



# Northern Light Health Oracle Health (Cerner) Millennium EHR Updates

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## Week of January 8 – January 14, 2026

For more information on how to navigate this Flash Flyer effectively, click [here](#).

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## EHR Updates

### Week of January 8 – January 14, 2026

## Behavioral Health Staff

### All Ambulatory & Inpatient Care Areas

#### Reference Range Updates

**WHAT:** Reference ranges and linearity ranges will be updated to standardize values across the system.

**WHY:** This update aligns reference ranges and linearity ranges across all sites to support consistency in results and interpretation.

**WHEN:** Effective Immediately

**WHERE:** The change will affect the following venue(s):

- Acute/Inpatient (to include ED & Peri-Op)
- Ambulatory/WIC

**At the following NLH Member Organization(s):**

- All NLH Hospitals (excluding NL EMMC)

**WHO:** The change will affect the following staff at the above noted locations:

- Clinical Staff
  - Providers
-

## Clinical Decision Support Updates

### Weekly Newsletter

- Please reference our [CDS Portal](#) for additional information and previous newsletters.
- Any questions should be directed to our [CDS Team](#) for review.

*To open the links in the table, right-click and select "Open link in new tab."*

Release Date	Venues Affected	CDS Tool	Summary
1/13/2026	All	<a href="#">Potential Weight Error Alert</a>	New alert to provide awareness regarding weight discrepancies of 25% or more from previously charted value
1/20/2026	Inpatient	<a href="#">Acute Rehab Admission</a>	Content updates to the Bladder Program order and addition of Bladder Scan order
1/21/2026	Inpatient	<a href="#">JPP Acute Rehab</a>	Content updates to the Bladder Program order and addition of Bladder Scan order

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## Lab

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## EHR Updates

### Week of January 8 – January 14, 2026

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## Dahl Chase Peripheral Blood Evaluation Order Update

**WHAT:** The **Dahl Chase Peripheral Blood Evaluation** order will be removed from the order catalog. Going forward, the **Smear Exam by Pathologist** order should be used.

**WHY:** This change is being implemented at the request of Dahl Chase to support and streamline ordering processes. All NL Laboratory locations will follow their established internal clinical processes for review of path smears.

**WHEN:** Wednesday, January 7, 2026

**WHERE:** The change will affect the following venue(s):

- Ambulatory

At the following NLH Member Organization(s):

- All NLH Hospitals (excluding NL Mayo)

**WHO:** The change will affect the following staff at the above noted locations:

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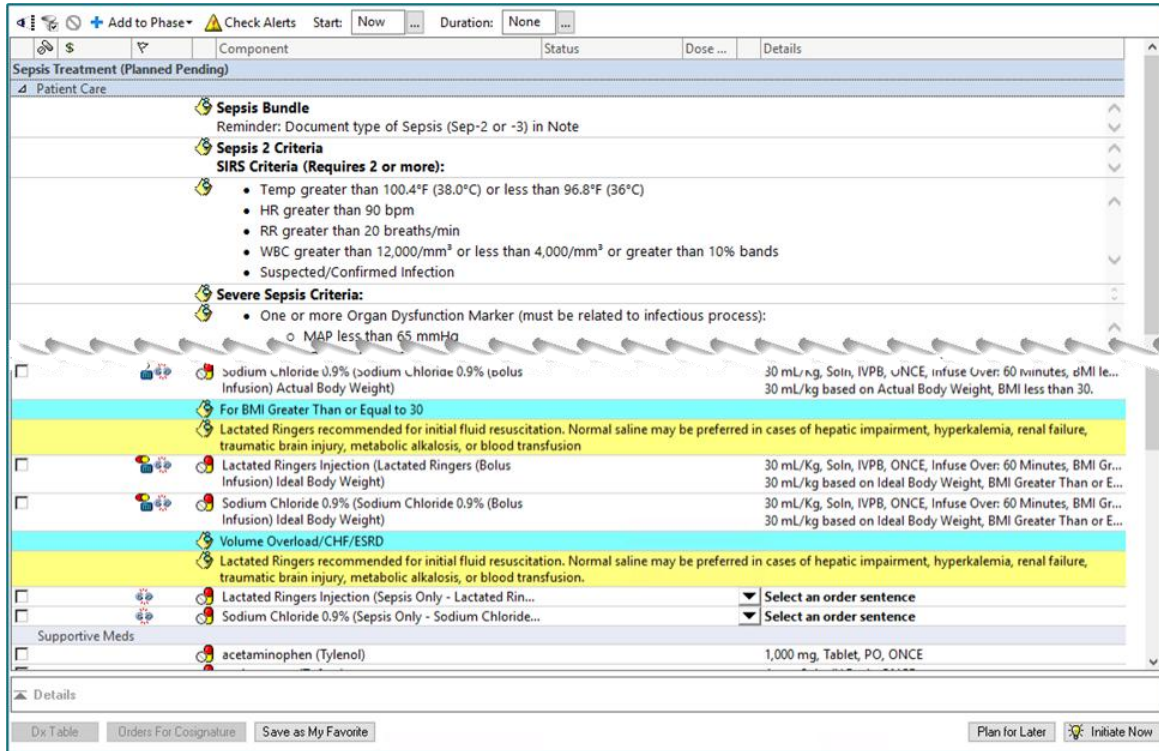
## Leadership

