



Eligible Hospital and CAH Meaningful Use Table of Contents Core and Menu Set Objectives Stage 1 (2014 Definition) Last Updated: May 2014

Eligible Hospital and CAH Core Objectives	
(1) Use CPOE for medication orders directly entered by any licensed healthcare professional who can enter orders into the medical record per State, local, and professional guidelines.	AVAILABLE
(2) Implement drug-drug and drug-allergy interaction checks.	AVAILABLE
(3) Maintain an up-to-date problem list of current and active diagnoses.	AVAILABLE
(4) Maintain active medication list.	AVAILABLE
(5) Maintain active medication allergy list.	AVAILABLE
(6) Record all of the following demographics: (A) Preferred language (B) Gender (C) Race (D) Ethnicity (E) Date of birth (F) Date and preliminary cause of death in the event of mortality in the eligible hospital or CAH	AVAILABLE
(7) Record and chart changes in the following vital signs: (A) Height (B) Weight (C) Blood pressure (D) Calculate and display body mass index (BMI) (E) Plot and display growth charts for children 0–20 years, including BMI	AVAILABLE
(8) Record smoking for patients 13 years old or older.	AVAILABLE
(9) Implement one clinical decision support rule related to a high priority hospital condition along with the ability to track compliance with that rule.	AVAILABLE
(10) Provide patients the ability to view online, download, and transmit information about a hospital admission.	AVAILABLE
(11) Protect electronic health information created or maintained by the certified EHR technology through the implementation of appropriate technical capabilities.	AVAILABLE

Eligible Hospital and CAH Menu Set Objectives	
(1) Implement drug formulary checks.	AVAILABLE
(2) Record advance directives for patient 65 years old or older.	AVAILABLE
(3) Incorporate clinical lab-test results into EHR as structured data.	AVAILABLE

(4)	Generate lists of patients by specific conditions to use for quality improvement, reduction of disparities, research, or outreach.	AVAILABLE
(5)	Use certified EHR technology to identify patient-specific education resources and provide those resources to the patient if appropriate.	AVAILABLE
(6)	The eligible hospital or CAH who receives a patient from another setting of care or provider of care or believes an encounter is relevant should perform medication reconciliation .	AVAILABLE
(7)	The eligible hospital or CAH that transitions their patient to another setting of care or provider of care or refers their patient to another provider of care should provide summary care record for each transition of care or referral.	AVAILABLE
(8)	Capability to submit electronic data to immunization registries or immunization information systems and actual submission according to applicable law and practice.	AVAILABLE
(9)	Capability to submit electronic data on reportable (as required by State or local law) lab results to public health agencies and actual submission according to applicable law and practice.	AVAILABLE
(10)	Capability to submit electronic syndromic surveillance data to public health agencies and actual submission according to applicable law and practice.	AVAILABLE