

# **Manage Orders Activity Setup and Support Guide**

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## Your Responsibilities for Safe Use

This documentation will help guide you through the available software configuration options so you can decide the right configuration for your organization. Of course, safe and compliant use of the software in any configuration requires you and your users to use good judgment and perform certain responsibilities, including each of the following: enter and read information accurately and completely; be responsible for configuration decisions; ensure compliance with laws and regulations relevant for your organization; confirm the accuracy of critically important medical information (e.g., allergies, medications, results), just as you would with paper records; actively report suspected errors in the software to both Epic and affected personnel; thoroughly test the software to ensure it's accurate before using it; and use the software only according to standards of good medical practice. You also are responsible for training your personnel and other users to perform these responsibilities. Not performing any of these responsibilities may compromise patient safety or your compliance with applicable requirements.

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# Manage Orders Activity Setup and Support Guide

The Manage Orders activity is the central hub from which clinicians place orders. It provides them with several tools to ensure the accuracy and appropriateness of the orders. This guide walks you through setting up the Manage Orders activity, including essential tasks necessary during an implementation, as well as helpful features that let you better customize the activity for your organization.

The screenshot shows the Manage Orders activity interface. On the left, a main panel displays a list of active orders categorized by drug class: Analgesics & Anesthetics, Cardiovascular Agents, Central Nervous System Drugs, Endocrine & Metabolic Drugs, Hematological Agents, Respiratory Agents, and Other Orders. Each order entry includes the drug name, dose, frequency, start date, end date, and modification options. On the right, a sidebar titled 'Manage Orders' shows a 'New Orders' section with ibuprofen (MOTRIN) and lisinopril (COZAAR) entries, and an 'Orders to Discontinue' section with losartan (COZAAR) entries. At the bottom, there is a toolbar with buttons for 'Remove All', 'Sage Work', and 'Sign'.

The Manage Orders activity shows a clinician all of a patient's ordering information, including active orders, home medications, and signed and held orders. The clinician also has easy access to Order Sets, preference lists, and order searching.

The Manage Orders activity lets clinicians review the patient's entire chart without losing sight of their current ordering decisions by listing new order actions, such as new orders, reorders, modifications, and discontinuations, in a sidebar. The clinician can immediately compare her current decisions with clinical data from other activities, such as flowsheets, Chart Review, or Synopsis. The sidebar helps keep clinical information and ordering in the same workflow and provides the clinician with a wider context from which to make her ordering decisions.

## Across your organization

The Manage Orders activity is designed primarily for attending physicians performing rounding workflows during inpatient admissions. However, the activity is available in any application from which clinicians access a patient's hospital chart, and might also be useful for:

- Pharmacists
- Medical students
- Case managers
- Dietitians
- Respiratory therapists



# Available Epic Resources

This guide describes step-by-step instructions for setting up the Manage Orders activity, along with configuration options for specific users and scenarios.

## Setup and Strategy Information

The [Order Management Guide](#) contains information about utilities, implementation recommendations, and build instructions that can work in conjunction with Manage Orders activity configuration to help users interact with orders more efficiently.

## Setup Information

The [Order Entry and Order Composer Setup and Support Guide](#) contains step-by-step instructions for configuring the Order Composer, which allows clinicians to enter the details of an order. This guide also provides instructions for allowing clinicians to access order entry activities in general. While the Manage Orders Activity Setup and Support Guide covers only the Manage Orders activity, the Order Entry and Order Composer Setup and Support Guide provides instructions for additional activities, such as the Order Entry activity.

# Manage Orders Activity Setup: Essentials

In this section, we'll cover everything that you need to do to start using the Manage Orders activity, including how to configure the activity to match our recommendations.

## Evaluate the Released and Foundation System Manage Orders Activity Records

As released, the default Manage Orders activity is automatically available in your clinicians' workspaces. We have also created other customized Manage Orders activities in the Foundation System for various user roles. These pre-configured activities filter out certain orders, group orders, and contain tabs and order reports based on the needs of different roles. For example, a Manage Orders activity for medical students does not contain a Cosign tab, because cosigning is outside of a medical student's scope of practice.

The following tables list released activity records for specific users, Foundation System activity records for specific users, and additional released activity records. Review these records and decide which ones you want to use in your system. If a released record is similar to how you want to configure an activity in your system, copy the record and customize it using the instructions in this guide.

### Released Activity Records for Specific Users

Role	Activity (E2N) Record
Inpatient nurse	35004-ORD_MANAGE_ORDERS_NURSE_DEFAULT
Medical student	35006-ORD_MANAGE_ORDERS_PROVIDER_NO_COSIGN
Emergency physician	35010-ORD_MANAGE_ORDERS_ED_PHYSICIAN
Perioperative nurse	35005-ORD_MANAGE_ORDERS_PERIOP_NURSE

### Foundation System Activity Records for Specific Users

Role	Activity (E2N) Record
Inpatient physician (IPMD)	3043500002-ORD_MANAGE_ORDERS_MD
Inpatient nurse (IPRN)	304350050-MODEL_ORD_RN_MANAGE_ORDERS
Respiratory therapist (RT)	304350051-IP_ORD_RT_MANAGE_ORDERS
Pharmacist (RXPHARM)	4083500001-MODEL_RX_MANAGE_ORDERS
Emergency physician (EDMD)	1603500001-ED_ORD_MANAGE_ORDERS
Emergency nurse (EDRN)	1603501002-ED_ORD_MANAGE_ORDERS_NURSE
Pulmonary technologist (PULTECH)	3043500013-ORD_MANAGE_ORDERS_PULTECH
Radiologist (RISMD)	1053500001-RIS_ORD_MANAGE_ORDERS_MD
Anesthesiologist	1123500001-AN_ORD_MANAGE_ORDERS

## Additional Released Activity Records

Review the following released activity records to use in specific scenarios or for users that don't have designated released or Foundation System Manage Orders activities.

Activity (E2N) Record
35000-ORD_MANAGE_ORDERS
35003-ORD_MANAGE_ORDERS_ORDERSET_WEB
35007-ORD_MANAGE_ORDERS_SIMPLE
35021-ORD_MANAGE_RELEASE_ORDERS_POPUP
35022-ORD_MANAGE_ORDERS_REORDER_PTA

## Create Custom Versions of the Manage Orders Activity for Different Types of Users

We recommend that you create multiple versions of the Manage Orders activity based on your organization's needs and customize them using the tasks in this guide. Creating multiple versions of the activity allows you to configure the activity differently according to the needs of different clinicians and departments. You can change how tabs, orders, reports, and other aspects of the activity appear for different users under various circumstances. For example, you can configure order groupings in the Active Orders tab, specify which orders are filtered out of a clinician's active orders, and specify which buttons are available. To create a copy of the Manage Orders activity, which includes the activity record and all associated menu and navigator records, perform the following steps:

1. In Clinical Administration, go to Management Options > Utilities; then:
  - a. Starting in August 2024: Application Utilities > Orders > Navigators > Manage Orders Utility.
  - b. In May 2024 and earlier: Orders > Navigators > Manage Orders Utility.
2. Select Create new Manage Orders activity.
3. In the Activity field, enter the activity record that you want to duplicate. Enter either the released Manage Orders activity (35000-ORD\_MANAGE\_ORDERS) record or a copy of it, if you have already used these steps to create one. The utility creates copies of the following records and associates them with one another as appropriate:
  - An activity (E2N) record
  - A menu (E2U) record
  - A navigator template, section, and topic (LVN) record for the Active tab
  - A navigator configuration (VCN) record for the Active tab
  - A navigator activity link (LVN) record
4. In the What prefix would you like to attach to all record names? field, enter a prefix you want to add to the names of the records that the utility creates to help identify and organize them. Press Enter.
5. In the What prefix would you like to attach to all record IDs? field, enter a prefix you want to add to the IDs of the records that the utility will create. Press Enter.
6. In the Continue? field, type Yes and press Enter. The utility duplicates and links the appropriate records.

In August 2019 and earlier, you need to do some additional setup to finish linking your new records after using this utility. Starting in November 2019, these steps are no longer necessary:

1. In Clinical Administration, go to Roles, Menus, Activities, etc. > Activities (E2N) and open the new activity record you created.
2. Go to the Control Initialization Parameters screen. Press F6 to edit the values for the Navigators parameter.
3. In the Values list, the first segment still uses the navigator template (LVN) descriptor from the activity you copied. If you copied the released Manage Orders activity, this line reads Active^ORD\_MANAGE\_ORDERS\_TEMPLATE\_ACTIVE\_ORDERS^0^43. Press Tab to edit this segment.
4. Replace the navigator template record from the activity you copied with the new navigator template record you created.

## Use a Utility to Track Your Activity Records

If you create multiple copies of the Manage Orders activity, you can use a utility to list all the associated records in your system to help track your build and use as a reference when adding the activity to clinician workspaces.

1. In Clinical Administration, go to Management Options > Utilities; then:
  - a. Starting in August 2024: Application Utilities > Orders > Navigators > Manage Orders Utility.
  - b. In May 2024 and earlier: Orders > Navigators > Manage Orders Utility.
2. Select Search for existing Manage Orders records.
3. In the "Save search results to your computer?" field:
  - Enter Yes if you want to save the search results to your computer. Browse to the desired file location, enter a file name, and click Save.
  - Enter No if you want to save the search results to the server. Enter a file path and a file name for the XML file. Do not enter the file extension ".xml", because the utility automatically adds it. For example, if you enter /epic/tmp/search\_results at the prompt, the utility saves the file search\_results.xml in the tmp directory.
4. Open the output file to view the results.

## Add the Activity to Clinician Workspaces

When the customized copy of the Manage Orders activity is ready for your clinicians to use, you will need to add it to their workspaces using menu (E2U) records and workflow engine rules. To do so, refer to the [Group Activities Into Menus](#) topic.

# Configure Home Medications in the Manage Orders Activity

 **Starting in November 2024**

To improve timely admission medication reconciliation and ease of use, clinicians can see and take admission reconciliation actions on home medications in the Manage Orders activity side-by-side with current admission orders. This is particularly helpful in situations where some prior-to-admission medications were left unreviewed during the admission medication reconciliation process or added to the patient's chart after admission medication reconciliation, because providers can reconcile the medication while completing their rounding workflows in the Manage Orders activity. The side-by-side view also allows clinicians to compare and analyze a patient's medication profile when providing care for patients whose admission medication reconciliation was completed by another clinician.

## Configure Admission Medication Reconciliation Buttons in the Manage Orders Activity

Starting in November 2024

By default, if you don't manually configure any actions, the Order, Order and Hold, and Don't Order admission reconciliation actions appear for outpatient medications in the Manage Orders activity.



You can use the Build Wizard to copy all the settings described in this topic from one of your admission medication reconciliation activities. To get started, open the Build Wizard and search for feature 630200-View Home Medications Side-by-Side Active Inpatient Orders in Manage Orders (application: Orders).

To manually make changes to the availability and appearance of buttons on the Home Medications side of the Manage Orders activity, or to adjust your build after you run the Build Wizard, follow the steps in the subtopics below.

### Make Changes to Actions for Home Medications in the Manage Orders Activity

To change if or how an action for home medications appears in the Manage Orders activity, do the following:

1. In Clinical Administration, go to Navigators > Navigator Configurations (VCN) and open the Manage Orders navigator configuration you want to edit.
2. Go to the Home Medications Settings - 2 screen.
3. If you want to add an action for home medications in the Manage Orders activity, enter that action in the Button (I VCN 35370) list.
4. If you want to change the tooltip that appears for an action on home medications in the Manage Orders activity, add the text you want to appear in the Caption (I VCN 35360) column.
5. If you want to change the caption that appears for signed or signed and held reconciliation actions that appear for home medications in the Manage Orders activity, add the text you want to appear in the Signed Action Caption (I VCN 35365) column.
6. If you want to hide an action for home medications in the Manage Orders activity, enter Yes for that action

in the Hide? (I VCN 35385) column.

7. If you want to hide all actions for home medications in the Manage Orders activity, enter Yes in the Hide all home medication actions? (I VCN 35375) field.

### Add a Mark All Action for Home Medications in the Manage Orders Activity

To add buttons to mark all unreconciled orders with any action to the Manage Orders activity, do the following:

1. In Clinical Administration, go to Navigators > Navigator Configurations (VCN) and open the Manage Orders navigator configuration you want to edit.
2. Go to the Home Medications Settings - 3 screen.
3. Add your desired action to the Button (I VCN 35300) list.

## Configure When the Home Medications Column Appears Automatically in the Manage Orders Activity

### Starting in November 2024

By default, the Home Medications column in the Manage Orders activity never appears automatically. If you want to make unreconciled prior-to-admission medications more obvious to the providers responsible for admission medication reconciliation, you can configure the Home Medications column to always appear automatically or to appear automatically only when a patient has prior-to-admission medications that need review. The latter situation could occur because admission medication reconciliation was never completed, or because a clinician added an additional medication after admission medication reconciliation was completed.



You can use the Build Wizard to set the setting described in this topic to 1-Expand when home medications need review for the admission. To get started, open the Build Wizard and search for feature 630200-View Home Medications Side-by-Side Active Inpatient Orders in Manage Orders (application: Orders).

To manually change the behavior of the Home Medications column when a clinician opens the Manage Orders activity, or to adjust your build after you run the Build Wizard, follow these steps:

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN) and open the Manage Orders navigator configuration you want to edit.
2. Go to the Home Medications Settings screen.
3. Set the Expand Home Meds column by default? (I VCN 35225) field to one of the following options:
  - 1-Expand when home medications need review for the admission.
  - 2-Always expand by default.
  - 3-Never expand by default. This is the behavior if you leave this setting blank.

## Configure an Admission Banner in the Manage Orders Activity to Direct Providers to an Admission Activity to Sign and Hold Admission Orders

### Starting in November 2024

In cases where it isn't appropriate for providers to complete admission medication reconciliation in the Manage Orders activity, you can set up a banner that appears based on a Patient-context rule that prevents admission reconciliation actions from being taken in the Manage Orders activity and links to an admission medication reconciliation navigator that you specify. For example, if providers shouldn't be signing admission reconciliation

actions to be immediately active while the patient is in the emergency department, is preadmitted, or has a pending admission, you can use this banner to send them to an admission reconciliation navigator that always signs and holds admission reconciliation decisions.

You can also configure an additional banner to appear in the sidebar that shows the message text with the primary banner. In the Foundation System a rule similar to that described in the [Allow Clinicians to Sign and Hold Orders for Preadmissions and Pending Admissions](#) topic is used to make the banner appear when the patient is in the emergency department, is preadmitted, or has a pending admission. The banner in the Foundation System links to an admission navigator where the default sign action is sign and hold as described in the [Specify Whether Orders Are Signed or Signed and Held by Default](#) topic.



You can use the Build Wizard to configure the setting described in this topic. To get started, open the Build Wizard and search for feature 630200-View Home Medications Side-by-Side Active Inpatient Orders in Manage Orders (application: Orders).

To manually configure a banner that prevents admission medication reconciliation in the Manage Orders activity, or to adjust your build after you run the Build Wizard, follow the steps in the subtopics below.

## Configure a Banner That Prevents Admission Medication Reconciliation in the Manage Orders Activity

To configure the banner to appear in the Home Medications column in the Manage Orders activity, follow these steps:

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN) and open the Manage Orders navigator configuration you want to edit.
2. Go to the Home Medications Settings - 4 screen.
3. Specify a Patient-context rule in the Rule (I VCN 38070) field.
4. To change the title of the banner from the default title of "Reconcile home medications in admission medication reconciliation" add the title you want to use to the Section alert title (I VCN 38073) field.
5. If you want to add an additional banner that appears in the sidebar, add your desired title for that banner to the Sidebar alert title (I VCN 38074) field.
6. If you want to configure additional text to appear in both the admission banner and the sidebar banner, add that text to the Alert details text (I VCN 38075) field.
7. If you want to complete the "Configure the Admission Activity to Open to a Desired Section by Default" section below so that the title of the admission banner is a link to an admission medication reconciliation navigator, add the descriptor of the activity you want to link to the Activity descriptor (I VCN 38071) field.

## Configure the Admission Activity to Open to a Desired Section by Default

To make the admission medication reconciliation navigator linked in the Activity descriptor (I VCN 38071) field above open to the desired section by default, follow these steps:

1. In Clinical Administration, follow the path Roles, Menus, Activities, etc > Activities (E2N) and open the activity you listed in the Activity descriptor (I VCN 38071) field above.
2. Go to the Control Initialization Parameters screen.
3. If the Template parameter in the Control Initialization Parameter Values (I E2N 2020) field is empty, add your desired admission navigator template (LVN) descriptor to the field.

4. In the Control Initialization Parameter Values (I E2N 2020) field, set the second parameter, Table of Contents Side, to 2-Top.
5. Set the Startup Section Type (Parameter 4) of the Control Initialization Parameter Values (I E2N 2020) to the section type you want to open by default. This is set to 248-IP Ord Rec Admission Side-by-Side in the Foundation System.

## Change When Unreconciled Prior-to-Admission Medications are Highlighted in the Manage Orders Activity

 Starting in November 2024

By default, when the Manage Orders activity is opened in an admitted patient's chart where there are unreconciled prior-to-admission medications, the toggle to Show Home Medications is highlighted yellow and the related text is updated to indicate that there are unreconciled prior-to-admission medications. If a clinician clicks the toggle to show the Home Medications column, unreconciled prior-to-admission medications are grouped at the top of the medication list and are highlighted yellow.

You can configure the Manage Orders activity to highlight unreconciled prior-to-admission medications only when a Patient-context rule evaluates as true. You might want to use this configuration to make sure this behavior never appears for certain clinicians who never interact with the home medication list.

Starting in August 2025, prior-to-admission medications for ED boarder patients require reconciliation and appear highlighted in the Manage Orders activity after the patient meets the criteria defined in the ED inpatient order reconciliation requirement cutoff (I LSD 36750) field. By default, these medications require reconciliation and are highlighted after the patient class is updated to Inpatient. The configuration described in this topic overrides that setting, so you can use a Patient-context rule to change when prior-to-admission medications are highlighted for ED boarder patients if necessary. For more information about the ED inpatient order reconciliation requirement cutoff setting, refer to the [Configure When Inpatient Orders Appear as Ordered During Admission](#) topic.

To change when unreconciled prior-to-admission medications are highlighted in the Manage Orders activity, follow these steps:

1. In Hyperspace, open the Rule Editor.
2. Find or create a Patient-context rule that evaluates as true when you want clinicians to see that there are unreconciled prior-to-admission medications.
3. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN) and open the Manage Orders navigator configuration you want to edit.
4. Go to the Home Medications Settings screen.
5. Specify the Patient-context rule in the Highlight unreconciled home meds rule (I VCN 35226) field.

## Configure the Medication List Status Banner in the Manage Orders Activity

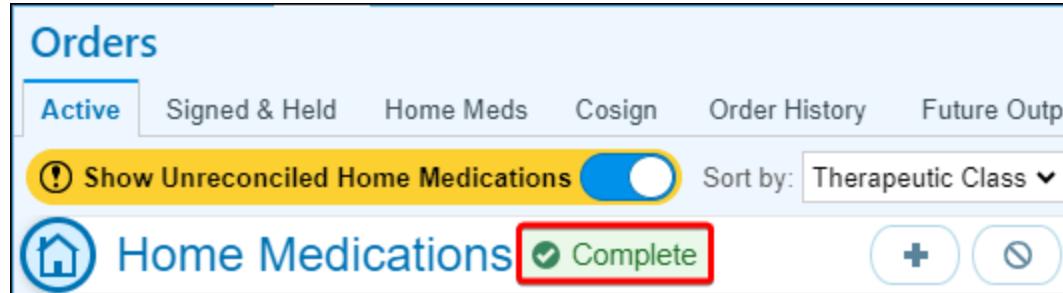
 Starting in November 2024

To make the medication list status more noticeable in the Home Medications column in the Manage Orders activity, you can show a colored banner depending on the list status. Banner coloring matches the coloring described in the [Configure a Colored Banner for the Medication List Status](#) topic with one exception. If the Alert Highlight for No Admission Status (I LSD 8287) field is left blank, a blank status is shown with a red banner in admission and a gray banner in the Manage Orders activity. Banners for the medication list status can draw clinicians' attention if the home medication list is not complete or provide a visual go-ahead if the medication list has been reviewed. You can associate medication list statuses with green, yellow, or red highlighting. All statuses

have gray highlighting if you haven't followed the steps in the linked topic.



You can use the Build Wizard to configure the settings described in this topic (but not the settings described in the [Configure a Colored Banner for the Medication List Status](#) topic). To get started, open the Build Wizard and search for feature 630200-View Home Medications Side-by-Side Active Inpatient Orders in Manage Orders (application: Orders).



To configure the medication list status banner in the Manage Orders activity, follow these steps:

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN) and open the Manage Orders navigator configuration you want to edit.
2. Go to the Home Medications Settings screen.
3. If you want the medication list status banner to appear in the Manage Orders activity, set the Show admission status? (I VCN 35490) field to Yes or leave it blank.
4. By default, the title of the hover bubble that appears when clinicians hover over the medication list status banner is Med List Status. If you want to change this title, add your desired title to the Admission status caption (I VCN 35495) field.
5. If you want to show reconciliation status comments in the hover bubble that appears when clinicians hover over the medication list status banner, set the Show reconciliation status comment? (I VCN 35485) field to Yes or leave it blank.
6. By default, the caption that appears before reconciliation comments is "Status comment." If you want to change this caption, add your desired caption to the Reconciliation status comment caption (I VCN 35486) field.

## Allow Physicians to Place Future Outpatient Orders from the Manage Orders Activity

Caring for an admitted patient often includes placing orders that are meant to be acted upon after the patient is discharged. To make it easier for your physicians to place future outpatient orders for currently admitted patients, you can give physicians the option to place future outpatient orders from the Manage Orders activity by adding the Future Outpatient tab that we built in the Foundation System.

The Future Outpatient tab gives your physicians a more streamlined experience than discharge medication reconciliation when placing future outpatient orders for currently admitted patients. When a physician uses discharge medication reconciliation to place a future outpatient order, the physician has to manually remove a discharge order if the patient isn't being discharged from the hospital. With the Future Outpatient tab, physicians don't have to remove a discharge order to keep the patient admitted. Note that your physicians must still complete discharge medication reconciliation when the patient is ready to be discharged.

The screenshot shows the Epic EMR interface with the 'Orders' tab selected. The top navigation bar includes icons for Summary, Chart Review, Notes, Orders, MAR, Flowsheets, Work List, Education, Care Plan, and MD Navigators. A red box highlights the 'Orders' icon. An arrow points from the 'Orders' icon to the 'Future Outpatient' tab in the top navigation bar, which is also highlighted with a red box. The main content area displays a 'Description' section with instructions for placing future outpatient orders, a 'Click to Place New Discharge Orders' button, and a 'Select Pended Orders' link.

When a physician searches for an order from the Future Outpatient tab, search results show orders in the future outpatient context by default. After signing a future outpatient order, the order appears in the Signed Discharge Orders navigator section. Physicians can use the print groups in this navigator section to easily review or discontinue a patient's future outpatient orders.

**Signed Discharge Orders**

**Lab Orders**  
(From admission, onward)

- > Blood culture Discontinue      Ordered 07/14/20 1225

**Medications for After Discharge**  
(From admission, onward)

- > acetaminophen (Tylenol 8 Hour) 650 MG ER tablet Every 8 hours PRN Discontinue      Ordered 07/14/20 1223

**Other Procedures**  
(From admission, onward)

- Start      Ordered 07/14/20 1225  
07/14/20 0000 > EEG Discontinue



If your organization is in the United States and a member of your EpicConnect team has completed the necessary EpicConnect setup, this Turbocharger package is available for download on the Available Packages tab of the Turbocharger activity (search: Turbocharger) or at the end of this topic. If your organization is outside the United States or you don't have automatic package delivery set up, contact your Epic representative and mention project 209569 to get the package. For information about mapping and importing the package, refer to the 209569-Future Outpatient Orders Tab topic.

To help prevent incorrect ordering, the Future Outpatient tab uses the Epic-released order source (I ORD 295) value 255-OP Orders in Manage Orders, which allows you to support a second sign workflow for future outpatient orders that are placed from the Future Outpatient tab. Integrating a second sign workflow with orders that are placed from the Future Outpatient tab helps prevent incorrect orders from being signed, since each order must be verified by a second physician.

## In the Foundation System

The Future Outpatient tab is fully configured in the Foundation System. To see this feature in action, log in to the [Foundation Hosted environment](#) as your organization's inpatient physician (IPMD). Then, complete the following steps:

1. Open an admitted patient's chart, go to the Orders activity, and open the Future Outpatient tab.
2. Place a new order for a blood culture. Note that the After Visit procedure order was the default search result.
3. Sign the order.
4. Note that the blood culture order appears in the Lab Orders print group in the Signed Discharge Orders navigator section.

## Rename the Activity Tabs

There are five tabs at the top of the default Manage Orders activity. To match the standards used in your organization, you can rename these tabs. By default, the tabs appear in the following order with the following names:



- Active. This tab shows a patient's currently active orders. Starting in November 2024, clinicians can show or hide prior-to-admission medications side-by-side with currently active orders on this tab.
- Signed & Held. This tab shows a patient's pended orders, signed and held orders, or both, according to the settings you make in the associated print group. The tab also contains a link to the Release Orders activity.
- Home Meds. This tab is where clinicians review prior-to-admission medications.
- Cosign. This tab is where clinicians cosign orders.
- Order History. This tab shows clinicians more detailed information about a patient's order history.

To rename the tabs, follow these steps:

1. In Clinical Administration, follow the path for your version:
  - a. Starting in August 2024: Manage Options > Utilities > Application Utilities > Orders > Navigators > Manage Orders Utility
  - b. In May 2024 and earlier: Manage Options > Utilities > Orders > Navigators > Manage Orders Utility
2. Select Rename tabs.
3. Enter your copy of activity record 35000-ORD\_MANAGE\_ORDERS and press Enter. The current tab names appear in a numbered list.
4. Enter the number of the tab you want to modify and press Enter.
5. Enter a new caption and press Enter.
6. Repeat steps 4-5 as necessary.