### Emergency

## New Sepsis PowerPlan – Effective January 27, 2026

**WHAT:** The **Sepsis Treatment** PowerPlan will replace the current **Sepsis Advisor** for managing suspected sepsis cases. Alerts will continue to trigger in the same locations; however, instead of opening the Sepsis Advisor, users will now have the option to launch the Sepsis Treatment PowerPlan.

---



**WHY:** This change is being implemented to improve clinical efficiency and patient outcomes. The Sepsis Treatment PowerPlan provides:

- **Streamlined Workflow:** Combines evidence-based interventions into a single, easy-to-use plan.
- **Enhanced Clinical Guidance:** Offers standardized treatment steps aligned with current best practices.
- **Reduced Variability:** Ensures consistent care across all applicable venues and staff.
- **Improved Patient Safety:** Facilitates timely initiation of sepsis management, reducing risk of complications.

**NOTE:** This update supports NLH’s commitment to quality care and operational excellence.

**WHEN:** Tuesday, January 27, 2026

**WHERE:** The change will affect the following venue(s):

- Acute/Inpatient (to include ED & Peri-Op)

**At the following NLH Member Organization(s):**

- All NLH Hospitals (excluding Acadia and Mayo)

# EHR Updates

## Week of January 8 – January 14, 2026

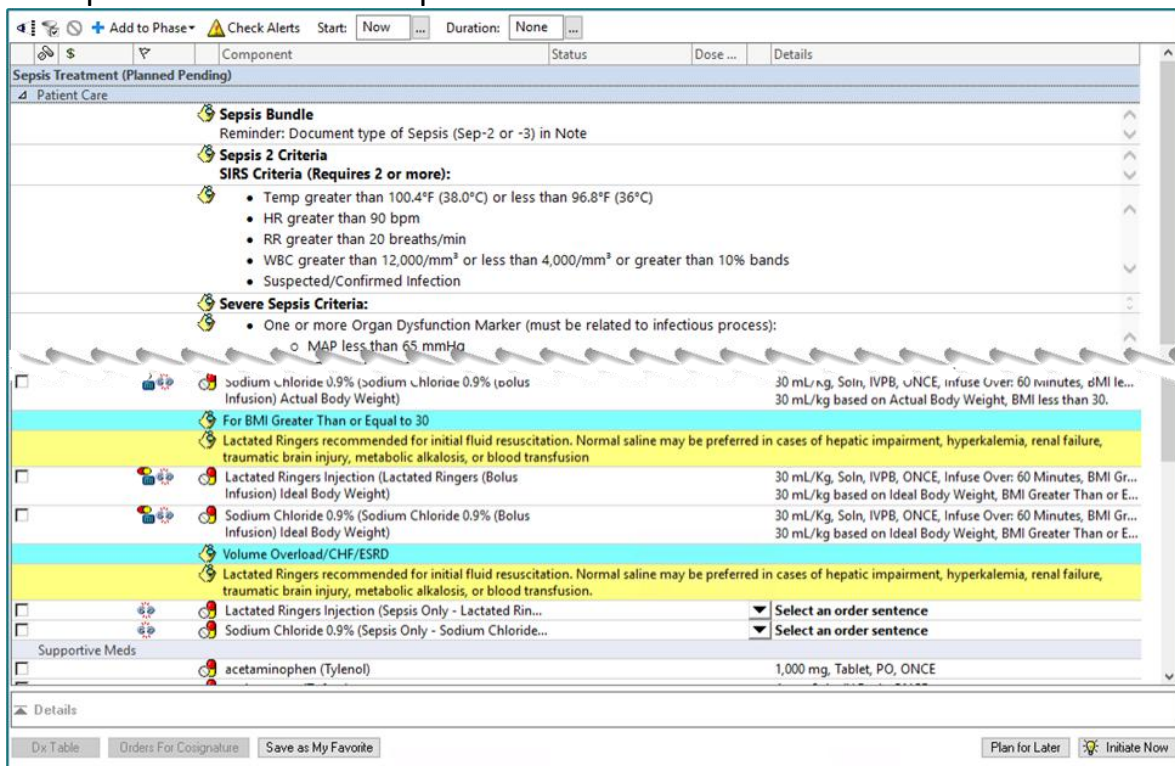
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- Nursing
- Providers

### Inpatient

### New Sepsis PowerPlan – Effective January 27, 2026

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- Acute/Inpatient (to include ED & Peri-Op)

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## Peri-Op

### **New Sepsis PowerPlan – Effective January 27, 2026**

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**At the following NLH Member Organization(s):**

