



NEXT Release Notes 2025.12

Release Overview

This release delivers a set of enhancements across **Service Plans, CRM data handling, and EMAR medication workflows**—all focused on improving clarity, configurability, and accuracy in everyday operations.

From configurable **Service Plan forms and refreshed layouts**, to important **Clinical and CRM improvements**, and advancements in **EMAR medication scheduling**, these updates help teams reduce manual work, maintain regulatory alignment, and confidently manage resident care and documentation.

Highlights

Service Plan Configuration & UI Updates – Tailor printed Service Plans to meet regulatory and community needs by selecting which resident and service details appear, customizing the form title, and benefiting from a more condensed, readable layout for faster review.

CRM Accuracy & Integration Enhancements – Cleaner Referrer data, more reliable webform lead ingestion, stronger ActiveDEMAND defaults, and improved unit history handling to support admissions, marketing, and billing workflows.

EMAR Descriptive Time Enhancements – Support for descriptive passtimes (e.g., Breakfast, Bedtime) across scheduling, administration, reports, and pharmacy integrations—backed by passtime versioning to preserve historical accuracy.

Each enhancement in this release is designed to increase efficiency and confidence across your workflows—supporting high-quality care and operational consistency.

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Service Plan Configuration

Clinical teams can now tailor Service Plan forms, so they reflect exactly what your regulators, residents, and communities expect to see—no more one-size-fits-all layout.

With this enhancement, Clinical Managers and above can control which resident and service details appear on printed Service Plans and adjust the form title, helping you stay compliant while keeping plans clear and relevant for residents and families.

What's New

1. Service Plan form configuration

- New configuration path: **Configuration** → **Forms** → **Service Plan**
- Clinical Managers and above can open the Service Plan configuration and choose which information appears on the printed form.
- The configuration applies system-wide, so all printed Service Plans follow the same template.

2. Editable Service Plan header

- Default printed header: **"Service Plan"**
- Click the pencil icon next to the header to enter a custom title.
- Clicking outside the field saves the new header text.
- The custom title appears on the printed Service Plan only and does **not** change any print menu dropdown names in the app.

3. Resident information controls

These fields **always** print on the Service Plan:

- Service Plan Effective Date
- Resident Unit
- Resident Name (First Name + Middle Initial + Preferred Name + Last Name)
- Primary Physician

Additional resident fields can be turned on or off as needed:

- Personal Directives on File
- Allergies
- Last Assessed Care Level
- Code Status
- Diagnoses
- Diet
- Emergency Contact 1
- Emergency Contact 2
- Evacuation Status



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- Hospital Preference
- Prepared By
- Previous Address
- Weight
- Resident Photo
- Custom Fields
- Any **Community Field Groups** defined in Settings

Defaults:

- All optional fields start **selected**, so current behavior is preserved.
- Deselecting a field removes it from the printed Service Plan; selecting it adds it back.

4. Service information options

Clinical Managers and above can choose which service details appear on the Service Plan:

- **Instructions (Resident service instructions)**
 - Resident-specific instructions are printed with each service.
- **Description (Service Catalog Description)**
 - Notes entered in the Service Type Description field print with each service.
- **Include Service Days of Week**
- **Include Service Times**
- **Include Service Minutes**
 - Minutes of service and estimated monthly hours from the resident's service plan are printed for each service.

5. Service print order options


Users can set how services are ordered on the printed Service Plan:

- **By Category**
 - Services are grouped by **Service Type Category**, then sorted by **Service Type**.
- **By Service Time**
 - Services are sorted first by **Scheduled Time**, then by **Service Type**.



