

**ED CODE SEPSIS Checklist**

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| **Sepsis Recognition**  Concern for Sepsis   * Symptoms of Infection: cough, red skin, chills, rigors, dysuria, flank pain, diarrhea * 2 SIRS Criteria:   + Temperature >38.3 or <36.0   + RR >20   + HR >90   Concern for Severe Sepsis & **Time Zero for CODE SEPSIS. Time of Code Sepsis: \_\_\_\_\_\_\_\_\_**   * Symptoms of Infection + 2 SIRS Criteria **+** * 1 “Sepsis Game-Changer”   + Altered Mental Status (or change from baseline)   + SBP <90 or MAP <65   + Immunocompromised   + Lactic Acid >2.0 |
| **Within 20 minutes of ED Arrival + Concern for CODE SEPSIS**   * Obtain patient weight **Weight in kg: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** * Undress patient and remove bandages if present * Insert 2 large-bore PIVs * VBG with Lactic Acid drawn *and resulted*.  **Time of VBG Result: \_\_\_\_\_\_\_\_\_\_\_** * 2 blood cultures from 2 different sites * CBC, CMP, Procalcitonin |
| **Within 10 minutes of CODE SEPSIS**   * MD evaluates patient. **Time of MD eval: \_\_\_\_\_\_\_\_\_\_\_\_**   + Confirms suspicion of infection/Code Sepsis & rules out Surgical Abdomen   + *OR* Code Sepsis cancelled. (Reason)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   **Within 60 minutes of CODE SEPSIS**   * Urinalysis and Urine Culture (Straight cath if needed) * 30ml/kg NS infused (as appropriate for patient with reassessment after each liter). * Indicated Imaging (CXR, CT abd, etc)   **Within 120 minutes of CODE SEPSIS Time of Abx order:\_\_\_\_\_\_\_\_\_\_**   * Antibiotics ordered & initiated. **Time of Abx initiation: \_\_\_\_\_\_\_** * *OR* Antibiotics not ordered. (Reason)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   **Ongoing CODE SEPSIS Care**   * Repeat VBG w/ Lactic Acid after NS bolus completed.   + Repeat Lactic Acid <4 or SBP >90, MD to initiate Floor Admission.   + Repeat Lactic Acid >4 or SBP <90, MD to consider MICU Admission and Vasopressors. * Call Report & transfer patient **Time Report Called: \_\_\_\_\_\_\_Time of Transfer: \_\_\_\_\_\_\_\_\_\_** |