EPIC NON-PROVIDER ENHANCEMENT REQUEST WEEKLY UPDATE

July 25, 2023 Meeting

Ambulatory -
Approved for Production: **Move on 08/01/2023**

Item Name	Description	ER #
None		

Acute -
Approved for Production: **Move on 08/01/2023**

Item Name	Description	ER #
New Version of Interoperable Drug Library for Baxter Pumps	Version 14 of the Interoperable Drug Library used by Epic-Baxter integration functionality will be published.	INC1196006
C diff BPAs	Reactivate C diff Best Practice Advisories (BPAs).	INC1211199
Nursing: Remove COVID-19 Questions from Travel Screening	This change removes the COVID-19 questions from the Travel Screening.	Informatics Request
Nursing: Remove COVID-19 and Mpox Sections from Admission Navigator	This change removes the COVID-19 Vaccinations History and Mpox sections from the Admission navigator.	Informatics Request
Nursing: Move Covid-19 history question to 'Vaccination section in Admission Navigator and Remove COVID-19 Vaccination History from Req Doc	This change moved 'Covid –19 Vaccine history question to 'Vaccinations' section in Admission Navigator and removes the COVID-19 Vaccination History rule from Admission Req Doc.	Informatics Request

Other (Ancillary, Access/Revenue, Digital, Data & Analytics) - Approved for Production: **Move on 08/01/2023**

Item Name	Description	ER #
None		

ACUTE

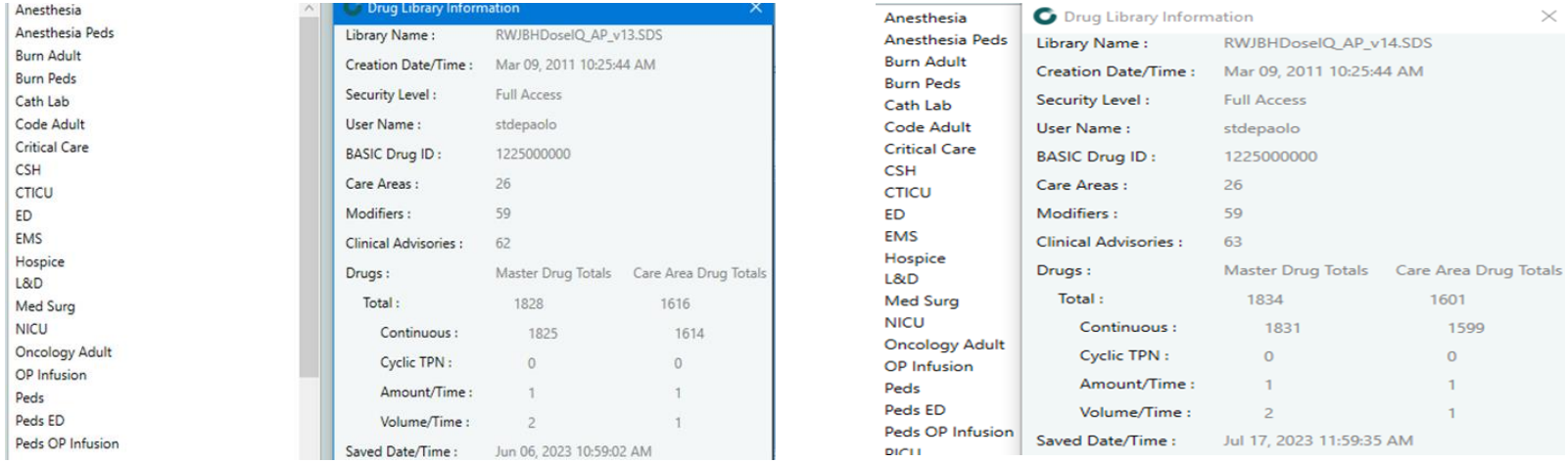
New Version of Interoperable Drug Library for Baxter Pumps

Application: Willow IP
Owner: Steven DePaolo

Version 14 of the interoperable drug library used by Baxter pumps for the Epic-Baxter integration functionality is ready to be published. Medication records in Epic affected by this update have been tested to ensure a smooth transition to the new version. These drug library changes will be published to Production after a week from the day of approval.

☐The drug library changes in this version can be categorized below:

- ☐Modified “Ciprofloxacin” starting rate & upper soft limit from 133 mL/hr to 200 mL/hr for 400 mg/200 mL drug entry
- ☐Created “Andexanet-Load” fixed concentrations (800 mg/80 mL) & (400 mg/40 mL) with dose mode “mL/hr”
- ☐Added “Andexxa 1 Bag” drug entry to Cath Lab Care Area
- ☐Added “Acetaminophen” variable concentration “mg/mL” with dose mode “mL/hr”
- ☐ Added “Fosaprepitant” & “IV Fluids-20 mEq KCl” drug entries to Peds, Peds ED, Peds OP Infusion & PICU Care Areas
- ☐Created “TPN-Neonatal” drug entry with “mL/hr” dose mode for NICU Care Area
- ☐Created “IVIG (mL/kg/hr)” drug entry with “mL/kg/hr dose” for Pediatric Care Areas
- ☐Added several existing drug entries to Pediatric Care Areas to improve Pump Integration Compliance



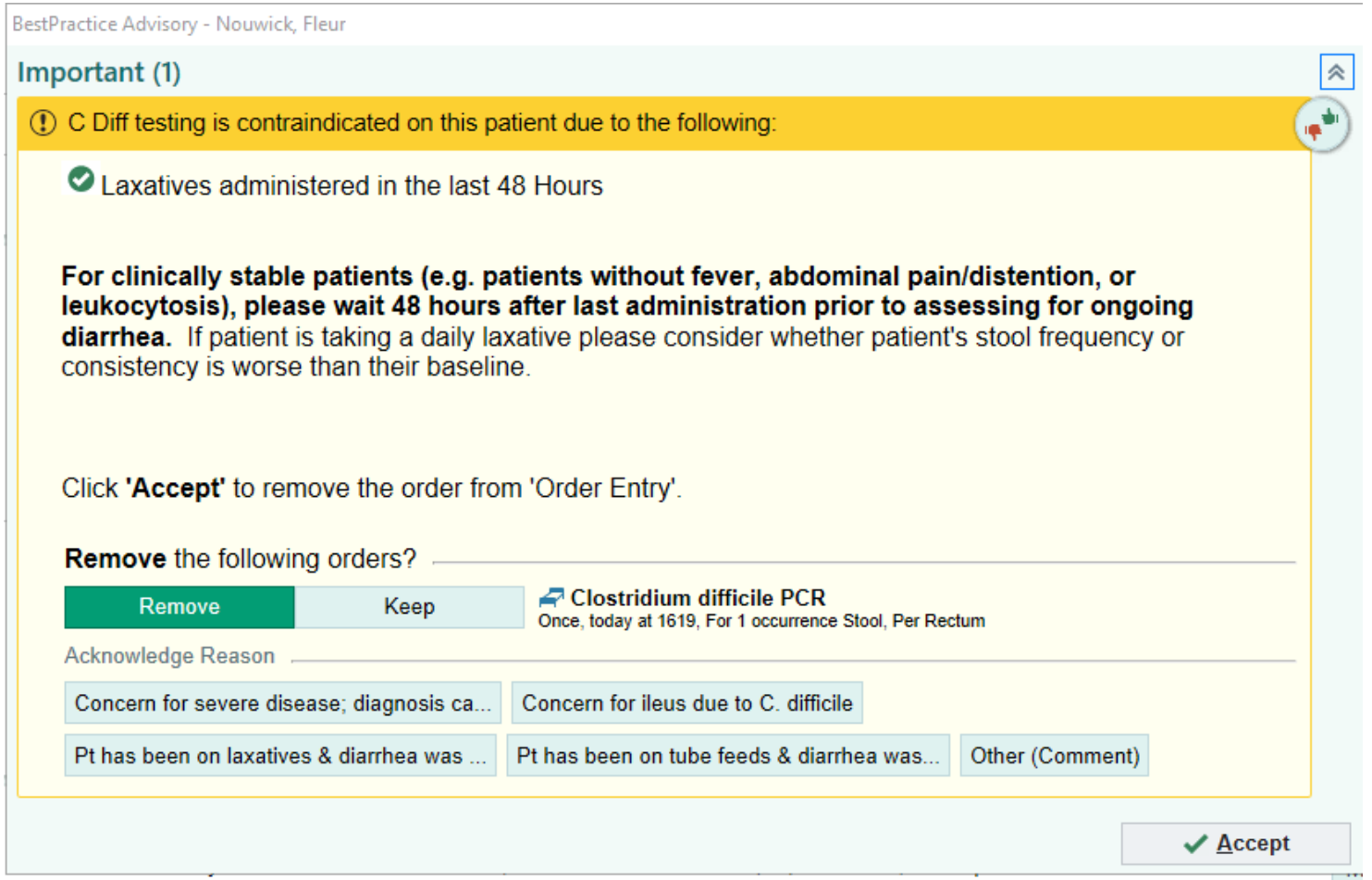
Return to Agenda

C diff BPAs

Application: Orders
Owner: Jean Bjugstad

Best Practice Advisories (BPAs) will be reactivated:

