

MEDITECH Expanse TIP SHEET

Discharge Tracker for ED Outlier Edits

The five-day documentation cutoff window will apply to this tracker.



ED Discharge Tracker:

The ED discharge tracker located within “**More Lists**” can be used to edit ED patient outliers. Patients will only populate to this tracker if they have a “**Physically leaves (discharged) Date/Time.**”

*Note:

LPT (Left Prior to Triage) patients will not be listed on this tracker.

Select “**More Lists, the discharged date to review, and the patient.**”

To edit “**Patient Disposition, Dispo Assessment, and Physically Leaves ED Date/Time**” Select “**Discharge**” on the top navigation bar.



Return To Home

Chart Document Orders Discharge

Registered Nurse Temp

My List

Scan Patient Wristband
Add To My List
Replace My List
Open Hand Off
Open Patient Summary
Open Order/Result
Home Screen Defaults
Manage Orders
ED Visit Data
Review ED Staff

Any ED Loc... Recently Acc... 0 ED Dischar... 3

Fri 20 Jun 2025 Today

Workflow Alerts Nursing POC Lab/Micro Gas Urine Swab EKG/Mon
Clinical Alerts BH Alerts

Admit, Tracker 53 F Pref Pharm

2 ESI / Emergent

Admit to same hospital, sti...

Home Meds Click to Update

Special Indicators

Temperature

Blood Pressure

Pulse

Respiratory Rate

SPO2%

Labs Imaging

To Edit “ESI Level, Arrival Mode, Triage At Date/Time” select the patient, hamburger icon, ED Visit Data.

Tracker Admit - ED Visit Data

Admit, Tracker 53 F 01/01/1972 ADM IN FPRH4 F-421-A

Resus Status Not Ordered No Hx Avail 5ft 4in 65kg BSA:1.71m BMI:24.6kg/m Allergy/Adv: No Known Allergies

F0000082481 F000536700 E00010542

Visit Data Activity Billing

Patient data

Last Name Admit
First Name Tracker
Middle
Suffix
Preferred Name
Pronouns
Temporary Patient Name No
Birthdate 01/01/1972
Age 53
Birth Sex F
Legal Sex Female
Language ENGLISH

Stated Complaint Admit to same hospital, still there
Chief Complaint Cardiac Related

ED Location Portsmouth Main ED
Area
Station
Group
ED Provider Emergency01,Provider
ED Resident
ED Midlevel Provider
ED Nurse
Primary Care Provider Hospitalist01,Provider

Status OFF
Priority 2 ESI / Emergent
Condition
Arrival Date/Time 06/20/25 11:58
Arrival Mode WALK IN
Triage At 06/20/25 11:59
Time Seen by Provider 06/20/25 12:05

Ready for CT
Ready for X-Ray
In CT
In X-Ray
In Ultrasound
Back from Radiology
In Room
Bed Reserved
Ready for Discharge
OFF
Outlier Edits

Other Complaint

Other Provider

Change the status to “Outlier Edits.”

Tracker Admit - ED Visit Data

Admit, Tracker 53 F 01/01/1972 ADM IN FPRH4 F-421-A

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Stated Complaint Admit to same hospital, still there
Chief Complaint Cardiac Related

ED Location Portsmouth Main ED
Area
Station
Group
ED Provider Emergency01,Provider
ED Resident
ED Midlevel Provider
ED Nurse
Primary Care Provider Hospitalist01,Provider

Status In Room
Priority 2 ESI / Emergent
Condition
Arrival Date/Time 06/20/25 11:58
Arrival Mode WALK IN
Triage At 06/20/25 11:59
Time Seen by Provider 06/20/25 12:05

Other Complaint

Other Provider

Available fields will open to edit.

Tracker Admit - ED Visit Data

Return to: **Admit, Tracker** 53 F 01/01/1972 ADM IN F.PRH4 F.421-A **News Status Not Ordered No Hx Avail** 5ft 4in 65kg BSA:1.73m BMI:24.6kg/m² Allergy/Adv: No Known Allergies F00000082481 F000556703 E00010542

Visit Data | Activity | Billing

Patient data		Status	In Room
Last Name	Admit	Priority	Ready for CT
First Name	Tracker	Condition	Ready for X-Ray
Middle		Arrival Date/Time	In CT
Suffix		Arrival Mode	In X-Ray
Preferred Name		Triaged At	In Ultrasound
Pronouns		Time Seen by Provider	Back from Radiology
Temporary Patient Name	No		In Room
Birthdate	01/01/1972		Bed Reserved
Age	53		Ready for Discharge
Birth Sex	F		OFF
Legal Sex	Female		
Language	ENGLISH		
Stated Complaint	Admit to same hospital, still there		
Chief Complaint	Cardiac Related		
ED Location	Portsmouth Main ED		
Area			
Station			
Group			
ED Provider	Emergency01,Provider		
ED Resident			
ED Midlevel Provider			
ED Nurse			
Primary Care Provider	Hospitalist01,Provider		

