

Ambulatory APeX Monthly Updates – March 2026

All Ambulatory Users

In this edition:

New Ambulatory CSF Labs SmartSets	2
In Rare Situations, APeX Incorrectly Indicates Result Released/MyChart Message Sent	2
Adolescent Radiology Encounters and Results in MyChart.....	3
Clearer Privacy Indicators in Chart Review	5
Access Appointment Requests Directly from In Basket.....	6
Disable Patient Lookup by Historical MRN.....	7
Hazardous Medication and Reproductive Toxin Storyboard Banner	7
MMR Vaccine Product is Being Transitioned from MMR-II to Priorix.....	8
New Order Panel – Heparin (Adult) Prophylactic Dosing	9
Update to Free Light Chain (FLC) Lab Ordering in Preference Lists	10
IVIG Lot and Expiration Requirement.....	11
Update to Transfusion Report: Blood Draw Requirements.....	11
Initial APeX Training for Nurses Moving to Amplifire	12
Closure of Shattuck Training Classrooms	12
Rover Access for Practice Managers, CRCs, and MAs.....	13
Referral Updates.....	13
Reporting Office Hours	14
Audience Legend.....	15
Want the Latest APeX Updates?	15
Need APeX Training or Resources?	15

Unless otherwise indicated, these changes go live on:

March 10, 2026

New Ambulatory CSF Labs SmartSets

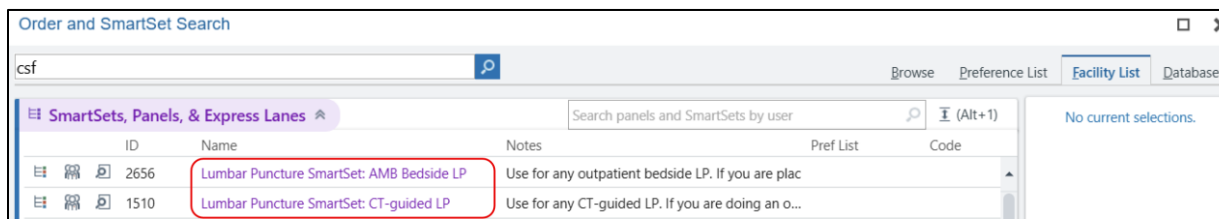
Audience: All Users

Reason for Change: To assist providers and clinicians in ordering CSF labs correctly to minimize potential for errors in collection and processing.

Brief Description & Workflow: With implementation of the Beaker Lab reporting system, CSF and serum companion lab orders must have the correct lab order settings to avoid collection and processing errors. To ensure that your CSF and serum companion lab tests are ordered correctly, we recommend all providers in the ambulatory setting order CSF testing from one of two following SmartSets:

- Use **Lumbar Puncture SmartSet: AMB Bedside LP [2656]** for CSF samples collected via lumbar puncture in an ambulatory clinic
- Use **Lumbar Puncture SmartSet: CT-guided LP [1510]** for CSF samples collected in a CT-guided lumbar puncture

While providers can still order CSF labs outside of the SmartSet, ordering from one of the SmartSets is the recommended approach. Please submit an APeX ServiceNow ticket if there are any CSF studies you commonly order that are missing from the SmartSet and should be added.



SME/Informaticist: Katie Grouse; Build Analyst: Andy Mucklow

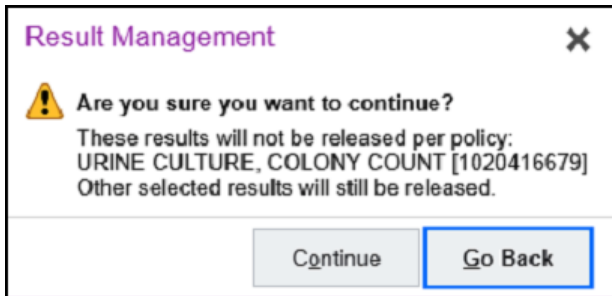
In Rare Situations, APeX Incorrectly Indicates Result Released/MyChart Message Sent

Audience: All Users who use Results Management Activity

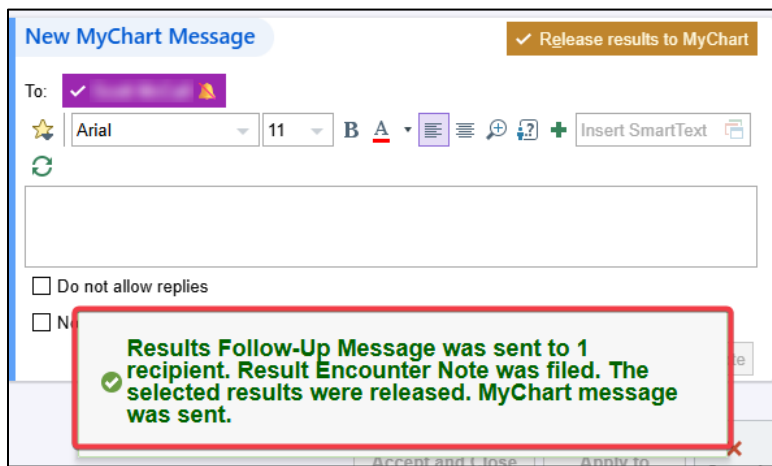
Reason for Change: This Issue has been ongoing for the past two years. Epic only recently discovered this and notified us of the problem.

