

MEDITECH Expanse TIP SHEET

Updates to Handoff Routine



My List 2 Any Location Recently Accessed 0 Close Hand Off Open Patient Summary Remove from My List Clear My List

Name with Account Flag
 Room/Bed Preferred Name
 Temp Location Pronouns
 Admit Date Age/Sex
 Admit Status Responsible Provider

Lobo,Test
 45 F
 ICU.QE.X 4005.QE.X-1
 Code Status: Resus Status Not Ordered No Hx Avail
 Allergy/Adx: No Known Allergies
 Admit Date: 10/05/23 11:37 (608D)
 Account #: F00000000208
 Attending: Hospitalist01,Provider

Search to add to user's list

History

Widget data for 10/05/23 (ADM IN)

Telemetry Application
 Telemetry application date 10/03/24
 Telemetry application time 10:28
 10/03/24 11:03

Other Medical/Behavioral Health Related Info
 Initial legal hold status 01/05/24 11:02
 Involuntary

Recent Medications

Generic Name	Dose Route	Start	Last Admin
Dextrose	16 g	03/18/25	10:50
Dextrose Chewable 4 G Tablet	PO	ONCE PRN	
	Glucose 20-70		
Amiodarone HCl/ Dextrose	360 mg in 200 mL	05/15/25	17:45
Nexterone	16.667 mL/hr	17:45	
	IV		
	Q12H SCH Protocol		
	0.5 MG/MIN		
Amiodarone HCl/ Dextrose	360 mg in 200 mL	05/15/25	11:45
Nexterone	33.333 mL/hr	11:45	
	IV		

Problems
 Fall (or) (from) other stairs and steps initial encounter
 Pain

Special Indicators
 Antibiotic Resistant Disease
 Fall Precaution

General Clinical Data
 Pain scale utilized Verbal numeric
 Pain intensity 10

Risks
 Morse Fall Scale score and risk level
 55 - High Risk
 Fall risk (RN clinical judgement)
 Glasgow coma score
 6
 CAGE score
 4

Vital Signs
 11/05/24 10:44
 BP 123/45 L
 Pulse 68
 Resp 22 H
 Temp 36 C
 O2 Sat 98
 Delivery *Nasal cannula
 Flow Rate *6
 *from earlier documentation

I & O 24 Hour Summary
 No Data to Display

Lab Results Last 24 Hrs
 Most Recent
 No Data to Display

Diagnostic Imaging Reports
 No Data to Display

LDA
 Arterial line status: Monitor

Problems & History List
 Lobo,Test 45 F Allergy/Adx: No Known Allergies

Search for: Hypertension

Sort By: Rank Order

Active

Hypertension I10 History

Hypertension affecting pregnancy O16.9 History

Pain Hypertension affecting pregnancy in first trimester O16.1 History

Resolve Hypertension affecting pregnancy in second trimester O16.2 History

Delete Hypertension affecting pregnancy in third trimester O16.3 History

Hypertension affecting pregnancy, antepartum O16.9 History

Hypertension affecting pregnancy, delivered, current hospitalization O16.4 History

Hypertension after donor nephrectomy requiring medication I97.3 History

Hypertension as manifestation of blood transfusion reaction T80.89XA History

Hypertension associated with chronic kidney disease due to type 1 diabetes mellitus E10.22 History

Hypertension associated with chronic kidney disease due to type 2 diabetes mellitus E11.22 History

Medical History
 Description Onset
 Fracture (healed) treatment follow-up
 Hypertension
 Surgical History
 No Surgical Problems to Display.

The current Patient History widget is being retired. The Problems widget will now take its place to provide improved patient history information.

Along with this change, the follow two queries will be added to the Handoff Routine to provide better visibility for Telemetry History:

- Telemetry application date
- Telemetry application time

Wound Care

Changes go in effect 06/18/2025



The **Wound Care** order (WOUNDCAREN.COM) will have a new screen (HCAOMWNCAR0001) to allow for more clarity with multiple, complicated wounds, including burns. These changes were made in collaboration with the Wound and Burn Service Lines and the Provider Product teams.

Wound Care

Number of wound(s)

Location

Cleanse with

Dressing/Treatment (closest to wound)

Dressing/Treatment (layer 2)

Dressing/Treatment (layer 3)

Dressing/Treatment (layer 4)

Dressing/Treatment (layer 5)

Dressing change frequency

May change PRN if soiled/saturated

Reinforce dressing if required

Re-saturation/soak frequency

Re-saturation/soak instructions

Additional instructions

Number of Wounds:

Works the same way as current. Options 1-10. If 2 or more wounds is selected, more queries populate.

Wound Care

Number of wound(s)

Location

Cleanse with

Dressing/Treatment (closest to wound)

Dressing/Treatment (layer 2)

Dressing/Treatment (layer 3)

Dressing/Treatment (layer 4)

Dressing/Treatment (layer 5)

Dressing change frequency

May change PRN if soiled/saturated

Reinforce dressing if required

Re-saturation/soak frequency

Re-saturation/soak instructions

Additional instructions

Location:

Works the same way as current. Free Text. If more than one wound has same dressings, can enter multiple areas (vertically or horizontally).

Wound Care

Number of wound(s)

Location

Cleanse with

Dressing/Treatment (closest to wound)

Dressing/Treatment (layer 2)

Dressing/Treatment (layer 3)

Dressing/Treatment (layer 4)

Dressing/Treatment (layer 5)

Dressing change frequency

May change PRN if soiled/saturated

Reinforce dressing if required

Re-saturation/soak frequency

Re-saturation/soak instructions

Additional instructions

Cleanse with:

(Can select multiple.)