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← Forms

Red Door House Service Plan  Save

Service Information

☒ Instructions ☒ Service Catalog Description ☐ Days of week ☒ Times ☒ Minutes

Print Order


☒ By category ☐ By service time

Additional Information

☒ Personal directive ☒ Code status ☒ Emergency contact 1 ☒ Hospital preference ☒ Weight

☒ Allergies ☒ Diagnosis ☒ Emergency contact 2 ☒ Prepared by ☒ Resident Photo

☒ Last assessed care level ☒ Diet ☒ Evacuation status ☒ Previous address ☒ Custom Fields



How It Works in the Application

- Navigate to **Configuration** → **Forms** → **Service Plan**.
- All optional fields are selected by default to match your current output.
- Adjust selections for resident details and service information as needed.
- The **Save** button becomes active as soon as you change at least one setting.
- If you attempt to leave the page without saving, you'll see an "Unsaved changes" warning with options to **Cancel** (stay and keep your edits) or **Discard** (leave without saving).
- After saving, the **Last Date Modified** on the Forms listing page updates to reflect the latest change, making it easy to track when the Service Plan configuration was last updated.

Why This Matters

- **Supports state-specific regulations:** Configure fields to align with each state's Service Plan requirements.
- **Adapts to community needs:** Turn fields on or off to mirror local practices, priorities, and expectations.
- **Improves clarity for residents and families:** Only the most relevant information appears, making Service Plans easier to read and understand.
- **Ensures consistent documentation:** Once configured, every printed Service Plan follows the same structure across your organization.

Service Plan Form Update

This release also delivers an updated **Service Plan Form** layout, designed to make visual review faster and more efficient. The refreshed layout reduces unnecessary white space, tightens spacing between sections, and presents information in a more condensed, readable format.



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These improvements make it easier for Clinical Providers and teams to:

- Quickly scan resident services and details
- Navigate between service information with fewer scrolls

The new layout mirrors the organization and clarity of the updated printable Service Plan, creating a more consistent experience across viewing and printing.

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Red Door House Service Plan

Donna Jean "Dove" Anderson

Unit: 04 Birthday: 07/24/1933 Sex: F

Red-Door House
123 Sunset Ave
Willmar, NJ 08963
Phone: (612) 351-5711
Fax: (612) 986-3654

Code Status: **Resuscitate**

Advance Directives:

Living will on file, Full code - call 911

Evacuation Status

Evacuate Pet

Care Level

Care Level 1

Diet

No Added Sugar

Previous Address

None

Entertainment Preferences

Favorite Movie: Princess Bride

Prepared By

Sarah Bement

Personal Contacts

Myriah Kern: Daughter, **Emergency**

158 e shore, apt 12, Jamestown, NY, 87456, Becker

Mobile Phone: (701) 896-6532 **Preferred** Home Phone: (701) 842-6396 Work Phone: (701) 425-9636

Medical Information

Weight: 223 lbs

Allergies: Milk (Unknown)

Diagnoses: Abdominal actinomycosis (A42.1), Abnormal serum enzyme levels (R74)

Medical Contacts

Alternate Care Provider: James Dickinson

Sanford

30717 University Rd, Vermillion, SD, 57069, United States

Phone: (605) 670-9753

Services

Effective	Service	Role	Time	Category
05/31/2024	Ambulation: Cueing/Standby	Caregiver	PM, AM, NOC	Ambulation
Minutes: 5 Estimated Monthly Hours: 2 Hours and 32 Minutes				
Unlicensed assistive personnel to support the resident in independent ambulation through cueing and standby assist.				
03/28/2025	Bathing: Assist 1	Caregiver		Bathing
Minutes: 30 Estimated Monthly Hours: 0 Minutes				
Resident requires the assist of 1 with bathing. Provide privacy and proper safety measures.				

Clinical Fixes

Clinical Platform – Fixes Included in This Update

This release focuses on improving reliability when saving and signing Incident Reports, and ensuring key reference and service details are displayed consistently across Clinical workflows.

Incident Reports: Signing and Vital Entry Reliability

Prevent signing failures caused by previously removed vitals

In some scenarios, an Incident could fail to save when a vital record tied to the Incident (for example, Blood Pressure) had already been removed, but the system attempted to remove

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it again during the signing workflow. This could result in the **Confirm and Sign** action appearing to do nothing.