Brief Description & Workflow: In a specific set of very uncommon circumstances, when using Results Management activity in Result Management or Results Follow-up encounters, users can be led to believe that results and associated MyChart messages have been released/sent to the patient when this is not the case. This only occurs when a combination of releasable and unreleasable results were initially selected, and the user then manually deselects all releasable results before sending.

While Epic works on a solution to this problem, if you see the following pop-up warning when trying to release a result or send an associated message to the patient in Results Management Activity:



Please be aware that the results will not be released, and the associated MyChart message will not be sent, even if you subsequently see the following message indicating that they were sent.



SME/Informaticist: Katie Grouse; Build Analyst: Ian Shaw

Adolescent Radiology Encounters and Results in MyChart

Audience: All Clinical Users

Reason for Change: Updating adolescent (12-17 yrs) radiology sharing to reduce over-blocking while maintaining protections for sensitive services.

Description & Workflow:

Encounters (Appointments)

Radiology encounters for adolescents and their proxies will now appear in MyChart unless:

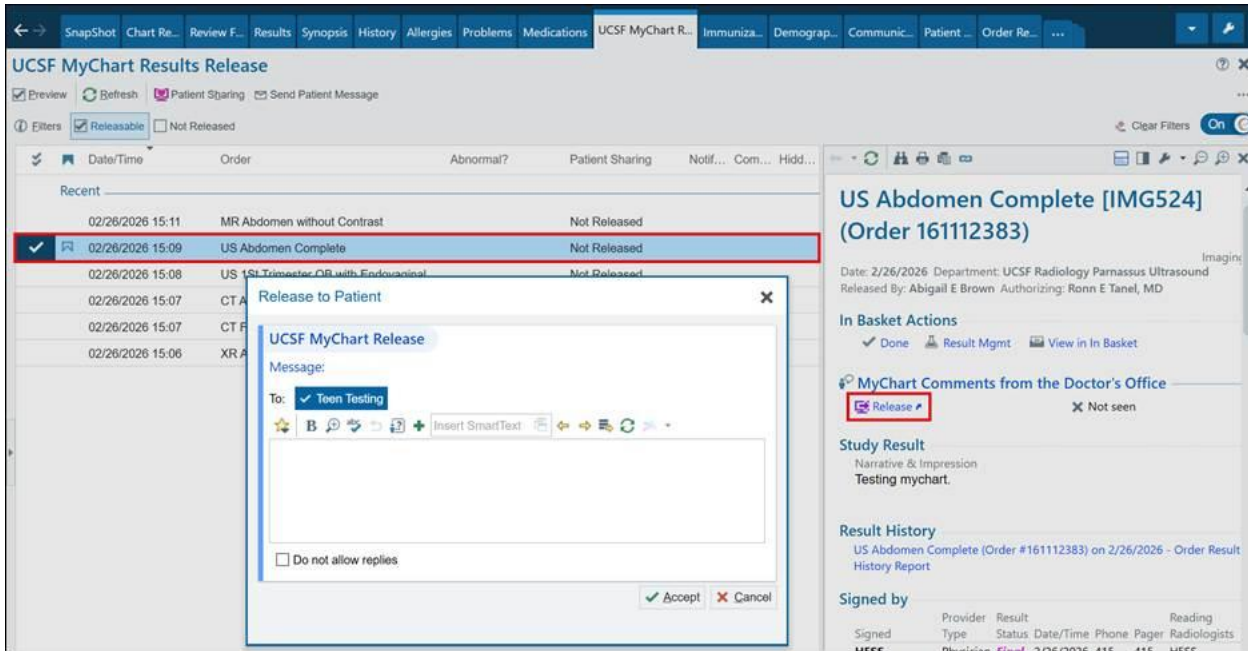
- The encounter involves a procedure specifically related to pregnancy or sex organ evaluation.
- The procedure was ordered during a private encounter.

In these cases, registration staff can mark the encounter as private.

