

# SEPSIS POCKETCARD

*Sepsis definitions and guidelines undergo frequent revisions, these are the recommendations of the Wake-Med sepsis task force following the Surviving Sepsis Campaign 2012 Guidelines and CMS core measures.*

## DEFINITIONS

### SIRS (2 Required)

- Temp > 38 or < 36
- HR > 90
- RR > 20
- WBC > 12,000 or < 4,000 or > 10% bands

### SEPSIS

SIRS + suspected source of infection (must be documented by provider)

### SEVERE SEPSIS (Sepsis + 1 criteria “thought to be due to infection”)

- Sepsis induced hypotension (SBP < 90, MAP < 65 or SBP drop > 40)
- Lactate > 2
- Urine output < 0.5 mL/kg/hr for > 2 hrs despite fluid resuscitation
- Acute lung injury PaO<sub>2</sub>/FiO<sub>2</sub> < 250(w/out PNA) or < 200(w/ PNA)
- Creatinine increase > 0.5 mg/dL above baseline
- Bilirubin > 2
- Platelet Count < 100,000
- Coagulopathy INR > 1.5 or PTT > 80

### SEPTIC SHOCK (Severe Sepsis + 1 criteria)

- Hypotension persists after fluid resuscitation (SBP<90 or MAP<65)
- Lactate > 4
- Provider documentation of shock

### ***EPIC Hints:***

- Add “Sepsis monitoring” tab to your EPIC toolbar
- Utilize “Severe Sepsis panel”

Bundles	Severe Sepsis	Septic Shock
by 3 hour	<ul style="list-style-type: none"> <li>Initial lactate level</li> <li>Blood cultures prior to antibiotics</li> <li>Broad spectrum antibiotics administered</li> <li>If hypotensive (SBP &lt; 90, MAP &lt; 65 or SBP drop &gt; 40) resuscitation with 30 mL/kg crystalloid fluids</li> </ul>	<ul style="list-style-type: none"> <li>Initial lactate level</li> <li>Blood cultures prior to antibiotics</li> <li>Broad spectrum antibiotics administered</li> <li>Resuscitation with 30 mL/kg crystalloid fluids</li> </ul>
by 6 hour	<ul style="list-style-type: none"> <li>Repeat lactate level (if initial &gt; 2)</li> </ul>	<ul style="list-style-type: none"> <li>Repeat lactate</li> <li>Physical exam to assess volume status and perfusion (.sepsisfocusedexam)</li> </ul>
	<div style="border: 1px solid red; padding: 5px;"> <p>Based upon repeat exam and / or measurements give additional fluid and / or vasopressors (Norepinephrine 1st choice)</p> </div>	<p>OR</p> <ul style="list-style-type: none"> <li>2 of 4 measurements               <ul style="list-style-type: none"> <li>- CVP (8-12)</li> <li>- ScvO2 (&gt;70)</li> <li>- Passive leg raise</li> <li>- IVC measurement</li> </ul> </li> </ul>

Measurement	Interpretation (2 of 4 Required)
CVP	< 8 = fluid responsive (requires central line)
ScvO2	< 70 = fluid responsive (requires central line)
IVC	Obtained w/ limited echo Distensibility Index= $\frac{D_{max}-D_{min}}{D_{average}}$ DI > 12% = fluid responsive
PLR	Obtained w/ limited echo, requires nursing assistance Assess SV before and after PLR SV $\Delta$ > 12% = fluid responsive