NPASS Inclusion to Pediatric Criteria

MEDITECH PHA 5.6.7

EHR Update 2026.1

Added N-PASS as an option within Pediatric Admin Criteria v4 Screens

N-PASS Inclusion Update

N-PASS has been added as an additional sedation goal option in the dropdown menu. While not all sites will utilize N-PASS, it is available for facilities that choose to implement it.

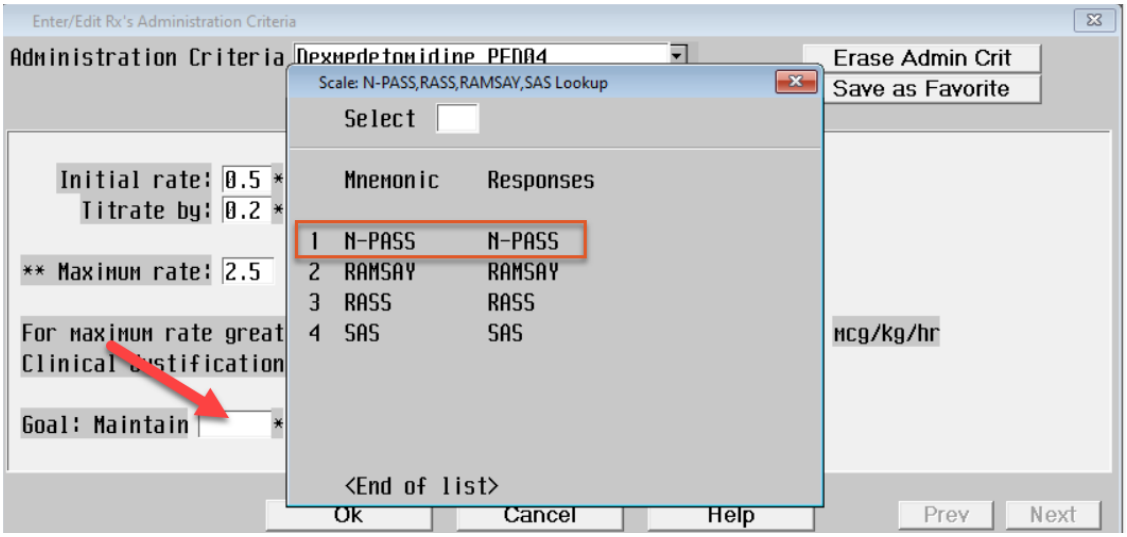
For the following medications included in the PED Admin Criteria, N-PASS has been added as an available option for the *Sedation Goal* dropdown:

- **Dexmedetomidine**
- **Fentanyl**
- **Midazolam (Neonate)**
- **Propofol**

Workflow Example:

N-PASS has been added as an option for Goal: Maintain field. Use the F9 Lookup with the field blank to see all the options.

Screen Sample of Dexmedetomidine:



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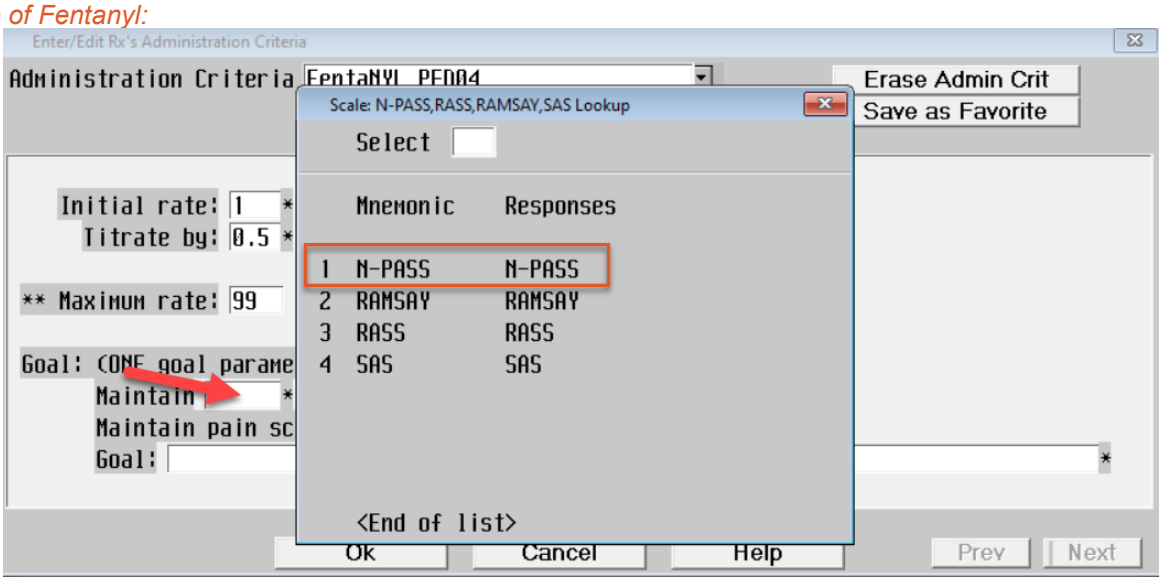
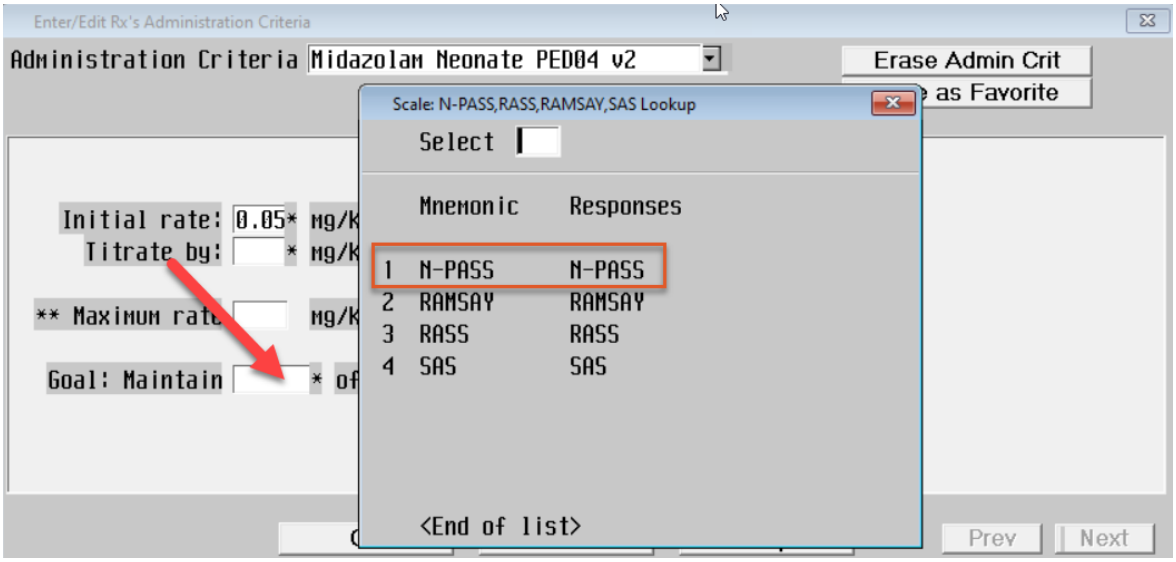
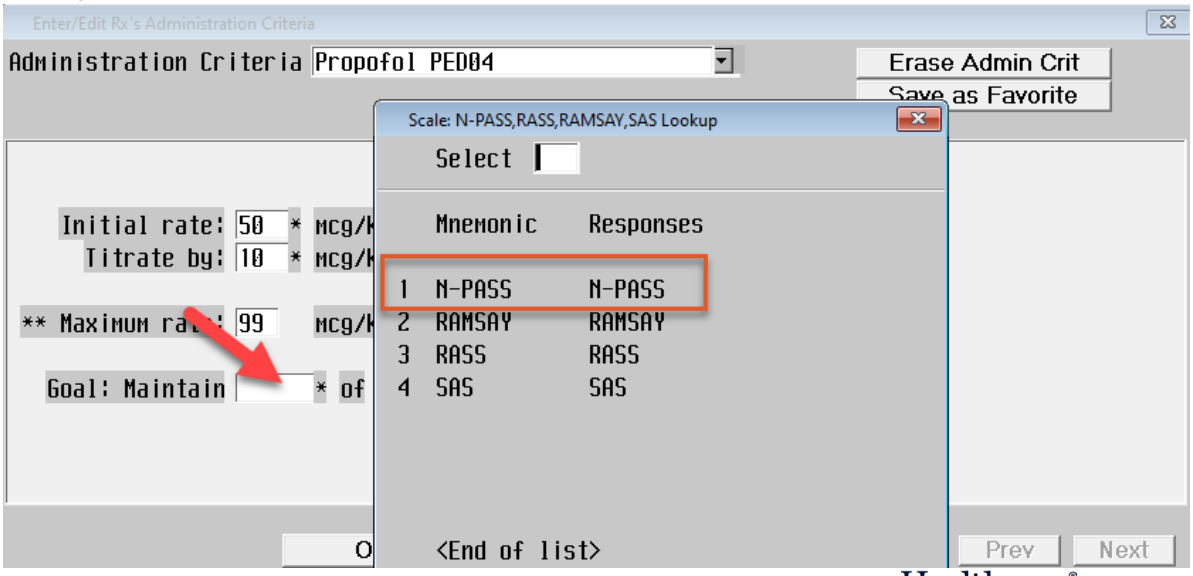
Screen Sample of Fentanyl:



Screen Sample of Midazolam (Neonate):



Screen Sample of Propofol:



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Hydromorphone Pediatric Admin Criteria

MEDITECH PHA 5.6.7

EHR Update 2026.1

Hydromorphone Pediatric Admin Criteria Update

The hydromorphone dosing criteria has been updated to improve accuracy in medication calculation and documentation. These changes ensure alignment with current pediatric standards and enhance data entry consistency.

Dosing Unit Changes

No Load Screens

- Previous Unit: **mcg**/kg/hr
- Updated Unit: **mg**/kg/hr

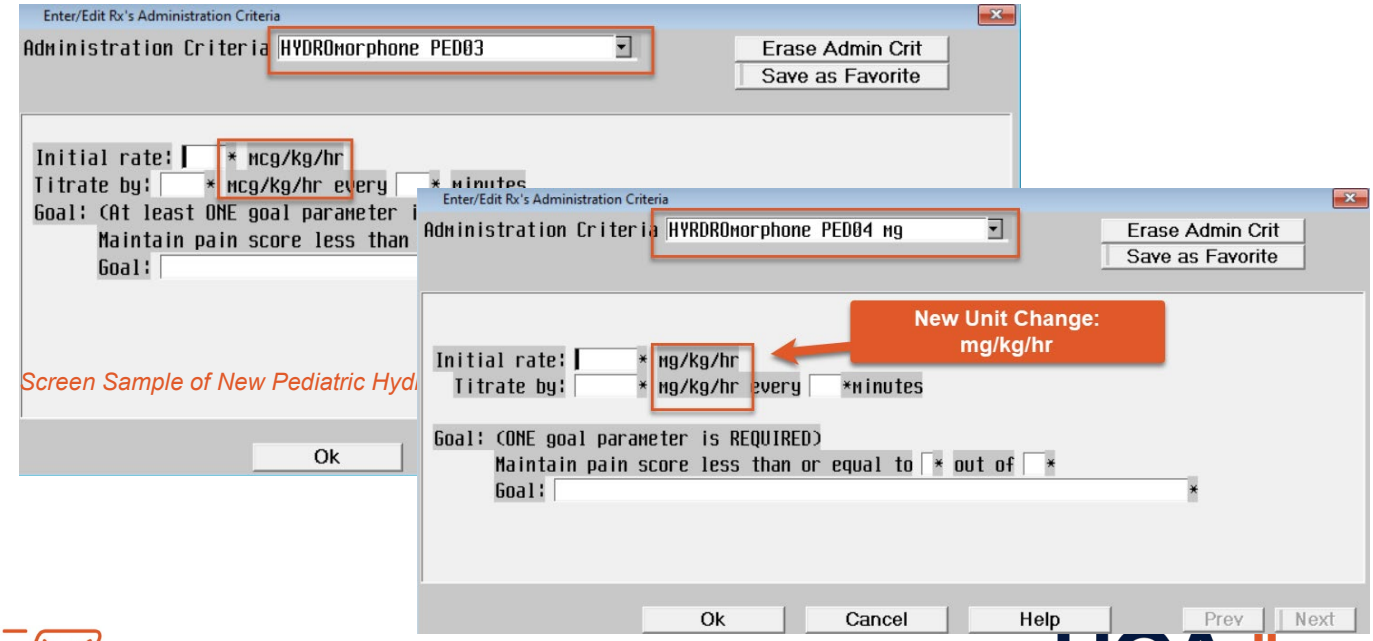
With Load Screen

- **Loading Dose** Field Unit Change**:**
- Previous Unit: mcg/kg
- Updated Unit: mg/kg
- **Initial Rate and Titrate by** Field Unit Change**:**
- Previous Unit: **mcg**/kg/hr
- Updated Unit: **mg**/kg/hr

Before and After Comparisons

Dosing unit change from mcg/kg/hr to mg/kg/hr

*Screen Samples of No Load Screen – Changing units of measure from **mcg/kg/hr** to **mg/kg/hr***



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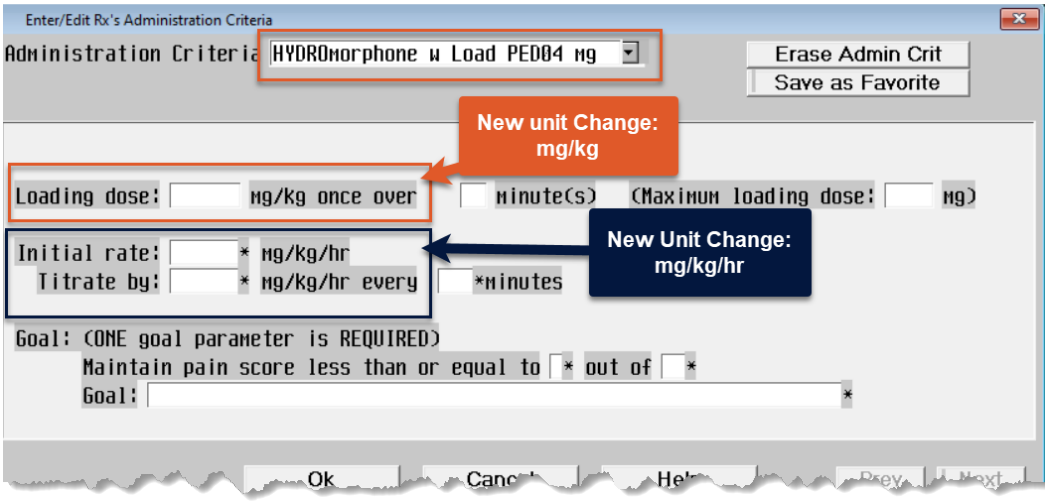

Enter/Edit Rx's Administration Criteria
Administration Criteria
HYDROmorphone w Load PED04 mg
Erase Admin Crit
Save as Favorite
New unit Change: mg/kg
Loading dose: mg/Kg once over minute(s) (Maximum loading dose: mg)
New Unit Change: mg/kg/hr
Initial rate: * mg/kg/hr
Titrate by: * mg/kg/hr every *minutes
Goal: (ONE goal parameter is REQUIRED)
Maintain pain score less than or equal to * out of *
Goal: *
Ok

Fluroquinolone-UTI alert

MEDITECH PHA 5.6.7

EHR Update 2026.1

Fluroquinolone-UTI alert

Fluroquinolones (FQs) are not first-line therapy for urinary tract infections (UTI) due to significant side effects. These rules introduce alerts to users who select one of two UTI indications from the antibiotic indication (ABXI) screen when entering a FQ order.