Other Complaint

Other Provider

When edits are complete, change the status back to **“OFF.”**

***Note:**

Changing the patient status from OFF to Outlier Edits will reactivate the patient on your “All ED” tracker. It is vital to place the status back to OFF in order to remove them from the “All ED” tracker. **Do not use any other status to reactivate patients to make edits.**

Triage

Return To Home Chart Document Orders Discharge Triage Sign Workload

Print Reg Forms

Patient Data

ED Arrival Information

Triage Assessments

Allergies

Home Medications

Preferred Pharmacies

▼ Patient Data

Patient Data

Name

Admit, Tracker

Birthdate Age Birth Sex Legal Sex Language

01/01/1972 53 F Female ENGLISH

▼ ED Arrival Information

Arrival Date/Time

06/20/25 11:58

Arrival Mode

WALK IN

ED Area

ED Group

Editing while the patient is admitted to inpatient will not be available.

“Arrival Date/Time” can be edited here in Triage. Select the **“Triage”** button located on the top navigation bar.

***Note:**

Arrival Date/Time cannot be edited while the patient has an active admission. Work with registration once the patient has been discharged from inpatient.

MEDITECH Expanse TIP SHEET

Ready for Discharge



EM-General/Med Clear/Rx Refill Preview Review and Refine **Ready for Discharge** ☒ Typicals Save Complete

Principal Provider Emergency01 Contributors Last Saved at 02/06/24 08:17

HPI ROS PMH PE IntD Proc MDM Discharge Plan Depart/Quality

> EM-MDM:Gen/Med Clear/Rx Refill

▼ Discharge ...

Clinical Impression ☒ Asthma Add Qualifiers

Disposition Decision **Discharge to home** Admit Transfer Observation Against medical advice Deceased

Discharged to nursing home ESP-screened & discharged Left prior to MSE

Left prior to triage

Other

Date of Decision 02/06/24

Time of Decision 08:16

When providers document patient discharge on a REG ER patient a new check box will be available to check at top of discharge plan and at the top of template. Patient must be in REG ER not PRE ER status to be able to click checkbox.

Documentation Steps for ED Discharge:

1. Document Clinical Impression
2. Document Disposition Decision
3. Document Date and Time of Decision
4. Click Ready for discharge check box

Provider Emergency01					
My List 22		UCFLN Main ED 84		No Provider Assigned 2	
Bed	Name	Ready Dispo	Document	Status	ED Signup Button
ESI	Age BirthSex	Alerts		LOS	
CC	ED Stated Complaint	BH Alerts		Seen by Provider	
Regg Status	Comment	PCP		Dispo Dec	
	ZACHARY, ANDREA RENAE		No Document	Ready for Discharge	Provider Emergen...
	10 F			186h 16m	
No Chief Complaint	SICK WITH HIGH FEVER			No Time Seen	
> REG ER		Primary01, Provider			

Update to Physician/APP Trackers

☐ ZACHARY, ANDREA RENAE **Ready for Discharge** ☒ Emergency01

No Chief Complaint SICK WITH HIGH FEVER 4m Unknown State Status

REG ER

Home Meds **Click to Update** Labs Imaging Meds Due Worksheet

Special Indicators

Temperature

Blood Pressure

Pulse

Respiratory Rate

SPO2%

View of Nursing Tracker

NOTE: unchecking Ready for Discharge will update ED status to IN ROOM automatically.

CHG0399315–Change order name of ED Bedside Swallow Evaluation and Nurse Bedside Swallow Eval



Changes go in effect 08/20/25

- Name change to ED orderable intervention from ED Bedside Swallow Evaluation to ED Bedside Swallow Screening

Return To Home Chart Document Orders Discharge

Orders

CURRENT ENTER RECO

Add New Process Order

Favorites Sort ed bedside

ED Bedside Swallow Evaluation

Return To Home Chart Document Orders Discharge

Orders

CURRENT ENTER R

Add New Process C

Favorites Sort ed bedside

ED Bedside Swallow Screening

Return To Home Chart Document Orders Discharge

Orders

CURRENT ENTER RECONCILE

Add New Process Orders

Favorites Sort nurse bedside Fil

> Nurse Bedside Swallow Eval

Return To Home Chart Document Orders Discharge

Orders

CURRENT ENTER RECONCILE

Add New Process Orders

Favorites Sort nurse bedside

> Nurse Bedside Swallow Screening

- Name change to order Nurse Bedside Swallow Eval to Nurse Bedside Swallow Screening