1. Fire alert when C diff order is placed on pt with laxatives, tube feeds, or oral contrast in the last 48 hours.



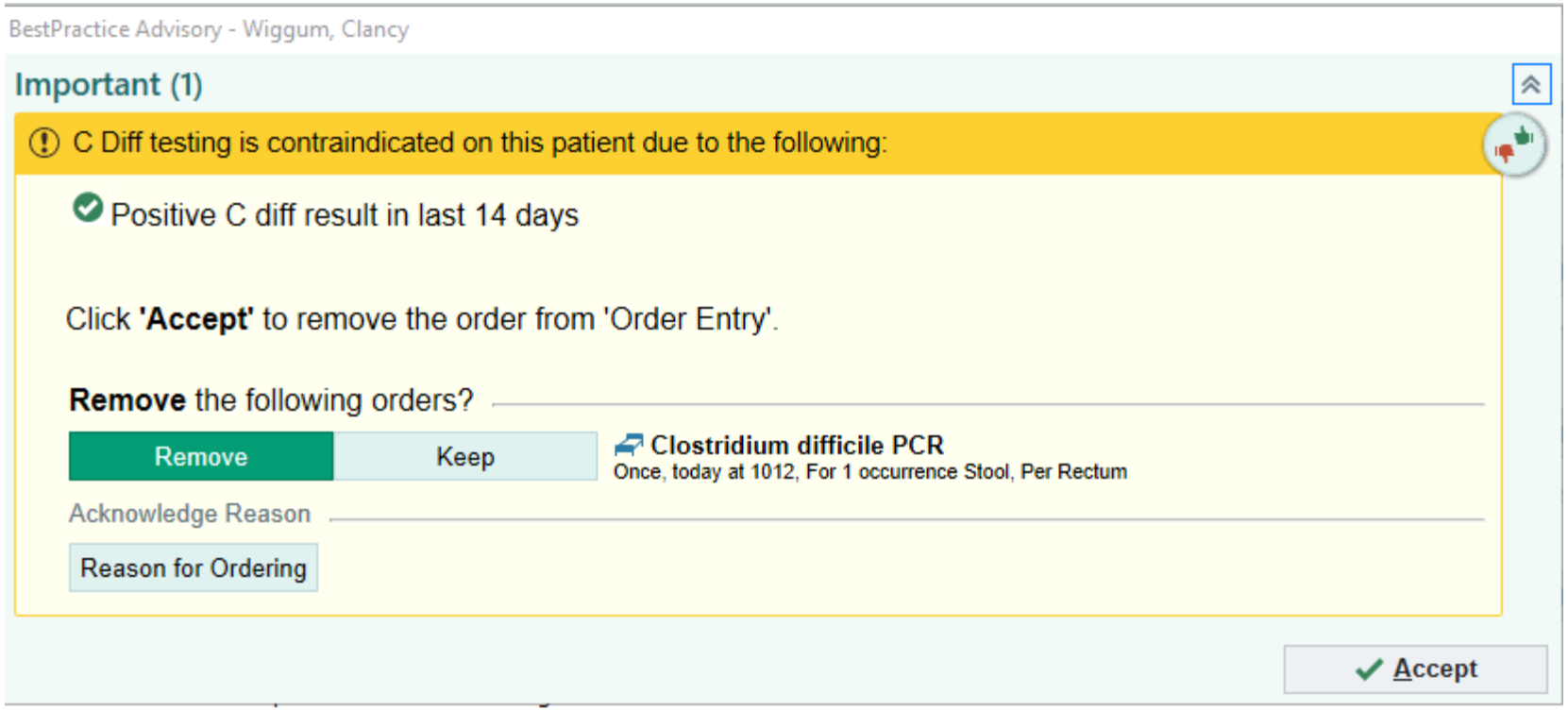
Return to Agenda

C diff BPAs, Continue

Application: Orders
Owner: Jean Bjugstad

Best Practice Advisories (BPAs) will be reactivated:

2. Fire alert when C diff order is placed on pt with an existing order, a previous positive in the last 14 days, or a previous negative in the last 7 days.



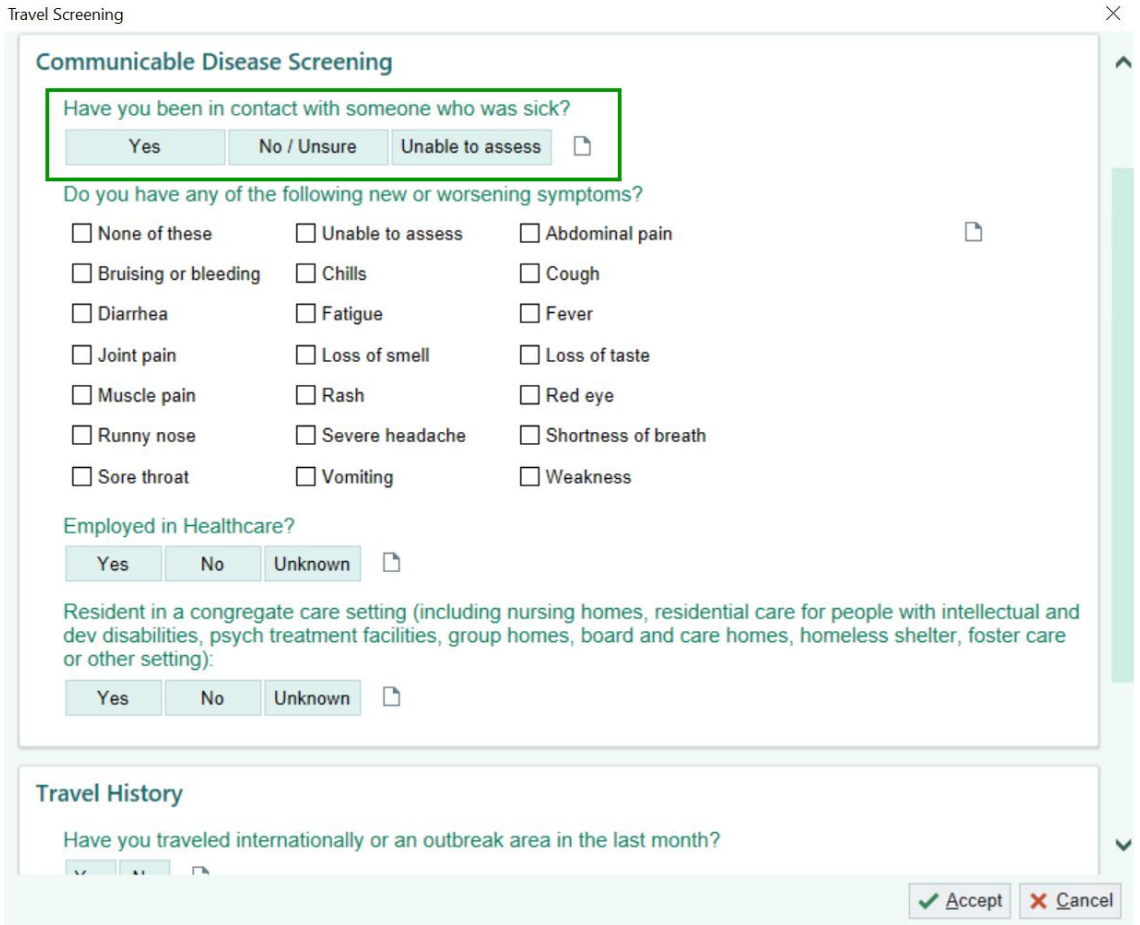
Return to Agenda

Nursing: Remove COVID-19 Questions from Travel Screening

Application: Clin Doc/Stork
Owner: June Mandap/Ben Emanuels

This change removes the COVID-19 questions from the Travel Screening.

- Note: This change was specifically requested by Nursing Informatics.



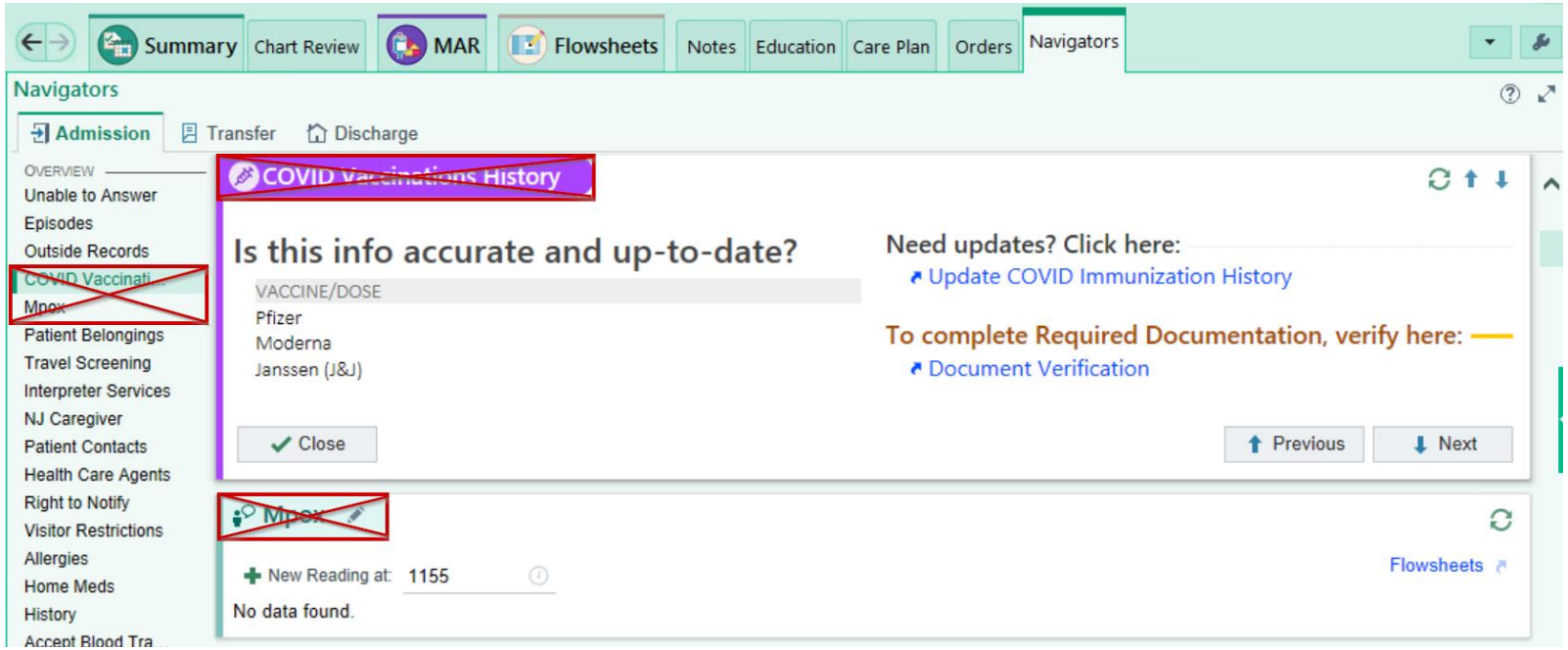
Return to Agenda

Nursing: Remove COVID-19 and Mpox Sections from Admission Navigator

Application: Clin Doc/Stork
Owner: June Mandap/Ben Emanuels

This change removes the COVID-19 Vaccinations History and Mpox sections from the Admission navigator.

- Note: This change was specifically requested by Nursing Informatics.



