



SUSPECTED SEPSIS

ADULT

PEDIATRIC

BLS Procedures

- Assess Vitals.
- Obtain SPO2.
- Oxygen, Titrate to SPO2 of 94% or higher.
- Assist Ventilations, if needed.
- Assess Temperature.
- Blood Glucose Check.

ALS Standing Orders

- Follow BLS procedures if applicable.
- Obtain ECG & 12-lead.
- ETCO2.
- IV/IO Access.

Sepsis Triage Criteria

A **“Sepsis Alert”** shall be made to the receiving hospital for patients with a suspected source of infection, meeting at least 2 of the following:

- Temperature greater than 100.4°F (38°C) or less than 96.8°F (36°C)
- Respiratory rate greater than 20 breaths/min
- Heart rate greater than 90 BPM.

The **“Sepsis Alert”** shall be documented in the epcr.

A **“Sepsis Alert”** shall be made to the receiving hospital for patients with a suspected source of infection, meeting at least 2 of the following:

- Temperature of greater than 101.3°F (38.5°C), or less than 96.8°F (36°C)
- Elevated Respiratory Rate for age
- HR at least 20 bpm above age adjusted cutoff; or bradycardia if <1 year old.

The **“Sepsis Alert”** shall be documented in the epcr.

Normal Vital Signs				
Age	SBP	MAP	HR	RR
NB	60-100	>30	100-160	30-60
4MO	70-100	>30	105-160	30-60
6MO	70-100	>30	110-160	24-38
1	72-105	>30	90-150	22-30
2	74-110	>35	58-140	22-30
3	76-115	>39	85-140	22-30
4	78-115	>42	75-120	22-26
5	80-115	>45	70-115	20-24
6	82-120	>47	70-115	20-24
7	84-120	>50	70-110	16-22
8	86-120	>50	70-110	16-22
9	88-120	>50	65-105	16-22
10+	90-120	>50	60-100	16-22



Treatment

Utilize ETCO2, and Document numerical value.

Lactated Ringer's 500 mL IV/IO

- May repeat to a max of 1500 mL, if blood pressure is less than 90mmHg, or heart rate remains above 100:

If systolic blood pressure is persistently less than 90 mmHg or MAP less than 65, following at least one (1) Lactated Ringer fluid bolus:

Push Dose Epinephrine 20 mcg IV/IO

May repeat every 3 minutes.

In febrile patients, with temperature greater than 100.4 °F(38 °C)

Consider Acetaminophen 15 mg/kg IV/PO

- Max dose of 1,000 mg
- No repeat.

Utilize ETCO2, and Document numerical value.

Lactated Ringer's 20 mL/kg IV/IO

- May repeat as necessary to achieve target blood pressure and heart rate
- Max of 1500 mL.

If blood pressure is persistently less than age adjusted cutoff, following at least one (1) Lactated Ringer fluid bolus:

Push Dose Epinephrine 10 mcg IV/IO

- May repeat every 3 minutes, until signs of poor perfusion have improved.

In febrile patients, with temperature greater than 101.3 °F(38.5 °C)

Consider Acetaminophen 15 mg/kg IV/PO

- Max dose of 1,000 mg
- No repeat.

Ketamine cannot be administered via IV to patients receiving a Lactated Ringer's infusion.

Special Considerations

- Use caution and watch for signs of fluid overload in patients with known CHF, or chronic kidney disease.
- Normal Saline fluid bolus can be used in place of Lactated Ringers (LR), if LR's are not immediately available.

Base Hospital Orders Only