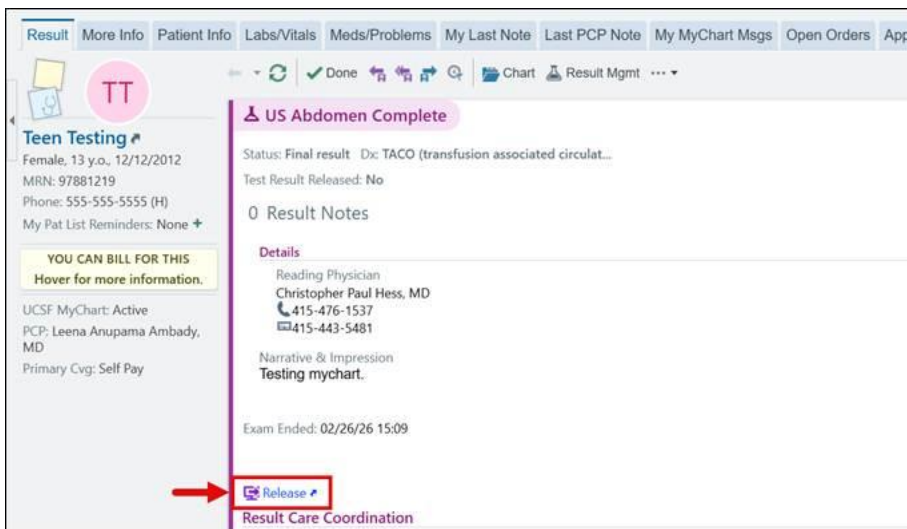
Results

Radiology results will not automatically release in MyChart for procedures that may contain sensitive information (e.g., related to pregnancy, contraception, or sexual health). However, clinicians now have the ability to:

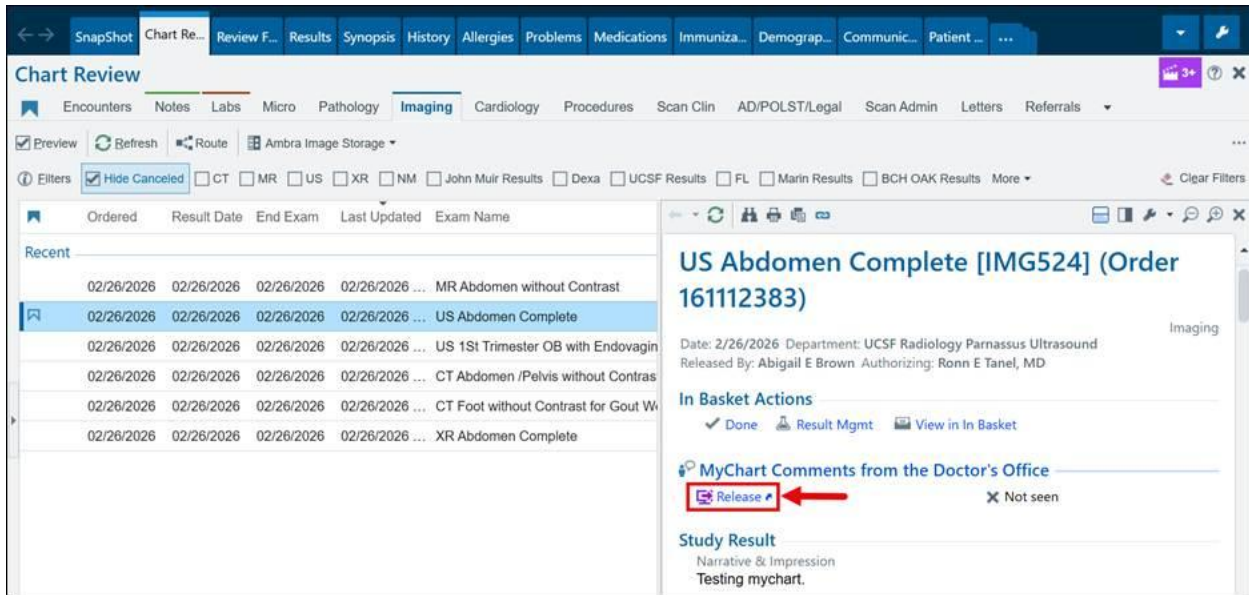
- Manually release results after confirming they do not contain sensitive information.
- Use a variety of workflows to release results, including:
 - MyChart Result Release Activity



- In Basket Message Results Release



- Chart Review (Imaging Tab)



Key Considerations for Clinicians

- Information shared with adolescent patients in MyChart is also visible to proxies.
- MyChart messages sent with a result are visible in the Result activity for both patients and proxies—even if the message was sent to one or the other.

Informaticist: Hailey Choi, Julie O'Brien, Marc Kohli, Nicole Ling, Mike Lang; SME: Anne Kroeger; Analyst: Abby Brown, Ian Shaw

Clearer Privacy Indicators in Chart Review

Audience: All Users

Reason for Change: To make privacy-related indicators consistently visible in Chart Review

Brief Description & Workflow: The privacy indicators across Chart Review are being standardized to improve clarity and reduce guesswork. This change allows users to confirm whether an encounter is private, whether a note has been shared, and what content may be visible in MyChart or Care Everywhere.