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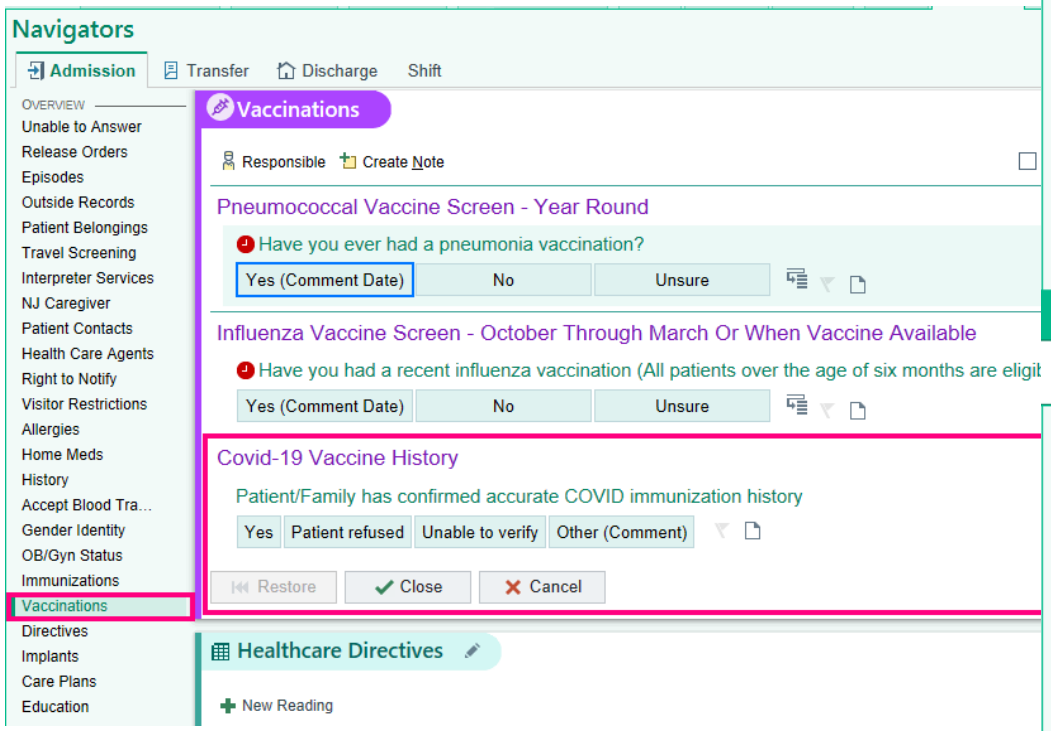
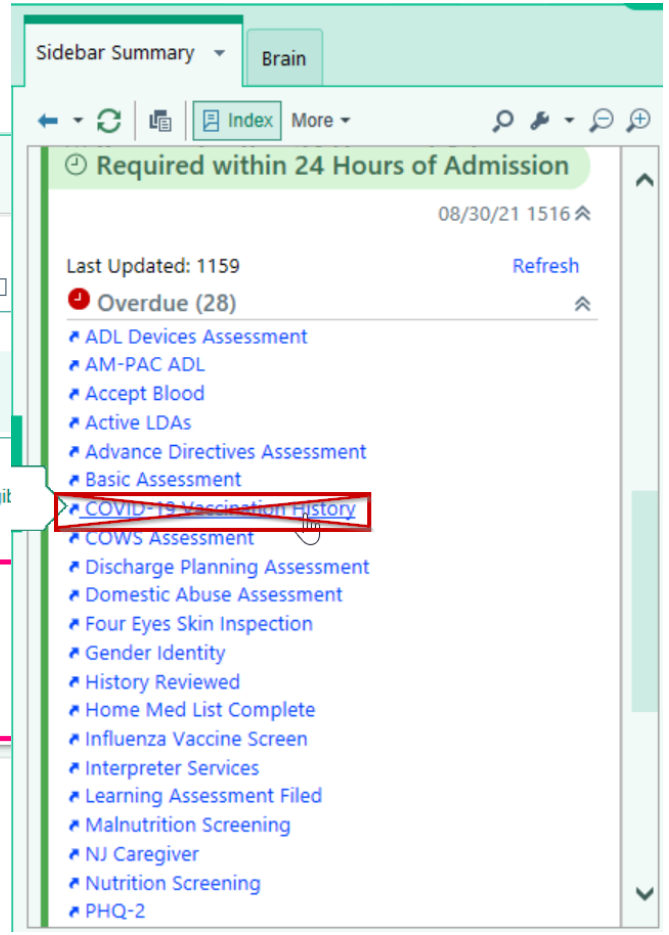
Nursing: Move Covid-19 history question to 'Vaccinations' section in Admission Navigator and Remove COVID-19 Vaccination History from Req Doc

Application: Clin Doc/Stork
Owner: June Mandap/Ben Emanuels

This change moved 'Covid-19 Vaccine History question to 'Vaccinations' section and removes the COVID-19 Vaccination History rule from Admission Req Doc.

- Note: This change was specifically requested by Nursing Informatics.





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Ambulatory - PROVIDER
Approved for Production: **Move on 08/01/2023**

Item Name	Description	ER #
New Pediatric Diabetes Flowsheet	This request is for a new flowsheet template for use in tracking pediatric diabetes patients.	EPREQ0006643
New Blood Marrow Donor History Questionnaire	This request addresses an update to the CINJ Blood/ Marrow Donor History Questionnaire.	EPREQ0005890
New Flowsheet to Document Wheelchair Weight	This request is for a new flowsheet template for use in calculating wheelchair weight.	EPREQ0003756
Level of Service Hard Stop for Encounters Scheduled to a Generic Provider	This request adds a new hard stop when entering Level of Service with an encounter scheduled to a generic provider. It will require providers to change the provider from the generic resource to the appropriate real provider. Currently, this is being implemented for Hospital Outpatient Specialty clinics and a few Ambulatory clinics.	N/A Revenue Integrity/Billing Initiated
New Interpreter Services SmartForm	This request is to provide a documentation tool to capture information about Interpreter Services.	EPREQ0009018
Two New ENT Procedures: VivAer and RhinAer	This request is to implement two new procedure orders.	EPREQ0009362

Acute - PROVIDER
Approved for Production: **Move on 08/01/2023**

Item Name	Description	ER #
C diff BPAs	Reactivate C diff Best Practice Advisories (BPAs).	INC1211199
Tube Feed Modular – Multi Response	LQL's for Tube Feeding Modulars changed from Single response to Multi response.	EPREQ0010415
Care Coordination Note Alerts	Two new alerts added to show providers that the patient has a care coordination note. One is a chart open alert, and the other shows in the storyboard.	

Other (Ancillary, Access/Revenue, Digital, Data & Analytics) - PROVIDER Approved for Production: **Move on 08/01/2023**

Item Name	Description	ER #
Update to Mammogram Health Maintenance	Updated mammogram to 2-year frequency from the current 1-year frequency. This update aligns with Quality Standards. Providers will still have the override option to update individual patients to a 1-year frequency if needed.	
Update to Diabetic Retinopathy Health Maintenance	Updated Diabetic Retinopathy to 1-year frequency from the current 2-year frequency. This update aligns with Quality Standards.	

AMBULATORY - PROVIDER

New Pediatric Diabetes Flowsheet Template

Application: Ambulatory
Owner: Faye Erickson/ Amy Byers

Enhancement Number:

EPREQ0006643

Requestor:

Dr. Dennis Brenner

Date Reviewed:

3/21/2023

Existing process?

No

Build Required?:

Yes

Background: Dr. Brenner has requested a new flowsheet template for use in tracking pediatric diabetes patients. This request was discussed by the Endocrinology Specialty Advisory Council.

Impact: This flowsheet will be utilized in the Pediatric Endocrinology departments to gather required data for US News and World report recognition qualifications.

Recommendation: Move the existing flowsheet template to PRD and use that for tracking data until a report can be created to collect the data needed. Not all data in the flowsheet exists in the chart, and existing data in the chart cannot be pulled into the flowsheet automatically.

***The flowsheet has been reviewed and approved by the Vetting Council leadership.

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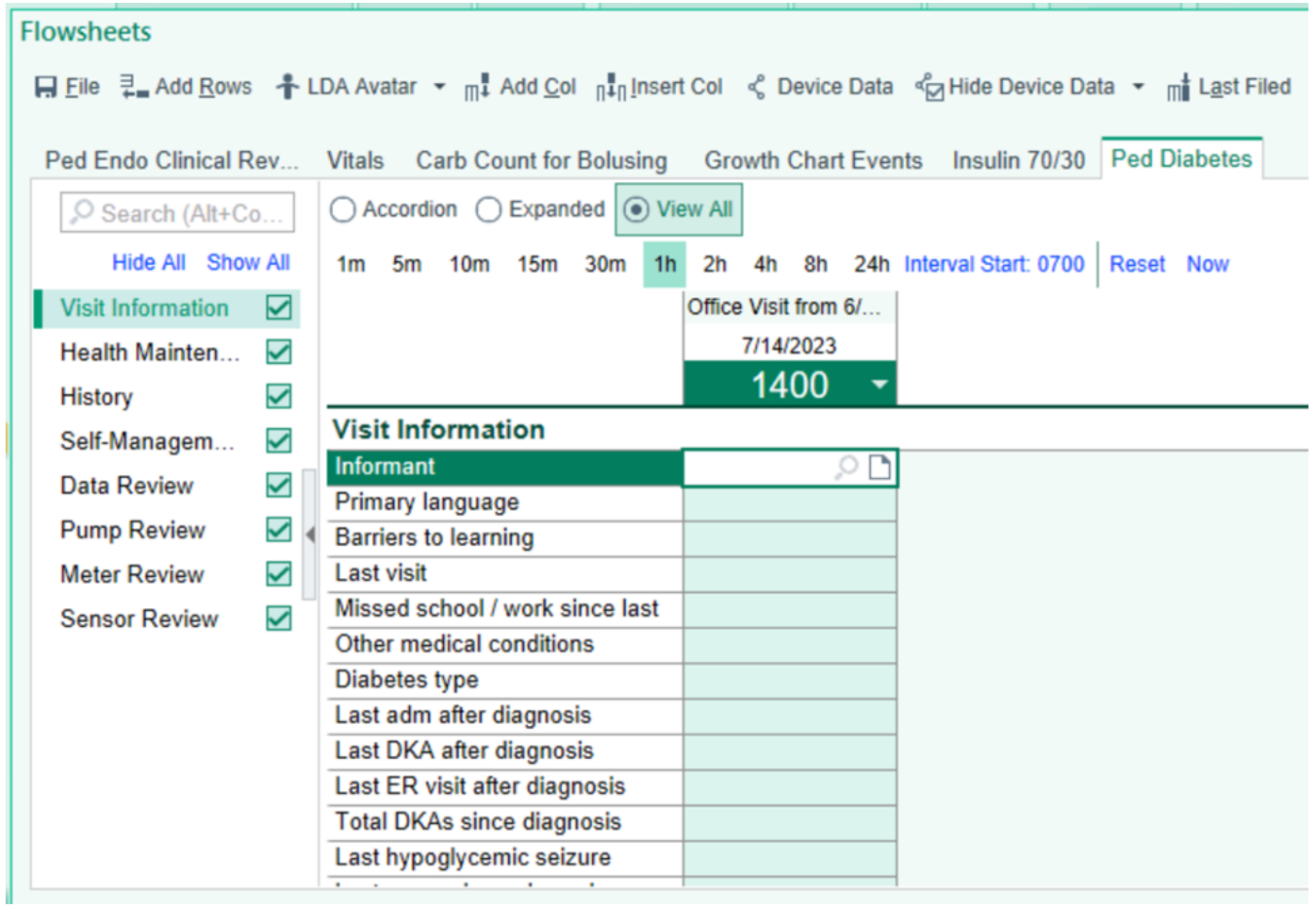
New Pediatric Diabetes Flowsheet Template, Continued

