

December 11, 2019

## General Updates

### Goodbye “Upgrades”: Next Epic Update February 2020

Epic has moved to a quarterly Upgrade Cycle which we, as well as many other Epic organizations, are now calling “Updates.” These Updates reflect a smaller scope of changes compared to the past.

We are planning two Epic Updates next year. The first Update will include two quarterly versions, May and August 2019. Our go-live goal is currently Feb. 15, 2020. The second Update will be announced separately.

### SSM Health – ePrescribing changes to meet new CMS requirements-12/11/2019

The Centers for Medicare and Medicaid Services (CMS) is updating Part D electronic transaction standard. By Jan. 1, 2020, electronic health records are required to have this update in their systems. Changes will be made in Epic to accommodate these requirements.

Users of ePrescribing will not see many changes but may notice inconsistencies with some inline order validation requirements depending on the version the pharmacy is using. Pharmacies do not have the same deadline to make this change. ePrescribing will be unavailable on 12/11/2019 from 6-7 a.m. for this update.

#### Benefits:

- Prescribers no longer need to squeeze their medication instructions into 140 characters or less. The sig character limit has expanded from 140 to 1000. **Any pharmacies who also upgraded their system will accept the longer sigs.**
- Prescribers can process refills for mixtures instead of creating a new prescription each time because the updates support sending and receiving discrete mixture components.
- Prescribers can electronically prescribe controlled substances for patients with international addresses. Note that the patient’s address is required.
- Epic can send their Narcotic Addiction DEA Number (NADEAN) automatically so prescribers no longer need to manually enter this number in the Notes to Pharmacy field.
- Epic can send the language a patient best understands and communicates with to their pharmacy if it has been entered in the patient’s demographics – Preferred Spoken Language. (For SSM HEALTH, currently only English and Spanish will be sent)

New Order Validation requirements

- **Order Validation:** A patient address is required on all e-prescriptions (not just prescriptions for controlled substances).

## Reconciliation Issues to be Resolved

An issue was recently identified in which medications and immunizations received from external pharmacy locations were reappearing after reconciling, causing extra work for providers and staff. This issue will be resolved in December, and any medications and immunizations that are currently appearing in the Reconcile Outside Info activity because of this issue will be removed as well.

A guide to navigating the Reconcile activity is below.

The screenshot shows the 'Reconcile Outside Info' window with various annotations and a legend. Annotations include:

- Navigation between data types (pointing to tabs: Allergies, Medications, Problems, Immunizations)
- Links to additional information (pointing to 'Dispense Report', 'Medication Reconciliation History')
- Personalization options (available from wrench button)
- Column Headers (pointing to 'Medication', 'Sig', 'Start Date', 'End Date', 'Source', 'Updated on')
- Information from another EHR (pointing to a medication entry)
- Information from dispense history (e.g. Surescripts) (pointing to a medication entry)
- Medication from more than one source (pointing to a medication entry with multiple sources)
- Information from dispense history (e.g. Surescripts) that matched with a local medication (does not require reconciliation) (pointing to a medication entry)

The legend defines the icons used in the medication list:

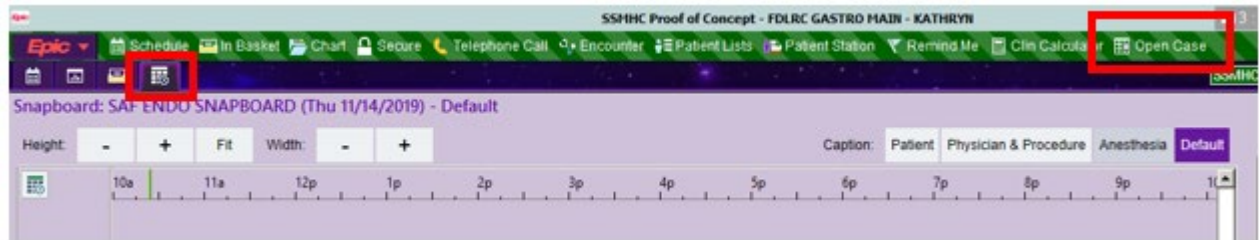
- +** Add to local chart
- Discard – removes item from activity for everyone
- X** Discontinue/remove from local chart
- ?** Unknown – we were unable to map to a local record so we're unsure if it is new or similar
- New – we were unable to match with something already on the patient's chart
- Similar – we found something on the patient's chart that is similar
- On chart – on the patient's local list (with a dropdown menu)
- 2** Data from an outside source. The number indicates the number of different sources that reported that information.