Wound cleanser
Normal saline
Sterile water
Chlorhexidine gluconate
Hydrogen peroxide
Hypochloric solution
Povidone iodine
Other

Wound Care	
Number of wound(s)	<input type="text"/>
Location	<input type="text"/>
Cleanse with	<div>Wound cleanser</div> <input type="text"/>
Type of wound cleanser	<input type="text"/>
Dressing/Treatment (closest to wound)	<input type="text"/>
Dressing/Treatment (layer 2)	<input type="text"/>
Dressing/Treatment (layer 3)	<input type="text"/>
Dressing/Treatment (layer 4)	<input type="text"/>
Dressing/Treatment (layer 5)	<input type="text"/>
Dressing change frequency	<input type="text"/>
May change PRN if soiled/saturated	<input type="button" value="Yes"/> <input type="button" value="No"/>
Reinforce dressing if required	<input type="button" value="Yes"/> <input type="button" value="No"/>
Re-saturation/soak frequency	<input type="text"/>
Re-saturation/soak instructions	<input type="text"/>
Additional instructions	<input type="text"/>

Cleanse with:

If “Wound cleanser” is selected, another query of “Type of wound cleanser” populates for specifics (if needed).

Free text.
Not required.

Wound Care	
Number of wound(s)	<input type="text"/>
Location	<input type="text"/>
Cleanse with	<div>Other</div> <input type="text"/>
* Other cleanse with	<input type="text"/>
Dressing/Treatment (closest to wound)	<input type="text"/>
Dressing/Treatment (layer 2)	<input type="text"/>
Dressing/Treatment (layer 3)	<input type="text"/>
Dressing/Treatment (layer 4)	<input type="text"/>
Dressing/Treatment (layer 5)	<input type="text"/>
Dressing change frequency	<input type="text"/>
May change PRN if soiled/saturated	<input type="button" value="Yes"/> <input type="button" value="No"/>
Reinforce dressing if required	<input type="button" value="Yes"/> <input type="button" value="No"/>
Re-saturation/soak frequency	<input type="text"/>
Re-saturation/soak instructions	<input type="text"/>
Additional instructions	<input type="text"/>

Cleanse with:

If "Other" is selected, another query of "Other cleanse with" populates.

Free text.
Required.

Wound Care	
Number of wound(s)	<input type="text"/>
Location	<input type="text"/>
Cleanse with	<input type="text"/>
Dressing/Treatment (closest to wound)	<input type="text"/>
Dressing/Treatment (layer 2)	<input type="text"/>
Dressing/Treatment (layer 3)	<input type="text"/>
Dressing/Treatment (layer 4)	<input type="text"/>
Dressing/Treatment (layer 5)	<input type="text"/>
Dressing change frequency	<input type="text"/>
May change PRN if soiled/saturated	<input type="button" value="Yes"/> <input type="button" value="No"/>
Reinforce dressing if required	<input type="button" value="Yes"/> <input type="button" value="No"/>
Re-saturation/soak frequency	<input type="text"/>
Re-saturation/soak instructions	<input type="text"/>
Additional instructions	<input type="text"/>

Dressing/Treatment:
 Free Text

 Closest to wound
 Layer 2
 Layer 3
 Layer 4
 Layer 5

Wound Care	
Number of wound(s)	
Location	
Cleanse with	
Dressing/Treatment (closest to wound)	
Dressing/Treatment (layer 2)	
Dressing/Treatment (layer 3)	
Dressing/Treatment (layer 4)	
Dressing/Treatment (layer 5)	
Dressing change frequency	<div> <div> <div></div> <div></div> <div></div> <div></div> <div></div> </div> <div> <div></div> <div></div> <div></div> <div></div> <div></div> </div> </div>
May change PRN if soiled/saturated	
Reinforce dressing if required	
Re-saturation/soak frequency	
Re-saturation/soak instructions	
Additional instructions	

Dressing change frequency:

- BID
- Daily
- Q4 hours
- Q8 hours
- Q12 hours
- Q24 hours
- Q48 hours
- Q3 days
- Q7 days
- Mon/Wed/Fri
- Tues/Thu/Sat
- Mon/Thu
- Tues/Fri
- Other

Wound Care	
Number of wound(s)	<input type="text"/>
Location	<input type="text"/>
Cleanse with	<input type="text"/>
Dressing/Treatment (closest to wound)	<input type="text"/>
Dressing/Treatment (layer 2)	<input type="text"/>
Dressing/Treatment (layer 3)	<input type="text"/>
Dressing/Treatment (layer 4)	<input type="text"/>
Dressing/Treatment (layer 5)	<input type="text"/>
Dressing change frequency	Other
* Other frequency	<input type="text"/>
May change PRN if soiled/saturated	<input type="button" value="Yes"/> <input type="button" value="No"/>
Reinforce dressing if required	<input type="button" value="Yes"/> <input type="button" value="No"/>
Re-saturation/soak frequency	<input type="text"/>
Re-saturation/soak instructions	<input type="text"/>
Additional instructions	<input type="text"/>

Dressing change frequency:

If "Other" is selected, another query of "Other frequency" populates.

Free text.
Required.