The CPOE alert has yes/no buttons and can be bypassed if the provider determines the benefits outweigh the risks.

If an order is entered in Pharmacy, they will receive the same alert at FILE. Users will not see any alerts when verifying orders.

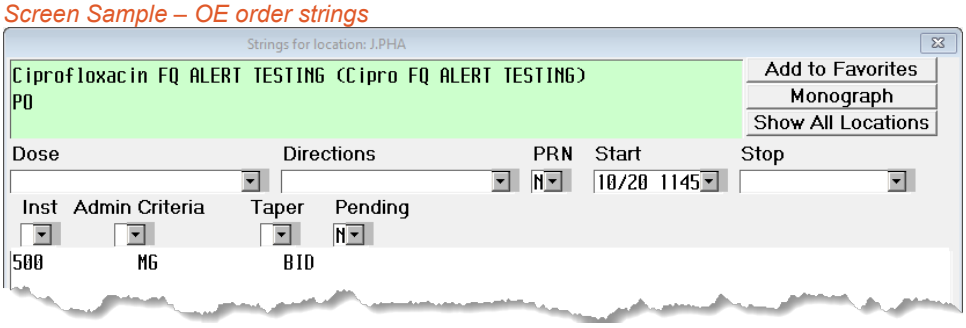
This rule is current for the MEDITECH MAGIC 5.6.7 or later release.

Workflow Examples

Provider Workflow

The provider will select a medication order string from the type-ahead lookup:

Screen Sample – OE order strings



After selecting a string and clicking the <**Done**> button, the provider with be presented with the Antibiotic Indication Screen:

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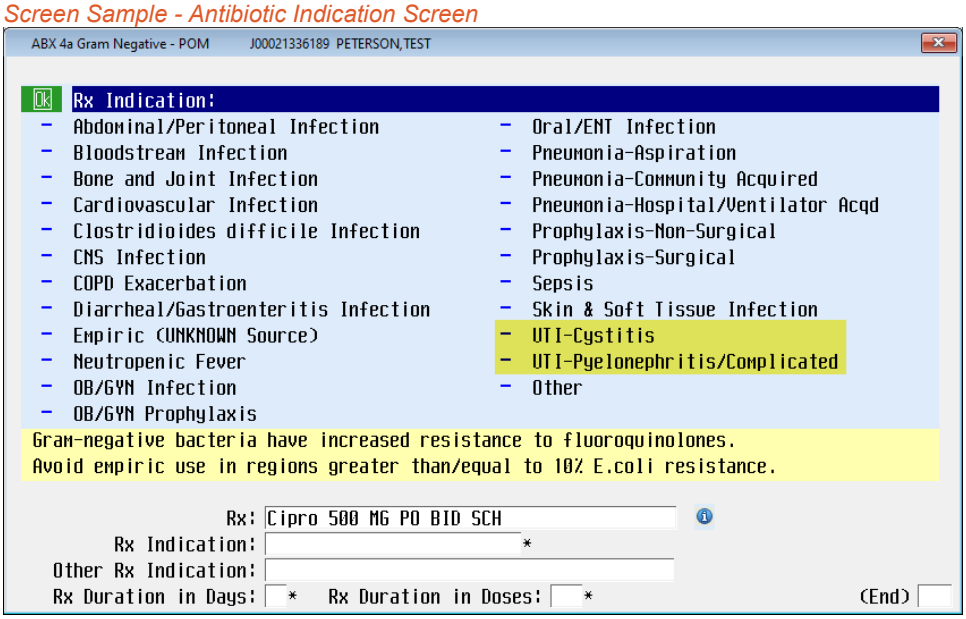
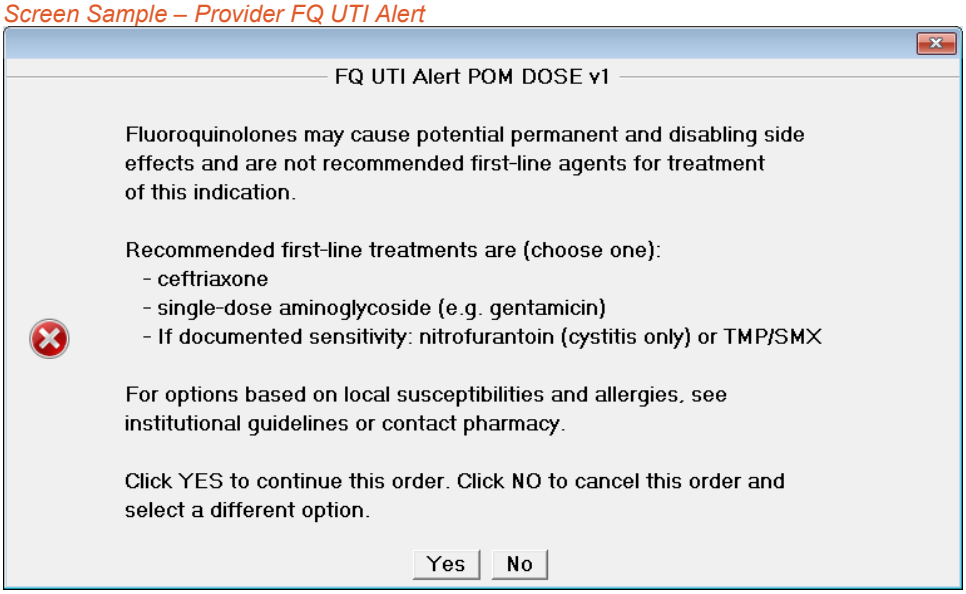
Screen Sample - Antibiotic Indication Screen

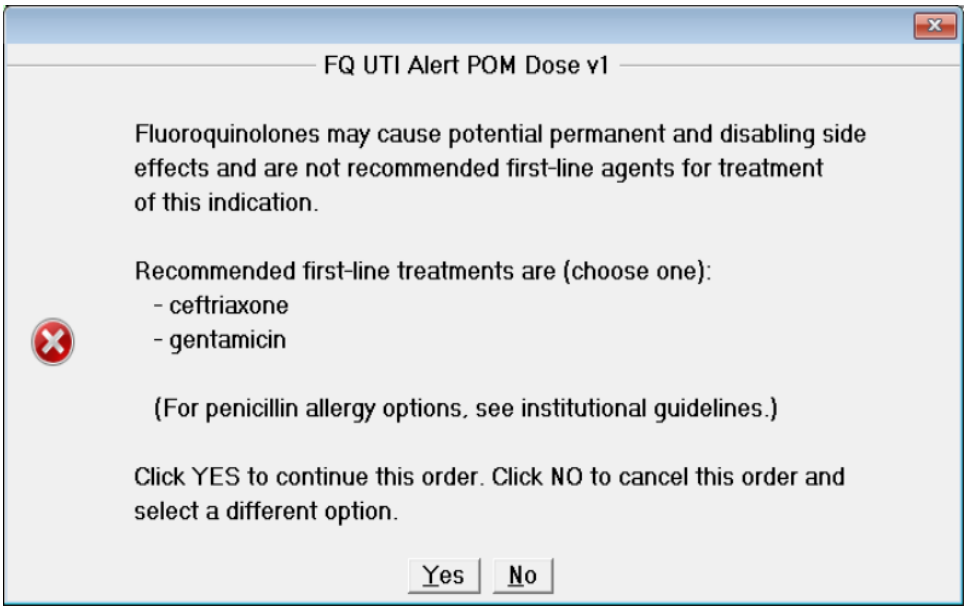


If the provider selects one of the two highlighted UTI indications, after completing the required fields on the screen and closing it they will receive one of the following alerts based off the indication selected:

UTI – Cystitis:
Screen Sample – Provider FQ UTI Alert



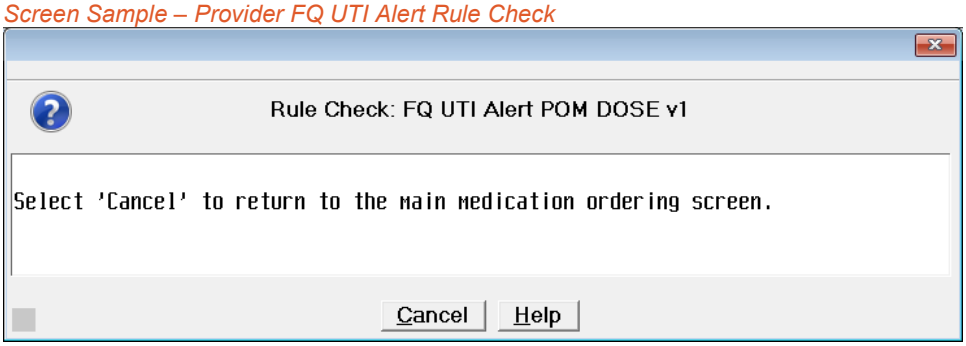
UTI – Pyelonephritis/Complicated:
Screen Sample – Provider FQ UTI Alert



If the provider wishes to proceed with the FQ order for the UTI indication, they will select the <**Yes**> button which completes the rule and can proceed with submitting the order.

If the provider no longer wishes to proceed with the FQ order, they will select the <**No**> button which pops a Rule Check screen with a cancel button to complete the cancellation of the order:

Screen Sample – Provider FQ UTI Alert Rule Check



If the provider proceeds with submitting an order after encountering the alert, it will be tracked in the audit trail:

Screen Sample – Audit trail for CPOE order

```
10/27/25 1005 - Rules At Entry                          by DOCMMW  Eff: 10/27/25 1005
   CIPR500S:   HCA.FQUOE1
   CIPR500S:   RULE:  HCA.FQUOE1
   CIPR500S:   Fluoroquinolones may cause potential permanent and disabling
               side
   CIPR500S:   effects and are not recommended first-line agents for treatment
   CIPR500S:   of this indication.
   CIPR500S:
   CIPR500S:   Recommended first-line treatments are (choose one):
   CIPR500S:      - ceftriaxone
   CIPR500S:      - single-dose aminoglycoside (e.g. gentamicin)
   CIPR500S:      - If documented sensitivity: nitrofurantoin (cystitis only)
               or TMP/SMX
   CIPR500S:
   CIPR500S:   For options based on local susceptibilities and allergies, see
   CIPR500S:   institutional guidelines or contact pharmacy.
   CIPR500S:
   CIPR500S:   Click YES to continue this order. Click NO to cancel this order
               and
   CIPR500S:   select a different option.
   CIPR500S:   User: DOCMMW
   CIPR500S:   Yes
```

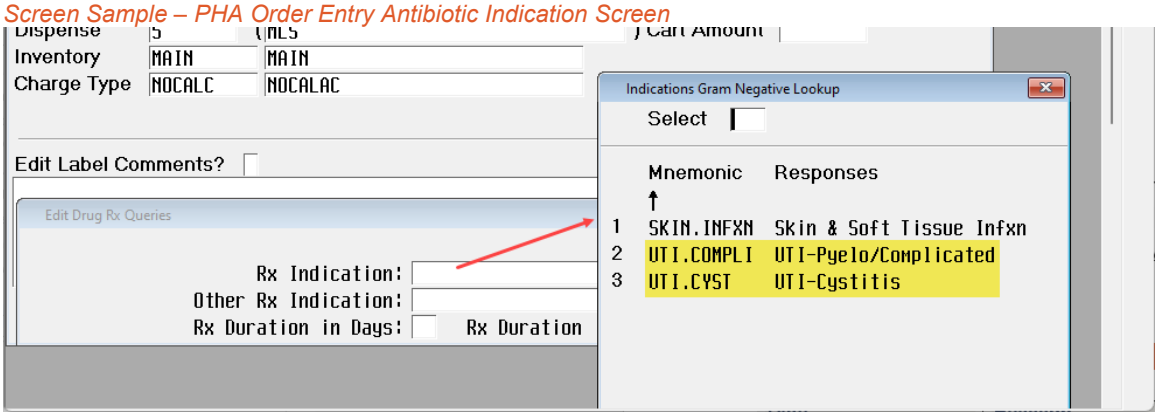
Pharmacy Workflow

There are no alerts seen during verification of an order.

