

## Care of Sepsis Patient

### Sepsis

1. Suspected source of clinical infection
2. Two or more SIRS criteria
  - Bedside team follows local sepsis screening requirements
  - eCare monitors patient, reviews information and collaborates on care

### Severe Sepsis

1. Suspected source of clinical infection
2. Two or more SIRS criteria
3. Presence of at least one sepsis-induced organ dysfunction
  - Bedside team follows local sepsis screening requirements
  - eCare may contact bedside team to obtain “time zero” if unable to confirm via EHR
  - eCare will review orders for a repeat lactate level and assist with ordering as applicable
  - eCare physician will respond to concerns or additional needs presented by the bedside and/or eCare nursing teams

### Septic Shock

1. Presence of Severe Sepsis, as noted above
2. Sepsis-induced hypoperfusion persisting despite adequate fluid resuscitation as evidenced by SBP <90, MAP <65, decrease in SBP by 40 points OR lactate >4
  - Bedside team follows local sepsis screening requirements
  - eCare will review orders for a repeat lactate level and assist with ordering as applicable
  - If a volume status or tissue perfusion reassessment is warranted per eCare clinical review, the eCare physician will perform and document the reassessment as indicated
  - eCare physician will work with bedside team to complete the reassessment and document notes for EHR interfacing
  - eCare physician will communicate with the bedside team re: orders and/or care plan updates following the reassessment
  - eCare physician will notify the bedside attending or consulting physician of any major changes in the patient condition or plan of care