Encounter-related tabs will have a **Private?** column added:

Chart Review

Encounters Notes Labs Micro Pathology Imaging Cardiology Procedures Scan Clin AD/POLST/Legal Scan Admin Consents Meds Other Orders Episodes

Preview Refresh Route Encounter Clinical Insights OneContent

Filters Default filter Obstetrics and Gynec... A3 L&D MB Admissions Anesthesia Surgeries Communications

⚠ Not all records have been loaded and sorted. Load remaining records to sort all records. Load Additional Records Hide

When	Type	With	Description	Private?	B...	Open/Closed
6 Months Ago						
07/30/2025	Prepare T...	BCH OAK PREANESTHESIA TESTING		No		
07/30/2025	Orders Only	BCH OAK OPC. ORTHOPAEDICS - Kirkwood, K	Headache around the eyes (Primary Dx)			Open
07/16/2025	Anesthesi...	BCH OAK MRI	MR ABDOMEN WITHOUT CONTRAST			Open
07/16/2025	MRI Seda...	BCH OAK MRI	Headache around the eyes	Yes		
03/24/2025	Office Visit	BCH OAK EIS/CARE - Cantrell, S		Yes		Open

Note-related tabs will have a **Shared with Patient?** column added:

Chart Review

Encounters Notes Labs Micro Pathology Imaging Cardiology Procedures Scan Clin AD/POLST/Legal Scan Admin Consents Letters Referrals Anesthesia Meds

Preview Refresh Route Edit Note

Filters Default filter Me A3 L&D MB ED H+P's DC Summ Op Reports Provider Notes IP Amb

Service Date	Author	Author Type	Cosigner	Share with Patient?	Department	Service	Provider Specialty	Status
1 Year Ago								
01/28/2025 0...	Lee, Sue J, PharmD	Pharmacist		Yes	GI MZ			Signed
10/25/2024 0...	Matsuda, Kent Masas...	Physician		Yes	MZ 4 WEST ICU		Internal Medicine	Signed
2 Years Ago								
10/17/2023 1...	Me			No	MZ 4 WEST ICU	Hospital Medicine		Addendum

Order-related tabs (e.g., Procedures, Imaging, Pathology, etc.) will have a **Patient Sharing** column added:

Chart Review

Encounters Notes Labs Micro Pathology Imaging Cardiology Procedures Scan Clin AD/POLST/Legal Scan Admin Consents Letters Referrals Anesthesia Meds Other Orders

Preview Refresh Route Ambra Image Storage

Filters Hide Canceled CT MR US XR NM John Muir Results Dexa UCSF Results FL Marin Results BCH OAK Results Kaiser Results Active Orders Ordered / Future Final H...

Ordered	Result Date	End Exam	Last Updated	Exam Name	Status	Patient Sharing	Ordering Provider	Resulting Ag...
1 Year Ago								
02/07/2025	02/07/2025 ...			XR Chest 1 View AP	Ordered	Not Released	Nevitt, Adam W, MD	UCSF RAD
09/26/2024	09/26/2024 ...			MR Brain with and without Contrast	Ordered	Not Released	Byron, Maria Elizabeth, ...	UCSF RAD

SME/Informaticist: Julie O'Brien, Mike Lang, Aris Oates; Build Analyst: Anne Kroeger

Access Appointment Requests Directly from In Basket

Audience: West Bay, East Bay, Marin, Community Affiliates

Reason for Change: To streamline the process of opening and editing Appointment Requests directly from Referral Triage In Basket messages, reducing the need for multiple clicks.

Description & Workflow:

Users can now efficiently access and edit Appointment Requests directly from the Referral Triage In Basket message.

1. Open the **Referral Triage** message in your In Basket.

2. Scroll to the bottom of the message.
3. In the new *Order Information* section, click the “**Open Request**” hyperlink to access and make edits to the Appointment Request, including adding record prep tasks as needed.
4. This improvement simplifies navigation and enhances productivity for users managing referral triage tasks.

Order Information

Encounter Summary

Order Details

Procedure:	AMB REFERRAL TO MALIGNANT HEMATOLOGY
Associated diagnosis:	D47.2 (ICD-10-CM) - MGUS (monoclonal gammopathy of unknown significance)
Date:	2/12/2026
Provider:	Lauren Bach Phinney, MD
Department:	GEN MED MZ 1545 2

Notes

- Office Visit with PHINNEY, LAUREN BACH (Progress Notes)
- Office Visit with PHINNEY, LAUREN BACH (Patient Instructions)

Open request

SME: Samantha Kahn. Build Analyst: Frank Meyers

Disable Patient Lookup by Historical MRN

Audience: All UCSF Locations and Affiliates

Reason for Change: Certain ID types are causing overlapping patient search results, resulting in more than one patient being returned.

