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| **Sepsis Bundle Process Steps** | **Dashboard Core Measures** | **Staff initial** |
| Identify patients that meet SIRS/One and Done criteria |  |  |
| Call Sepsis Alert to alert staff, providers |  |  |
| Establish vital signs, IV access, initiate Sepsis checklist documentation |  |  |
| Draw blood cultures, Labs, Lactic acid-  If unable to get blood or establish IV line within 30 minutes- ask for help from other RN or lab | Blood culture to be drawn prior to Antibiotic administration |  |
| Administer Antibiotics and IVF < 1 hr from arrival (Bolus is always completed 1 hour after start) – if unable to get IV line within 30 minutes, ask for IM abx order | Administer ABX within 1 hr of patient arrival/reception |  |
| Collaborate with provider to ensure all components of the Sepsis bundle are initiated: Bolus amount, bolus exclusion criteria, timely ABX order | Patients with LA > 4 to receive Bolus 30ml/kg or to have exclusion criteria documented by provider |  |
| For patients who meet Severe Sepsis criteria monitor vital signs and document two sets of vitals in the 1 one after Bolus completion. Repeat LA if initial value > 2.0 prior to patient leaving the department | Two sets of Blood pressure in the one hour after bolus completion for patients with Severe Sepsis |  |
| Report to provider hypotension: systolic BP< 90 or MAP < 65 or SBP decrease more than 40 mmHg. If at least two sets of hypotension identified in the one hour after bolus suggest initiation of vasopressors | Hypotension x2 (SBP < 90 or MAP < 65) after bolus needs providers evaluation for Initiation of Vasopressors |  |
| Complete Sepsis checklist |  |  |
| Documentation of delay in care (blood culture/lab, draw, ABX/ IVF Bolus administration) due to IV access, change in condition, etc. |  |  |

**DEFINING SEPSIS**

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| Suspected/Localized Infection | An infection that affects only one organ or body part (e.g., UTI, Pneumonia) |
| Bacteremia | Nonspecific laboratory finding of bacteria in the blood |
| Sepsis   * Temperature >38.3C or <36.0C, * tachycardia, * > 20respiratory rate, * WBC >12,000 or < 4,000 or > 10% bands | A presumed or confirmed systemic response to infectious process with 2 or more of the listed clinical indicators |
| Severe Sepsis   * systolic BP < 90 or MAP < 65 or SBP decrease more 40 mm Hg from last recorded SBP considered normal for patient, * Creatinine > 2.0, * urine output < 0.5 ml/kg/hour for 2 hours, * Bilirubin > 2 mg/dL, * platelet count <100,000, * INR > 1.5, * PTT > 60 sec, * lactate > 2 mmol/L | Sepsis with additional clinical indicators such as Organ failure with any of the clinical indicators listed present |
| Septic Shock | Severe Sepsis with any one of the clinical indicators listed present |