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**WHO:** The change will affect the following staff at the above noted locations:

- Nursing
- Providers

---

## Nursing, CNA, Medical Assistants

### Ambulatory/WIC

### Reference Range Updates – *Excluding NL EMMC*

**WHAT:** Reference ranges and linearity ranges will be updated to standardize values across the system.

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**At the following NLH Member Organization(s):**

- All NLH Hospitals (**excluding NL EMMC**)

**WHO:** The change will affect the following staff at the above noted locations:

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- Providers

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**At the following NLH Member Organization(s):**

- All NLH Hospitals (excluding NL Mayo)

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## Emergency

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**WHO:** The change will affect the following staff at the above noted locations:

- Clinical Staff
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## New Sepsis PowerPlan – Effective January 27, 2026

**WHAT:** The **Sepsis Treatment PowerPlan** will replace the current **Sepsis Advisor** for managing suspected sepsis cases. Alerts will continue to trigger in the same locations; however, instead of opening the Sepsis Advisor, users will now have the option to launch the Sepsis Treatment PowerPlan.

The screenshot displays the Sepsis Treatment PowerPlan interface. At the top, there are controls for 'Add to Phase', 'Check Alerts', 'Start: Now', and 'Duration: None'. Below this is a table with columns for 'Component', 'Status', 'Dose ...', and 'Details'. The main content area is titled 'Sepsis Treatment (Planned Pending)' and includes a 'Patient Care' section. Key components include:

