

Sepsis 48-hour Management Plan

This document is intended for patients who have been recognised as having a new infection and potentially septic and have started on the Early Sepsis Investigation and Treatment Orders. The Sepsis 48 Hour Management Plan aims to guide clinical staff using a step by step process which ensures that the patient monitoring and treatment is appropriate.

Time	Action	Criteria	
0-2 hours	Communication	<p>Attending physician informed that patient has activated Early Investigation and Treatment Orders</p> <p>Clinical handover must inform the receiving team that the patient was treated with Sepsis Orders</p>	<input type="checkbox"/> <input type="checkbox"/>
	Monitor and reassess	<p>Monitor and reassess for sepsis deterioration which may include one or more of the following:</p> <ul style="list-style-type: none"> • Respiratory rate > 22 breaths/min • Systolic blood pressure < 100 mmHg • Decreased or no improvement in level of consciousness • Urine output less than 0.5mL/kg/hr • No improvement in serum lactate level <p>If deteriorating, consider internal medicine consult/critical care outreach team/critical care consult /transfer ICU</p> <p>If improving, continue observations every 30 minutes for 2 hours, then hourly for 4 hours</p>	<input type="checkbox"/> <input type="checkbox"/>
	Sepsis screen	<p>Head to toe assessment for infection source and initiate investigations which may include:</p> <ul style="list-style-type: none"> • Diagnostic imaging • Urine microscopy/culture • Sputum for culture • Faeces for C.difficile if diarrhoea • Wound swab for culture • Nasopharyngeal swabs • Lumbar puncture (if indicated) 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	Antibiotics	<p>Appropriate antibiotic prescribing</p> <p>Prescribe antibiotics in the medication chart and indicate the appropriate time for dosing</p>	<input type="checkbox"/> <input type="checkbox"/>
	IV Fluids	Prescribe IV fluids as appropriate. Monitor haemodynamic observations	<input type="checkbox"/>

Sepsis 48-hour Management Plan (continued)

Time	Action	Criteria	
2-24 hours	Continue monitoring	<p>Monitor and reassess for sepsis deterioration which may include one or more of the following:</p> <ul style="list-style-type: none"> Respiratory rate > 22 breaths/min Systolic blood pressure < 100 mmHg Decreased or no improvement in level of consciousness Urine output less than 0.5mL/kg/hr No improvement in serum lactate level <p>If deteriorating, consider internal medicine consult/critical care outreach/critical care consult /transfer ICU</p> <p>If improving, continue observations every 30 minutes for 2 hours, then hourly for 4 hours</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	Repeat lactate	<p>Lactate level 4 hours post recognition Date: DD/MM/YYYY Time: HH:MM . mmol/L</p> <p>Lactate level 8 hours post recognition Date: DD/MM/YYYY Time: HH:MM . mmol/L</p>	<input type="checkbox"/> <input type="checkbox"/>
	Fluid resuscitation	Check preliminary blood work	<input type="checkbox"/>
		If patient is neutropenic, review antibiotics and change if needed	<input type="checkbox"/>
24-48 hours	Reassess	<p>Repeat bloodwork as indicated</p> <p>Review results of tests and investigations</p> <ul style="list-style-type: none"> Discuss with attending physician and treat accordingly Cease antibiotics if appropriate Continue monitoring for deterioration including urine output 	<input type="checkbox"/> <input type="checkbox"/>
		Confirm diagnosis and document source of sepsis in medical record	<input type="checkbox"/>