## Determine How Clinicians Group Orders in the Manage

# Orders Activity

When clinicians review active orders within the Manage Orders activity, they can use the Sort by and Go to menus to group the orders in ways that fit their workflow, increasing efficiency and reducing scrolling. The Sort by menu uses views to organize orders into specified groups on the Active tab, and the Go to menu allows clinicians to jump to one of those groups within a view. For example, if a clinician wants to evaluate orders that might need to be reordered, he can choose the Expiring view in the Sort by menu to organize a patient's orders into easy-to-spot groups for expired, expiring, and other orders. As another example, if a clinician selects the Therapeutic Class view in the Sort by menu, he sees a patient's active orders grouped into their therapeutic classes. If the order list is long and the clinician wants to scroll directly to anti-infective agents, he can select that group in the Go to menu to jump directly to it.

The screenshot shows the 'Orders' activity interface. At the top, there are tabs for 'Active', 'Signed & Held', 'Home Meds', 'Cosign', 'Order History', and 'Future Outpatient'. Below these are two dropdown menus: 'Sort by:' set to 'Therapeutic Class' and 'Go to:' set to 'Analgesics & Anesthetics'. A red box highlights the 'Sort by' dropdown, which is open to show five options: 'Therapeutic Class' (selected), 'Order Type', 'Order Set', 'Expiring', and 'Phase of Care'. The main content area displays a list of medications under 'Analgesics & Anesthetics' and 'Cardiovascular Agents'. Each medication entry includes the drug name, dose, route, frequency, first dose date, last dose date, and status (Modify, Hold, Discontinue).

Category	Medication	Dose / Description	First Dose	Last Dose	Action
Analgesics & Anesthetics	allopurinol (ZYLOPRIM) tablet 300 mg	365 doses, First dose on Thu 10/3/24 at 1111, Last dose on Thu 10/2/25 at 0900	Thu 10/3/24 at 1111	Thu 10/2/25 at 0900	Modify Hold Discontinue
	aspirin EC tablet 81 mg	First dose on Thu 10/3/24 at 1111, Until Discontinued	Thu 10/3/24 at 1111	Until Discontinued	Modify Hold Discontinue
Cardiovascular Agents	losartan (COZAAR) tablet 100 mg	100 mg, Oral, Daily, First dose on Thu 10/3/24 at 1355, Until Discontinued	Thu 10/3/24 at 1355	Until Discontinued	Modify Hold Discontinue
	metoprolol (TOPROL-XL) XL tablet 100 mg	100 mg, Oral, Daily, 90 doses, First dose on Thu 10/3/24 at 1111, Last dose on Tue 12/31/24 at 0900	Thu 10/3/24 at 1111	Tue 12/31/24 at 0900	Modify Hold Discontinue
	rosuvastatin (CRESTOR) tablet 20 mg	20 mg, Oral, Daily, 90 doses, First dose on Thu 10/3/24 at 1111, Last dose on Tue 12/31/24 at 0900	Thu 10/3/24 at 1111	Tue 12/31/24 at 0900	Modify Hold Discontinue

The released Manage Orders activity contains five views in the Sort by menu: Order Type, Therapeutic Class, Order Set, Expiring, and Phase of Care. If these views are sufficient for your clinicians, then no further build is necessary. However, there are many other types of views you can create and add to the Sort by menu for clinicians in different disciplines and departments.

Orders within a group are sorted alphabetically by default. You can alternatively configure the view to sort orders chronologically (newest first or oldest first) or by expiring status.

To set up a view for clinicians, choose the type of grouping option you want to include and build the view as a report in the Report Builder. Then, to add the view to the Sort by menu, attach the report record to the navigator configuration record for the Manage Orders activity.

## Considerations

The system uses a hierarchy to determine how orders are grouped in the Manage Orders activity. There are grouping settings in navigator configuration records and in EMR System Definitions. As is common in Epic's software, the system uses the values in EMR System Definitions only if there are no settings contained in the navigator configuration record.

The system looks to the following fields, in order, to determine how orders are grouped in the Manage Orders activity:

1. The Presentation Views (I VCN 34305) table on the Manage Orders View Settings screen in navigator configuration records. Because this method is the only one that affects only the Manage Orders activity, this is the method described in this section of the guide.
2. The Default presentation view (I LSD 34305) field on the Active Orders Options for Navigators screen in EMR System Definitions.
3. The Extension to group the active procedures and medications together (I LSD 34538) field on the Active Orders Options for Navigators screen in EMR System Definitions.
4. The medication-specific and procedure-specific settings in the following fields:
  - The Extension for grouping meds in Active Orders section (I LSD 34746) field on the Orders Navigator Settings screen in EMR System Definitions.
  - The Programming point to group procedures in the Active Orders section (I LSD 34741) field on the Navigator Settings for Procedure Orders screen in EMR System Definitions.

## Choose Grouping Options

The following table contains a list of grouping options available for the Manage Orders activity. Any options marked with an asterisk appear by default.

Grouping Option	Grouping Description
Order Type*	Group orders by Order Type (I ORD 30). The groups are then sorted alphabetically. Starting in November 2023, infant feeding orders appear in the Diet and Nutrition group.
Therapeutic Class*	Group medication orders by therapeutic class. Procedure orders appear in an Other Orders group. Starting in November 2023, infant feeding orders without a therapeutic class are grouped with procedures.
SmartSet/Order Set*	Group orders by the SmartSet, Order Set, or Pathway in which they were ordered. Orders that are not part of one of those groupings appear at the bottom.
Epiring*	Group orders by expiring status (Expiring, Expired, or Other Orders).

Grouping Option	Grouping Description
Phase of Care*	Group orders by their phase of care. The groups are then sorted alphabetically, and orders without a phase of care appear at the bottom.
Conditional Orders	Group orders into a group of conditional orders and a group of non-conditional orders.
Frequency Cluster	Group orders by clusters of frequencies. The cluster option allows you to group together similar frequencies. For example, to group orders with similar frequencies together for a clinician, you can set up the grouping option so all orders with a PRN frequency of every 4 hours, every 6 hours, and every 8 hours appear in a single group called PRN. Orders with frequencies not listed in any group appear at the bottom.
Med/Procedure	Group orders into a group of medications and a group of procedures.  Starting in November 2023, infant feeding orders appear in the Procedures group.
Order Class (starting in August 2023 or in May 2023 with special update E10505097)	Group orders by Order Class (I ORD 60).
Order Context	Group orders by their context (I ORD 506). This grouping option is intended for use with Signed and Held orders in Order Review and cannot be used for the Active tab of the Manage Orders activity. Signed orders on the Active tab use the Previous Order Context (I ORD 507) item instead of the Order Context (I ORD 506) item.
Order Mode	Group orders into a group of inpatient orders and a group of outpatient orders, depending on how they were ordered.
Order Route	Group orders by their route.
Order Status	Group orders by their status (Pending, Active, Completed, or Discontinued).
Order Type Cluster	Group orders by clusters of order types (I ORD 30). The cluster option allows you to group together similar order types. For example, to group related lab orders together for a clinician, you can set up the grouping option so all orders with an order type of Lab, POCT, Microbiology, and Blood Bank appear in a single group called Lab. Orders with order

Grouping Option	Grouping Description
	<p>types not listed in any group appear in an Other Orders group at the bottom. If you do not specify any groups, the groups are defined by ORD_* install mnemonics instead.</p> <p>Starting in November 2023, refer to the Build Views section below to have infant feeding orders appear with a specific order type category.</p>
Ordering Session	<p>Group orders by the session in which they were ordered. Each group represents a specific date and time. The groups are then sorted chronologically.</p>
Pathway - Step	<p>Group orders by their associated pathway step.</p>
Pharmaceutical Class	<p>Group medication orders by their pharmaceutical class. Procedure orders appear in an Other Orders group. You can alternatively configure the system to sort alphabetically by the abbreviation of the pharmaceutical class.</p>
Procedure Category Clusters	<p>Group orders by clusters of procedure categories. The cluster option allows you to group together similar procedure categories. For example, to group orders with similar procedure categories together for a clinician, you can set up the grouping option so all orders with a procedure category of X-Ray, Mammogram, CT Imaging, and Imaging Studies, appear in a single group called Imaging. Procedure orders with procedure categories not listed in any group appear in an Other Procedures group, and medication orders appear in an Other Orders group.</p> <p>Feeding orders with procedure categories not listed in any group appear in the Other Procedures group by default. You can configure them to appear with other procedure categories as described in the Build Views section below.</p>
Scheduled/ Continuous/PRN	<p>Group medication orders into a group of scheduled orders, a group of continuous orders, a group of PRN orders, and a group of Other Medications. Procedure orders are grouped by Order Type (I ORD 30).</p> <p>You can also configure this grouping option to group provider-held orders separately.</p> <p>Starting in November 2023, infant feeding orders</p>

Grouping Option	Grouping Description
	are grouped as Diet orders.
Special: Med/Proc Splitter	Group medications and procedures differently based on grouping options you specify when setting up this option. For example, a clinician can click a single grouping option in the Sort by menu to see medications grouped by pharmaceutical class and procedures grouped by Order Type.
Special: Programming Point (available in May 2023 and earlier versions)	<p>We don't recommend using this grouping option because it is more difficult to set up and maintain the extensions.</p> <p>Group orders based on an extension with a type of 57075-Order Grouping. There are no released extensions with this type. Refer to the <a href="#">Create an Extension</a> topic for information about creating a new extension.</p> <p>Starting in November 2023, infant feeding orders are grouped with Diet orders when you use extension 34749-IP Order Type and Frequency Grouping.</p>
Special: Programming Point Adapter	<p>We don't recommend using this grouping option because it is more difficult to set up and maintain the extensions.</p> <p>Group orders based on an extension with one of the following types:</p> <ul style="list-style-type: none"> <li>• 34012-IP Active Ords Grouping</li> <li>• 34010-IP Medication Grouping</li> <li>• 34009-IP Procedure Grouping</li> </ul>
Standing/Future (starting in August 2023 or in May 2023 with special update E10505097)	Group orders by standing/future status.
Treatment Plan	Group orders by their associated treatment plan. Orders not associated with a treatment plan appear at the bottom.
User Role of Authorizing Provider	Group orders into groups that you define based on the user roles of the orders' authorizing providers. When users have multiple roles, groups defined later in the list take precedence. The groups are then sorted alphabetically.

## Choose the Sorting Option

You can sort orders within groups in the Manage Orders activity by one of the following sorting options:

- Alphabetical
- Chronological (Newest First)
- Chronological (Oldest First)
- Expiring. Organize orders by expiring status so clinicians can easily see which orders they might need to reorder.

## Build Views

To build views, you must have security point 50-Report Builder in your Shared security class, because the Active tab uses underlying reporting functionality to display orders.

To build a view that a clinician can access from the Sort by menu, create a report from report template 14700-Rounding Navigator Template:

1. In Hyperspace, click the Epic button and follow the path Admin > General Admin > Report Builder to open report settings.
2. In the Report template field, enter 14700-Rounding Navigator Template.
3. On the Criteria tab, enter a grouping option in the Group by (I HRX 51203) field.
  - If the grouping option is an Order Type or Procedure Category cluster, enter parameters in the field to the right of the Group by field (I HRX 5020) using the following caret- and pipe-delimited format: Name1;Item1A^Item1B^Item1C|Name2;Item2A^Item2B. To configure infant feeding orders, refer to the instructions later in this step.
    - The Name item specifies a group's title.
    - Each caret-delimited (^) item after the semicolon determines which values appear in that group. For the Order Type Cluster, use values from the order type (I ORD 30) category list. For the Procedure Category Cluster, use the ID of procedure category (EDP) records.
    - The pipe character (|) signifies the start of a new group, with its own name and order types.
    - Here is an example of the parameters for an Order Type Cluster category:  
Labs;7^27^63|Procedures;9^5^45|Medications;57^11^2^14.
  - For the Frequencies Cluster, enter parameters in the field to the right of the Group by field (I HRX 5020) using the following caret- and pipe-delimited format: efq1A^efq1B^efq1C|label1;efq2A^efq2B|label2;efq3A|label3;efq4A^efq4B.
    - The EFQ item specifies the ID of a frequency (EFQ) record.
    - The Label item specifies the group's title.
    - The pipe character (|) signifies the separation between frequency record and title. All frequency records in the caret-delimited (^) list entered before the pipe use the label entered after the pipe. These groups are then separated by semicolons.
    - Here is an example of the parameters for a group of frequencies:  
100^200^300|Hemodialysis Orders;400^500|PICU Orders;600|Nursing Orders. In this example, orders with a frequency of 100, 200, or 300 are grouped together under a section titled Hemodialysis Orders, orders with a frequency of 400 or 500 are grouped under a section titled PICU Orders, and so on.
  - If the grouping option is Special: Med/Proc Splitter, enter parameters in the field to the right of the Group by field (I HRX 5020) using the following caret-delimited format:

MedGrouping^ProcGrouping.

- The first caret-delimited item determines the medication grouping option, while the second item determines the procedure grouping option.
  - For both items, enter a value from the Lab OI Group by (I HRX 51203) category list. If you leave either of the values blank, the default is 1-Order Type.
  - For example, a value of 13^1 in this field groups medications by therapeutic class and procedures by order type.
  - If the grouping option is User Role of Authorizing Provider, enter parameters in the field to the right of the Group by field (I HRX 5020) using the following caret- and pipe-delimited format:
    - The label defines the header that appears for orders placed by users with the user roles defined by the caret-delimited role descriptors.
    - Here is an example of the parameters:  
MR\_IP\_PROVIDER^ED\_PROV;Provider|RX\_PHARMACIST;Pharmacist
    - In this example, orders placed by users with a user role of MR\_IP\_PROVIDER or ED\_PROV are grouped under a header of Provider and orders placed by users with a role of RX\_PHARMACIST are grouped under a header of Pharmacist. If a user has both roles, groups defined later in the list take precedence. In this example, the order would be grouped under a header of Pharmacist if the ordering user has a user role from both specifications.
  - If the grouping option is Pharmaceutical Class, you can enter 1 in the field to the right of the Group by field (I HRX 5020) to sort alphabetically by the abbreviation of the pharmaceutical class instead of sorting alphabetically by the pharmaceutical class.
  - If the grouping option is Scheduled/Continuous/PRN, you can choose to group provider-held orders separately by entering parameters in the field to the right of the Group by field (I HRX 5020):
    - Enter 1 to group provider-held orders above the other medication groups.
    - Enter 2 to group provider-held orders below the other medication groups.
  - If the grouping option is Procedure Category Clusters or Med/Proc Splitter with Procedure Category Clusters set as the Procedure grouping, you can configure infant feeding orders to appear with other procedure categories rather than in the Other Procedures group. Starting in November 2023, you can also configure infant feeding orders to appear with a specific category in the Order Type Clustering grouping. To do so, enter the word "feedings" in the caret-delimited list of procedure categories in the parameter field to the right of the Group by field (I HRX 5020). For example, if the existing presentation view has the parameters listed in the first bullet point below and feedings should appear under a header of "Diet", you would add "feedings" to the end of the parameter list, as demonstrated by the second bullet point below:
    - Original free text parameters: Labs;7^27^|Diet;29
    - Updated free text parameters: Labs;7^27^|Diet;29^feedings
4. On the Criteria tab, select the Sorting parameter and specify how orders should be sorted within the groups in the associated field (I HRX 5001).
  5. On the General tab, enter a name for your view in the Report Name (I HRX .2) field.

## Add Views to the Manage Orders Activity

To add your views to the Active Orders tab of the Manage Orders activity:

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN) and open your

- navigator configuration record for the Manage Orders activity.
2. Go to the Manage Orders View Settings screen.
  3. Enter a caption (I VCN 34300) and report record (I VCN 34305) for each view that you want clinicians to be able to use.

## Set Up Active Orders Filters for Clinicians

To save your clinicians time in the Manage Orders activity, you can filter out orders they won't find useful based on order type, order status, and order class. For example, clinicians might not want to see orders with a status of Completed.

1. In Hyperspace, go to Epic button > Admin > General Admin > Report Builder.
2. In the Report template field, enter 14710-Rounding Navigator Filter Template.
3. Add filters to control which orders appear.
  - Order Status: Using this filter set, you can choose whether orders with a status of Completed/Expired appear with active orders.
  - Order Type: Using this filter set, you can include or exclude certain order types. Select whether to include or exclude certain order types and enter the order types in the corresponding field (I HRX 34000).
  - Order Class: Using this filter set, you can include or exclude certain order classes. Select whether to include or exclude certain order classes and enter the order classes in the corresponding field (I HRX 51217).
4. In Clinical Administration, go to Navigators > Navigator Configurations and open the navigator configuration for the Orders section of the Rounding navigator.
5. Go to the Manage Orders View Settings screen.
6. In the Order Filters (I VCN 34310) field, enter the order filter you created above.
7. Exit your navigator configuration record.

You can also specify filter settings at the EMR System Definitions level. As is common in Epic's software, the system uses the values in EMR System Definitions only if there are no settings contained in the navigator configuration record.

1. In Clinical Administration, go to Management Options > Edit System Definitions > Procedure, Scheduling, Task > Navigator-Specific.
2. On the Active Orders Options for Navigators screen, enter the order filter you created in the Default order filters (I LSD 34306) field.

## Allow Clinicians to Manually Hold Medications from the Manage Orders Activity

Help clinicians manage a patient's orders by allowing them to hold or unhold medications from the Manage Orders activity. For example, if a patient should not receive a medication until after her lab values return, a physician can place her medication on hold. When the patient's results come back, the physician can unhold the medication or discontinue it if appropriate. To help nurses be aware of when medications are held or unheld, acknowledgment requirements are applied to these actions and the actions appear in order acknowledgment print groups.

Clinicians can place inpatient medications on hold for specified durations of time, either by specifying a discrete duration, such as a number of doses, hours, or days, or by choosing a specific time when the hold should end. They can also schedule future hold actions, such as indicating that a medication should be held starting tomorrow at noon. Additionally, if a medication is on hold and a provider wants to modify it, they can do so without the stopping the hold first.

The Epic-released settings for duration-based holds are based on input from a brain trust comprised of leadership and clinical experts, including pharmacists, nurses, and physicians, and we anticipate that they align with most community members' best practices. If your organization wants to tweak these settings, follow the instructions below to use Build Wizard feature 630100-Allow Clinicians to Hold Inpatient Medications to fine-tune the restrictions or guardrails for this feature, such as specifying the maximum length of time holds can be scheduled for.

Giving clinicians the ability to hold and unhold medications affects physicians, nurses, and pharmacists. We expect that the Orders team will lead this project, and they should work closely with the following teams:

- The Clinical Documentation team to verify how provider held meds appear in the MAR.
- The Willow Inpatient team to determine which provider hold actions require pharmacist verification and which can be autoverified.
- The application teams that use procedural, specialty, and ED narrators, including the ASAP, Cupid, Lumens, OpTime, and Radiant teams, to determine how held and unheld orders appear in narrators. If you decide that you don't want users to hold or unhold medications, refer to the [Customize and Hide Action Buttons](#) topic for setup instructions.

Note that if your organization uses Beacon, clinicians can place orders from treatment or therapy plans on hold indefinitely only, and they cannot specify a duration of time.

To help you efficiently set up this feature, you can use Build Wizard feature 630100-Allow Clinicians to Hold Inpatient Medications (application: Orders) to complete the majority of the setup required for clinicians to manually hold medications, as well as the configuration for duration-based holds.

Before you run the Build Wizard features, you need to do some preparation work. Then, after you run the Build Wizard, you might want to complete some additional configuration. This topic is organized into the following sections to walk you through that process:

1. [Complete Preparation Work and Run the Build Wizard](#). Review this section first. The topics in this section guide you through the decisions that you need to make and the records you need to identify, update, or create before you can run the Build Wizard. As you work through the topics in this section, maintain a list of the decisions that you make and the records that you create, and have that list handy when you run the Build Wizard.
2. [Manually Adjust Medication Hold Settings After Running the Build Wizard](#). If you need to adjust any of the settings after you run the Build Wizard, this section of the guide provides manual instructions for everything the Build Wizard helps you configure. If you used the Build Wizard to configure your medication hold settings, and you're happy with your configuration, you do not need to review this section of the guide.
3. [Complete Additional Configuration for Medication Hold Settings](#). This section provides instructions for additional setup and configuration options that are not included in the Build Wizard feature. Some of this manual setup is required, such as giving clinicians necessary security, while other setup is optional, depending on your organization's preferences and policies.

# Complete Preparation Work and Run the Build Wizard

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Use Build Wizard feature 630100-Allow Clinicians to Hold Inpatient Medications (application: Orders) to complete the majority of the setup required for clinicians to manually hold medications, as well as the configuration for duration-based holds.

Before you run the Build Wizard features, you need to make some decisions and identify or create some records. This section covers everything that you need to do to prepare to run the Build Wizard features. The [Run the Build Wizard Features to Configure Medication Hold Settings](#) topic at the end of this section provides instructions for using the Build Wizard features after you have completed the preparation work.

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## Determine the Appearance of MAR Hold and Unhold Actions.

To make it possible for clinicians to place medications on hold and subsequently unhold medications, you need two separate MAR actions: one for holding medications, and another for unholding medications. Work with your Clinical Documentation team to determine how the custom MAR actions should appear for nurses in the MAR for medications that are held or unheld from the Manage Orders activity. You need to decide the following:

- The name and abbreviation to use for each action.
- Which background color and auto-held caption to use to differentiate these actions from other MAR hold actions. For more information about using background colors to differentiate between medications in the MAR, refer to the [Change the MAR Background Colors](#) topic.

Then, you can use the Build Wizard feature to create both of these MAR actions by specifying the action name, abbreviation, background color, and auto-held caption.

## Determine Which Medications Clinicians Can Manually Hold or Unhold

By default, all medications can be placed on hold by physicians. However, you might want to prevent clinicians from placing certain medications on hold. To allow flexibility in how you manage which medications can be placed on hold or unhold, you can create either a grouper of medications you want to allow clinicians to hold or unhold or a grouper of medications you don't want clinicians to be able to hold or unhold.

These settings are not cumulative. You can specify only one grouper, so if you have medications specified in the disallow grouper, the allow grouper at that level isn't evaluated. Additionally, you can enter these groupers at the profile level or the system level. If you specify a grouper at a lower level, such as the profile level, then the grouper specified at the system level is not evaluated. Consider the following scenario: You want all clinicians who work in department A to have access to hold or unhold all medications except vancomycin. Everywhere else, you want to limit clinicians so they can hold or unhold only the following medications: acetaminophen, ibuprofen, and naproxen. To do this, you would:

- Create a medication grouper that contains vancomycin and enter that grouper in the Disallow hold groupers (I LPR 34922) field in the profile record for department A.
- Create a medication grouper that contains acetaminophen, ibuprofen, and naproxen. Enter that grouper in the Allow hold groupers (I LSD 98302) field in EMR System Definitions.

Before you can run the Build Wizard feature, you need to identify or create a medication grouper that contains the medications you want to either allow or disallow. If you need to create a new medication (ERX) grouper, refer to the [Build a General Grouper](#) topic for basic instructions.

After you create the groupers that you want to use, you can use the Build Wizard feature to apply the grouper at the system level. If you want to specify the grouper at the profile level, you need to do so manually. Refer to the [Specify Which Medications Clinicians Can Manually Hold or Unhold](#) topic for manual instructions.

## Decide Whether Clinicians Are Required to Enter Reasons or Comments

By default, clinicians are required to enter a reason from the MAR-Reason (I INP 10080) category list for holding medications, but not for unholding medications. Clinicians are also not required to enter a comment when they hold or unhold medications by default.

We recommend requiring a hold reason to communicate to other clinicians why this medication is on hold. You can determine whether a clinician is required to enter a reason or comment for holding a medication or unholding a medication at the profile level or the system level. In addition, you can specify the list of reasons available for holding and unholding medications.

Work with your clinical stakeholders to decide whether clinicians should be required to enter hold reasons or comments when holding or unholding medications. Additionally, determine which reasons clinicians should be able to select when holding or unholding a medication.

After making those decisions, you can use the Build Wizard feature to:

- Specify currently available reasons in EMR System Definitions.
- Create additional reasons if needed.
- Indicate whether clinicians are required to enter a reason when holding or unholding medications at the system level.
- Indicate whether clinicians are required to enter a comment when holding or unholding medications at the system level.

If you want to indicate whether clinicians are required to enter a reason when holding or unholding a medication at the profile level, you must do so manually. Refer to the [Require Clinicians to Enter a Reason for Holding or Unholding a Medication](#) topic for manual instructions.

Similarly, if you want to indicate whether clinicians are required to enter a comment when holding or unholding a medication at the profile level, you must do so manually. Refer to the [Require Physicians to Enter a Comment When Holding and Unholding Medications](#) topic for manual instructions.

## Determine Restrictions for Duration-Based Holds

Clinicians can place inpatient medications on hold for specified durations of time, either by specifying a discrete duration, such as a number of doses, hours, or days, or by choosing a specific time when the hold should end. They can also schedule a future hold action, such as indicating a medication should be held starting today at noon.

Work with your clinical stakeholders to determine any restrictions that you want to place on how clinicians can schedule these holds. Consider the following questions:

1. Should clinicians be able to hold medications indefinitely, or should they always enter a specific hold duration? By default, clinicians can hold medications indefinitely.
2. Which hold duration mode should be used by default when clinicians manually hold a medication? You can choose one of the following as the default mode:
  - a. Specify Discrete Hold Duration. With this mode, clinicians must specify a hold duration and hold duration unit.

- b. Specify Hold End Time. With this mode, clinicians must specify a date and time at which the medication hold should end.
  - c. Until Manually Unheld. With this mode, the medication is held indefinitely. This mode is used as the default mode if you do not specify a different one.
3. What is the maximum amount of time that a medication can be placed on hold? By default, the maximum allowed hold duration is 120 hours (5 days).
  4. What is the maximum number of hours in advance that a medication can be put on hold? By default, medications can be held up to 48 hours in advance.

After making these decisions, you can use the Build Wizard to configure the relevant settings at the system level. Optionally, you can also use the Build Wizard to override some of these settings for specific medication groupers. If you want to override any of the settings at the medication grouper level, you first need to identify or create medication (ERX) groupers that contain the medications that you want to use different settings for. If you need to create a new grouper, refer to the [Build a General Grouper](#) topic for basic instructions.

## Determine How Often Hold Actions Must Be Reviewed

To ensure that medication holds are still appropriate for the patient's condition, you can require clinicians to review the hold action a specified number of hours before an upcoming hold or unhold action. If a medication has not been reviewed within the specified review threshold before the scheduled future hold action, then it is flagged as needing review. When a medication needs review, the row appears highlighted in the Manage Orders activity, the text "Needs Review" appears alongside the hold information, and the Review button becomes available. By default, medications with future hold or unhold events require review 8 hours before the scheduled hold or unhold instant.