- Sepsis Bundle:** Reminder: Document type of Sepsis (Sep-2 or -3) in Note
- Sepsis 2 Criteria:** SIRS Criteria (Requires 2 or more):
  - Temp greater than 100.4°F (38.0°C) or less than 96.8°F (36°C)
  - HR greater than 90 bpm
  - RR greater than 20 breaths/min
  - WBC greater than 12,000/mm<sup>3</sup> or less than 4,000/mm<sup>3</sup> or greater than 10% bands
  - Suspected/Confirmed Infection
- Severe Sepsis Criteria:**
  - One or more Organ Dysfunction Marker (must be related to infectious process):
    - MAP less than 65 mmHg
- For BMI Greater Than or Equal to 30:** Lactated Ringers recommended for initial fluid resuscitation. Normal saline may be preferred in cases of hepatic impairment, hyperkalemia, renal failure, traumatic brain injury, metabolic alkalosis, or blood transfusion
- Volume Overload/CHF/ESRD:** Lactated Ringers recommended for initial fluid resuscitation. Normal saline may be preferred in cases of hepatic impairment, hyperkalemia, renal failure, traumatic brain injury, metabolic alkalosis, or blood transfusion.
- Supportive Meds:** acetaminophen (Tylenol) 1,000 mg Tablet, PO, ONCE

At the bottom, there are buttons for 'Dx Table', 'Orders For Co-signature', 'Save as My Favorite', 'Plan for Later', and 'Initiate Now'.

**WHY:** This change is being implemented to improve clinical efficiency and patient outcomes. The Sepsis Treatment PowerPlan provides:

- **Streamlined Workflow:** Combines evidence-based interventions into a single, easy-to-use plan.
- **Enhanced Clinical Guidance:** Offers standardized treatment steps aligned with current best practices.
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**WHERE:** The change will affect the following venue(s):

- Acute/Inpatient (to include ED & Peri-Op)

**At the following NLH Member Organization(s):**

- All NLH Hospitals (excluding Acadia and Mayo)

**WHO:** The change will affect the following staff at the above noted locations:

- Nursing
- Providers

## Inpatient

### Reference Range Updates – *Excluding NL EMMC*

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  - WBC greater than 12,000/mm<sup>3</sup> or less than 4,000/mm<sup>3</sup> or greater than 10% bands
  - Suspected/Confirmed infection
- Severe Sepsis Criteria:**
  - One or more Organ Dysfunction Marker (must be related to infectious process):
    - MAP less than 65 mmHg

Below the criteria, there are several treatment orders, some highlighted in yellow:

- Sodium Chloride 0.9% (Sodium Chloride 0.9% (Bolos Infusion) Actual Body Weight):** 30 mL/kg, Soln, IVPB, ONCE, Infuse Over: 60 minutes, dMI le... 30 mL/kg based on Actual Body Weight, BMI less than 30.
- For BMI Greater Than or Equal to 30:** Lactated Ringers recommended for initial fluid resuscitation. Normal saline may be preferred in cases of hepatic impairment, hyperkalemia, renal failure, traumatic brain injury, metabolic alkalosis, or blood transfusion.
- Lactated Ringers Injection (Lactated Ringers (Bolos Infusion) Ideal Body Weight):** 30 mL/Kg, Soln, IVPB, ONCE, Infuse Over: 60 Minutes, BMI Gr... 30 mL/kg based on Ideal Body Weight, BMI Greater Than or E...
- Sodium Chloride 0.9% (Sodium Chloride 0.9% (Bolos Infusion) Ideal Body Weight):** 30 mL/Kg, Soln, IVPB, ONCE, Infuse Over: 60 Minutes, BMI Gr... 30 mL/kg based on Ideal Body Weight, BMI Greater Than or E...
- Volume Overload/CHF/ESRD:** Lactated Ringers recommended for initial fluid resuscitation. Normal saline may be preferred in cases of hepatic impairment, hyperkalemia, renal failure, traumatic brain injury, metabolic alkalosis, or blood transfusion.
- Lactated Ringers Injection (Sepsis Only - Lactated Rin...):** Select an order sentence
- Sodium Chloride 0.9% (Sepsis Only - Sodium Chloride...):** Select an order sentence
- Supportive Meds:** acetaminophen (Tylenol) 1,000 mg, Tablet, PO, ONCE

At the bottom, there are buttons for 'Dx Table', 'Orders For Co-signature', 'Save as My Favorite', 'Plan for Later', and 'Initiate Now'.