Wound Care	
Number of wound(s)	<input type="text"/>
Location	<input type="text"/>
Cleanse with	<input type="text"/>
Dressing/Treatment (closest to wound)	<input type="text"/>
Dressing/Treatment (layer 2)	<input type="text"/>
Dressing/Treatment (layer 3)	<input type="text"/>
Dressing/Treatment (layer 4)	<input type="text"/>
Dressing/Treatment (layer 5)	<input type="text"/>
Dressing change frequency	<input type="text"/>
May change PRN if soiled/saturated	<input type="button" value="Yes"/> <input type="button" value="No"/>
Reinforce dressing if required	<input type="button" value="Yes"/> <input type="button" value="No"/>
Re-saturation/soak frequency	<input type="text"/>
Re-saturation/soak instructions	<input type="text"/>
Additional instructions	<input type="text"/>

May change PRN if soiled/saturated:

Yes/No

Reinforce dressing if required:

Yes/No

Wound Care

Number of wound(s)

Location

Cleanse with

Dressing/Treatment (closest to wound)

Dressing/Treatment (layer 2)

Dressing/Treatment (layer 3)

Dressing/Treatment (layer 4)

Dressing/Treatment (layer 5)

Dressing change frequency

May change PRN if soiled/saturated

Yes

No

Reinforce dressing if required

Yes

No

Re-saturation/soak frequency

Re-saturation/soak instructions

Additional instructions

Re-saturation/soak frequency:


Q4 hours

Q6 hours

Q8 hours

Q12 hours

Other

<div>  Wound Care </div>	
Number of wound(s)	<input type="text"/>
Location	<input type="text"/>
Cleanse with	<input type="text"/>
Dressing/Treatment (closest to wound)	<input type="text"/>
Dressing/Treatment (layer 2)	<input type="text"/>
Dressing/Treatment (layer 3)	<input type="text"/>
Dressing/Treatment (layer 4)	<input type="text"/>
Dressing/Treatment (layer 5)	<input type="text"/>
Dressing change frequency	<input type="text"/>
May change PRN if soiled/saturated	<input type="button" value="Yes"/> <input type="button" value="No"/>
Reinforce dressing if required	<input type="button" value="Yes"/> <input type="button" value="No"/>
Re-saturation/soak frequency	<input type="text" value="Other"/>
* Other re-saturation/soak frequency	<input type="text"/>
Re-saturation/soak instructions	<input type="text"/>
Additional instructions	<input type="text"/>

Re-saturation/soak frequency:

If "Other" is selected, another query of "Other re-saturation/soak frequency" populates.

Free text.
Required.

<div> <div></div> <div>Wound Care</div> </div>		Re-saturation/soak instructions:
Number of wound(s)	<input type="text"/>	Free Text
Location	<input type="text"/>	
Cleanse with	<input type="text"/>	
Dressing/Treatment (closest to wound)	<input type="text"/>	
Dressing/Treatment (layer 2)	<input type="text"/>	
Dressing/Treatment (layer 3)	<input type="text"/>	
Dressing/Treatment (layer 4)	<input type="text"/>	
Dressing/Treatment (layer 5)	<input type="text"/>	
Dressing change frequency	<input type="text"/>	
May change PRN if soiled/saturated	<input type="button" value="Yes"/> <input type="button" value="No"/>	
Reinforce dressing if required	<input type="button" value="Yes"/> <input type="button" value="No"/>	
Re-saturation/soak frequency	<input type="text"/>	
Re-saturation/soak instructions	<input type="text"/>	
Additional instructions	<input type="text"/>	

Wound Care

Number of wound(s)

Location

Cleanse with

Dressing/Treatment (closest to wound)

Dressing/Treatment (layer 2)

Dressing/Treatment (layer 3)

Dressing/Treatment (layer 4)

Dressing/Treatment (layer 5)

