

## Inpatient Provider Updates - August 2026

### Inpatient Provider

#### *In this edition:*

|                                                                                              |    |
|----------------------------------------------------------------------------------------------|----|
| Parn PICC Ordering/Consult Ordering Changes .....                                            | 2  |
| Discharge Readmit –Transferring Patients for OR Cases .....                                  | 4  |
| Conditional Discharge for Pediatric Hematology/Oncology .....                                | 5  |
| OPA for Oral Chemo e-Consent .....                                                           | 7  |
| Document Type Updates .....                                                                  | 8  |
| Wound Care Standard Treatments Order Panel .....                                             | 9  |
| Order Placement in on-the-fly Encounters has been disabled for Research SVC Department ..... | 11 |
| APeX Reporting Office Hours .....                                                            | 12 |
| Audience Legend .....                                                                        | 12 |
| Training Resources & Staying Updated .....                                                   | 13 |
| Want the Latest APeX Updates? .....                                                          | 13 |
| Need APeX Training or Resources? .....                                                       | 13 |

# Parn PICC Ordering/Consult Ordering Changes

**Audience:** UCSF

**Reason for Change:** To simplify PICC and VAST ordering, reduce incorrect order selection, and improve patient safety by guiding providers to the appropriate ordering workflow.

**Description & Workflow:** To simplify ordering and reduce incorrect order selection, updates have been made to the PICC, Midline, and VAST consult workflows.

## Parnassus (Parn):

- A new Inpatient Adult Vascular Access Specialist Team (VAST) Consult Order Set has been created.

Orders

Inpatient Adult Vascular Access Specialist Team (VAST) Consult aka PICC Team

Adult VAST Consult

1. Insert a Peripherally Inserted Central Catheter (PICC) – for chemotherapy, TPN, vasopressors, inotropes, vesicant therapy.\*
2. Insert a Midline (for non-vesicant therapy\*, <30 days, not reliable for lab draws).
3. Evaluate or Troubleshoot an existing PICC or Midline (already in place).

- [\\*UCSF VAST Flowchart Decision Support](#)

General

Inpatient Adult Vascular Access Specialist Team Consult aka PICC Team

- ☐ Insert a PICC
- ☐ Insert a Midline
- ☐ Evaluate Line in Place

Additional SmartSet Orders

- The Inpatient Consult to VAST (CON33) order can now only be placed from this new Order Set.
- A Clinical Decision Flowchart hyperlink (in red) is available for choosing the appropriate vascular access device
- In the Special Considerations order, a new option for *Today* was added to help VAST facilitate same-day discharges

PICC Line Special Considerations

Priority: Routine

Pacemaker/AICD ☐ Left Chest ☐ Right Chest

Implanted Port

Mastectomy ☐ Right ☐ Left

Lymph Node Dissection ☐ Left ☐ Right

Extremity to be utilized for PICC line

GFR<15 and/or dialysis patient?

Other

Discharge pending?

Blood Culture pending <48 hours?

Comments:

## Mount Zion (MZ) and Mission Bay (MB):

- The Inpatient Consult to VAST (CON33) order can now only be placed from the “Inpatient Consult to Adult RN PICC Team” panel.
- The following Order Sets have been restricted for use at MZ and MB:
  - IP Adult Midline Orders
  - IP Adult PICC Order

| Order Sets, Panels, & Pathways |                                                            |            |                  | Search order sets and panels by user |            |        | (Alt+1) |
|--------------------------------|------------------------------------------------------------|------------|------------------|--------------------------------------|------------|--------|---------|
|                                | Name                                                       | Notes      | Pref List        | Type                                 | Code       | ID     |         |
|                                | IP Adult Midline Orders                                    |            |                  | Order Set                            |            | 2675   |         |
|                                | IP Adult PICC Orders                                       |            |                  | Order Set                            |            | 688    |         |
|                                | IP PED PICC Insertion Orders                               | NOTE: T... |                  | Order Set                            |            | 1486   |         |
|                                | MZ/MB Only - Inpatient Consult to Adult RN PICC Team (...) |            | UCSF IP FACIL... | Order Panel                          | O304042119 | 531538 |         |

*Informaticist/SME: Craig Johnson, Raman Khanna, Bradley Monash, Michele Nomura*

*Analyst: Michele Souigny*

## Discharge Readmit –Transferring Patients for OR Cases

**Audience:** UCSF, Stanyan & Hyde

**Reason for Change:** Given the need to transfer patients between hospitals on different campuses for surgeries or other procedures, we have developed the optimal workflow to ensure the surgery is scheduled in a timely manner and PCMC and the receiving admitting team is notified about the transfer. This explains the workflow for transferring a patient to a facility with a different license for their surgery.

