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Timeline for Sepsis Management

(To follow patient to ensure all elements are completed)

SIRs – two of following: T>38 or <96.5, rigors, HR>90, R>20, WBC<4 or >12, or bands>10%
 Sepsis – SIRs plus a suspected infection (only have to suspect, ex-dysuria, cough, cellulitis, abd pain, etc
 Severe sepsis – LA >2, or organ dysfunction (AMS, delirium, ARDS, Platelets<100, bilirubin>2, Creatinine>2, acute respiratory failure, SBP<90 or Map<65, INR>1.5 or aPtt>60sec)

Septic shock – Is severe sepsis plus hypotension that is unresponsive to a 30ml/kg crystalloid bolus or a LA \geq 4, Hypotension is defined as SBP <90 or Map<65 or 40mmHg drop below baseline)

| Element to complete Time Zero – • hemodynamically unstable and/or resp. failure on arrival, or inpt change in status • Pt has suspected infection, time of sepsis protocol orders, may have SIRs | Enter time due | Check When done |
|--|----------------------------------|-----------------------|
| TIME ZERO | Enter time zero here | |
| Lactic Acid drawn STAT | Click or tap here to enter text. | |
| Blood culture drawn STAT (1 set prior to antibiotics) | Click or tap here to enter text. | |
| Antibiotic given STAT (after Blood c/s) (see below for which to give first) | Click or tap here to enter text. | |
| Repeat Lactic acid in 2-3hrs from initial collection time, (before pt leaves ED) (if LA>2, continue to trend every 2-3 hrs until <2) | Click or tap here to enter text. | |
| If lactic acid is \geq 4 or pt develops septic shock must get or have received N/S or LR 30ml/kg bolus (within 2-3hrs) | Click or tap here to enter text. | |
| Document bolus <u>end time</u> , then repeat VS (T,HR,R,BP), if SBP is <90 or MAP is <65 repeat BP and document, pt will re, tell MD bolus is completed and to do sepsis reassessment (.sepsisreasessment) (time of vitals must be after bolus end time) | Click or tap here to enter text. | |
| If hypotension is not responsive to fluid bolus (30ml/kg) (2 low BPs, either SBP<90 or MAP<65 in hr after bolus) vasopressors must be started w/in 6 hrs (do not wait until pt goes to ICU to administer) | | |

^{*}Physicians must document family wishes of comfort care only as soon as they are aware

3 hr bundle:

- Repeat all lactic acids if result is >2
- 30ml/kg infused w/in 6hrs if hypotensive or LA >, and MD reassessment completed
- If hypotension persists after 30ml/kg crystalloid bolus-must initiate vasopressors w/in 6hrs

6hr bundle (3 hr bundle completed, then additional elements completed w/in 6hrs as needed)

- lactic acid
- blood c/s before abx,
- broad spectrum abx (give Zosyn, Rocephin, Levaquin, Primaxin, Meropenem first, if > than one
 This is not a part of the Medical Record reference material only

^{*} Nurses must document if patient/family refuses blood work and or medications (be specific)

******Please Add Sepsis to Education Record and Care Plan Documentation******