

EBCD MEDITECH Content Updates – 2026.1

SUR Module

Overview

This Pilot document is a high-level overview for end user education purposes about significant changes within the OR Module routines. Additional enhancements may be seen in the [EBCD Release Education Section](#) of the [EBCD Atlas Connect page](#).






Inpatient Rehab Facility Enhancements education will be posted separately.

How to use this guide

The enhancements are listed by intervention. They include which module(s) are affected along with the impact associated with the intervention.

The enhancements are listed in alphabetical order and provide a rationale behind the change and screenshot example(s). This document focuses on end user enhancements designated as high and medium impact.

Impact Legend:

Safety/Regulatory 	Clinical Initiative 	Women's and Children's 
Reimbursement/Billing 	Enhancements/Wins 	

Be aware the enhancements may not be in your test environment at the time this document is published. Your facility/IT Division support team will notify you when the updates will be available in your software.

Please read the MEDITECH selected prompts and follow the yellow information boxes onscreen as you become aware of changes in the documentation.

Click the topic name to be taken to the specific documentation within this update:

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Summary of Revisions

Date	Revision
11/28/2025	Initial
12/1/2025	Added PAS – High Altitude, FSER Transport Documentation
1/26/2026	Added MRI Implant Checklist to NUR/ANC
2/4/2026	Added Peds Bronchiolitis to NUR/EDM
3/24/2026	Updated Intake Supplement/Additive Documentation p.7
4/14/26	Removal of CM SDOH Order Alert

SUR Module

ADA update to Health History



Selected Language fields on the **Health History** Assessment have been updated to enhance identifying patients that need ADA resources as well as ensuring they are offered the correct accessibility services. Verbiage has been updated to align with current ADA recommendations.

Health History Assessment

Language services type:

1 Interpretation via phone Select mode(s) of services needed.

2 Interpretation via video

3 Onsite interpretation Document use of language services in Language Assistant.

4 Other

Preferred language: ENG ENGLISH

Accessibility needs: Blind/low vision

Language services: Patient/rep accepts

Language services type: Other

Additional language services detail:
Free Text *

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Language service type field responses have been updated. 'Other' has been added as an available response.

Note: If Other is selected, then *Additional language services detail* becomes a **required*** Free Text field in order to provide any additional details about language services needs or preferences.

Health History Assessment

Vocalization: [or free text]

1 Appropriate 7 None 13 Slurred

2 Aphasic expressive 8 Non-verbal 14 Speechless

3 Aphasic receptive 9 Phonation strong 15 Word salad

4 Cri du chat 10 Phonation weak

5 Incomprehensible sounds 11 Repetitive

6 Intubated 12 Shrill Cry

1 Blind/low vision:

2 Deaf/hard-of-hearing:

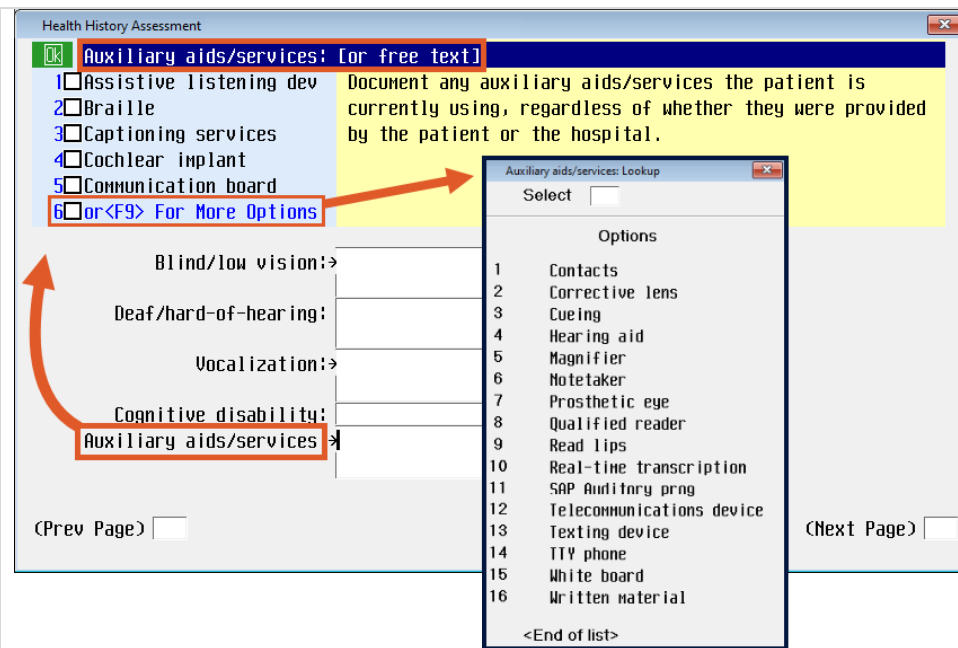
3 Vocalization:

4 Cognitive disability:
Auxiliary aids/services:

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The following verbiage has been updated per ADA recommendations:

- 1 - *Vision impairment* has been updated to **Blind/low vision**
- 2 - *Hearing impairment* has been updated to **Deaf/hard-of-hearing**
- 3 - Under *Vocalization*, the field response 'Mute' has been updated to **'Speechless'**
- 4 - *Cognitive impairment* has been updated to **Cognitive disability**



Auxiliary aids/services is a new multi-select field with the following responses:

- Assistive listening dev
- Braille
- Captioning services
- Cochlear implant
- Communication board
- Contacts
- Corrective lens
- Cueing
- Hearing aid
- Magnifier
- Notetaker
- Prosthetic eye
- Qualified reader
- Read lips
- Real-time transcription
- SAP Auditory programming
- Telecommunications device
- Texting device
- TTY phone
- White board
- Written Material
- Or 'Free-Text comment'

The **Yellow informational** box provides additional guidance:

Document any auxiliary aids/ services the patient is currently using regardless of whether they were provided by the patient or the hospital.

This update affects the following interventions:

Nursing	Emergency Department	Surgery
Admission/Shift Assessment +	Detailed Assessment	SURG: Assessment PAC +
Admission Health History +	Paramedic Intake	SURG: Admission Assessment +
BH: Level of Care Assessment +	Non-Urgent General Focus	SURG: Admission Assessment Int +
BH: Outpatient Initial Nurse Assessment+	Rapid Initial Assessment	SURG: Admission Health History +
BH: Psychosocial Assessment (PSA) +	First Point of Contact - Onc	SURG: Neurological Assessment Pre +
BH: Health History Assessment +	Receipt MOA 1st POC	SURG: Neurological Assessment Int +
Neuro Checks +		SURG: Neurological Assessment PAC +
Neonatal Intervention +		

External Ventricular Device Field Update



Within the ICP ventriculostomy screen, two fields have been updated to increase the character limit to 10 for EVD settings. This will allow for more accurate documentation of settings.

In the **ICP/Ventriculostomy** drain documentation, the following fields have been updated to allow up to a ten character response:

- Ventricular device set at mmHg
- Ventricular device set at cmH2O

This update affects the following interventions:

Nursing	Emergency Department	Surgery
Lines/Drains/Airways	ICP/Ventriculostomy	SURG: Lines, Drains, Airways Pre-op
Critical Care Flow Record	Newborn Stabilization	SURG: Lines, Drains, Airways Intra-op
		SURG: Lines, Drains, Airways PACU

Intake Supplement/Additive Documentation



There is currently no way to document the specific nutritional supplement or additive within intake. The nurse can capture the amount of an oral nutritional supplement or "other" intake but there is no free text box or additional fields to identify what was administered or provided. The **Intake** documentation fields have been updated to allow for additional supplements given.