•

MEDITECH Expanse TIP SHEET

EDM-Admission and Discharge with Generic Provider



Discharge Plan

Ready for Discharge: ☐ [Cancel] [Save] [Save & Close]

Patient Education: Click to Enter Patient Education

Patient Education and Monograph Language: ENGLISH

Dispo Assessment: Disposition- DC, TX, ADM, LPT

Stand Alone Forms: Click to Enter Stand Alone Forms

Reconcile Problems: Click to Reconcile Problems

Activity Restrictions/Additional Instructions: Click to Enter Activity Restrictions/Additional Instructions

Follow Up Appointments: Click to Enter Follow Up Appointments

Discharge locations/Resources: Click to Enter Condition

ED Midlevel Provider: Click to Enter ED Midlevel Provider

ED Provider: EDDOC, Generic MD

ED patients who have had a generic or temporary provider placed during the registration process will no longer allow for admission or discharge until the correct real ED Physician has been listed on the account.

Discharge Plan

Ready for Discharge: ☐ [Cancel] [Save] [Save & Close]

Patient Disposition: Home or Self

Clinical Impression (Required):

Prescriptions:

Patient Education: Click to Enter Patient Education

Patient Education and Monograph Language: ENGLISH

Dispo Assessment: ☒ Disposition- DC, TX, ADM, LPT

Physically Leaves ED: 08/07/25 10:54

Stand Alone Forms: ☒ Suicide Prevention Resources

My Health One: ☐ Work/School Release: ☐

Activity Restrictions/Additional Instructions:

Follow Up Appointments:

Error: Temporary Provider still assigned to Patient

ED Nurses will now get a hard stop when attempting to enter Physically leaves in the DC plan and the account will **NOT** be discharged.

Discharge Plan

Ready for Discharge: ☐ [Cancel] [Save] [Save & Close]

Patient Disposition: Home or Self

Clinical Impression (Required):

Prescriptions:

Patient Education: Click to Enter Patient Education

Patient Education and Monograph Language: ENGLISH

Dispo Assessment: ☒ Disposition- DC, TX, ADM, LPT

Physically Leaves ED: 08/07/25 10:54

Stand Alone Forms: ☒ Suicide Prevention Resources

My Health One: ☐ Work/School Release: ☐

Activity Restrictions/Additional Instructions:

Follow Up Appointments:

Error: Temporary Provider still assigned to Patient

Click ok to exit out of the plan

Click ok to exit out of the plan

ED staff will need to escalate to the ED Physician caring for the patient to ensure they have signed up for the patient.

Once the ED Physician has sign up for the patient, the generic provider will be replaced on the account and allow for

admission/discharge.

Discharge Plan

Ready for Discharge: ☐ Cancel Save Save & Close

***Patient Disposition (Required)** Click to Enter Patient Disposition

***Clinical Impression (Required)**

Prescriptions

Patient Education

Patient Education and Monograph Language: ENGLISH

Dispo Assessment: ☒ Disposition- DC, TX, ADM, LPT Last Doc: 08/07/25 10:53

***Physically Leaves ED (Required)** Today/Now

Stand Alone Forms: ☒ Suicide Prevention Resources Amber Hancock 08/07/25 10:54

Activity Restrictions/Additional Instructions

Follow Up Appointments

Discharge locations/Resources Click to Enter Discharge locations/Resources

ED Midlevel Provider

Test-Trauma, Burn
ED
REG ER, LCH Emergency Department
100, M - 01/01/1925
55kg
BSA: 1.81m²
BHT: 19.8kg/m²
Trauma
Acc# LC0000034673
Resus Status Not Ordered
No Hx Avail

Search Patient's Chart

Allergies
No Data to Display

Isolation & Precautions
No Data to Display

Complaints
Stated Complaint: EXPLOSION
Chief Complaint: Trauma

Vital Signs
No Data to Display

Orders Snapshot

ADMR IN True Test
TEST-TRAUMA, BURN
100 M
EXPLOSION
Trauma
DEP ER
4 J M Prof Pharm
No Chief Complaint: RIGHT SHOULDER PAIN
REG ER
Click to Update
Home Meds
Special Indicators
Temperature
Blood Pressure
Pulse
Respiratory Rate
CO2 %
Labs Imaging
Meds Due
Worklist

Discharged
Ready for CT
Ready for X-Ray
In CT
In X-Ray
In Ultrasound
Back from Radiology
In Room
Bed Reserved
Ready for Discharge
OFF

The Nurse will need to re-enter the Discharge plan to complete the disposition of the patient. Note the Patient Disposition will need to be reentered. The Disposition Assessment will be saved and not require reentry. Physically leaves will then open and become required to complete the discharge of the ED patient account.

