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Clinical Profile > Problems

New

The following items are available for documentation in **Problems** and appear on the **Charge Capture Report**. *Additional ICD10 codes may display to present the surrounding nodes.

NOTE: Due to a software bug, the following problem is **searchable** on the clinical profile > problems screen but will **need to be manually entered** to chart for the specific ICD-10 code(s):

- Breast screening requested

Problem	ICD-10 Code Choice(s)*
Bone finding	<ul style="list-style-type: none"> M94.8X9 - Other specified disorders of cartilage, unspecified sites M94.9 - Disorder of cartilage, unspecified
Breast screening requested	<ul style="list-style-type: none"> Z12.31 – Encounter for screening mammogram for malignant neoplasm of breast
History of systemic steroid therapy (situation)	<ul style="list-style-type: none"> Z92.241 - Personal history of systemic steroid therapy
Primary malignant neoplasm of prostate	<ul style="list-style-type: none"> C61 – Malignant neoplasm of prostate
Secondary malignant neoplasm of breast	<ul style="list-style-type: none"> C79.81 Secondary malignant neoplasm of breast

Updates

The **Problems > Add Details** area is updated to relocate **Ordinal** from the staging row to the bottom of the additional details service row for the following diagnoses.

- Breast Cancer
- Colon Cancer
- Lung Cancer, Non Small Cell (NSCLC) (Parent)
- Ovarian and Primary Peritoneal Cancer

Labs, Analytes, Panels & Other Services

Additions and Updates

- CMI-1110 HPV HR ISH
- CMI1144-PVT1
- Kappa/Lambda free light chains, w/ratio random urine

- PD-L1 (SP263)

Other Services

- Hospice informational visit
- VTE Prophylaxis

Medications

Additions

- ABBV-400 invest IV
- BA3021 invest IV
- CLN-619 invest IV
- Cromolyn in Eucerin or Aquaphor (Sodium Cromoglicate 1-4% in Petrolatum Topical)
- Cyclophosphamide (AuroMedics) IV - Patient Education unavailable
- DTH Control invest Intradermal
- DTH Skin Test invest Intradermal
- GLSI-100 invest Intradermal
- Mirzotamab Clezutoclax invest IV (ABBV-155 invest)
- SEL24-MEN1703 invest Oral
- Siremadlin invest Oral
- Sodium Cromoglicate 1-4% in Petrolatum Topical
- Sutimlimab-jome IV
- Vonjo (Pacritinib Oral)

Updates

Medication Name	Update
Dr. Lohan's Special Suppository (Nifedipine-Lidocaine-HC 0.2-5-1%)	New Default Sig: 1 suppository rectally 3 times per day
Tixagevimab-Cilgavimab IM Dose Pack 150 mg/1.5 mL-150 mg/1.5 mL (EUA)	Updated SIGs: <ul style="list-style-type: none"> • 1 dose pk intramuscular as directed on dose pack; Inject 150 mg tixagevimab and 150 mg cilgavimab (300 mg total dose) as 2 consecutive 1.5 mL injections • 2 dose pk intramuscular as directed on dose pack; Inject 300 mg tixagevimab and 300 mg cilgavimab (600 mg total dose) as 2 consecutive 3 mL injections Updated Instructions: <ul style="list-style-type: none"> • Do not shake. Monitor patient for at least 1 hour following injections.
Pemetrexed IV	Added Maximum Single Dose: <ul style="list-style-type: none"> • 1250 gm intravenously • 120 mg intravenous

Promethazine Suppository

New Default Sig:

- 12.5 mg rectally every 6 hours prn nausea and vomiting

Provider/User Types

Additions

The following Provider/User Types are now available:

- Advance Practice Provider
- APP Read-Only
- Breast Center
- Coder
- Hospital
- Medical Assistant Certified
- Palliative Care
- Physician Read-Only
- RC Billing
- Tumor Registry

Regimens

This section does not include clinical trial regimens.