This update has been added to the following **Intake** selections:

- Infant Nutrition
- Nutrition
- Meals

Note: Users will have the ability to document up to 5 supplements given at one time.

MEALS

If 'Yes' is answered for *Nutritional supplement given*, additional supplement documentation becomes available.

Note: If an *mL amount* is entered for any supplement entry, the corresponding supplement number field becomes a **required*** 'free-text' comment field.

NUTRITION

If 'Yes' is answered for *Tube feeding supplement given*, additional supplement documentation becomes available.

Note: If an *mL amount* is entered for any supplement entry, the corresponding supplement number field becomes a **required*** 'free-text' comment field.

INFANT NUTRITION

After selecting 'Tube' for the field *Feeding method*, the **Tube** feeding documentation becomes available.

If 'Yes' is answered for *Tube feeding supplement given*, additional supplement documentation becomes available.

Note: If an *mL amount* is entered for any supplement entry, the corresponding supplement number field becomes a **required*** 'free-text' comment field.

This update affects the following interventions:

Nursing	Emergency Department	Surgery
Critical Care Flow Record +	Intake & Output	SURG: Intake and Output Intra-Op +
Intake and Output +	Disposition-DC/TX/ADM/LPT	SURG: Intake and Output PACU +
	Newborn Stabilization	SURG: Intake and Output Pre-Op +

OR Site Prep Solution Update



Iodine povacrylex alcohol (Duraprep) is being replaced with povidone-iodine plus isopropyl alcohol (PurPrep). This update will remove the *iodine povacrylex alcohol* response and add ***povidone-iodine plus isopropyl alcohol*** to possible responses.

The following response fields have been updated with the 'Povidone-iodine plus isopropyl alcohol' prep solution also known as *PurPrep*:

- 1 - Home prep solution:
- 2 - Pre-op prep solution:
- 3 - Site prep solution fields*

- *Site prep solution* has multiple numbered instances. This update has been applied to all fields.

Note: In addition to this update, "*Nonantibacterial soap*" has been update to **Nonantimicrobial soap (Option #7 in images)**.

This update affects the following interventions:

Nursing	Emergency	Surgery
Pre-Procedure Checklist	Pre-Op Pre-Proc Checklist	SURG: Prep Screen PACU
OB: OR Record		SURG: Pre-Procedure Checklist, Prep
		SURG: Prep Screen Pre-op
		SURG: Prep Screen Intra-op

Subcutaneous Emphysema (Crepitus) Update



There is no designated area to document the presence of subcutaneous emphysema (Crepitus). Updates have been made to the **Integumentary Assessments** as a *Skin alteration type* as it can be located in the face, neck, periorbital area, abdomen and even extremities. Updates have also been made to the Chest Tube documentation.

Skin Alteration

Ok Skin alteration description:

1 Abrasion	7 Contusion	13 Mesh
2 Abscess	8 Crepitus	14 Pressure injury
3 Amputation	9 Graft	15 Procedural site
4 Avulsion	10 Incision	16 Puncture
5 Blister	11 Laceration	17 Rash/hives
6 Burn	12 Maceration	18 or<F9> For More Options

Skin alteration description: Crepitus *

Skin alteration other: _____

Location (A/P): _____

Location (Body): _____ *

Instance list status: Active *

Pressure injury present on admission:

Pressure injury staging: _____

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Skin Alteration

In the *Skin alteration* documentation instance, the response 'Crepitus' has been added as an option for *Skin alteration description*.

Chest Tube

Ok Chest tube site condition:

Crepitus Vigorous air leak

Drainage at insertion

Dressing dry/intact

Intermittent air leak

Sutured

Unclamped/no air leak

Chest tube type: Pleural *

Chest tube location: Right *

Chest tube number: Tube 1 *

Instance list status: Active *

Chest tube status: Monitor *

Chest tube occluded: _____

Chest tube site condition: Crepitus

Site drainage description: _____

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Drains: Chest Tube

In the *Chest Tube Drain* documentation instance, the response 'Crepitus' has been added as an option for *Chest tube site condition*.