PHA Order Entry

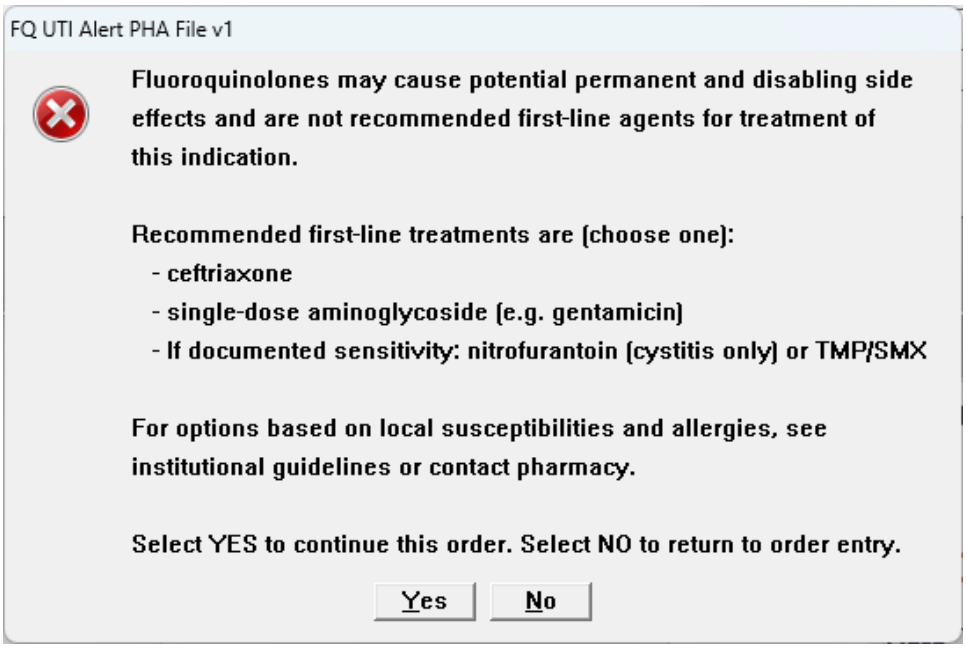
If the pharmacist selects either of the two UTI indications while entering an order in the Pharmacy module, the system will generate the appropriate UTI alert.

Screen Sample – PHA Order Entry Antibiotic Indication Screen

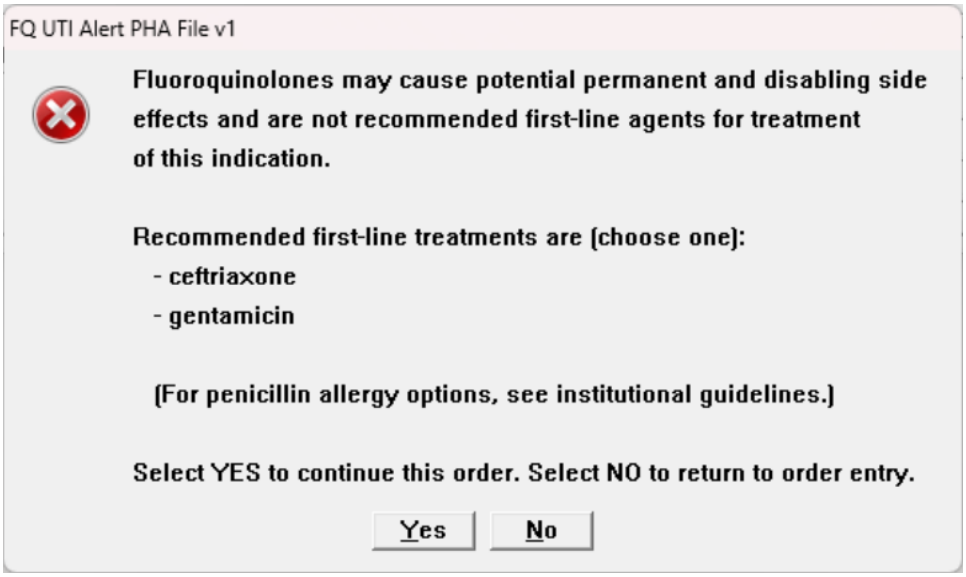


An alert will be displayed at FILE:

UTI – Cystitis:
Screen Sample – PHA FQ UTI Alert



UTI – Pyelonephritis/Complicated:
Screen Sample – PHA FQ UTI Alert



If the pharmacist wishes to proceed with filing the order, they will select the <**Yes**> button which completes the rule and allows filing the order.

If the pharmacist wishes to discard the order, they will select the <**No**> button which will return them to order entry of this order where they can exit and not enter the order.

NOTE: If the pharmacist proceeds with entering the order after encountering the alert, it will be recorded in the Audit Trail:

Screen Sample – Audit Trail for PHA order

```
10/27/25 1004 - Rules At Entry                              by
                                              Eff: 10/27/25 1004
   CIPRS00S:   HCA.FQURX1
   CIPRS00S:   RULE:  HCA.FQURX1
   CIPRS00S:   Fluoroquinolones may cause potential permanent and disabling
               side
   CIPRS00S:   effects and are not recommended first-line agents for treatment
               of
   CIPRS00S:   this indication.
   CIPRS00S:
   CIPRS00S:   Recommended first-line treatments are (choose one):
   CIPRS00S:      - ceftriaxone
   CIPRS00S:      - single-dose aminoglycoside (e.g. gentamicin)
   CIPRS00S:      - If documented sensitivity: nitrofurantoin (cystitis only)
               or TMP/SMX
   CIPRS00S:
   CIPRS00S:   For options based on local susceptibilities and allergies, see
   CIPRS00S:   institutional guidelines or contact pharmacy.
   CIPRS00S:
   CIPRS00S:   Select YES to continue this order. Select NO to return to order
               entry.
   CIPRS00S:   User:
   CIPRS00S:   Yes
```

Epoetin Protocol

MEDITECH PHA 5.6.7

EHR Update 2026.1

Epoetin Protocol

Rules and screens have been developed to ensure a patient's hemoglobin (Hgb) and blood pressure (BP) are within appropriate limits when epoetin alfa is ordered and administered.

This is achieved by:

- A POM-facing rule that will call an outside-labs screen, if applicable, in addition to an indication screen where a provider will select an indication for the order and then be prompted to enter BP hold parameters, as well as review Hgb hold parameters based on the indication selected.
- A PHA-facing rule that will display POM-alert(s) with override reason(s), if applicable, to the pharmacist for order verification; and that will direct the pharmacist to OM for new order entry.
- A PHA screen will live in the query field of the order and will house the information entered via OM/CPOE.
- An eMAR Admin screen will pop for nursing, on documentation of the medication, and will house the administration parameters for the nurse to review prior to administration.

The project is current for the MEDITECH 5.6.7 or later release.

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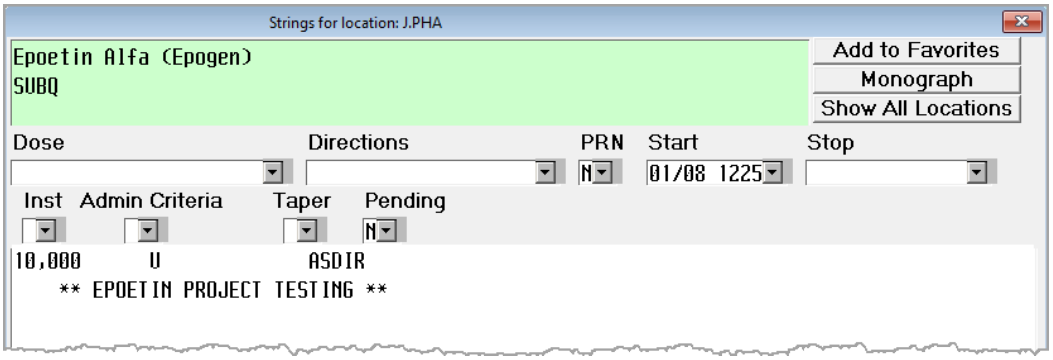
Workflow Examples

Provider Workflow

The provider will select a medication order string from the type-ahead lookup:

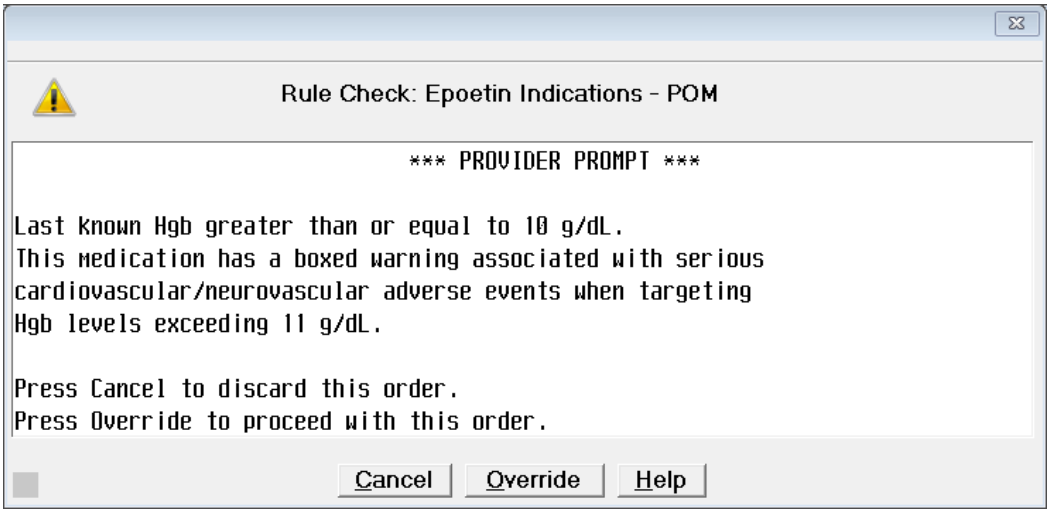


After a string is selected, the rule will look for the most recent Hgb value resulted on the patient within the last 7 days, across admissions,

- If a result is found, and is less than 10, the indication screen will pop for the provider.
- If the most recent Hgb value is greater than or equal to 10, or if no result is found, the provider will receive an additional alert prior to the indication screen.

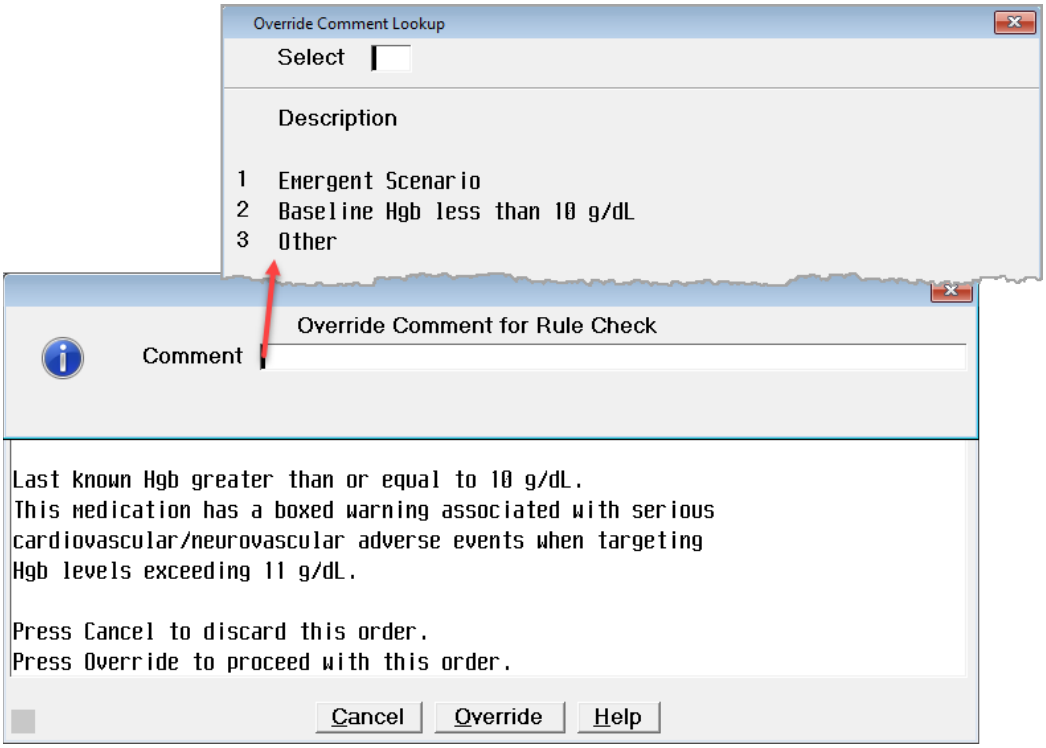
Hgb Result Greater than or Equal to 10

If the most recent Hgb resulted on the patient is greater than or equal to 10 g/dL, the provider will receive the following alert:



- **Cancel** will cancel the order and return the user to the main medication ordering screen.

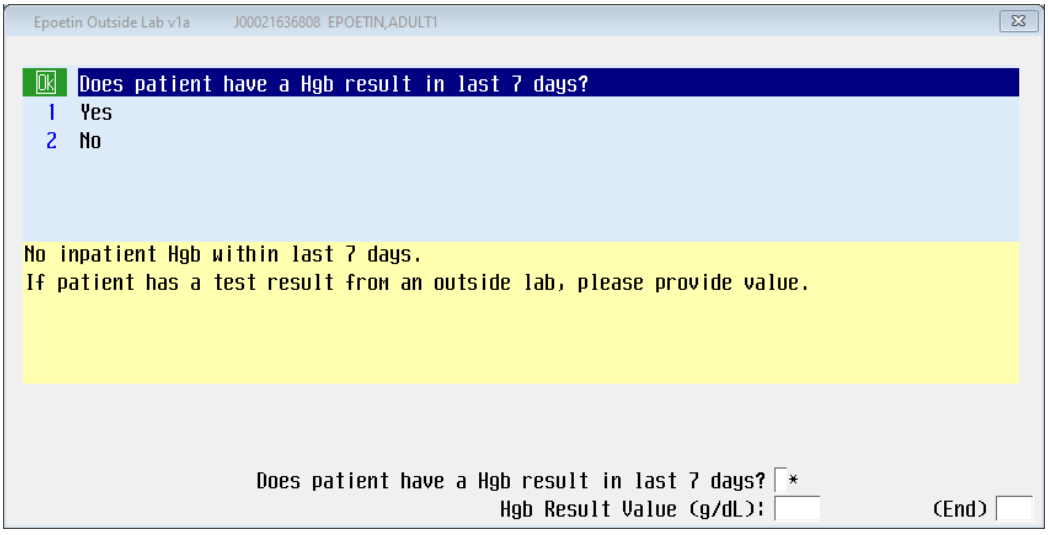
- **Override** will pop the Override Comment field where the user can either free-text a response or do a **<F9>** lookup. Once an Override Comment is entered, the ordering provider will be taken to the indication screen.