Description & Workflow: The ability to look up a patient by historical MRNs is being disabled. For additional information, please review the [Important Change to Patient Lookup Functionality](#)

Hazardous Medication and Reproductive Toxin Storyboard Banner

Audience: All Users

Reason for Change: The Hazardous Medication and Reproductive Toxin Storyboard banner has been enhanced to provide clearer, more actionable information at the point of care.

Description & Workflow: When a hazardous medication or reproductive toxin is administered, the Storyboard banner will now display:

1. The specific medication name
2. The date and time of administration
3. Clear, actionable safety instructions related to handling, exposure precautions, and required protective measures
4. Links to UCSF policies and procedures

Hazardous Medication(s)
High risk/security alert

CUCINA, RUSSELL JOSEPH, MD
ATTENDING

Allergies: No Known Allergies

Abilities Not Screened

ADMITTED: 7/10/2024 (589 D)
Patient Class: Inpatient
Expected Discharge: 157 d ago
Problem List: Low cardiac uptake of iodine-131-metaiodobenzylguanidine on scintigraphy
CrCl: No successful lab value found.

Ht: —

Warning! Don appropriate personal protective equipment (PPE)

This patient has received a hazardous medication within the time frame shown below.

If you are handling body fluids, **WEAR** appropriate gloves, disposable gowns, and eye protection as outlined in the Hazardous Safe Handling guidelines (see links below).

Hazardous Medications Administered in the Past 2 Days

Administered	MAR Action	Medication	Dose	Rate	Visit
02/19/2026 09:20	New Bag	cytarabine (PF) (CYTOSAR) 150 mg in dextrose 5% 500 mL chemo infusion	150 mg	20.8 mL/hr	ED to Hosp-Admission (Current) (ADMIT) on 07/10/2024 in 6E/6N Bridge Unit

[UCSF Hazardous Medication Safe Handling Policy](#)
[UCSF Personal Protective Equipment Policy](#)

Hazardous Medication example

Reproductive Toxin Medication(s)
High risk/security alert

CUCINA, RUSSELL JOSEPH, MD
ATTENDING

Allergies: No Known Allergies

Abilities Not Screened

ADMITTED: 7/10/2024 (589 D)
Patient Class: Inpatient
Expected Discharge: 157 d ago
Problem List: Low cardiac uptake of iodine-131-metaiodobenzylguanidine on scintigraphy
CrCl: No successful lab value found.

Ht: —

Warning! Don appropriate personal protective equipment (PPE)

This patient has received a medication within the last 48 hours that may have reproductive toxicity or have unwanted reproductive effects.

If you are handling body fluids, **CONSIDER** wearing appropriate gloves, disposable gowns, and eye protection as outlined in the Hazardous Safe Handling guidelines (see links below).

Reproductive Toxin Medications Administered in the Past 2 Days

Administered	MAR Action	Medication	Dose	Rate	Visit
02/19/2026 09:22	Given	erlotinib (TARCEVA) tablet 25 mg	25 mg		ED to Hosp-Admission (Current) (ADMIT) on 07/10/2024 in 6E/6N Bridge Unit

[UCSF Hazardous Medication Safe Handling Policy](#)
[UCSF Personal Protective Equipment Policy](#)

Reproductive Toxin Medication example

Informaticist/SME: Amy Kuwata, MSN, RN, NI-BC, CNS, John Kapisarov, PharmD; Analyst: William Hung, PharmD

MMR Vaccine Product is Being Transitioned from MMR-II to Priorix

Audience: UCSF Nursing and Pharmacy

Reason for Change: The MMR vaccine product is being transitioned from MMR-II to Priorix. APeX medication orders will be updated to reflect the new product.

Description & Workflow:

1. Reconstitution is still required prior to administration.

Unlike MMR-II (which came with two vials), Priorix packaging includes:

- One single-dose vial containing the lyophilized (powder) live antigen component
- One single-dose prefilled syringe containing sterile water diluent

2. Nursing Reminder:



Alert: Please ensure the vaccine is properly reconstituted using the provided prefilled diluent syringe prior to administration. Carefully review the packaging, as the diluent is now supplied in a syringe rather than a vial.