Application: Ambulatory
Owner: Faye Erickson/ Amy Byers



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New Blood Marrow Donor History Questionnaire

Application: MyChart & Ambulatory
Owner: Faye Erickson MarkStockdale Amy Byers

Enhancement Number:

EPREQ0005890

Requestor:

Nicole McEntee

Date Reviewed:

Existing process?

Yes

Build Required?: Yes

Background: Nicole McEntee has requested an electronic version of the CINJ Blood/ Marrow Donor History Questionnaire. Currently, a paper form is being used.

Impact: This form is used by the Blood and Marrow Transplant program providers to prescreen donors for risk of communicable disease.

Solution:

Update the draft flowsheet with the most current questions.

Build out matching Questionnaire questions for display in MyChart

Create medication deferral questions (no longer deferring meds, just asking if they have taken) and attach to MyChart Questionnaire

**See next slide for before/after of the Medication Deferral question changes

Return to Agenda

New Blood Marrow Donor History Questionnaire, Continued

Application: MyChart & Ambulatory
Owner: Faye Erickson MarkStockdale Amy Byers

Current state:

Medication Deferral List

DO NOT STOP taking medications prescribed by your doctor in order to donate blood. Donating while taking these drugs could have a negative effect on your health or on the health of the recipient of your blood.

PLEASE TELL US IF YOU:

ARE BEING TREATED WITH ANY OF THE FOLLOWING TYPES OF MEDICATIONS:	OR HAVE TAKEN:	WHICH IS ALSO CALLED:	ANYTIME IN THE LAST:
Antiplatelet agents (usually taken to prevent stroke or heart attack)	Feldene	piroxicam	2 Days
	Effient	prasugrel	3 Days
	Brilinta	ticagrelor	7 Days
	Plavix	clopidogrel	14 Days
	Ticlid	ticlopidine	
	Zontivity	vorapaxar	1 Month
Anticoagulants or "blood thinners" (usually taken to prevent blood clots in the legs and lungs and to prevent strokes)	Arixtra	fondaparinux	2 Days
	Eliquis	apixaban	
	Fragmin	dalteparin	
	Lovenox	enoxaparin	
	Pradaxa	dabigatran	
	Savaysa	edoxaban	
	Xarelto	rivaroxaban	
	Coumadin, Warfilone, Jantoven	warfarin	7 Days
	Heparin, low-molecular-weight heparin		
Acne treatment	Accutane, Amnesteem, Absorica, Claravis, Myorisan, Sotret, Zenatane	isotretinoin	1 Month
Multiple myeloma	Thalomid	thalidomide	
Rheumatoid arthritis	Rinvoq	upadacitinib	
Hair loss remedy	Propecia	finasteride	
Prostate symptoms	Proscar	finasteride	
	Avodart, Jalyn	dutasteride	6 Months
Immunosuppressant	Cellcept	mycophenolate mofetil	6 Weeks
HIV Prevention (PrEP and PEP)	Truvada, Descovy, Tivicay, Isentress	tenofovir, emtricitabine, dolutegravir, raltegravir	3 Months
Basal cell skin cancer	Erivedge, Odomzo	vismodegib, sonidegib	24 Months
Relapsing multiple sclerosis	Aubagio	teriflunomide	
Rheumatoid arthritis	Arava	leflunomide	
Hepatitis exposure	Hepatitis B Immune Globulin	HBIG	12 months
Experimental Medication or Unlicensed (Experimental) Vaccine			
Psoriasis	Soriatane	acitretin	36 Months
	Tegison	etretinate	Ever
HIV treatment also known as antiretroviral therapy (ART)			

Version 9/2022: adapted from AABB DHQ v2.1 PrEP, PEP, ART

Future state:

MEDICATION DEFERRAL LIST

Please tell us if you have EVER taken any of these medications:

- **Growth Hormone from Human Pituitary Glands** – used usually for children with delayed or impaired growth
- **Insulin from Cows (Bovine, or Beef, Insulin)** – used to treat diabetes
- **Hepatitis B Immune Globulin** – given following an exposure to hepatitis B.
  NOTE: This is different from the hepatitis B vaccine, which is a series of 3 injections given over a 6 month period to prevent future infection from exposures to hepatitis B.
- **Unlicensed Vaccine** – usually associated with a research protocol

IF YOU WOULD LIKE TO KNOW WHY THESE MEDICINES AFFECT YOU AS A DONOR, PLEASE KEEP READING:

- **Growth hormone from human pituitary glands** was prescribed for children with delayed or impaired growth. The hormone was obtained from human pituitary glands, which are found in the brain. Some people who took this hormone developed a rare nervous system condition called Creutzfeldt-Jakob Disease (CJD, for short). Potential donors who have taken growth hormone from human pituitary glands should be evaluated by the Medical Director.
- **Insulin from cows (bovine, or beef, insulin)** is an injected material used to treat diabetes. If this insulin was imported into the US from countries in which "Mad Cow Disease" has been found, it could contain material from infected cattle. There is concern that "Mad Cow Disease" is transmitted by transfusions and transplants. Potential donors who have taken insulin from cows should be evaluated by the Medical Director.
- **Hepatitis B Immune Globulin (HBIG)** is an injected material used to prevent infection following an exposure to hepatitis B. HBIG does not prevent hepatitis B infection in every case, therefore potential donors who have taken hepatitis B Immune Globulin should be evaluated by the Medical Director to be sure they were not infected. Hepatitis B can be transmitted, through transfusions and transplants, to a patient.
- **Unlicensed vaccine** is usually associated with a research protocol and the effect with regard to stem cell recipients is unknown. Potential donors who have taken unlicensed vaccines should be evaluated by the Medical Director.

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New Flowsheet to Document Wheelchair Weight

Application: Ambulatory
Owner: Jose Aponte-Lopez
Amy Byers

Enhancement Number:

EPREQ0003756

Requestor:

Dietician Group

Date Reviewed:

3/21/2023

Existing process?

No

Build Required?:

Yes

Background: This addresses a request to create flowsheet to calculate a patient's weight when the patient's health makes it difficult to weigh the patient without his/her wheelchair.

Solution: New flowsheet row to calculates the patient's actual weight. The customer will then enter the calculated value in the Epic-released row for Weight. This was approved by Ambulatory Advisory Council.