**Description & Workflow:** A standardized workflow is available for adult surgical transfers between UCSF Health hospital licenses for inpatient surgeries where the patient will stay at the receiving facility after transfer. This process helps ensure seamless coordination across clinical teams while supporting safe patient transport, accurate documentation, and appropriate billing.

AMB ADULT Preop Case Request and Preop Orders - Generic Manage User Versions

▼ Case Request

▼ Case Request

☒ Case Req /Admit to Periop ✓ Accept ✗ Cancel

Location:

Patient Class:

Case Classification:

Will patient require bed after PACU?

Postoperative Acuity Level:

For more information, review the [Discharge Readmit Workflow for OR Cases Between Facilities - INP](#) tip sheet.

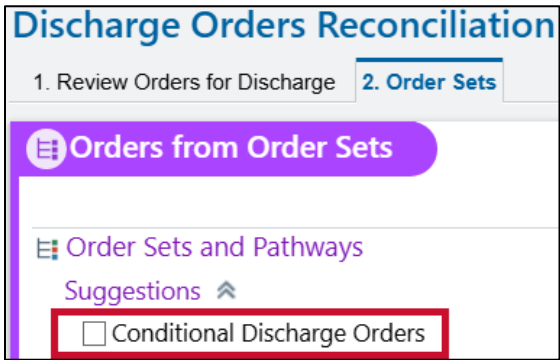
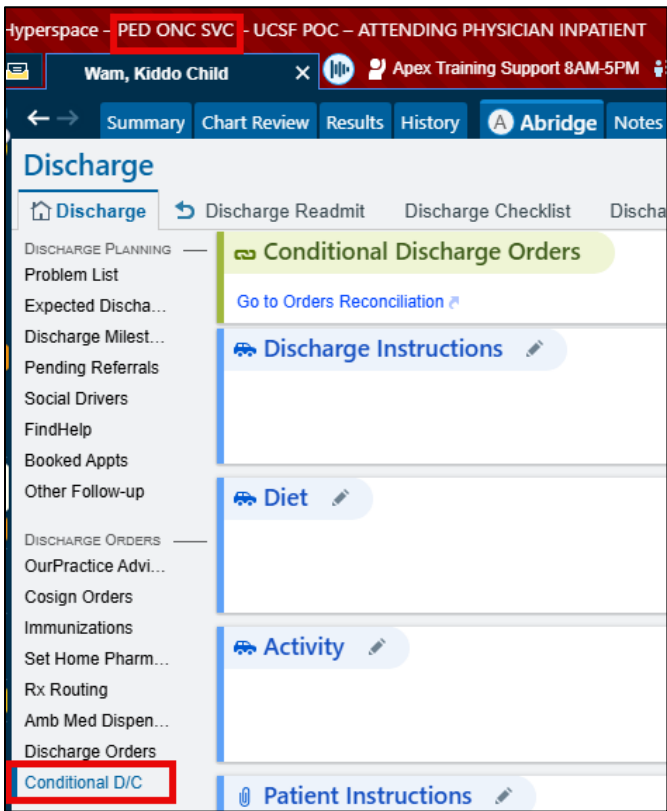
*Informaticist/SME: Michelle Mourad, MD; Analyst: Matt Doell*

# Conditional Discharge for Pediatric Hematology/Oncology

**Audience:** BCH, Stanyan & Hyde (Pediatric Hematology/Oncology)

**Reason for Change:** Expanding existing functionality to additional service line of Pediatric Hematology/Oncology.

**Description & Workflow:** Providers logged into the *PED HEM SVC*, *PED ONC SVC*, or *ADOLESCENT MEDICINE SVC* will now see the **Conditional D/C** (Conditional Discharge) section in the *Discharge* navigator. This section provides access to the **Conditional Discharge Orders** Order Set, which includes the conditional discharge order and Pediatric Hematology/Oncology-specific discharge parameters.