The screenshot shows the 'Orders' screen in the Epic EHR interface. At the top, there is a navigation bar with icons for Back, Forward, Summary, Chart Re..., Results, Synopsis, Problems, History, and a purple document icon. To the right of the document icon are buttons for Provider..., a green square with a checkmark, a yellow square with a plus sign, three dots, and a gear icon. Below the navigation bar is a toolbar with tabs: Active (selected), Signed & Held, Home Meds, Cosign, Order History, and Future Outpatient. A dropdown menu 'Sort by: Order Type' is open. The main area is titled 'Scheduled' and contains a list of medications. One row is highlighted in yellow, indicating a 'Hold by provider'. The row details are: atenolol (Tenormin) tablet 25 mg, 25 mg, Oral, Daily, First dose on Tue 4/4/23 at 0900. Below this text is a red note: 'Hold ends tomorrow at 1200 (Needs Review)'. To the right of this note are four buttons: Review, Modify, Unhold, and Discontinue. The entire highlighted row is set against a light blue background.

Similarly, you can require hold action review at specified intervals for currently held medications. If a currently held medication has not been reviewed within the specified number of hours, then it is flagged as needing review. By default, medications need to be reviewed every 20 hours. You can also indicate whether periodic hold action review is required for only indefinitely held medications, or if it should also apply to duration-based holds. By default, all currently held medications are evaluated for periodic hold action review.

Work with your clinical stakeholders to determine:

1. When should an upcoming hold or unhold action be reviewed by clinicians?
2. How often should currently held medications be reviewed by clinicians?
3. Should periodic hold action review be required for only indefinitely held medications? Or should it apply to duration-based holds?

After making these decisions, you can use the Build Wizard to configure the relevant settings at the system level. Optionally, you can also use the Build Wizard to override some of these settings for specific medication groupers.

If you want to override any of the settings at the medication grouper level, you first need to identify or create medication (ERX) groupers that contain the medications that you want to use different settings for. If you need to create a new grouper, refer to the [Build a General Grouper](#) topic for basic instructions.

## Decide How Medication Hold Information Appears in Navigators

Clinicians can click buttons in the Manage Orders activity and medication reconciliation navigator sections to take various hold actions, which then appear called out in the Orders sidebar. You can configure which buttons appear in these sections, what the caption of the buttons is, and what caption appears in the sidebar for the hold action.

We recommend using the default settings listed below unless your organization uses different terminology for hold-related workflows, which might be the case in locales outside of the United States.

Hold Action	Button Caption	Sidebar Group Caption
Hold	Hold	Orders to Hold
Unhold	Unhold	Orders to Unhold
Cancel Hold	Cancel Hold	Cancel Hold
Order and Hold	Order and Hold	Order and Hold

Additionally, when a patient has medications placed on hold before they are discharged and readmitted to another hospital, you can elect to maintain the hold status for those medications in the receiving encounter. In that case, when the patient is admitted to the new location, a clinician can click Continue to carry the medication hold over to the receiving encounter. By default, the hold status is not maintained on the receiving encounter.

Before running the Build Wizard feature, determine whether you want to use the default navigator configuration hold settings for all applicable navigator sections. If you do not, determine which navigator configuration records you want to update, and which settings you want to change from the default settings listed above.

## Determine Whether to Autoverify Order Hold Actions

Pharmacists can interact with held medication orders in the Verify Orders activity. To save pharmacists time, you can choose to autoverify orders based on the type of modification that is being made. For medication holds, you can configure orders to be autoverified when an order is held or unheld, or when an existing hold is edited or canceled, by adding the following security points to clinicians' Willow security classes:

- 65-Autoverify Held Orders
- 66-Autoverify Unheld Orders
- 77-Autoverify Edit Hold Actions
- 78-Autoverify Cancel Hold Actions

Before running the Build Wizard, determine whether you want to update all Willow security classes that have security to verify orders, or only certain security classes, and which security points you want to add.

## Decide Which Print Groups and Narrators Should Include Hold and Unhold Actions

Nurses can view and acknowledge changes to orders in multiple places, including acknowledgement print groups, timeline print groups, and procedural, specialty, and ED narrators. In many print groups, you can configure which changes to orders require acknowledgement by clinicians. Similarly, in narrators, you can configure which actions appear in the Acknowledge Orders toolbox.

Before you run the Build Wizard, determine whether you want to include hold, unhold, and cancel hold actions in acknowledgement print groups, timeline print groups, and narrators, and if you want to update all affected records, or to specify only certain records to update.

## Determine Whether Interaction Checking for New Orders Should Exclude Held Medications

### Starting in November 2023

When a clinician orders a medication, the system checks for interactions between that medication and all of the patient's active medications. Examples of interactions the system checks for include drug-drug interactions and duplicate warnings. By default, when a clinician places an order, the system considers provider-held medications when checking for interactions between the new medication order and existing medication orders. To prevent clinicians from seeing warnings for medications that currently aren't being given to the patient, you can choose to exclude held medication orders from interaction checking when they order new medications.

Regardless of whether you exclude held medications orders from interaction checking for new medications, interaction checking still considers held medications when pre-screening Order Sets, when a clinician checks interactions for existing orders only, such as by clicking the Interactions button in the Medications activity, and when the new medication overlaps with a held medication's interaction checking active interval.

Before running the Build Wizard, determine whether interaction checking for new orders should exclude held medications.

## Run the Build Wizard Features to Configure Medication Hold Settings

You can use Build Wizard feature 630100-Allow Clinicians to Hold Inpatient Medications to complete much of the necessary setup for allowing clinicians to place manual medication holds, including configuration for setting duration-based holds. Before running this Build Wizard feature, you need to have already completed the preparation work in the preceding topics. Be sure to have your list of records that you identified, updated, or created as part of that preparation work on hand when you're ready to run the Build Wizard.

If you need to adjust any of these settings after you have run the Build Wizard, refer to the manual steps in the [Manually Adjust Medication Hold Settings After Running the Build Wizard](#) section of this guide.



To get started, open the Build Wizard in Hyperspace (search Build Wizard), and search for feature 630100-Allow Clinicians to Hold Inpatient Medications (application: Orders). Then, respond to the prompts described below.

1. Enter values in the Hold Action Configuration tables to create MAR hold actions to use when a clinician manually holds or unholds a medication from an orders activity. You determined which values to use in the [Determine the Appearance of MAR Hold and Unhold Actions](#) topic. If MAR hold actions are already specified in EMR System Definitions for holding and unholding medications, these tables do not appear in the Build Wizard feature.
2. In the Restrict Which Medications Are Allowed to Be Held table, enter the medication grouper that you identified or created in the [Determine Which Medications Clinicians Can Manually Hold or Unhold](#) topic in the Medication Grouper column. You can choose to either allow clinicians to hold certain medications or to disallow clinicians from holding certain medications, so you can enter a grouper in only one of the two rows. If you leave both rows blank, clinicians can hold all medications.

3. In the Available Hold Reasons table, enter the reasons you determined that clinicians should be able to select when holding or unholding a medication, as described in the [Decide Whether Clinicians Are Required to Enter Reasons or Comments](#) topic.
4. If you determined that you need to create new hold reasons in the [Decide Whether Clinicians Are Required to Enter Reasons or Comments](#) topic, enter the name and abbreviation for the new reasons in the first two columns of the table for creating additional reasons. In the third column, indicate whether the reason should be used for holding medications, unholding medications, or both.
5. In the Item Requirements table, specify whether clinicians should be required to enter a reason or comment when holding or unholding medications, or if entering a reason or comment should be recommended, or neither required nor recommended.
6. In the Hold Duration Restrictions section, use the decisions you made in the [Determine Restrictions for Duration-Based Holds](#) topic to complete the following:
  - a. In the Allow indefinite holds? field, enter Yes to allow clinicians to hold medications indefinitely. Enter No if clinicians should always enter a specific hold duration.
  - b. In the Default hold duration mode field, specify which hold duration mode should be used by default when clinicians manually hold a medication.
  - c. In the Maximum hold duration field, enter the number of hours to use as the maximum amount of time that a clinician can schedule as a hold duration. If you leave this field blank, the maximum allowed hold duration is 120 hours (5 days).
  - d. In the Maximum future hold threshold field, enter the maximum number of hours that a medication can be put on hold in advance. If you leave this field blank, medications can be held up to 48 hours in advance.
7. In the Hold Action Review section, use the decisions you made in the [Determine How Often Hold Actions Must Be Reviewed](#) topic to complete the following:
  - a. In the Require hold action review X hours before upcoming hold/unhold actions? field, enter a number of hours to use as the review threshold for future hold and unhold events. If a medication has not been reviewed within the specified review threshold before the scheduled future hold action, then the medication hold is flagged as needing review. If you leave this field blank, medications with future hold or unhold events require review 8 hours before the scheduled hold or unhold instant.
  - b. In the Require hold action review every X hours for currently held medications? table, enter a number of hours to specify how

often a held medication needs to be reviewed in the Review Interval (in hours) column. If you leave this field blank, currently held medications require review every 20 hours. In the Only require for meds on indefinite hold column, enter Yes to require periodic review for only indefinitely held medications. Enter No or leave the column blank to require periodic hold action review for all currently held medications.

8. In the Medication Grouper Overrides table, enter any medication grouper overrides that you decided to use for hold duration restrictions or provider hold action review settings, using the medication groupers that you identified or created in the [Determine Restrictions for Duration-Based Holds](#) topic or the [Determine How Often Hold Actions Must Be Reviewed](#) topic.
9. In the Navigator Configuration section, use the decisions you made in the [Decide How Medication Hold Information Appears in Navigators](#) topic to specify whether you want to use the default navigator configuration provider hold settings. Enter Yes to apply the default configuration values to all applicable records. Enter No to customize the configuration options as follows:
  - a. Enter values in the table to specify your desired button and sidebar group captions and behavior. For each hold action, you can specify whether the button should be hidden, what the caption of the button should be, and what caption should appear in the sidebar.
  - b. Respond to the following questions:
    - i. Keep hold status when continuing a medication in an Inter-Facility Transfer order reconciliation navigator? Enter Yes if you want continued medications to be ordered and held on the receiving encounter during a transfer. Enter No or leave the field blank if the hold status should not be maintained on the receiving encounter.
    - ii. Update all affected navigator configuration records? Enter Yes to update all Manage Orders and Order Reconciliation navigator configuration records. Enter No if you want to specify which navigator configuration records to update.
10. In the Willow Security section, use the decisions you made in the [Determine Whether to Autoverify Order Hold Actions](#) topic to specify how you want to update Willow security classes. Enter Yes if you want to update all Willow security classes that have security to verify orders. Enter No if you want to specify which security classes should be updated and which provider hold actions should be verified.
11. In the RN Acknowledgements section, use the decisions you made in the [Decide Which Print Groups and Narrators Should Include Hold and Unhold Actions](#) topic to specify whether you want to use the default nurse acknowledgement settings. Enter Yes to apply the default settings

to all acknowledgement print groups, timeline print groups, and narrators that are configured to show other acknowledgement types.

Enter No to specify which print groups and narrators should be updated and which hold actions should be included.

12. Starting in November 2023, in the Medication Warnings section, use the decision that you made in [Determine If Provider Holds Should Be Excluded from New Order Interaction Checks](#) topic to specify whether you want to exclude held medications from being considered when checking a new order's interactions. Enter Yes to exclude held medications from new order interaction checks. Enter No if you want held medications to be considered for new order interaction checks.
- 

## Manually Adjust Medication Hold Settings After Running the Build Wizard

If you need to adjust your medication hold settings after running the Build Wizard, refer to the topics below for manual instructions. If you used the Build Wizard and you're happy with your configuration, you do not need to review this section of the guide.

### Create MAR Actions for Medications Held/Unheld from Manage Orders

The MAR action is used to describe what the clinician did with the medication, such as Given or Held. Medications held from the Manage Orders activity need a unique MAR action to differentiate them from orders held on transfer or held because a patient is on leave of absence. To enable this functionality, you must specify a MAR hold action for medications held from the Manage Orders activity in EMR System Definitions.

Work with your Clinical Documentation team to determine the custom MAR action that should appear for nurses in the MAR for medications held from the Manage Orders activity, then complete the setup in the [Create Custom Actions for Medications Held or Unheld from the Manage Orders Activity](#) topic.

### Specify Which Medications Clinicians Can Manually Hold or Unhold

In the [Determine Which Medications Clinicians Can Manually Hold or Unhold](#) topic, you might have created either a grouper of medications you want to allow clinicians to hold or unhold or a grouper of medications you don't want clinicians to be able to hold or unhold.

You can use the Build Wizard feature to apply the grouper at the system level, as described in the [Run the Build Wizard Features to Configure Medication Hold Settings](#) topic. If you want to specify the grouper at the profile level, you need to do so manually.

To manually specify the medication groupers:

1. In Clinical Administration, go to one of the following items, depending on whether you want to apply the grouper at the profile, service area, or system level:
  - a. Profile:
    - i. Follow the path Management Options > Profiles (LPR) and open the profile record you want to update.
    - ii. Follow the path Medication, Allergy, Imm, etc. > Medications Activity and go to the Provider Hold Settings screen.
    - iii. If you want to specify orders that clinicians cannot place on hold, enter the medication

- grouper in the Disallow hold groupers (I LPR 34922) field.
- iv. If you want to specify which orders clinicians can place on hold, enter the medication grouper in the Allow hold groupers (I LPR 34921) field.
- b. System:
- i. Follow the path Management Options > Edit System Definitions > Medication, Allergy, Imm, etc. > Navigator-Specific.
  - ii. If you want to specify orders that clinicians cannot place on hold, enter the medication grouper in the Disallow hold groupers (I LSD 98303) field.
  - iii. If you want to specify which orders clinicians can place on hold, enter the medication grouper in the Allow hold groupers (I LSD 98302) field.

## Require Clinicians to Enter a Reason for Holding or Unholding a Medication

In the [Decide Whether Clinicians Are Required to Enter Reasons or Comments](#) topic, you determined which reasons should be available for clinicians to select when holding or unholding a medication.

You can use the Build Wizard feature to specify those reasons in EMR System Definitions, create additional reasons if needed, and indicate whether entering a reason is required at the system level, as described in the [Run the Build Wizard Features to Configure Medication Hold Settings](#) topic. If you want to indicate whether clinicians are required to enter a reason when holding or unholding a medication at the profile level, you must do so manually.

To manually change the requirements for whether a clinician must enter a reason when holding a medication:

1. In Clinical Administration, go to one of the following items, depending on whether you want to apply the setting at the profile, service area, or system level:
  - a. Profile:
    - i. Follow the path Management Options > Profiles (LPR) and open the profile record in which you want to change the hold reason requirements.
    - ii. Follow the path Medication, Allergy, Imm, etc. > Medications Activity and go to the Provider Hold Settings screen.
    - iii. In the Hold reason requirements (I LPR 34923) field, enter one of the following options:
      - If you don't want to require a hold reason, enter 0-None.
      - If you want to require a hold reason, enter 1-Required.
      - If you want a hold reason to be a recommended field, but not required, enter 2-Recommended.
  - b. System:
    - i. Follow the path Management Options > Edit System Definitions > Medication, Allergy, Imm, etc. > Navigator-Specific.
    - ii. Go to the Hold reason requirement (I LSD 98310) field, and enter one of the following options:
      - If you don't want to require a hold reason, enter 0-None.
      - If you want to require a hold reason, enter 1-Required.
      - If you want a hold reason to be a recommended field, but not required, enter 2-Recommended.

To change the requirements for whether a clinician must enter a reason when unholding a medication:

1. In Clinical Administration, go to one of the following items, depending on whether you want to apply the setting at the profile, service area, or system level:
  - a. Profile:
    - i. Follow the path Management Options > Profiles (LPR) and open the profile record in which you want to change the hold reason requirements.
    - ii. Follow the path Medication, Allergy, Imm, etc. > Medications Activity and go to the Provider Hold Settings screen.
    - iii. In the Unhold reason requirements (I LPR 34925) field, enter one of the following options:
      - If you don't want to require a hold reason, enter 0-None.
      - If you want to require a hold reason, enter 1-Required.
      - If you want a hold reason to be a recommended field, but not required, enter 2-Recommended.
  - b. System:
    - i. Follow the path Management Options > Edit System Definitions > Medication, Allergy, Imm, etc. > Navigator-Specific.
    - ii. Go to the Unhold reason requirement (I LSD 98320) field, and enter one of the following options:
      - If you don't want to require a hold reason, enter 0-None.
      - If you want to require a hold reason, enter 1-Required.
      - If you want a hold reason to be a recommended field, but not required, enter 2-Recommended.

To specify which reasons a clinician can choose when holding a medication:

1. In Hyperspace, open Category List Maintenance (search: Category List Maintenance) and open the MAR - Reason (I INP 10080) category list.
2. Add any additional hold reasons you want clinicians to be able to choose when holding a medication from the Manage Orders activity.
3. In Clinical Administration, follow the path Management Options > Edit System Definitions > Medication, Allergy, Imm, etc. > Navigator-Specific.
4. Go to the Available hold reasons (I LSD 98312) field and enter a list of reasons clinicians should be able to select when placing a medication on hold. If this field is left blank, all active values in the MAR-Reason (I INP 10080) category list are available for clinicians to enter.

To specify which reasons a clinician can choose when unholding a medication:

1. In Hyperspace, open Category List Maintenance (search: Category List Maintenance) and open the MAR - Reason (I INP 10080) category list.
2. Add any additional hold reasons you want clinicians to be able to choose when holding a medication from the Manage Orders activity.
3. In Clinical Administration, follow the path Management Options > Edit System Definitions > Medication, Allergy, Imm, etc. > Navigator-Specific.
4. Go to the Available unhold reasons (I LSD 98322) field and enter a list of reasons clinicians should be able

to select when unholding a medication. If this field is left blank, all active values in the MAR-Reason (I INP 10080) category list are available for clinicians to enter.

## Require Physicians to Enter a Comment When Holding and Unholding Medications

In the [Decide Whether Clinicians Are Required to Enter Reasons or Comments](#) topic, you determined whether clinicians should be required to enter a comment when holding or unholding a medication. By default, clinicians are not required to enter a comment when they hold or unhold medications.

You can use the Build Wizard feature to indicate whether entering a comment is required at the system level, as described in the [Run the Build Wizard Features to Configure Medication Hold Settings](#) topic. If you want to indicate whether clinicians are required to enter a comment when holding or unholding a medication at the profile level, you must do so manually.

To require clinicians to enter a comment when they place a medication on hold:

1. In Clinical Administration, go to one of the following items, depending on whether you want to apply the setting at the profile, service area, or system level:
  - a. Profile:
    - i. Follow the path Management Options > Profiles (LPR) and open the profile record in which you want to change the hold reason requirements.
    - ii. Follow the path Medication, Allergy, Imm, etc. > Medications Activity and go to the Provider Hold Settings screen.
    - iii. In the Hold comments requirements (I LPR 34924) field, enter one of the following options:
      - If you don't want to require a hold comment, enter 0-None.
      - If you want to require a hold comment, enter 1-Required.
      - If you want a hold comment to be a recommended field, but not required, enter 2-Recommended.
  - b. System:
    - i. Follow the path Management Options > Edit System Definitions > Medication, Allergy, Imm, etc. > Navigator-Specific.
    - ii. Go to the Hold comments requirement (I LSD 98311) field, and enter one of the following options:
      - If you don't want to require a hold comment, enter 0-None.
      - If you want to require a hold comment, enter 1-Required.
      - If you want a hold comment to be a recommended field, but not required, enter 2-Recommended.

To require clinicians to enter a comment when they unhold a medication:

1. In Clinical Administration, go to one of the following items, depending on whether you want to apply the setting at the profile, service area, or system level:
  - a. Profile:
    - i. Follow the path Management Options > Profiles (LPR) and open the profile record in which you want to change the hold reason requirements.
    - ii. Follow the path Medication, Allergy, Imm, etc. > Medications Activity and go to the Provider Hold Settings screen.

iii. In the Unhold comments requirements (I LPR 34926) field, enter one of the following options:

- If you don't want to require a hold comment, enter 0-None.
- If you want to require a hold comment, enter 1-Required.
- If you want a hold comment to be a recommended field, but not required, enter 2-Recommended.

b. System:

i. Follow the path Management Options > Edit System Definitions > Medication, Allergy, Imm, etc. > Navigator-Specific.

ii. Go to the Unhold comment requirement (I LSD 98321) field, and enter one of the following options:

- If you don't want to require a hold comment, enter 0-None.
- If you want to require a hold comment, enter 1-Required.
- If you want a hold comment to be a recommended field, but not required, enter 2-Recommended.

## Specify Whether Clinicians Can Hold Medications Indefinitely

In the [Determine Restrictions for Duration-Based Holds](#) topic, you determined whether clinicians should be able to hold medications indefinitely, or if they must enter a specific hold duration. You can use the Build Wizard to configure this setting at the system level, or to override it for specific medications at the medication grouper level, as described in the [Run the Build Wizard Features to Configure Medication Hold Settings](#) topic.

To manually configure this setting at the system level:

1. In Clinical Administration, follow the path Management Options > Edit System Definitions (LSD) > Medication, Allergy, Imm, etc. > Navigator-Specific.
2. Go to the Manual Hold/Unhold Settings – 3 screen.
3. In the Allow indefinite medication hold? (I LSD 98304) field:
  - a. Enter Yes or leave the field blank if clinicians should be able to hold a medication indefinitely.
  - b. Enter No to require clinicians to enter a specific hold duration.

To override this setting for specific medications at the medication grouper level:

1. Identify or create a medication (ERX) grouper that contains the medications that you want to use a different setting for. If you need to create a new grouper, refer to the [Build a General Grouper](#) topic for basic instructions.
2. In Clinical Administration, follow the path Management Options > Edit System Definitions (LSD) > Medication, Allergy, Imm, etc. > Navigator-Specific.
3. Go to the Manual Hold/Unhold Settings - 3 screen.
4. In the Medication Grouper (I LSD 98360) column, enter the medication grouper that you identified or created in step 1.
5. Continuing in the same row, in the Allow Indefinite Hold? (I LSD 98361) column, enter Yes if clinicians should be able to manually hold medications from this grouper indefinitely. Enter No if clinicians must enter a specific hold duration.

## Determine Which Hold Duration Mode Is Used by Default

In the [Determine Restrictions for Duration-Based Holds](#) topic, you determined which hold duration mode should be used by default when clinicians manually hold a medication. You can use the Build Wizard to configure this setting at the system level, as described in the [Run the Build Wizard Features to Configure Medication Hold Settings](#) topic.

To manually specify the default hold duration mode:

1. In Clinical Administration, follow the path Management Options > Edit System Definitions (LSD) > Medication, Allergy, Imm, etc. > Navigator-Specific.
2. Go to the Manual Hold/Unhold Settings – 3 screen.
3. In the Default hold duration mode (I LSD 98313) field, specify which hold duration mode should be used by default when clinicians manually hold medication orders. The following options are available:
  - Specify Discrete Hold Duration. Select this option if clinicians must specify a hold duration and hold duration unit, such as 1 dose, 12 hours, 2 days, and so on.
  - Specify Hold End Time. Select this option if clinicians must specify a date and time at which the medication hold should end.
  - Until Manually Unheld. The medication is indefinitely held by default and the composer won't open automatically unless there are other required items to be filled. This option is used if the field is left blank.

## Set a Maximum Hold Duration

In the [Determine Restrictions for Duration-Based Holds](#) topic, you determined the maximum amount of time that a medication should be able to be placed on hold. You can use the Build Wizard to configure this setting at the system level, or to override it for specific medications at the medication grouper level, as described in the [Run the Build Wizard Features to Configure Medication Hold Settings](#) topic.

To manually configure this setting at the system level:

1. In Clinical Administration, follow the path Management Options > Edit System Definitions (LSD) > Medication, Allergy, Imm, etc. > Navigator-Specific.
2. Go to the Manual Hold/Unhold Settings – 3 screen.
3. In the Maximum hold duration (I LSD 98305) field, enter the number of hours that the hold duration cannot exceed. If this field is left blank, the maximum hold duration is 120 hours (5 days). Starting in November 2023, August 2023 with special update E10603024, and May 2023 with special update E10509643, you can set the maximum hold duration to zero to allow only indefinite holds and require a provider to manually unhold the medication when the time is right.

To override this setting for specific medications at the medication grouper level:

1. Identify or create a medication (ERX) grouper that contains the medications that you want to use a different setting for. If you need to create a new grouper, refer to the [Build a General Grouper](#) topic for basic instructions.
2. In Clinical Administration, follow the path Management Options > Edit System Definitions (LSD) > Medication, Allergy, Imm, etc. > Navigator-Specific.
3. Go to the Manual Hold/Unhold Settings - 3 screen.
4. In the Medication Grouper (I LSD 98360) column, enter the medication grouper that you identified or created in step 1.
5. Continuing in the same row, in the Max Hold Duration (I LSD 98362) field, enter the number hours that the

duration of the hold cannot exceed for the medications in the grouper. Starting in November 2023, August 2023 with special update E10603024, and May 2023 with special update E10509643, you can set the maximum hold duration to zero to allow only indefinite holds and require a provider to manually unhold the medication when the time is right.

## Set a Maximum Future Hold Threshold

In the [Determine Restrictions for Duration-Based Holds](#) topic, you determined the maximum number of hours in advance that a clinician can place a medication on hold. You can use the Build Wizard to configure this setting at the system level, or to override it for specific medications at the medication grouper level, as described in the [Run the Build Wizard Features to Configure Medication Hold Settings](#) topic.

To manually configure this setting at the system level:

1. In Clinical Administration, follow the path Management Options > Edit System Definitions (LSD) > Medication, Allergy, Imm, etc. > Navigator-Specific.
2. Go to the Manual Hold/Unhold Settings – 3 screen.
3. In the Maximum future hold threshold (I LSD 98306) field, enter the number of hours in advance from the desired hold start instant that a medication can be held. If you leave this field blank, medications can be held up to 48 hours in advance. Starting in November 2023, August 2023 with special update E10603024, and May 2023 with special update E10509643, you can set the maximum future hold threshold to zero to require medication holds to begin immediately at signing.

