

# MEDITECH Expanse TIP SHEET

## Pharmacy

### Diluent Volume PHA Rule

#### Pharmacy Verification

During order verification the pharmacist will be alerted if there is a mismatch between the ordered IV Fluid (Diluent) Volume and the Volume that should be administered based on the defined standard reconstitution concentration.

There are two situations in which this could apply.

1. Nursing reconstitutes the vial with a diluent and then withdrawals the dose.
2. Nursing attaches a vial to a bag with an adapter, mixes, and then withdrawals the dose from the bag.

The volume field should be edited to match the total volume to be administered to the patient matching the dose ordered. The pharmacist should be using a validated medical reference such as Clinical Pharmacology, NeoFax, LexiComp, etc., for verifying the correct volume corresponding to the ordered dose and concentration.

**NOTE:** the pharmacist should update the **FIXED TOTAL VOLUME** when nursing will be attaching a vial to a bag. This will account for any volume the additive may add.

**Error**

For the dose of 270 MG, update the volume of sterile water to 2.7 mL. Nursing will be instructed to add 5 mL of diluent to the ampicillin vial. Final concentration is 100 mg/mL.

Close

IV administration

**Error**

For the dose of 236 MG, update the volume of sterile water to 0.9 mL. Nursing will be instructed to add 1.8 mL of diluent to the ampicillin vial. Final concentration is 250 mg/mL.

Close

IM administration

**Error**

For the dose of 275 mg, update the FIXED TOTAL VOLUME to 55 mL. Nursing will be instructed to attach vial to a bag and mix. Then withdraw 55 mL from bag into syringe for administration of 275 mg. Final concentration is 5 mg/mL.

Close

Fixed Total Volume 55

Calculated Total Volume 55

## Diluent Volume Rule



Reconstitute ampicillin vial with 5 mL prior to withdrawal of 2.7 mL to make the 270 MG dose.

### eMAR (Nursing)

#### Example 1 (Vial with Diluent)

Upon scanning the vial for administration, the nurse will be presented with the reconstitution instructions for the dose to be administered.

The nurse will be required to make edits to the dose and volume based on the Vials that are scanned.

These edits should match the values that were displayed in the reconstitution instructions rule.

Continue to follow normal EMAR process of documenting administration site and saving once all elements have been scanned.

#### Example 2 (Vial with Bag)

Upon scanning the vial for administration, the nurse will be presented with the reconstitution instructions for the dose to be administered.

The nurse will be required to make edits to the dose and volume based on the Vial and Bag that are scanned.

Manual  
Barcode

#### Medication Administration

Scan List Admin **Flowsheet** Prot/Taper Monograph Links

Medication	Start	Stop	Status
<b>ampicillin sodium 270 mg</b> <b>In Normal Saline 10 mL 2.7 mL</b> <b>@ 10.8 mls/hr IV Q8H SCH</b> Bag Volume: 2.7 mls Duration: 15 min Generic: ampicillin sodium sodium chloride 0.9%	09/09/25 08:00		Active

Associated Data Result Date Group

Scan	Medication	PHA Order Size	PHA Disp Size	PHA Disp Form	Cumulative Scanned Dose	Dose to be Administered	Ordered Dose	Discrepancy
III	ampicillin sodium	500 mg	500 mg	Vial.Powd	500 mg	500 mg	270 mg	+230 mg
III	Normal Saline 10 mL	10 ml	10 ml	Injectable	10 ml	10 ml	2.7 ml	+7.3 ml

Mode  
Hide  
Text

#### Medication Administration

Scan List Admin **Flowsheet** Prot/Taper Monograph Links

Medication	Start	Stop	Status
<b>ampicillin sodium 270 mg</b> <b>In Normal Saline 10 mL 2.7 mL</b> <b>@ 10.8 mls/hr IV Q8H SCH</b> Bag Volume: 2.7 mls Duration: 15 min Generic: ampicillin sodium sodium chloride 0.9%	09/09/25 08:00		Active