Medication	Sig	Start Date	End Date	Source	Updated on
Multiple Minerals-Vitamins (CALCIUM & VIT D3 BONE HEALTH OR)	Take by mouth.			River H	
Azelastine HCL	1 Spray into each nostril 2 times daily	7/13/2015		River H	
METFORMIN HCL	TAKE 1 TAB BY MOUTH 2 TIMES DAILY (WITH MEALS)	8/22/2015		2 Outs	
METHYLPREDNISOLONE	TAKE 2 TABLETS BY MOUTH EVERY DAY			Extma	
DEXTRAMPHETAMINE/AMPHETAMINE	Take 20 mg by mouth daily			Local M	
GABAPENTIN	Take 3 Tabs by mouth daily	12/12/2015		Local M	
ALBUTEROL SULFATE	Inhale 2 puffs every 6 (60) hours as needed for wheezing			Local Medical Record	3/18/2019
AMITRIPTYLINE HCL	Take ONE tablet (25 mg total) by mouth nightly	4/26/2019	4/26/2020	Local Medical Record	4/26/2019
BUDESONIDE	Inhale 1 puff			Local Medical Record	4/2/2019

## Documentation

### *Ambulatory Office Staff with Case Request: Snapboard and Open Case Button added to home workspace*

we have added the Snapboard as a home workspace and the Open Case button to the top toolbar for staff who are on the SSM HEALTH WI AMB OFFICE STAFF/CASE REQUEST template.



### *Encounters for Scanning External Documents Automatically Closed*

The following encounter types for scanning external documents will automatically be closed via a batch job:

- Office Visit External
- Outside Record
- External Hospital Encounter

Because staff will no longer need to manually close these, Open Encounter messages will not be sent for them.

### *Asthma Action Plan SmartForm Updates*

Improvements to the Asthma Action Plan have been made with input from the Allergists. As a reminder, the Plan can be accessed in the Wrap-up tab on any patient with Asthma in their Problem List.

- The Green, Yellow, and Red Zone descriptions (bulleted text under zone name) and the default Yellow and Red Zone Other Instructions have been updated to the following:

## Asthma Action Plan

Severity: intermittent

Triggers: respiratory infection

### 😊 Green Zone Doing Well

- Breathing is good
- Infrequent coughing, wheezing, shortness of breath, chest tightness (less than 2 times per week)
- No effect on sleep

### 😞 Yellow Zone Asthma is Getting Worse

- Begin the following treatment plan if developing persistent coughing, wheezing, chest tightness, and/or trouble sleeping, working, playing due to asthma

Inhaled Medication	How much to take	When to take it
albuterol HFA (PROVENTIL;VENTOLIN;PROAIR) 108 (90 Base) MCG/ACT inhaler	2 puffs by mouth with spacer	every 4 hours as needed

- Start at first sign of a cold/respiratory infection

#### Other Instructions:

Go to Red Zone if:

- Not feeling better within 15 minutes of rescue treatment
- If needing a rescue treatment more often than every 3-4 hours
- If getting worse
- If in the yellow zone for more than 24 hours

\*\* Let the doctor know if you keep going into the YELLOW ZONE. Your GREEN ZONE medicine may need to be changed to keep episodes from starting. \*\*

### 😞 Red Zone Medical Alert!

- Begin the following treatment plan if not improving or worsening after implementation of yellow zone plan

Inhaled Medication	How much to take	When to take it
albuterol HFA (PROVENTIL;VENTOLIN;PROAIR) 108 (90 Base) MCG/ACT inhaler	2 puffs by mouth with spacer	every 20 minutes for 3 doses

- If breathing is hard and/or fast, ribs sticking out, trouble walking, talking, and/or sleeping, lips or fingernails turning blue

#### Other Instructions:

- If Red Zone sign/symptoms are still present or not better after back to back rescue treatments, call 911 or go to the nearest Emergency Room
- Call your doctor any time you are in the Red Zone

Signed by Dickerson, Joshua Ps, MD on 11/4/2019 at 2:43 PM

- Peak flow fields for each zone are now hidden by default. Providers can put a checkmark next to Calculate peak flow to make them appear for this visit as well as future visits.