To override this setting for specific medications at the medication grouper level:

1. Identify or create a medication (ERX) grouper that contains the medications that you want to use a different setting for. If you need to create a new grouper, refer to the [Build a General Grouper](#) topic for basic instructions.
2. In Clinical Administration, follow the path Management Options > Edit System Definitions (LSD) > Medication, Allergy, Imm, etc. > Navigator-Specific.
3. Go to the Manual Hold/Unhold Settings - 3 screen.
4. In the Medication Grouper (I LSD 98360) column, enter the medication grouper that you identified or created in step 1.
5. Continuing in the same row, in the Future Hold Threshold (I LSD 98363) field, enter the number of hours in advance from the desired hold start instant that medications from this grouper can be held. Starting in November 2023, August 2023 with special update E10603024, and May 2023 with special update E10509643, you can set the maximum future hold threshold to zero to require medication holds to begin immediately at signing.

## Require Clinicians to Review Held Medications

In the [Determine How Often Hold Actions Must Be Reviewed](#) topic, you determined when an upcoming hold or unhold action should be reviewed, how often currently held medications should be reviewed, and whether only indefinitely held medications should require review. You can use the Build Wizard to configure these settings at the system level, or to override them for specific medications at the medication grouper level, as described in the [Run the Build Wizard Features to Configure Medication Hold Settings](#) topic.

To manually configure these settings at the system level:

1. In Clinical Administration, follow the path Management Options > Edit System Definitions (LSD) > Medication, Allergy, Imm, etc. > Navigator-Specific.
2. Go to the Manual Hold/Unhold Settings – 4 screen.

3. In the Review threshold for future hold/unhold events (I LSD 98307) field, enter a number of hours for the review threshold for future hold or unhold events. If a medication has not been reviewed within the specified review threshold before the scheduled hold action, it is flagged as needing review. If you leave this field blank, 8 hours is used.
4. In the Review interval for currently held meds (I LSD 98308) field, enter a number of hours to specify how often a provider-held medication needs to be reviewed. Enter 0 if you do not want periodic hold review to be required. If you leave this field blank, 20 hours is used as the review interval.
5. In the Only require for meds on indefinite hold (I LSD 98309) field, specify whether periodic review should be required for only medications currently on indefinite hold. Set this field to Yes to require periodic review for only medications that are held indefinitely. Enter No or leave this field blank if all medications currently on hold should be evaluated for periodic review, regardless of whether the hold is indefinite.

To override this setting for specific medications at the medication grouper level:

1. Identify or create a medication (ERX) grouper that contains the medications that you want to use a different setting for. If you need to create a new grouper, refer to the [Build a General Grouper](#) topic for basic instructions.
2. In Clinical Administration, follow the path Management Options > Edit System Definitions (LSD) > Medication, Allergy, Imm, etc. > Navigator-Specific.
3. Go to the Manual Hold/Unhold Settings - 4 screen.
4. In the Medication Grouper (I LSD 98360) column, enter the medication grouper that you identified or created in step 1.
5. Continuing in the same row, in the Review Threshold Future Events (I LSD 98364) field, enter the review threshold in hours for future hold or unhold events for medications in this grouper. If a medication has not been reviewed within the specified review threshold before the scheduled future hold action, it is flagged as needing review. Enter 0 if you do not want a review threshold to be used.
6. In the Review Interval Currently Held Meds (I LSD 98365) field, specify how often a provider-held medication from this grouper needs to be reviewed. If a currently held medication has not been reviewed within the specified number of hours, it is flagged as needing review. Enter 0 if you do not want periodic hold review to be required.

## **Specify How Hold Information Appears in Navigator Sections**

In the [Decide How Medication Hold Information Appears in Navigators](#) topic, you determined whether you want to use the default navigator configuration hold settings for all applicable navigator sections. If you decided to use different settings than the default options, you can use the Build Wizard to complete that configuration, as described in the [Run the Build Wizard Features to Configure Medication Hold Settings](#) topic.

To manually adjust the navigator configuration record settings for the Manage Orders activity:

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN), and open the record you want to modify.
2. Go to the Manage Orders Settings - 1 screen.
3. In the Actionable button (I VCN 38010) field, select a button to rename or hide in the Active Orders tab of the Manage Orders activity.
4. In the Caption (I VCN 38011) field, enter a caption for the button. The default button caption matches the selection in the previous column.
5. In the Hide? (I VCN 38012) field, enter Yes to hide the button in the Active Orders tab of the Manage

Orders activity. Enter No or leave the field blank to show the button.

To manually adjust the navigator configuration record settings for medication reconciliation navigator sections:

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN), and open the record you want to modify.
2. Go to the Actions Settings screen.
3. In the Button (I VCN 35370) field, specify the actions that should be available.
4. In the Caption (I VCN 35360) field, enter a caption for the button.
5. In the Hide? (I VCN 35385) field, enter Yes to hide the button in the Medication Reconciliation section. Enter No or leave the field blank to show the button.

To manually adjust the navigator configuration record settings for Orders sidebars:

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN), and open the record you want to modify.
2. Go to the Group Title Configuration screen.
3. In the Action Type (I VCN 35650) field, select the type of action that you want to configure the title for.
4. In the Title (I VCN 35660) field, enter the text for the title.

To manually adjust the navigator configuration record settings for Discharge-Readmit Medication Reconciliation sections:

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN), and open the record you want to modify.
2. Go to the Inter-Facility Transfer Settings screen.
3. In the Copy medication hold status on continue? (I VCN 34125) field, enter Yes if you want the continued medication to be ordered and held on the receiving encounter. Enter No or leave the field blank if you do not want the hold status to be maintained on the receiving encounter.

## Determine Which Held/Unheld Orders Require Pharmacist Verification

Orders entered by a pharmacist, and some medications, such as breast milk, should never require pharmacist verification while others, such as opioids and antibiotics, should always require pharmacist verification.

Work with your Willow Inpatient team to determine which held/unheld orders require pharmacist verification and complete the setup in the following topics to autoverify and limit autoverification of held/unheld medications:

- [Autoverify Certain Order Modifications](#)
- [Use Rules to Autoverify Orders](#)
- [Use Rules to Prevent Orders from Being Autoverified](#)

## Ensure That Hold and Unhold Actions Appear in All Order Acknowledgment Print Groups and Narrator Toolboxes

In the [Decide Which Print Groups and Narrators Should Include Hold and Unhold Actions](#) topic, you determined whether to update all records that show order acknowledgement information, or only certain records, and which hold actions to include. You can use the Build Wizard to complete that configuration, as described in the [Run the Build Wizard Features to Configure Medication Hold Settings](#) topic.

In February 2023 and earlier versions, the Build Wizard updates only print groups that have a code template, but it's possible that you have order acknowledgment print groups that lack a template. In this case, you must manually add a template before you run the Build Wizard. You can see a list of these print groups in the Build Wizard. After you click Ready to Build, the list appears in the Review Changes to Apply sidebar report, so you can add code templates to these print groups and add them to the Build Wizard's list before finalizing your changes. Each print group that needs a code template is highlighted in red, with a list of suggested code templates below it. If you don't have one of these special updates, contact your Epic representative and mention tech note 1012527 if you need help identifying which print groups to update.

To update these print groups:

1. Identify the Epic-released print group that corresponds to your order acknowledgment print group.
2. Review and write down both of the following pieces of information:
  - The current parameter settings in your copy.
  - The code template listed in the Code Template (I LPG 10000) item in the Epic-released print group. You can check the numeric ID of the template by pressing Home+F8 and checking the Value field.
3. Open your copy and enter the code template ID in the Code Template (I LPG 10000) field.
4. Go to the Parameters screen in your copy and set the discrete parameters to match your previous parameter settings.

To manually update acknowledgement print groups to include hold and unhold actions:

1. In Clinical Administration, go to Reports, Print Groups > Print Groups (LPG), and open the print group you want to update.
2. Go to the Parameters screen.
3. In the Order Grouping parameter, specify "h" to show held medications, "u" to show unheld medications, and "c" to show canceled holds.

To manually update timeline print groups:

1. In Clinical Administration, go to Reports, Print Groups > Print Groups (LPG), and open the print group you want to update.
2. Go to the Parameters screen.
3. In the Order Groups parameter, specify "ah" to show the acknowledgement of held medications, "ae" to show the acknowledgement of unheld medications, and "ac" to show the acknowledgement of canceled hold actions.

To manually update narrators:

1. In Hyperspace, open the narrator configuration record for the narrator you want to update (search: Narrator Admin).
2. Go to the Toolbox form.
3. Select the Acknowledge Orders toolbox group.
4. To determine when orders appear in the Acknowledge Orders toolbox group, select the relevant order statuses in the Order Statuses to Acknowledge (I HGM 49000) setting.

## Exclude Provider-Held Medications from Interaction Checking for New Medication Orders

⌚ Starting in November 2023

In the [Determine If Provider Holds Should Be Excluded from New Order Interaction Checks](#) topic, you determined whether to exclude provider-held medications when checking interactions between new and existing medication orders. You can use the Build Wizard to complete that configuration, as described in the [Run the Build Wizard Features to Configure Medication Hold Settings](#) topic.

To manually configure these settings at the system level:

1. In Clinical Administration, follow the path Management Options > Edit System Definitions (LSD) > Medication, Allergy, Imm, etc. > General Options.
2. In the Consider provider hold periods to be inactive for interaction checks? (I LSD 4680) field, enter Yes to exclude provider-held medications from interaction checks for new orders. Enter No to include provider held medications in interaction checks for new orders.

## Complete Additional Configuration for Medication Hold Settings

This section covers additional setup and configuration options for medication hold settings. The setup described in these topics is not included in the Build Wizard features. Some of this manual setup is required, such as giving clinicians necessary security, while other setup is optional, depending on your organization's preferences and policies.

### Give Clinicians the Security to Hold or Unhold Medications

To hold medications, clinicians must have one of the following security points:

- Inpatient security point 36-Discontinue Medication
- EpicCare security point 310-Discontinue Inpatient Medications

To unhold medications, clinicians must have Inpatient security point 17-Order Entry.

Clinicians or medical students with Inpatient security point 268-Only pend orders in Orders Management Navigators cannot sign medication hold or unhold actions, but they can save work containing held or unheld medications for review by clinicians with the security to hold or unhold medications.

In addition to the security points listed above, you can hold or unhold medications as verbal orders or require certain clinicians to receive a cosignature for held or unheld meds. For example, a nurse can hold a medication based on a verbal order from a physician. The nurse would hold the medication and select an order mode of Verbal with Readback. The physician receives a Hold or Unhold message in In Basket to provide a verbal signature for the hold action. Refer to the [Verbal Sign Setup](#) and [Cosign Setup](#) topics for more information about setting up verbal orders and requiring cosignatures.

### Automatically Open the Order Composer When Taking a Provider Hold Action



To ensure clinicians review the hold details for every medication placed on provider hold or unheld, you always open the Order Composer when a provider hold action is taken on a medication. With this configuration when an order is held or unheld, the Order Composer always open regardless the configuration set in the Condition under which Order Composer should open automatically (I LSD 552) setting.

To automatically open the Order Composer when taking a provider hold action:

1. In Clinical Administration, edit EMR System Definitions, and follow the path Medication, Allergy, Imm, etc. > Navigator Specific.
2. Go to the Manual Hold/Unhold Settings - 2 screen.

- Set the Order composer behavior (I LSD 98314) field to 1-Always Open.

## Send Held Order Information to Your Automated Dispensing System

To ensure clinicians see consistent information in Epic and your automated dispensing system (ADS), you can configure your Outgoing Verified Medication Orders from Willow Inpatient interface so that orders are held in the ADS when they're manually held in Manage Orders. With this configuration, when an order is held, the interface sends a message to the ADS indicating that the order should be held. When the order is unheld, the interface sends another message indicating that the order should be unheld. This ensures clinicians don't unnecessarily dispense the medication.

Work with your Bridges team to complete these steps:

- In Chronicles, access the Extension (LPP) master file.
- Follow the path Enter Data > Duplicate Extension.
- Create a copy of extension 30858-EDI – ADS – Hold Medication Trigger.
- Open your copy and go to the Parameters screen.
- In parameter 1-Interface List, enter each Outgoing Verified Medication Orders from Willow Inpatient interface specification that you use to communicate with your ADS.
- In Hyperspace, open your Interface System Defaults (search: Interface System Defaults). In November 2022 and earlier, in Hyperspace, open your Interface System Definitions (search: Interface System Definitions).
- Add trigger profile variable 8010-RX\_HOLD and set it to the extension you created above.

Note that this configuration also causes hold and unhold interface messages to be sent when patients go on leaves of absence.

## Notify Clinicians When a Medication Has Been Held for a Certain Amount of Time

You can create an OurPractice Advisory to remind clinicians to re-evaluate a patient's medication when it has been held by a provider for more than a specified amount of time.

To create a rule to evaluate whether a patient has had medications on provider hold for a specified amount of time:

- In Hyperspace, open the Rule Editor (search: Rule Editor) and create a new Patient OurPractice Advisory-context rule.
- Add one of the following properties to your rule:
  - Property 42571-Has Meds Exceeding Hold Duration (starting in May 2023). Update the following parameters:
    - Enter the maximum hold duration value and unit to check for in the Max Hold Duration and Max Hold Duration Unit parameters. For example, if you want to check for a maximum hold duration of two doses, enter 2 in the Max Hold Duration parameter and Doses in the Max Hold Duration Unit parameter. If you want to check for a maximum hold duration of four hours, enter 4 in the Max Hold Duration parameter and Hours in the Max Hold Duration Unit parameter.
    - Enter 24-Provider Hold/Unhold in the MAR Hold Source parameter.
    - If you want to include only certain medications when checking for the hold duration, enter a medication group in the Medication Groupers parameter.
    - In the Provider Hold Duration Mode parameter, enter 1 to consider only indefinitely held

orders. Enter 2 to consider only orders with a specified hold duration or end time. Leave the field blank to consider all orders with holds.

- v. Enter = in the Operator parameter.
- vi. Enter 1-Yes in the Value parameter.
- Property 42505-Has Meds on MAR Hold. Update the following parameters:
  - i. Enter the number of hours after which you want a clinician to re-evaluate the medication in the Minimum Hours on MAR Hold parameter.
  - ii. Enter 24-Provider Hold/Unhold in the MAR Hold Source parameter.
  - iii. Enter = in the Operator parameter.
  - iv. Enter 1-Yes in the Value parameter.

3. Click Accept.

To create a criterion to evaluate whether the advisory should appear:

1. In Hyperspace, open the OurPractice Advisory Editor (search: OurPractice Advisory) and create a new criteria record.
2. On the Rule form, enter the rule you created above in the Rule (I LGL 950) field.
3. If you want to alert physicians for only certain medications, go to the Criteria form and click Add Criteria Type and the Medications (Include) criteria. Then, do one of the following on the Medications (Include) form:
  - Enter the medications to include in the Medication (I LGL 210) field.
  - Enter a medication grouper that contains the medications you want to include in the Medication Grouper (I LGL 2600) field.
4. Select the Released checkbox.
5. Click Accept.

To create a base record for the advisory:

1. In Hyperspace, open the OurPractice Advisory Editor (search: OurPractice Advisory) and create a new base record.
2. On the Display form, enter the display text you want to appear when a clinician sees the advisory in the Body Text (I LGL 1670) field (August 2023 and earlier: Formatted Display Text (I LGL 52) field). For example: This patient has medication orders that have been held for more than 72 hours. Review the orders to verify the hold is still appropriate.
3. On the Criteria form, enter your criteria record in the Linked Criteria (I LGL 3000) field.
4. On the Triggers form, enter the actions that should trigger the advisory in the Trigger (I LGL 78) field. Refer to the [Define Triggers to Add Your OurPractice Advisory to Workflows](#) topic for more information about triggers.
5. On the Actions form, add an action type of Activities and Links. Enter your Manage Orders activity in the Activity (I LGL 130) field and the caption you want to appear for the activity, such as Review Provider Held orders, in the Caption (I LGL 145) field.
6. Select the Released checkbox.
7. Click Accept.

## Send Held Orders Back to Pharmacy for Review After a Certain Amount of Time

 Starting May 2024

 February 2024 by SU E10804874

 November 2023 by SU E10709197

 August 2023 by SU E10611863

Because a large amount of time can pass between a pharmacist reviewing the initially signed hold for a medication and the hold actually starting or ending, it can be helpful to send the orders back to the Verify Orders activity for review at the time the hold actually starts or ends. For example, a clinician can sign a hold to begin 12 hours from the time they sign the hold. The pharmacist working at the time the hold is signed verifies the hold. 12 hours later, when the hold becomes active, a different pharmacist might be working and conditions for the patient might have changed, so it can be helpful to review the hold again when it starts. If not all medications at your organization should be resent to Verify Orders in the same way, you can also use grouper records to override the system wide settings.

Consider the following examples, which assume an organization decides to send both the start of a hold and end of a hold to Verify Orders by entering Yes in Verify Queue when they occur (I LSD 98315) and sets the minimum hours to 12.

- At 1200, a clinician signs a hold for an order to start at 1500 with the hold ending at 1900 the same day. This order is queued only once, when the initial hold is signed.
- At 1200, a clinician signs a hold for an order to start at 1500 with the hold ending at 0700 the next morning. The order appears in Verify Orders again for review at 0700 when the hold ends.
- At 1200, a clinician signs a hold for an order to start at 0700 the next morning and ending at 1300. The order appears in Verify Orders again for review at 0700 the next morning when the hold starts and again at 1300 when the hold ends.

To send all holds back to Verify Orders when the hold starts or ends, follow these steps:

1. In Clinical Administration, go to EMR System Definitions and follow the path: Medication, Allergy, Imm, etc. > Navigator-Specific
2. Go to the Manual Hold/Unhold Settings - 5 screen.
3. In the Send future hold/unhold events to Verify Queue when they occur (I LSD 98315) field, enter one of the following:
  - No or leave blank: This option prevents resending orders to Verify Orders when a hold starts or ends. This option is the default behavior.
  - Hold Start Only: This option attempts to send the order back to Verify Orders only when the hold starts.
  - Hold End Only: This option attempts to send the order back to Verify Orders only when the hold ends.
  - Yes: This option attempts to send the order back to Verify Orders both when the hold starts and when it ends.
4. To prevent sending medications back to Verify Orders which pharmacists have recently reviewed, specify a number of hours in the Minimum threshold after signing to send hold events (I LSD 98316) field. If no value is entered, the minimum threshold is eight hours.

If not all medications at your organization should be resent to Verify Orders in the same way, you can use

grouper records (VCGs) to override the system wide settings. For more information on creating groupers as overrides for system-wide medication hold settings, refer to the [Specify Whether Clinicians Can Hold Medications Indefinitely](#) topic.

To override how holds for orders are sent back to Verify Orders using grouper records, follow these steps:

1. In Clinical Administration, go to EMR System Definitions and follow the path: Medication, Allergy, Imm, etc. > Navigator Specific.
2. Go to the Manual Hold/Unhold Settings - 5 screen.
3. If medications in a grouper should queue for hold events differently from the hold events entered in In the Send future hold/unhold events to Verify Queue when they occur (I LSD 98315) field, enter a hold event In the Send Future Hold/Unhold (I LSD 98366) field for the corresponding grouper.
4. To send orders back to Verify Orders based on a different amount of time than the threshold defined in the Minimum threshold after signing to send hold events (I LSD 98316) field, enter a number of hours in the Minimum Threshold (I LSD 98367) field.

## Create Additional OurPractice Advisories Related to Held Orders

### Starting in May 2023

To help clinicians keep track of currently held orders and planned future orders, you can use rule properties that return data related to held orders to create rules and decision support. For example, a rule could identify when an action on a provider-held medication needs review and present a message to inform the clinician.

The following rule properties are likely to be useful when creating OurPractice Advisories related to provider-held orders:

- 42647-Hold Start Date (unsigned)
- 42648-Hold Start Time (unsigned)
- 42649-Hold End Date (unsigned)
- 42654-Hold End Time (unsigned)
- 42655-Hold/Unhold Reason (unsigned)
- 42656-Is Review Needed for Hold Action (signed)
- 42657-Has Provider Hold (signed)
- 42659-Current Hold Scheduled Time Source (signed)
- 42661-Provider Hold/Unhold reason (signed)
- 42662-Hold Start Date (signed)
- 42663-Hold Start Time (signed)
- 42664-Hold End Date (signed)
- 42665-Hold End Time (signed)
- 42667-Current Hold Action Type

For general information about creating rules and OurPractice Advisories, refer to the [Create or Edit a Rule](#) and [Build an OurPractice Advisory](#) topics.

## Warn Nurses Before Releasing Medications Held in a Prior Encounter

## Starting in November 2021

 August 2021 by SU E9801705

 May 2021 by SU E9705808

 February 2021 by SU E9609741

If your organization uses a workflow where patients are discharged and readmitted but remain in the same hospital or facility, you might want to configure a pre-release order validation extension to help prevent orders from being inappropriately released in a new encounter. The extension checks whether discharge-readmit orders being released originated from orders that were manually held by a provider in a previous encounter.

If a hold reason or hold comment was specified when a clinician held the original order, that information appears in the pre-release order validation. You can also enter a custom message to show when nurses attempt to release the previously held orders, and you can enter a list of medication groupers that determine which medications trigger the pre-release order validation extension. To set up the pre-release order validation extension, refer to the [Warn Nurses Before Releasing Medications Held in a Prior Encounter](#) topic.

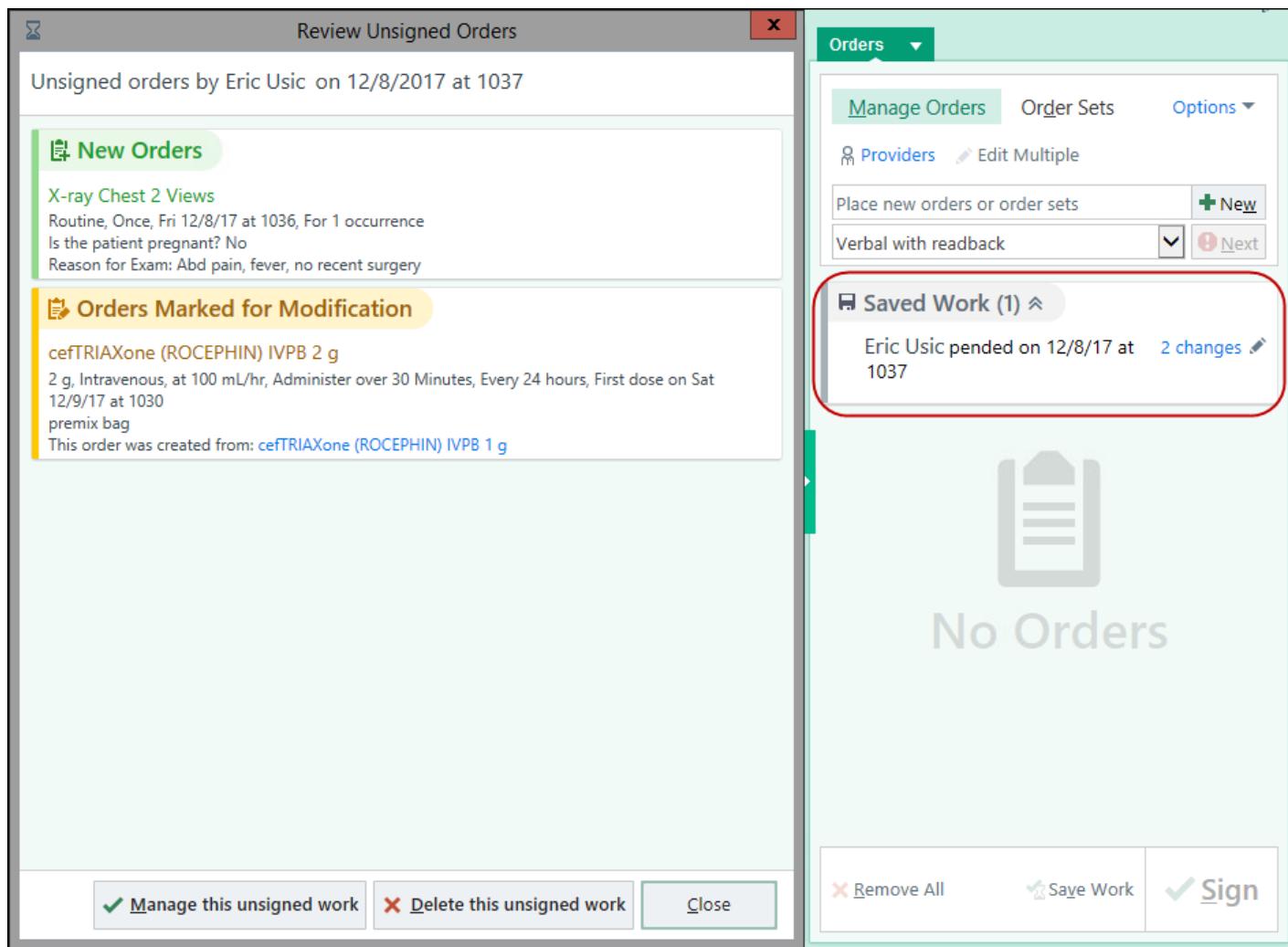
## Let Allied Health Professionals Acknowledge Held Medications Using Tasks

In the Foundation System, respiratory therapists acknowledge orders differently from nurses, using tasks, so that nurses and respiratory therapists can each acknowledge the same order without removing it from each others' work lists. If respiratory therapists or other allied health professionals need to acknowledge when medication orders relevant to their discipline are held and unheld, you need to create acknowledgment tasks for these hold actions so that they appear in order acknowledgment print groups used by allied health professionals as well as those used by nurses. To do so, refer to the instructions in the [Allow Allied Health Professionals to Acknowledge Orders in Addition to Nurse Acknowledgement](#) topic.

## Require Additional Review of Medical Students' Work

The Manage Orders activity can support a medical student's rounding workflow by allowing her to place, modify, or discontinue orders for a patient and save her work. She can then add a comment, if appropriate, and indicate that her work is ready for review.

When her supervisor accesses that patient's hospital chart and opens the Manage Orders activity, the supervisor sees the medical student's comments and can review, modify, and sign her work. Alternatively, the supervisor can delete the work and start over.



In the Foundation System, the Medical Student user (MEDEDU) is configured to require additional review.

To enable this feature, add EpicCare Inpatient security point 268-Only pend orders in Orders Management Navigators to medical students' EpicCare Inpatient security class. With this security point in place, medical students must save their work in the Manage Orders activity instead of signing it.

# Manage Orders Activity Setup: Bells and Whistles

In this section, we'll show you more configuration options for the Manage Orders activity. These options allow for further configuration of the behavior and appearance of the Manage Orders activity.

