Clinical Reminders

GO LIVE 11/24/26

NOVEMBER 23, 2026

Mission Hospital: New B3 South Patient Selection Process

WHAT IS NEW

- NEW PATIENT SELECTION: Case Management will identify complex discharge patients and provide the list to B3 South Leadership.
- A discharge order is not required for transfer to B3 South. The provider must be notified and agree when no discharge order exists.

STEP-BY-STEP WORKFLOW

01 IDENTIFY + SHARE

Case Management identifies patients with complex discharge needs and sends the list to B3 South Leadership.

02 REVIEW CANDIDACY

B3 South Leadership contacts the patient's current unit to determine whether the patient is a B3 South candidate.

03 SCREEN EXCLUSIONS

Patients on Contact Plus or Airborne precautions are NOT B3 South candidates.

04 NOTIFY PROVIDER

The provider must be notified about the move to B3 South. A discharge order is not required.

05 PREPARE + TRANSFER

The sending unit prepares the patient for transfer. Follow the existing transfer process; it is unchanged.

BEFORE THE MOVE

Contact Plus/Airborne excluded • Provider notified • Sending unit prepares the patient • Questions about candidacy: Contact B3 South Leadership.

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GO LIVE 12/1/26

NOVEMBER 23, 2026

Adult Seizure PowerPlan Updates

Adult Seizure Treatment Plan + Phenytoin/Fosphenytoin Plan | Go-Live 12/1/26
What nurses need to know: Updated PowerPlans clarify nursing stabilization/monitoring, medication administration, treatment-phase timing, and ICU continuous-sedation guidance.
AUDIENCE Nurses caring for adult patients where these PowerPlans are used. WHY Improve clarity and alignment of dose, timing, monitoring, and status-epilepticus treatment guidance.

Adult Seizure Treatment Plan	Phenytoin/Fosphenytoin Plan
• New nursing stabilization orders and monitoring. • Clear 5-, 10-, 10-, 30-, 30-, and 60-minute treatment phases. • Updated seizure-medication doses and administration instructions. • ICU guidance for propofol, midazolam, ketamine, and pentobarbital. • Nurse-directed re-bolus and titration instructions. • No sedation holidays during refractory status epilepticus. • Updated seizure treatment flowchart and clearer anti-seizure medication level guidance.	• Separate loading-dose options for status and non-status seizures. • Updated weight-based dosing and infusion rates. • More specific blood-pressure monitoring; reduce the infusion rate for low blood pressure as directed. • Updated phenytoin-level timing and reduced maintenance-dosing criteria. • Clarified pharmacy rounding and weight calculations. • Outdated statements removed; links return to the parent Seizure PowerPlan for abortive benzodiazepine options.

IMPORTANT REINFORCEMENT

Some points reinforce existing practice rather than introduce new functionality. Prior IV push Keppra education remains applicable. Follow the updated PowerPlan instructions at go-live.

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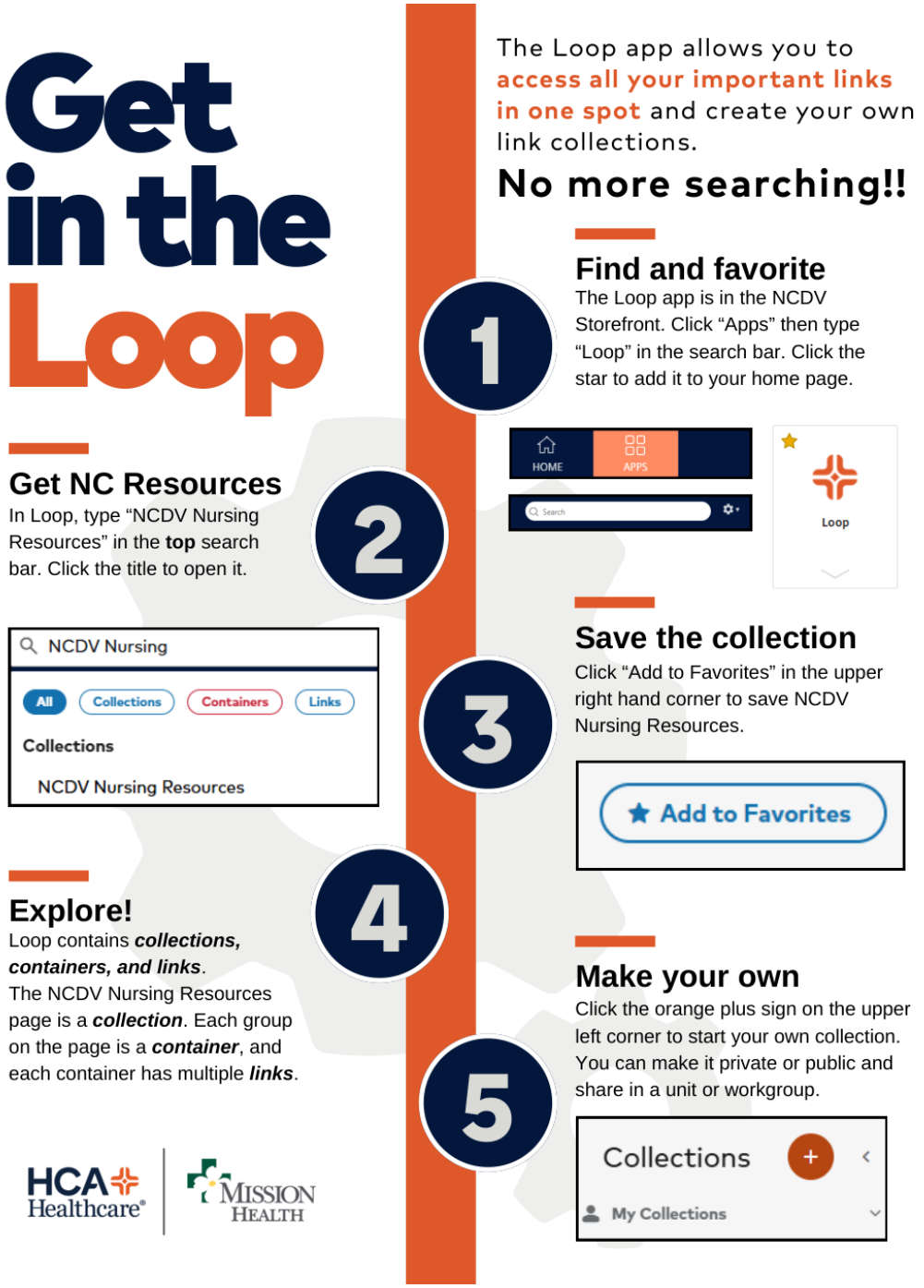
EDUCATION BOOST

