

PEDIATRICS (< 18 years-old)

ED Sepsis BPA Training Sheet – Nurses

Go-Live February 12, 2019, 10:00 AM

How to Address Sepsis Best Practice Alerts (BPA) in Epic

Reminder: Epic is a tool to aid workflow—it is not intended to replace communication.

1. RN receives BPA and escalates care to Attending.

- If vital signs (VS) entered in error, retake VS and document error in Epic.
- If Provider believes initial VS due to anxiety, asthma, or another transient reason, he/she can select to have VS retaken in 1 hour.

2. RN draws 1 blood culture.




- Hold blood culture for confirmation of suspected infection before sending.
- Document in Epic.

3. If sepsis or infection is suspected:

- Provider and RN discuss diagnosis and plan of care.
- Document time of blood culture draw in Epic and send specimen to lab.

- If RN selects “**I will escalate to Attending,**” this marks the BPA as acknowledged and signifies that the patient requires Provider Assessment.
 - Notify Attending of any patient that triggers BPA, regardless of suspected sepsis.

- The sepsis column will turn **RED** on the ED Track Board, indicating that a Provider needs to perform the initial assessment.

	Room	Team	Clinical Upgrade	Sepsis	Patient	Call	Surveillance	Age	FYI	Complaint
	Acute 0...	Acute One						66 Y		Fever; Fatigue; Diarrhea

PEDIATRICS (< 18 years-old)

ED Sepsis BPA Training Sheet – Nurses

Go-Live February 12, 2019, 10:00 AM

Pediatric Sepsis Definitions:

- ▶ **Sepsis**: SIRS and a documented infection
- ▶ **Severe Sepsis**: Sepsis with low systolic blood pressure for patient's age despite fluid resuscitation and/or evidence of associated organ dysfunction
- ▶ **Septic Shock**: Severe Sepsis with low systolic blood pressure for patient's age, despite adequate fluid resuscitation or requiring a vasopressor

Pediatric Sepsis Care Bundle:

Within 1 hour of placement on pathway

- ▶ Initiate Isotonic fluid 20 mL/kg boluses up to 60 mL/kg unless rales or hepatomegaly develops
 - Consider 30 mL/kg boluses if patient weight > 60kg
- ▶ Draw Blood Culture (BC) x1
 - BC x2 if patient at risk for endocarditis or has central line in place
- ▶ Initiate Antibiotics
- ▶ Draw Labs: CBC, blood gas, urine culture, electrolytes & liver enzymes
- ▶ Initiate vasopressors for septic shock

Within 2 hours of placement on pathway

- ▶ Complete sepsis reassessment

Documentation & Process Reminders:

- ▶ Patient Weight
- ▶ Vital Signs every 15 minutes
- ▶ Blood Culture/s **BEFORE** Antibiotics
- ▶ Intake & Output
- ▶ Fluid Start & Stop times
- ▶ Document 2 blood pressure readings after fluids complete