## Customize Tabs in the Manage Orders Activity

The Manage Orders activity contains multiple tabs. You can configure which tabs appear in the activity.

### Remove Tabs from the Manage Orders Activity

You have the option of removing any of the tabs from specific versions of the Manage Orders activity, although you should not remove the Active tab. For example, in the Foundation System, the medical student (MEDEDU) user doesn't have the Cosign tab because they don't have the security to cosign orders.

If you want to remove tabs, you must configure a field in your Manage Orders activity record.

#### Considerations

Always contact your Epic representative before modifying records in the Activities (E2N) master file.

Complete these steps:

1. In Clinical Administration, go to Roles, Menus, Activities, etc. > Activities (E2N) and open your copy of activity record 35000-ORD\_MANAGE\_ORDERS.
2. Go to the Control Initialization Parameters screen and press F6 in the Value (I E2N 2020) field corresponding to the Navigators parameter to edit the parameter.
3. Go to the line with the tab that you want to remove and press F9.

## Customize Reports in the Activity

To give clinicians at your organization the exact information that they need, you can customize the print groups that appear in three of the Manage Orders activity tabs:

- Signed & Held or Pended
- Home Meds
- Cosign

By duplicating released reports and print groups, you can make several changes to the appearance and behavior of the content of these tabs.

1. Duplicate the following reports and print groups for the tab you want to modify:
  - Signed & Held or Pended:
    - Report 34950-IP Ord Manage Release Orders
    - [Print group 34933-IP Ord Manage Signed and Held](#)
  - Home Meds:
    - Report 34952-IP Order Manage Home Meds
    - [Print Group 34226-IP Ord Rec Admission Review Status](#)
  - Cosign:

- Report 34951-IP Ord Manage Orders Needing Cosign
  - [Print Group 46050-IP Orders Need Signature](#)
2. In your copies of the print groups that you created in step 1, set the parameters as appropriate.
  3. In each report record that you duplicated in step 1, access the third Report Definition screen and go to the Report Print Groups (Rich Text) table.
  4. In Column 2 (I LRP 510), replace the existing entry with your copy of the corresponding print group from step 1.
  5. In Clinical Administration, go to Navigators > Navigators (LVN) and open your copy of the navigator section record that corresponds to the tab you are modifying:
    - Signed & Held or Pended:
      - 34928-ORD\_MANAGE\_ORDERS\_SECTION\_RELEASE\_ORDERS
    - Home Meds:
      - 34926-ORD\_MANAGE\_ORDERS\_SECTION\_PTA
    - Cosign:
      - 34922-ORD\_MANAGE\_ORDERS\_SECTION\_AUTHORIZE
  6. In each record, look at the HANDLER ProgID (I LVN 1020) field of the Section Setup screen and identify the report ID located after Context = in that field.
  7. In each record, replace the report ID with your custom report ID from step 1.

## Set a Specific Tab as the Default Tab

You can specify which tab appears when the Manage Orders activity opens.

### Set the Default Tab when Opening from a Menu or Activity\*

 Starting in November 2022

 May 2022 by SU E10208526

 February 2022 by SU E10113178

1. In Clinical Administration, go to Roles, Menus, Activities, etc. > Activities (E2N) and open the Manage Orders activity. The Apply to Section Type (I VCN 100) item should be set to Activity Link.
2. Go to the Control Initialization Parameters screen.
3. In the Navigators parameter, identify the line number of the Navigator Template you want to open by default.
4. In the Startup Tab Index parameter, add the line number you identified in step 3.

\*This functionality is available for activities in both the Hyperdrive client and Classic client. This functionality is available for menus in only the Hyperdrive client.

### Set the Default Tab when Opening from an OurPractice Advisory

1. In Hyperspace, open the OurPractice Advisory Editor (search: OurPractice Advisory).
2. Open the OurPractice Advisory that directs users to the Manage Orders activity. The OurPractice Advisory is listed on the Follow-up Actions form in the Activity (I LGL 130) field.
3. In the Run Parameter (I LGL 135) field on the same form, enter the following value, where # is the tab number you want to open by default:

- MTNPARAMS=STARTUP\_INDEX:#^TABPARAMS=FROM\_HYPERLINK:1

## Set the Default Tab when Opening from a Navigator Section Link

1. In Clinical Administration, go to Navigators > Navigator Configurations (VCN) and open the navigator configuration record that you've configured as a link to the Manage Orders activity. The Apply to Section Type (I VCN 100) item should be set to Activity Link.
2. Go to the Activity Link Settings screen.
3. In the Run parameters (I VCN 34752) field, enter the following value, where # is the tab number you want to open by default:
  - MTNPARAMS=STARTUP\_INDEX:#^TABPARAMS=FROM\_HYPERLINK:1

## Use a Links Tab to Show Information from Outside Hyperspace

To give clinicians quick links to orders-related information that's stored outside of Hyperspace (such as protocol guidelines), you can add a Links tab to the Manage Orders activity.

<b>Administration of Analgesia</b>
<a href="#">Administration of Analgesia CIP</a>
<b>Fever On Arrival</b>
<a href="#">Fever On Arrival CIP</a>
<b>Obtaining Clean Catch Urinalysis and Urine Cultures</b>
<a href="#">Obtaining Clean Catch Urinalysis and Urine Cultures CIP</a>
<b>Obtaining Rapid Strep Screens In Assessment</b>
<a href="#">Obtaining Rapid Strep Screens In Assessment CIP</a>

To add the Links tab, you must:

- Create a copy or copies of print group [51967-URL Link Display](#) and configure them to include the links you want to show in the Manage Orders activity.
- Create a report and add your copy or copies of print group 51967 to it.
- Create a navigator section to hold your report, as well as a topic and template to hold your section.
- Add your navigator template as a new tab within your copy of the Manage Orders activity.

## Create Your Print Groups and Report

1. In Clinical Administration, select Reports, Print Groups > Dup Print Groups and create your copy or copies of print group 51967.
2. Return to the Reports, Print Groups menu, select Print Groups (LPG), and configure your copy of print group 51967 as follows:
  - a. In the URL Link parameter, enter the URL you want to link to.
  - b. In the URL Hyperlink Text parameter, enter the text to use for the hyperlink that appears in your print group.
  - c. In the URL Header Text parameter, enter the text to use as a header for your hyperlink.
3. Repeat step 2 for each copy you created.

4. Return to the Reports, Print Groups menu, select Dup Reports, and create a copy of report 75050-ED Encounter Summary (Patient Summary) . Name your report something like Manage Orders Link Tab Report.
5. In your report, on the first Report Definition screen, enter a display name in the Default display name (I LRP 250) field.
6. Go to the fifth Report Definition screen, delete all of the print groups entered in Column 1 (I LRP 500), and then add your copy or copies of print group 51967 to Column 1.
7. In the Use Stylesheet (I LRP 80) field, enter Widget Palette 10 pt.
8. Press Shift+F7 to exit your report.

## Create Your Navigator Section, Topic, and Template

1. Return to the main Clinical Administration menu.
2. Follow the path Navigators > Dup Configuration and create a copy of navigator configuration 49000-ER Triage Summary Report. Open your copy.
3. Go to the Print Group Report Settings screen and, in the Report (I VCN 34200) field, enter the report you created above.
4. In the Collapsed by Default? (I VCN 34230) field, enter No.
5. Go back to the Navigators menu, select Dup Navigator, and create a copy of navigator section 49002-SEC\_ER\_TRIAGE\_REPORT. Open your copy.
6. Go to the Section Setup screen and, in the Caption (I LVN 1000) field, enter a caption such as Links.
7. Go to the Default Configuration screen, and enter the configuration you created above in the Default Configuration (I LVN 1070) field.
8. Return to the Navigators menu.
9. Add your navigator section to a new topic and your new topic to a new template. If you need more specific instructions for creating and using topics and templates, refer to the [Collect Sections into Topics](#) and [Collect Topics into a Template](#) tasks.

## Add Your Templates as a Links Tab in the Manage Orders Activity

1. In Clinical Administration, go to Roles, Menus, Activities, etc. > Activities (E2N) and open your copy of the Manage Orders activity.
2. Go to the Control Initialization Parameters screen and press F6 in the Value (I E2N 2020) field corresponding to the Navigators parameter to edit the parameter.
3. Go to a new line and press Tab.
4. In the Caption field, enter Links, which is the text that appears on the tab in the Manage Orders activity.
5. In the Template field, enter the name of the navigator template you created above.
6. In the Table of Contents Side field, enter 0.

## Let Clinicians Open Order Review from Manage Orders

The Order History tab shows order review information within Manage Orders. This feature saves clinicians a click any time they want to access Order Review and consult historical order information.

To open Order Review when a clinician clicks the Order History tab:

1. In Clinical Administration, go to Roles, Menus, Activities, etc. > Activities (E2N) and open your copy of activity record 35000-ORD\_MANAGE\_ORDERS.

2. Go to the Control Initialization Parameters screen and press F6 in the Navigator field to edit the Navigator parameter.
3. Go to the field corresponding to the Order History tab and press tab to edit that segment.
4. Set the Template field to UCW\_ORDER REVIEW and the Is Tab Activity? field to 1-Yes.

## Customize the Active Tab

The Active tab in the Manage Orders activity shows a list of active orders. You can configure how these orders appear and which actions providers can take on the orders.

### Configure a Default View for the Manage Orders Activity

To save time for clinicians who prefer the Manage Orders activity to always sort orders the same way when they open it, you can set a default view in the activity's Navigator Configuration record.

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN).
2. Open the navigator configuration record for your Manage Orders activity and go to the Manage Orders View Settings screen.
3. In the Available Views section, enter an available view:
  - a. In the Caption (I VCN 34300) field, enter the title you want to appear for this view in the "Sort By:" menu.
  - b. In the Presentation View (I VCN 34305) field, enter a view.
4. Add more views as desired. The first view listed is the default view for a clinician opening that Manage Orders activity, and the sequence of views listed in this section corresponds to the sequence that appears in the "Sort By:" menu.
5. In the Always open with first view? (I VCN 34307) field, enter Yes to always load with the default view whenever the Manage Orders activity is opened. By default, this field is set to No and the activity loads with the view the user selected the last time the activity was closed.

### Show Reference Links for Procedure Orders

You can show reference links for procedure orders on the Active tab in the Manage Orders activity. Clinicians can click the links to see internal or external web pages, or to open internal documents with information they need to provide patient care, such as specimen handling instructions or guidelines for managing specific conditions. In the Foundation System, the inpatient physician (IPMD) and inpatient nurse (IPRN) users are configured to show these reference links. For information on how to set up reference links, refer to the [Show Reference Links](#) topic.

To add reference links to the Active tab, you must have the Active Orders Reference Links license, which is included in the standard EpicCare Inpatient license. If you're not sure whether you have this license, contact your Epic representative and mention parent SLG 3550868.

---

**Nursing**

ANTEPARTUM MANAGEMENT      Weekly, First occurrence on Tue 6/23/20 at 1435, Until Specified, Routine, Normal  
Reference Links: [Diabetic Care](#) | [Weekly Checklist](#) | [Multiples Risk Factors](#) | [Post-Partum Care](#) | [External Services](#)

Modify Discontinue

**Procedures**

CBC WITH AUTO DIFF      ONCE, On Mon 6/22/20 at 0950, For 1 occurrence, Routine, Normal

Modify Discontinue

To show reference links on the Active tab in the Manage Orders activity:

1. In Clinical Administration, go to Navigators > Navigator Configurations (VCN) and open the navigator configuration for the Manage Orders activity you want to edit.
2. Go to the Manage Orders Settings - 3 screen.
3. In the Show reference links for procedures? (I VCN 34165) field, enter Yes.

## Check Interactions Between Active Orders

Medication interactions warnings first appear when a clinician orders a medication that interacts with another ordered medication or with a medication that has already been entered into the patient's chart. When reviewing a patient's active orders, a clinician might want to be reminded of these interactions to determine whether the current combination of medications is still the best course of action. You can add a Current Interactions button to the Active tab of the Manage Orders activity to allow clinicians to check these interactions.

Medication Warnings for Hospice, Elliot

Warnings Report

Current Warnings (1 unfiltered, 2 filtered)

Show filtered (2)

**Drug-Drug: warfarin and phenytoin**  
High

Pharmacologic effects of Hydantoins may be increased by Anticoagulants.  
Hypoprothrombinemic effects of Anticoagulants may be increased or decreased by Hydantoins.  
Last overridden by: Attending Physician Inpatient, MD on Dec 3, 2019 10:45 AM  
Reason: Benefit outweighs risk

Details      Don't Show This Warning Again

phenytoin (Dilantin) 125 MG/5ML suspension 100 mg  
Hospital medication. Active.

warfarin (Coumadin) tablet 2 mg  
Hospital medication. Active.

**Close**

To show the Current Interactions button on the Active tab of the Manage Orders activity:

1. In Clinical Administration, open the navigator configuration (VCN) record for your Manage Orders activity.
2. Go to the Manage Orders Settings - 3 screen.
3. Set the Display Current Interactions button? (I VCN 17854) field to Yes.

## Keep Orders on the Active Tab Temporarily After They Are Complete or Expired

To help clinicians keep better track of recent orders, you can configure the Manage Orders activity to keep

completed and expired orders in the Active Orders tab for up to 24 hours after they're completed or expire. This option is especially useful for clinicians who routinely perform orders immediately after signing those orders. For example, clinicians in EDs often sign orders with a priority of STAT and either perform the procedure or administer the medication soon after, which removes the orders from the Active Orders tab quickly.



Note that Anesthesia One-Step Med orders never appear on the Active Orders tab in the Manage Orders activity.

To enable this behavior, use one of the following extensions:

1. In Chronicles, access the Extension (LPP) master file and create a copy of extension 88238-ED/MR Orders - Active Logic or extension 34987-IP Orders - Active Logic.
  - For EDs, use extension 88238-ED/MR Orders - Active Logic.
  - For inpatient departments, use extension 34987-IP Orders - Active Logic.
2. Open your copy of the extension and modify the parameters.
  - Both extensions have the following configurable parameters:
    - No ADS. Optional. Determines if medication orders created from ADS cabinet override pulls are considered active. If this parameter is set to null, as released, these medication orders are considered active. If this parameter is set to "1", they are considered inactive.
    - One-Step Med Order Sources. Optional. Determines which one-step medication order sources are filtered out of the Active Orders tab. As released, this parameter is blank, and one-step medication orders appear in the tab. Enter a caret-delimited list of one-step medication order sources from the Order Source (I ORD 295) category list. Orders from the specified order sources do not appear. Note that completed one-step medication orders never appear in the Manage Orders activity, regardless of your configuration, so this parameter determines only whether active one-step medications, such as running infusions, appear.
  - Extension 34987-IP Orders - Active Logic has the following additional parameters:
    - Check Appointment. Optional. Determines whether orders attached to appointments are considered active.
    - Type Window. Optional. Determines how long an order is considered active after its last scheduled instance.
    - Drop off. Optional. Determines how long after a medication's end time, but before a medication's end date, a medication is considered active. Enter the number of minutes after the medication's end time that the medication is considered inactive. Once the medication's end date has passed, the medication is considered inactive and drops off.
    - Expired Delay. Optional. Determines how long a procedure order is considered active after it has expired. Starting in August 2024, if the value in this parameter is more than 36 hours, automatically discontinued expired procedures are considered active for 36 hours.
  - Extension 88238-ED/MR Orders - Active Logic has the following additional parameters:
    - Dropoff Window. Optional. Determines how many hours after completion or expiration an order stays on the Active Orders tab in the Manage Orders activity. If this parameter is set to 24, as released, orders remain on the Active Orders tab for 24 hours after completion or expiration. You can set this parameter for fewer than 24 hours if you want orders to drop off sooner. If this parameter is set to any value greater than 24, orders remain for 24 hours. This

parameter has no effect on completed one-step medications.

- Starting in May 2025, February 2025 with special update E11305824, and November 2024 with special update E11210639, Exclude Auto DC Expired. Optional. Determines whether procedure orders that were automatically discontinued upon expiration should remain on the Active Orders tab in the Manage Orders Activity. If this parameter is set to 0-No or left blank, as released, procedure orders that were automatically discontinued upon expiration are shown according to the Dropoff Window parameter. If this parameter is set to 1-Yes, procedure orders that were automatically discontinued upon expiration are not shown on the Active Orders tab in the Manage Orders Activity. Whether a procedure is automatically discontinued upon expiration is controlled by the Discontinue continuous order on expiration (I LSD/EAP/EDP 24600) field. By default, continuous procedure orders are automatically discontinued when they expire. For more information about how to stop continuous procedures from automatically discontinuing when they expire, refer to the [Exclude Procedures from Being Automatically Discontinued When They Expire](#) topic.

3. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN) and select your Manage Orders activity's navigator configuration (VCN) record.
4. On the Manage Orders View Settings screen, enter your copy of extension 88238 or 34987 to the EXT to identify active orders (I VCN 34690) field. Note: If no extension is specified here, the extension listed in the Active orders extension field in System Definitions (I LSD 34710) is used.

## Show Clinicians Only Certain Types of Orders

It might not be appropriate for some clinicians to see certain types of orders in the Manage Orders activity, so you can limit which types of orders appear there. For example, some technicians or clinicians involved only in diagnostic procedures might not need to see medication orders.

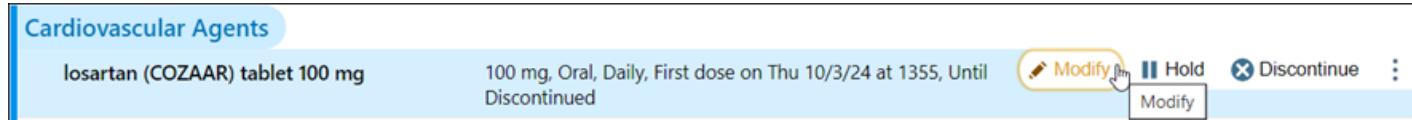
1. In Clinical Administration, follow the path Navigators > Navigator Configurations and open your navigator configuration record for the Manage Orders activity.
2. Go to the Manage Orders Settings - 2 screen.
3. If you do not want clinicians to see Active Orders in the Manage Orders activity, set the Show Active Orders? (I VCN 34106) field to No. By default, active orders appear in the activity, so you can leave this field blank or set it to Yes if you want them to appear.
4. If you want clinicians to see only procedure orders in the activity, hide medication orders by setting the Show Medications? (I VCN 34112) field to No. By default, medication orders appear in the activity, so you can leave this field blank or set it to Yes if you want them to appear. If medication orders are in a linked group with procedure orders, these medication orders still appear even if this field is set to No. Note that this setting doesn't apply if you set the Show Active Orders? (I VCN 34106) field to No. It also doesn't apply to orders discontinued at transfer.

## Customize and Hide Action Buttons

Clinicians click buttons in the Manage Orders activity to take different actions on each order. There are eight action buttons that can appear for an order:

- Modify
- Reorder
- Renew
- Discontinue

- Let Expire
- Review
- Hold
- Unhold
- Cancel Hold (Starting in May 2023)



You might want to create custom names for each of these buttons or configure a button to appear only for certain subsets of clinicians.

## Rename Action Buttons

You might want to create custom names for each of these buttons in the activity to match terms used at your facility, such as renaming the Modify button to "Change."

To rename action buttons:

1. In Clinical Administration, go to Navigators > Navigator Configurations (VCN) and open your navigator configuration record for the Manage Orders activity.
2. Go to the Manage Orders Settings - 1 screen.
3. In the Actionable button options (I VCN 38010) column, enter the name of the button that you want to rename.
4. In the Caption (I VCN 38011) column, enter a custom name for the corresponding button.
5. Repeat steps 3 and 4 until all buttons are renamed.

## Hide Action Buttons

You might decide that some buttons should appear only for certain subsets of clinicians. However, Epic recommends against changing these settings unless it's absolutely necessary, and you cannot hide the Review or Let Expire button.

To hide action buttons:

1. In Clinical Administration, go to Navigators > Navigator Configurations (VCN) and open your navigator configuration record for the Manage Orders activity.
2. Go to the Manage Orders Settings - 1 screen.
3. In the Actionable button options (I VCN 38010) column, enter the name of the button that you want to hide.
4. In the Hide? (I VCN 38012) column, enter Yes to hide the corresponding button.
5. Repeat steps 3 and 4 to configure all the buttons you want to rename or hide.
  - If you enter a custom name for a button but also set the Hide? column to Yes, the button does not appear at all, so the custom name does not appear either.

## Move Hold Orders to the More Actions Menu

If you [allow clinicians to manually hold orders](#), the Hold button appears alongside the other action buttons in the Manage Orders activity by default. Optionally, you can move the Hold button to the More Actions menu. You

might want to do this if clinicians don't often manually hold orders.

To move the hold button to the More Actions menu:

1. In Clinical Administration, go to Navigators > Navigator Configurations (VCN) and open your navigator configuration record for the Manage Orders activity.
2. Go to the Manage Orders Settings - 1 screen.
3. In the Actionable button options (I VCN 38010) column, enter the Hold button.
4. Set Secondary Action? (I VCN 38013) to Yes.

## Hide Modify and Discontinue Buttons After Imaging Orders Reach a Certain Status

Users are prevented from modifying or discontinuing an imaging order after the order has reached a certain radiology status. So that your users can see when an order's imaging procedure has reached a certain radiology status, the Modify and Discontinue buttons don't appear in the Manage Orders activity for imaging orders that are at or past a radiology status you specify. Instead, users see a customizable message.

For example, you can prevent a user from discontinuing an order after it has been scheduled, but allow her to modify the order up until the procedure is started. A custom message telling the user to call the imaging department if modifications need to be made to the order can help direct the user to additional options when these buttons are not available. You can also return to the previous behavior by hiding the Modify and Discontinue buttons only when the order has reached a status of Exam Ended.

To change the radiology status at which the Modify and Discontinue buttons are hidden from users or to customize the message that appears when one or both of the buttons are hidden, complete the following steps:

1. In Clinical Administration, go to Navigators > Navigator Configurations (VCN) and open your navigator configuration record for the Manage Orders activity.
2. Access the Manage Orders Settings - 2 screen.
3. To change the radiology status at which the Modify or Discontinue button is hidden:
  - In the Hide modify button after orders reach status (I VCN 34190) field, enter a value from the Radiology Status category list (I ORD 52000) to hide the Modify button for orders at or past this status. If left blank, this field is set to 10-Begin Exam.
  - In the Hide discontinue button after orders reach status (I VCN 34191) field, enter a value from the Radiology Status category list (I ORD 52000) to hide the Discontinue button for orders at or past this status. If left blank, this field is set to 10-Begin Exam.
4. To create a custom message, enter the message in the Display message for hidden buttons (I VCN 34192) field.

## Allow Clinicians to Order from a Quick List



We expect this task to take an analyst a few weeks to complete. The build complexity is high.

Creating a Quick List tab in the Manage Orders activity allows clinicians to select from a targeted set of orders without having to search. Starting in November 2025, you can also add Order Sets to Quick Lists. You can group orders intuitively and even suggest orders based on clinically relevant information like chief complaint.

The Quick List is especially useful for clinicians who frequently place the same small number of orders, such as ED physicians, but you can configure it for any clinician who uses the Manage Orders activity.

The screenshot shows the 'Orders' application window with the 'Quick List' tab selected. At the top, there are sections for 'Suggested (1)' (Epidural/Intrathecal Analgesia Orders), 'Favorites (2)' (Ophthalmology Injections Right Eye), and 'Radiology Biopsy Post-procedure'. Below these are tabs for 'Quick Orders', 'Imaging' (which is selected), and 'Nursing Communication'. The main area is divided into columns by section: 'Right Upper', 'Head/Neck', 'Left Upper', 'Right Lower', 'Spine/Pelvis', 'Left Lower', and 'Thoraco/Abdominal'. Each section contains a list of imaging orders with checkboxes. The 'Head/Neck' section has one item checked: 'CT head wo IV contrast'. The 'Right Lower' section has several items checked, including 'XR hip right 2+ views' and 'XR femur right 2 views'. The 'Left Upper' section also has several checked items, such as 'XR clavicle left' and 'XR shoulder left 2+ views'. The 'Thoraco/Abdominal' section has one item checked: 'CT abdomen pelvis wo IV contrast'.

To set up a Quick List, you must first create an Order Set of the type Quick List. Then, you can group orders within the Quick List into columns and sections. Optionally, you can restrict columns to appear only under certain conditions.

Finally, you must link the Quick List to the clinician's profile record and add it to the Manage Orders activity.

## Create a Quick List

Quick Lists are built from Quick List-type Order Sets. Quick List build corresponds to Order Set build as follows:

- Quick Lists = Order Sets
- Quick List columns = Order Set sections
- Quick List sections = Order Set SmartGroups

**Orders**

Quick List All Orders

**Order Sets**

Suggested (1) Epidural/Intrathecal Analgesia Orders  
 Favorites (2) Ophthalmology Injections Right Eye Radiology Biopsy Post-procedure

Quick Orders Imaging Nursing Communication

**Right Upper**

- XR clavicle right
- XR shoulder right 2+ views
- XR humerus right
- XR elbow right 3+ views
- XR forearm right 2 views
- XR wrist right 3+ views
- XR hand right 3+ views
- XR finger right minimum 2 views

**Right Lower**

- XR hip right 2+ views
- XR femur right 2 views
- XR tibia fibula right 2 views
- XR knee right 1 or 2 views
- XR ankle right 3+ views
- XR foot right 3+ views
- XR toe right 2+ views

**Head/Neck**

- CT head wo IV contrast
- CT head w and wo IV contrast
- CT maxillofacial wo IV contrast
- MRI brain with and without contrast
- MRI angiogram neck with and without contrast

**Spine/Pelvis**

- XR c
- XR t
- XR l
- XR p
- CT cervical spine wo IV contrast
- CT thoracic spine wo IV contrast
- CT lumbar spine wo IV contrast

**Thoraco/Abdominal**

- XR chest 1 view
- XR chest 2 views
- XR abdomen 3 views
- CT abdomen pelvis wo IV contrast
- CT abdomen pelvis w IV contrast

**Left Upper**

- XR clavicle left
- XR sh
- XR h
- XR el
- XR fo
- XR w
- XR hand left 3+ views
- XR finger left minimum 2 views

**Left Lower**

- XR hip left 2+ views
- XR femur left 2 views
- XR tibia fibula left 2 views
- XR knee left 1 or 2 views
- XR ankle left 3+ views
- XR foot left 3+ views
- XR toe left 2+ views

Quick List Column

Quick List Section

Follow the steps in this topic as many times as you need to create all the Quick Lists you want your clinicians to use.