Viewable in reports

Patient declines asthma action plan

Calculate peak flow

Asthma severity:

intermittent    mild persistent    moderate persistent  
severe persistent    exercise induced bronchospasm

Asthma triggers:

animal dander    dust mites    cockroaches    indoor mold  
pollen    outdoor mold    tobacco smoke    smoke, odors, and sprays  
vacuum cleaning    exercise    respiratory infection

- "Every 15 minutes" was added as an option for Red Zone frequency.

# Orders

## Goodbye Faxes/Hello Electronic RX Change requests from Pharmacies

If a pharmacist wants to suggest a prescription modification, for example a change to a generic medication, the pharmacy will send an Rx Change Request message.

- Change requests will appear in the Rx Request folder
- Differences between the original prescription and the new change request are highlighted.
- Refill protocols appear for prescription change requests, Clinical Staff should review the requested change from the pharmacy prior to reviewing the refill protocols because the medication has been modified from the original order.
- Responding to Change requests follows the same workflow as Refill Requests for approving or refusing requests.
- Prescription change request orders from external pharmacies cannot be approved from Haiku and Canto

The screenshot displays the Epic EHR interface for a patient named Soloman Bergamel. The patient's profile is visible on the left, including demographics (Male, 49 years old, 3/21/1970) and medical history (Allergies: Unknown; Not on File; Last Wt: None; Coverage: None; Next Appt w/ME: None; Next Appt: None; PCP: None; HM: Due). The main content area shows an 'Rx Auth Request' message from 'Surescripts, Interface Incoming' dated 'Today, 12:48 PM'. The message is categorized as 'Changes Requested' and contains the following details: 'RETIN-A MICRO 0.1 % gel', 'Changed from: tretinoin (RETIN-A MICRO) 0.1 % gel', 'Sig: Apply to face every 8 hours', 'Disp: 30 g Refills: 1', 'Start: 11/20/2019', 'Class: ePrescribe', 'Non-formulary', 'Last ordered: Today by Debbie Stergos, MD', 'Rx #: 64fe52957cd4472b8106b13779e8f2c9', and 'Change: Generic Substitution'. A note at the bottom indicates 'To be filled at: Yalaha Pharmacy - 8735 County Rd 48 Yalaha FL 34797'. A 'Refill Request' tab is also visible on the right side of the message.

Types of change requests include:

- **Therapeutic Change Request:** This type of change occurs when a pharmacist requests to dispense a therapeutic alternative to the originally prescribed medication or otherwise modifies the medication info. This message type will generate an In-Basket message for a clinician to act on. These messages fall to the Rx Request folder and follow the same routing structure as refill requests.
- **Generic Substitution:** This type of change occurs when a provider prescribes a Dispense as Written medication but the pharmacy requests to dispense the generic medication. You will approve or refuse generic substitutions requests the same way as therapeutic change requests.
- **Other:** As change requests are still in a pilot phase, Epic supports a generic change request type for changes that may not fit the standard at this time. Changes of type "other" will also file to the Rx Request folder

## Decision Support for Outside CT/NM/MRI/PET Orders

To prepare for the January 1, 2020 PAMA Mandate requirement concerning Clinical Decision Support for high end imaging, additional order questions will be made available to staff that transcribe outside orders. Please find a detailed tip sheet [here](#).

## New SmartSet Abbreviations in Preparation for Fond du Lac Clinics Go Live

As we prepare for the March 7 Fond du Lac Go Live, you will see new abbreviations:

FDLRC - used for WI region end users in the Fond du Lac Regional Clinics

WI EXCEPT FDLRC - used for WI region end users, excludes Fond du Lac Regional Clinics

IL MO OK – used for Illinois, Missouri, and Oklahoma end users

Example of abbreviations when opening a SmartSet:

▶ Fruits (WI EXCEPT FDLRC)

Examples of abbreviates when choosing to personalize a SmartSet:

▶ Labs - Additional (WI EXCEPT FDLRC)

▶ Labs - Additional (FDLRC)

▶ Dairy/Egg (WI EXCEPT FDLRC)

▶ Dairy/Egg (IL MO OK)

▶ Dairy/Egg (FDLRC)

# Chart Review

## *Chart Review: Reminder for Printing Order Reports*

To print a patient/clinician friendly order report from Chart Review, always click on the hyperlink “Click Here Before Reprinting Order Requisition” to open the report; then click the printer icon. If you just click the printer icon first, you will be killing many trees!