Dressing change frequency

May change PRN if soiled/saturated

Yes

No

Reinforce dressing if required

Yes

No

Re-saturation/soak frequency

Re-saturation/soak instructions

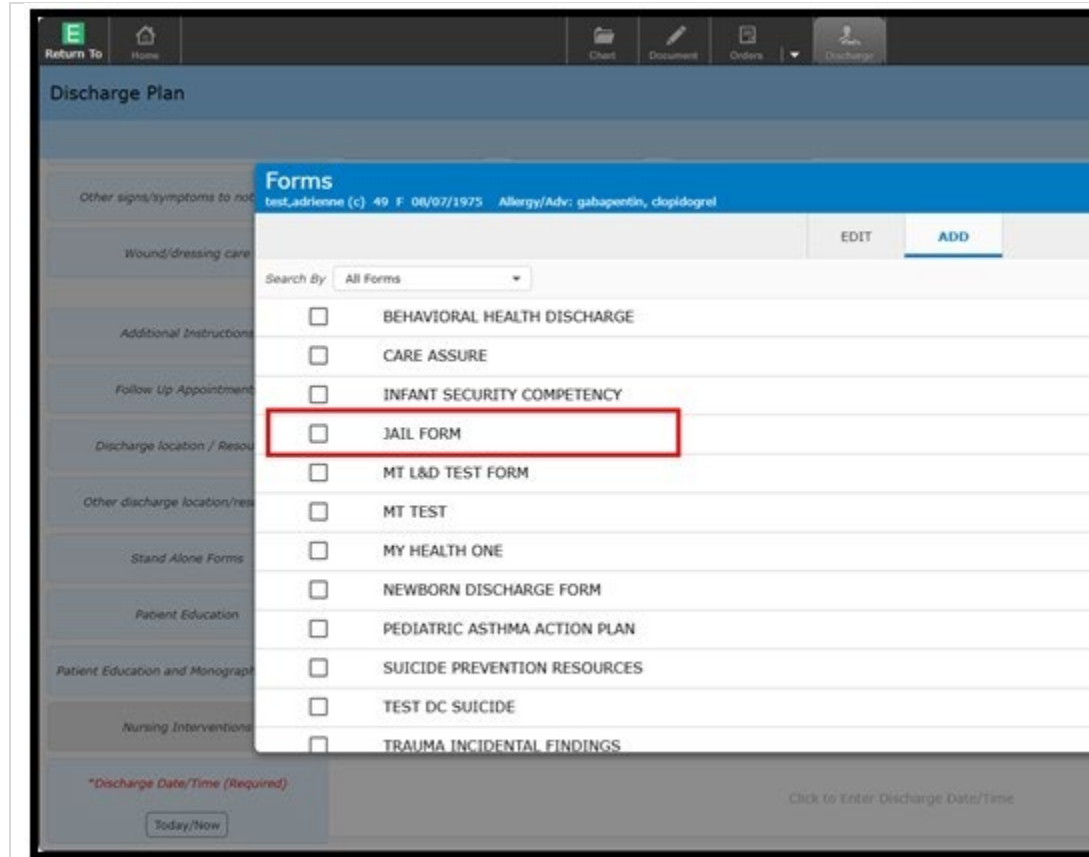
Additional instructions

Additional instructions:

Free Text

Expanse TIP SHEET

Jail Form



The screenshot shows the 'Discharge Plan' interface in the Expanse system. A 'Forms' dropdown menu is open, displaying a list of available forms. The 'JAIL FORM' is highlighted with a red rectangular box. The list includes:

- ☐ BEHAVIORAL HEALTH DISCHARGE
- ☐ CARE ASSURE
- ☐ INFANT SECURITY COMPETENCY
- ☒ JAIL FORM
- ☐ MT L&D TEST FORM
- ☐ MT TEST
- ☐ MY HEALTH ONE
- ☐ NEWBORN DISCHARGE FORM
- ☐ PEDIATRIC ASTHMA ACTION PLAN
- ☐ SUICIDE PREVENTION RESOURCES
- ☐ TEST DC SUICIDE
- ☐ TRAUMA INCIDENTAL FINDINGS

There will be a jail form available for patients being discharged to police custody



The screenshot shows the 'JAIL FORM' form. It has a title bar with a checkmark and the text 'JAIL FORM'. Below the title bar, there are three text entry fields:

- Patient presented with complaint of:** [Text entry field]
- The patient was treated with:** [Text entry field]
- Patient should continue receiving the following treatment:** [Text entry field]

The following fields will be available for free text entry

MEDITECH Expanse TIP SHEET

Patient Care Services (PCS)



Documentation of Controlled Medication Patch

Completing assessments in eMAR.

Medication Administration				
Scan List Admin Flowsheet Prot/Taper Mo				
Medication	Start	Stop	Status	
fentaNYL 1 patch (See Protocol) TRANSDERMAL Q72H SCH Trade: Duragesic 25 mcg/hr Give: 1 Patch (1 patch total) Label Comments: Restricted to use in opioid tolerant patients as defined by taking, for a week or longer, at least 60 mg of morphine daily, or at least 30 mg of oral oxycodone daily, or at least 8 mg of oral hydromorphone daily, or an equianalgesic dose of another opioid.	12/28/23 11:30		Active	
Ordered Dose	Scanned Dose	Edited Dose	Total Dose	Equals
1 patch	1 patch	0 patch	1 patch	Equals
Protocol Fentanyl Patch Alert v1				
<ul style="list-style-type: none">*** Black Box Warning! ******fentaNYL patches are reserved for patients who are opioid tolerant and have chronic pain****** Definition of Opioid Tolerant ***Patient has been receiving opiate therapy for 1 week or longer *AND* patient has been taking at least theMinimum Doses required for opioid tolerance:*60 mg oral morphine / day*25 mg oral oxyMORphone / day*60 mg oral HYDROcodone / day*8 mg oral HYDROmorphine / day*30 mg oral oxyCODONE / day*25 mcg transdermal fentaNYL / hour*or any equianalgesic dose of other opioids, includingheroin and/or non-prescribed opioids				
Select Yes to access Clinical Pharmacology:				
Patient is opioid tolerant based on definition provided: Yes				
Type of pain: Chronic				

Upon scanning the medication, the MAR will open on the Prot/Taper tab which displays the protocol information.

Review the Protocol data, then click on the Flowsheet tab to document the Assessment.

2



MAR Transdermal Application Site.
Document the location where the patch was applied. If this is not the first application, reference previous assessment data to ensure rotation of application sites.

Documentation of Controlled Medication Patch

Start ▼	Medication (Route)	Time	Wed Dec 27	TODAY Thu Dec 28
Stop				
Status				
Ack Status				
12/28/23 11:30	fentaNYL 1 patch (See Protocol) TRANSDERMAL Q72H SCH Trade: Duragesic 25 mcg/hr Rx#: FM000016765 M P SI			
Active				
Acknowledged				
	Give: 1 Patch (1 patch total) ▼ Label Comments: Restricted to use in opioid tolerant patients as defined by taking, for a week or longer, at least 60 mg of morphine daily, or at least 30 mg of oral oxycodone daily, or at least 8 mg of oral hydromorphone daily, or an equianalgesic dose of another opioid.	11:30 Assess 15:26		1 patch 11:26 Con

Once the administration has been saved a reassessment will be required 12 hours after the administration time. This is indicated by Con in the Assess line.

After completing the reassessment, a new 'Con' indicator will populate for 12 hours later.

