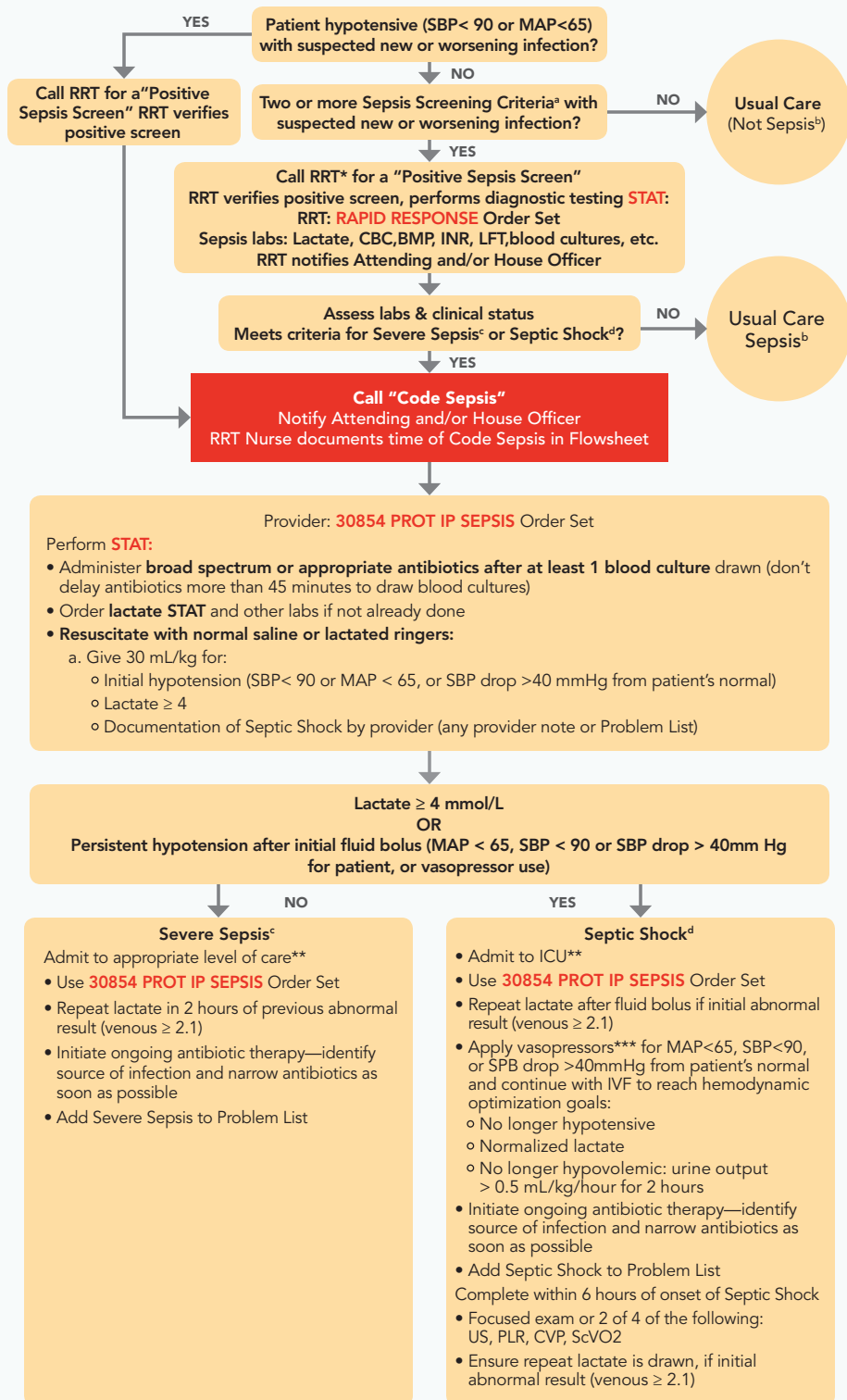


INPATIENT Severe Sepsis and Septic Shock Treatment Algorithm

Begin STAT. Time is life!



***SEPSIS SCREENING CRITERIA**

1. Suspected new or worsening infection + hypotension (SBP < 90 or MAP < 65)
- OR
2. Suspected new or worsening infection + TWO of the following:
 - Temp > 100.9 F (38.3 C) or < 96.8 F (36 C)
 - HR > 90
 - RR > 20
 - WBC > 12,000 or < 4,000 or > 10% bands
 - Acutely altered mental status

DIAGNOSTIC CRITERIA

- ^bSEPSIS:** Suspected new or worsening infection PLUS TWO of the following:
- Temp > 100.9 F (38.3 C) or < 96.8 F (36 C)
 - Heart rate > 90
 - RR > 20 or PaCO₂ < 32 mmHg
 - WBC > 12,000 or < 4,000 or > 10% bands

^cSEVERE SEPSIS: Sepsis plus ONE or more ACUTE**** organ dysfunctions (patients may have severe sepsis with < 2 sepsis criteria present):

- Lactate ≥ 2.1
- Initial hypotension (1 reading of SBP < 90 or MAP < 65) that resolves with IV fluid bolus
- New need for invasive or non-invasive mechanical ventilation
- Creatinine ≥ 2.1 or urine output < 0.5 mL/kg/hour for 2 hours
- Total Bilirubin > 2
- Platelets < 100,000
- INR > 1.5 or aPTT > 60 sec

^dSEPTIC SHOCK: Sepsis + ONE of the following (patients may have septic shock with < 2 sepsis^b criteria present):

- Persistent hypotension: 2 consecutive hypotensive readings within 1 hour after fluid bolus complete (NS or LR), defined as MAP < 65, SBP < 90 or SBP drop > 40mmHg from patient's normal
- Lactate ≥ 4.0
- Documentation of Septic Shock by provider (any provider note, Clinical Impression List or Problem List)

******Acute Organ Dysfunction**

- Invasive mechanical ventilation requires an endotracheal or tracheostomy tube. Non-invasive mechanical ventilation (may be referred to as BiPAP) uses a mask
- AKI is defined as: rise of creatinine ≥ 50% above baseline and/or acute rise of creatinine by ≥ 0.3 mg/dl (Allina CDIP criteria)
- For urine output, documentation must clearly indicate that urine output is being monitored hourly to be able to use this as organ dysfunction
- For patients on warfarin, elevated INR is considered chronic

* RRT is Rapid Response Team, also referred to as Medical Response Team. Follow hospital-specific procedures for activation and response.

** Refer to Allina Health's Intensive Care Transfer Guideline for Severe Sepsis & Septic Shock

*** Vasopressors can be administered for up to 4 hours via peripheral IV

