# EBCD MEDITECH Content Updates – 2025.3 All Modules

### **Overview**

This Enterprise document is a high-level overview for end user education purposes about significant changes within the Nursing, ED, and OR Module screens, including Behavioral Health routines. Additional enhancements may be seen in the <a href="EBCD Release Education Section">EBCD Release Education Section</a> of the <a href="EBCD Atlas Connect page">EBCD Atlas Connect page</a>.

Inpatient Rehab Facility Enhancements education will be posted separately.

### How to use this guide

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

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

### **Impact Legend:**

Safety/Regulatory	Clinical Initiative	Women's and Children's
	- Time to the second se	
Reimbursement/Billing	Enhancements/Wins	

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

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

Reviewed/Revised: 08/05/2025

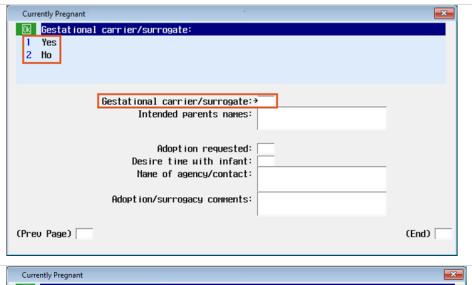
### **BH Module**

## **Admission Health History: Currently Pregnant Updates**



### **Surrogacy Updates**

Currently, the **Admission Health History** form does not have a space to list the names of the intended parents for a gestational carrier or surrogate. Under the domain of surrogacy, proper documentation of the intended parents supports patient safety and the validation of parentage under the terms of a gestational agreement. With this change, a new field has been added to the **Admission Health History** intervention to document the names of the intended parents.



Gestational carrier/surrogate has the following responses:

- Yes
- No

If 'Yes' is selected, it will default to the *Intended parents names* field.

Intended parents names:

Enter free text.

The birth mother and intended parents agree the names below are the intended parents.

An executed surrogacy agreement was requested of the parties and, if provided, has been added to the record.

Gestational carrier/surrogate: > Yes

Intended parents names: >

Adoption requested:

Desire time with infant:
Name of agency/contact:

Adoption/surrogacy comments:

(Prev Page)

Intended parents names is a new, free-text enabled field, where multiple names can be added.

The Yellow Information Box offers additional guidance:

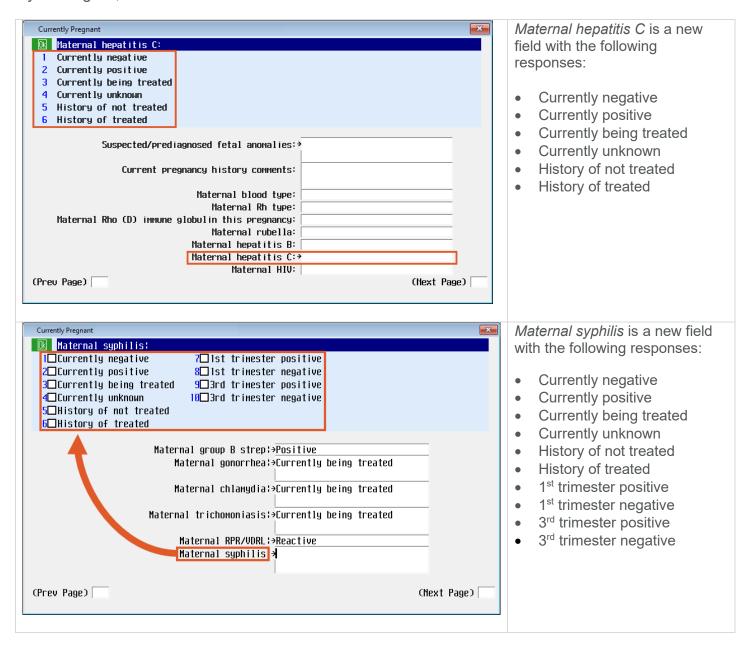
The birth mother and intended parents agree the names below are the intended parents.