## Considerations

First, you need to decide which Quick Lists you want to create. You must create at least one general Quick List that includes commonly placed orders. This list always appears for clinicians if you've defined it as a default Quick List in the profile record. If you have multiple, distinct groups of orders that clinicians should always have access to by default, you can also create and assign multiple default Quick Lists.

You can also choose to create additional Quick Lists that the system can suggest under certain conditions. For example, you might want to create Quick Lists for common chief complaints such as abdominal pain.

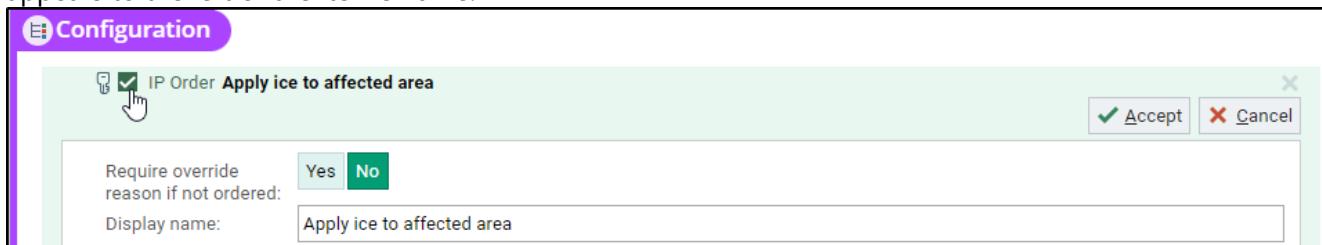
If you create multiple Quick Lists, remember that it's important that the location of each order type remains consistent from list to list. For example, if you add pain medication orders to multiple Quick Lists, you should show those orders in the same location, such as the upper right corner of the list, in each Quick List. That way, clinicians don't have to search through each Quick List to figure out where pain medications are and can instead just look to the upper right corner of each list that includes pain medication orders.

The Foundation System includes a number of Quick Lists that you can use as examples. Most of these Quick Lists are for ED and anesthesia orders, but Quick Lists for respiratory therapy, radiology, and urgent care are also included. To see the full list of Foundation System Quick Lists, open the SmartSet Editor (search: SmartSet) and enter Quick List in the Search field.

If your organization is having trouble determining what orders or Order Sets should be included in a specific Quick List, your Epic representative might be able to provide a starting point by running a search in your system that provides information about commonly placed orders. This search can also be used to determine what orders are most common for certain chief complaints. Contact your Epic representative and mention SLG 2093138 to ask about running the search.

## Create Quick List Sections and Orderable SmartGroups

1. In Hyperspace, go to Epic button > Tools > Decision Support > SmartGroup and create a SmartGroup.
2. The system automatically generates an ID for the SmartGroup. Click the Edit link to choose your own ID.
3. Click General Info from the table of contents. The name you gave the SmartGroup appears automatically in the Record name and Display name fields underneath the toolbar. In the Display name field, enter the title you want clinicians to see as the section's name in the Quick List.
4. Click Add Item in the toolbar to add inpatient medication or procedure orders to your Quick List section using the Item type Inpatient Order. Note that other items, like diagnoses, aren't supported by Quick Lists.
5. Click Accept. The item appears in the Configuration form with fields to customize its details in the SmartGroup.
6. If you want the item you just added to be a default order for your Quick List, select the check box that appears to the left of the item's name.



If you make an order into a default order, clinicians can easily select that order and each other default order for this Quick List by clicking the Default Orders button in the Quick List activity. These orders are not automatically selected when a clinician opens the Quick List; clinicians must click the Default Orders

button to apply your defaults.

7. After adding medications and procedures to your Quick List section, click the Test Release button. You can't test the SmartGroup if you have not test released it.

For more information about configuring SmartGroups, refer to the [Build SmartGroups, SmartSets, and Order Sets](#) topic.

After users review and test your SmartGroup, return to the SmartGroup editor and click the Release button to release it.

An orderable SmartGroup, or order panel, is similar to an Order Set in that it is a group of orders that are frequently placed together. Orderable SmartGroups can be included in Quick Lists and clinicians can search for them in the order entry box the same way they search for individual procedures and medications.

To create an orderable SmartGroup, refer to the [Group Related Orders into SmartGroup Panels](#) topic.

## Create the Quick List

1. In Hyperspace, go to Epic button > Tools > Decision Support > SmartSet and create a new SmartSet.
  - By default, the system automatically generates an ID for your Quick List. If you want to manually assign an ID to your Quick List, click the Edit link and enter an ID.
2. Enter a display name for your Quick List in the Display name (I PRL 140) field. In August 2021 and earlier versions, this field appears on the General Information form. This name appears when users view this Quick List in Hyperspace.
3. Select Quick List in the SmartSet Type section. In August 2021 and earlier versions, enter 4-Quick List in the Type (I PRL 165) field. Note that you can't edit the Type field after you select a type for a SmartSet.
4. Save your setup and click Accept.

## Add Quick List Columns and Sections to the Quick List

1. In your Quick List record, go to the Configuration form.
2. Click Add Section to add a column to your Quick List.
3. Enter a Section display name (I OSQ 62) and click Accept. Note that although you need to enter a display name, this name doesn't appear to users.
4. Click Add SmartGroup to add a Quick List section to your column.
5. Search for the Quick List section SmartGroups you created in the [Create Quick List Sections and Orderable SmartGroups](#) topic.
6. Once you've finished adding sections and SmartGroups to your Quick List, click the Test Release button. You can't test a Quick List if you have not test released it.
7. After users have reviewed and tested your Quick List, return to the SmartSet editor, and click the Release button to release it.

## Show and Hide Quick Lists Under Certain Conditions

You can use OurPractice Advisory criteria and SmartSet Base records to show and hide Quick Lists based on certain criteria. For example, you can show a Quick List for chest pain for patients with a chief complaint of chest pain or hide a pediatric Quick List for patients over 18.

Note that any Quick List you list as the default Quick List (I LPR 8152) in a clinician's profile record is never hidden to that clinician, regardless of the restriction criteria.

To hide columns or groups in a Quick List, refer to the [Restrict Columns and Groups in the Quick List](#) topic below.

For information about how to set up criteria records, refer to the [Build a Basic OurPractice Advisory](#) topic. If you are using criteria to restrict a Quick List, note that you must add the criteria to a SmartSet Base record before you can add it to your Quick List as a restriction. For information about how to set up SmartSet Base records, refer to the [Restrict SmartSets and Order Sets to Certain Contexts](#) topic.

Be sure to release any criteria and SmartSet Base records you create.

## Add Criteria to the Quick List

1. In your Quick List record, go to the Criteria form.
2. In the Suggestions (I PRL 605) field, enter any criteria records you want to use to suggest this Quick List to clinicians. If you've released this Quick List and a patient meets the criteria you enter here, the Quick List automatically appears to clinicians.
3. In the Restrictions (I PRL 610) field, enter a SmartSet Base record you want to use to hide this Quick List from clinicians.

## Restrict Columns and Groups in the Quick List

You can use OurPractice Advisory criteria and SmartSet Base records to hide Quick List columns and groups based on certain criteria. For example, you can hide pediatric-specific columns for patients over age 18. In order to do this you must create a criteria record that contains the conditions in which the Quick List should be hidden and then attach the criteria record to a SmartSet Base record.

Each SmartSet Base record needs a potential triggering action of Inpatient.

If the restriction criteria applies to a group, the group is hidden. If the restriction criteria applies to a column, the column and all groups in it are hidden.

To hide an entire Quick List, refer to the [Show and Hide Quick Lists Under Certain Conditions](#) topic above.

For information about how to set up criteria records, refer to the [Build a Basic OurPractice Advisory](#) topic. For information about how to set up SmartSet Base records, refer to the [Restrict SmartSets and Order Sets to Certain Contexts](#) topic.

Be sure to release any criteria and SmartSet Base records you create.

1. In your Quick List record, go to the Configuration form.
2. Click Edit Section.
3. In the Restrictions (I OSQ 700) field, enter a SmartSet Base record.
4. Click Accept.

## Show the Quick List to Clinicians

To make a Quick List available to clinicians, you need to configure a field in their profile record and add the Quick List tab to the Manage Orders activity.

Note that, if you want a Quick List to appear to all clinicians in a certain department, you can add that Quick List to your department's profile record instead of adding it to your clinicians' profiles.

## Configure the Profile Record

1. In Clinical Administration, follow the path Management Options > Profiles (LPR) and open the appropriate

- profile.
2. Select Medication, Allergy, Imm, etc. > General Options and go to the Manage Orders Configuration screen.
  3. In the Quick Lists (I LPR 8152) field, enter your default Quick Lists. The order in which you enter lists here determines the order in which they appear in Hyperspace.

## Add the Quick List Tab to the Manage Orders Activity

1. In Clinical Administration, follow the path Roles, Menus, Activities, etc. > Activities (E2N) and open your copy of the Manage Orders activity.
2. Go to the Control Initialization Parameters screen and press F6 in the Value (I E2N 2020) field corresponding to the Navigators parameter to edit the parameter.
3. Go to a new line and press Tab.
4. In the Caption field, enter the text that you want to appear on the tab in the Manage Orders activity.
5. In the Template field, enter ORD\_MANAGE\_ORDERS\_TEMPLATE\_QUICK\_LIST.

## Show Default Quick Lists Before Suggested Quick Lists

If there is a suggested Quick List for a patient, then that Quick List opens by default instead of the Quick List specified in the Default Quick Lists (I LPR 8152) field. If there is more than one suggested Quick Lists, then the first Quick List from the Default Quick Lists field opens by default.

In some cases, you might not want suggested Quick Lists to take priority over default Quick Lists. For instance, if you want the first Quick List to open to be your organization's CIWA Quick List for alcohol withdrawal diagnosis and treatment as part of your treatment program..

If you want default Quick Lists to take priority over suggested Quick Lists, follow these steps for each profile you want to update:

1. In Clinical Administration, go to Management Options > Profiles (LPR).
2. Open the profile that you want to update, select Medication, Allergy, Imm, etc. > General Options, and go to the Manage Orders Configuration screen.
3. Enter 2-No in the Use suggested Quick List as default? (I LPR 8154) field.

## Add Order Set Links Directly to the Quick List

 Starting in November 2025

Order Sets can be added as links directly to the Quick List, giving them a consistent location at all times, thereby speeding up providers' efficiency of ordering these Order Sets. You can add Order Sets directly to Quick Lists using a Build Wizard, but this Build Wizard is most beneficial for ED contexts because it uses search results that are only compatible with emergency departments. Contact your Epic representative and mention SLG 10517103 to request they run a search for you. You can still use the Build Wizard for contexts other than the ED, but you need to work with clinicians at your organization to identify the most commonly ordered Order Sets to add to the Quick List.



Build Wizard feature 490051-Order Set Links in Quick List can help create a SmartGroup of Order Set Links and insert it into existing Quick Lists. To get started, open the Build Wizard and search for feature 490051- Order Set Links in Quick List (application: Emergency).

To add Order Sets to the Quick List manually:

1. In Hyperspace, open the SmartGroup Editor and create a SmartGroup.
2. Add the Order Sets you identified using the Item type Order Set Link as described in the [Create a Quick List](#) topic.

## Hide Order Sets in the Quick List Header

If your clinicians don't use Order Sets frequently, or if you'd rather use as much possible screen space on orders that appear directly in the Quick List, you can configure the visibility of the Order Sets section of the Quick List.

Starting in November 2025, you can choose to hide only the suggested Order Sets in the header of the Quick List without removing favorited Order Sets. This option is most useful if you configure Order Sets directly in the Quick List as described in the [Add Order Set Links Directly to the Quick List](#) topic. To hide suggested Order Sets:

1. In Clinical Administration, open the profile for which the section should be hidden.
2. In the Hide suggested Order Sets (I LPR 8156) field, enter Yes.

If you want to hide the entire Order Sets section, including both suggested and favorited Order Sets:

1. In Clinical Administration, open a profile and follow the path Medication, Allergy, Imm, etc. > General Options.
2. Go to the Manage Orders Configuration screen.
3. In the Show Order Sets subsection? (I LPR 8153) field, enter No.

## Leave Feedback on Quick Lists

 Starting in November 2024

 August 2024 by SU E11103071, C11103071, E11103312, and C11103312

 May 2024 by SU E10908712, C10908712, E10908916, and C10908916

 February 2024 by SU E10812458, C10812458, E10812582, and C10812582

To gather insight from your clinicians on your organization's Quick Lists, configure their profiles to let them leave feedback during their daily workflows:

1. In Clinical Administration, go to Management Options > Profiles (LPR) and open the profile you want to update.
2. Follow the path Medication, Allergy, Imm, etc. > General Options, and go to the Manage Orders Configuration screen.
3. In the Enable inline Quick List feedback? (I LPR 8155) field, enter 1-Yes.

**Orders**

Quick List All Orders Cosign Orders

**Order Sets**

Favorites (1) Radiology Biopsy Post-procedure

Quick Orders Imaging Nursing Communication Empiric Anti-Infectives

Leave Feedback

**Common ED Panels**

- Abdominal Pain Panel
- Chest Pain Undiagnosed Panel
- CHF Panel
- Dizziness Panel
- Extremity Weakness
- Gen Med Workup
- Headache Panel
- Hyperglycemia Panel
- Hypoglycemia Panel
- Reproductive System Infections Panel
- Seizure Order Panel
- Shortness of Breath Panel
- Stroke Evaluation Order Panel
- Toxicology Screening Panel

**ECG**

- ECG 12 lead
- US fetal heart (\$\$)

**Medications**

- 0.9% NaCl (125 mL/hr IV)
- 0.9% NaCl (1000 mL IV bolus)
- acetaminophen (Tylenol) tab (650 mg PO)
- aspirin tab (81mg PO)
- HYDROcodone-acetaminophen (Norco) tab (5-325 mg Q6H PRN PO)
- HYDROMorphone (Dilaudid) inj (1mg IV)
- ibuprofen (Motrin) tab (600 mg PO)
- ketamine (Ketalar) injection
- ketorolac (Toradol) inj (30 mg IV)
- morphine inj (4 mg IV)
- ondansetron (Zofran) (4mg IV)

**Nursing**

- Apply ice to affected area
- Cardiac monitoring
- Diet
- Elevate extremity
- Insert peripheral IV
- Pulse Oximetry
- Vital Signs

**Urine**

- POCT pregnancy, urine (\$\$\$\$\$)
- POCT urinalysis dipstick (\$\$)
- Pregnancy, urine (\$\$)
- Urinalysis with reflex microscopic (\$\$\$\$)
- Urine culture (\$\$\$\$\$)

**Chemistry**

- Amylase and Lipase
- B-type natriuretic peptide (\$\$\$\$)
- Basic metabolic panel
- Calcium and Phosphorus
- CK total and CKMB (\$\$\$\$\$)
- Comprehensive metabolic panel
- Digoxin level (\$\$\$\$)
- Ethanol (\$\$\$\$\$)
- Hepatic function panel
- High sensitivity CRP (\$\$\$\$)
- Lactic acid (\$\$)
- Magnesium (\$\$\$\$\$)
- POCT glucose (\$\$)
- POCT troponin (\$\$)
- Quantitative hCG (\$\$)
- Troponin I (\$\$)

**Microbiology**

- Blood Culture X2
- Throat culture (\$\$\$\$\$)
- Urine culture (\$\$\$\$)
- Wound culture (\$\$\$\$)

**Hematology**

- APTT and Protome
- CBC (\$\$\$)
- Sedimentation rate, automated (\$\$)
- Type and screen (\$\$\$\$\$)

When inline feedback is enabled in a clinician's profile, the Leave Feedback button appears in the Quick List.

## Report on Feedback

Starting in May 2024 with special updates E10908712, C10908712, E10908916, and C10908916, feedback for Quick Lists is stored in the Comment Rich Text (I RVC 200) item. For assistance with generating a Clarity query to report on Quick List feedback, contact your Epic representative and mention SLG 9269517.

## Choose Whether the Order Composer Opens When a Clinician Clicks Orders in an Order Set

You can configure whether the Order Composer opens automatically when a clinician clicks an order in an Order Set in the Manage Orders activity. By default, the system uses the settings configured for the Order Entry activity. Refer to the [Open the Order Composer Automatically for Order Set Orders](#) topic for information about setting up this feature for the Order Entry activity.

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN) and open your

- navigator configuration record for the Manage Orders activity.
2. Go to the Sidebar Config - Button Settings screen.
  3. In the Open Order Set order composer automatically (I VCN 34113) field, choose from the following options how you want the Order Composer to behave:
    - Yes
    - No
    - Respect Order Entry Settings

## Choose Whether the Order Composer Opens Automatically for SmartGroup Panels

You can control whether the Order Composer in the Manage Orders activity opens automatically for SmartGroup panels that include orderables. This feature is useful if your organization creates SmartGroup panel descriptions that contain clinically relevant information. For example, you might have notes about how the orders in the panel interact. In this scenario, opening the Order Composer automatically saves clinicians a click because they can see the panel description right away.

You shouldn't configure this behavior for SmartGroup panels with descriptions that clinicians don't care about. For example, you might have panel descriptions purely for administrative purposes.

To configure this behavior for SmartGroup panels, you need to configure a setting in the SmartGroup Editor.

1. In Hyperspace, open the SmartGroup Editor (search: SmartGroup).
2. Create a new contact for a SmartGroup panel that includes orderables. The SmartGroup Editor opens.
3. Go to the Panel Info section.
4. Select the "Always open composer in the sidebar and Visit Taskbar (otherwise default logic will apply)" checkbox and release the panel contact.

## Customize the Sidebar

The Orders sidebar appears at the right side of the screen in the Manage Orders activity, and clinicians can also use it in the Order Review activity and Verify Orders activity. This sidebar allows clinicians to keep track of all of their unsigned ordering decisions, even when they navigate elsewhere in a patient's chart. It also allows clinicians to place additional orders.

The sidebar displays information about new, modified, discontinued, and reviewed orders and provides easy access to the Sign button without requiring any scrolling. In addition, the sidebar is customizable so that your clinicians have access to exactly what they need during their rounding workflows.

The screenshot shows the 'Orders' screen in the Epic EHR system. The main area displays a list of medications under various categories: Analgesics & Anesthetics, Cardiovascular Agents, Central Nervous System Drugs, Endocrine & Metabolic Drugs, Hematological Agents, Respiratory Agents, and Other Orders. Each medication entry includes the drug name, dose, frequency, first and last doses, and options to Modify, Hold, or Discontinue. A sidebar on the right is highlighted with a red box, showing a 'New Orders' section with ibuprofen (MOTRIN) tablet 200 mg and a 'Orders to Discontinue' section with losartan (COZAAR) tablet 100 mg. At the bottom of the sidebar are buttons for 'Remove All', 'Save Work', and 'Sign'.

## Add the Patient Confirmation Banner to the Sidebar

Starting in November 2023

The patient confirmation banner is a tool that can be added to the Orders Sidebar to display a patient's photo, name, and other information. This banner helps clinicians confirm they are signing orders for the correct patient, especially if they have multiple patient workspaces open. If you set up the patient photo order validation messages as described in the [Confirm That Clinicians Place Orders for the Correct Patient](#) topic, and you set up the patient confirmation banner, only the patient confirmation banner appears. This is to prevent duplicative warnings, which reduces alert fatigue and saves you time from turning off the photo order validation messages.

For encounters in an emergency department, the banner will automatically display the patient bed and chief complaint as well as the previously mentioned demographic information.



You can set up the banner using the following steps:

1. In Clinical Administration, go to Management Options > Profiles (LPR) and open a profile record you want to update.
2. Go to the Patient Confirmation Banner screen.
3. Set the Display Patient Confirmation Banner? (I LPR 839) field to Yes.
4. Configure the additional banner settings to control what information appears in the sidebar:
  - If you want to remove the patient age from the banner, set the Hide Age? (I LPR 2700) field to Yes.
  - If you want to change the format of the patient name, set the Patient Name Display Options (I LPR 2701) field to your desired format.

- If you want the banner to appear only when multiple patient charts are open, set the Show banner for multiple workspaces only? (I LPR 2702) field to Yes.

## Rename or Remove Sidebar Buttons

After clinicians have reviewed their ordering decisions and are ready to complete their work in the Orders sidebar, there are five possible actions that they can take:

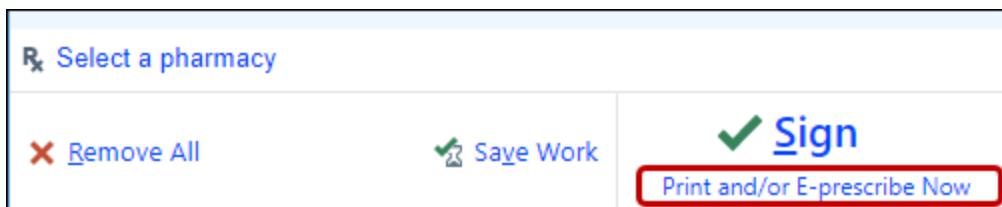
- Sign
- Sign and Hold
- Sign and Verify
- Save Work
- Remove All

You can rename the buttons for each of these actions or give clinicians access to only some of them. Removing certain buttons can help reduce confusion when clinicians have a sign action that happens no matter which button they click. For example, if your organization uses phases of care, orders with certain phases of care are signed and held even if the clinician clicks the Sign button. In these cases, removing the Sign and Hold button can help reduce the confusion of not knowing which button to click.

1. In Clinical Administration, go to Navigators > Navigator Configurations (VCN) and open your navigator configuration record for the Manage Orders activity.
2. Go to the Sidebar Config - Button Settings screen.
3. In the Button Options (I VCN 38030) column, enter the action whose button you want to rename or that you want to hide from clinicians.
4. If you want to rename the button, enter a new name for the button in the corresponding row of the Caption (I VCN 38031) column. Your new name must be less than 50 characters long.
5. If you want to hide the button from clinicians, set the corresponding row in the Hide? (I VCN 38032) column to Yes.
6. Repeat steps 3-5 for each action whose button you want to rename or that you want to hide.

## Add Help Text to the Primary Sidebar Button

The primary button can have help text below the button's primary caption. For example, if you want to indicate that signing an order will print or e-prescribe the orders, you can add that as help text here.



The primary button is determined using this hierarchy:

1. Sign
2. Sign and Verify
3. Sign and Hold
4. Save Work

## 5. Remove All

The primary button is the button highest in the hierarchy without its Hide? (I VCN 38032) column set to Yes. If a user can only pend orders in Order Management Navigators due to Inpatient security point 268-Only pend orders, they will not see this help text.

1. In Clinical Administration, go to Navigators > Navigator Configurations (VCN) and open the sidebar navigator configuration record for the Manage Orders or medication reconciliation activity you want to update.
2. Go to the Sidebar Config - Button Settings screen.
3. In the Help text for primary button (I VCN 38060) field, enter the help text for the primary button you want. If you leave this field blank, no help text appears.

## Rename Order Groups in the Sidebar

Orders in the sidebar are grouped according to ordering decisions. The groups are:

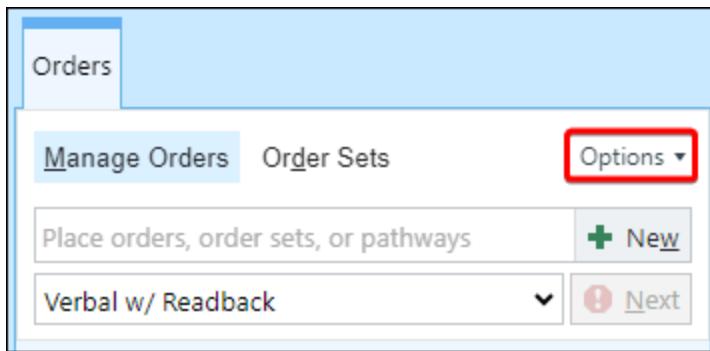
- New Orders
- New Discharge Orders
- Orders to Modify
- Orders to Discontinue
- Reviewed
- Let Expire
- Orders from Order Sets
- Reordered Orders

You can rename these groups by performing the following steps:

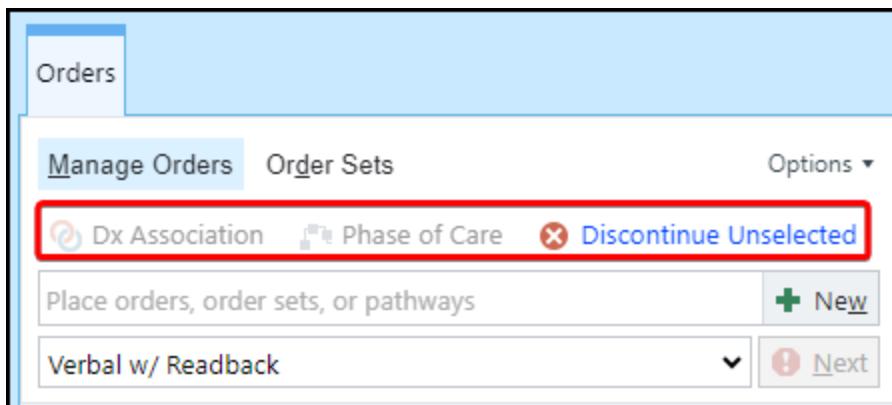
1. In Clinical Administration, go to Navigators > Navigator Configurations (VCN) and open your navigator configuration record for the Manage Orders activity.
2. Go to the Sidebar Config - Group Settings screen.
3. In the Orders Group (I VCN 38040) column, enter the group whose header you want to rename.
4. In the corresponding Header Caption (I VCN 38041) column, enter a new name for the group.
5. Repeat steps 3-4 for all groups that you want to rename.

## Give Clinicians Access to Other Ordering Options

The Options menu, which clinicians can access from the sidebar, allows clinicians to use several other ordering features directly from the Manage Orders activity. For example, clinicians can select the Providers option to access the Providers window and enter a cosigner, or they can select the Phase of Care option to open the Review Phases of Care window and assign each order a phase of care.



You can show up to three of these menu items as buttons that permanently appear above the list of orders in the sidebar.