**Discharge Conditions** [Accept] [Cancel]

Priority:  **Routine**

Frequency:  **Once** **Continuous** **PRN**

Starting: 7/24/2026 **Today** **Tomorrow** For: 12 **Hours** **Days** **Weeks**

At: 1505

Starting: **Today 1505** Ending: **Tomorrow**

Estimated Discharge Date:

Comments: This is not a discharge order. The discharge order has been Signed and Held and must be released when the discharge conditions are met.

Conditional Discharge Criteria for:

- ☐ Medical Patient
- ☐ Surgical Patient
- ☐ HemOnc Patient

The Comments field contains unfiltered variables ( ) or SmartLists.

Next Required [Accept] [Cancel]

☐ Afebrile: Temp within defined limits for at least 24 hours without antipyretics

☐ Vitals: Vital signs (Not including temp) within defined limits per ordered parameters for the past 8 hours

☐ Oxygen: Maintaining oxygen saturation on room air >  while awake for at least  (including a period of sleep)

☐ Work of Breathing: Respiratory rate within defined limits for per ordered parameters and no use of accessory muscles with respiration

☐ Labs: Absolute Neutrophil Count (ANC) >= \*\*\*mu/L today

☐ Labs: Hemoglobin (Hgb) >= \*\*\* g/dl (today, post transfusion, \*\*\* (Date/ time)

☐ Labs: Platelets >= \*\*\* cells/10E9 (today, post transfusion, \*\*\* (Date/ time)

☐ Labs: Methotrexate Level: <= \*\*\* micromoles/L on \*\*\* (Date/ time)

☐ Labs: Any labs ordered for the day of discharge have been drawn, do not need to wait for labs to result prior to discharge

☐ Chemo: After scheduled IV chemotherapy and post chemo hydration completed (and any necessary monitoring per protocol)

☐ Transfusion: After Transfusion of \*\*\* (blood product) completed (and any necessary monitoring per protocol)

☐ Meds completed: After  dose of \*\*\* is completed (and any necessary monitoring per protocol)

☐ Education: (CVC including competency with flushing/ lab draw if applicable, New diagnosis, Discharge medication, APP/ RN CM Discharge Counselling, \*\*\*)

☐ Home Medication: Discharge medications at bedside

☐ Home Blina: Home blinatumomab connected and infusing

☐ DME: Case management has coordinated pertinent discharge DME/ infusion

☐ Physical Therapy: PT has cleared patient for discharge

☐ Transport: Transportation to home available

☐ Other: \*\*\*

RNs will see the *Discharge Conditions Satisfied* section, where they can indicate that conditions have been **Satisfied** and release the signed and held discharge orders in the *Release Orders* section.

Admission Shift Transfer **Discharge** Discharge - Interfacility Discharged

DISCHARGE

OurPractice Adv...

Review D/C Conds

DC Condition

Release Orders

Discharge Milest...

Review D/C Dispo

Final D/C Dispo

Homeless Disch...

Outstanding Imm...

MAR Link

Running Infusions

LDA Removal

Review D/C Orders

Patient Belongings

Patient Belongin...

PLAN OF CARE

**Discharge Conditions Satisfied**

Time taken:   Responsible:  Create

**Conditional Discharge**

Conditional Discharge (select only if applicable)

**Satisfied** NOT Satisfied

Create Note

Restore Close Cancel

**Release Orders**

[Click Here for Signed and Held Orders](#)

SME: Manisha Israni-Jiang, Jewelyn Alcantar, Yves Valdez; Analyst: Sarah Kohut

# OPA for Oral Chemo e-Consent

**Audience:** UCSF

**Reason for Change:** Ensure patients have required consent on file for oral chemotherapies.

**Description & Workflow:** Patients are required to have a documented consent when receiving cancer directed therapy. To support this requirement for oral medications, an OPA alert will appear in APeX when oral cancer directed therapy has been ordered, and no e-consent is on file within the chart. Prescribers should ensure risk conversations have occurred with the patient and complete the documentation, as prompted in the alert.

OurPractice Advisory -

Important (1)

Missing Consent for Oral Chemotherapy

 REMINDER - For oncology use of this medication, please ensure consent has been obtained and documented within the patient's chart.

Go to the activity

☐ Go to: Visit Navigator [Go now](#)

Acknowledge and continue

☐ Consent will be documented

☐ Non-oncology use – No Consent Needed

☐ Emergency first dose

☐ Other

Accept

Cancel

Informaticist: Allison Pollock, PharmD, Huat Lim, MD; SME: Alan Chin, PharmD; Analyst: Rajeev Sawhney, PharmD

Inpatient Provider Updates - August 2026

7

Want the Latest APeX Updates?