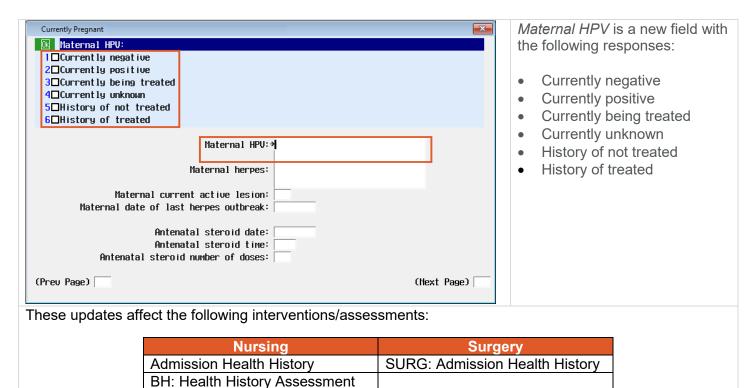
An executed surrogacy agreement was

An executed surrogacy agreement was requested of the parties and, if provided, has been added to the record.

### **Maternal Status Updates**

Currently, Maternal hepatitis C results, Maternal syphilis result & testing trimester and Maternal HPV results are not documented. With recommendation from the American Obstetricians and Gynecologists, these fields are now available for documentation.





## **Disposition of Home Meds**



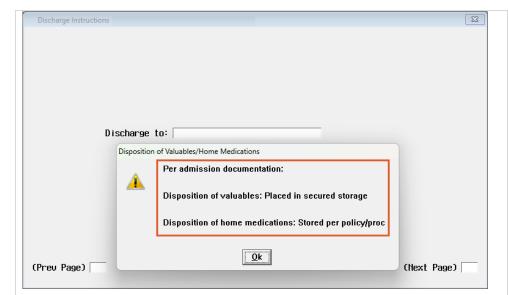
The **Health History Assessment** has been updated to provide a new response option to document that a patient's home medications were secured or stored during the admission process. See the Discharge Instructions update for information regarding the alert for Disposition of valuables and home meds.



# Discharge Instructions: Disposition of Valuables and/or Home Medications Alert



Currently, there is not an efficient way for discharging staff to know that a patient's valuables and/or home medications were secured on admission. Based on responses to valuables and/or home medications, the **Discharge Instructions** will display an alert to provide awareness that there may be items to return to the patient.



An alert will display if the following responses were selected for the *Disposition of valuables* and/or *Home medications*:

- Placed in secured storage
- Sent to pharmacy
- Stored per policy/proc

This will alert the clinician to items that may need to be returned to the patient.

**Note**: If free text was entered in addition to one of the above group response options, the 'Free Text' will also be displayed. If only 'Free Text' was entered on admission, no alert will display.

This update affects the following interventions/assessments:

### Nursing

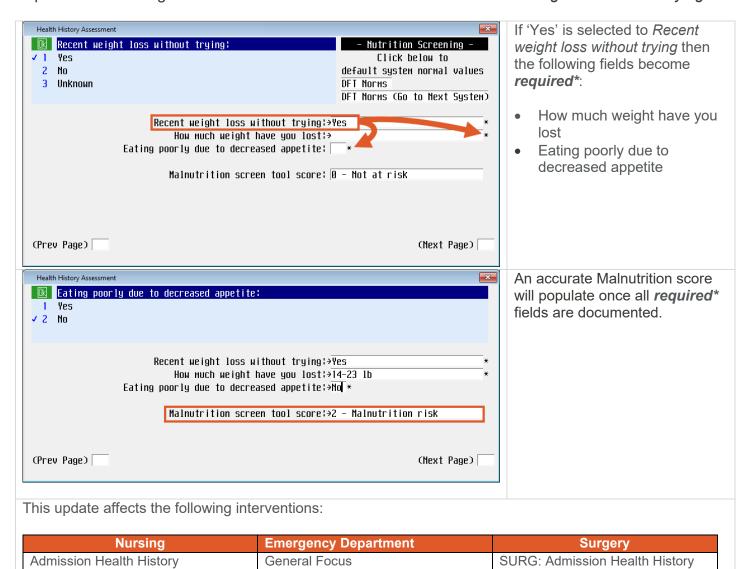
**Discharge Instructions** 

BH: Discharge Instructions Home

### **Malnutrition Screening Updates**



Currently, the Malnutrition Screening allows users to bypass remaining screening questions after answering 'Yes' to *Recent weight loss without trying*. This results in inaccurate and incomplete malnutrition screening, potentially missing patients that may need further evaluation. The update will require the remaining fields be answered if a 'Yes' is entered for *Recent weight loss without trying*.