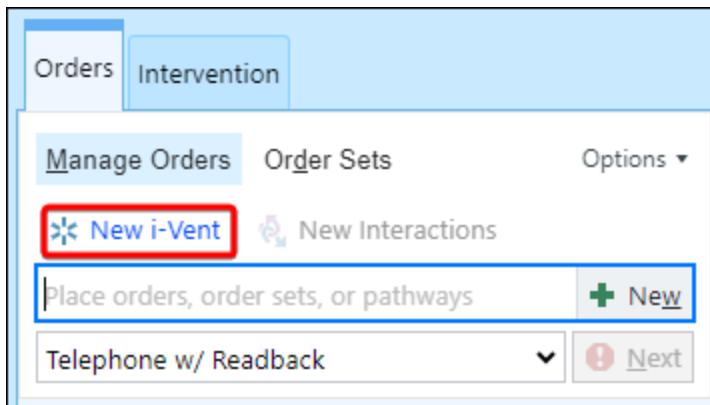


You can choose from a variety of menu items to show to clinicians in the Options menu or as buttons. The Separator option is available only for the Options menu and creates a line to separate menu item groups. It is the only option that can be chosen more than once.

1. In Clinical Administration, go to Navigators > Navigator Configurations (VCN) and open your navigator configuration record for the Manage Orders activity.
2. Go to the Sidebar Config - Options Settings screen.
3. In the Available Dropdown Options (I VCN 38050) column, enter each option that you want clinicians to see in the Options menu of the sidebar. Note that the Create Panel action can't be disabled. If it is not listed as either a dropdown option or a pinned option, it appears in the Options menu with the default caption Create Panel.
4. If you want to rename any menu items, enter custom captions in the corresponding Caption (I VCN 38051) column.
5. In the Available Pinned Options (I VCN 38052) column, enter up to three options that you want to appear permanently as buttons above the orders in the sidebar.
6. If you want to rename any menu buttons, enter custom captions for those buttons in the corresponding Caption (I VCN 38053) column.

## Add Interventions to the Orders Sidebar

In an inpatient setting, pharmacists can quickly open the Interventions sidebar directly from the Orders sidebar when you add a button to the top of the sidebar or add interventions to the sidebar options menu. This change can eliminate clicks for pharmacists who use interventions to track and report on events associated with patients or specific orders. In the Foundation System, pharmacists have the New i-Vent button to open the Interventions sidebar.



To add an interventions option to the menu in the Manage Orders sidebar:

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN) and open your navigator configuration record for the Manage Orders activity.
2. Go to the Sidebar Config - Option Settings screen.
3. In the Available Dropdown Options (I VCN 38050) field, add New i-Vent to the list.
4. In the corresponding Caption (I VCN 38051) field, enter a caption if you want to change the name of the option that appears to clinicians. To create a hotkey for the option, include an ampersand (&) before the letter in the caption that should be used as the hotkey.

To add an interventions button to the Manage Orders sidebar:

1. In Clinical Administration, open the Manage Orders activity's Navigator configuration record by following Navigators > Navigator Configuration (VCN).
2. Go to the Sidebar Config - Option Settings screen.
3. In the Available Pinned Options (I VCN 38052) field, add New i-Vent.
4. In the corresponding Caption (I VCN 38053) field, enter a caption if you want to change the name of the button that appears to clinicians. To create a hotkey for the button, include an ampersand (&) before the letter in the caption that should be used as the hotkey.

## Give Clinicians Easy Access to an Order-Related Financial Report

To give your clinicians quick access to an order-related financial report containing patient benefit plan information and a financial analysis of current orders in the Manage Orders activity, you can add Financial to the Options menu of the Manage Orders sidebar.

To add Financial to the Options menu of the Manage Orders sidebar in the activity's navigator configuration record:

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN) > Sidebar Config - Option Settings screen.
2. In the Available Dropdown Options (I VCN 38050) field, enter Financial.

To determine what financial report appears when a clinician clicks the Financial option in her profile record:

1. In Clinical Administration, follow the path Management Options > Profiles (LPR) > Medication, Allergy, Imm, etc. > Reports, Order & Chart Review > Order-Related Reports screen.
2. In the Ordering charge summary (I LPR 5004) field, enter a report with a report type of Order Summary Charge Report, such as 1041-Encounter Order with Mod/Dx.

## Allow Clinicians to Review Order Changes Since Last Reviewed

New orders and changes to orders can be difficult for clinicians to identify quickly when they're rounding on a patient who has multiple clinicians placing and making changes to active orders. To make it clear what changes have occurred, clinicians can mark orders as reviewed either by clicking Set Time Mark in Manage Orders or by clicking Time Mark Orders in print group 46061-IP Orders History. The print group shows all new orders and changes to orders from any provider on the patient after that set time. Each clinician can set their own time mark on the patient to track their individual review time.

To enable clinicians to set a time mark for orders in Manage Orders:

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN) and open your navigator configuration record for the Manage Orders activity.
2. Go to the Sidebar Config - Option Settings screen.
3. Add option 18-Set Time Mark to one of the following fields:
  - Available Dropdown Options (I VCN 38050) field. With this option, clinicians need to open the dropdown list to set the time mark.
  - Available Pinned Options (I VCN 38052) field. If clinicians use need to set the time mark frequently, add the Set Time Mark option to this field to give them easier access.

Clinicians can also set the time mark in the print group . To enable clinicians to see changes to active orders that have occurred since the last time they set a time mark, add print group [46061-IP Orders History](#) or a copy to an Inpatient Summary Report. Use the [Print Groups and Reports Setup and Support Guide](#) to add the print group to your reports.

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Order History For Spencer, Beth					Comment
Click to view orders older than 72 hours			Time Mark Orders	(Last Time Mark: 06/24/22 3:24 AM)	
<b>06/24/22</b>					
Time	Type	Description	Last Editing User	Discontinuing Provider	
0923	Lab	Discontinue: CBC DAILY, Until Specified, Prio: Routine, Status: Canceled <b>CBC</b> Modified from: CBC ONCE, Standing Count: 1 Occurrences, Prio: Routine	Whiteclay, Emily, MD	Whiteclay, Emily, MD	
0923	Medication	Diphenhydramine-APAP (sleep) 25-500 MG TABS 500 mg Start: 06/24/22, End: 07/05/22, Oral, NIGHTLY, Prio: Routine, Status: Sent	Whiteclay, Emily, MD		
0847	Diet	DIET NPO EFFECTIVE NOW PROCEDURE ONCE, Standing Count: 1 Occurrences, Prio: Routine	Beverly, Jessica, MD		
0847	Imaging	CT SCAN OF ABDOMEN COMBO PROCEDURE ONCE, Standing Count: 1 Occurrences, Prio: STAT	Beverly, Jessica, MD		
0847	Code Status	Full Code ONCE, Standing Count: 1 Occurrences, Prio: Routine	Beverly, Jessica, MD		
Click to view orders older than 72 hours			Time Mark Orders	(Last Time Mark: 06/24/22 3:24 AM)	

Print group 46061, which clinicians can use to time mark orders.



Another setting that might affect when the time mark is updated is the Auto-set time mark when user changes an order? (I LSD 1623) field. By default, this field is set to No, which is our recommendation. When this field is set to Yes, the clinician time mark automatically updates anytime the user takes an action on an order that needs review, is expiring, or is expired, which can be disruptive if clinicians are not expecting the time mark to be reset in these situations. To mark medications as reviewed, clinicians should click Let Expire or Review in the Active Orders tab. Refer to the [Customize and Hide Action Buttons](#) topic for more information.

## Let Clinicians Search for Inpatient or Outpatient Orders

The Orders sidebar not only lets clinicians in the Manage Orders activity review their unsigned ordering decisions, but it also allows them to search for and place additional orders. The search field behaves similarly to the Additional Orders subsections of Orders navigator sections.

Clinicians performing a rounding workflow might place orders to be carried out after the patient is discharged, such as outpatient lab orders or prescriptions that will be filled at an outpatient pharmacy. To enable clinicians to search for and place outpatient orders from within the Manage Orders activity, you must enable mixed-mode searching by enabling Dual Mode Order Entry. You can enable Dual Mode Order Entry in the navigator configuration record for the Manage Orders activity directly or at the department level.

To enable Dual Mode Order Entry in the Manage Orders activity in the navigator configuration record:

1. In Clinical Administration, go to Navigators > Navigator Configurations (VCN) and open your navigator configuration record for the Manage Orders activity.
2. On the Sidebar Config - Button Settings screen, set the Use mixed mode search? (I VCN 34180) field to Yes.

To enable Dual Mode Order Entry in the Manage Orders activity at the Department level:

1. In Clinical Administration, go to Navigators > Navigator Configurations (VCN) and open your navigator configuration record for the Manage Orders activity.
2. On the Sidebar Config - Button Settings screen, make sure the Use mixed mode search? (I VCN 34180) field is blank.
3. In Clinical Administration, go to Facility Structure > Departments/Units and open your department record.
4. On the Order Entry Ordering Mode Options screen, set the Dual Mode in Inpatient Encounters? (I DEP 17545) field to Yes.

The released default ordering mode for new orders entered in the sidebar's search field is inpatient, but you can configure a default ordering mode of outpatient.

Note the following about the Default search mode field:

- Because the Manage Orders activity is designed primarily for rounding workflows, we recommend setting the default search mode to inpatient.
- The system ignores this field unless both of the following are true:
  - The Use mixed mode search? (I VCN 34180) field is set to Yes.
  - The Dual Mode Search Both Modes (I DEP 17550) field on the department record's Order Entry Ordering Mode Options screen is set to No or left blank.

To set the default ordering mode in the sidebar's search field to outpatient:

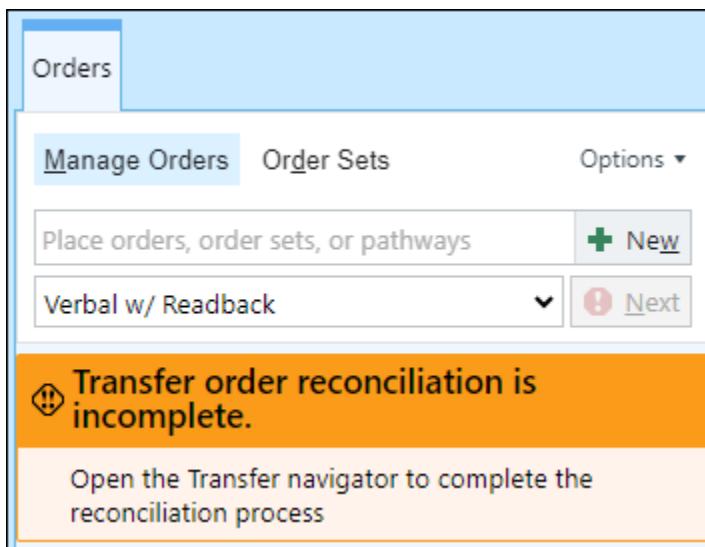
1. In Clinical Administration, go to Navigators > Navigator Configurations (VCN) and open your navigator configuration record for the Manage Orders activity.
2. On the Sidebar Config - Button Settings screen, set the Default search mode (I VCN 34184) field to Outpatient.

## Prevent a Warning Message from Appearing If Transfer Order Reconciliation Is Incomplete

By default, a warning message appears in the sidebar of the Manage Orders activity indicating that transfer order reconciliation is incomplete for a patient in both of the following scenarios:

- A clinician started transfer medication reconciliation but has not completed it.
- There is an active order for a procedure configured to autocomplete when transfer is complete (listed in the Transfer procedures to autocomplete (I LSD 49350) field) and transfer medication reconciliation has not been started or is incomplete.

Transfer order reconciliation might be incomplete for a patient if, for example, a physician places a new order for a patient while a transfer is in progress. This includes scenarios where a physician reviews the orders but the nurse doesn't release them prior to the physician placing additional orders outside of transfer reconciliation. The warning message notifies the physician in the moment that he will need to also reconcile the patient's new order.



If your organization doesn't require transfer medication reconciliation, you can complete the following steps to prevent the warning message from appearing in the Orders sidebar:

1. In Clinical Administration, go to Management Options > Complete Configuration (HDF) and open record 1-Compiled Configuration.
2. On the Customer Specific Install Mnemonics screen, enter MR\_ORD\_DISABLE\_MEDREC\_MOA\_ALERTS in the Mnemonic (I HDF 2105) field.
3. In the corresponding Value (I HDF 2115) field, enter 1-True.

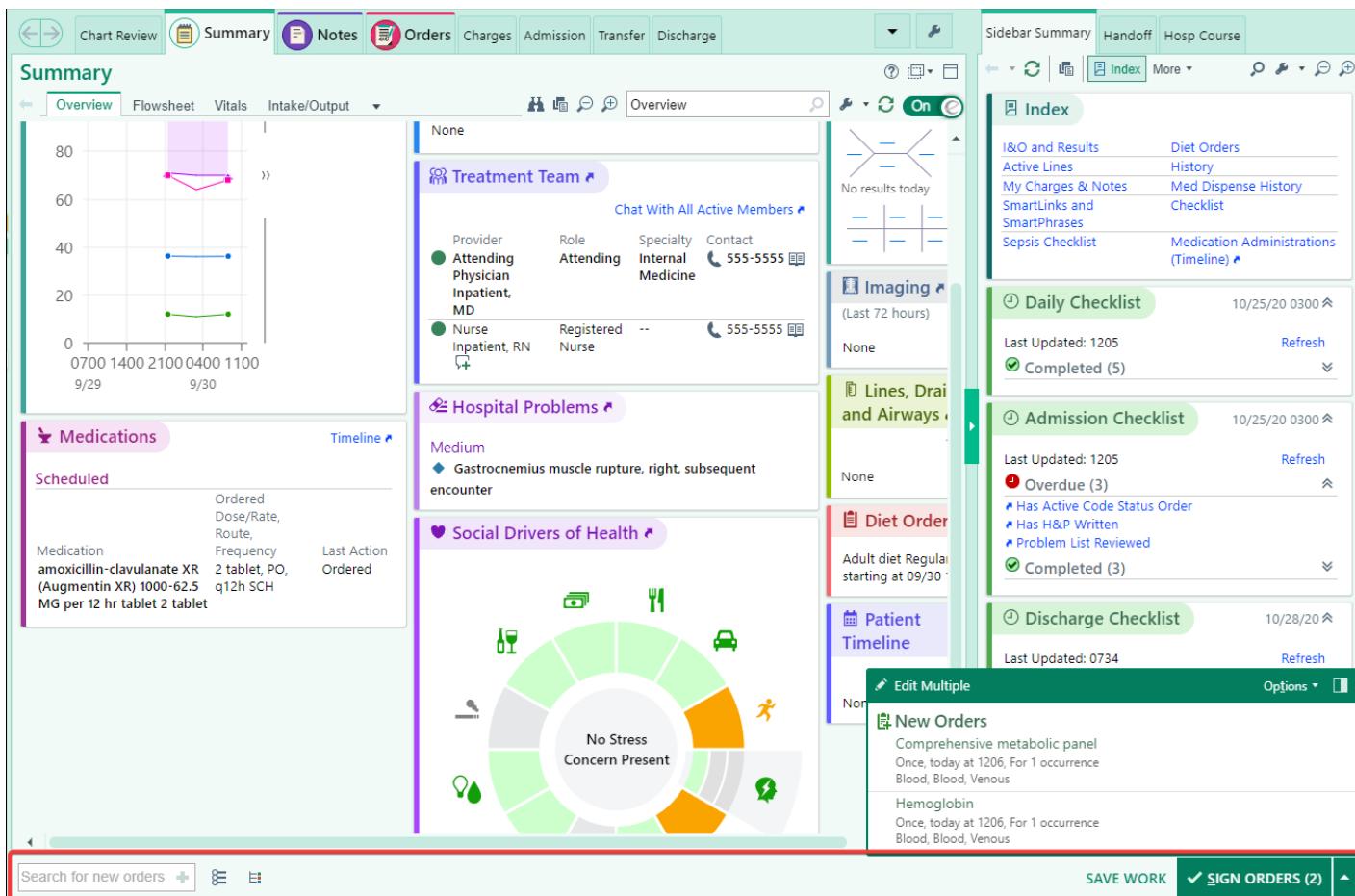
## Specify Whether Clinicians Should Start with the Taskbar or Orders Sidebar by Default

 Starting in November 2024

All clinicians with access to the Manage Orders activity can use the Options menu in the Orders sidebar to choose whether to use the Taskbar or Orders Sidebar. If you don't complete any setup, providers start with the Taskbar by default, and all other roles use the Orders sidebar by default. Epic recommends that clinicians who regularly manage the patients' orders, such as internal medicine physicians, use the Taskbar by default and all other roles, such as nurses, continue using the Orders sidebar by default. Note that the Taskbar cannot be used in anesthesia departments or, in August 2025 and earlier, ED encounters. In those scenarios, all users will use the Orders sidebar. Starting in November 2025, August 2025 with special updates E11502372 and C11502372, May 2025 with special updates E11409825 and C11409825, and February 2025 with special updates E11311384 and C11311384, clinicians in ED encounters can use the Taskbar.

To change what users start with by default, you can update their profile record:

1. In Clinical Administration, select Management Options > Profiles (LPR) and open the appropriate profile record.
2. Select Medication, Allergy, Imm, etc. > General Options and go to the Manage Orders Configuration screen.
3. Set the Enable ordering with Taskbar? (I LPR 36220) field to 1-Yes if these users should start with the Taskbar, or 0-No if these users should start with the Orders sidebar.



Providers no longer need to go to the Orders activity to place additional orders while reviewing the patient's chart.

## Customize Options for Saving Work

Providers can save unsigned work in the Manage Orders activity. Private saved work can be seen and managed only by the saving provider, and public saved work can be seen and managed by other providers.

### Limit the Amount of Time That Unsigned Saved Work Remains in the System

Because saved work can become outdated as the patient's condition changes or orders are placed by other providers, the system deletes unsigned saved work after a specified number of hours. You can specify two different values, but we recommend keeping the default values (72 hours for public saved work and 36 hours for private saved work). One value determines how soon the system deletes work saved publicly for review, and another value determines how soon the system deletes work privately saved for a provider's own use.

1. In EMR System Definitions, go to Medication, Allergy, Imm, etc. > Navigator Specific.
2. Go to the Manage Orders Settings screen.
3. In the Hours to keep public saved work in Manage Orders (I LSD 36800) field, enter the number of hours after which the system should delete work saved for review.
4. In the Hours to keep private saved work in Manage Orders (I LSD 36801) field, enter the number of hours after which the system should delete work saved for private use.

### Let Non-Medical Students Save Their Work for Review

The ability to save orders and let other clinicians see them is most likely to be beneficial for medical student rounding workflows. However, it's possible that you want other subsets of clinicians to be able to save their work and let a physician review and sign them. Because these are not medical students, you don't necessarily want to give them inpatient security point 268.

For example, you might want case managers to be able to save their work for an attending physician to double-check. Alternatively, you might want dietitians to be able to queue up diet orders, which a physician will then review and sign.

You can use a profile setting to let users save their orders publicly for others to review. This setting applies to medication reconciliation navigators as well as Manage Orders. You can use this setting to determine whether users' work is always saved publicly, always saved privately, or whether they can choose between public or private each time they save. You can further target which saving options are available where by overriding the profile setting with a navigator configuration record setting, which lets you configure different save options in Manage Orders and medication reconciliation.

Here are a couple of things to keep in mind about this profile setting and the navigator configuration record setting:

- Clinicians with Inpatient security point 268 always have the option to save orders publicly, regardless of the profile setting or the navigator configuration record setting. You can use the setting to determine whether their work is always saved publicly or whether they can choose between public or private each time they save.
- If a clinician has Inpatient security point 139-Cannot Select Pended Orders Placed By Other Users, they cannot restore another user's saved work.
- When users save orders placed from the visit taskbar in EpicCare Ambulatory, the orders are always saved publicly regardless of this setting.

To let non-medical students save their work for review:

1. In a profile record, follow the path Medication, Allergy, Imm, etc. > General Options.
2. Go to the Pending Orders screen.
3. Set the Save work as public or private (I LPR 36101) field to one of the following options:
  - 1-Prompt User. Each time users save their work, they're prompted to choose between saving publicly or privately.
  - 2-Private. Users can only save their work privately.
  - 3-Public. Users can only save their work publicly.

## Configure Different Save Options in Manage Orders and Medication Reconciliation

If you want to configure different save options in Manage Orders and medication reconciliation navigators, you can use the Save Work behavior (I VCN 38021) item in a navigator configuration record to do so. This might be helpful if your organization has other clinicians queue up discharge orders for a physician to sign. In that situation, you can configure the Discharge Medication Reconciliation Navigator to publicly save work by default while letting clinicians pick between public and private in Manage Orders. To configure this option in a navigator configuration record:

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN) and open the sidebar navigator configuration record for Manage Orders or the medication reconciliation navigator you want to update.

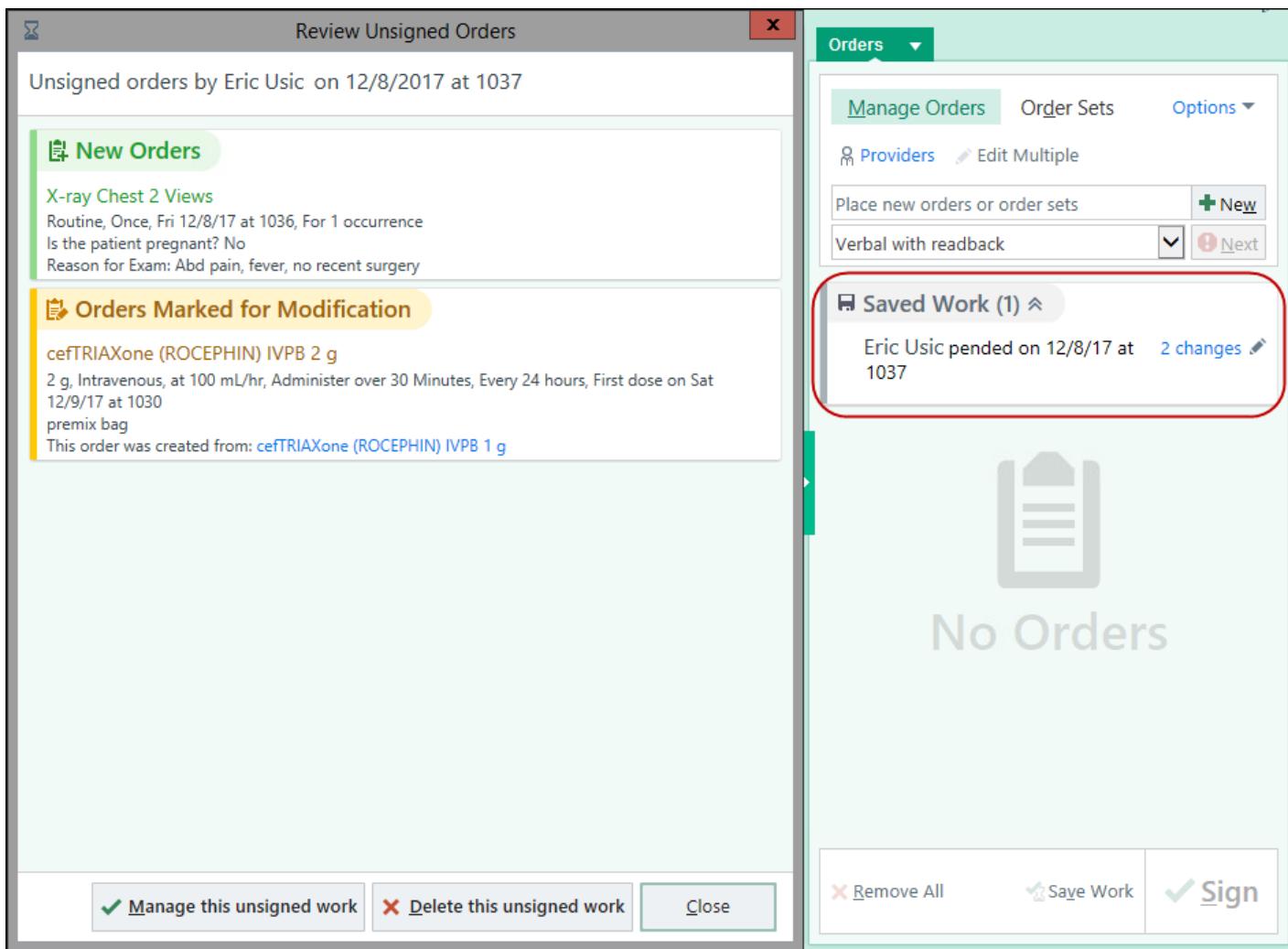
2. Go to the Pending Orders screen.
3. In the Save Work behavior (I VCN 38021) field, enter one of the following options. If you leave this field blank, the Save work as public or private (I LPR 36101) profile setting is used.
  - 1-Prompt User. Each time users save their work, they're prompted to choose between saving publicly or privately.
  - 2-Private. Users can only save their work privately.
  - 3-Public. Users can only save their work publicly.

## Show Medication Interaction Warnings When Clinicians Publicly Save Their Work

By default, medication interaction warnings appear when clinicians sign orders, not when they save orders. Optionally, you can configure a profile setting to show medication interactions when orders are publicly saved in medication reconciliation and Manage Orders in addition to when the orders are signed. For more information, refer to the [Show Medication Interaction Warnings When Clinicians Publicly Save Their Work](#) topic.

## Suppress the Notification About Unsigned Orders When Clinicians Open the Activity

By default, clinicians are notified about privately saved work when they first access the Manage Orders activity. If there are multiple instances of privately saved work, only the first instance appears in the notification message. However, you can configure the system to not show this notification message so that clinicians do not see their own saved work until they retrieve it from the Manage Orders sidebar by clicking the pencil icon.



The Review Unsigned Orders window appears only when the user clicks View from the Orders sidebar.

Perform the following steps to configure whether the Review Unsigned Orders window appears automatically when a clinician has privately saved work and opens the Manage Orders activity:

1. In a profile record, follow the path Medication, Allergy, Imm, etc. > General Options.
2. Go to the Pending Orders screen.
3. Set the Show pend preview automatically (I LPR 36100) field to No to not show the Review Unsigned Orders window automatically. By default, this field is set to Yes.

## Notify Clinicians About Orders Saved in the Manage Orders Activity

Because saved orders are not yet signed and are therefore not yet active in the system, it is important that clinicians follow up on these orders.

### Add a Patient List Column to Remind Clinicians of Unsigned Medical Student Orders

You can configure supervising providers' patient lists so that they include a column to indicate that their students have saved their work for a patient in the Manage Orders activity. Column record 36601-Med Student Unsigned Orders uses extension 88601-Manage Orders - Med Student to display an icon when there are orders ready to be

reviewed. When the supervising clinician double-clicks the icon, the system loads the Manage Orders activity.

