

MEDITECH Expanse TIP SHEET

Pharmacy



Epoetin and Darbepoetin Clinical Decision Support

Provider Order Entry

Associated data will display including most recent patient blood pressure, Hgb and iron studies if they have been ordered.

Orders			
Add New		Process Orders	
Favorites	Sort	Q EPOE	Filter: All
▼ epoetin alfa IV SUBQ			
Associated Data			
Order	Result	Date	Specimen
Blood Pressure	160/90	01/10/25 15:19	
Hgb	9.3 g/dL (13.0-17.0) L	07/28/25 13:00	
Hct	37.0 % (34.0-51.0)	04/30/25 08:29	
Iron	Pending	04/30/25 08:29	
Iron Saturation	28 % (20-55)	04/30/25 08:29	
Ferritin	101 ng/mL (26-388)	04/30/25 08:29	
PT	10.1 sec (9.5-12.1)	04/30/25 08:29	
INR	2.2 (2.0-3.0)	04/30/25 08:29	
Retic Hgb Equivalent	31.0 pg (30.0-35.0)	04/30/25 08:29	
Reticulocyte #	45.0 10 ⁹ /L (40-78)	04/30/25 08:29	
Reticulocyte % (Auto)	5.20 % (0-6.0)	04/30/25 08:29	
▼ epoetin alfa [Procrit]			
<input type="checkbox"/> 10,000 unit IV DIALYSIS-DOSE DURING SCH vial			
<input type="checkbox"/> 10,000 unit IV MoWeFr SCH vial			

Patient example #1

Hgb < 10 g/dL and has been resulted within the last 7 days in the facility.

Suggested parameters for blood pressure will default. These are editable by the provider.

Protocol: Epoetin and Darbepoetin CDS

- Hgb result is required for order entry.
- Lab result greater than 7 days will not display below.
- * Last known Hgb (g/dL): 9.3 g/dL on 07/28/25 @ 1300
- Contraindicated in patients with uncontrolled hypertension.
- Check BP and hold dose if:
 - * SBP greater than (mmHg): 160
 - or
 - * DBP greater than (mmHg): 90
- Blood pressure threshold of 160/90 mmHg recommendation is based on expert opinion and limited data.
- * Rx Indication:

Provider will need to choose an indication for the epoetin/darbepoetin.

- Contraindicated in patients with uncontrolled hypertension.
- Check BP and hold dose if:
 - * SBP greater than (mmHg): 150
 - or
 - * DBP greater than (mmHg): 90
- * Rx Indication:
 - CKD on Dialysis
 - CKD Not on Dialysis
 - Non-Myeloid Malignancy
 - Myelodysplastic Syndrome
 - Zidovudine 1x for HIV
- Hgb is greater than (g/dL):
- SBP is greater than (mmHg): 150
- DBP is greater than (mmHg): 90

Epoetin/Darbepoetin Decision Support

* Rx Indication:

Non-Myeloid Malignancy

*** Administration parameters ***

Hold dose and contact provider if any of the following:

Hgb is greater than (g/dL):

10

SPB is greater than (mmHg):

150

DBP is greater than (mmHg):

90

Hold parameters will default based on Provider’s selections.

Orders

ADD NEW

Process Orders

SUBMIT

0

Favorites

Sort

EPO

Filter: All

PT, Age

WT

▼ epoetin alfa IV SUBQ

Associated Data

Order

Result

Date

Specimen

Blood Pressure

165/95

05/01/25 07:37

Hgb

12.3 g/dL (11.0-15.0)

07/28/25 13:01

▼ epoetin alfa [Procrit]

epoetin alfa [Procrit] 10,000 unit IV Mowefr vial

☐ 10,000 unit IV DIALYSIS-DOSE DURING SCH vial

☐ 10,000 unit IV Mowefr SCH vial

☐ epoetin alfa 300 units/kg daily NICU

☐ epoetin alfa-epbx IV SUBQ

☐ Epogen IV SUBQ

☐ epoprostenol (argline)

Confirmation

Last known Hgb greater than or equal to 10 g/dL. This medication has a boxed warning associated with serious cardiovascular/neurovascular adverse events when targeting Hgb levels exceeding 11 g/dL. Proceed with order?