What's improved

- Signing logic now handles cases where a vital was already removed, preventing the save/sign process from getting blocked.
- This is especially relevant in workflows where an Incident is **unlocked and then re-signed**, and the original vital is replaced.

Improved handling of invalid Blood Pressure values on older Incidents

In rare cases (most often seen on older Incidents), Blood Pressure could become stored in an invalid state (e.g., N/A / undefined). Clearing the Blood Pressure field alone did not always trigger an update, which could allow the invalid value to persist and prevent successful re-signing.

What's improved

- Updates to the vital value are now captured more reliably so corrections made in the Incident can be saved and signed as expected.

Services: Description Display Improvements

Care Service description now appears when adding a new Resident Care Service

When adding a new Resident Care Service, the description did not always appear in the “add” modal (even though it appeared while editing).

What's improved

- The description now displays consistently when **adding** a new care service, matching the edit experience.

Service Plan descriptions now display consistently when creating services

In some organizations, service descriptions were inconsistent when:

- opening a Service Plan from a Resident Evaluation (services attached to answers), or
- creating/viewing services from the Service Plan tab.

What's improved

- Service descriptions now display more consistently when **creating and viewing** Resident Service Plan items across workflows.

Customer Impact

- Communities can reliably **sign and lock Incident Reports**, even after unlock/re-sign workflows involving vitals.
- Staff can correct and save vital entries (including Blood Pressure) with fewer workarounds.
- Service descriptions are visible where users expect them during service creation and review.

CRM Fixes

This release focuses on improving data accuracy, reliability of integrations, and consistency across CRM workflows—particularly around Referrers, webform leads, and Resident unit history.



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Referrers: Filters and Contact Classification

Corrected default Referrer filters

Previously, the **Contacts > Referrers** page could appear to show only a single "Not Specified" Referral Source when filtered to *Enabled*, even though other enabled sources existed.

What's improved

- The Enabled filter now correctly returns all enabled Referral Sources by default.
- Referral Sources migrated from legacy systems display consistently without requiring users to clear filters.

Professional Contacts now display correctly

In some cases, Professional Contacts were incorrectly appearing as Referral Sources in the list view.

What's improved

- Referral Sources and their associated Professional Contacts are now displayed in the correct context.
- Viewing a Referral Source record accurately reflects its linked Professional Contacts.

ActiveDEMAND Integration: Default Contact Types

Defaults applied when type is not provided

When posting data into CRM via ActiveDEMAND endpoints, records could fail or behave inconsistently if phone or email types were omitted.

What's improved

- When an **email address** is submitted without a type, it now defaults to **Personal**.
- When a **phone number** is submitted without a type, it now defaults to **Mobile**.
- Applies to lead, prospect, influencer contact, and referral source contact payloads.

This ensures smoother ingestion of data from external marketing and webform sources.

Webform Leads: Reliable Inbound Creation

Webform submissions now populate in CRM NEXT

In some environments, webform submissions successfully reached ActiveDEMAND and triggered notification emails, but did not appear in CRM NEXT.

What's improved

- Webform leads now consistently populate in CRM NEXT.
- Submissions appear in the **New Media Lead** section and on the Contact's timeline as expected.

Residents & Occupancy: Unit History and Transfers

Move Out dates can be edited as expected

After recent updates, users were unable to edit the **Move Out** date for the most recent unit history row in CRM.

What's improved

- The Move Out date field is now editable for the most recent unit history entry, aligning with expected occupancy workflows.

Unit transfer and discharge logic corrected

Certain transfer and discharge scenarios caused unintended updates to unit history data.

What's improved



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- When a resident transfers units and is later discharged:
 - The Move Out date on the **prior unit** is no longer overwritten incorrectly.
 - The **Transfer In** indicator now persists correctly when editing Move Out dates on the new unit.