Non-Urgent

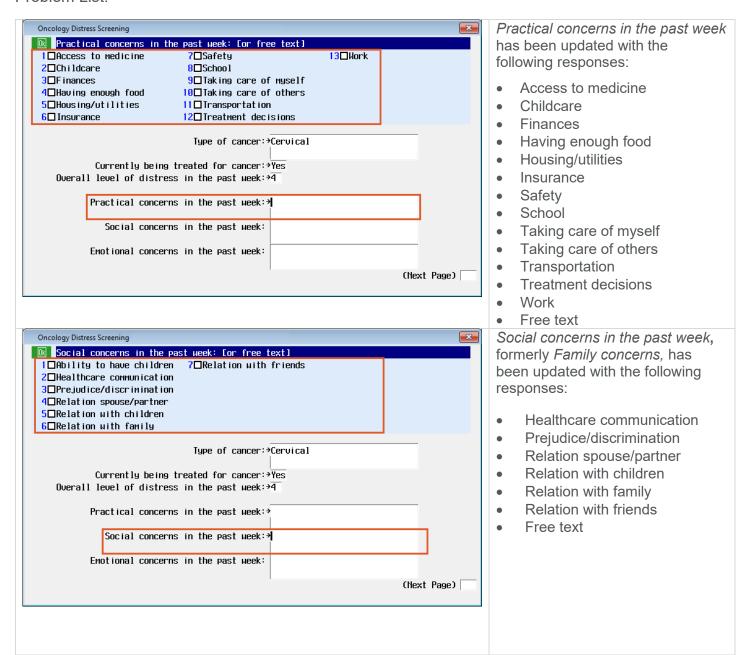
Paramedic Intake

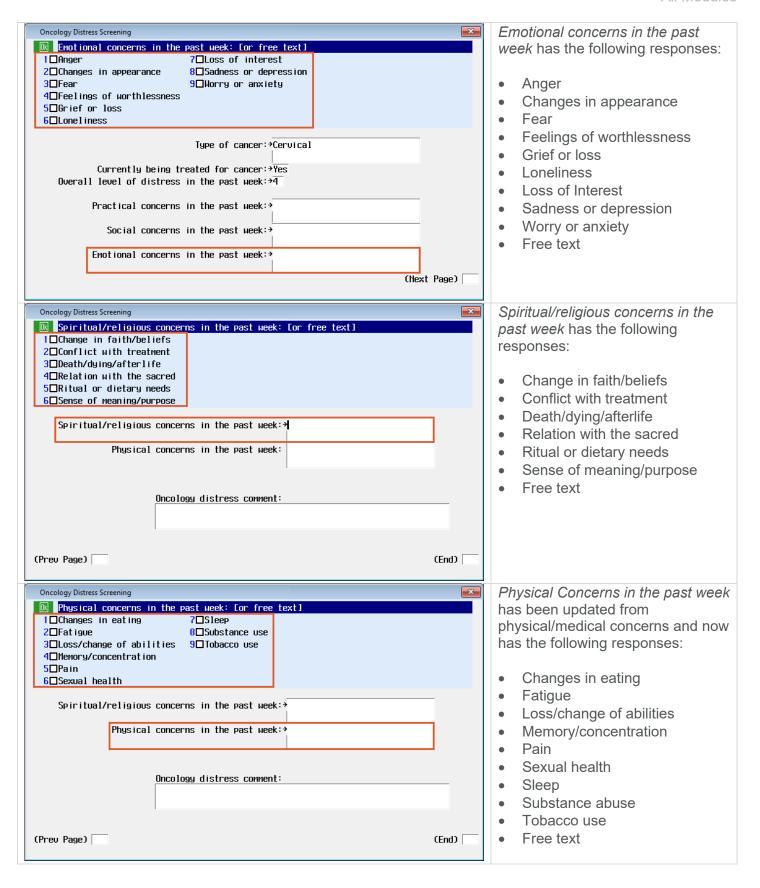
BH: Health History Assessment
BH: Outpatient Nutrition Assessment

## **Oncology Distress Screening**



The **Oncology Distress Screening** intervention is outdated and being updated to align with the current version of the National Comprehensive Cancer Network (NCCN) Distress Thermometer and Problem List.