Yes No

Patient example #2

Hgb ≥ 10 and has been resulted within the last 7 days in the facility.

The provider will receive a box warning asking if they would like to proceed.

Ordered

07/21/25 13:15

Message

i

Must answer Yes to continue to file order. Uncheck order.

OK

Answering No, the provider will be reminded to uncheck the order.

Epoetin/Darbepoetin Decision Support

<p>Protocol: Epoetin and Darbepoetin CDS</p> <ul style="list-style-type: none"> Hgb result is required for order entry. Lab result greater than 7 days will not display below. * Last known Hgb (g/dL): 12.3 g/dL on 07/26/25 @ 1301 * Continue to enter with Hgb greater than or equal to 10 g/dL? <input type="button" value="Yes"/> * Override reason: <div>Emergent Scenario Baseline Hgb < 10 g/dL Other</div> Check BP and hold dose if : <input type="button" value="No"/> * SBP greater than (mmHg): 160 or * DBP greater than (mmHg): 90 Blood pressure threshold of 160/90 mmHg recommendation is based on expert opinion and limited data. 	<p>Answering Yes, the provider will be prompted to enter an override reason to continue to enter.</p>
<p>Protocol: Epoetin and Darbepoetin CDS</p> <ul style="list-style-type: none"> Hgb result is required for order entry. Lab result greater than 7 days will not display below. * Last known Hgb (g/dL): No result in last 7 days. * Proceed to enter Outside Labs? <input type="button" value="Yes"/> <input checked="" type="button" value="No"/> Contraindicated in patients with uncontrolled hypertension. Check BP and hold dose if : <input type="button" value="No"/> * SBP greater than (mmHg): 160 or * DBP greater than (mmHg): 90 Blood pressure threshold of 160/90 mmHg recommendation is based on expert opinion and limited data. * Rx Indication: 	<p>Patient Example #3</p> <p>No Hgb lab result within the last 7 days in the facility.</p>
<p>Protocol: Epoetin and Darbepoetin CDS</p> <ul style="list-style-type: none"> Hgb result is required for order entry. Lab result greater than 7 days will not display below. * Last known Hgb (g/dL): No result in last 7 days. * Proceed to enter Outside Labs? <input type="button" value="Yes"/> <input checked="" type="button" value="No"/> * Override Reason for not entering Outside Labs: <div>Emergent Scenario Unable to Obtain Labs Other</div> Contraindicated in patients with uncontrolled hypertension. Check BP and hold dose if : <input type="button" value="No"/> * SBP greater than (mmHg): 160 or * DBP greater than (mmHg): 90 Blood pressure threshold of 160/90 mmHg recommendation is based on expert opinion and limited data. * Rx Indication: 	<p>Provider will be prompted to enter outside labs. If they answer No, they can enter an override reason to continue.</p>
<p>Protocol: Epoetin and Darbepoetin CDS</p> <ul style="list-style-type: none"> Hgb result is required for order entry. Lab result greater than 7 days will not display below. Provider can enter lab value from outside lab if needed. Last known Hgb (g/dL): No result in last 7 days. * Proceed to enter Outside Labs? <input checked="" type="button" value="Yes"/> <input type="button" value="No"/> * Hgb from outside lab (g/dL): 8 * Hgb from outside lab within last 7 days? <div>Yes No Unknown</div> commended within last 7 days to ate risk of adverse effects. Contraindicated in patients with uncontrolled hypertension. Check BP and hold dose if : <input type="button" value="No"/> 	<p>If answering Yes to entering outside labs.</p> <p>Provider will enter the Hgb result. They will receive the same pop up if the result is ≥ 10 g/dL.</p> <p>Provider will be required to enter if the lab result was within the last 7 days. (yes/no/unknown). A lab result within the last 7 days is recommended.</p>

Epoetin/Darbepoetin Decision Support

Orders with Activity

epoetin alfa(Procrit) 10,000 UNIT IV MoWeFr ... Unverified Protocol OM Hospitalist01, Provider

07/28/25 13:15 MAIN.PRNH

View Order Data

Comments

Label

Procrit

Protocol

Protocol Queries

Rx Indication: Blood Transfusion Risk

Other Rx Indication:

- Lab result greater than 7 days will not display below.
- Provider can enter lab value from outside lab if needed.