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## EHR Updates

### Week of January 8 – January 14, 2026

**WHEN:** Tuesday, January 27, 2026

**WHERE:** The change will affect the following venue(s):

- Acute/Inpatient (to include ED & Peri-Op)

**At the following NLH Member Organization(s):**

- All NLH Hospitals (excluding Acadia and Mayo)

**WHO:** The change will affect the following staff at the above noted locations:

- Nursing
- Providers

## Peri-Op

### Reference Range Updates – Excluding NL EMMC

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**WHEN:** Effective Immediately

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- Acute/Inpatient (to include ED & Peri-Op)
- Ambulatory/WIC

**At the following NLH Member Organization(s):**

- All NLH Hospitals (excluding NL EMMC)

**WHO:** The change will affect the following staff at the above noted locations:

- Clinical Staff
- Providers

### Preprocedure Checklist PowerForm Update – Beta Blocker Questions

**WHAT:** The Preprocedure Checklist PowerForm has been updated. The Beta Blocker questions in the Perioperative Protocols will now be moved to the appropriate section under **Cardiac Surgery Site Prep**.

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**Affected Preprocedure Checklist PowerForms:**

- Preprocedure Checklist
- ASC Preprocedure Checklist
- ED/IP Preprocedure Checklist

**WHY:** These Beta Blocker questions are specific to cardiac surgeries and do not apply to other procedures. This update will streamline documentation and improve accuracy.

**WHEN:** Tuesday, January 13, 2026

**WHERE:** The change will affect the following venue(s):

- Peri-Op Only

**At the following NLH Member Organization(s):**

- All NLH Hospitals (excluding Mayo and/or Acadia)

**WHO:** The change will affect the following staff at the above noted locations:

- Surgical Nursing Staff

**New Sepsis PowerPlan – Effective January 27, 2026**

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**At the following NLH Member Organization(s):**

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## Pharmacists & Pharmacy Technicians

### Ambulatory/WIC

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- All NLH Hospitals (excluding NL EMMC)

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- Clinical Staff
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### Inpatient/ED/Peri-Op

#### Reference Range Updates – *Excluding NL EMMC*

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## Physicians, Physician Assistants, Nurse Practitioners

### Ambulatory/WIC

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## Dahl Chase Peripheral Blood Evaluation Order Update

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**WHERE:** The change will affect the following venue(s):

- Ambulatory

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## Emergency

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## EHR Updates

### Week of January 8 – January 14, 2026

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### New Sepsis PowerPlan – Effective January 27, 2026

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## Inpatient

### Reference Range Updates – *Excluding NL EMMC*

**WHAT:** Reference ranges and linearity ranges will be updated to standardize values across the system.

**WHY:** This update aligns reference ranges and linearity ranges across all sites to support consistency in results and interpretation.

**WHEN:** Effective Immediately

**WHERE:** The change will affect the following venue(s):

- Acute/Inpatient (to include ED & Peri-Op)
- Ambulatory/WIC

**At the following NLH Member Organization(s):**

- All NLH Hospitals (excluding NL EMMC)