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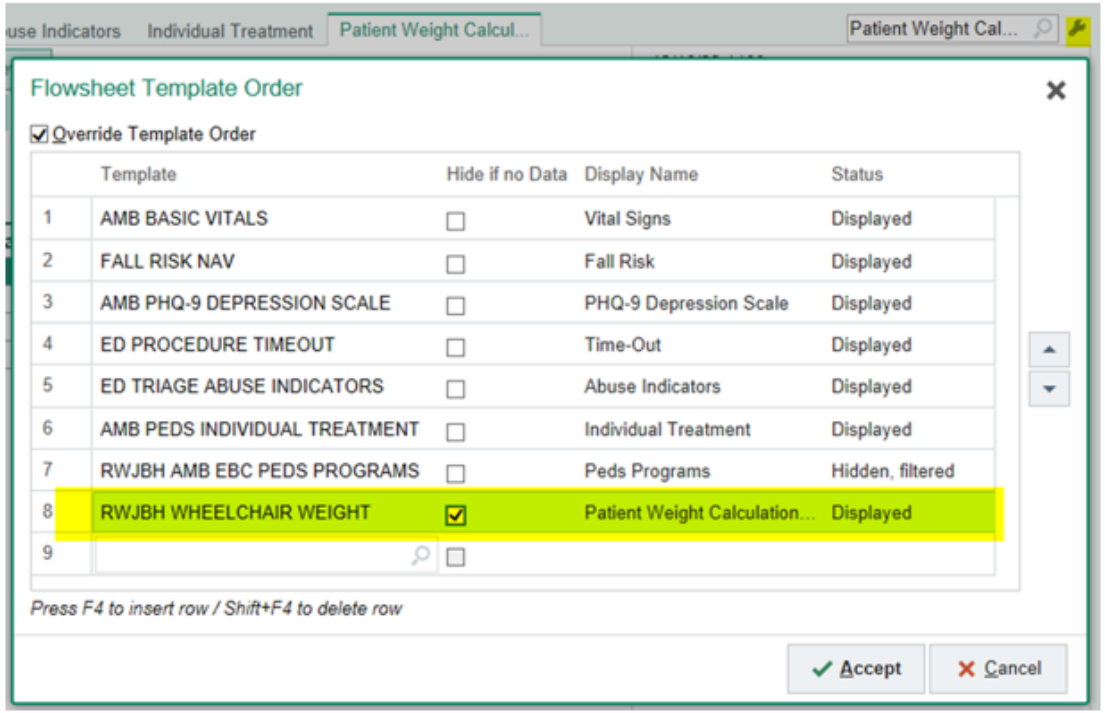
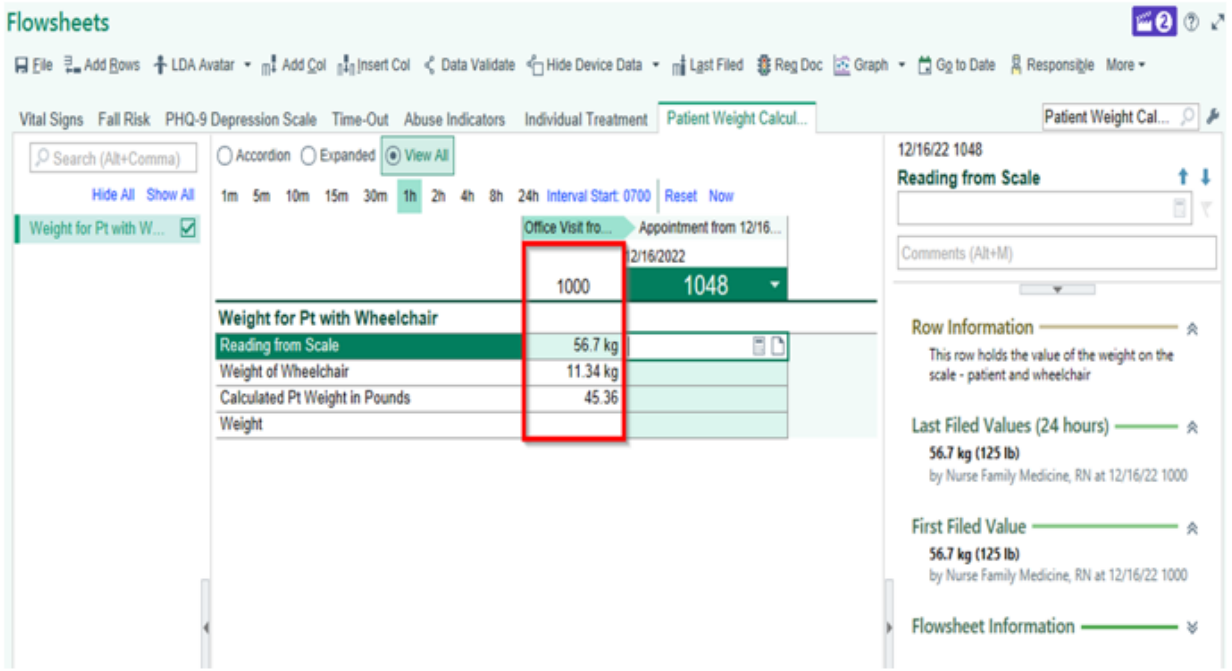
New Flowsheet to Document Wheelchair Weight, Continued

Application: Ambulatory
Owner: Jose Aponte-Lopez
Amy Byers

❑ After (Future State)





Return to Agenda

Epic together.

Level of Service Hard Stop for Encounters Scheduled to a Generic Provider

Application:
Hospital Outpatient Specialties and Ambulatory
Owner: Ruben Fernandez
Jose Aponte-Lopez Amy Byers

Enhancement Number: N/A

Requestor:

Revenue Integrity/Billing Team

Date Reviewed:

07/17/2023

Existing process?

No

Build Required?:

Yes

Background: This change is being requested by the Revenue Integrity Team and Billing. When a generic provider is left as the assigned (encounter) provider, there are several downstream affects impacting revenue. To help improve the Change Provider workflow and avoid delays in processing encounter claims, the Hospital Outpatient Specialty team is proposing adding a hard stop when a provider enters the Level of Service (LOS) to make sure a generic provider is not left as the encounter provider, which prevents billing.

Impact: Ambulatory Generic Provider(s), with SER item 13 set to "Yes".

Solution: Put build in place that triggers a hard stop requiring that the encounter provider be changed to a real provider, at the time of LOS entry, in order to close and bill for the encounter. This will have minimal impact on Ambulatory providers initially, but a greater impact to Hospital Outpatient Specialty providers. Eventually, all Ambulatory generic providers will also receive the hard stop.

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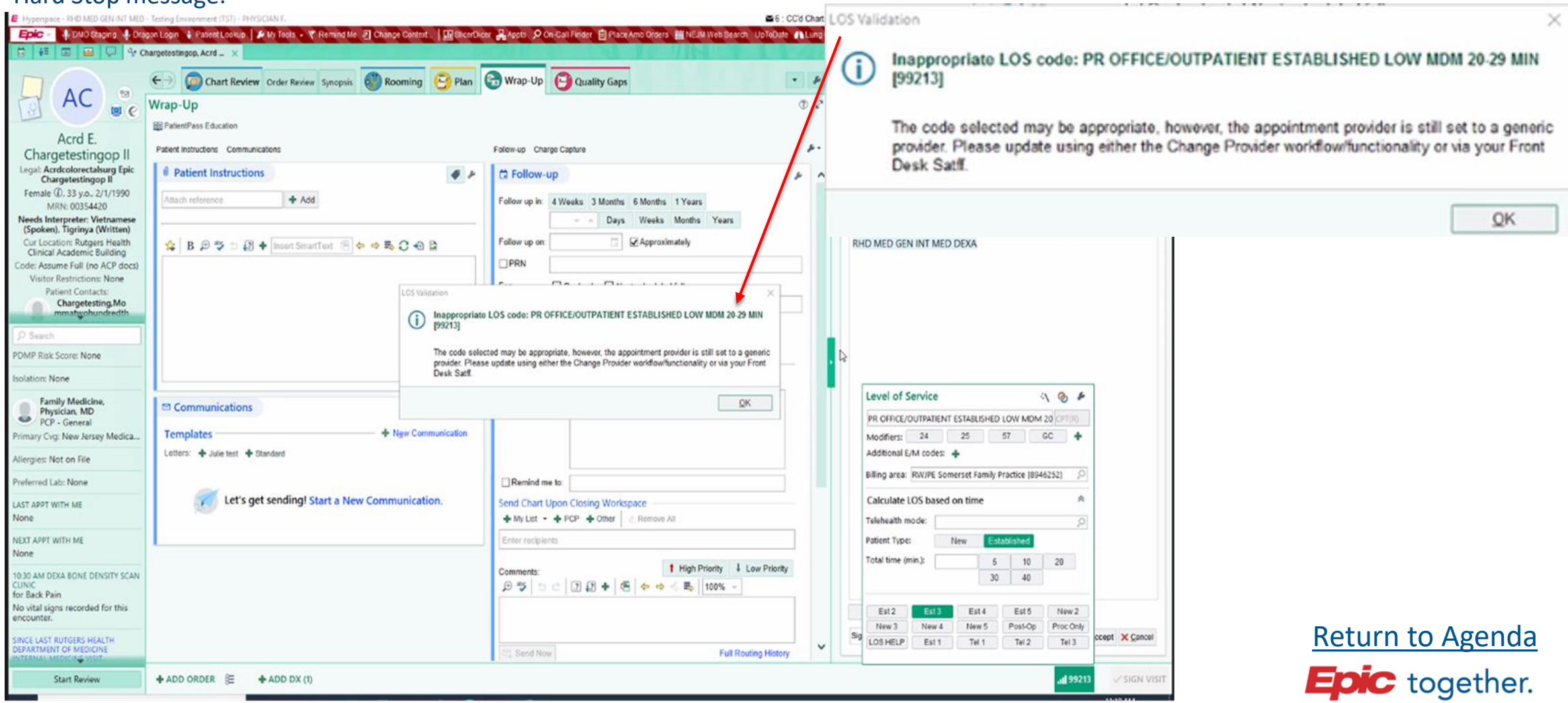
Level of Service Hard Stop for Encounters Scheduled to a Generic Provider, Continued

Application:
Hospital Outpatient Specialties and Ambulatory

Owner: Ruben Fernandez
Jose Aponte-Lopez Amy Byers

Hard Stop message:



Return to Agenda

Epic together.

Interpreter Services SmartForm

Application: Ambulatory
Owner: Jose Aponte-Lopez
Amy Byers

Enhancement Number:

EPREQ0009018

Requestor:

Jennifer Smith

Date Reviewed:

Existing process?

No

Build Required?:

Yes

Background: We are required to offer language services to our patients utilizing a certified interpreter. We need to document the Interpreter ID and we need to be able to monitor usage and compliance.

Impact: All clinical staff.

Solution: Create an Interpreter SmartForm section in the Rooming Tab where Clinical staff and Providers can document the interpreter services, capturing interpreter ID and time spent, when needed.