#### **Oncology Distress Screening continued**

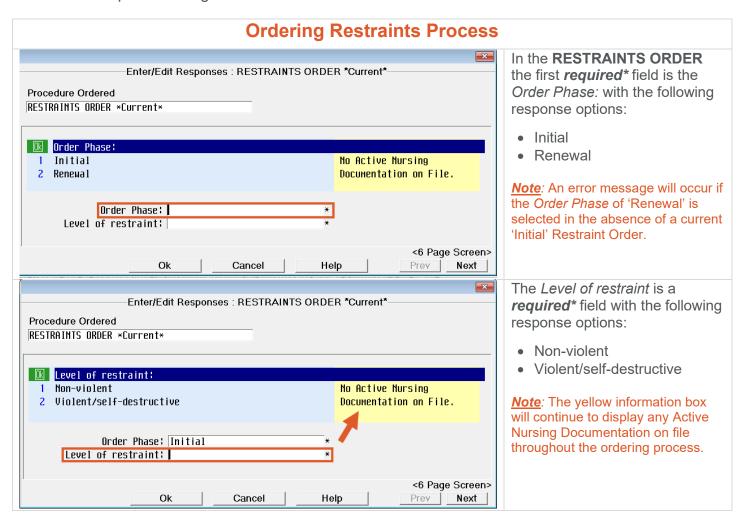
This update affects the following interventions/assessments:

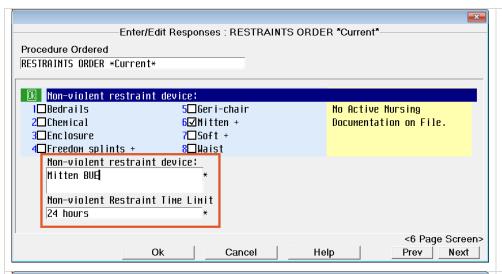
Nursing	Emergency Department	Surgery
Oncology Distress	Detailed Assessment	SURG: Admission Health History
BH: Health History Assessment	Non-urgent General Focus	
Admission Health History	Paramedic Intake	

## **Restraints Initiative Update**

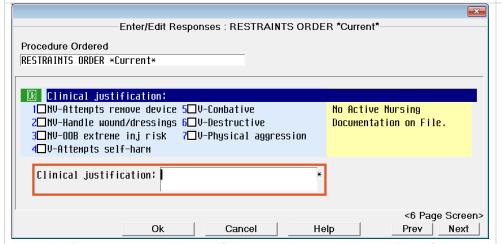


Inappropriate restraint utilization has heightened regulatory risk with inconsistent practices and outcomes for managing restraints effectively. As part of the 2025 Strategic Priorities, we have identified ways to drive appropriate restraint utilization by optimizing both the ordering of restraints and the subsequent nursing documentation.





Enter/Edit Responses: RESTRAINTS ORDER \*Current\* Procedure Ordered RESTRAINTS ORDER \*Current\* ■ Violent restraint device: 1**☑**Chemical 5□Seclusion No Active Nursing 2□Enclosure 6□Soft + Documentation on File. 3□Physical holding <mark>7</mark>□Synthetic + 4□Restrictive positioning Violent restraint device: Chemical Violent Restraint Time Limit 4 hours <6 Page Screen> Ok Next Cancel Help Prev



<u>Note</u>: An Error message will occur if the user selects a **Violent (V)** justification for a **Non-Violent Level of restraint** and if a **Non-violent (NV)** justification is selected for a **Violent Level of restraint**.

If 'Non-Violent' *Level of restraint* is selected, the user will be directed to the approved *Non-violent restraint device* selection types.

Non-violent Restraint Time Limit will pre-populate 24 hours for Order Phase of Initial and 1 Calendar Day for Order Phase of Renewal.

**<u>Note</u>**: Restrictive positioning and Tightly tucked sheets are no longer approved Non-violent restraint devices.

If 'Violent/self-destructive' *Level* of restraint is selected, the user will be directed to the approved *Violent restraint device* selection types.

Violent Restraint Time Limit will pre-populate 4 hours for both the Order Phase of Initial and Order Phase of Renewal for adult patients.

<u>Note</u>: Bedrails, Freedom splints, Geri-chair, Mittens, Seclusion/restraint, Tightly tucked sheets, and Waist are no longer approved Violent restraint devices.