© 2026 Epic Systems Corporation & The Regents of the University of California. This material should be stored securely and may not be distributed or reproduced publicly.

## Document Type Updates

**Audience:** All Roles

**Description & Workflow:** This update streamlines document management by standardizing existing document types. It includes consolidating naming conventions, deactivating duplicate or outdated records, and aligning practices across UCSF and BCH Oak environments

*SME: Hope Johnson; Build Analyst: Alexandria Linares*

**All existing documents will remain in the system under their original naming conventions. However, if a document type change only removes a location descriptor, those documents will now appear using the simplified document name only.**

### Document types with a new name

| Current Doc Type Name- AUGUST RELEASE    | Updated Doc Type Name             | Level     | Doc Type ID | Status      | Replacement Document if the original Document is deactivated | Replacement Doc Type ID |
|------------------------------------------|-----------------------------------|-----------|-------------|-------------|--------------------------------------------------------------|-------------------------|
| Medicare OP OBS Notice-MOON (UCSF)       | Medicare OP OBS Notice-MOON       | Encounter | 200315      | Active      |                                                              |                         |
| NOFO NOFI Billing Records (UCSF)         | NOFO NOFI Billing Records         | Encounter | 200126      | Active      |                                                              |                         |
| Non-Photo ID (UCSF)                      | Non-Photo ID                      | Encounter | 200100      | Active      |                                                              |                         |
| NoSurpriseAct Disclosure Notice (UCSF)   | NoSurpriseAct Disclosure Notice   | Patient   | 200349      | Active      |                                                              |                         |
| NoSurpriseAct Disclosure Notice(BCH OAK) |                                   |           | 500053      | Deactivated | NoSurpriseAct Disclosure Notice                              | 200349                  |
| Out of State MD to MD Consult (UCSF)     | Out of State MD to MD Consult     | Patient   | 200357      | Active      |                                                              |                         |
| Out of State MD to MD Consult (BCH Oak)  |                                   |           | 500058      | Deactivated | Out of State MD to MD Consult                                | 200357                  |
| Pediatric Conservatorship (UCSF)         | Pediatric Conservatorship         | Patient   | 200328      | Active      |                                                              |                         |
| Pediatric Court Order (UCSF)             | Pediatric Court Order             | Patient   | 200325      | Active      |                                                              |                         |
| Pediatric Custody Order (UCSF)           | Pediatric Custody Order           | Patient   | 200326      | Active      |                                                              |                         |
| Pediatric Guardianship (UCSF)            | Pediatric Guardianship            | Patient   | 200327      | Active      |                                                              |                         |
| Pediatric Protective Order (UCSF)        | Pediatric Protective Order        | Patient   | 200330      | Active      |                                                              |                         |
| Pediatric Third Party Consent (UCSF)     | Pediatric Third Party Consent     | Patient   | 200329      | Active      |                                                              |                         |
| Photo ID (UCSF)                          | Photo ID                          | Encounter | 100000      | Active      |                                                              |                         |
| Photo ID (BCH Oak)                       |                                   |           | 500031      | Deactivated | Photo ID                                                     | 100000                  |
| Pt Agreement - Financial Resp (UCSF)     | Pt Agreement - Financial Resp     | Encounter | 200109      | Active      |                                                              |                         |
| Statement Of Disagreement (UCSF)         | Statement Of Disagreement         | Patient   | 300318      | Active      |                                                              |                         |
| Consent - Chemotherapy                   | Consent - Cancer Directed Therapy | Encounter | 200378      | Active      |                                                              |                         |

Overall, these enhancements will create a more consistent and controlled document management workflow, improve data integrity, and facilitate more reliable downstream access for Health Information Management (HIM), coding, and clinical teams.

# Wound Care Standard Treatments Order Panel

**Audience:** UCSF, Stanyan & Hyde

**Reason for Change:** To align with the new nursing Wound and Skin Care Guidelines.

**Brief description & workflow:** Nurses and providers can now place the new Wound Care Standard Treatments order panel, which replaces the partial-thickness wound care order.