Patient Name/Age/Sex	Problem	New Results	Med Student Unsigned Orders
Que, J (28 y.o. M)	Pneumonia		

The released column record redirects the clinician to the released activity record for the Manage Orders activity (35000-ORD\_MANAGE\_ORDERS). If you use your own copy of this activity record, you must duplicate the column record and customize it.

To customize the column record and add it to supervising clinicians' patient lists, perform the following steps:

If you are using the released activity record, you can skip the first six steps:

1. In Hyperspace, go to the Column Editor (search: Column Editor).
2. In the Column name or ID field at the top of the window, enter 36601 and press Enter.
3. Click Copy and enter a new column name and column ID.
4. Click Accept.
5. Open the Advanced tab and enter your copy of activity record 35000 in the Launch activity field (I PAF 34000). In February 2023 and earlier, open the Application Specific Features tab and enter your copy of activity record 35000 in the Launch activity field.
6. Click Accept.
7. Go to Patient Lists, access a patient list to which you want to add your column, and click Properties.
8. Locate your custom column in the Available Columns section, click Add, and then click Accept.

## Add a Patient List Column to Remind Clinicians of Their Own Saved Work

You can also configure providers' patient lists so that they include a column reminding them of their own unsigned orders in the Manage Orders activity. Column record 36600-My Unsigned Orders uses extension 88600-Manage Orders - My Unsigned to display an icon when there are pended orders saved in the Manage Orders activity. When a clinician double-clicks the icon, the system loads the Manage Orders activity.

Patient Name/Age/Sex	Problem	New Results	My Unsigned Orders
Que, J (28 y.o. M)	Pneumonia		

The released column record redirects the clinician to the released activity record for the Manage Orders activity (35000-ORD\_MANAGE\_ORDERS). If you use your own copy of this activity record, you must duplicate the column record and customize it.

To customize the column record and add it to clinicians' patient lists, perform the following steps:

If you are using the released activity record, you can skip the first six steps:

1. In Hyperspace, go to the Column Editor (search: Column Editor).
2. In the Column name or ID field at the top of the window, enter 36600 and press Enter.
3. Click Copy and enter a new column name and column ID.
4. Click Accept.
5. Open the Advanced tab and enter your copy of activity record 35000 in the Launch activity field (I PAF 34000). In February 2023 and earlier, open the Application Specific Features tab and enter your copy of

- activity record 35000 in the Launch activity field.
6. Click Accept.
  7. Go to Patient Lists, access a patient list to which you want to add your column, and click Properties.
  8. Locate your custom column in the Available Columns section, click Add, and then click Accept.

## Show a Banner in a Report when Patients have Pended Orders in the Manage Orders Activity

For clinicians that need to review public pended orders, you can use rule property 42508-Has Public Pended Orders to notify a clinician in a summary report which patients have public pended orders in the Manage Orders activity.

To do so, configure a generic patient-context rule and add it to a copy of a banner print group. When a clinician public pends an order for a patient, the rule is triggered and the print group indicates that public pended orders exist for the patient. For example, you can use the property in a rule to show information about public pended orders in a copy of print group [45792-IP Banner - Generic Rule \(RTF\)](#).

This patient has public pends.

These setup instructions describe how to configure a rule and add it to a copy of print group 45792, as described above. For general information about configuring rules, refer to the [Create or Edit a Rule](#) topic.

1. In Hyperspace, follow the path Epic button > Tools > Rule Editor Tools > Rule Editor.
2. Create a patient-context rule to hold property 42508.
3. In the Search field, enter Has Public Pended Orders.
4. Click the green plus icon to add the property to your rule.
5. In the Public Pend User Type field, enter the specific type of user whose pended orders you want the rule to evaluate from the following options:
  - Any User. The rule evaluates public pended orders entered by any user.
  - Med Students. The rule evaluates public pended orders entered by medical students.
  - Current User. The rule evaluates public pended orders entered by the currently logged-in user.
  - Other User. The rule evaluates public pended orders by any user other than the currently logged-in user.
6. Select an operator, such as equals "=".
7. Click Accept.
8. In Clinical Administration, follow the path Reports, Print Groups > Print Groups (LPG) and create a copy of print group 45792.
9. In your copy, go to the Parameters screen.
10. In the Rule ID field, enter the ID of the rule you created in step 2.
11. Configure the remaining parameters as needed.
12. Open or create a summary report and go to the fourth Report Definition screen.
13. In the Report Print Groups (Rich Text) fields, enter your copy of print group 45792.

## Manage Expiring Orders

Orders expire after reaching their end time or last scheduled occurrence. You can set up the system so clinicians see an expiring notification a specified number of hours before an order ends where they can easily continue that order. These notifications appear in the Manage Orders activity and help clinicians ensure that there is no lapse in care. This topic describes expiring inpatient orders for hospitalized patients. If you're looking for information about expiring future and standing outpatient orders, refer to the [Send Clinicians In Basket Messages About Expiring Orders](#) topic instead.

The screenshot shows a medication order card for warfarin (COUMADIN) tablet 2.5 mg. The order is set to be taken orally daily, with the first dose scheduled for Tuesday, September 27, 2016, at 1700, for a total of 2 doses. A tooltip at the bottom left of the card states "Expires in 1 hour 25 minutes". To the right of the card are four buttons: "Renew", "Modify", "Discontinue", and a small icon with a question mark. A cursor arrow is positioned over the "Discontinue" button. The background of the card has a light purple gradient.

If the clinician doesn't address the order before it expires, it remains in the Manage Orders activity so clinicians are aware that the patient is no longer receiving care for that order. For more information about showing expired and expiring orders, refer to [Determine How Clinicians Group Orders in the Manage Orders Activity](#) topic.

In the Foundation System, orders in the Lab, Microbiology, and Point-of-Care Testing Orderables procedure categories show clinicians an expiring notification 24 hours before expiration.

A few notes about this feature:

- Expiring logic for procedures applies only to parent orders. Child orders shouldn't expire.
- Expiring notifications help prompt clinicians to act on orders that are nearing their end date or last dose. They are a decision support tool to aid clinicians and don't affect the actual orders or administrations.
- If an order requires review (that is, clinicians are notified to review orders a specified number of hours after an order has started) and is also expiring, the order appears with the expiring notification and not the Review button.



Remember that expiring orders are a tool to help clinicians make decisions. Work with your Epic representative to determine when to use expiring orders and when to require order review. In general, don't set end dates or last doses for medications with a high level of patient safety concerns.

Below is a table that can help you determine when a particular inpatient order should appear as expiring or expired. The table distinguishes between medications and procedures based on the ordering activity and frequency. The following five symbols are used to represent important order information in this table:

- M represents the expiring notification setting for medications, such as 3 hours. Refer to the Control When Orders Are Considered Expiring topic for information about how you configure this setting.
- P represents the expiring notification setting for procedures, such as 3 hours. Refer to the Control When Orders Are Considered Expiring topic for information about how you configure this setting.
- G represents the grace period for medications. Refer to the Determine When One-Time Medication Orders Expire topic for information about how you configure this setting.
- Last Scheduled represents that last instance the medication or procedure is scheduled for administration. It's not affected by adjustments to the due time on the MAR.
- End Time represents the Last Scheduled time plus a buffer to help space out an order's occurrences. It's not affected by adjustments to the due time on the MAR.

	Medications				Procedures	
	Manage Orders Activity		Rounding Navigator		All Activities	
Frequency	Expiring	Expired	Expiring	Expired	Expiring	Expired
Continuous	M before End Time	After End Time	M before End Time	After End Time	P before End Time	After End Time
Once (When)	Never	G after Last Scheduled	Never	After End Time	Never	Never
Specified / Non-specified	M before Last Scheduled	After Last Scheduled	M before End Time	After End Time	Setup-dependent*	Setup-dependent*
PRN	M before End Time	After End Time	M before End Time	After End Time	P before Last Scheduled	After Last Scheduled
1 occurrence (specified or non-specified)	Never	G after Last Scheduled	M before End Time	After End Time	Never	Never
Informational	Never	After Last Scheduled	Never	After Last Scheduled	Never	After Last Scheduled

\*Non-specified or specified procedures will not expire unless Time before end for expiring notification (I LSD/EAP/EDP 11925) is set. If I LSD/EAP/EDP 11925 is set, they will expire.

## Control When Orders Are Considered Expiring

To use the expiring orders features described in this section, which help ensure that orders accurately reflect the care a patient's receiving, you must first set an install mnemonic. Then, you configure the system-level default values for when medications and procedures are considered expiring. If you only want expiring notifications for certain orders, you still set a default value in EMR System Definitions, but you use 0 instead of an actual time period.

You can configure expiring order time ranges at a more granular level in a medication, procedure, or procedure category record. When determining whether an order is expiring, the system uses the first setting it finds, following this hierarchy:

- The medication or procedure record. For mixture medications, the settings in the medication record for individual ingredients in the mixture are evaluated.
- The procedure category record if applicable.

- EMR System Definitions.

## Configure the Expiring Orders Install Mnemonic

1. In Clinical Administration, go to Management Options > Complete Configuration (HDF) and open record 1- Compiled Configuration.
2. Go to the Customer Specific Install Mnemonics screen.
3. In the Mnemonics (I HDF 2105) field, enter EXPORD\_SPR06.
4. In the corresponding Value (I HDF 2115) field, enter 1.

## Set Up Expiring Orders at the System Level

You must set default values in EMR System Definitions if you want to use this feature, even if the value is 0 because you don't want all inpatient orders to appear with expiring notifications:

1. In EMR System Definitions, go to Procedure, Scheduling, Task > Order Validation and access the Maximum Allowed Duration & Quantity for Procedures screen.
2. Enter an amount of time in the Time before end for expiring notification (I LSD 11925) field. For example, if procedure orders should appear with the expiring notification 3 hours before they expire, enter 3 in this field. By default, this field is blank and expiring notifications don't appear.
3. Enter a unit of time in the Unit (I LSD 11926) field. In the above example, enter Hours in this field.
4. Go to Medication, Allergy, Imm, etc. > Order Validation and access the Medications Review Notification screen.
5. Enter an amount of time in the Time before end for expiring notification (I LSD 11935) field. By default, this field is blank and expiring notifications don't appear.
6. Enter a unit of time in the Unit (I LSD 11936) field.

## Specify When a Particular Medication Is Expiring

If you want to control when a certain medication is expiring, you do so in the medication record:

1. In Clinical Administration, open a medication record and go to the Inpatient Order Settings screen.
2. Enter an amount of time in the Time before end for expiring notification (I ERX 11925) field. For example, if medication orders should appear with the expiring notification 3 hours before they expire, enter 3 in this field. If this field is left blank, the system falls back to Time before end for expiring notifications (I LSD 11935) field at the Systems Definition Level.
3. Enter a unit of time in the Unit (I ERX 11926) field. In the above example, enter Hours in this field.

## Specify When a Particular Procedure Is Expiring

If you want to control when a certain procedure is expiring, you do so in the procedure record:

1. In Clinical Administration, open a procedure record and go to the Inpatient Order Settings screen.
2. In the Enable notification (I EAP 11927) field, enter Yes to enable expiring and review orders notifications. If this field is left blank, the value entered at the procedure category (I EDP 11927) is used.
3. Enter an amount of time in the Time before end for expiring notification (I EAP 11925) field. For example, if procedure orders should appear with the expiring notification 3 hours before they expire, enter 3 in this field. By default, this field is blank and expiring notifications don't appear.
4. Enter a unit of time in the Unit (I EAP 11926) field. In the above example, enter Hours in this field.

## Specify When a Particular Procedure Category Is Expiring

If you want to control when a group of procedures is expiring, you do so in the procedure category record:

1. In Clinical Administration, open a procedure category record and go to the Inpatient Order Settings screen.
2. In the Enable notification (I EDP 11927) field, enter Yes to enable expiring and review orders notifications. If this field is left blank, notifications are enabled.
3. Enter an amount of time in the Time before end for expiring notification (I EDP 11925) field. For example, if procedure orders should appear with the expiring notification 3 hours before they expire, enter 3 in this field. By default, this field is blank and expiring notifications don't appear.
4. Enter a unit of time in the Unit (I EDP 11926) field. In the above example, enter Hours in this field.

## Give Clinicians Buttons for Frequent Expiring Orders Actions

By default, expiring orders appear with the Let Expire button in the Manage Orders activity. Clinicians click this button when they don't want the patient to receive the order past its expiration. After an order has expired, the Reorder and Discontinue buttons also appear by default.

Additionally, you can set up the following buttons to appear for expiring orders in the Manage Orders activity:

- The Renew button, which extends an order's end time by a specified amount of time. This button isn't available for linked orders.
- The Reorder button, which extends a continuous medication order's end time by a specified amount of time.

### Let Clinicians Renew Expiring Orders in One Click

To ensure that the Renew button is enabled for expiring orders, complete the following steps. The Renew button is enabled in the Foundation System.

1. In EMR System Definitions, go to Medication, Allergy, Imm, etc. > Reorder, Modify, Discontinue and access the Inpatient Allowed Order Modifications screen.
2. Set the Allowed Medication Modifications (I LSD 25000) field to Frequency: End.

You can control how long orders are renewed for at the medication or system level. When a clinician clicks Renew, the system follows this hierarchy:

- For medication orders, the system uses the value set in the Default days to renew medications (I ERX 11922) field in the medication record.
- If the medication-level field is blank or if the order is a procedure, the system uses the value set in the Default days to renew medications (I LSD 11932) field in EMR System Definitions.
- If the system-level field is blank, the system renews the orders for its original duration, which is determined by the Inpatient Standing Count (I ORD 34040) and Inpatient Standing Count Type (I ORD 34041) items in the order record.

### Let Clinicians Renew Medication Orders with Continuous Frequencies

Clinicians can renew expiring medication orders with one click in the Manage Orders activity, which reduces MAR clutter and makes it easier for clinicians to access medications from automated dispensing stations (ADS).

Renewed orders keep the same order ID, which means that clinicians don't have to wait for a pharmacist to verify the new order before it appears in the ADS.

This setting is enabled automatically for medications with Non-Continuous frequencies. You can also enable it for medications with Continuous frequencies at either the medication record level or the EMR System Definitions level, giving you the flexibility to configure renew functionality for just specific continuous medications or for

continuous medications throughout your organization.

To allow clinicians to renew a specific continuous medication:

1. In Clinical Administration, open a medication record.
2. Go to the Inpatient Order Settings screen.
3. Enter Yes in the Use Renew for expiring continuous meds? (I ERX 11939) field. If this field is left blank, the system uses the setting in EMR System Definitions.

To allow clinicians to renew all continuous medications:

1. In Clinical Administration, go to EMR System Definitions > Medication, Allergy, Imm, etc. > Order Validation.
2. Enter Yes in the Use Renew for expiring continuous meds? (I LSD 11939) field on the Medications Review Notification screen.
  - You can configure exceptions to this behavior by setting individual medication records (as described above) to No. For example, you can configure total parenteral nutrition (TPN) medication records so that the Renew button isn't available, while the EMR System Definitions setting allows other Continuous medications to be renewed.
  - If the Use Renew for expiring continuous meds? field in EMR System Definitions is left blank, and no setting is made in the medication record, the Renew button doesn't appear.

## Prevent Clinicians from Renewing Certain Types of Procedure Orders

Clinicians can renew expiring procedure orders with one click in the Manage Orders activity, which saves them time when reordering procedures.

You can prevent clinicians from renewing certain types of procedure orders by exempting those types from having the Renew button available. Exempt certain types of procedure orders to ensure that clinicians aren't able to renew expensive procedures or procedures that should occur only one time. For example, you might not want clinicians to have the option to renew imaging orders because only one procedure is necessary.

1. In EMR System Definitions, follow the path Medication, Allergy, Imm, etc. > Navigator-Specific and go to the Manage Orders Settings screen.
2. In the Procedure types which will not display Renew (I LSD 36850) field, enter a list of procedure order types that you don't want clinicians to renew.

## Determine When One-Time Medication Orders Expire

One-time orders by default appear as expired in the Manage Orders activity one hour after their due time has passed. During this one-hour grace period, neither the Modify nor the Reorder buttons appear next to the orders in the Active Orders tab.

Depending on your needs, you can choose to disable or adjust the length of the one-hour grace period for all medications by modifying EMR System Definitions, or for specific medications by modifying specific medication records.

Without this grace period, one-time orders would appear as expired immediately after their due time. That meant that one-time orders set to start now would expire immediately after the clinician signed them, which could lead a clinician to believe that his orders had not been entered correctly.

Note that this setting applies only to medication orders.

To change the grace period for all one-time medication orders:

1. In EMR System Definitions, follow the path Medication, Allergy, Imm, etc. > Order Scheduling, Task.
2. On the Start and End Date/Time Settings screen, set the Grace period for one-time medications (I LSD 11929) field to the amount of time, in hours, that you want the grace period to last. The default setting for this grace period is one hour. To disable the grace period, set the field to 0 hours.

You might want to set a longer grace period for one-time medications that are not time-sensitive.

To set the grace period for a specific one-time medication:

1. In Clinical Administration, follow the path Meds, Allergies, Imm, etc. > Medications (ERX).
2. Open the medication record and contact you want to edit.
3. On the Inpatient Order Settings screen, set the Grace period for one-time orders (I ERX 11929) field to the amount of time, in hours, that you want the grace period to last.

## Show Expiring Orders in the Patient Lists Activity

Clinicians can quickly focus on patients with active expiring orders if you include column 54510-IP Orders - Expiring in the Patient Lists activity. We recommend including this column for clinicians who manage expiring orders. In the Foundation System, the inpatient nurse (IPRN) has this column. You can make this column available to clinicians on its own or as part of a group of columns. Refer to the [Give Clinicians Access to Columns in Patient Lists](#) topic for more information.

My Patients 1 Patient				
Room/Bed	Patient Name	Age/Sex	Problem	Expiring Orders
Med/Surg/Med/...	Walters, Anne	66 y.o. / F	CAP (community acquired pneumonia)	

## Notify Clinicians About Expiring Orders Using an OurPractice Advisory

You can configure an OurPractice Advisory to appear when orders are expiring, which helps ensure that clinicians address the orders in a timely manner. This configuration consists of the following steps:

- Building a rule with a context of Patient OurPractice Advisory that includes property 42300-Has Expiring Orders as a criterion.
- Building an OurPractice Advisory criteria record and listing your rule on the Other Criteria form.
- Building an OurPractice Advisory base record and linking it to your OurPractice Advisory criteria record.

For more information about building rules, refer to the [Create or Edit a Rule](#) topic. For information on building both pieces of the OurPractice Advisory, follow the steps in the [Build a Basic OurPractice Advisory](#) topic.

## Filter System List Based on Orders Requiring Review and Expiring Orders

You can filter system lists to show only patients who meet one of the following conditions:

- The patient has orders that require review.
- The patient has orders that require review or expiring orders.

Use the following system list filters to take advantage of this feature:

- 44511-Orders Needing Review
  - 54511-Expiring Orders Filter
1. In Patient Lists, create a system list.
  2. Click Edit List and select Properties from the menu.
  3. Go to the Filters tab.
  4. In the Available Filter Items section, choose one of the following filters and click Include Values.
    - Orders Needing Review. The system list shows only patients who have orders needing review.
    - Orders Expiring Or Needing Review. The system list shows patients who have expiring orders and patients who have orders needing review.
  5. Click Accept.

## Filter System List Based on Type of Orders Requiring Review

 Starting in August 2024

 May 2024 by SU E10902316

 February 2024 by SU E10807729

 November 2023 by SU E10711332

You can further refine the orders that require review filter to show only orders that meet one or both of the following conditions:

- Orders that require review based on settings such as Procedures: Days after start date for review (I LSD 11920) or Medications: Days after start date for review (I LSD 11930), which require orders to be reviewed after a set amount of time has passed since the order start.
- Medications that require review of current or upcoming provider holds based on settings such as Provider Hold - Review Threshold (I LSD 98307) and Provider Hold - Review Interval (I LSD 98308).

Use the following extensions to take advantage of this feature:

- 54511-Expiring Orders Filter
- 54512-IP Orders Needing Review Filter
- 54513-IP Orders Needing Review or Expiring Filter

1. In Chronicles, create a copy of the extension you want to use.
2. Open your copy for editing and add a review type to the Included Review Types parameter.
3. In Hyperspace, open the Column Editor and create a copy of a column such as 44511-Orders Needing Review.
4. Add the extension you created in step 1 to the Filter ext (I PAF 400) field.
5. Open the system list you want to update.
6. Click Edit List and select Properties.
7. On the Filters tab, add the column you created in step 3.

## Notify Clinicians About Orders That Need Review

 Starting in May 2024

 February 2024 by SU E10803510

 November 2023 by SU E10708079

 August 2023 by SU E10611245

If you use the Time after start for review notification (I LSD 11930) field to flag medications for review or the Time after start for review notification (I LSD 11920) field to flag procedures for review, you can configure physicians' patient lists so that an icon appears when an encounter has orders that have been flagged for review.

To configure a patient list column to show an icon for patient encounters with orders that require review:

1. In Chronicles for the Extension (LPP) master file, create a copy of extension 34510-IP Orders – Expiring.
2. Open your copy of extension 34510-IP Orders Expiring and go to the Parameters screen.
3. In the ninth parameter, Expiring or Review, select 0-Orders Needing Review.
4. In the eleventh parameter, Included Review Types, select 1-Order Review.
5. In Hyperspace, go to the Column Editor and create a copy of column 44510.
6. In the Image ext (I LPP 120) field, replaced extension 34510 with the copy you created.
7. Go to Patient Lists, access a patient list to which you want to add your column, and click Properties.
8. Locate your custom column in the Available Columns section, click Add, and then click Accept.

## Change How Similar Orders Are Highlighted

To help prevent clinicians from inadvertently placing duplicate orders, the Manage Orders activity highlights orders that are similar to new orders being placed in the sidebar.

To use this feature, you must have the ORD Similar Order Highlighting license, which is included in the standard EpicCare Ambulatory and EpicCare Inpatient licenses. If you're not sure whether you have this license, contact your Epic representative and mention parent SLG 3550868.

To configure this feature, refer to the [Change How Similar Orders Are Highlighted](#) topic.

## Enter a Default Reason for Certain Actions

If clinicians regularly enter the same reason for certain ordering decisions, such as discontinuing a procedure or signing and holding an order, you can save them time by making a default reason for that action. To do so:

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN) and open your navigator configuration record for the Manage Orders activity.
2. Go to the Manage Orders Settings - 2 screen.
3. Set default reasons as follows:
  - Default Pend/Sign&Hold Reason (I VCN 34170) field. Select a reason from the Pend Reason (I ORD 34435) category list.
  - Default Med Discontinue Reason (I VCN 34171) field. Select a reason from the Reason for Discontinuation (I ORD 7074) category list.
  - Default Proc Discontinue Reason (I VCN 34172) field. Select a reason from the Reason for Cancellation (I ORD 280) category list.

# Restrict Phases of Care Available to Clinicians in the Manage Orders Activity

You might want to limit which phases of care clinicians can assign to orders that they place from the Manage Orders activity. For example, you might want certain types of orders to be placed in a separate, more specialized navigator.

You can also configure the activity so that all orders placed in the Manage Orders activity have a specific phase of care by default.

To configure how phases of care behave in the Manage Order activity, perform the following steps:

1. In Clinical Administration, follow the path Navigators > Navigator Configurations (VCN) and open your navigator configuration record for the Manage Orders activity.
2. Go to the Manage Orders Settings - 3 screen.
3. In the Phases of Care allowed on grid (I VCN 34813) field, enter every phase of care that clinicians should have available to them when placing orders from the Manage Orders activity. If you want all phases of care to be available, leave this field blank.
4. In the Default Phase of Care (I VCN 35457) field, enter the default phase of care for orders placed from the Manage Orders activity. If you don't want to assign a default phase of care for these orders, leave this field blank.

## Determine Which Manage Orders Activity Opens When Using a Keyboard Shortcut

When a clinician presses Ctrl+O, the version of the Manage Orders activity configured to appear in the user's activity tabs opens. You can override this behavior and configure a default Manage Orders activity to open when a clinician with that profile presses Ctrl+O.

1. In Clinical Administration, follow the path to Management Options > Profiles (LPR) > Medication, Allergy, Imm, etc. > General Options.
2. Go to the Manage Orders Configuration screen.
3. Enter the name or ID of the Manage Orders activity you want Ctrl+O to open in the Default Manage Orders activity (I LPR 36200) field.

# Manage Orders Support: Common Issues

This section describes some common issues that you might encounter, along with possible solutions for addressing each issue.

## Some inpatient orders aren't expiring.

### Solution

Child procedure orders never expire, and some medication orders and parent procedure orders also don't expire.

Refer to the [Manage Expiring Orders](#) topic for additional information about when a particular inpatient order should appear as expiring or expired. That topic also includes options for notifying clinicians about expiring orders, such as through an OurPractice Advisory or an icon in the Patient Lists activity.

## I can't tell if an order is currently pended or signed and held.

### Solution

If both the Pending Order? (I ORD 500) and the Signed and Held Order? (I ORD 505) items have a value for the order, the order is signed and held.

If only the Pending Order? (I ORD 500) item has a value for the order, the order is pending.

After an order is released, the values in both of these items is cleared. If the order was signed and held, the Pended for (I ORD 34415) item has a value. If the order was pended, the Pended for (I ORD 34415) item is blank.

To report on this information, you can use the Order: Pending Status and Order: Signed and Held? criteria in reports using the Reporting Workbench Find Orders report template.

## I can't find the ORD ID of a public pended order.

### Solution

An event (IEV) record is created in the background for public pended orders in the Manage Orders activity. The event record stores all orders placed or acted on in the event, which includes the pended order and ORD ID with an action of New in Manage Orders.

To find a specific event record for a patient and the corresponding order's ORD ID, use one of the following tools:

- Print group 45144-Orders IEV Visualizer in a Patient Summary report. The print group shows event records for the current patient contact, including what actions were taken, by whom, and when. The print group is included in report 45048-IP Clinical Troubleshooting Report. Refer to the [Troubleshoot Issues in Your System Using a Summary Report](#) topic for more information about using the troubleshooting report.
- The Event (IEV) Search utility in Clinical Administration, which allows you to search for event (IEV) records by patient, order, event, and contact serial number (CSN). To use the utility, access Clinical Administration > Management Options > Utilities; then:
  - Starting in August 2024: Application Utilities > Orders > General Orders > Event (IEV) Search.
  - In May 2024 and earlier: Orders > General Orders > Event (IEV) Search.

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