**WHO:** The change will affect the following staff at the above noted locations:

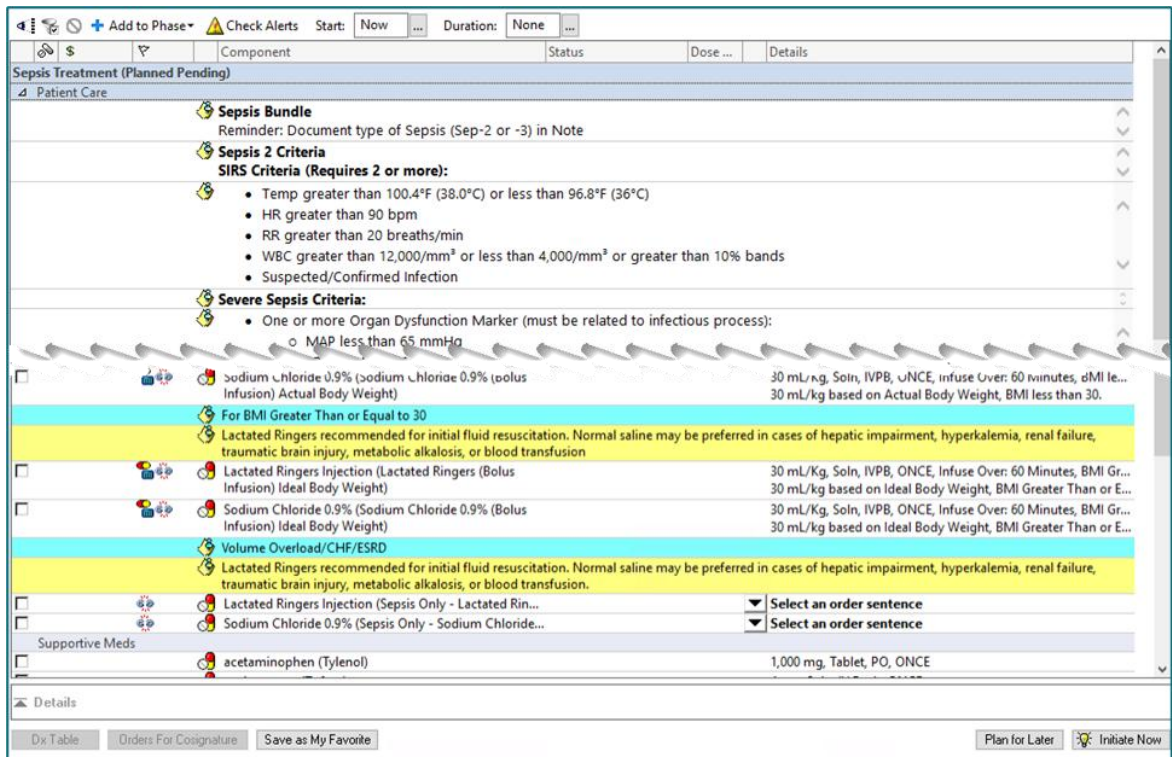
- Clinical Staff
  - Providers
-

## EHR Updates

### Week of January 8 – January 14, 2026

#### New Sepsis PowerPlan – Effective January 27, 2026

**WHAT:** The **Sepsis Treatment PowerPlan** will replace the current **Sepsis Advisor** for managing suspected sepsis cases. Alerts will continue to trigger in the same locations; however, instead of opening the Sepsis Advisor, users will now have the option to launch the Sepsis Treatment PowerPlan.



**WHY:** This change is being implemented to improve clinical efficiency and patient outcomes. The Sepsis Treatment PowerPlan provides:

- **Streamlined Workflow:** Combines evidence-based interventions into a single, easy-to-use plan.
- **Enhanced Clinical Guidance:** Offers standardized treatment steps aligned with current best practices.
- **Reduced Variability:** Ensures consistent care across all applicable venues and staff.
- **Improved Patient Safety:** Facilitates timely initiation of sepsis management, reducing risk of complications.

**NOTE:** This update supports NLH’s commitment to quality care and operational excellence.

**WHEN:** Tuesday, January 27, 2026

**WHERE:** The change will affect the following venue(s):

- Acute/Inpatient (to include ED & Peri-Op)

**At the following NLH Member Organization(s):**

- All NLH Hospitals (excluding Acadia and Mayo)

**WHO:** The change will affect the following staff at the above noted locations:

- Nursing
- Providers

## Peri-Op

### Reference Range Updates – *Excluding NL EMMC*

**WHAT:** Reference ranges and linearity ranges will be updated to standardize values across the system.

**WHY:** This update aligns reference ranges and linearity ranges across all sites to support consistency in results and interpretation.