On the ED Tracker, the account will now reflect Discharged be offed (unless admitted which will automatically be offed).

MEDITECH Expance TIP SHEET

EDM – Ready for Ultrasound Status Addition

Updated 8/4/2025



The screenshot shows the MEDITECH Expance interface. At the top is a navigation bar with icons for Sign, Workload, Menu, More, Help, User (RT), and Close. Below this is a search bar labeled 'Find Patient'. The main area displays a patient summary with tabs for Results, TAR, Status, and Sign Up. The Status tab is active, showing a list of patient statuses. A dropdown menu is open under the 'With Doctor' column, listing various status options. A red callout box points to the 'In Ultrasound' option, indicating it is the new status being added.

Results	TAR	Status	Sign Up
Blood Gas		With Doctor	Cruz R...
Chemistry		Ready for CT	Nicole W
Diag Imaging		Ready for X-Ray	
...		In CT	Cruz Michaels
Rpt-Cardiov...		In X-Ray	
Rpt-General		In Ultrasound	Roberts Patterson
Blood Gas		Back from Radiology	
Chemistry		In Room	
Diag Imaging		Bed Reserved	
...		Ready for Discharge	Cruz Ruthra
Blood Gas		OFF	
Chemistry		4h 10m	
Coagulation		4h 20m	
...			

A new status “Ready for Ultrasound” will be available for ED nursing staff to align with other imaging modalities CT and X-Ray.

MEDITECH Expanse TIP SHEET

Fluoroquinolone/UTI-Cystitis Alert Update

Provider orders Fluoroquinolone (i.e. Levofloxacin) and selects “UTI-Cystitis” as Rx Indication:

Protocol Fluoroquinolone Indications v2

* Rx Indication: Sexually Transmitted Infx
Skin & Soft Tissue Infx
UTI-Cystitis
UTI-Pyelo/Complicated
Other

* Rx Duration in Days:

* Rx Duration in Doses:

The following verbiage changes were made to the Fluoroquinolone/UTI-Cystitis pop up message in OM (when provider orders a Fluoroquinolone and selects “UTI-Cystitis” as Rx Indication):

Current vs Updated Fluoroquinolone/UTI-Cystitis Pop Up Alert Message

Confirmation

=====

Fluoroquinolones may cause potentially permanent and disabling side effects and are not recommended first-line for treatment of this indication.

=====

Recommended first-line treatments are (choose one):

- Ceftriaxone
- Gentamicin
- If documented sensitivity: Nitrofurantoin (cystitis only) or TMP/SM

(For penicillin allergy options, see institutional guidelines.)

Click YES to continue this order. Click NO to return to the order and uncheck it from being ordered.

Current

Fluoroquinolone/UTI-Cystitis Alert

Confirmation

=====

Fluoroquinolones may cause potentially permanent and disabling side effects and are not recommended first-line for treatment of this indication.

=====

Recommended first-line treatments are (choose one):

- Ceftriaxone
- **Single-Dose Aminoglycosides (e.g., gentamicin)**
- If documented susceptibilities: Nitrofurantoin (cystitis only) or TMP/SMX

For options based on local susceptibilities and allergies, see institutional guidelines or contact pharmacy.

Click YES to continue this order. Click NO to return to the order and uncheck it from being ordered.

Updated

Fluoroquinolone/UTI-Cystitis Alert

1. Replaced first line treatment “Gentamicin” with “Single-Dose Aminoglycosides (e.g., gentamicin)”.
2. Replaced line “If documented sensitivity: Nitrofurantoin (cystitis only) or TMP/SM” with “If documented susceptibilities: Nitrofurantoin (cystitis only) or TMP/SMX”.
3. Replaced line “For penicillin allergy options, see institutional guidelines.” with “For options based on local susceptibilities and allergies, see institutional guidelines or contact pharmacy.”

Expanse Order Enhancements

Sepsis Reason for Lesser Fluids

Changes go in effect: **Aug 20, 2025**



On the Sepsis Reason for Lesser Fluids (EDSELEFLBO.C.OM) order, the group response for “Reason” was missing an option. “Renal Failure” will be added. In addition, the Category will be changed from “Nursing”, to “Miscellaneous” and it will be assigned a Category GROUP of “Medications”. No re-versioning of order, screen, queries or group responses is needed. These changes were made in collaboration with the Corporate Service Line and Provider Product teams.