SME: Elise Wozniak, PharmD; Informaticist: John Kapisarov, PharmD; Analyst: Vincent Le, PharmD

New Order Panel – Heparin (Adult) Prophylactic Dosing

Audience: Adult Patients and Clinicians

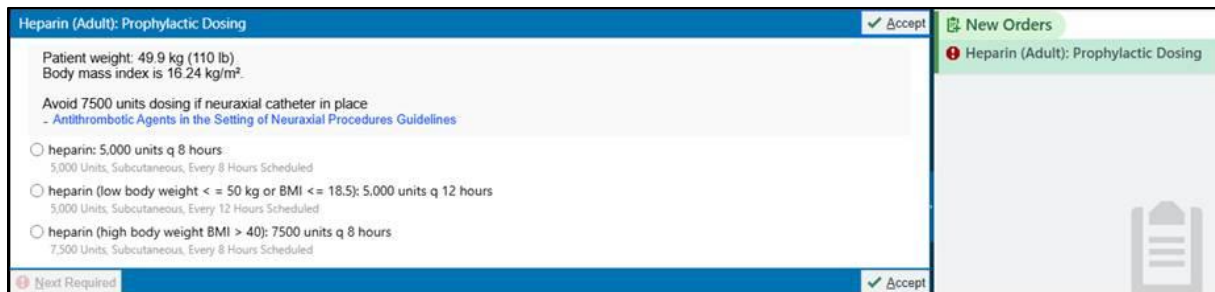
Reason for Change: Ordering heparin for adult DVT prophylaxis has been challenging due to:

- Difficulty locating the correct prophylactic concentration (5,000 units/0.5 mL)
- Limited embedded clinical decision support (CDS) within the order workflow

This has created inefficiencies and potential variability in ordering practices.

Description & Workflow: A new standardized order panel titled “*Heparin (Adult): Prophylactic Dosing*” has been created to streamline ordering and improve patient safety:

- It is now one of the first selectable options when searching for prophylactic heparin orders
- The panel includes integrated clinical decision support to guide appropriate ordering



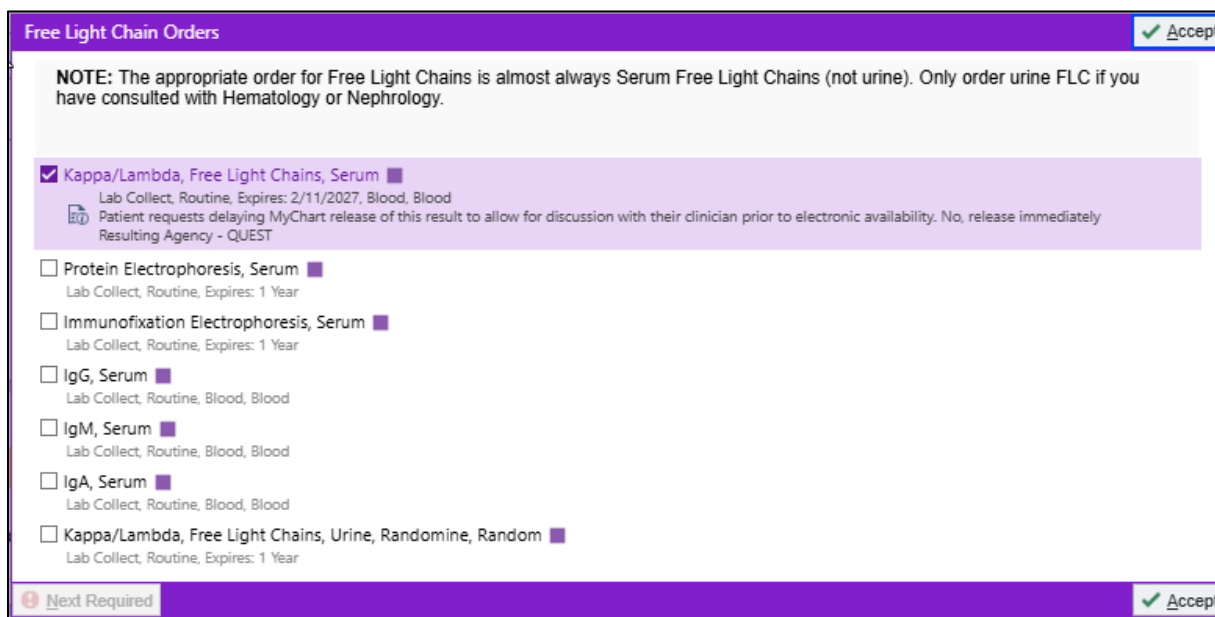
SME: Dexter Wimer, PharmD, BCCCP, Mike Trillanes, PharmD, BCCCP, Althea Han, PharmD, BCPS; Informaticist: John Kapisarov, PharmD; Analyst: Rajeev Sawhney, PharmD

Update to Free Light Chain (FLC) Lab Ordering in Preference Lists

Audience: All Users

Reason for Change: To reduce inappropriate ordering of urine free light chain testing and align ordering workflow with current best practice.