Improved confidence syncing unit history for billing workflows

These updates reduce the risk of discrepancies between CRM and legacy systems when adjusting unit history dates, helping communities manage billing corrections without data reverting unexpectedly.

Customer Impact

- Cleaner, more reliable Referrer and Professional Contact data.
- More resilient ActiveDEMAND integrations with fewer data preparation requirements.
- Webform leads flow consistently into CRM NEXT.
- Greater control and accuracy when managing Resident unit history, transfers, and discharge-related updates.

EMAR

Descriptive Time Enhancement

This release introduces a major improvement to medication scheduling in EMAR by allowing communities and pharmacies to use **descriptive passtimes**—such as *Breakfast*, *Lunch*, or *Bedtime*—in place of fixed clock times. This enhancement provides more flexibility when documenting medication schedules and more closely reflects how many prescriptions are written and administered in real-world workflows.

By expanding support for passtime-based schedules, Med Managers and Providers can now create, review, and administer medications using time ranges that align with their community's routines and clinical expectations. This update also ensures descriptive passtimes appear consistently throughout EMAR, improving clarity and supporting safer, more intuitive medication administration.

What's New

1. Descriptive Time Codes Accepted From Pharmacies

EMAR now accepts **Descriptive Passtimes** sent through pharmacy integrations in place of specific pass times. If your community uses descriptive passtimes, these will automatically map to the correct passtime in the medication schedule as part of standard pharmacy updates.

To ensure successful mapping, **the Descriptive Passtime sent by the pharmacy must match a corresponding descriptive passtime configured in Eldermark**. When a match is found, EMAR



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applies the passtime automatically during import, helping schedules stay aligned with the community's preferred administration ranges.

2. Descriptive Time Controls for Building Schedules

Med Managers now have expanded control over how medication schedules are created, whether they are added from Manage Orders **or** created directly from Add to MAR/TAR workflows. When the setting **Display descriptive labels for medication administration times** is enabled, you can now choose either a specific time or a descriptive passtime across all scheduling entry points.

Where You Can Use Descriptive Passtimes

Descriptive passtime selection is now available in:

- MAR Pass → Manage Orders
- Medication Profile → Manage Orders
- Receive Orders → Review/Edit Schedule
- Add to MAR/TAR
- Add to MAR/TAR Batch
- MAR Notes

What's New for Add to MAR/TAR Workflows

When defining a medication frequency on Add to MAR/TAR, Add to MAR/TAR Batch, or MAR Notes:

- EMAR generates the appropriate number of schedule rows, as usual
- **Each time field now includes a “Use Descriptive” checkbox**

Frequency	Once Daily	0800
	Use Descriptive	<input type="checkbox"/>

- When unchecked → the user enters a specific time (current behavior)
- When checked → the time field converts into a dropdown populated with the community's passtimes

Frequency	Once Daily	AM
	Use Descriptive	<input checked="" type="checkbox"/>

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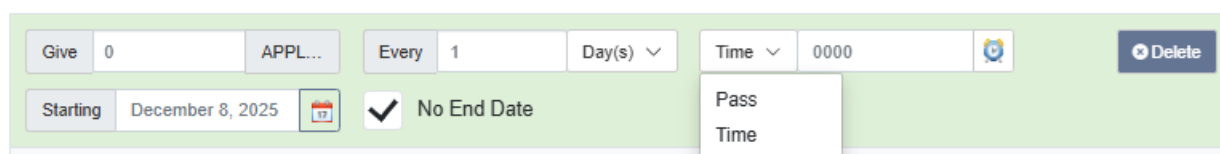
- EMAR automatically selects the passtime whose range contains the previously entered time, when applicable
- Every schedule row must contain either a valid time **or** a passtime before the order can be saved

This gives Med Managers full flexibility to create descriptive schedules even when orders don't arrive with passtimes from the pharmacy.