Last known Hgb (g/dL):

No result in last 7 days.

Proceed to enter Outside Labs? Y

Override Reason for not entering Outside Labs:

Other reason:

Hgb from outside lab (g/dL): 8

Hgb from outside lab within last 7 days? Unknown

- Recent Hgb result is recommended within last 7 days to ensure safety and mitigate risk of adverse effects.

Continue to enter with Hgb greater than or equal to 10 g/dL?

Override reason:

Other Reason:

Close

Pharmacy

Pharmacists can view the protocol during verification by using the “i” button from the pharmacist desktop or on the protocol button.

Medication Taper Protocol Chemo Comments Instructions Queries Screenings Provider

Rx Number: U000001844 epoetin alfa 10,000 unit/mL Vial

Protocol

Rx Indication:

Other Rx Indication:

- Lab result greater than 7 days will not display below.
- Provider can enter lab value from outside lab if needed.

Last known Hgb (g/dL):

Proceed to enter Outside Labs? Y

Override Reason for not entering Outside Labs:

Other reason:

Hgb from outside lab (g/dL): 8

Hgb from outside lab within last 7 days? Unknown

- Recent Hgb result is recommended within last 7 days to ensure safety and mitigate risk of adverse effects.

Continue to enter with Hgb greater than or equal to 10 g/dL?

1 of 3 Goto 2

Cancel Save

EMAR

Nursing can view the protocol on the Prot/Taper button.

Take notice of the administration parameters that indicate when to hold the administration and contact the provider.

Medication Administration

Admin Flowsheet Prot/Taper Monograph Links

Medication: Procrit 10,000 unit (See Protocol) IV MoWeFr SCH

Generic: epoetin alfa

Dispense: 1 ml of 10,000 unit/ml 1 ml Vial

Give: 1 ml (10000 unit total)

Label Comments: Procrit

Start: 07/28/25 13:15

Stop:

Status: Active

Associated Data

Result: 13.4 g/dL (13.0-17.0)

Date: 02/10/25 11:44

Group:

Protocol: Epoetin and Darbepoetin CDS

- Hgb result is required for order entry.
- Lab result greater than 7 days will not display below.
- Provider can enter lab value from outside lab if needed.

Last known Hgb (g/dL):

Proceed to enter Outside Labs? Yes

Hgb from outside lab (g/dL): 8

Hgb from outside lab within last 7 days? Unknown

- Recent Hgb result is recommended within last 7 days to ensure safety and mitigate risk of adverse effects.

Contraindicated in patients with uncontrolled hypertension.

Check BP and hold dose if:

- SBP greater than (mmHg): 160
- or
- DBP greater than (mmHg): 90
- Blood pressure threshold of 160/90 mmHg recommendation is based on expert opinion and limited data.

Rx Indication: Blood Transfusion Risk

*** Administration parameters ***

- Hold dose and contact provider if any of the following:
- Hgb is greater than (g/dL): 13
- Hgb is less than (g/dL): 10
- SBP is greater than (mmHg): 160
- DBP is greater than (mmHg): 90



MEDITECH Expanse TIP SHEET

Pharmacy

PHA Rule for ONCE/SCH

Pharmacy

ONCE/SCH should not be used with total doses greater than one.

This rule is a hard stop and will not allow the order to be verified if Total Doses are greater than one.

Order should be clarified or reentered.

The screenshot displays the MEDITECH Expanse Pharmacy interface. At the top, there are tabs for Medication, Taper, Protocol, Chemo, Comments, Instructions, Queries, Screenings, and Provider. The main form contains the following fields:

- Rx Number: NEW
- * Medication: acetaminophen 500 mg Tablet
- * Medication: ACET442 TylenoL Extra Strength
- * Order Type: M Medication
- Clinical Ind: Dosing Wt

Below these fields is a note: "NOTE: Dose Range Checking is not supported for Zero/Ranged dose orders." The dosing section includes:

- * Dose: 500 MG 1 Tablet PER DOSE
- Range Dose Low: High
- * Route: PO Oral
- * Frequency: ONCE one time only @ONCE
- * Schedule: Par Level: PRN Reason: SCH

A red arrow points to the "SCH" value in the "PRN Reason" field. Below the dosing section, there are fields for * Start Date, * Time, and * Stop Date, * Time. The "Total Doses" field is highlighted with a red box and contains the value "3".