No Recent Hgb Result

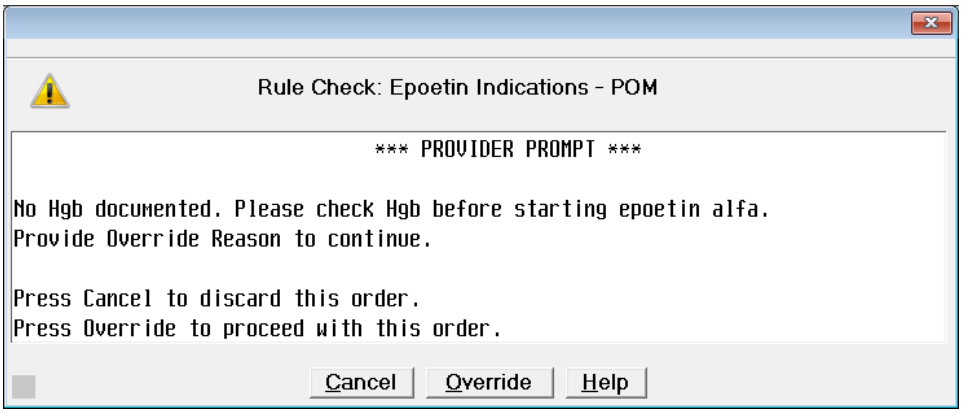
If the patient does not have a Hgb value resulted within the last 7 days, the ordering provider will be given the opportunity to input any known result into the Outside Lab screen.

Screen Sample – Outside Lab screen

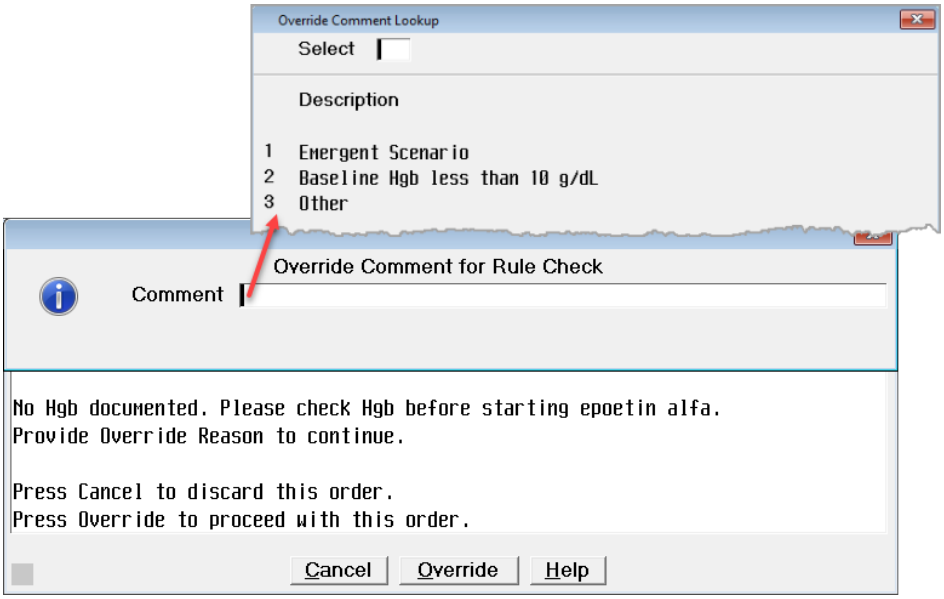


- **No** will pop a Rule Check alert where the provider can choose to Cancel or Override

Screen Sample- Rule Check

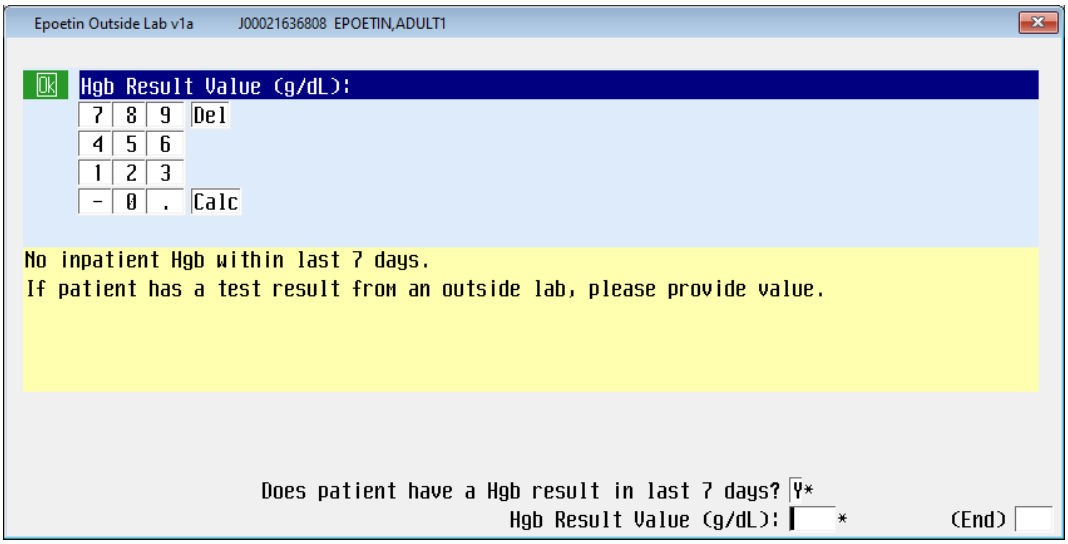


  - **Cancel** will cancel the order and return the user to the main medication ordering screen.
  - **Override** will pop the Override Comment field where the user can either free-text a response or do a <**F9**> lookup. Once an Override Comment is entered, the ordering provider will be taken to the indication screen.



- **Yes** will advance the cursor to the next query and allow the provider to fill in a value.

Screen Sample – Outside Lab screen



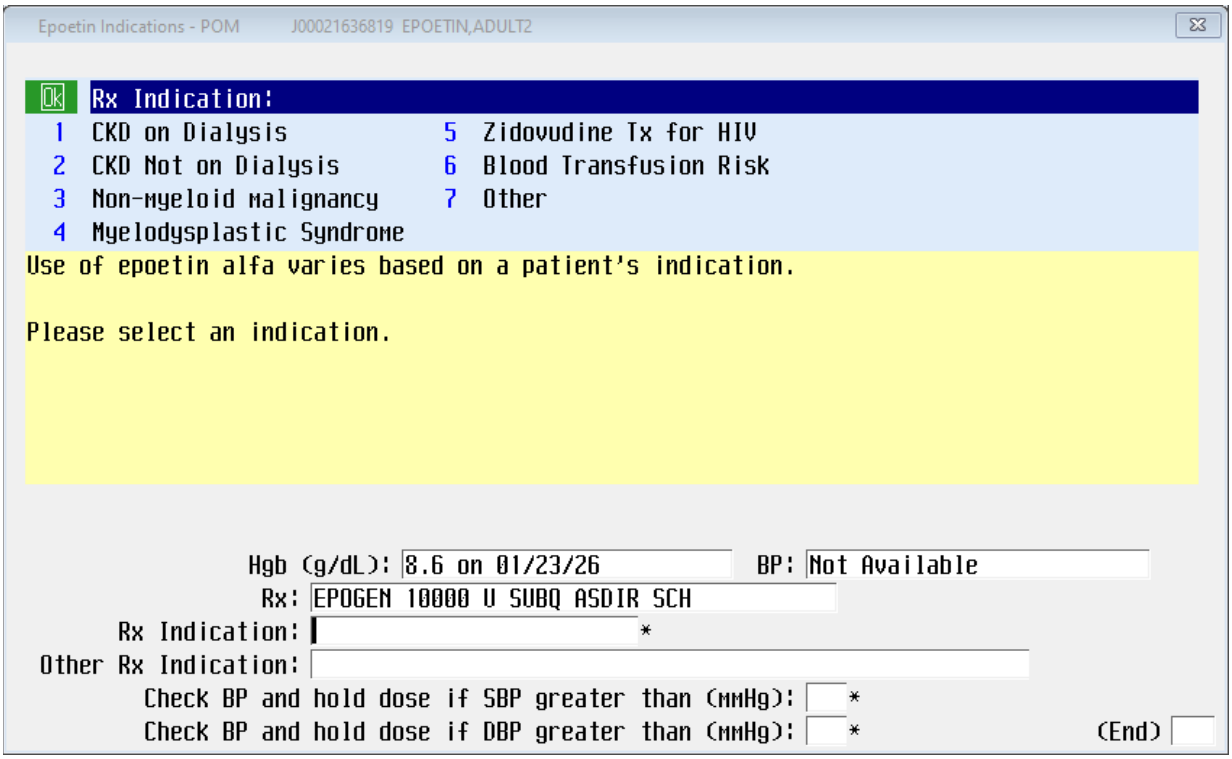
  - If the value entered is less than 10, the indication screen will pop for the provider.

- If the value entered is greater than or equal to 10, the provider will receive the same Rule Check alert outlined in the "Hgb Result Greater than or Equal to 10" section where they can choose to Cancel or Override.

Indication Screen

If a Hgb value is present and within normal limits, or if the ordering provider has opted to Override either of the previously outlined Rule Check alerts, they will be presented with a screen to select an indication.

Screen Sample – Indication Screen



The **Hgb (g/dL)**, **BP**, and **Rx** fields are “display-only” and cannot be edited.

- **Hgb (g/dL)** will populate with the most recent lab value within the last 7 days, along with the date it was resulted. If the provider filled in a value on the Outside Lab screen, it will NOT populate or be available to view on this screen.
- **BP** will populate with the most recent Blood Pressure documented within the last 24 hours. This field pulls data from the Nursing Vitals Assessment.

If there is no Hgb or BP found in the specified timeframe the respective field will populate with “Not Available”.

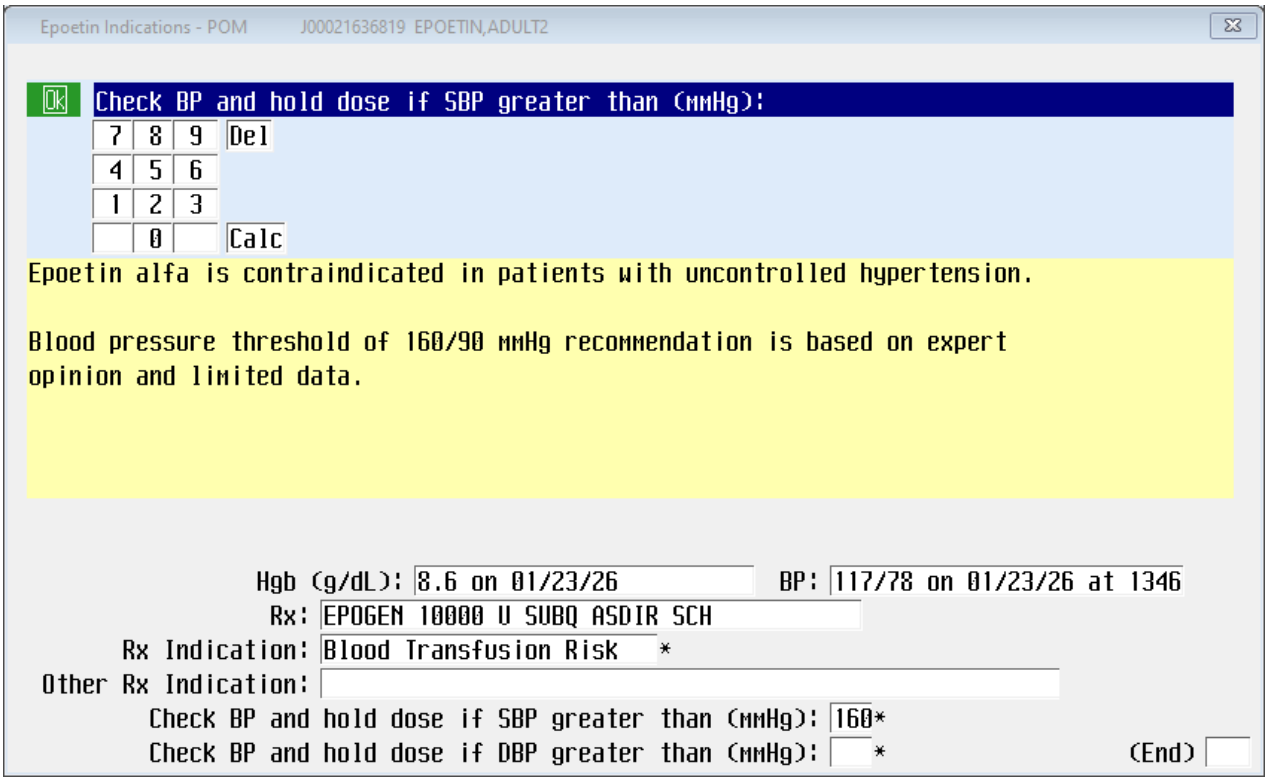
The **Rx Indication** and **BP hold parameter** fields are required.

- If Other is selected as the Rx Indication, the “Other Rx Indication” field requires a free-text entry.

Once an indication is selected, the provider is prompted to enter BP hold parameters.

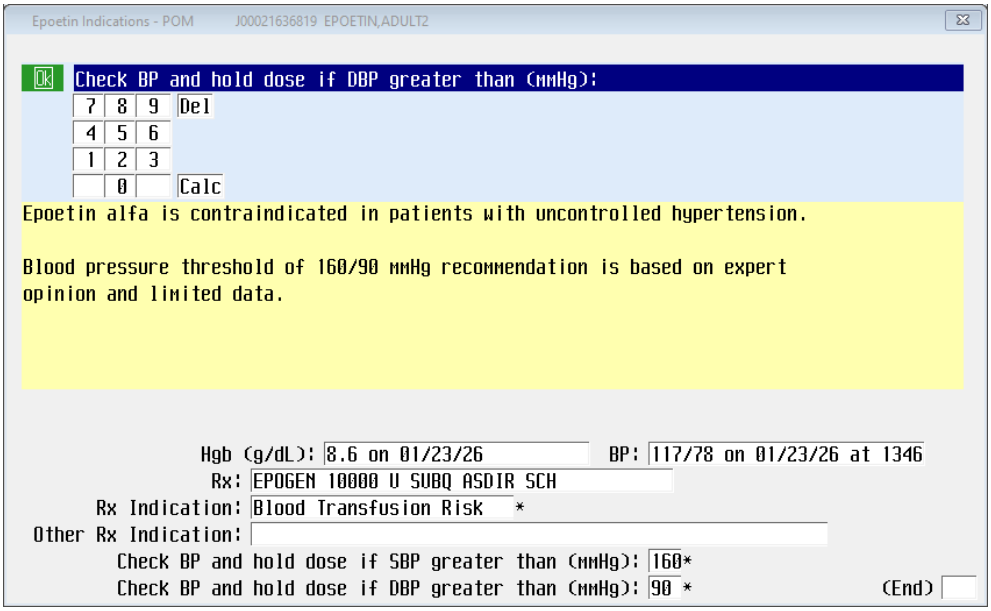
- The **SBP** will pre-populate with a value of 160 but is editable.

