

SEP1: Early Management Bundle, Severe Sepsis/Septic Shock Discharges 1/1/18+

2018 Changes Highlighted

Severe Sepsis

Criteria	3-Hour Bundle
(All indications must be met within 6 hours of each other)	(Prior to or within 3 hours of Severe Sepsis criteria met)
① □ Infection suspected or confirmed -AND-	☐ Draw initial lactate
② SIRS criteria (2 or more):	☐ Blood culture prior to antibiotic
□ WBC > 12,000 or < 4,000 or > 10% bands □ Temp > 100.9 or < 96.8 Fahrenheit □ HR > 90 bpm □ Resp > 20 -AND-	☐ Broad spectrum IV antibiotic administration (IO/IM if no IV access)
3 New organ dysfunction (1 or more):	
☐ Lactate >2 ☐ Cr >2 (if chronic renal disease, increase of	Severe Sepsis with Hypotension (Initiated prior to or within 3 hours of initial hypotension)
0.5 over baseline) □ TBili >2 □ Plts <100K	Initial Hypotension = Any 2 low SBP readings from 6 hrs prior to 6 hrs after Severe Sepsis time or completion of CF 30ml/kg
 □ INR >1.5 □ aPTT >60 □ Urine output< .5 ml/kg/hr for 2 hrs □ Acute respiratory failure (intubation or 	☐ IV fluid resuscitation with 30 mL/kg of crystalloid fluid (IO if no IV access)
CPAP/BiPAP: new or increased from intermittent to continuous)	
☐ Hypotension (SBP <90, MAP <65, SBP	6-Hour Bundle
decrease of more than 40 mmHg from	(Prior to or within 6 hours of Severe Sepsis criteria met)
normal)	
	\square Repeat lactate (IF initial >2)
1 + 2 + 3 = SEVERE SEPSIS -or- Physician/APN/PA documentation "Severe Sepsis" or "Septic Shock"	

Septic Shock

Criteria	3-Hour Bundle
 ① □ Severe Sepsis -AND- ② □ Initial Lactate ≥ 4 	(Initiated prior to or within 3 hours of Shock criteria met) IV/IO fluid resuscitation with 30 mL/kg of crystalloid, if not already given for initial hypotension (IO if no IV access)
OR- 3 □ Persistent hypotension following	6-Hour Bundle (Prior to or within 6 hours of Septic Shock criteria met)
fluid resuscitation (SBP <90, MAP <65, SBP decrease of more than 40 mmHg from normal)	☐ IV Vasopressor (norepinephrine) for persistent hypotension
1 + (2 OR 3) = SEPTIC SHOCK -or- Physician/APN/PA documentation "Septic Shock"	☐ Reassess volume status and tissue perfusion. Examples of acceptable narrative documentation: "focused exam performed"; "sepsis exam completed"; "physical exam done", etc.

²Must be documented within 24 hours after Sepsis Time Zero

³No timeframe limitation on required documentation



SEP1: Early Management Bundle, Severe Sepsis/Septic Shock (Discharges 1/1/18+)

Documentation Tips & Exceptions

Useful tools:

Allscripts Phys Doc slick text "zSepsis" for sepsis note.

<u>EPIC</u> BPA guidance with positive sepsis screen; "Severe Sepsis/Septic Shock Hand Off" tool in the transfer navigator and in the Patient Summary.

Documentation - Exclusions for Bundle Processes

Requires Physician/APN/PA documentation and must be documented within 6 hrs of Sepsis Time Zero unless otherwise indicated via footnote

	t applicable for Sepsis Bundle			
	Severe Sepsis Not Present			
	Patient/Family refusal of blood draw, IV/ <mark>IO</mark> fluids, IV/ <mark>IO</mark> antibiotic, or IV vasopressor ¹			
	Request for or recommendation of Palliative Care or Comfort Measures Only			
	Infection: not present or ruled out			
	Infection: only viral, fungal, parasitic			
	Sign of organ dysfunction (specify) or SIRS criterion (specify) is due to:			
	☐ A chronic condition (specify)			
	☐ An acute condition that is non-infectious (specify)			
	☐ A medication (specify)			
	\square Abnormal value is invalid, erroneous, or questionable ¹			
	\square Abnormal value is within normal limits for this patient			
Blo	ood Culture Timing (BC drawn after antibiotics administered)			
 □ Waiting to start antibiotic until after the BC was drawn could be detrimental to the patient³ □ Surgical pre/postop prophylaxis in last 24 hours^{1,3} 				
	Within 24 hours prior to severe sepsis time zero: 1,3			
	☐ Already receiving IV antibiotics for infection before severe sepsis was suspected/present			
	☐ Received IV antibiotics prior to hospital arrival & BC drawn after arrival			
Br	oad Spectrum IV Antibiotic Exceptions: ^{1,3}			
	As indicated by culture drawn within 24 hours prior to severe sepsis time zero			
	□ Non-broad spectrum IV antibiotic			
	□ Vancomycin PO for C-diff			
Cry	ystalloid Fluids 30ml/kg for Initial or Persistent Hypotension – Exceptions:			
	Fluid resuscitation not required:			
	☐ Patient has Ventricular Assist Device ^{1,3}			
	☐ No hypotension present - Low blood pressure reading is due to:			
	\square A chronic condition (specify) ²			
	\square An acute condition that is non-infectious (specify) ²			
	\square A medication (specify) ²			
	☐ Abnormal value is invalid, erroneous, or questionable¹			
	☐ Abnormal value is within normal limits for this patient ²			
	Crystalloid fluid bolus <mark>volume based on Ideal Body Weight due to patient obesity³</mark>			

¹Nursing and/or other supporting documentation acceptable

²Must be documented within 24 hours after Sepsis Time Zero

³No timeframe limitation on required documentation