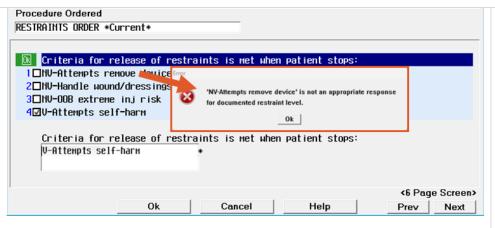
Clinical justification is a required field.

For *Non-violent* (NV) level of restraint, the following justifications may be selected:

- NV-Attempts remove device
- NV-Handle wound/dressings
- NV-OOB extreme inj risk

For *Violent* (V) level of restraint, the following justifications may be selected:

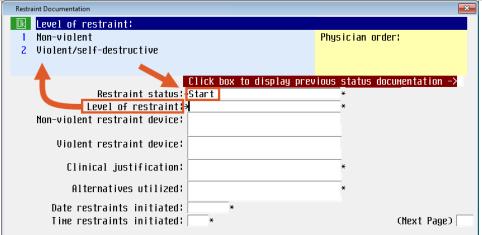
- V-Attempts self-harm
- V-Combative
- V-Destructive
- V-Physical aggression



The response entered for *Clinical Justification* will default into the *Criteria for release of restraints is met when patient stops* response field.

Additional responses can be selected; however, an Error message will occur if the user selects a Violent (V) Criteria for a Non-Violent Level of restraint and if a Non-violent (NV) Criteria is selected for a Violent Level of restraint.

#### NURSING DOCUMENTATION



In the **Restraint Documentation +** intervention,

Level of restraint will become a required\* field when 'Start' is selected for the Restraint status.

The available *Level of restraint* responses are:

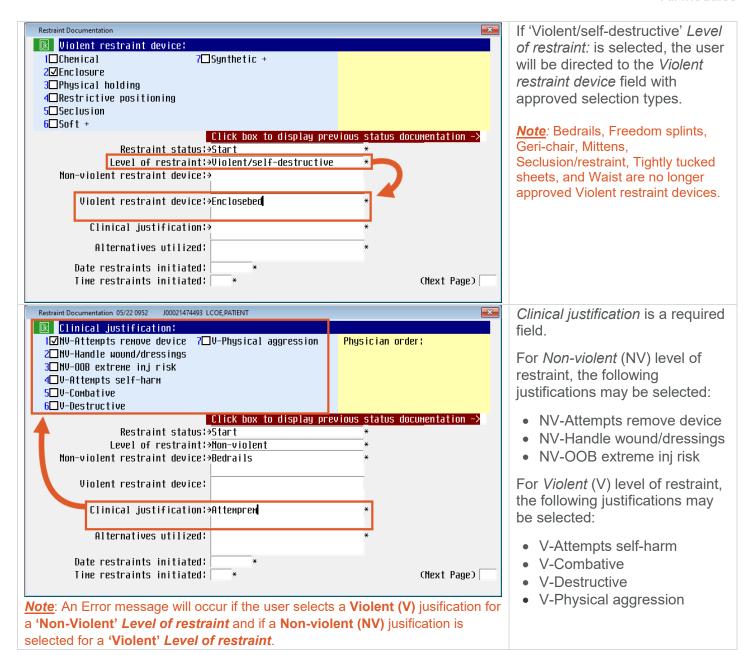
- Non-violent
- Violent/self-destructive