The P&T Executive Committee recently reviewed a clinical and economic comparison of biosimilar products and voted to **APPROVE** the switch to ZirabevTM (bevacizumab-bvzr) as the pre-checked drug in all bevacizumab biosimilar regimens. Updates to regimen templates within iKnowMed are available with this content release.

Additions

Regimen Name	Diagnosis
Axicabtagene ciloleucel (Yescarta CAR T-cell) Off-Site Documentation	Lymphoma, Non-Hodgkin (NHL) (Parent)
Brexucabtagene autoleucel (Tecartus CAR T-cell) Off-Site Documentation	Lymphoma, Non-Hodgkin (NHL) (Parent); Leukemia, Acute Lymphocytic (ALL)
Ciltacabtagene autoleucel (Carvykti CAR T-cell) Off-Site Documentation	Multiple Myeloma (MM)
FOLFIRINOX + Bevacizumab BIOSIMILAR Q14D	Colon Cancer; Rectal Cancer
FOLFIRINOX + Bevacizumab Q14D	Colon Cancer; Rectal Cancer
FOLFIRINOX (Modified) + Bevacizumab Q14D	Colon Cancer; Rectal Cancer
Paclitaxel D1,8,15 + Trastuzumab IV + Pertuzumab IV Q21D (Neoadjuvant)	Breast Cancer
Paclitaxel D1,8,15 + Pertuzumab and Trastuzumab SQ (Phesgo) Q21D (Neoadjuvant)	Breast Cancer
Polatuzumab vedotin + Rituximab IV + CHP Q21D (6 cycles) fb Rituximab IV Q21D (2 cycles)	Lymphoma, Non-Hodgkin (NHL) (Parent)
Sutimlimab-jome D1,8 Q21D (Initial)	Anemia, Hemolytic
Sutimlimab-jome Q14D (Maintenance)	Anemia, Hemolytic
Tebentafusp-tebn D1,8,15 Q21D (Initial)	Melanoma, Uvea, Ciliary Body/Choroid; Melanoma, Uvea, Iris
Tebentafusp-tebn D1,8,15,22 Q28D (Maintenance)	Melanoma, Uvea, Ciliary Body/Choroid; Melanoma, Uvea, Iris

Updates

Regimens for the following diagnoses have been updated based on the Collaborative Care Committee voting. Changes include but are not limited to reference update, drug infusion instruction updates, renaming of regimens, premedication template updates and number of cycles.

- All Problems
- Amyloidosis
- Anemia, Hemolytic
- Brain Tumor (Parent)
- Breast Cancer
- Cervical Cancer
- Colon Cancer
- Fallopian Tube Cancer
- Hepatocellular Carcinoma (HCC)
- Lung Cancer, Non-small Cell (NSCLC)
- Malignant Mesothelioma
- Malignant Pleural Mesothelioma
- Multiple Myeloma (MM)
- Ovarian and Primary Peritoneal Cancer
- Rectal Cancer
- Renal Cell Carcinoma (RCC)
- Solid Tumors (Parent) (including HL/NHL)
- Thyroid Cancer (Parent)

- Uterine Cancer (Parent)

Removals

- Fluorouracil (Bolus + CIV) D1-2 + Leucovorin + Oxaliplatin (FOLFOX 6) + Bevacizumab Q14D
- Fluorouracil (Bolus + CIV) D1-2 + Leucovorin + Oxaliplatin (FOLFOX 6) + Bevacizumab BIOSIMILAR Q14D
- Paclitaxel Q7D