Screen Sample – SBP Hold Parameter



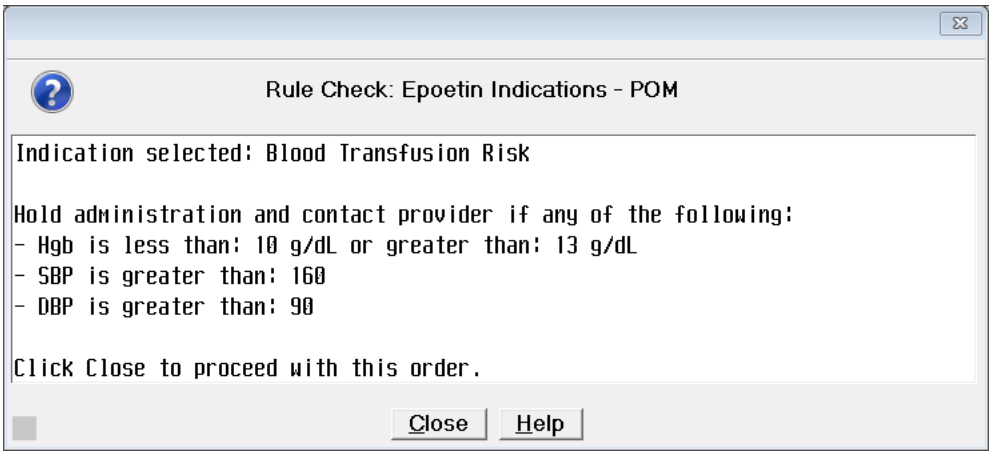
The **DBP** will pre-populate with a value of 90 but is editable.

Screen Sample - DBP Hold Parameter



Once an indication is selected and the BP hold parameters are filled in the provider will receive a final Rule Check alert outlining when they may be contacted to hold an administration.

Screen Sample – Rule Check



This alert is based on the indication selected and the individual BP hold parameters entered by the provider on the Indication screen.

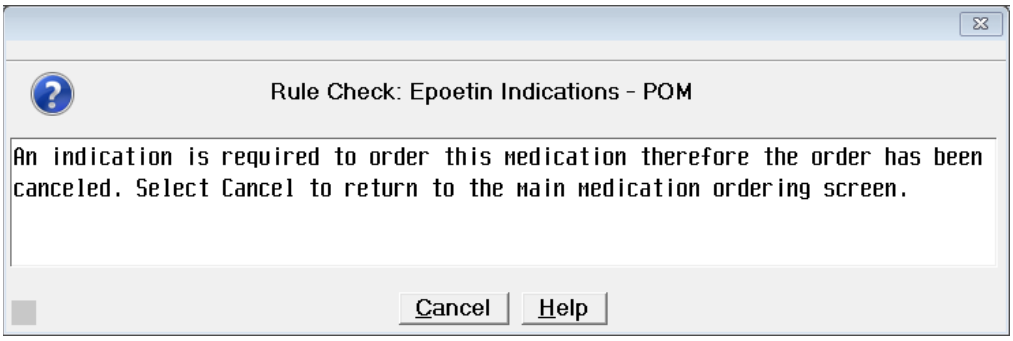
Indication	Hgb hold parameter
CKD on Dialysis	Greater than 11 g/dL
CKD Not on Dialysis	Greater than 10 g/dL
Non-myeloid Malignancy	Greater than 10 g/dL
Myelodysplastic Syndrome	Greater than 10 g/dL
Zidovudine Tx for HIV	Greater than 10 g/dL
Blood Transfusion Risk	Less than 10 g/dL or greater than 13 g/dL
Other	Greater than 10 g/dL

The provider will review and click Close to proceed.

Any alert and associated Override Comment, if applicable, will be logged to the audit trail for the medication order and will be viewable in the Print Order.

At any point during the ordering process, if the provider chooses to exit the Outside Lab screen or the Indication Screen using <**F11**>, closure through <**X**> or <**Esc**> key, they will receive the following Rule Check alert.

Screen Sample – Cancel Rule Check



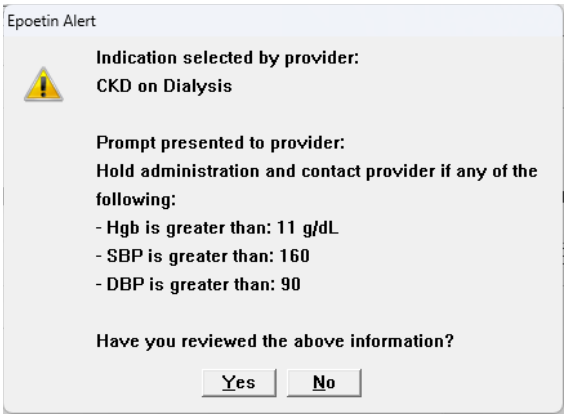
Clicking Cancel will take the provider back to the main medication ordering field.

Pharmacist Workflow

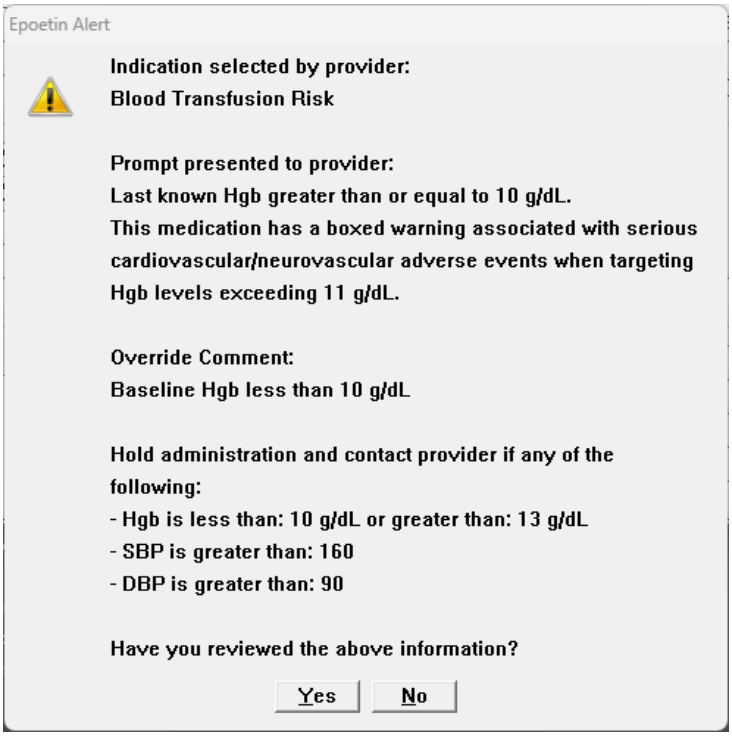
Order Verification

As the pharmacist processes through order verification, a Y/N alert will fire for the pharmacist at the DOSE field. The alert details the indication selected by the ordering provider, as well as any prompts that the provider received and associated Override Comment(s), if applicable.

Screen Sample – Indication and Hold Parameters Only



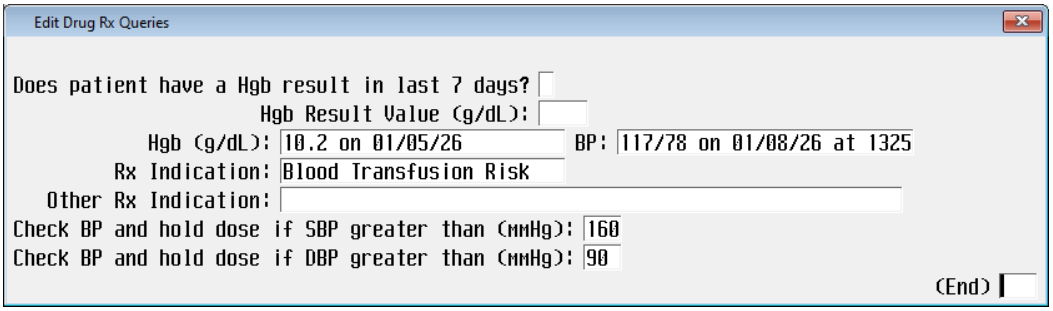
Screen Sample – Alert Plus Override



Clicking either Yes or No will allow the pharmacist to proceed with order verification, and the response will be logged in the Audit Trail of the Print Order.

At any point during verification, the pharmacist can access the Query field on the order to see what was entered by the ordering provider.

Screen Sample – Query Field (Order Entry CDS)



Order Entry

After the pharmacist selects a drug mnemonic, a hard-stop alert will fire directing them to Order Entry through OM.

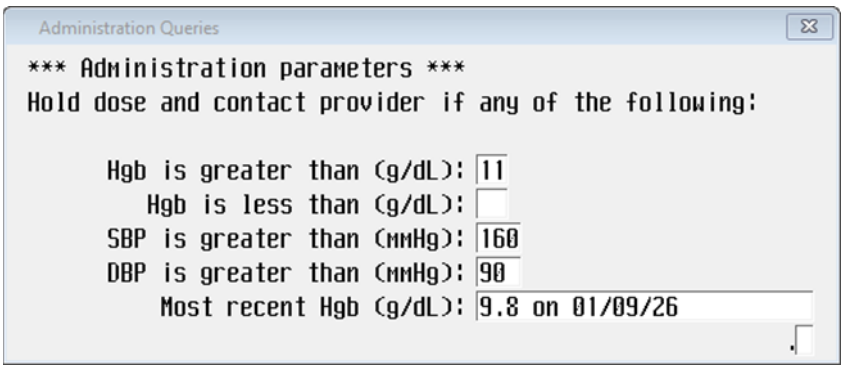
Screen Sample – Hard Stop at MED

They must click Ok, then select <**F10**> to clear the med mnemonic field before they can back out of the order entry screen.

Nurse Workflow

As the nurse documents on the medication order, the eMAR Admin screen will pop:

Screen Sample – MAR Admin screen



All queries are display-only and for informational purposes.

- All the hold parameters populate based on what was entered by the ordering provider.
- The most recent Hgb, from within the last 7 days, will populate the last field.

After reviewing the alert, the nurse can proceed with medication documentation.

Dispensing Machine Audit Report (DMAR)

MEDITECH 5.6.7 PHA Update

EHR Update 2026.1

Dispensing Machine Audit Report (DMAR) Update for 2026.1 Release

The Dispensing Machine Audit Report is intended to help reconcile medications removed from an automated dispensing cabinet and to verify they were administered to a patient.

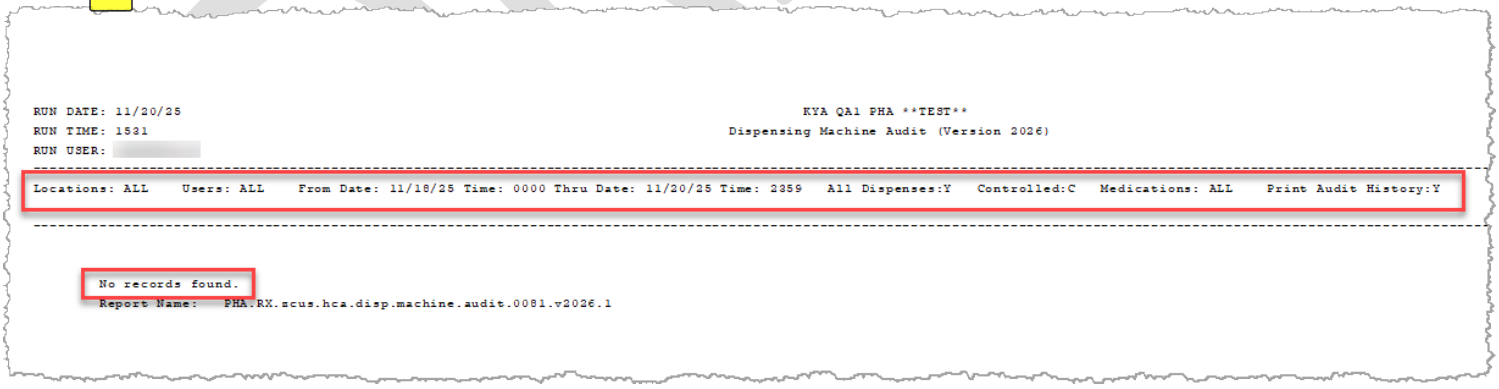
This report serves as a medication safety tool, lost charge reconciliation tool, and a medication diversion deterrent.

Workflow Examples:

The output for when the report returns no records has been updated to include run information and to better align with the report output when records are found.

- If the report is run with valid dates and times (i.e., the run parameters are within the NMI purge parameter window), but there are no dispense/administration events that match the run parameters provided, the output will show “No records found” but will also display a header that shows the Run Parameters used, as well as the Run Date, Run Time, and Run User.

Screen sample -No records found.



```
RUN DATE: 11/20/25                                   KYA QA1 PHA **TEST**
RUN TIME: 1531                                  Dispensing Machine Audit (Version 2026)
RUN USER:
-------------------------------------------------------------------------------------------------------------------------------
Locations: ALL    Users: ALL    From Date: 11/18/25 Time: 0000 Thru Date: 11/20/25 Time: 2359   All Dispenses:Y   Controlled:C   Medications: ALL    Print Audit History:Y
-------------------------------------------------------------------------------------------------------------------------------

     No records found.
     Report Name:    PHA.RX.scus.hca.disp.machine.audit.0081.v2026.1
```

- If the report is run with any date parameter outside of the NMI purge parameter window, and therefore the HL7 messages have already been purged from MEDITECH, the output will show “Date Range entered is beyond first available Dispensing Machine dispense date: mm/dd/yy”. The report will also display a header that shows the Run Parameters used, as well as the Run Date, Run Time, and Run User.

