications.

- To place the **Okay to Treat (Ped)** order:

- From Orders, click **Add**.
- Search for the **Okay to Treat (Ped)** order.
 - **CHEMO, STAT, T; N, 24 hr** order sentence will be used in the **Inpatient** setting.
 - **CHEMO, STAT, T; N, 24 hr, Future Order** sentence will be used in the **Outpatient** clinic setting.



NOTE: When placing the Okay to Treat order in the outpatient clinic, ensure the **Type** field is set to **Ambulatory Orders and Medications** to view the order.



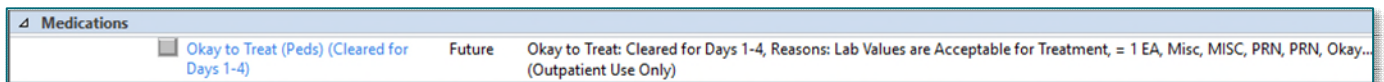
- Complete the required fields.
 - In the **Okay to Treat** field to enter any information needed to relay for okay to treat (e.g., cleared for treatment days 1-4.)
 - **Okay to Treat Reason:** Select the appropriate option from the dropdown.
- Click **Orders for Signature**.
- Click **Sign**, then click **Refresh**.

Oncology Project

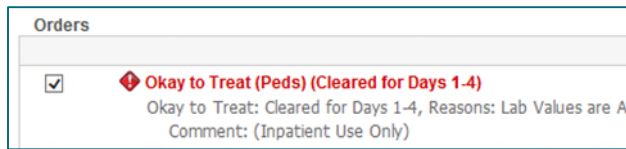
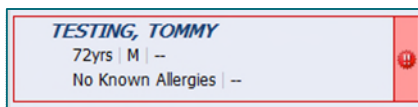
Clinical Staff

Pediatrics: Reviewing the Okay to Treat (Ped) Order

- An **Okay to Treat (Ped) order** will always be placed by the pediatric oncologists and will be found in the **Medications** section of the Orders.
- **Okay to Treat (Ped) Order**

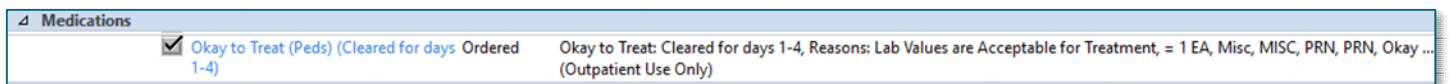


- **CHEMO, STAT, T; N, 24 hr** order sentence will be used in the **Inpatient** setting and will flow to the following areas:
 - **Medications** section in the **Orders** profile
 - **Care Compass** displays with a red circle with double exclamation points indicating a STAT order.



- **Oncology Flowsheet**
- **MAR**
- **PPM/Med Manager** for verification - Displays with a STAT priority.

➤ Okay to Treat (Ped) Order



- **CHEMO, STAT, T; N, 24 hr, Future Order** sentence will be used in the **Outpatient** clinic setting and will flow to the following areas:
 - **Medications** section in the **Orders** profile
 - **Oncology Flowsheet**
 - **MAR**
 - **PPM/Med Manager** for verification

Pre-Loading

Frequently Asked Questions

Which patients do I need to pre-load from the report?

- All patients on the report need to pre-loaded, not just patients on chemotherapy.
- All scheduled visits require an order (i.e., clinic, lab, chemo, non-chemo, etc.) for pre-load, so they can be scheduled to the new location and appointment types.

What if I am expecting changes for treatment orders with patients to pre-load?

- Preload patients as expected if you are not planning on any changes in the treatment of the patient prior to 10/9.
- If you anticipate changes in the treatment plan in the next few weeks (e.g., a scan is pending), hold on pre-loading until after results or confirmed changes.
- Convey to managers the patients that are on hold and review again the next week.
- Managers will mark HOLD in comments for the MRN in TransIT.
- Will run report closer to go-live out of TransIT and identify the HOLDS.
- Once the provider decides to pre-load, they will communicate to the Manager it has been completed.