Associated Data Result Date Group

Scan	Medication	PHA Order Size	PHA Disp Size	PHA Disp Form	Cumulative Scanned Dose	Dose to be Administered	Ordered Dose	Discrepancy
III	ampicillin sodium	500 mg	500 mg	Vial.Powd	500 mg	270 mg	270 mg	
III	Normal Saline 10 mL	10 ml	10 ml	Injectable	10 ml	2.7 ml	2.7 ml	

Tue Sep 9 08:12 by BRU9401

Source ampicillin sodium In Normal Saline 10 mL 2.7 mL @ 10.8 mls/hr IV Q8H SCH

Assessments

Intravenous Infusion Site

Intravenous infusion site

☐ Ankle left    ☐ Arm right upper    ☐ Femoral right    ☐ Hand left    ☐ Leg right    ☐ Thumb left    ☐ Wrist right  
☐ Ankle right    ☐ Dialysis access    ☐ Foot left    ☐ Hand right    ☐ Port/Implanted device    ☐ Thumb right    ☐ Umbilical artery  
☐ Antecubital left    ☐ External jugular left    ☐ Forearm left    ☐ Internal jugular left    ☐ Scalp    ☐ Umbilical vein  
☐ Antecubital right    ☐ External jugular right    ☐ Forearm right    ☐ Internal jugular right    ☐ Subclavian left    ☐ Wrist left  
☐ Arm left upper    ☐ Femoral left    ☐ Forearm left    ☐ Leg left    ☐ Subclavian right



Attach acyclovir vial to normal saline bag with an adaptor and mix appropriately to prepare dilution. Withdraw 55 mL from bag into syringe for administration of 275 mg.

Manual  
Barcode

#### Medication Administration

Scan List Admin **Flowsheet** Prot/Taper Monograph Links

Medication	Start	Stop	Status
<b>Zovirax 275 mg</b> <b>In Normal Saline 100 mL 49.5 mL</b> <b>@ 110 mls/hr IV ONCE SCH</b> Current Rate: 110 mls/hr Bag Volume: 55 mls Duration: 30 min Generic: acyclovir sodium chloride 0.9%	09/17/25 08:45		Active

Label Comments:  
PED mg/kg Dosing

Associated Data Result Date Group

Scan	Medication	PHA Order Size	PHA Disp Size	PHA Disp Form	Cumulative Scanned Dose	Dose to be Administered	Ordered Dose	Discrepancy
III	Zovirax	500 mg	10 ml	Vial	500 mg	500 mg	275 mg	+225 mg
III	Normal Saline 100 mL	100 ml	100 ml	Bag	100 ml	100 ml	49.5 ml	+50.5 ml

Diluent Volume Rule

Medication Administration

Scan List

Admin

Flowsheet

Prot/Taper

Monograph

Links

Medication

Start

Stop

Status

Zovirax 275 mg

In Normal Saline 100 ml 49.5 ml

@ 110 mls/hr IV ONCE SCH

Current Rate: 110 mls/hr

Bag Volume: 55 mls

Duration: 30 min

Generic: acyclovir sodium chloride 0.9%

09/17/25 08:45

Active

Label Comments:

PED mg/kg Dosing

Associated Data

Result

Date

Group

Scan	Medication	PHA Order Size	PHA Disp Size	PHA Disp Form	Cumulative Scanned Dose	Dose to be Administered	Ordered Dose	Discrepancy
III	Zovirax	500 mg	10 ml	Vial	500 mg	275 mg	275 mg	
III	Normal Saline 100 mL	100 ml	100 ml	Bag	100 ml	49.5 ml	49.5 ml	

Schedule Date

Unscheduled

\* Admin Date

09/17/25 08:39

Admin User

BRU9401

\* Patient Location

NUR.QE.X

Rate (mls/hr)

110

Administration Comments

Page | 3

HCA  
Healthcare®

# MEDITECH Expanse TIP SHEET

## Pharmacy

### Velcade Dilution

#### Pharmacy Verification

Velcade should be diluted to 1 mg/mL for IV administration, and to 2.5 mg/mL for SUBQ administration.