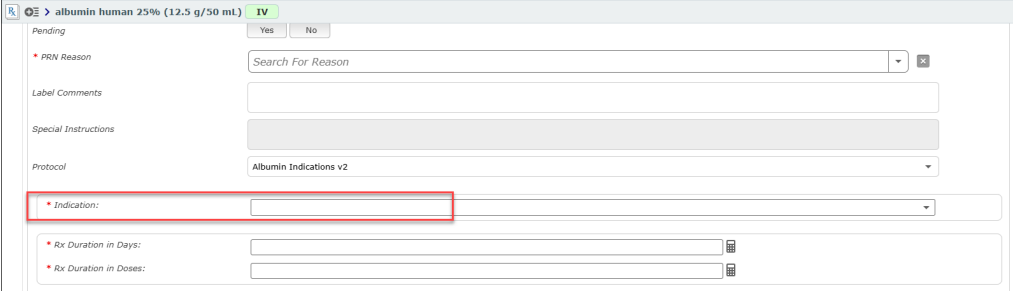

MEDITECH Expanse TIP SHEET

OM, PHA and MAR



Albumin Indication and Duration of Therapy

Albumin Indication Protocol has been updated include a duration of therapy. A PHA Rule has been added to direct the verifying pharmacist to review the stop date/doses and ensure they are added to the order.

	<p>Provider Ordering</p> <p>Upon selecting Albumin string, the Protocol will contain required queries.</p> <p>Note: Either duration in days or doses is required.</p>
	<p>When the indication is chosen, the appropriate duration will populate.</p> <p>This duration defaulted will depend on the indication chosen or the directions on the order.</p> <p>Choosing other as an indication will open a free text box, to clarify the other indication.</p> <p>All indications default to 1 day of therapy, except Hepatorenal Syndrome which defaults to 2 days.</p>

Expanse Pharmacy Albumin Indication and Duration of Therapy

Allergy/AdvReac Edit Type Severity Reaction Date Verified

No Known Allergies	Allergy			06/21/24	Yes
0 of 5 Selected					
<input checked="" type="checkbox"/>	Orders with Activity	Instructions	Status	Source	
<input type="checkbox"/>	albumin human 25% albumin human 25% 12.5 G/50 ML Co... U000001656 PREMIX	50 ML IV Q1H PRN... 03/07/25 0851 MAIN.PRNH	Unverified Protocol	OM Consulting01, Provider	

View Order Data

Comments

PRN Reason

hypovolemia

Current Order

Protocol

Protocol Queries

Indication: Large volume paracentesis
Other Indication:
Rx Duration in Days: 1
Rx Duration in Doses:

Change Status Close

Pharmacy

From the Pharmacist desktop, clicking the “i” icon will display the protocol.

IV Fluid Ordered Dose Volume

1	ALBU50VI11	albumin human 25% solution 12.5 G	12.5 G	50	ML
2					

Confirmation

Duration: 1 Day(s) Ensure appropriate stop time/total doses is entered. Click Yes to continue, No to edit.

Yes No

Label Comments

A Pharmacy rule will also display during verification to remind the pharmacist to update the stop date or total number of doses to match what is defaulted in the protocol.

Medication Detail

Detail History Flowsheet Monograph AssocData Prot/Taper Order Links

Medication	Start	Stop	Status
AlbuRx 25% Solution 12.5 g In 50 ml @ 2 mls/min IV Q1H PRN Current Rate: 2 mls/min Bag Volume: 50 mls Duration: 25 min Generic: albumin human 25%	03/07/25 08:51	03/08/25 09:00	Active

PRN Reason:
hypovolemia

Protocol Albumin Indications v2

Indication: Large volume paracentesis

Rx Duration in Days: 1
Rx Duration in Doses:

MAR

Nursing can view the protocol in MAR by selecting the P icon or by selecting the Prot/Taper button.

MEDITECH Expanse TIP SHEET

OM, Pharmacy, MAR

Edoxaban Indication Ordering Protocol

Provider Order Entry

Updated guidance text for Edoxaban

Indication for use is required. If Other is chosen, a free text query will appear.

Pharmacy Verification

Pharmacist can view the protocol by clicking the 'i' button on the order in the desktop, or by clicking the Protocol button during verification.

Protocol

Edoxaban Indication

- Criteria for patient receiving edoxaban:
- INR \leq 2.5 if warfarin received within last 7 days
- Order INR if no INR in last 24 hrs (inpt or outpt)
- If INR $>$ 2.5, hold edoxaban until INR \leq 2.5
- Be aware DOACs can falsely elevate INR due to interaction with assay.
- Continue edoxaban if patient not recently on warfarin as appropriate.
- Dose dependent on indication, renal function and weight.
- VTE indications, \leq 60 kg: 30 mg PO daily
- Nonvalvular Afib OR VTE indications with CrCl 15-50 mL/min:
30 mg PO daily
- Nonvalvular Afib OR VTE indications with CrCl $<$ 15 mL/min:
Avoid use
- Nonvalvular Afib w/CrCl $>$ 95 mL/min: Avoid use

* Indication:

Orders with Activity	Review	Instructions	Status	Source
edoxaban(Savaysa) edoxaban 30 mg Tablet U000001723 M		30 MG PO DAILY SCH 05/01/25 1700 MAIN.PRNH	Unverified Protocol	OM Hospitalist01, Provider

View Order Data

Protocol

Protocol Queries

- Criteria for patient receiving edoxaban:
- INR \leq 2.5 if warfarin received within last 7 days
- Order INR if no INR in last 24 hrs (inpt or outpt)
- If INR $>$ 2.5, hold edoxaban until INR \leq 2.5
- Be aware DOACs can falsely elevate INR due to interaction with assay.
- Continue edoxaban if patient not recently on warfarin as appropriate.
- Dose dependent on indication, renal function and weight.
- VTE indications, \leq 60 kg: 30 mg PO daily
- Nonvalvular Afib OR VTE indications with CrCl 15-50 mL/min:
30 mg PO daily
- Nonvalvular Afib OR VTE indications with CrCl $<$ 15 mL/min:
Avoid use
- Nonvalvular Afib w/CrCl $>$ 95 mL/min: Avoid use