Select a separate order for each type of uncomplicated wound in the panel.

| Wound Care Standard Treatments                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ⌵        | ✓ Accept |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|
| <p><b>Use these standardized orders for each type of uncomplicated partial thickness wound. Reserve WOCN consultation for wounds that worsen, fail to improve, or meet consultation criteria.</b></p> <p>- <a href="#">Click here for Wound and Skin Care Guidelines</a></p> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |          |
| <input type="checkbox"/>                                                                                                                                                                                                                                                     | <b>Abrasion/Adhesive Injuries</b><br>Abrasions/Adhesive Injuries: 1. Cleanse with normal saline or wound cleanser and pat dry. 2. If dry, apply petroleum-based topical. If draining, cover with silicone adhesive foam dressing.                                                                                                                                                                                                                                                                                                              |          |          |
| <input type="checkbox"/>                                                                                                                                                                                                                                                     | <b>Blisters</b><br>Blisters: 1. Apply skin protectant or petroleum-based topical. 2. Do not cover blisters, can result in de-roofing of intact blisters. Goal is to maintain intact blisters.                                                                                                                                                                                                                                                                                                                                                  |          |          |
| <input type="checkbox"/>                                                                                                                                                                                                                                                     | <b>Dry/Cracked/Flaking Skin</b><br>Dry/Cracked/Flaking Skin: 1. Cleanse with normal saline or wound cleanser. 2. Pat dry. 3. Apply petroleum-based topical or fragrance-free lotion BID and PRN soiling.                                                                                                                                                                                                                                                                                                                                       |          |          |
| <input type="checkbox"/>                                                                                                                                                                                                                                                     | <b>Erosion</b><br>Erosion: 1. Cleanse with normal saline or wound cleanser. 2. Apply moisture barrier cream or petroleum-based topical BID and PRN soiling. 3. If on scrotum, maintain elevation utilizing InterDry textile sheet into fold with 2 inches exposed to wick/evaporate moisture.                                                                                                                                                                                                                                                  |          |          |
| <input type="checkbox"/>                                                                                                                                                                                                                                                     | <b>Intertriginous Dermatitis</b><br>Intertriginous Dermatitis: 1. Cleanse with pH-balanced cleanser. 2. Thoroughly pat dry. 3. Apply InterDry textile sheet into fold with 2 inches exposed to wick/evaporate moisture or if open/draining wounds, apply a thin layer of zinc-based moisture barrier (Z-Guard or Triad) to open wounds. 4. If suspected fungal rash present, request order for antifungal product. Continue for 2 weeks. If not improving, provider referral to dermatology service.                                           |          |          |
| <input type="checkbox"/>                                                                                                                                                                                                                                                     | <b>Irritation/Erosion to Percutaneous Tube Site</b><br>Irritation/Erosion to Percutaneous Tube Site: 1. Perform routine tube-site care per SOC 2. Apply pink Polymem foam (tube shape) with red text facing outward 3. Change daily/PRN, 75% saturated                                                                                                                                                                                                                                                                                         |          |          |
| <input type="checkbox"/>                                                                                                                                                                                                                                                     | <b>MASD</b><br>Irritant Contact Dermatitis with Moisture Associated Skin Damage (MASD): 1. Cleanse with pH-balanced cleanser. 2. Apply barrier cream BID/PRN soiling 3. Avoid diapers/briefs while in bed. 4. Refer to "Wound and Skin Care Guidelines" Appendix B for moisture barrier decision guide. 5. If suspected fungal rash (commonly presents with satellite lesions), request order for antifungal product. Continue for 2 weeks. If not improving, provider referral to dermatology service                                         |          |          |
| <input type="checkbox"/>                                                                                                                                                                                                                                                     | <b>Skin Tear</b><br>Skin Tear: 1. Saturate old dressing with normal saline prior to removal to prevent adherence. 2. Cleanse with normal saline or wound cleanser. 3. If skin flap present, approximate as closely to wound edge as possible. 4. Apply a single contact layer of Xeroform or Vaseline gauze. 5. Cover with sterile gauze if draining or non-adherent layer (Telfa) if dry. 6. On extremities, wrap gently with Kerlix and secure with paper tape (do not tape on the patients skin) 7. Change every other day and PRN soiling. |          |          |
| ⚠ Next Required                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ✓ Accept |          |

Nursing Activities and Treatment

Comment

(From admission, onward)

Start

07/28/26 1123 ▾ **Wound Care Standard Treatments -Right Hand (Wound Care Standard Treatments)** Until Discontinued [Discontinue](#)

Comments: Abrasions/Adhesive Injuries:

1. Cleanse with normal saline or wound cleanser and pat dry.
2. If dry, apply petroleum-based topical. If draining, cover with silicone adhesive foam dressing.