Brief Description & Workflow: The urine free light chain test KAPPA/LAMBDA LIGHT CHAINS, FREE WITH RATIO, URINE, RANDOM [LAB3413] has been removed from system preference lists. It has been replaced with the consolidated FLC panel (UCSF AMB LAB FREE LIGHT CHAIN ORDERS [O1168668]). Within the panel, Serum FLC [LAB3195] is the default selection. Urine FLC remains available but must be intentionally selected within the panel.



For more information on this change, please see the [Upcoming Change to Urine Free Light Chain \(FLC\) Orders](#) communication.

Informaticists: Dr. Katie Grouse and Dr. Raman Khanna; Build Analysts: Reynold Lee (AMB), Mathew Doell (Orders)

IVIG Lot and Expiration Requirement

Audience: All RNs, Pharmacists

Reason for Change: To ensure documentation of lot and expiration for IVIG products, these fields on the MAR will now be required for selected MAR actions.

Description & Workflow: The *Lot #* and *Expiration* must be documented for all blood derived products, such as IVIG. The flowsheet rows on the MAR for this documentation will now be required when documenting the action of *New Bag* to ensure this information is captured.

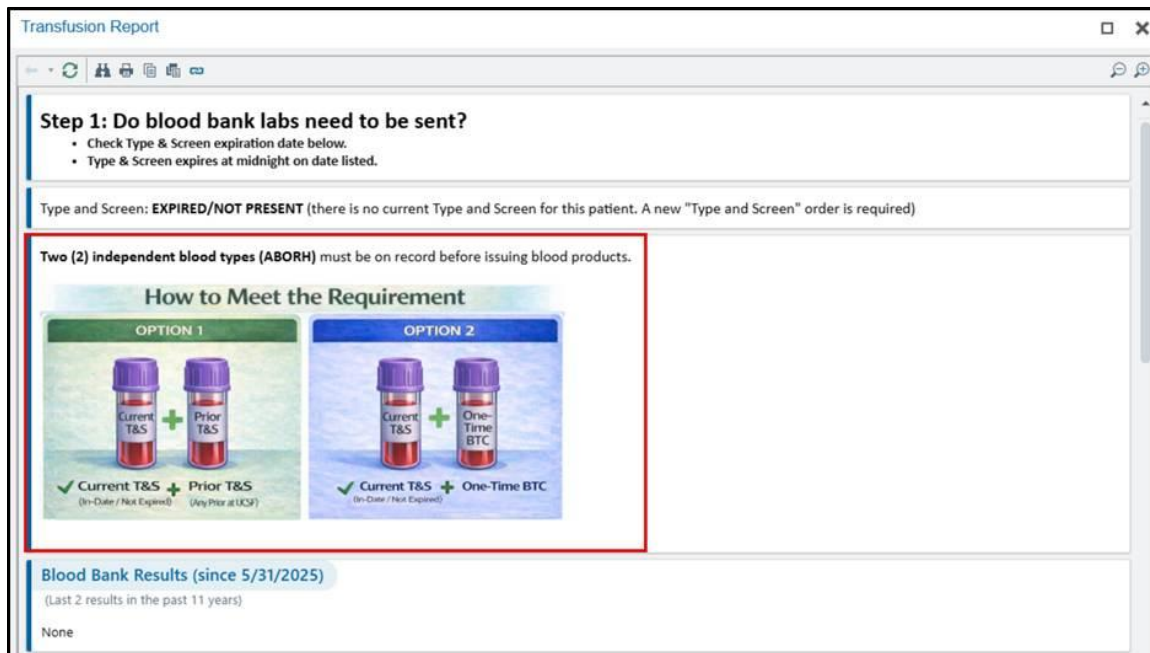
Informaticist: Jordan Lorenz, RN, Allison Pollock, PharmD; Analyst: Zhi Liang

Update to Transfusion Report: Blood Draw Requirements

Audience: Ambulatory Nurses

Reason for Change: Clarification was needed to better explain pre-transfusion blood draw requirements and specimen collection expectations for nursing staff.

Description & Workflow: A visual reference has been added to the Transfusion Report to guide RNs on required blood draws prior to blood administration and to support accurate specimen collection.



Informaticist/SME: Amy Kuwata; Analyst: Aleli Phung

Initial APeX Training for Nurses Moving to Amplifire

Audience: Nursing & Operational Leadership

Reason for Change: To modernize APeX training with an adaptive, self-paced learning model that improves efficiency and supports a consistent level of APeX knowledge.

Brief Description & Workflow: Initial APeX training for nurses is moving to Amplifire, an adaptive learning platform that adjusts to each learner. This change will phase out current instructor-led and group-based training for a more flexible format that can be completed independently.