Indication: Nonvalvular Afib

Other Indication:

Expanse Pharmacy - Edoxaban Indication Protocol

Medication **Taper** Protocol Chemo Comments Instructions Queries Screenings Provider

Dr. Number: 1600001733 Edoxaban 30 mg Tablet

- Criteria for patient receiving edoxaban:
- INR</= 2.5 if warfarin received within last 7 days
- Order INR If no INR in last 24 hrs (inpt or outpt)
- If INR>2.5, hold edoxaban until INR </=2.5
- Be aware DOACs can falsely elevate INR due to interaction with assay.
- Continue edoxaban if patient not recently on warfarin as appropriate.
- Dose dependent on indication, renal function and weight.
- VTE indications, </=60 kg: 30 mg PO daily
- Nonvalvular Afib OR VTE indications with CrCl 15-50 ml/min:
30 mg PO daily
- Nonvalvular Afib OR VTE indications with CrCl <15 ml/min:
Avoid use
- Nonvalvular Afib w/CrCl > 95 mL/min: Avoid use

Indication:
Other Indication:

Cancel Save

Medication Detail

Detail History Flowsheet Monograph AssocData Prot/Taper Order Links

Medication

Savaysa 30 mg (See Protocol) PO DAILY SCH
Generic: edoxaban
Dispense: 1 Tablet/30 mg
Give: 1 Tablet (30 mg total)

Start	Stop	Status
05/01/25 17:00		Active

Protocol

Edoxaban Indication

- Criteria for patient receiving edoxaban:
- INR</= 2.5 if warfarin received within last 7 days
- Order INR If no INR in last 24 hrs (inpt or outpt)
- If INR>2.5, hold edoxaban until INR </=2.5
- Be aware DOACs can falsely elevate INR due to interaction with assay.
- Continue edoxaban if patient not recently on warfarin as appropriate.
- Dose dependent on indication, renal function and weight.
- VTE indications, </=60 kg: 30 mg PO daily
- Nonvalvular Afib OR VTE indications with CrCl 15-50 ml/min:
30 mg PO daily
- Nonvalvular Afib OR VTE indications with CrCl <15 ml/min:
Avoid use
- Nonvalvular Afib w/CrCl > 95 mL/min: Avoid use

Indication: Nonvalvular Afib

eMAR

Protocols are viewed in the MAR by selecting the P icon or by selecting the Prot/Taper button.

MEDITECH Expanse TIP SHEET

OM, Pharmacy, MAR

Dabigatran Indication Ordering Protocol

Provider Order Entry

Updated guidance text for dabigatran.

Indication for use is required. If Other is chosen, a free text query will appear.

Pharmacy Verification

Pharmacist can view the protocol by clicking the i button on the order in the desktop, or by clicking the Protocol button during verification.

Protocol: Dabigatran Indication v2

- Criteria for patient receiving dabigatran:
 - INR less than 2 if warfarin received within last 7 days
 - Order INR if no INR in last 24 hrs (inpt or outpt)
 - If INR greater than 2, hold dabigatran until INR less than 2
 - Please be aware DOAC's can falsely elevate INR due to
 - interaction with assay. Continue dabigatran if patient was
 - not recently on warfarin, as appropriate.
 - Nonvalvular a.fib with CrCl 15-30 mL/min:
 - 75 mg PO BID
 - Nonvalvular a.fib with CrCl less than 15 mL/min: Avoid use

* Indication: Nonvalvular Afb

Taper: VTE Treatment

Problem: VTE Recurrence Ppx

Orders with Activity	Instructions	Status	Source
dabigatran(Pradaxa) dabigatran 75 mg Capsule U000001722 M	150 MG PO BID SCH 05/01/25 1230 MAIN.PRNH	Unverified Protocol	OM Hospitalist01, Provider

View Order Data

Protocol

Protocol Queries

- Criteria for patient receiving dabigatran:
 - INR less than 2 if warfarin received within last 7 days
 - Order INR if no INR in last 24 hrs (inpt or outpt)
 - If INR greater than 2, hold dabigatran until INR less than 2
 - Please be aware DOAC's can falsely elevate INR due to
 - interaction with assay. Continue dabigatran if patient was
 - not recently on warfarin, as appropriate.
 - Nonvalvular a.fib with CrCl 15-30 mL/min:
 - 75 mg PO BID
 - Nonvalvular a.fib with CrCl less than 15 mL/min: Avoid use
- Indication: VTE Treatment
- Other Indication:

Medication Taper Protocol Chemo Comments Instructions Queries Screenings Provider

Dx Number: U000001722 Dabigatran 75 mg Capsule

- Criteria for patient receiving dabigatran:
 - INR less than 2 if warfarin received within last 7 days
 - Order INR if no INR in last 24 hrs (inpt or outpt)
 - If INR greater than 2, hold dabigatran until INR less than 2
 - Please be aware DOAC's can falsely elevate INR due to
 - interaction with assay. Continue dabigatran if patient was
 - not recently on warfarin, as appropriate.
 - Nonvalvular a.fib with CrCl 15-30 mL/min:
 - 75 mg PO BID
 - Nonvalvular a.fib with CrCl less than 15 mL/min: Avoid use
- Indication: VTE Treatm
- Other Indication:

Cancel Save

Expanse Pharmacy-Dabigatran Indication Ordering Protocol

Medication Detail

[Detail](#)
[History](#)
[Flowsheet](#)
[Monograph](#)
[AssocData](#)
[Prot/Taper](#)
[Order](#)
[Links](#)

Medication	Start	Stop	Status
Pradaxa 150 mg (See Protocol) PO BID SCH Generic: dabigatran Dispense: 2 CapsuleS/75 mg Give: 2 CapsuleS (150 mg total)	05/01/25 12:30		Active

Protocol

Dabigatran Indication v2

- Criteria for patient receiving dabigatran:
- INR less than 2 if warfarin received within last 7 days
- Order INR if no INR in last 24 hrs (inpt or outpt)
- If INR greater than 2, hold dabigatran until INR less than 2
- Please be aware DOAC's can falsely elevate INR due to interaction with assay. Continue dabigatran if patient was not recently on warfarin, as appropriate.
- Nonvalvular a.fib with CrCl 15-30 mL/min:
- 75 mg PO BID
- Nonvalvular a.fib with CrCl less than 15 mL/min: Avoid use

Indication:
 VTE Treatment

eMAR

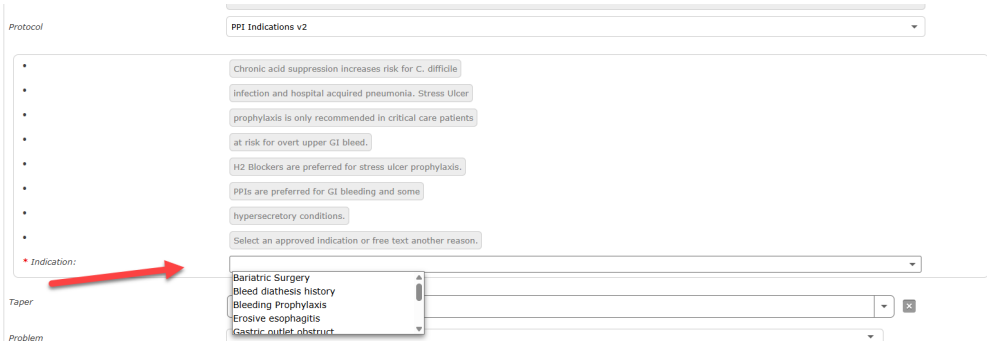
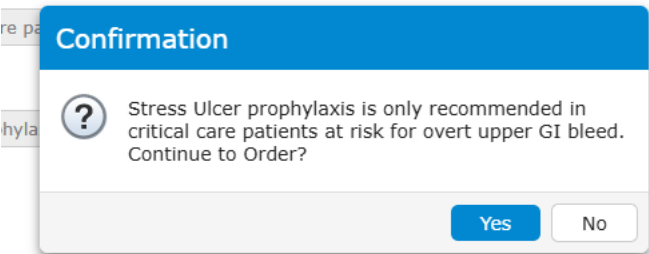

Protocols are viewed in the MAR by selecting the P icon or by selecting the Prot/Taper button.

MEDITECH Expanse TIP SHEET

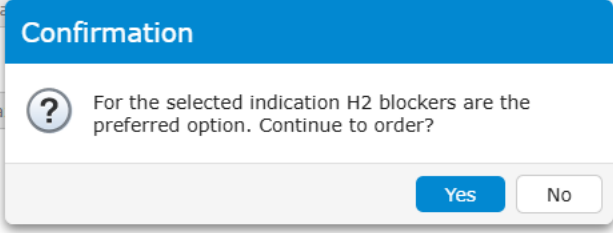
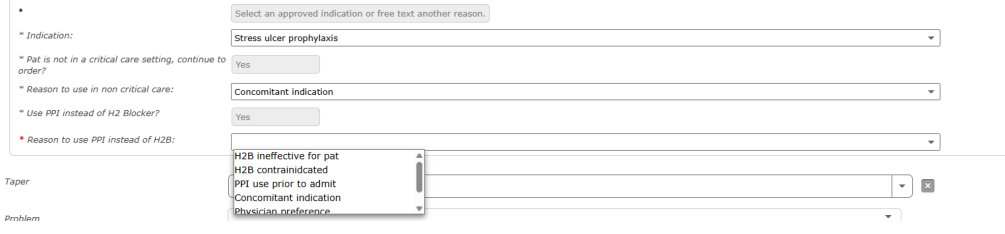
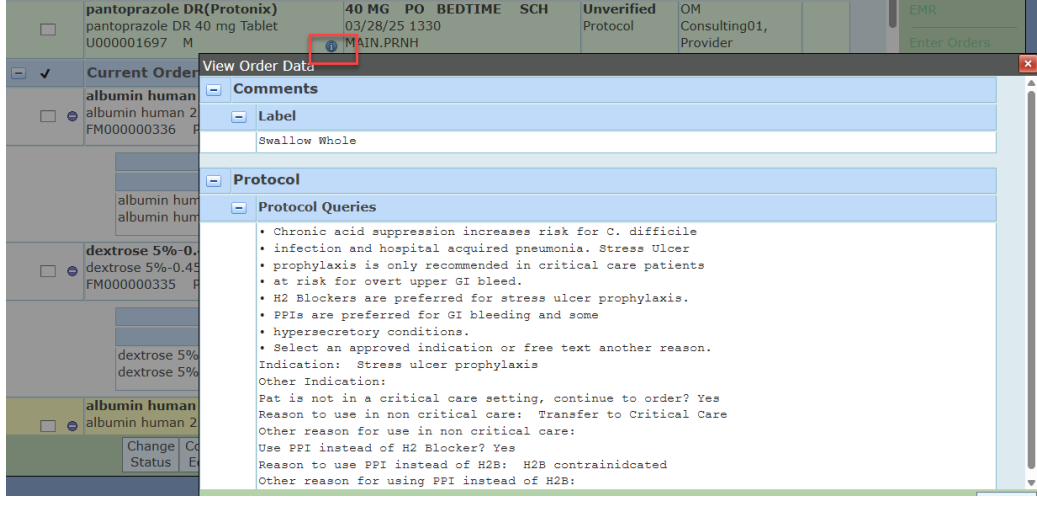
OM, PHA and MAR