PHA rule will help to ensure the appropriate IV Fluid volume is added to the order during verification.

The screenshot shows the MEDITECH Expanse interface for a chemotherapy infusion order. The order is for Velcade (bortezomib) 3.5 mg Vial. The IV fluid is NS10VIA (sodium chloride 0.9% 10 mL Via). The ordered dose is 3.5 mg, and the volume is 10 mL. A confirmation dialog box is displayed, asking the user to update the volume of IV fluid to 3.5 mL to achieve a final concentration of 1 mg/mL. The dialog box has 'Yes' and 'No' buttons.

IV Fluid	Ordered Dose	Volume
1 NS10VIA sodium chloride 0.9% 10 mL Via		10 ML
2		
3		

Additive	Ordered Dose	Actual
1 BORT3.5V2 bortezomib 3.5 mg Vial		3.5 MG
2		
3		

Confirmation

For the dose 3.5 mg being administered **IV** update the volume of IV fluid to 3.5 mL. Final Concentration: **1 mg/mL**. Continue?

Yes No

Enter Smart Pump Data Cancel Save

The screenshot shows the MEDITECH Expanse interface for a chemotherapy infusion order. The order is for Velcade (bortezomib) 3.5 mg Vial. The IV fluid is NS10VIA (sodium chloride 0.9% 10 mL Via). The ordered dose is 3.5 mg, and the volume is 1.4 mL. A confirmation dialog box is displayed, asking the user to update the volume of IV fluid to 1.4 mL to achieve a final concentration of 2.5 mg/mL. The dialog box has 'Yes' and 'No' buttons.

IV Fluid	Ordered Dose	Volume
1 NS10VIA sodium chloride 0.9% 10 mL Via		1.4 ML
2		
3		

Additive	Ordered Dose	Actual
1 BORT3.5V2 bortezomib 3.5 mg Vial		3.5 MG
2		
3		

Confirmation

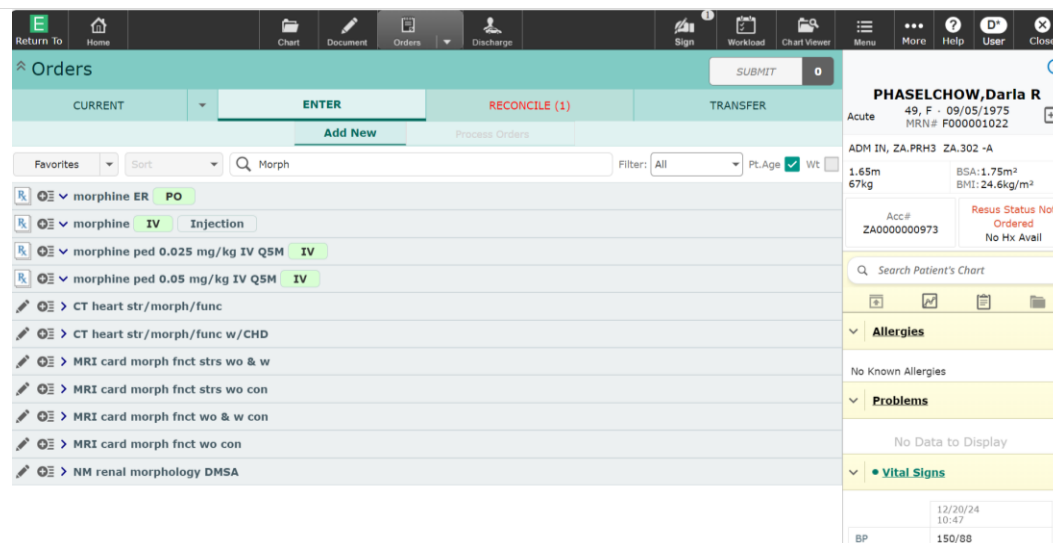
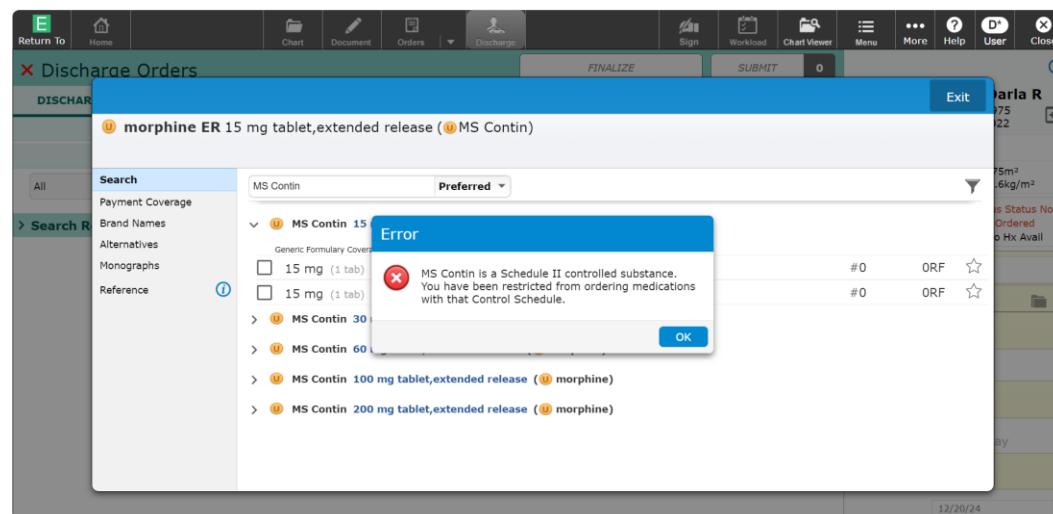
For the dose 3.5 mg being administered **SUBQ** update the volume of IV fluid to 1.4 mL. Final Concentration: **2.5 mg/mL**. Continue?