[Click Here Before Reprinting Order Requisition](#) ...

# Decision Support

## Critical Dose alerts

To help prevent excessive medication doses a new critical dose alert will display when the dose being ordered is more than 500% over the recommended maximum.

The new critical dose alert will display similar to current dose alerts, but will be highlighted in red.

lisinopril (PRINIVIL; ZESTRIL) tablet 400 mg

Order Inst: See Micromedex for renal dosing guidelines.

Report: Lab Test Results

Component	Time Elapsed	Value	Range	Status
Creatinine	3 days (11/21/19 1113)	1.10	mg/dL	Final result

Reference Links: 1. Micromedex 2. DrugNotes 3. Pediatrics  
4. Black Box Warnings 5. Administration 6. Dose Adjustments

Dose: 400 mg | 2.5 mg | 5 mg | 10 mg | 20 mg | 40 mg

**Critical Dose Warning**

lisinopril Details

↑ Single dose of 400 mg exceeds recommended maximum of 40 mg, over by 900% Use 40 mg

↑ Daily dose of 400 mg (400 mg DAILY) exceeds recommended maximum of 40 mg, over by 900%

Override

Administer Dose: 400 mg  
Administer Amount: 10 tablet

Route: Oral | Oral | Enteral Tube

Frequency: DAILY | QDAY | BID

Manage Orders Order Sets Options

New i-Vent Phase of Care Interactions

Place new orders or order sets + New

Select order mode Next

This patient has active treatment/therapy plans.

New Orders

lisinopril (PRINIVIL; ZESTRIL) tablet 400 mg  
400 mg, Oral, DAILY, First Dose today at 0915, Until Discontinued

**Critical Dose Warning**

lisinopril

↑ Single dose of 400 mg exceeds recommended maximum of 40 mg, over by 900%

↑ Daily dose of 400 mg (400 mg DAILY) exceeds recommended maximum of 40 mg, over by 900%

If you try to sign the order without changing the dose a separate pop-up will display. In the pop-up the dose must be reentered, and an override reason selected.

Critical Dose Warning

**Critical Dose Warning**  
This order might result in a critical overdose. Verify that the order is appropriate before proceeding.

lisinopril, 400 mg, Oral, DAILY Details

Single Dose

0 mg 40 mg (max) 400 mg (ordered)

900% OVER

Additional Dose Warnings for This Order

↑ Daily dose of 400 mg exceeds recommended maximum of 40 mg, over by 900%

Re-enter the dose and provide an override reason/comment if you want to continue with this order:

Dose: [ ] [ ]

Override reason/comment: Override Reason...

Accept Cancel



# Care Everywhere

## Reconciliation Issues to Be Resolved

An issue was recently identified in which medications and immunizations received from external pharmacy locations were reappearing after reconciliation, causing extra work for providers and staff. This issue will be resolved with change day in December, and any medications and immunizations that are currently appearing in the Reconcile Outside Info activity because of this issue will be removed as well.

A guide to navigating the Reconcile activity is below.

The screenshot shows the 'Reconcile Outside Info' window with various callouts:

- Navigation between data types**: Points to the tabs for Allergies, Medications, Problems, and Immunizations.
- Links to additional information**: Points to the 'v' icon in the column headers.
- Personalization options (available from wrench button)**: Points to the wrench icon in the column headers.
- Column Headers**: Points to the header row of the medication list.
- Information from another EHR**: Points to the '2' icon in the 'Source' column for METFORMIN HCL.
- Information from dispense history (e.g. Surescripts)**: Points to the '2' icon in the 'Source' column for METHYLPREDNISOLONE.
- Medication from more than one source**: Points to the '2' icon in the 'Source' column for DEXTROAMPHETAMINE/AMPHETAMINE.
- Information from dispense history (e.g. Surescripts) that matched with a local medication (does not require reconciliation)**: Points to the '2' icon in the 'Source' column for AMITRIPTYLINE HCL.

**Legend**

- Add to local chart
- Discard – removes item from activity for everyone
- Discontinue/remove from local chart
- Unknown – we were unable to map to a local record so we're unsure if it is new or similar
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# Reports

## *Chart Review: Printing Order Requisitions*

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