# Nursing Sepsis Management [3287]

## IV / Central Line Access - Hemodynamics Monitoring **IV / Central Line Access** [X] Initiate and maintain IV [X] Insert peripheral IV Routine, Once As needed immediately insert 2 large bore (at least 20 gauge) peripheral IV lines or call attending MD for STAT central line, intraosseus (IO) or 10 mL, intravenous, every 12 hours scheduled [X] sodium chloride 0.9 % flush 10 mL, intravenous, PRN, line care [X] sodium chloride 0.9 % flush **Hemodynamic Monitoring** \*\*If patient has IJ or Subclavian Central Venous Line\*\* [] Hemodynamic Monitoring - CVP Routine, Every hour For 999 Occurrences Measure: CVP Nursing Nursing [X] Vital signs - T/P/R/BP Routine, Every hour For 3 Hours Monitor every 1 hour for 3 hours, or more frequently as indicated by clinical condition and assessment findings, then re-evaluate frequency of vitals assessment. [X] Pulse oximetry Routine. Daily Current FIO2 or Room Air: Place Sp02 monitor (near infrared spectroscopy) [X] Daily weights Routine, Daily Notify provider if weight is over 5 pounds from initial dry weight [X] Activity: Bedrest initially then progress as tolerated Routine, Until discontinued, Starting S Specify: Other activity (specify) Other: Bedrest initially then progress as tolerated [X] Patient education Routine, Prior to discharge Patient/Family: Both Education for: Other (specify) Specify: Sepsis Education **Notify** [X] Notify Provider: Routine, Until discontinued, Starting S, -for MAP LESS than 65 or GREATER than 80 -for heart rate LESS than 60 or GREATER than 120 -for urine output LESS than 30 mL/hour -immediately for any acute changes in patient condition (mental status, vital signs) Initial Management of Suspected Sepsis

**Laboratory - Microbiology** 

[X] Blood culture x 2 "And" Linked Panel

<sup>\*\*</sup>unselect if already done within past 24 hours\*\*

[X] Blood Culture (Aer	obic & Anaerobic)	Once, Blood Collect before antibiotics given. Blood cultures should be ordered x2, with each set drawn from a different peripheral site. If unable to draw both sets from a peripheral site, please call the lab for assistance; an IV line should NEVER be used.	
[X] Blood Culture (Aer	obic & Anaerobic)	Once, Blood Collect before antibiotics given. Blood cultures should be ordered x2, with each set drawn from a different peripheral site. If unable to draw both sets from a peripheral site, please call the lab for assistance; an IV line should NEVER be used.	
[X] Urinalysis screen and r	microscopy, with reflex to cu	Ulture Once For 1 Occurrences Specimen Source: Urine Specimen Site:	

### **Laboratory - Microbiology**

<sup>\*\*</sup>unselect if already done within past 24 hours\*\*

[X] Blood culture x 2	"And" Linked Panel
[X] Blood Culture (Aerobic & Anaerobic)	Once, Blood Collect before antibiotics given. Blood cultures should be ordered x2, with each set drawn from a different peripheral site. If unable to draw both sets from a peripheral site, please call the lab for assistance; an IV line should NEVER be used.
[X] Blood Culture (Aerobic & Anaerobic)	Once, Blood Collect before antibiotics given. Blood cultures should be ordered x2, with each set drawn from a different peripheral site. If unable to draw both sets from a peripheral site, please call the lab for assistance; an IV line should NEVER be used.
[X] Urine Culture and Urinalysis	"And" Linked Panel
[X] Urine culture	Once For 1 Occurrences, Urine
[X] Urinalysis	STAT For 1 Occurrences

Laboratory - Microbiology
\*\*unselect if already done within past 24 hours\*\*

[X] Blood culture x 2		"And" Linked Panel
[X] Blood Culture	(Aerobic & Anaerobic)	Once, Blood Collect before antibiotics given. Blood cultures should be ordered x2, with each set drawn from a different peripheral site. If unable to draw both sets from a peripheral site, please call the lab for assistance; an IV line should NEVER be used.
[X] Blood Culture	(Aerobic & Anaerobic)	Once, Blood Collect before antibiotics given. Blood cultures should be ordered x2, with each set drawn from a different peripheral site. If unable to draw both sets from a peripheral site, please call the lab for assistance; an IV line should NEVER be used.
[X] Urinalysis		Once
[X] Urine culture		Once, Urine

#### **Laboratory - STAT**

<sup>\*\*</sup>unselect if already collected\*\*

[X] Lactic acid level, SEPSIS - Now and repeat 2x every 3	Now and repeat 2x every 3 hours For 3 Occurrences
hours	STAT - SPECIMEN MUST BE DELIVERED IMMEDIATELY
	TO THE LABORATORY. Repeat lactic acid in 3 hours.
[X] CBC with platelet and differential	STAT For 1 Occurrences
[X] Comprehensive metabolic panel	STAT For 1 Occurrences
[X] Prothrombin time with INR	STAT For 1 Occurrences
[X] Partial thromboplastin time, activated	STAT For 1 Occurrences

Laboratory - STAT

**unselect if already collected**	
IVI Lastic sold level SERSIS. New and report 2v every 2	New and report 2v every 2 hours For 2 Occurrences
[X] Lactic acid level, SEPSIS - Now and repeat 2x every 3 hours	Now and repeat 2x every 3 hours For 3 Occurrences STAT - SPECIMEN MUST BE DELIVERED IMMEDIATELY
Hours	TO THE LABORATORY. Repeat lactic acid in 3 hours.
[X] CBC with platelet and differential	STAT For 1 Occurrences
[X] Comprehensive metabolic panel	STAT For 1 Occurrences
[X] Prothrombin time with INR, I-Stat	STAT For 1 Occurrences
[X] Partial thromboplastin time, activated	STAT For 1 Occurrences
Laboratory, STAT	
Laboratory - STAT  **unselect if already collected**	
unselect if already collected	
[X] Lactic acid, I-Stat - Now and repeat 2x every 3 hours	Now and repeat 2x every 3 hours For 3 Occurrences
	STAT. Repeat lactic acid in 3 hours.
[X] CBC with platelet and differential	STAT For 1 Occurrences
[X] Comprehensive metabolic panel	STAT For 1 Occurrences
[X] Prothrombin time with INR, I-Stat	STAT For 1 Occurrences
[X] Partial thromboplastin time, activated	STAT For 1 Occurrences
Consults	
Consults - Not HMSTJ or HMTW	
[X] Consult to Sepsis Response Team	Does the patient display signs and symptoms suspicious of infection at this time? Yes
	Reason for Consult? Evaluate patient for sepsis and initiation of Sepsis Acute Care Initial Treatment Protocol

STAT, Once For 1 Occurrences

Consults HMSTJ Only (Selection Required)

[X] Notify Rapid Response Team