



Emergency Department Sepsis Pathway

Guidance to be read in conjunction with National Clinical Guideline No. 6
Management of Sepsis in Ireland

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Emergency Department Sepsis Pathway

ADULT PATIENTS There is separate sepsis criteria for women in pregnancy



EMERGENCY
MEDICINE

CLINICIAN TO COMPLETE THIS SECTION

Date: Time Started:

Clinician's Name:

Clinician's Signature:

MCRN/NMBI PIN:

Patient label here

INFECTION SUSPECTED +

any **2 or more modified Systemic Inflammatory Response Syndrome (SIRS)** criteria present

- | | | |
|--|---|---|
| <input type="checkbox"/> Respiratory rate > 20 (bpm) / Hypoxia | <input type="checkbox"/> WCC < 4 or > 12 x 10 ⁹ /L | <input type="checkbox"/> Acutely altered mental status |
| <input type="checkbox"/> Heart rate > 90 (bpm) | <input type="checkbox"/> Temperature <36 or >38.3 (°C) | <input type="checkbox"/> Bedside glucose >7.7mmol/L
<small>(in the absence of diabetes mellitus)</small> |

Note: Some groups of patients, such as older people, may not meet the modified SIRS criteria, even though infection is suspected. Where this occurs check for signs of organ dysfunction and raised biomarkers such as C-reactive protein (CRP)

YES. THIS IS SEPSIS

Sepsis Six Regimen must be completed *within 1 hour*

TAKE 3

SEPSIS SIX – aim to complete *within 1 hour*

GIVE 3

- | | |
|---|--|
| <input type="checkbox"/> 1. Blood cultures <u>before</u> giving antimicrobial
<i>Do not delay antibiotic administration >1 hour if blood cultures are difficult to obtain. Send samples from potentially infected sites eg. sputum, urine, wounds, IVC/CVC. Consider source control.</i> | <input type="checkbox"/> 4. O ₂ (94-98% SpO ₂ or 88-92% in Chronic Lung Disease patients) |
| <input type="checkbox"/> 2. Lactate and FBC | <input type="checkbox"/> 5. IV fluid resuscitation
(500ml bolus - give up to 30ml/kg) & reassess (target systolic BP>100/MAP>65)
<i>Monitor response to IV fluids and titrate to effect</i> |
| <input type="checkbox"/> 3. Urine output measurement | <input type="checkbox"/> 6. IV antimicrobials according to local guidelines
Time Given: <input type="text"/> |

Laboratory tests/Investigations must be requested as EMERGENCY and aim to have results available and **acted on within the hour**

Look for signs of organ dysfunction:

- Systolic BP < 90 or Mean Arterial Pressure < 65 or Systolic BP more than 40 below patient's normal
- New need for oxygen to achieve saturation > 90%
- Lactate > 2 mmol/L (following administration of fluid bolus)
- Urine output < 0.5ml/kg for 2 hours – despite adequate fluid resuscitation
- Acutely altered mental status
- Glucose > 7.7 mmol/L (in the absence of diabetes)
- Creatinine > 177 micromol/L
- Bilirubin > 34 micromol/L
- PTR > 1.5 or aPTT > 60s
- Platelets < 100 x 10⁹/L

Any organ dysfunction: **THIS IS SEVERE SEPSIS**

Registrar or Consultant to review immediately.

Reassess frequently in *1st hour*.

Consider other *investigations and management*

Look for signs of septic shock

(following administration of fluid bolus)

- Lactate > 4 mmol/L
- Hypotensive (Systolic BP < 90 or MAP < 65)

If either present: **THIS IS SEPTIC SHOCK**

Critical care consult required

- Consider transfer to a higher level of care
- Critical care consult requested

A critical care review may be requested at any point during this assessment, but is required for patients with Septic Shock. In a hospital with no critical care unit, a critical care consult must be made and transfer to a higher level of care considered, if appropriate, following the consult.

Doctor's Name: MCRN:

Doctor's Signature: Date:

File this document in patient notes - Document management plan. Time Completed:

(ALWAYS USE CLINICAL JUDGEMENT)



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Patient Addressograph

Sepsis Antibiotic Prescription

Source (tick all that apply) Respiratory Urinary Abdominal Cellulitis CNS Other

Date	Antibiotic	Dose	Route	Time	Signature	MCRN

Sepsis Fluid Resuscitation Prescription

Date:

Fluid	Volume	Rate	Assessment Hypotensive, Replete or Overloaded	Signature & MCRN	Time	Sign & PIN
Compound Sodium Lactate or Normal Saline 0.9%*	500 mLs	15 Mins			Start	Signature 1
					Finish	Signature 2
Compound Sodium Lactate or Normal Saline 0.9%*	500 mLs	15 Mins			Start	Signature 1
					Finish	Signature 2
Compound Sodium Lactate or Normal Saline 0.9%*	500 mLs	15 Mins			Start	Signature 1
					Finish	Signature 2
Compound Sodium Lactate or Normal Saline 0.9%*	500 mLs	15 Mins			Start	Signature 1
					Finish	Signature 2

* √ Tick infusion of choice

Use Normal Saline 0.9% in patients with hyperkalaemia

Patients with **Severe Sepsis / Septic Shock** who develop respiratory compromise should not be managed with diuretics.

Consider using an infusion pump for fluid management for patients **at risk of** respiratory compromise.

Further information

www.health.gov.ie/patient-safety/ncec

www.hse.ie/sepsis

www.hse.ie