Standard Descriptive Controls in Manage/Edit Orders

For all standard Manage/Edit Order workflows, schedule rows now include:

- A selector to choose **Time** or **Pass**
- If **Pass** is selected, a dropdown of all configured passtimes appears

A screenshot of the EMAR Manage/Edit Order workflow interface. It shows a schedule row with various controls: a 'Give' field with '0', an 'APPL...' button, an 'Every' field with '1', a 'Day(s)' dropdown, a 'Time' dropdown currently set to '0000', and a 'Delete' button. Below these, there is a 'Starting' date field with 'December 8, 2025', a calendar icon, a checked box for 'No End Date', and a dropdown menu showing 'Pass' and 'Time' options.

- Mixed schedules (some Time, some Pass) are supported
- Orders cannot be saved until all schedule rows contain a valid value

Together, these enhancements ensure descriptive scheduling is available everywhere Med Managers work, whether they are creating a new schedule, updating an existing order, or documenting MAR/TAR items.

3. Consistent Display of Descriptive Passtimes Across EMAR

Once a schedule is marked Descriptive, EMAR displays the passtime label instead of a specific time everywhere caregivers view or administer medications, including:

- MAR Pass
- Resident Card
- Order view ("Due At" labels)
- Administered / Not Administered buttons
- Admin History
- Manage Orders (all modes)
- Preview & Confirm screens

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- Bio Test
- Hotlist → Overdue Medication / Treatment

This ensures all caregivers clearly understand when the medication is intended to be given.

4. Early/Late Determination Updated for Descriptive Schedules

For communities using Passing Window rules, descriptive passtimes now follow a more intuitive workflow:

- EMAR uses the **start and end time of the passtime**, not the Passing Window minutes
- Attempts to administer before the passtime start show as **Early**
- Attempts after the passtime end show as **Late**
- Standard Early/Late warnings still appear
- Users must still provide a reason when administering outside the allowed window
- PRN orders are not affected

This ensures descriptive passtimes accurately guide medication timing while maintaining safety prompts.

5. Descriptive Time Support in Reports

If descriptive passtime display is enabled in Settings, reports will now show the passtime name instead of a numeric time in:

- MAR Group & Individual Reports
- Medication List (Schedule column)

Longer passtime labels are displayed up to the space available without resizing the grid.

Why It Matters

- Reflects real prescription instructions more accurately
- Reduces confusion around time-based administration
- Improves flexibility for communities with passtime-based workflows
- Ensures pharmacy updates align with community passtime settings



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- Provides clearer guidance for Providers during administration

This enhancement modernizes EMAR scheduling, supports regulatory documentation accuracy, and delivers a more intuitive experience for both Med Managers and Providers.

Descriptive Time Set Up and Management

As communities adopt descriptive passtimes for medication administration, EMAR now includes a comprehensive set of tools that help Community Managers configure passtimes safely, ensure clarity when definitions change, and maintain the integrity of historical medication records. These enhancements provide transparency, version control, and clear visual cues—so communities can confidently manage descriptive scheduling without worrying about past administration data being overwritten or misinterpreted.

1. Improved Controls for Creating and Editing Passtimes

Community Managers now have clearer labels, guidance, and warnings when setting up or revising passtimes to ensure accuracy and reduce confusion.

Clearer Labels in Saved View

When viewing passtimes in their saved state (EMAR > Settings > e-MAR > Passtime):

- Passtime fields display in a disabled/read-only format
- Updated labels show:
 - **Created By:** *username + created date*
 - **Effective Date:** *date the configuration takes effect*

Passtime

Passtime Setup

Number of Passtimes: 6

Label	Early	Passtime 1 Start Time	0000	Ends	0759
Label	Morning	Passtime 2 Start Time	0800	Ends	1159
Label	Mid Day	Passtime 3 Start Time	1200	Ends	1359
Label	Afternoon	Passtime 4 Start Time	1400	Ends	1859
Label	Bedtime	Passtime 5 Start Time	1900	Ends	2059
Label	Night	Passtime 6 Start Time	2100	Ends	2359

Created By Myriah Kern - Org Admin on 09/10/2025
Effective Date: 09/10/2025

Create New Passtime Setup

- The **Edit** button is renamed to **Create New Passtime Setup**
- The **Done** button is hidden for clarity

Starting a New Passtime Setup



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When selecting **Create New Passtime Setup**, EMAR displays a confirmation warning before allowing edits:

“Are you sure you want to modify the existing passtime setup?”

uat.eldermark.io says

Are you sure you want to modify the existing passtime setup?

