

SEPSIS ALERT CRITERIA

October 2016

Suspected Infection

AND

At least two of the following

- * Altered Mentation
(Any GCS<15, confused, agitated, etc. **changed from baseline**)
- * Respiratory Rate greater than or equal to 20 breaths per minute
- * Heart rate >90
- * Systolic Blood Pressure less than or equal to 100 mm Hg

AND

End Tidal CO₂ less than or equal to 25 mm Hg

SEPSIS ALERT MANAGEMENT

EMT Level

- 1) Work to minimize scene time Less than 10 Minutes

PARAMEDIC Level

- 2) Notify closest appropriate facility of Sepsis Alert
- 3) Prepare to administer Normal Saline Bolus
 - * Do not attempt IV access more than 2 times
 - * Consider early IO placement for volume resuscitation
- 3) Give 500 mL Normal Saline Bolus wide open
 - * Consider repeating bolus if patient improves clinically
 - * May give up to 2000 mL without contacting Medical Direction
- 4) Consider vasopressors if unresponsive to fluid therapy
 - * Contact Medical Director On Call Standing orders
 - * Norepinephrine: start at 4 mcg/min IV, titrate to SBP 100; max 12 mcg/min IV
-----OR-----
 - * Dopamine: start at 10 mcg/kg/min IV, titrate to SBP 100; max 20 mcg/kg/min IV

References

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4. Hunter CL, Silvestri S, Ralls G, Stone A, Walker A, Papa L. A prehospital screening tool utilizing end-tidal carbon dioxide predicts sepsis and severe sepsis. Am J Emerg Med 2016.
5. Polito CC, Isakov A, Yancey AH, 2nd, et al. Prehospital recognition of severe sepsis: development and validation of a novel EMS screening tool. Am J Emerg Med 2015;33:1119-25.
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