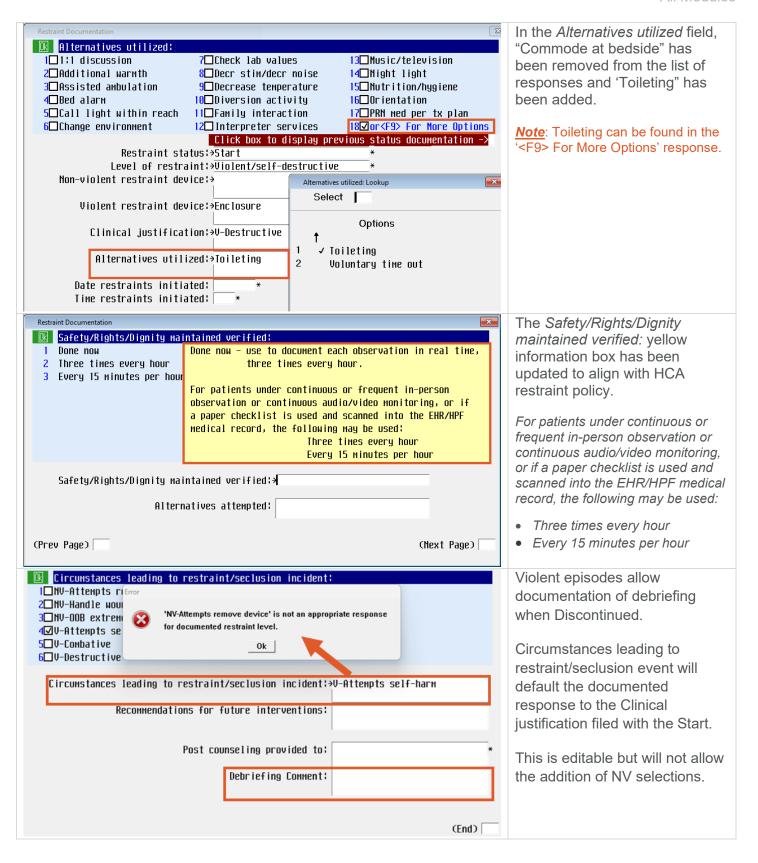
Restraint Documentation Mon-violent restraint device: 1☑Bedrails 7□Soft + Physician order from 2□Chemical 8□Waist 05/22/25 at 0606: 3□Enclosure Bedrails 4□Freedom splints + 5□Geri-chair 6□Mitten + Click box to display previous status documentation -> Restraint status:>Start Level of restraint:→Non-violent Non-violent restraint device:→Bedrails Violent restraint device: Clinical instification: Alternatives utilized: Date restraints initiated: Time restraints initiated: (Next Page)

If 'Non-violent' *Level of restraint* is selected, the user will be directed to the *Non-violent restraint device* field with approved selection types.

The yellow information box will continue to display any Physician order information throughout the documentation process.

**Note**: Restrictive positioning and Tightly tucked sheets are no longer approved Non-violent restraint devices.

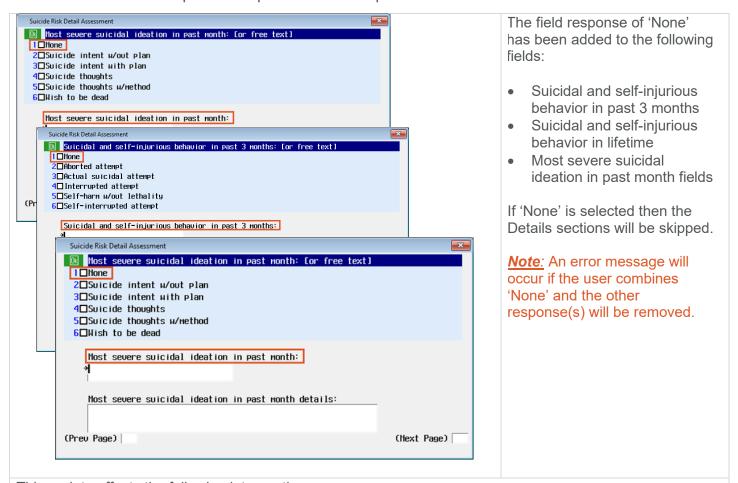




## Suicide Risk Detail Assessment (SRDA) Field Updates



To support regulatory documentation requirements, the Suicide Risk Detailed Assessment (SRDA) has been updated to include 'None' in several field response options. This update will reduce the need for free text and improve compliance with completion.



This update affects the following interventions:

Nursing	Emergency Department	Surgery
BH: Level of Care Assessment +	Detailed Risk Assessment	SURG: Safety/Risk/Regulatory +
BH: Initial Nurse Assessment (INA) +	BH Level of Care Assessment	SURG: Safety/Risk/Regulatory Int +
BH: Psychosocial Assessment (PSA) +	Suicide Risk Detail Assessment	SURG: Safety/Risk/Regulatory PAC +
BH: RN Reassessment +	Suicide/Homicide Screening	
BH: Suicide/Homicide Screen +	Suicide/Homicide Rescreening	
BH: Outpatient Initial Nurse Assessment+		
BH: Suicide Risk Detail Assessment +		
Safety/Risk/Regulatory		