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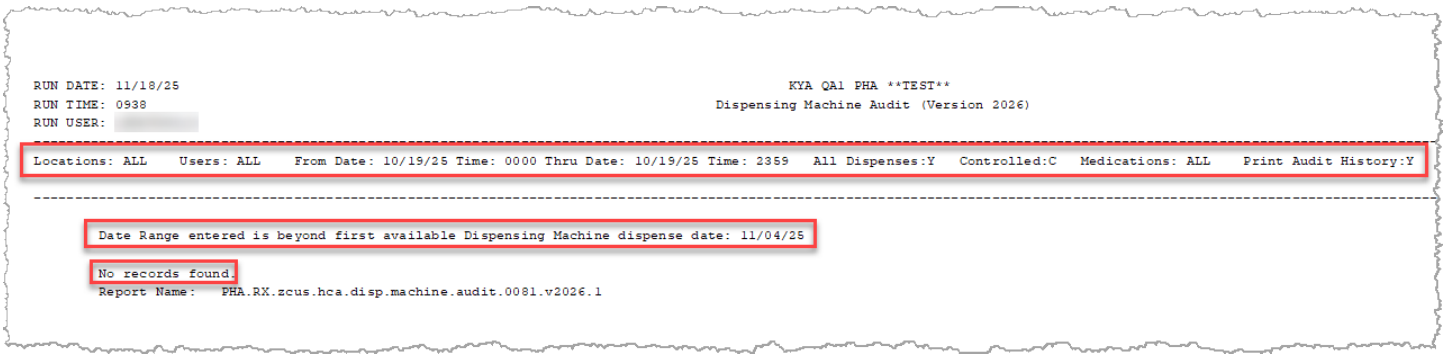
Screen Sample – Date Range entered is beyond first available Dispensing Machine dispense date



RUN DATE: 11/18/25
RUN TIME: 0938
RUN USER:

KYA QA1 PHA **TEST**
Dispensing Machine Audit (Version 2026)

Locations: ALL Users: ALL From Date: 10/19/25 Time: 0000 Thru Date: 10/19/25 Time: 2359 All Dispenses:Y Controlled:C Medications: ALL Print Audit History:Y

Date Range entered is beyond first available Dispensing Machine dispense date: 11/04/25

No records found.
Report Name: PHA.RX.zcus.hca.disp.machine.audit.0081.v2026.1

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Cervidil Screen and Rule Update

MEDITECH PHA 5.6.7

EHR Update 2026.1

Cervidil Screen and Rule Update

HCA Healthcare has developed screens and rules to assist in ordering efforts of the cervical ripening agent Cervidil (generic name dinoprostone).

A POM-facing rule will require providers to select criteria for use of Cervidil and to attest that a checklist of items have been documented in the chart to support this selection.

During order verification, the PHA-facing rule will display the criteria selected, the alerts shown to the provider, and the provider's responses to any queries.

During pharmacy order entry, the PHA-facing rule will require the pharmacist to select criteria for use. The provider attestation will NOT be captured during PHA order entry.

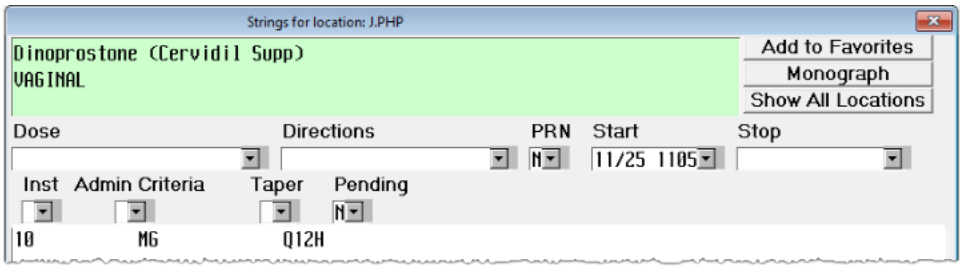
This project is current for MEDITECH 5.6.7 or later release.

Workflow Examples

Provider Workflow

The provider will select a medication order string from the type-ahead lookup:

Screen Sample



After a string is selected, the rule will display the POM screen, and a criteria selection will be required.

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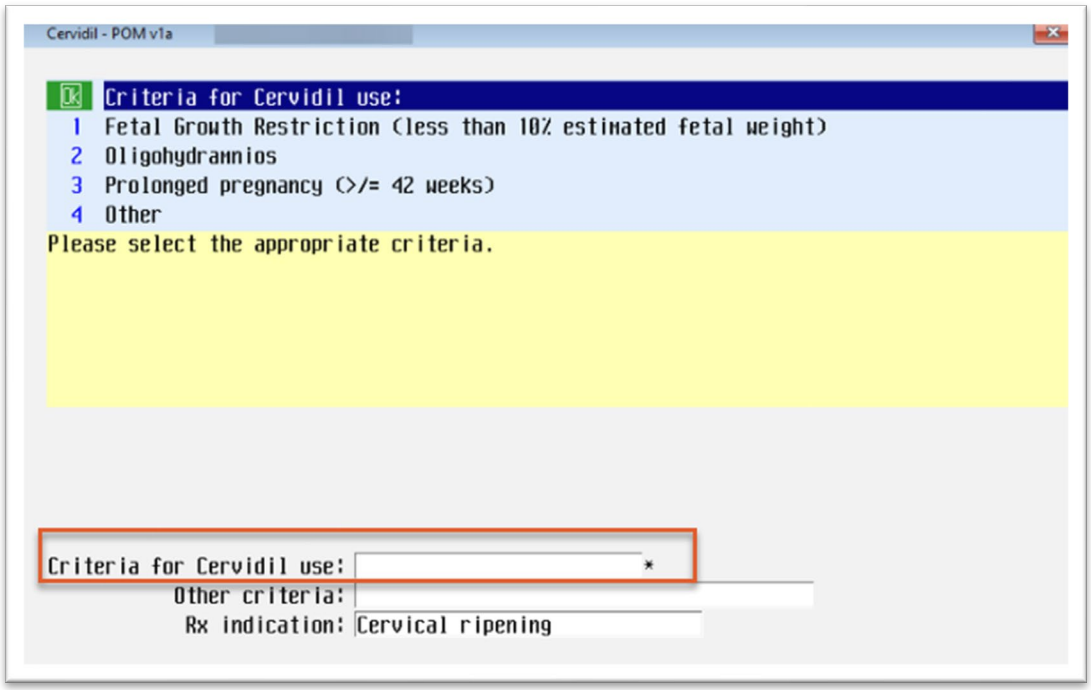
Screen Sample- hcarx.CERVPv1a Page 1



NOTE: The “Rx indication:” query will auto-populate with “Cervical ripening” and will not be accessible or editable.

Criteria Selection (Non-Other)

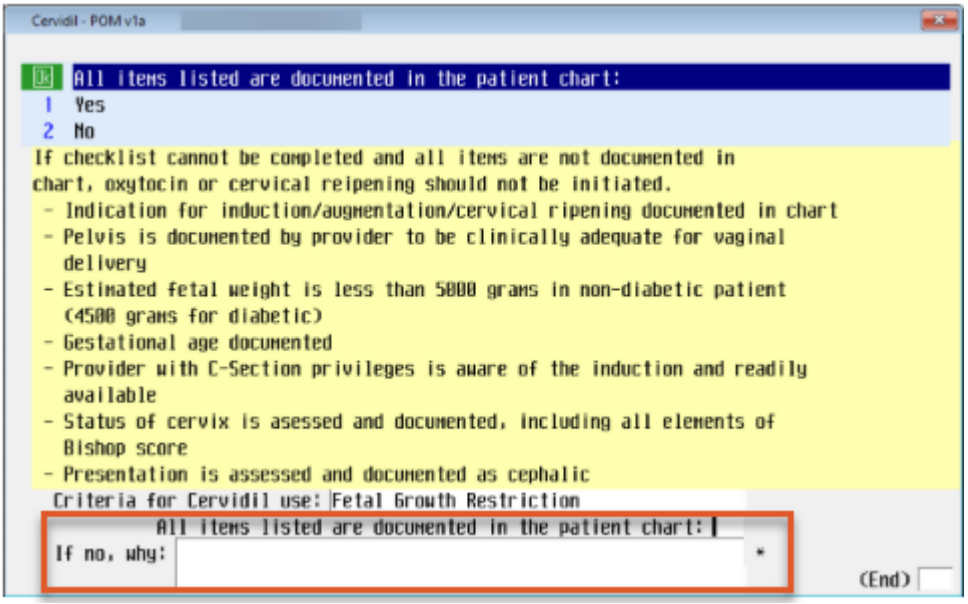
Once the user selects a criterion (from either the Point-n-Click screen or <F9> lookup), they will be presented with page 2 of the POM screen.

On page 2, the checklist attestation (“All items listed…” query) is required.

Answering query with Yes will complete the screen.

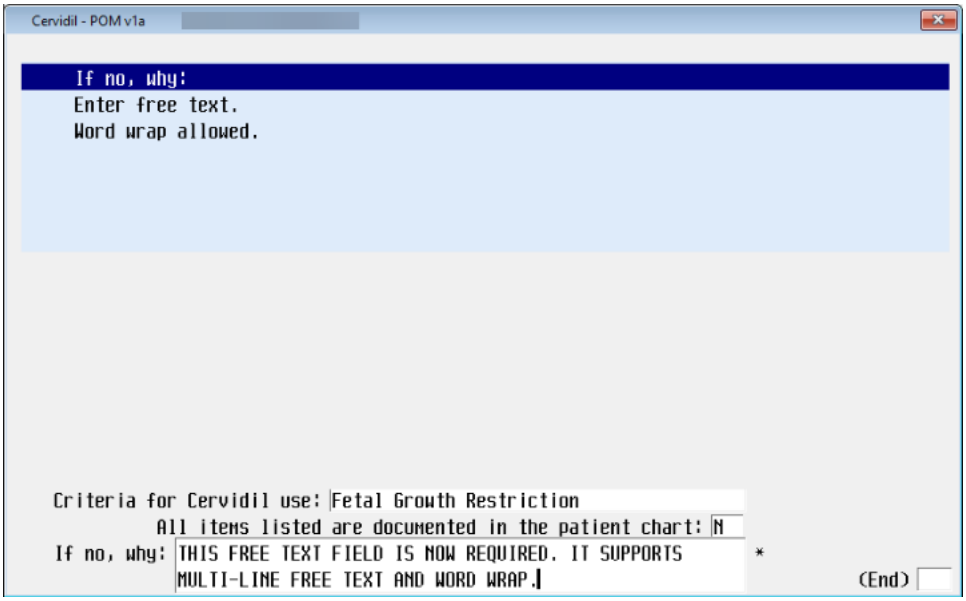
Answering this query with No will require a free-text entry in the “If no, why:” query.

Screen Sample – hcarx.CERVPv1a Page 2



Once all required queries are completed, the provider may submit the order.

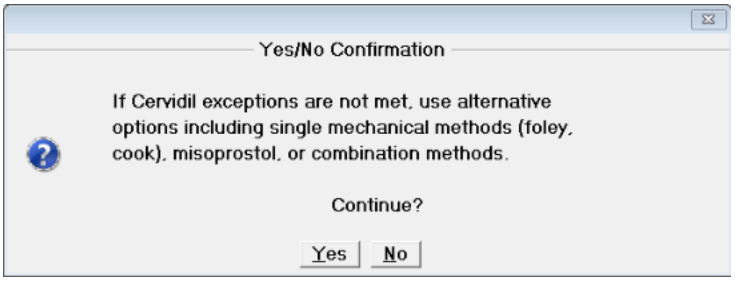
Screen Sample – hcarx.CERVPv1a Page 2 Free Text



Criteria Selection ("Other")

If Other is selected for the criteria, the following Yes/No confirmation will display.

Screen Sample- Yes/No Confirmation

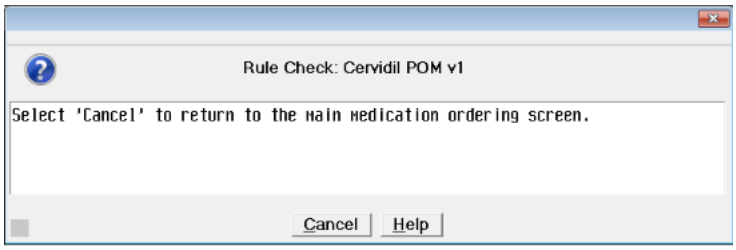


No will display the following Message, then the Rule Check screen and allow the user to cancel the order.

Screen Sample – Continue to Cancel Message

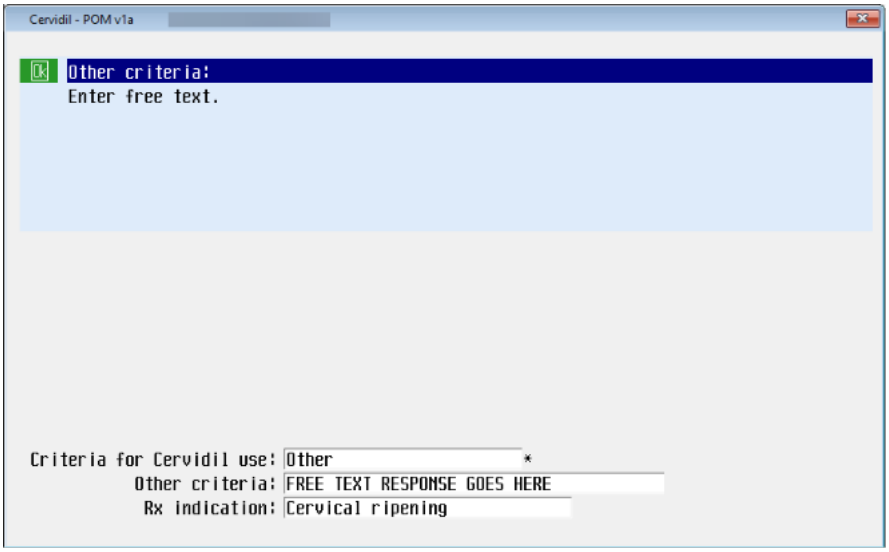
NOTE: This is a system message due to cancelling the order, which results in a two-page screen and is not part of the project programming. Currently this is unavoidable.