Associated [Wound\(s\)](#): Wound 04/18/26 Hip Anterior;Right

References: [Wound and Skin Care Guidelines](#)

Question: Wound Location: Answer: Right Hand

NURSING

CLINICAL GUIDELINE

## Wound and Skin Care Guidelines

Nursing Clinical Guidelines outline the expected clinical care provided to a patient population or diagnosis, or for a complex therapy. Nursing Clinical Guidelines integrate relevant nursing procedures, standards of care, care plans, and/or patient care orders.

### Table of Contents

- [Purpose](#)
- [Critical Points](#)
- [General Wound Care Principles \(For All Wound Care\)](#)
- [Principles of Dressing Selection](#)

SME/Informaticist: Jonathon Holte, Jennifer Corbell

Analyst: Bruce Pierre

## Order Placement in on-the-fly Encounters has been disabled for Research SVC Department

**Audience impacted:** All Research Users

**Reason for Change:** Aligning Research SVC with the behavior of other SVC Departments. Placing orders for certain medications out of SVCs puts the 340B program at risk.

**Description & Workflow:** Users may no longer place orders through Research SVC. An OPA (Our Practice Advisory) will now trigger anytime a user tries to place orders in on-the-fly encounters that has an SVC Department. There are the two OPA's that will be seen if a user tries to place orders in on-the-fly encounter from an SVC.

- OPA when the encounter first opens: "You will not be able to place orders from this encounter, please close out this encounter and create an on-the-fly encounter with an outpatient clinic as the encounter department."
- Second Sign rule to prevent ordering from these encounters: "Orders cannot be placed on the fly from an SVC. To place ad hoc orders on a patient, create an on-the-fly encounter with an outpatient clinic as the encounter department."



**Note:** You can still place orders in on-the-fly encounters, however you need to create the encounter in your home clinic department.

**Patient Encounter Creation**

Patient  
Alas, Marla-RC [2104310]

Select an Encounter

Date:  
7/30/2026

Type:  
Orders Only

Provider:  
AMPÈRE, COOPER-RC

PCP

Department:

Accept Cancel

*Analyst: Rachel Young, Research; 340B Program Team*

## APeX Reporting Office Hours

APeX Reporting team and EIA Team members are hosting Office Hours monthly. Get answers to your questions on APeX Reporting content and workflows, Tableau Dashboards, Scuba and more. This is a forum to provide end users with immediate training support; This will be an open discussion rather than a meeting with a set agenda. Below is the upcoming schedule for Office Hours:

Join us each month 12:10-1pm

[APeX Reporting Office Hours Meeting Link](#)

| Date            | Time             |
|-----------------|------------------|
| August 6, 2026  | 12:10pm - 1:00pm |
| August 20, 2026 | 12:10pm - 1:00pm |

**RPT: SlicerDicer Overview Instructor Led Training** Need to see the next APeX SlicerDicer Overview class offering? Click [here](#) to see a list of all upcoming APeX SlicerDicer Overview classes.

**RPT: Reporting Workbench Basics Instructor Led Training** Need to see the next APeX Reporting Workbench Basics class offering? Click [here](#) to see a list of all upcoming APeX Reporting Workbench classes

## Audience Legend

**All Users:** All APeX Inpatient Providers at any location

**MarinHealth:** MarinHealth Hospital

**UCSF:** All UCSF locations in San Francisco; including Parnassus, Mt. Zion, and Mission Bay (Adult)

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

**Stanyan & Hyde:** UCSF Stanyan & Hyde hospitals

# Training Resources & Staying Updated

## Want the Latest APeX Updates?

- 🔔 Get monthly news straight to your inbox! Join the [Inpatient Provider ListServ](#)↗
- 🔔 Catch up on previous [Inpatient Provider Updates](#)↗
- 🔔 See [Ambulatory 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 us directly at [apextraining@ucsf.edu](mailto:apextraining@ucsf.edu)↗

**Disclaimer:** You are receiving this monthly update because your APeX responsibilities contain inpatient provider security; including but not limited to: Order Entry, Note Writing, Admitting, Discharge, Transfer, etc. Content in this update is for educational and informational purposes. Please review for latest APeX inpatient provider updates.

### 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).