**WHEN:** Effective Immediately

**WHERE:** The change will affect the following venue(s):

- Acute/Inpatient (to include ED & Peri-Op)
- Ambulatory/WIC

**At the following NLH Member Organization(s):**

- All NLH Hospitals (**excluding NL EMMC**)

**WHO:** The change will affect the following staff at the above noted locations:

- Clinical Staff
- Providers

### New Sepsis PowerPlan – *Effective January 27, 2026*

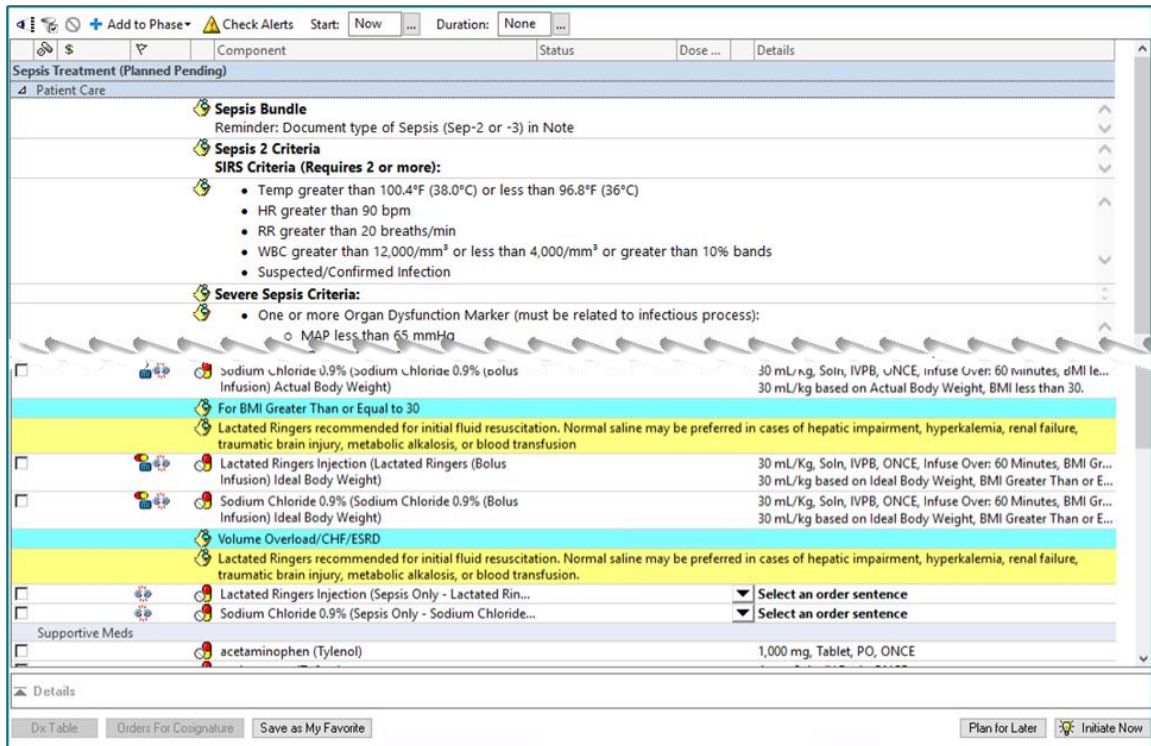
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## EHR Updates

### Week of January 8 – January 14, 2026

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- **Improved Patient Safety:** Facilitates timely initiation of sepsis management, reducing risk of complications.

**NOTE:** This update supports NLH’s commitment to quality care and operational excellence.

**WHEN:** Tuesday, January 27, 2026

**WHERE: The change will affect the following venue(s):**

- Acute/Inpatient (to include ED & Peri-Op)

**At the following NLH Member Organization(s):**

- All NLH Hospitals (excluding Acadia and Mayo)

**WHO: The change will affect the following staff at the above noted locations:**

- Nursing
- Providers