Sepsis 2018

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Instructions

- Please review this entire presentation.
- Watch the Sepsis Emergency video
- Complete the posttest.
- Please address questions or concerns to Laurie Peach in Nursing Education via extension: 1924 or email: Laurie.Peach@cantonmercy.org



Objectives/Outcomes

The Learner will have an

- Increased recognition of Sepsis in the hospitalized patient.
- Increased recognition of early Sepsis in the stat care/emergency department patient population
- Recognize the importance of early recognition and treatment in the care of the sepsis patient.
- Patients will have decreased morbidity/mortality with early recognition and treatment of the patient with Sepsis.



Statistics

- CDC Vital Signs Report that Sepsis begins outside of the hospital in nearly 80% of patients
- 7 in of 10 patients have recently interacted with healthcare providers or had chronic diseases requiring frequent medical care.

CDC Vital Signs: Epidemiology of Sepsis: Prevalence of Health Care Factors and Opportunities for Prevention, Weekly. August 26th, 2016/65(33):864-869.



Epidemiology

- Sepsis occurs most frequently in those over 65 or under 1 year of age. Persons with chronic diseases or weakened immune systems are more predisposed to sepsis.
- Sepsis is most predominately associated with infections of the lung, gut, urinary tract or skin.
- Some types of organisms associated with Sepsis are staph Aureus, E. Coli, and some types of Streptococcus.
- Healthy individuals can develop Sepsis if the infection is not treated appropriately.

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Mercy Medical Center

- Be aware of the Sepsis screen and recognize any change in the patient condition. Has there been a change in vital signs? Mental status? Labs?
- Could the patient be in early Sepsis?
- If the physician has been notified of a positive sepsis screen in the last 48 hours and the patient is continuing to decline, notification of the physician is a must. Be an advocate for your patient.
- Please encourage use of the Sepsis Order set by the physician.



Sepsis Screen

1. Are you concerned that the patient may have developed a NEW infection or the current infection has ESCALATED within the past 48 hours? Yes or No

If yes, the patient MUST meet 2 of the FOLLOWING criteria:

Please Circle all criteria met:

- Acute Altered Mental Status
- Patient is Hyperthermic Temperature is > 100.9 F or 38.3 C
- Patient is Hypothermic Temperature is < 96.8 F or 36.0
- Heart Rate > 90 bpm
- Respiration Rate > 20
- WBC > 12.0
- WBC < 4.0
- > 10% Bands (Band Neutrophil % in lab data)



Sepsis Screen Continued

- 2. Does the patient meet the Sepsis Criteria? Yes or No
- 3. Was the physician notified from the prior sepsis alert within the 48 hours? Yes or No
- 4. If the patient meets Sepsis Criteria, AND there have been no PHY alerts within the last 48 hrs, then notify PHY of Sepsis Suspicion:
- Physician Notified: ______ Date: _____ Time: _____
- The first question is required. If yes, THEN the criteria is Required.
- If there are 2 or more criteria met then the 3rd question is required.
- If 3rd question is N then the 4th question is required along with Dr notified, date and time.

Sepsis Screen – Rapid Response

- Critical Care RN's responding to Rapid Response calls should be assessing the patient and identify if a Sepsis Screen is warranted and if the Sepsis order set should be initiated.
- The Sepsis Order set must be initiated by the physician caring for the patient not the Rapid Response team.