Screen Sample – Cancel Message



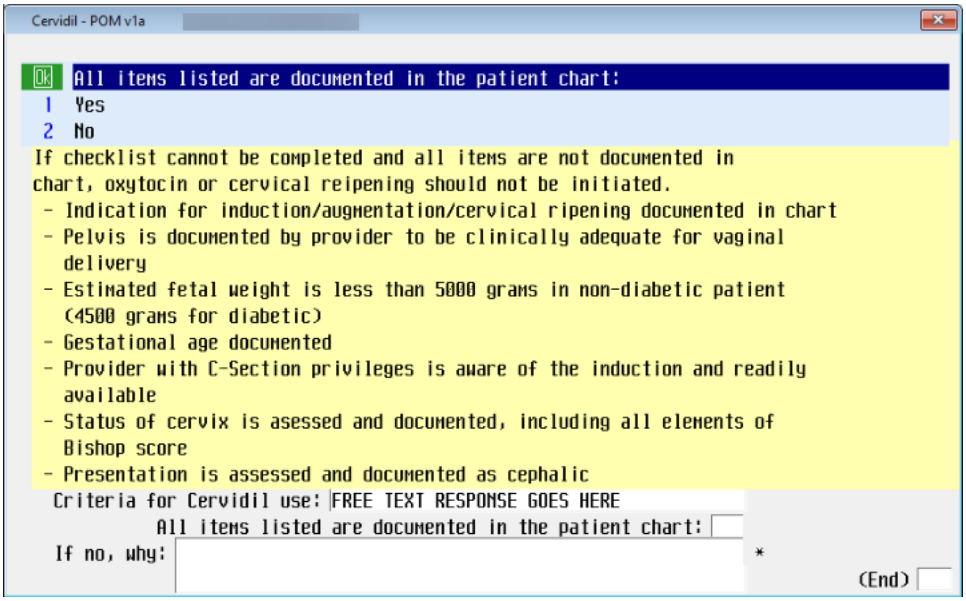
***Yes** will allow the user to continue placing the order and the "Other criteria:" query will be required.*

Screen Sample – "Other criteria:" Query Is Now Required

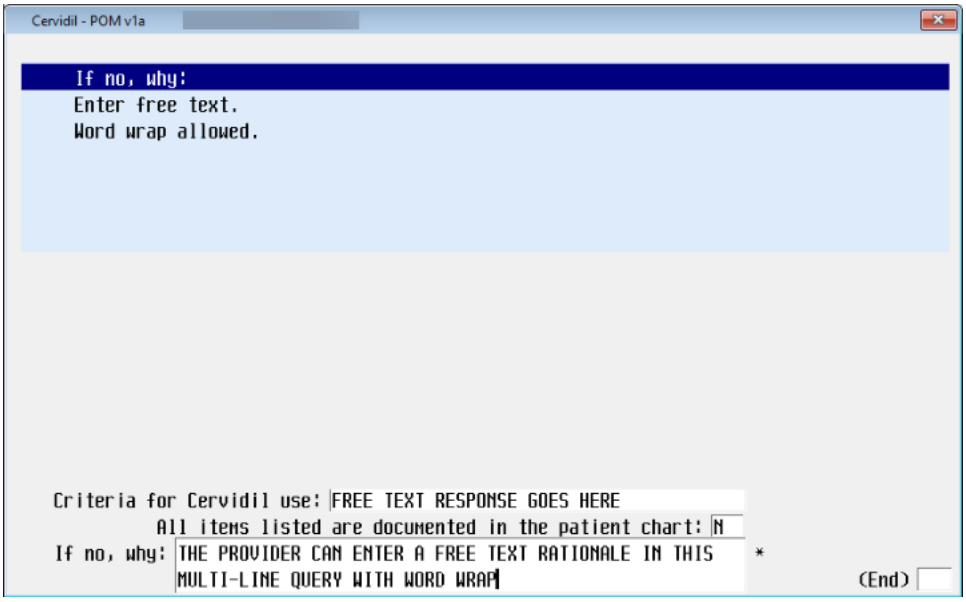


On page 2, the checklist attestation (“All items listed…” query) is still required. Answering this query with **Yes** will complete the screen. Answering this query with **No** will require a free-text entry in the “If no, why:” query.

Screen Sample



Screen Sample – Required Explanation Query



After completing all required queries, the provider will be able to submit the order.

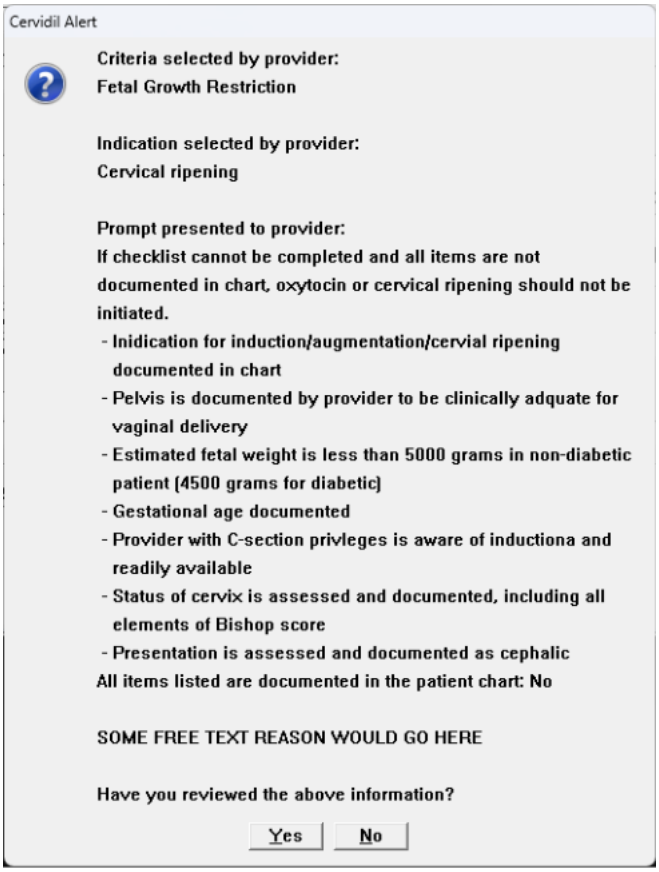
Pharmacy Workflow

PHA Order Verification

DOSE

As the pharmacist processes through verification, a Y/N alert will fire for the pharmacist at the DOSE field. The alert details the criteria selected by the ordering provider, as well as the prompts that the provider received, and any other free-text information entered by the provider.

Screen Sample – PHA DOSE Alert



Yes is required for the pharmacist to proceed with processing the order, including **PEND**ing the order. **No** will allow them to back out of the order.

The criteria selected, query responses, and alerts that fire for the pharmacist during Order Verification or Entry, along with the associated answers, will be logged in the audit trail for the medication order, and viewable in the Print Order.

Screen Sample – Query Responses in the Audit Trail

```
   Criteria for Cervidil use: Fetal Growth Restriction
             Other criteria:
              Rx indication: Cervical ripening
            All items listed are documented in the patient chart: N
   If no, why: SOME FREE TEXT REASON WOULD GO HERE
Criteria for Cervidil use:: Fetal Growth Restriction
```

Screen Sample – Alert Text in the Audit Trail

```
↓↑
12/10/25 1219 - Rules At Edit                          by [redacted]
   CERVSUPP:
   CERVSUPP:   Criteria selected by provider:
   CERVSUPP:   Fetal Growth Restriction
   CERVSUPP:
   CERVSUPP:   Indication selected by provider:
   CERVSUPP:   Cervical ripening
   CERVSUPP:
   CERVSUPP:   Prompt presented to provider:
   CERVSUPP:   If checklist cannot be completed and all items are not
   CERVSUPP:   documented in chart, oxytocin or cervical ripening should not
               be
   CERVSUPP:   initiated.
   CERVSUPP:    - Inidication for induction/augmentation/cervial ripening
   CERVSUPP:      documented in chart
   CERVSUPP:    - Pelvis is documented by provider to be clinically adquate
               for
   CERVSUPP:      vaginal delivery
   CERVSUPP:    - Estimated fetal weight is less than 5000 grams in
               non-diabetic
   CERVSUPP:      patient (4500 grams for diabetic)
   CERVSUPP:    - Gestational age documented
   CERVSUPP:    - Provider with C-section privleges is aware of inductiona and
   CERVSUPP:      readily available
   CERVSUPP:    - Status of cervix is assessed and documented, including all
```

```
   CERVSUPP:      elements of Bishop score
   CERVSUPP:    - Presentation is assessed and documented as cephalic
   CERVSUPP:   All items listed are documented in the patient chart: No
   CERVSUPP:
   CERVSUPP:   SOME FREE TEXT REASON WOULD GO HERE
   CERVSUPP:
   CERVSUPP:   Have you reviewed the above information?
   CERVSUPP:   User: [redacted]
   CERVSUPP:   Yes
```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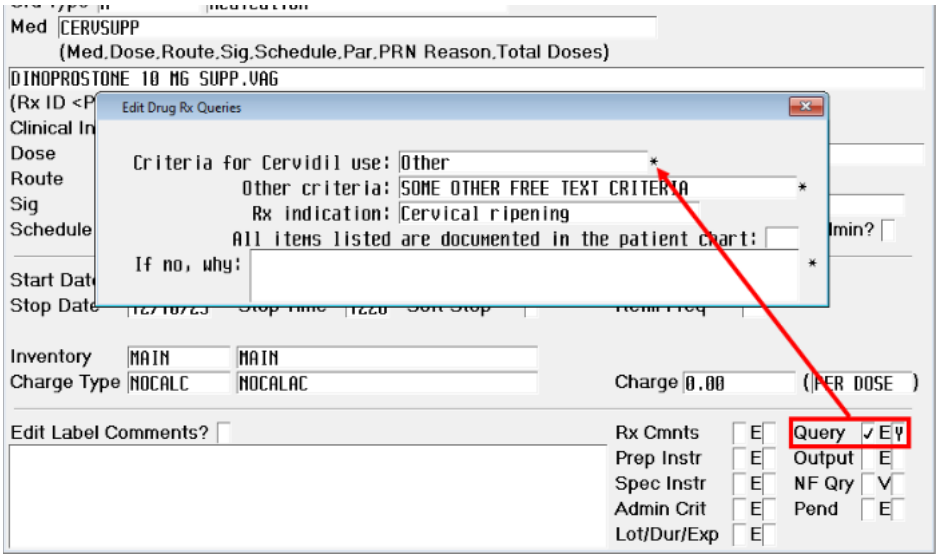
PHA Order Entry

Order Entry CDS

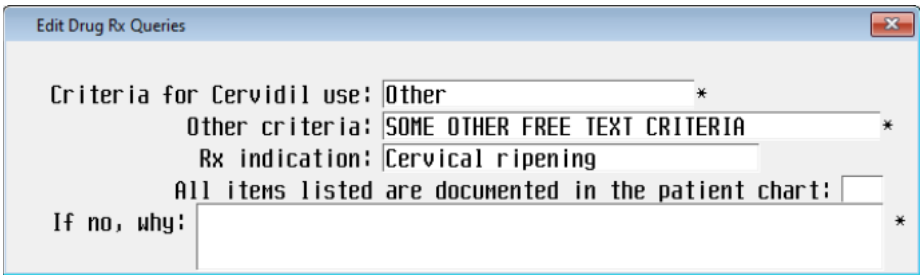
The criteria fields within the Order Entry CDS will be required prior to filing the new medication order as verified.

Screen Sample – PHA CDS Attached at Query Field



The pharmacist can select a criterion via <**F9**> lookup. Like the provider workflow, if “Other” is selected, the “Other criteria:” query will be required.

Screen Sample



NOTE: when entering a new order from PHA, the provider attestation queries will NOT be required, but will still be accessible to the pharmacist.

The criterion selected, query responses, and alerts that fire for the pharmacist during Order Verification or Entry, along with the associated answers, will be logged in the audit trail for the medication order, and viewable in the Print Order.

Screen Sample – Query Responses in the Audit Trail

```
   Criteria for Cervidil use: Fetal Growth Restriction
              Other criteria:
               Rx indication: Cervical ripening
             All items listed are documented in the patient chart: N
   If no, why: SOME FREE TEXT REASON WOULD GO HERE
Criteria for Cervidil use:: Fetal Growth Restriction
```

Screen Sample – Alert Text in the Audit Trail

```
↓↑
12/10/25 1219 - Rules At Edit                          by [redacted]
   CERVSUPP:
   CERVSUPP:   Criteria selected by provider:
   CERVSUPP:   Fetal Growth Restriction
   CERVSUPP:
   CERVSUPP:   Indication selected by provider:
   CERVSUPP:   Cervical ripening
   CERVSUPP:
   CERVSUPP:   Prompt presented to provider:
   CERVSUPP:   If checklist cannot be completed and all items are not
   CERVSUPP:   documented in chart, oxytocin or cervical ripening should not
               be
   CERVSUPP:   initiated.
   CERVSUPP:    - Inidication for induction/augmentation/cervial ripening
   CERVSUPP:      documented in chart
   CERVSUPP:    - Pelvis is documented by provider to be clinically adquate
               for
   CERVSUPP:      vaginal delivery
   CERVSUPP:    - Estimated fetal weight is less than 5000 grams in
               non-diabetic
   CERVSUPP:      patient (4500 grams for diabetic)
   CERVSUPP:    - Gestational age documented
   CERVSUPP:    - Provider with C-section privleges is aware of inductiona and
   CERVSUPP:      readily available
   CERVSUPP:    - Status of cervix is assessed and documented, including all
```

```
   CERVSUPP:      elements of Bishop score
   CERVSUPP:    - Presentation is assessed and documented as cephalic
   CERVSUPP:   All items listed are documented in the patient chart: No
   CERVSUPP:
   CERVSUPP:   SOME FREE TEXT REASON WOULD GO HERE
   CERVSUPP:
   CERVSUPP:   Have you reviewed the above information?
   CERVSUPP:   User: [redacted]
   CERVSUPP:   Yes
```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Balfaxar Screen Update for Supplemental Dose

MEDITECH PHA 5.6.7

EHR Update 2026.1

Balfaxar Screen Update for Supplemental Dose

The Supplemental Dosing Screen has been updated. Prior to the update, an ordering provider could bypass the **500 units** or **1000 units** Y/N queries and click into the **Approx. Dose**: field, entering any number.

The Screens were updated to require a Y in either the **500 units** or **1000 units** queries. In addition, the **Approx. Dose**: and **Number of vials (Kits):** fields were made inaccessible to prevent a free-texted number.