This update affects the following interventions:

Nursing	Emergency Department	Surgery
Lines/Drains/Airways	Chest Tube Treatment	SURG: Lines, Drains, Airways Pre-op
Critical Care Flow Record	Newborn Stabilization	SURG: Lines, Drains, Airways Intra-op
Skin Alteration Instance	Skin Alteration Instance	SURG: Lines, Drains, Airways PACU
		Skin Alteration Instance

Additional OB Response for MRCN



Manage Refer Contact Notify does not have appropriate OB responses needed. Free texting responses does not allow for auditing and safe oxytocin administration.

Manage Refer Contact Notify

Reason notified: [or free text]

<input type="checkbox"/> 1 Abnormal vital signs	<input type="checkbox"/> 8 Order clarification	<input type="checkbox"/> 15 Sepsis notification
<input type="checkbox"/> 2 Change in pt condition	<input type="checkbox"/> 9 PPH risk	<input type="checkbox"/> 16 Stroke alert
<input type="checkbox"/> 3 Collateral information	<input type="checkbox"/> 10 Pain management	<input type="checkbox"/> 17 Suicide risk
<input type="checkbox"/> 4 Continuity of care	<input type="checkbox"/> 11 Patient concern	<input type="checkbox"/> 18 Telemetry interruption
<input type="checkbox"/> 5 Critical value	<input type="checkbox"/> 12 Patient medication	<input type="checkbox"/> 19 Telemetry restart
<input type="checkbox"/> 6 Diagnostic test/lab	<input type="checkbox"/> 13 PEDS concerning event	
<input type="checkbox"/> 7 Family meeting	<input type="checkbox"/> 14 Rhythm chg/arrhythmia	

Action: >Notified

Reason notified: *

Entity attempted/notified: _____

Provider attempted/notified: _____

Sepsis notification:

PEDS concerning event:

Family member notified: _____

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Updates have been made to the Manage/Refer/Contact/Notify intervention.

After selecting 'Notified' in the Action field, Reason notified becomes available and 'PPH Risk' has been added to the list of field responses.

This update affects the following interventions:

Nursing	Surgery
Manage/Refer/Contact/ Notify +	SURG: Mng/Refer/Contact/Notify Intraop +
	SURG: Mng/Refer/Contact/Notify Preop +
	SURG: Mng/Refer/Contact/Notify PACU +

Stroke Mechanical Thrombectomy Documentation



To gain insight into our advanced stroke centers, necessary documentation has been made **required*** to track/trend the performance and outcomes of our advanced stroke center patients.

Mechanical Thrombectomy

Angio-suite arrival date: This is the date of the patient's arrival in the neuro-interventional angio-suite.

Calendar Del
Yesterday
Today
Tomorrow

Angio-suite arrival date * ←
Angio-suite arrival time * ←
Vascular access puncture time * ←

Retrieval device 1 type:

Retrieval device 1 deployment time:

Retrieval device 1 vessel:

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The **SURG: Mech Thrombectomy Intra Op** has been updated.

The following fields are now **Required***:

- Angio-suite arrival date
- Angio-suite arrival time
- Vascular access Puncture time

Mechanical Thrombectomy

Recanalization time:

7 8 9 Del
4 5 6
1 2 3
0 Now

Time of first pass of retrieval device:

Recanalization time * ←

Pre-reperfusion mTICI time:
Pre-reperfusion mTICI score:

Post-reperfusion mTICI time * ←
Post-reperfusion mTICI score * ←

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On page 2, the following fields are now **required***:

- Recanalization Time
- Post-reperfusion mTICI time
- Post-reperfusion mTICI Score

This update affects the following interventions:

Surgery
SURG: Mech Thrombectomy Int