OK

Cancel

Upon confirming:

- All existing passtime values remain visible and editable
- Start Times and Names can be changed; End Times auto-calculate
- Adjusting “Number of Passtimes” dynamically adds/removes rows
- A red label warns:

“Changes will take effect on [tomorrow's date].”

Created By Myriah Kern - Org Admin on 09/10/2025

Changes will take effect on: 12/06/2025

Save Cancel

Canceling edits triggers an additional confirmation to prevent accidental loss of work.

uat.eldermark.io says

Changes have not been saved. Are you sure you want to cancel?

OK

Cancel

Saving a New Passtime Version

When clicking **Save**, EMAR validates:

- First passtime must start at **00:00**
- Final passtime must end at **23:59**
- No gaps are allowed between passtimes
- Every passtime must have a name

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A confirmation pop-up shows:

- Summary of all passtimes (Name, Start, End)
- The effective date
- Reminder that descriptive schedules will reflect new labels as of the effective date

Confirm

Are you sure you want to save these changes?

Orders that use Descriptive Passtimes will show updated labels on the Medication Profile as of the date below

Effective 12/06/2025:

Early (0000-0759)
Morning (0800-1159)
Mid Day (1200-1359)
Afternoon (1400-1859)
Bedtime (1900-2059)
Night (2100-2359)

Cancel OK

2. Passtime Versioning for Historical Accuracy

To ensure schedule history remains accurate, passtimes are now fully versioned.

How Passtime Versioning Works

Every time a Community Manager saves changes:

- The **current passtime version** receives an Effective End Date
- A **new passtime version** is created with an Effective Start Date beginning the next day
- EMAR always shows the **latest created version** in Settings, even if it is not yet effective
- Active passtime definitions for *today* can always be viewed under **MAR > All Passes**
- All dates and times are stored and displayed using the community's time zone

How EMAR Uses Passtime Versions

Any place in EMAR that displays a descriptive passtime will now reference:

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- The passtime version **active on the date the medication was scheduled or given**

This ensures historical reporting remains correct and prevents the appearance that old labels or definitions were overwritten.

Reminder When Passtimes Change

After saving new passtime definitions, EMAR displays a reminder:

“Please verify existing order schedules after making changes to the Passtime definitions.”

This helps Community Managers confirm that updated passtime boundaries or names align with expected medication schedules.

3. Preserving Historical Meaning of Passtime Labels

When passtime definitions change, EMAR ensures Providers and Med Managers understand what the passtime *used to mean* during earlier administration periods.

Labeling Passtime Changes in Schedule Preview

If multiple passtime versions apply to the date range being viewed:

- EMAR evaluates all active passtime versions during that period
- If definitions have changed (name or timing), EMAR displays a clear summary label beneath the preview grid showing:
 - What the passtime *used to be*
 - What it *changed to*
 - The date of the change

amLODIPine-Atorvastatin ⓘ
0 (10-10 MG)

MAR
First Schedule Date: Dec 05, 2025
1800
Afternoon - 0

Last Updated: 05 Dec 2025 at 1530 by Myriah Kern -CM

🕒 View History

Preview Schedule

✎ Edit

← Dec 2025 →	Mon 01	Tue 02	Wed 03	Thu 04	Fri 05	Sat 06	Sun 07	Mon 08	Tue 09	Wed 10	Thu 11	Fri 12	Sat 13	Sun 14	Mon 15	Tue 16	Wed 17	Thu 18	Fri 19	Sat 20	Sun 21	Mon 22	Tue 23	Wed 24	Thu 25	Fri 26	Sat 27	Sun 28	Mon 29	Tue 30	Wed 31
Afternoon 12/05 - 12/05					S0																										
Evening Pass 12/06 - Ongoing						S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0