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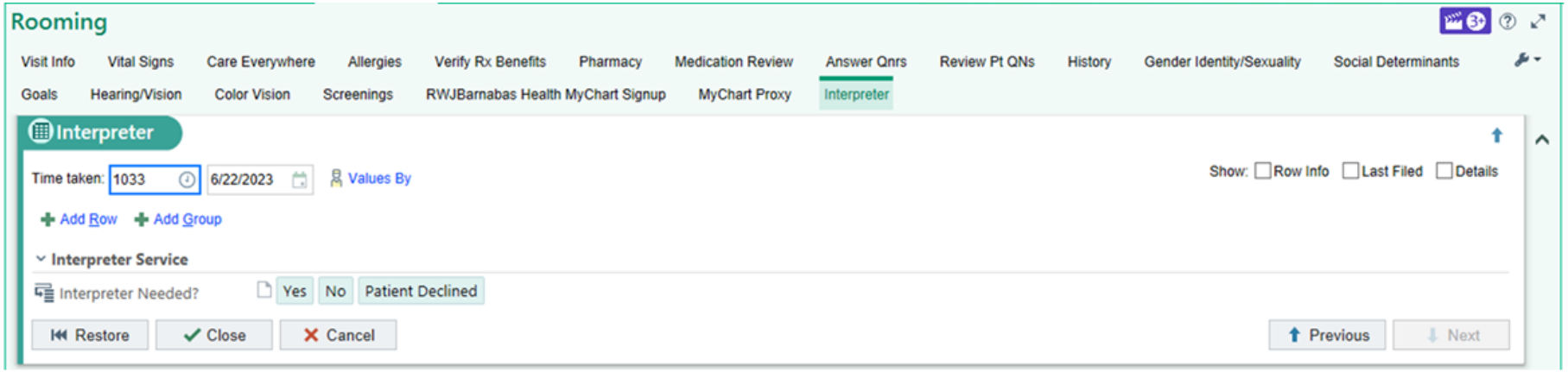
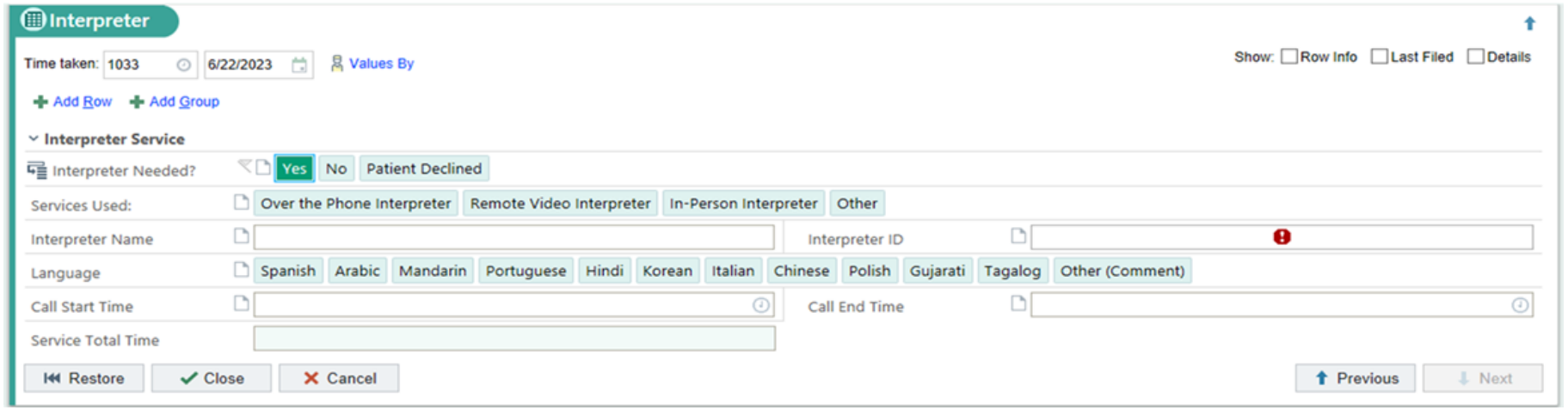
Interpreter Services SmartForm, Continued

Application: Ambulatory
Owner: Jose Aponte-Lopez
Amy Byers





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Two New ENT Procedures

Application: Ambulatory
Owner: Jose Aponte-Lopez
Amy Byers

Enhancement Number:

EPREQ0009362

Requestor:

Erica Quezada

Date Reviewed:

Existing process?

No

Build Required?:

Yes

Background: Two new ENT procedures need an order created in Epic. The orders will be placed by the providers and need prior authorization before the procedures are scheduled. The orders are VivAer (cpt 30469) and RhinAer (cpt 30117). Both will be clinic performed using the generic procedure documentation tool.

Impact: These are for the ENT specialty, but they are able to be found/used by all when searching.

Solution: Create new orders, including configuration to route to the prior-auth work queue.

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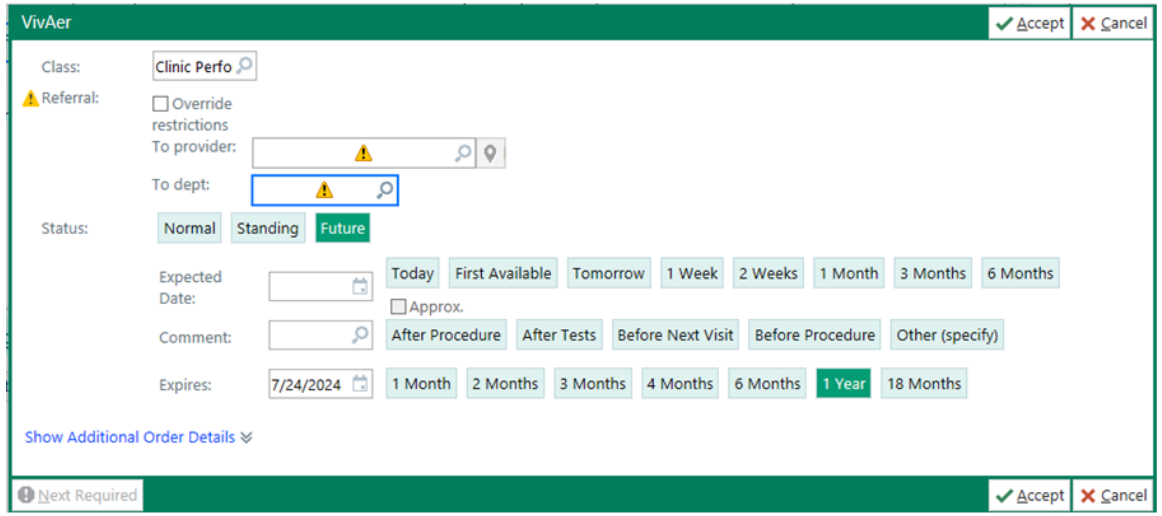
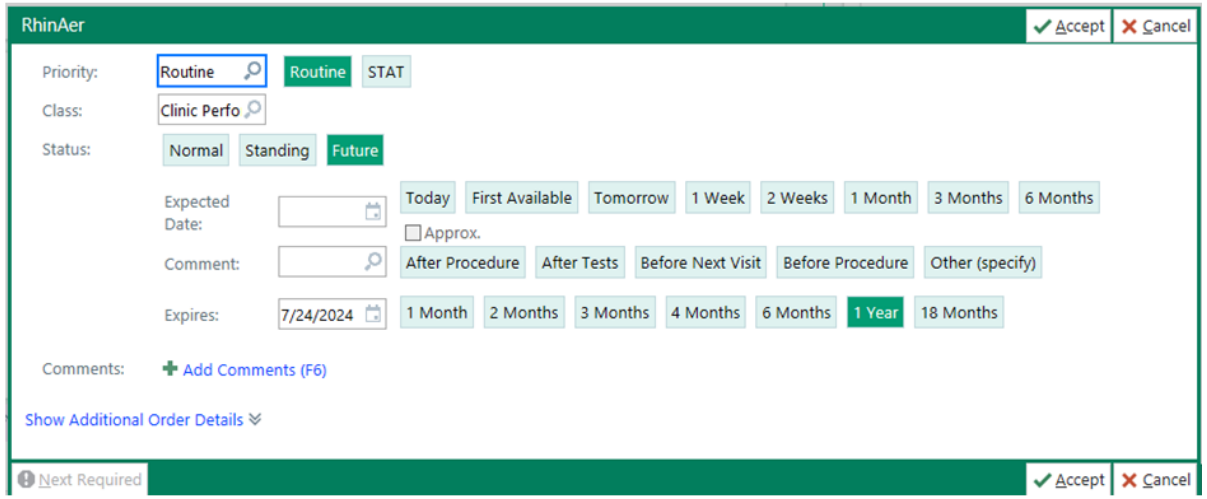
Two New ENT Procedures, Continued

Application: Ambulatory
Owner: Jose Aponte-Lopez
Amy Byers

VivAer - (ENT30)



RhinAer - (ENT31)



Both orders will fall into WQ#14814 for Prior Authorization

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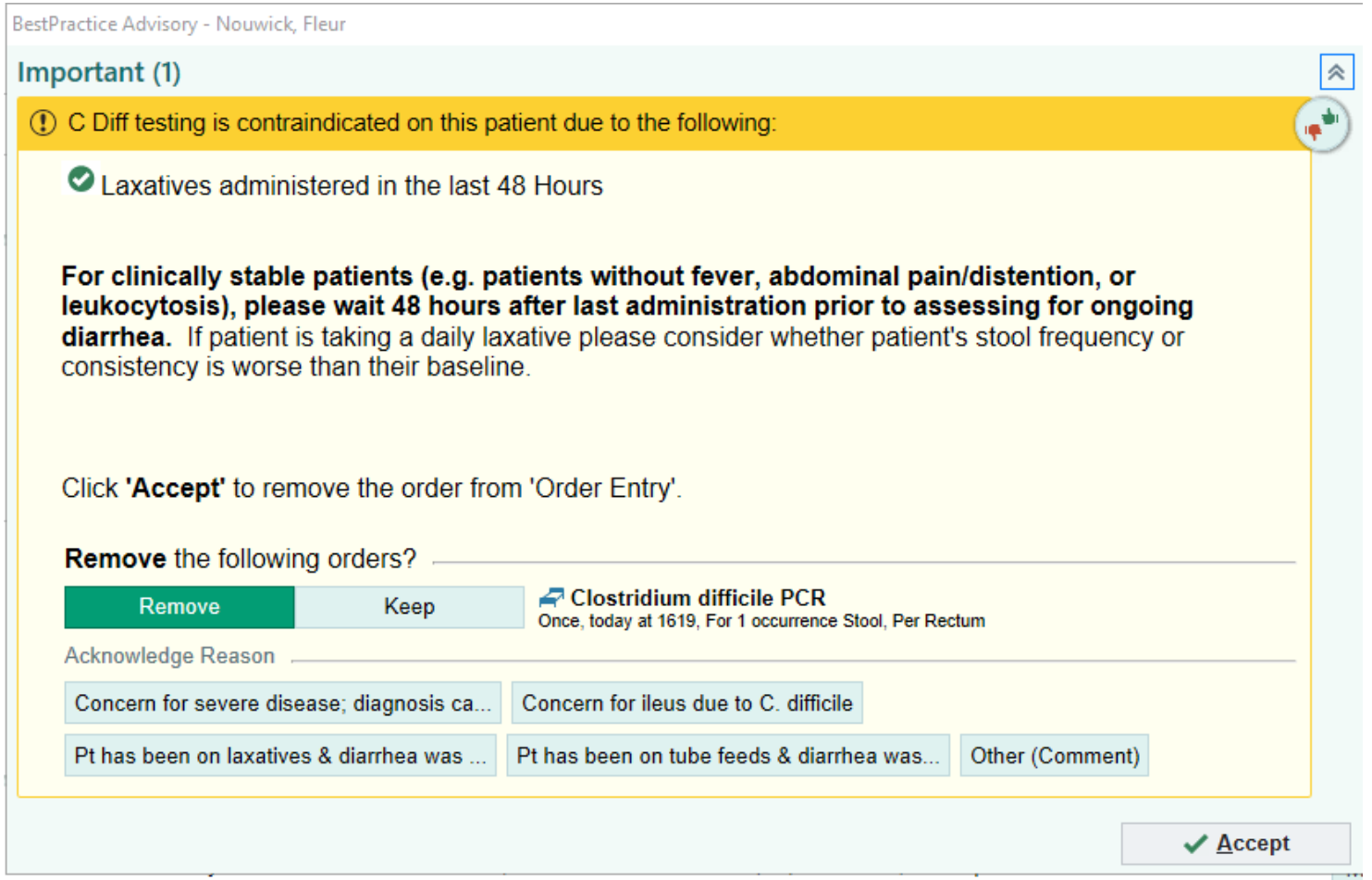
ACUTE - PROVIDER