An error message box is displayed at the bottom of the form, stating: "Error To ensure order has a due time on EMAR, update schedule to ONE or otherwise clarify order before filing." The error box has a red 'X' icon and a "Close" button.

Pharmacy - Adult fentaNYL ECMO Protocol

To accommodate updates to Evidence Based Order Sets (EBOS), a new Protocol was developed for the use in ECMO. This aligns with Fentanyl V5 Admin Criteria enhancement.

⊕

⌵

FentaNYL (infusion)

⌵

⊕

* Titration Protocol

Adult fentaNYL ECMO

* Titrate by (mcg/hr):

25

* every (minute(s)):

30

* Maximum rate (mcg/hr):

200

* Initial Goal: Maintain CPOT of

</=2

* Then Titrate to RASS of

-1

to maintain analgesia-induced sedation

New Section

Provider Order Entry

Fields for CPOT and RASS will now be available to be aligned with ECMO order set.

The CPOT field is a required field, and the initial goal CPOT score range is between 0 to 8.

Likewise, the RASS score field is a required field, but the RASS score range is between -5 and +4.

NOTE: The corporate standard recommendation for CPOT is “</=2” and for RASS is “-1”, however it is up to the facility to set these values as defaults if desired

7/2025

<input type="checkbox"/>	fentaNYL PF in NaCL 0.9% fentaNYL PF in NaCL 0.9% 1,000 MCG... MM000000082 IVTITRATE2	100 ML IV TITRATE SCH... 07/17/25 1345 MAIN.PKMC	Active Protocol Titrates	OM - CDMM,FE... Hospitalist01, Provider
--------------------------	---	--	--------------------------------	---

View Order Data

Protocol

Protocol Queries

Titrate by (mcg/hr): 25
 every (minute(s)): 30
 Maximum rate (mcg/hr): 200
 Initial Goal: Maintain CPOT of </=2
 Then Titrate to RASS of -1
 to maintain analgesia-induced sedation

Medications Rx Information **Protocol** Chemo Comments Instructions Queries Screenings Provider

Rx Number: J1000001020 fentaNYL PF in NaCL 0.9% 1,000 MCG/100 ML Bag

*Titrate by (mcg/hr): 25
 *every (minute(s)): 30
 *Maximum rate (mcg/hr): 200
 *Initial Goal: Maintain CPOT of </=2
 *Then Titrate to RASS of -1
 to maintain analgesia-induced sedation

Medication Detail

Detail History Flowsheet Monograph AssocData **Prot/Taper** Order Links

Medication	Start	Stop	Status
fentaNYL PF in NaCL 0.9% 1,000 mcg In 100 ml @ Titrate IV TITRATE SCH Current Dose: 25 mcg/hr, 2.5 mls/hr Bag Volume: 100 mls Duration: Titrate Trade: fentaNYL PF in NaCL 0.9%	07/17/25 13:45		Active

Titration Protocol Adult fentaNYL ECMO

Titrate by (mcg/hr): 25
 every (minute(s)): 30
 Maximum rate (mcg/hr): 200

Initial Goal: Maintain CPOT of </=2
 Then Titrate to RASS of -1
 to maintain analgesia-induced sedation

Pharmacy

Pharmacy can view the completed protocol by clicking on the "i" icon from the patient's profile in the Pharmacist Desktop.

During order verification, the protocol can be viewed by selecting the Protocol tab.

eMAR

Nursing can view the completed protocol in the MAR by selecting the Prot/Taper button.

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 Yes No

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 Yes No

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):	<input type="text"/>
* every (minute(s)):	<input type="text"/>
* Maximum titration rate of (mcg/min):	<input type="text"/>
* every (minute(s)):	<input type="text"/>
* Maximum rate (mcg/min):	<input type="text"/>
Goal:	ONE goal parameter is REQUIRED
* Maintain SBP between (mmHg):	<input type="text"/>
* Maintain HR between (BPM):	<input type="text"/>
* Goal (Other):	<input type="text"/>

Updated Protocol

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

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.