The screenshot shows a web-based form titled "Sepsis Reason for Lesser Fluids". At the top, there is a header bar with a pencil icon, a plus icon, and a dropdown arrow. Below the header, there is a section labeled "Stat" with a red checkmark icon. The form contains several fields: "* Provider" with the value "Hospitalist01,Provider", "* Source" with the value "Telephone Order Read-Back", "* Reason for lesser fluid" with a dropdown menu, and "* New target volume (mLs)". The dropdown menu for "Reason for lesser fluid" is open, showing options: "Fluid overload concern", "Heart failure", "Liver failure", "Renal failure" (highlighted in yellow), and "Other". At the bottom of the form, there is a section labeled "Code Sepsis" with a pencil icon, a plus icon, and a right arrow.

Sepsis Reason for Lesser Fluids order
(EDSELEFLBO.C.OM)

CATEGORY: will be changed from Nursing, to Miscellaneous and assigned a **Category GROUP** of “Medications”.

< **NEW addition** of “Renal Failure” in Group Response.

MEDITECH Expanse TIP SHEET

Adult Nitroglycerin v5 Update

The current protocol for Nitroglycerin can be confusing for nurses and lead to titration errors. Current maximum titration verbiage is a direction to the provider rather than the nurse but is being interpreted as a titration by nursing.

Current Protocol

Protocol	Adult Nitroglycerin
* Titrate by (mcg/min):	
* every (minute(s)):	
* Maximum titration rate of (mcg/min):	
* every (minute(s)):	
* Maximum rate (mcg/min):	
Goal:	ONE goal parameter is REQUIRED
* Maintain SBP between (mmHg):	
* Maintain HR between (BPM):	
* Goal (Other):	

Updated Protocol

* Titration Protocol	Adult Nitroglycerin v5
* Titrate by (mcg/min):	
* every (minute(s)):	
* Maximum rate (mcg/min):	
Goal:	ONE goal parameter is REQUIRED
* Maintain SBP between (mmHg):	
* Maintain HR between (BPM):	
* Goal (Other):	

Message



Maximum titration rate of 20 mcg/min every 3-5 min

OK

The following changes were made to Adult Nitroglycerin protocol in OM to align with V5 Adult Admin Criteria.

Maximum Rate of (mcg/min) every (minutes) queries have been removed and been replaced with Rules to alert providers when they enter values outside of accepted range

1. If the rate in query "Titrate by (mcg/min):" is greater than 20 mcg/min, a warning message **"Maximum titration rate of 20 mcg/min every 3-5 min"** appears. This is a hard stop warning, users will need to enter rate less than/equal to 20 mcg/min.
2. If the time in query "every (minute(s)):" is less than 3 minutes or greater than 5 minutes, warning message **"Maximum titration rate of 20 mcg/min every 3-5 min"** appears. This is a hard stop warning, users will need to enter time between 3 to 5 minutes to proceed.

MEDITECH Expanse TIP SHEET

Weight-based Saline Flush Reflex

Saline Lock

Comment

Reflexed Orders from Saline Lock

Saline Flush > 50 kg

sodium chloride 0.9% flush [Normal Saline Flush]

☒ sodium chloride 0.9% flush [Normal Saline Flush]

08/04/25 14:50 STOP DATE Reflex

10 ml IV Q8HR PRN syringe

* PRN Reason Flush

Within Expanse, saline flushes reflex from the following orders:

- Saline Lock
- IV Insertion/Management
- Midline Management

In current state, one flush dosage reflexes for all patients (10 mLs).

Saline Lock

☒ Routine New 08/04/25 14:59

Comment

Reflexed Orders from Saline Lock

Saline Flush < 5 kg

sodium chloride 0.9% flush [Normal Saline Flush]

☒ sodium chloride 0.9% flush [Normal Saline Flush]

08/04/25 14:59 STOP DATE

0.5 ml IV AS DIRECTED PRN syringe

These reflexes are being enhanced to reflex saline flush dosages that are based on the patient's age and weight. The dosing follows this structure:

Age	Weight	Dose
18 years old or older	Any weight	10 mL
Less than 18 years old	Greater than 50 kg	10 mL
Less than 18 years old	10 – 50 kg	2.5 mL
Less than 18 years old	5 – 10 kg	1 mL
Less than 18 years old	Less than 5 kg	0.5 mL

Message



This patient does not have a documented weight. To ensure proper saline flush dosing, please document a patient weight before continuing with order entry.

OK

If these orders are entered on a patient less than 18 years old and no prior weight has been documented, users will receive a recommendation that a weight be documented before continuing with order entry.