Starting in April, new nurses in Ambulatory, ED, Inpatient, and Perioperative areas will complete their initial APeX training in Amplifire. Additional nursing specialties and roles will transition in phases. This update is intended to reduce time away from clinical work, improve accessibility, and help ensure a standard baseline of APeX knowledge across nursing roles.

SME: Health IT Training & Education Center of Excellence

Closure of Shattuck Training Classrooms

Effective July 1, 2026, all APeX training sessions will transition from the Oakland Shattuck facility to our San Francisco Embarcadero location. Moving forward, all training programs **will be held exclusively at the Embarcadero site**.

Please note the following:

- The training schedule and cadence will remain unchanged.

- The LMS will be updated to reflect the new location, ensuring teams have access to the latest information.

We kindly ask that you share this update with your teams and plan accordingly. Should you have any questions or require additional support, please don't hesitate to contact us at ApexTraining@ucsf.edu.

Thank you for your cooperation as we navigate this transition.

SME: Health IT Training & Education Center of Excellence

Rover Access for Practice Managers, CRCs, and MAs

Audience: Practice Managers, Clinical Research Coordinators, and Medical Assistants

Reason for Change: To standardize Rover access for additional roles

Brief Description & Workflow: Practice Managers, Clinical Research Coordinators, and Medical Assistants can now use Rover for their mobile work. While Rover is not a full substitute for APeX, users can view schedules and complete some documentation. For more information on Rover, please see this [Introduction to Rover slide deck](#).

SME/Informaticists: Tip Tilton, Katie O'Connor; Build Analysts: Tara Crandall, Brandon Wade

Referral Updates

Audience: All Users

Reason for Change: To standardize and consolidate referrals for ease of user lookup and system maintenance.

Brief Description & Workflow: The referral standardization team is working with various groups to improve referrals. The referral standardization will be an ongoing effort with multiple specialty referrals going live each month.

Updated referrals:

- Referral to Burn [REF204]

Referral Improvements include:

- Consolidation of referrals by specialty, subspecialty, discharge, and different referrals based on location (UCSF, BCH Oakland, MarinHealth, etc.)
- Standardization of referral workspace
- Includes enhanced feature: sidebar guidance with instructions of when and how to get the patient referred
- Improves the referral and decision tree workflow



Note: Locate referral orders by searching “Referral To” without additional qualifiers such as “Amb” or “Discharge”

Review the [Referrals to Specialty Standardization](#) Tip Sheet for more information about the referral standardization efforts.

Informaticist/SME: Laura Hill-Sakurai, MD, Nicole Ling, MD, Lisa DeAngelis and Specialty SMEs; Analyst: Ambulatory and Patient Access Teams

Reporting Office Hours

APeX Reporting Team members and EIA are hosting Office Hours monthly. Get answers to your questions on APeX Reporting content and workflows, and Tableau Dashboards. This is a forum to provide end users with immediate training support, there is no set agenda, however we do provide a Reporting Tip each session. Below is the upcoming schedule for Office Hours:

[APeX Reporting Office Hours Meeting Link](#)

Date	Time
March 5, 2026	12:10 pm - 1:00 pm
March 19, 2026	12:10 pm - 1:00 pm
April 2, 2026	12:10 pm - 1:00 pm
April 16, 2026	12:10 pm - 1:00 pm

Audience Legend

All Users: All APeX Ambulatory Users at any location, including Stanyan and Hyde




MarinHealth: UCSF MarinHealth Clinics

Community Affiliates: Community Clinics that use APeX





UCSF: All UCSF locations in San Francisco; including UCSF Benioff Children's clinics in Oakland and Mission Bay.

BCH: Benioff Children's Hospital-Oakland and Mission Bay (Pediatric Specific Changes)

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-  See [Inpatient Provider Announcements](#)↗

Need APeX Training or Resources?

-  Find upcoming classes in the [APeX New Hire Training Schedule](#)↗
-  Browse guides and tip sheets in our [APeX Knowledge Bank](#)↗
-  Stay current on upgrades and events at the [APeX Hub](#)↗
-  Still have questions? Connect with the us directly at ApeXTraining@ucsf.edu↗

Disclaimer: You are receiving this monthly update because your APeX access includes Ambulatory security. This may involve responsibilities such as reviewing patient charts, rooming patients, placing orders, writing notes, documenting in encounters, or supporting staff with Ambulatory workflows. The content in this update is provided for educational and informational purposes.

Always Remember Your Responsibilities for Use for the Electronic Health Record

APeX is the legal electronic health record for patients at the UCSF Medical Center. All users have the following responsibilities:

- Assure that all information is entered correctly and accurately and within your scope of practice.
- Stay up to date on changes in APeX.
- Follow all UCSF Policies & Procedures on use of the electronic health record.
- Report any issues or problems to your manager and/or IT Service Desk at (415) 514-APeX (2739).