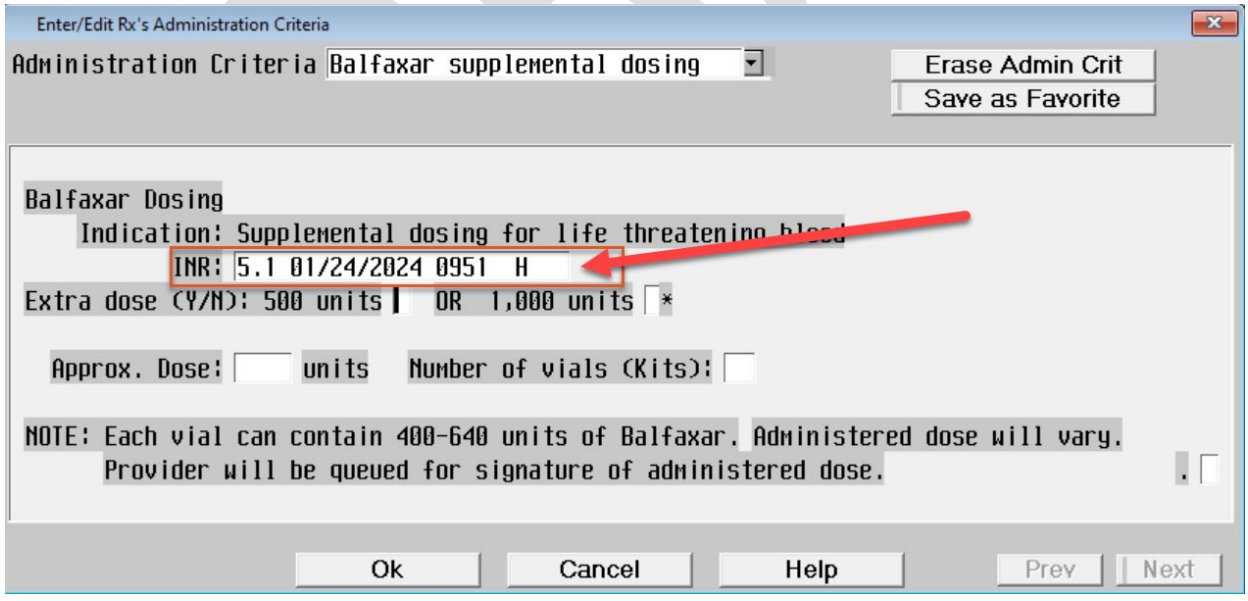
Workflow Examples

Provider Workflow Scenarios

Supplemental Dose

The patient's most recent INR value from their current stay will populate the **INR:** query along with the date and time it was resulted.

Screen Sample -Admin Criteria



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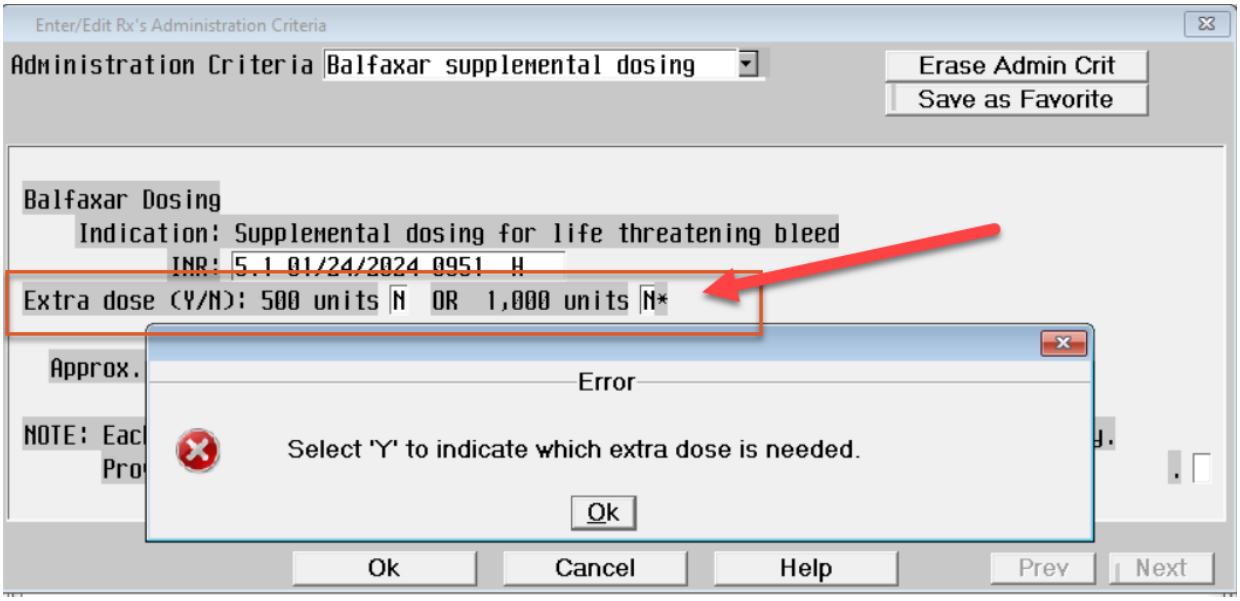
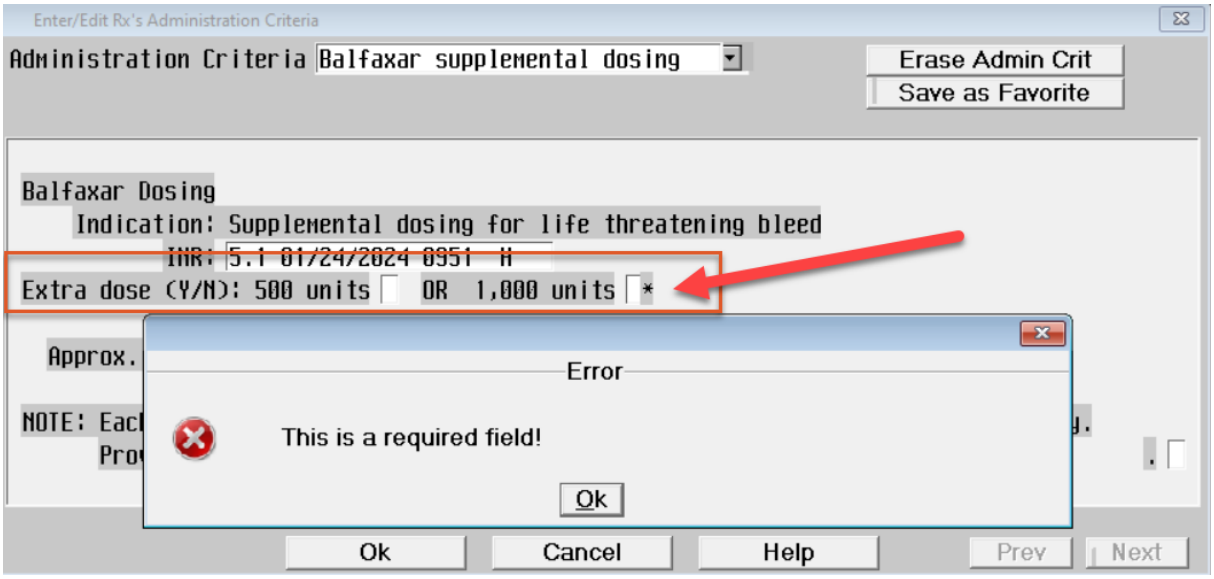
The provider is required to put a Y next to either the **500 units** or **1,000 units** query. If they attempt to leave both blank or answered with N, the provider will receive an Error:

Screen Sample: Error if 500 units and 1,000 units are answered N



Screen Sample: Error if attempted to leave both BLANK

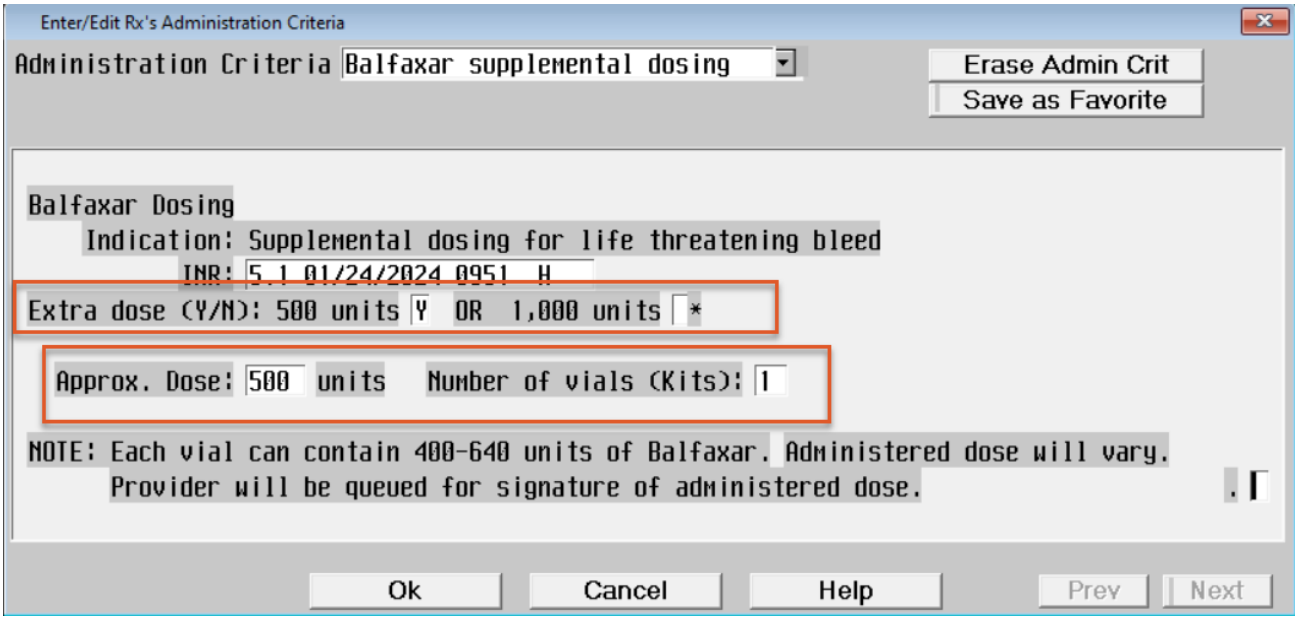


Entering a **Y** next to the **500 units** query will populate the **Approx. Dose:** query with **500.**

Entering a **N** or Pressing <**Enter**> in the **500 units** query will move the cursor to the **1,000** units query. Entering a **Y** here will populate the **Approx. Dose:** query with **1000**.

When the cursor lands on the **Number of vials (Kits):** query, it will autopopulate with **1** or **2** for **Approx. Dose** of **500** or **1000** respectively. The Admin Criteria is then ready to file.

Screen Sample:



As the **Approx. Dose:** query and the **Number of vials (Kits):** query auto-populate based on previous query answers, they are inaccessible for editing.

Adult Vasopressin Admin Criteria Updates

MEDITECH PHA 5.6.7

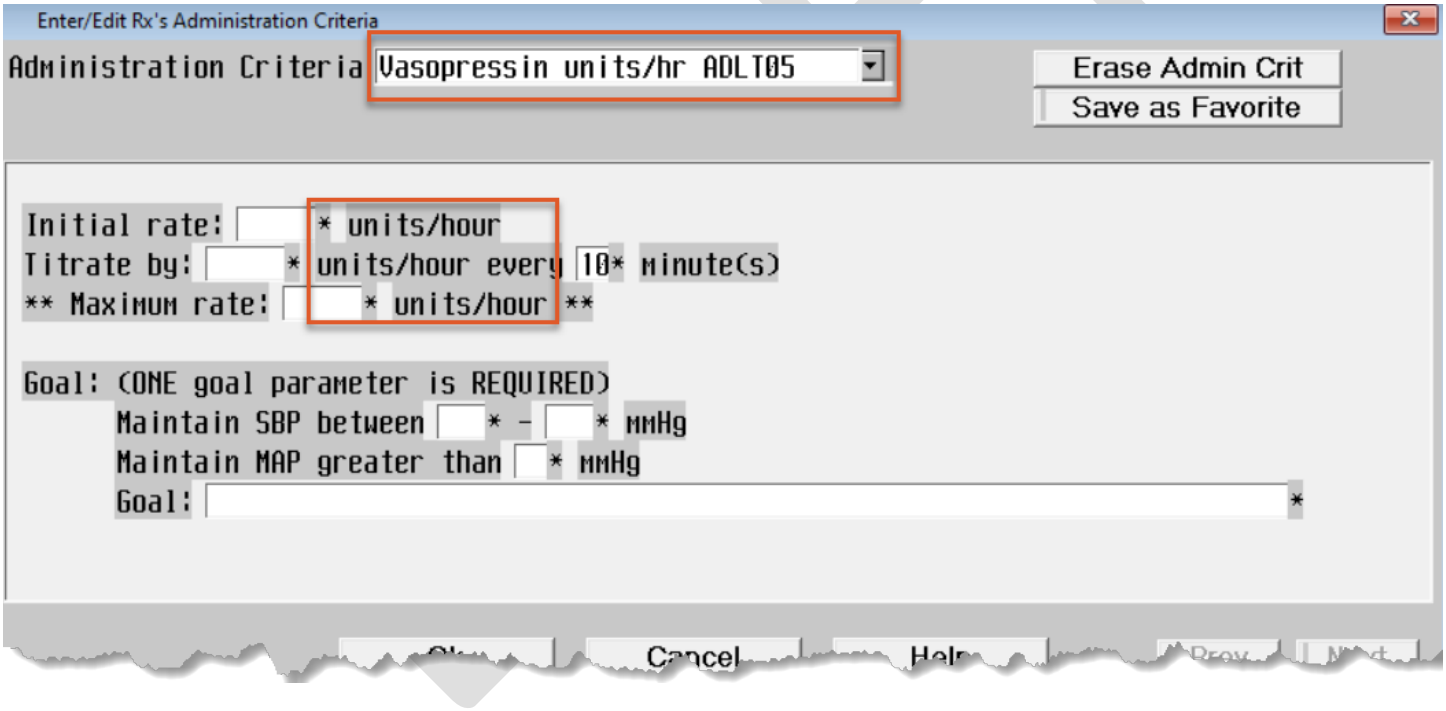
EHR Update 2026.1

Adult Vasopressin Admin Criteria Updates

Currently, there are two Admin Criteria recommendations for vasopressin with specific indications: GI Bleed and Shock. To align with MEDITECH Expanse standards, vasopressin will have two additional screens for non-specific indications, featuring titratable rate options measured in units/hr and units/min. These new screens will increase the options of vasopressin orders for providers and pharmacists, as well as align with the Expanse Cloud workflow.

Screen Updates

Screen Shot – Units/Hour



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Screen Shot – Units/Minute