Yes No

Enter Smart Pump Data Cancel Save

# MEDITECH Expanse TIP SHEET

## DEA License Check Enhancements

### OM Order Entry:

If a provider's DEA is expired/missing, or they have a Controlled Substance Exclusion on their DEA License:

**Inpatient (1<sup>st</sup> screenshot):** The provider (or anyone entering a medication on behalf of the provider [e.g. pharmacist or nurse]) will see the medication. They will not be able to select any strings or be able to order the medication.

**Discharge (2<sup>nd</sup> screenshot):** The medication and string will show, but an error will present rather than strings not appearing.

The provider should contact Medical Staff Services with any questions.

Pharmacist Desktop - Regyates, Inptone Test - CORPTSTX (CORP TESTPPN - Test) Facility: CORPTSTX Site: XXXX.MAIN

Regyates, Inptone Test  
 10:35 AM 05/07/1989  
 ADM IN ZA.SHL3 ZA.368-A Allergy: Not Recorded Adv: Not Recorded

Medication Taper Protocol Charge Comments Instructions Queries Screenings Provider

Rx Number NEW Morphine 2 mg/mL Injectable  
 \* Medication MORP2SYR19  
 \* Order Type M Medication  
 Clinical Ind Dosing Wt

NOTE: Dose Range Checking is not supported for Zero/Ranged dose orders.

\* Dose 2 MG 1 ML PER DOSE  
 Range Dose Low High  
 \* Route  
 \* Frequency  
 \* Schedule Par Let

\* Start Date \* Time 0916  
 Total Doses  
 Bulk

\* Inventory MAIN.XXXX XXXX Main  
 \* Dispense 1 InjectableS  
 Cart Amount 0

\* Charge Type NOCALC  
 \* Charge 0.00  
 Pending

Label Comments  
 In the case a patient requests a less potent or lower dose of medication than is ordered per the pain scale, patient

Error  
 A DEA number is required to enter controlled substances.  
 \*\*\*Corp Use Only\*\*\* Dr. FirstDEA number is missing.

Close

Cancel Save

### Pharmacy Order Entry (Pharmacy Only):

If a provider's DEA is expired/missing, or they have a Controlled Substance Exclusion:

The following Error will appear during **Pharmacy Order Entry**:

"A DEA number is required to enter controlled substances."

Pharmacist will need to contact the Provider.