NOVEMBER 23, 2026

Get in the Loop — NCDV Nursing Resources

Original North Carolina Division resource guide — preserved exactly as supplied.



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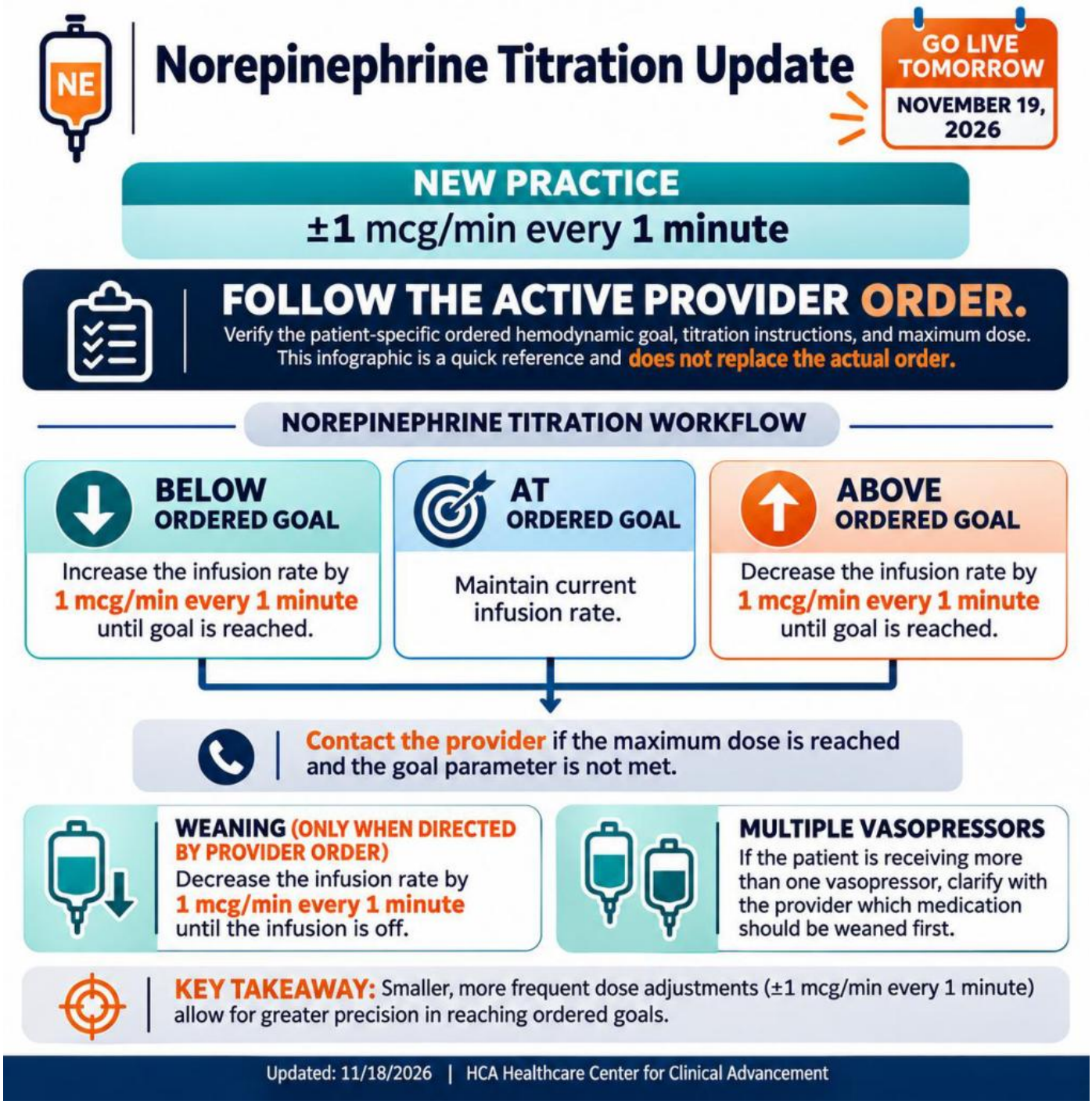
NOW LIVE 11/19/26

NOVEMBER 23, 2026

Norepinephrine Titration Practice Change

Follow the active patient-specific provider order for titration, hemodynamic goal and maximum dose.



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EDUCATION BOOST

NOVEMBER 23, 2026

Protect Patient Privacy and PHI

Patient Safety | Protected Health Information (PHI)

