



Adult Sepsis Screening Tool

To be used upon ED triage and when sepsis is suspected

Goals of Sepsis Care

- To identify a severely septic patient
- To administer appropriate antibiotics and *Early Goal-Directed Therapy* as soon as possible.
- Antibiotics should be administered within 60 minutes of patient being identified as severely septic.
- 1 Suspected/Possible Infection

) Yes

O No

If yes, proceed to #2.

Systemic Inflammatory Response Syndrome (SIRS)?

○ Yes ○ No

Temp $< 36.0^{\circ}C \text{ or } \ge 38.0^{\circ}C$

Heart Rate > 90/min

If at least 2 yes's, proceed to #3.

- 3 Possible Sepsis!
 - a) Assign to bed and NOTIFY MD as soon as possible
 - b) Draw blood for:
 - Lactate
 - Venous blood gas
 - CBC, differential
 - Na, K, Cl, Creatinine, Urea, Glucose
 - Albumin
 - AST, ALT, ALP, Total Bili
 - Two sets of blood cultures
 - c) Reassess patient frequently

URGENT

Organ Dysfunction!

● Yes ● No BP (systolic < 90 or MAP < 65)

YesNoAcute mental status change

YesNoO₂Sat < 90%

If at least 1 yes and/or lactate ≥ 4.0 and/or venous pH < 7.32 and/or HCO3 < 22:

Possible SEVERE Sepsis

Notify MD immediately and proceed to page 2:
Antimicrobial Management.

Reassess patient frequently.



Adult Sepsis Antimicrobial Management

Use for patients suspected to be severely septic





Consider the following:

- source of infection
- allergies
- appropriate dose
- co-morbidities (e.g. Diabetes)
- immune status (e.g.Neutropenia)
- recent exposure to:
 - hospital/health care institution
 - antibiotics
 - procedures

 (e.g. surgery, catheter, device)

Prescribe
Initial Empiric Antibiotics

Please see ER Adult Severe Sepsis/Septic Shock Order Set for antibiotic recommendations.

Prescribe
Initial Fluid Bolus (30 mL/kg)

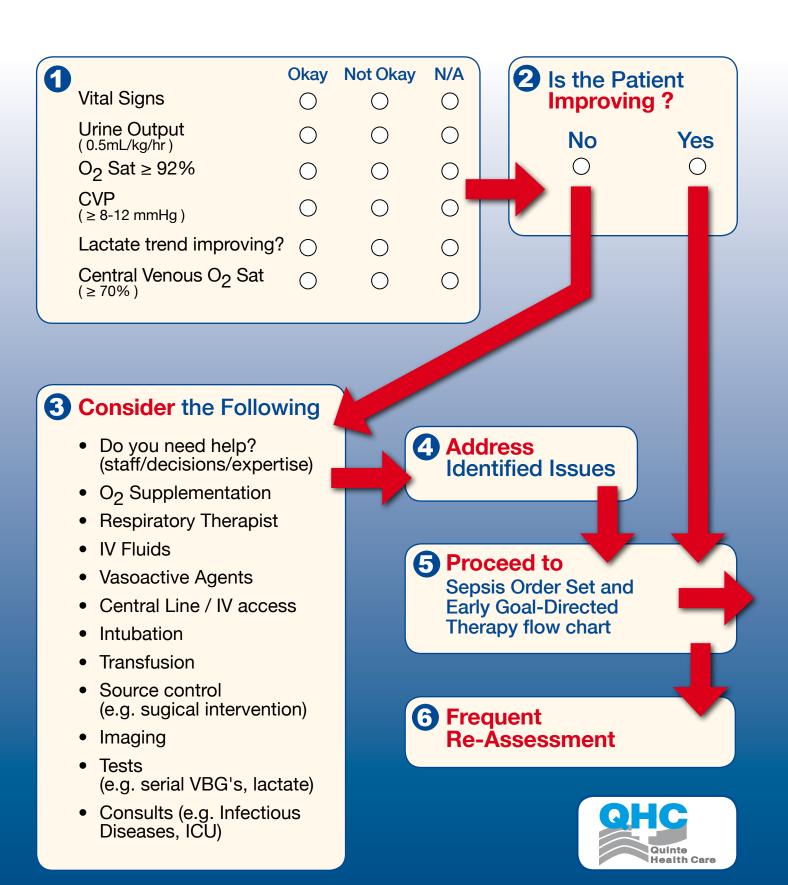


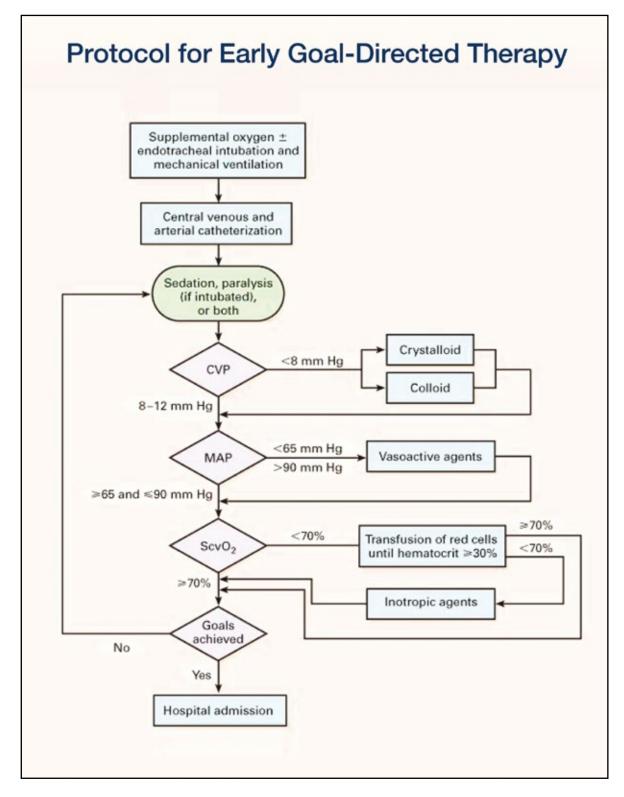
- Emphasize Urgency
- Establish multiple IV access sites
- MD to insert central line if required

5 Proceed to the Sepsis Management Flowchart

Sepsis Management Flowchart

Severe Sepsis Collaborative Assessment and Management





Acknowledgements

This document is adapted from the Kingston General Hospital 'Adult Sepsis Care Program' package with permission of Dr. Roy Ilan.

References

- 1. Dellinger RP et. al. (2013) Surviving Sepsis Campaign: International Guidelines for Management of Severe Sepsis and Septic Shock: 2012. Critical Care Medicine, Volume 41, Number 2, p. 580-637
- Rivers EP, Ahrens T (2008) Improving Outcomes for Severe Sepsis and Septic Shock: Tools for Early Identification of At Risk Patients and Treatment Protocol Implementation. Critical Care Clinics 23 S1-S47