C diff BPAs

Application: Orders
Owner: Jean Bjugstad

Best Practice Advisories (BPAs) will be reactivated:

1. Fire alert when C diff order is placed on pt with laxatives, tube feeds, or oral contrast in the last 48 hours.



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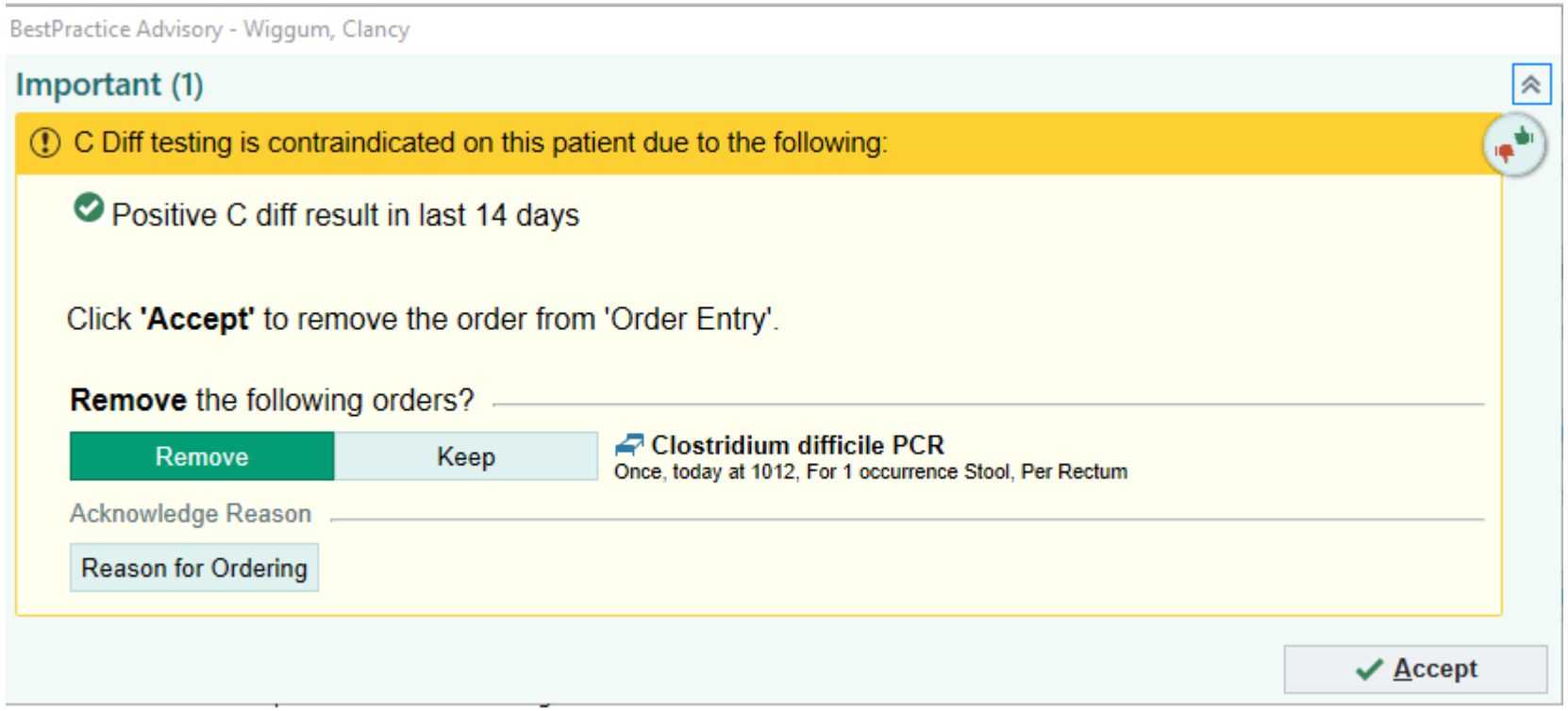
C diff BPAs, Continued

Application: Orders
Owner: Jean Bjugstad

Best Practice Advisories (BPAs) will be reactivated:

2. Fire alert when C diff order is placed on pt with an existing order, a previous positive in the last 14 days, or a previous negative in the last 7 days.



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Tube Feed Modulars-LQL's

Application: Orders
Owner: Mary Mulford

EPREQ0010415

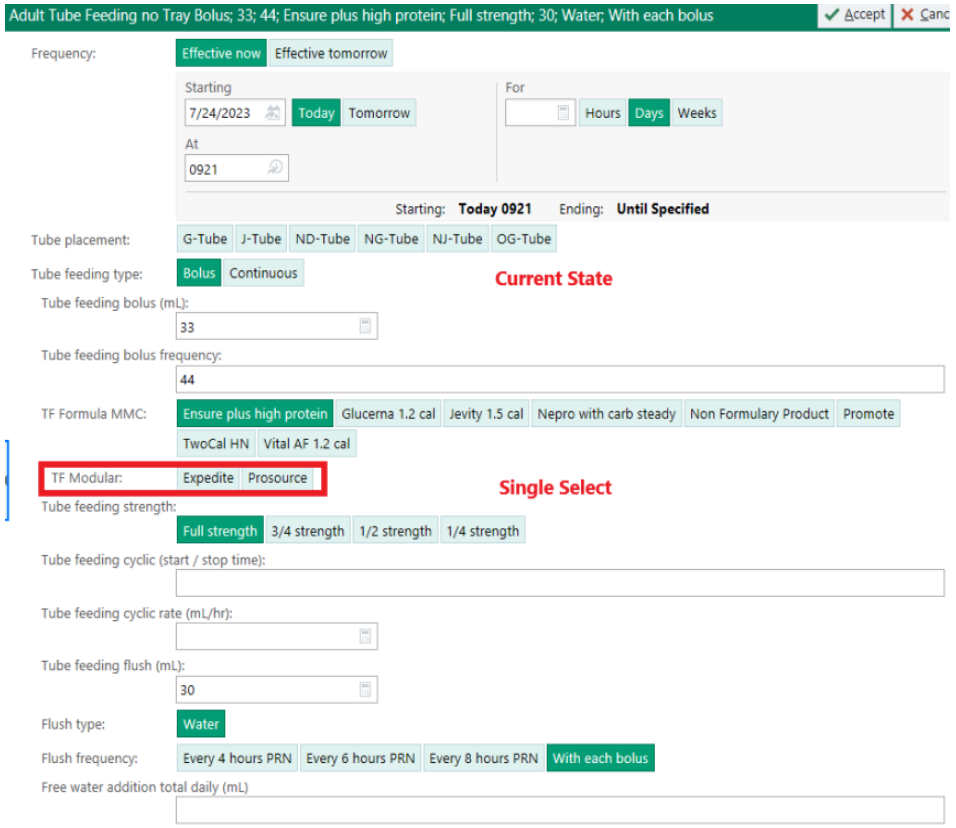
Tube Feed (TF) Modulars changed from Single select to Multi select.

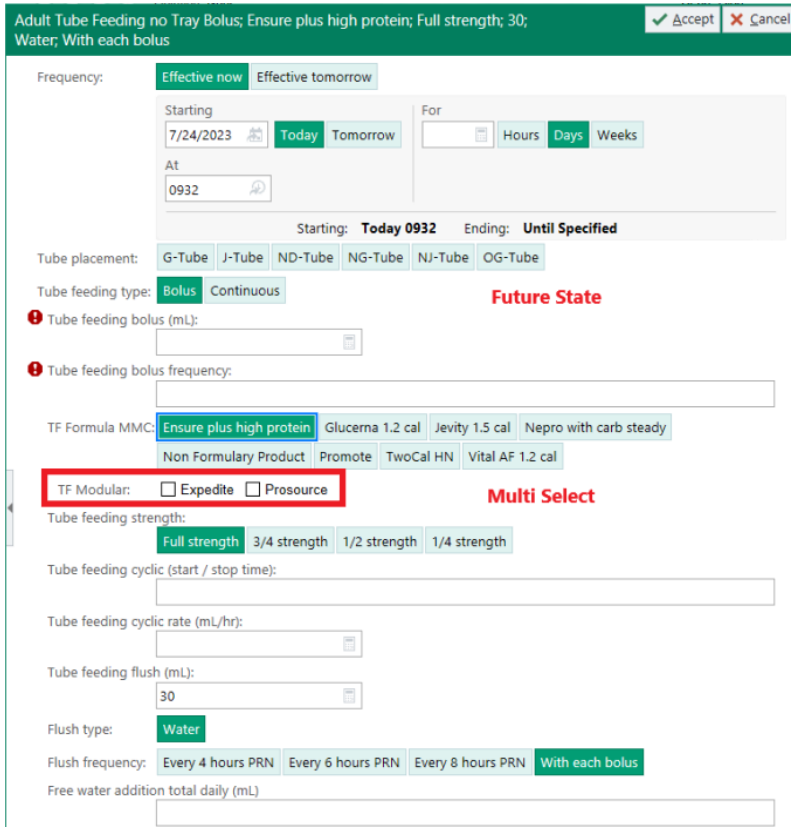
All TF Modular LQL updated to Multi select to keep build consistent for all facilities.