PPI and H2B Indications Protocol v2

Both PPI and H2B will require a reason to be entered if the patient is not currently in a critical care location. For the indication of Stress Ulcer Prophylaxis, the provider must also enter a reason if a PPI is used instead of an H2B.

	<h3>Provider</h3> <p>Providers are required to enter indications for PPI and H2B medications.</p> <p>When choosing Other for an indication, a free text entry query will display for provider entry.</p>
	<p>If the patient is currently NOT in a critical care location and the indication of Stress Ulcer Prophylaxis is chosen; the provider will see this pop-up warning.</p> <p>Choosing No will direct the provider to uncheck the order.</p>
	<p>Choosing yes will display the reason for use in a non-critical care location query.</p> <p>When choosing Other for the reason a free text entry query will display for provider entry.</p>

Expanse Pharmacy PPI and H2B Indications

 <p>Confirmation</p> <p>? For the selected indication H2 blockers are the preferred option. Continue to order?</p> <p>Yes No</p>	<p>For PPI ordering, if the provider continues, they will see this pop-up warning. H2B are the preferred for Stress Ulcer Prophylaxis.</p> <p>Choosing No will direct the provider to uncheck the order.</p>
 <p>Select an approved indication or free text another reason.</p> <p>* Indication: Stress ulcer prophylaxis</p> <p>* Pat is not in a critical care setting, continue to order? Yes</p> <p>* Reason to use in non critical care: Concomitant indication</p> <p>* Use PPI instead of H2 Blocker? Yes</p> <p>* Reason to use PPI instead of H2B: H2B ineffective for pat, H2B contraindicated, PPI use prior to admit, Concomitant indication, Physician preference</p> <p>Taper</p> <p>Problem</p>	<p>Choosing yes will display a reason for choosing PPI over H2B query.</p> <p>When choosing Other for the reason a free text entry query will display for provider entry.</p>
 <p>Order entry interface showing protocol queries for pantoprazole DR (Protonix).</p> <p>Protocol Queries:</p> <ul style="list-style-type: none"> Chronic acid suppression increases risk for C. difficile infection and hospital acquired pneumonia. Stress Ulcer prophylaxis is only recommended in critical care patients at risk for overt upper GI bleed. H2 Blockers are preferred for stress ulcer prophylaxis. PPIs are preferred for GI bleeding and some hypersecretory conditions. Select an approved indication or free text another reason. <p>Indication: Stress ulcer prophylaxis</p> <p>Other Indication:</p> <p>Pat is not in a critical care setting, continue to order? Yes</p> <p>Reason to use in non critical care: Transfer to Critical Care</p> <p>Other reason for use in non critical care:</p> <p>Use PPI instead of H2 Blocker? Yes</p> <p>Reason to use PPI instead of H2B: H2B contraindicated</p> <p>Other reason for using PPI instead of H2B:</p>	<h3>Pharmacy</h3> <p>Pharmacist can view the protocol by clicking the “i” button from the pharmacist desktop or by clicking on the protocol tab during order verification.</p>

Expanse Pharmacy PPI and H2B Indications

Medication Taper Protocol Chemo Comments Instructions Queries Screenings Provider

Rx Number: 11000001608 **Prot/Taper** Ranitidine 30 mg Tablet

- Chronic acid suppression increases risk for C. difficile infection and hospital acquired pneumonia. Stress Ulcer prophylaxis is only recommended in critical care patients at risk for overt upper GI bleed.
- H2 Blockers are preferred for stress ulcer prophylaxis.
- PPIs are preferred for GI bleeding and some hypersecretory conditions.
- Select an approved indication or free text another reason.

Indication: Stress ulc
Other Indication:

1 of 2 Goto 2

Cancel Save

Medication Detail

Detail History Flowsheet Monograph AssocData Prot/T

Medication	Start	Stop	Status
Protonix 40 mg (See Protocol) PO BEDTIME SCH Generic: pantoprazole DR Dispense: 1 Tablet/40 mg Give: 1 Tablet (40 mg total) Label Comments: Swallow Whole	03/28/25 13:30		Active

Protocol PPI Indications v2

- Chronic acid suppression increases risk for C. difficile infection and hospital acquired pneumonia. Stress Ulcer prophylaxis is only recommended in critical care patients at risk for overt upper GI bleed.
- H2 Blockers are preferred for stress ulcer prophylaxis.
- PPIs are preferred for GI bleeding and some hypersecretory conditions.
- Select an approved indication or free text another reason.

Indication: Stress ulcer prophylaxis
Pat is not in a critical care setting, continue to order? Yes
Reason to use in non critical care: Transfer to Critical Care
Use PPI instead of H2 Blocker? Yes
Reason to use PPI instead of H2B: H2B contraindicated

Nursing

Nursing can view the protocol by clicking on the P icon from the MAR or by clicking on the Prot/Taper button during administration.