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- Only meaningful changes (active ≥ 24 hours) are shown, avoiding clutter from minor corrections

Examples:

- “On 8/14/2025, ‘MORNING’ (08:00–12:00) was renamed ‘AM’ and shifted to 07:30–11:30.”
 - For multiple changes, EMAR lists changes chronologically and itemized.
-

4. Accurate Descriptive Passtime Display in Schedule Preview

How Schedules Are Displayed

When viewing a medication that uses descriptive passtimes:

- EMAR retrieves:
 - The stored **give time**
 - The **date range** being viewed
 - All passtime versions effective across that range
- EMAR displays one row **per applicable passtime version**
- If multiple versions apply, multiple rows appear—even though the order schedule itself hasn’t changed

Examples

If only the name changed:

- “MORN” appears until the effective end date
- “MORNING” appears starting the next day

If passtime timing changed:

- A time like 18:00 might move from EVE → AFT based on new boundaries
- Both versions display in the preview to reflect history accurately

Where These Updates Appear

Passtime version-aware previews appear in:

- MAR Pass → Resident → Manage
- Medication Profile → Manage Orders



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- Receive Orders → Review/Validate (when history is available for comparison)
-

5. Updated Display of Historical Passtimes Across EMAR

To prevent the appearance that the history is changed when passtime labels or definitions change, EMAR now shows descriptive labels based on the passtime version active during the schedule date in:

- Dashboard
- Hotlist
- MAR Pass
- Resident Card
- Admin History
- Manage Order views
- Receive Orders
- Bio Test
- Medication Profile

All display components now honor passtime version history, ensuring descriptive labels accurately reflect their historical meaning.

Why This Matters

These enhancements ensure:

- Community Managers can confidently set up and revise passtimes
- Providers always understand *when* a medication should be given, even if passtime names or ranges have changed
- Historical records remain accurate, trustworthy, and easy to interpret
- Medication schedules remain aligned with community workflows even as terminology evolves

EMAR Fixes

This update improves the accuracy and clarity of medication reporting in EMAR, with a focus on PRN documentation sequencing and Physician Order Sheet visibility.



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MAR Report: PRN Results Display in Correct Sequence

PRN follow-up results now align with the administration date/time

Previously, PRN follow-up results could appear **before** the related medication administration on the MAR report. This made it appear as though PRN effectiveness was documented prior to the actual administration.

What's improved

- PRN follow-up results are now displayed in the correct chronological order, aligned with the associated administration date and time.
- MAR reports reflect an accurate clinical timeline, reducing confusion during review and audits.

Why this matters

- Ensures PRN effectiveness documentation clearly follows the administration event.
 - Reduces clinical and compliance risk caused by out-of-sequence reporting.
 - Improves confidence in MAR report accuracy for reviews and external audits.
-

Physician Order Sheet: Show Only Active and Future Holds

Expired holds are no longer displayed

The Physician Order Sheet previously included historical hold periods that had already ended, making it harder to identify which orders were currently or soon-to-be on hold.

What's improved

- The report now displays **only active or future hold periods** at the time the report is run.
- Hold periods that have already ended are excluded.
- If an order does not have an active or future hold, no hold information is shown.

Included scenarios

- Active holds (including indefinite holds)
 - Future holds that have not yet started
 - Orders with multiple hold periods now display only the current active hold
-

Customer Impact

- Clearer, more accurate MAR reports for PRN medications.
- Faster identification of active and upcoming medication holds.
- Reduced need to review outdated information during medication management and audits.