112468 - 111413 - 111952 - 112521 - 112477 - 111355 -

T100-65184

Requester: Lori Snable MMC





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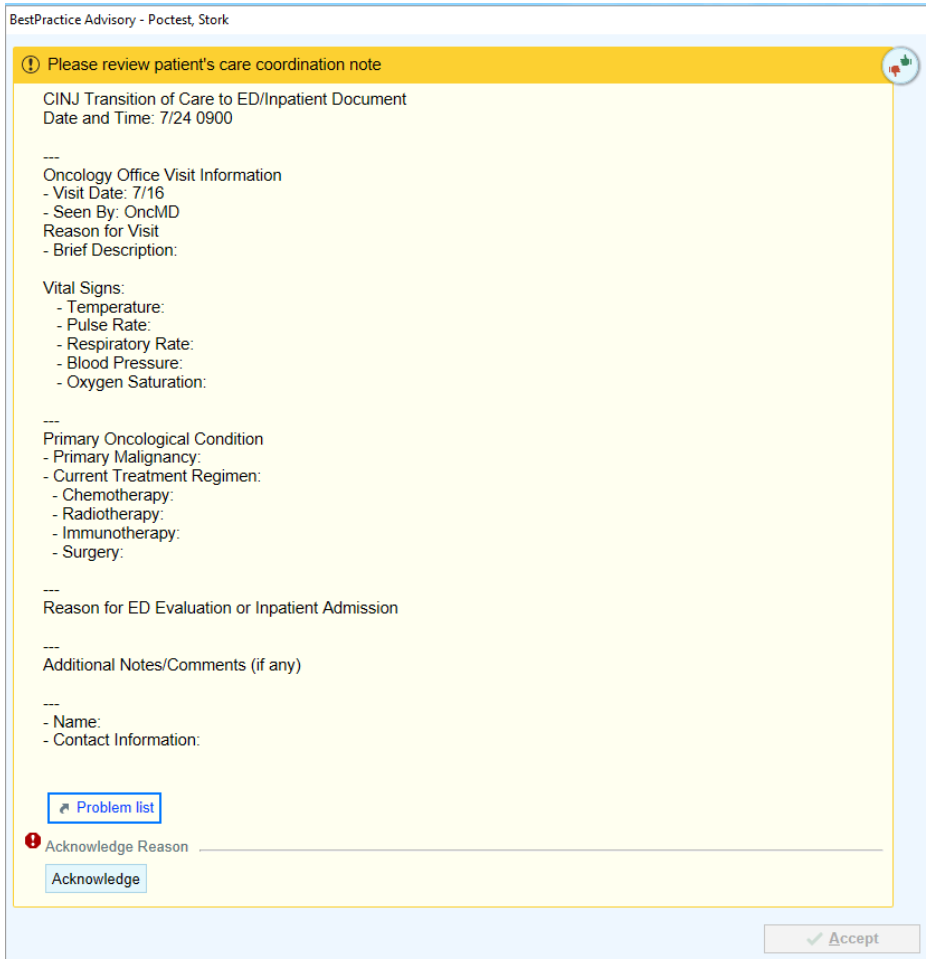
Care Coordination Note Alerts

Application: Orders
Owner: Bjorn Vanberg

Two new alerts for patients with care coordination notes:

The first alert appears the first time each physician opens the chart for each hospitalization.

After reviewing the alert, it will no longer appear for that user for the rest of the hospitalization.



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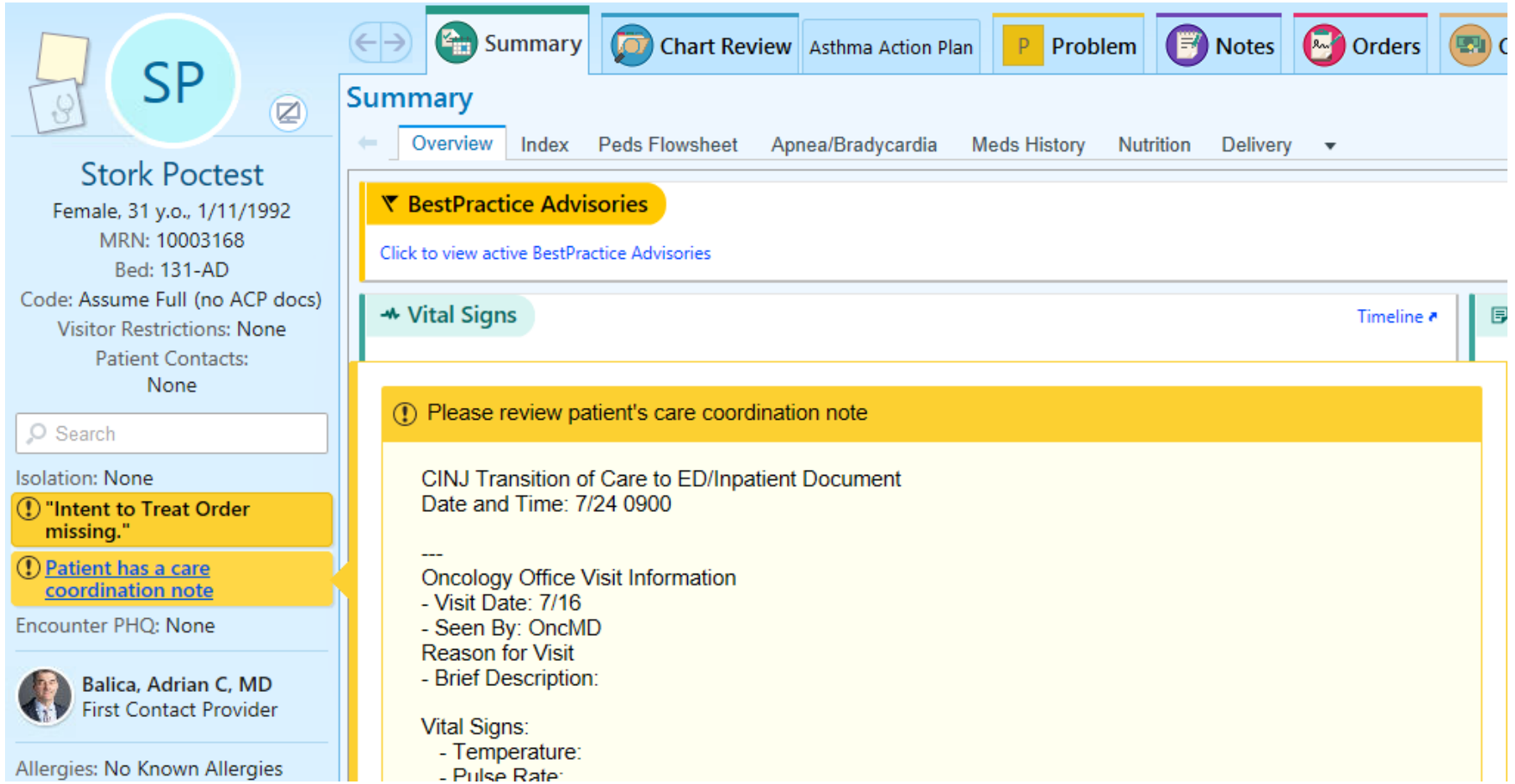
Care Coordination Note Alerts, Continued

Application: Orders
Owner: Bjorn Vanberg

The second alert appears in the storyboard.

For the first 72 hours of admission physicians can see the alert and hover for additional details.



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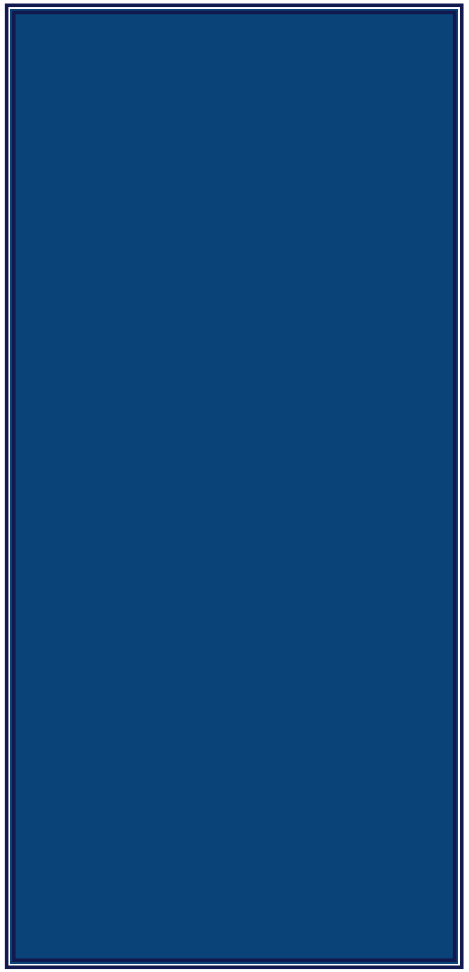
Update to Mammogram Health Maintenance

Application:
Owner: Jeffery Cummis



- Updated mammogram to 2-year frequency from the current 1-year frequency.
- This update aligns with Quality Standards.
- Providers will still have the override option to update individual patients to a 1-year frequency if needed.

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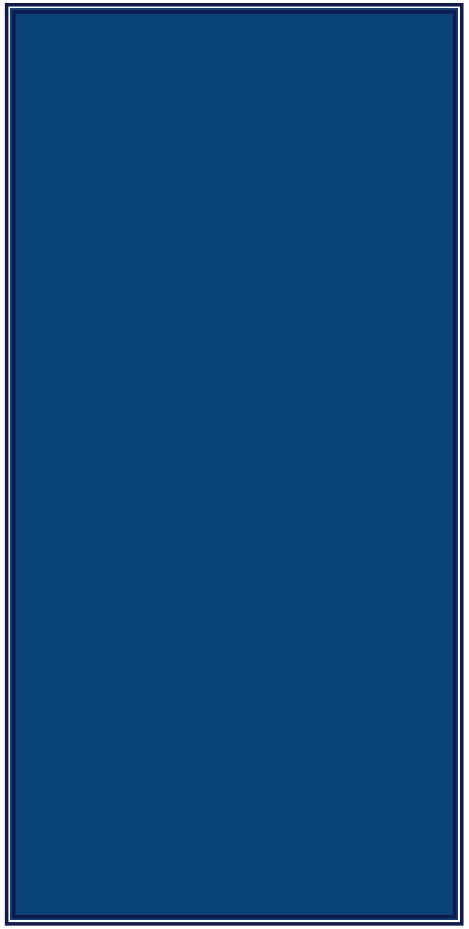
Update to Diabetic Retinopathy Health Maintenance

Application:
Owner: Jeffery Cummis



- Updated Diabetic Retinopathy to 1-year frequency from the current 2-year frequency.
- This update aligns with Quality Standards.

Return to Agenda