Renames

Previous Name	New Name
Ixazomib D1,8,15 +/- Dexamethasone D1-4 Q28D	Ixazomib D1,8,15 +/- Dexamethasone Q28D (Amyloidosis)
Ixazomib D1,8,15 + Dexamethasone D1,2,8,9,15,16 Q28D	Ixazomib D1,8,15 + Dexamethasone Q28D (Multiple Myeloma)
Ixazomib D1,8,15 Q28D	Ixazomib D1,8,15 Q28D (Post-Transplant Maintenance)
Ixazomib D1,8,15 + Cyclophosphamide PO D1,8,15 + Dexamethasone D1,8,15,22 Q28D	Ixazomib D1,8,15 + Cyclophosphamide PO D1,8,15 + Dexamethasone Q28D
Ixazomib D1,8,15 + Cyclophosphamide PO D1,8,15 + Dexamethasone D1,8,15,22 Q28D (Ixazomib Continuation)	Ixazomib D1,8,15 + Cyclophosphamide PO D1,8,15 + Dexamethasone Q28D (Ixazomib Continuation)
Paclitaxel D1,8,15,22 Q28D (Breast)	Paclitaxel (90 mg/m ²) D1,8,15 Q28D (Breast)
Paclitaxel D1,8,15,22 Q28D (Bladder, Head and Neck)	Paclitaxel (80 mg/m ²) D1,8,15,22 Q28D
Romidepsin D1,8,15 Q28D (CTCL)	Romidepsin D1,8,15 Q28D

Research

Additions

To support data migration, applicable clinical trial regimens for US Oncology Research have been migrated and modified for customers migrating from iKnowMedSM EHR to iKnowMed Generation 2.

Updates

	Updated Reference Information			
	Updated Drug Service Order Information			
	Updated Regimen Instructions		Other Changes	
USOR 18013	X	X		
USOR 18229	X			
USOR 18281			X	
USOR 19018	X			
USOR 19034	X	X	X	
USOR 19151				Now available: <ul style="list-style-type: none"> USOR 19151 MRTX849 400 mg BID
USOR 20189	X	X		
USOR 19211	X	X		
USOR 20229	X	X	X	
USOR 20298	X	X		
USOR 20361	X	X		
USOR 20403	X			Now available: <ul style="list-style-type: none"> USOR 20403 Adjuvant Arm 3 Nivolumab Q14D USOR 20403 Adjuvant Arm 3 Nivolumab Q28D
USOR 20418	X	X		
USOR 21216	X	X		
USOR 21242	X	X		

	Updated Reference Information			
	X	Updated Drug Service Order Information		
		Updated Regimen Instructions		Other Changes
USOR 21380				

Billing & HCPCS Codes

Updates

Medication	HCPCS Code
Anifrolumab-fnia IV	J0491 per • 1 mg
Avalglucosidase alfa-ngpt IV	J0219 per • 4 mg
Ciltacabtagene Autoleucel (Carvykti)	J3590 per • 0.5x 10e6 CARpos vbl T cells • 1x 10e6 CARpos vbl T cells • 1x 10e8 CARpos viable T cells
COVID-19 Vaccine, mRNA, cx024414 (Moderna) (PF) IM (Booster) (Unapproved)	91306 per • 0.25 mL
COVID-19 Vac, Tris (Pfizer)(PF) IM (12 yrs & older) (EUA <16 yrs) (Comirnaty Tris Vaccine (PF)) (Comirnaty Tris Vaccine)	91305 per • 0.3 mL
Cyclophosphamide, (AuroMedics)	J9071 per • 5 mg
Faricimab-svoa (Vabysmo)	J3590 per • 120 mg
Filgrastim-ayow (Releuko)	J3590 per • 300 mcg • 480 mcg
Ketorolac Infiltrate	J1885 per • 15 mg
Kit for Prep of Ga 68-Gozetotide (Illuccix)	A4641 per • 1 mCi • 37 MBq

Medication	HCPCS Code
Loncastuximab Tesirine-Ipyl IV	J9359 per <ul style="list-style-type: none">• 0.075 mg
Morphine Infiltrate	J2270 per <ul style="list-style-type: none">• 10 mg
Morphine (PF) Infiltrate	J2270 per <ul style="list-style-type: none">• 10 mg
Pemetrexed (Pemfexy)	J9304 per <ul style="list-style-type: none">• 10 mg
Tisotumab vedotin-tftv (Tivdak)	J9273 per <ul style="list-style-type: none">• 1 mg