Nursing/Triage Workflow → Yes to vitals (#1) & screen (#2) BPAs → Huddle BPA

BestPractice Advisory - Optime, Chamberlain Three "TreeFiddy"

Sepsis Alert (1)

⚠ SEPSIS HUDDLE REQUIRED

Central capillary refill: **(!) 3 seconds**
High risk sepsis criteria: **(!) Central line**
Level of consciousness: **(!) Crying, inconsolable;Drowsy**

1. Notify team attending that sepsis huddle is required.
2. Click "document" to document results.

If you need to document later:
1. Click "I will alert MD now, document after"
2. Document using "peds sep huddle" section in the triage navigator.

| Document | Do Not Document | ⊞ Flowsheets |

❗Acknowledge Reason

| I will alert MD now, document after |

✓ Accept

BPA #3

Huddle occurs
Documented in nursing flowsheet
Can document later in emergent cases
→"document after" allows for clinical workflow to
continue without a hard stop for documentation

Sepsis huddle results =
clinical assessment from huddle

Nursing/Triage Workflow → Yes to vitals (#1) & screen (#2) BPAs → Huddle BPA

Geisinger
Janet Weis
Children's Hospital

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Sepsis Alert (1)

⊕ SEPSIS HUDDLE REQUIRED

Central capillary refill: (!) 3 seconds
High risk sepsis criteria: (!) Central line
Level of consciousness: (!) Crying, inconsolable;Drowsy

1. Notify team attending that sepsis huddle is required.
2. Click "document" to document results.

If you need to document later:
1. Click "I will alert MD now, document after"
2. Document using "peds sep huddle" section in the triage navigator.

[Document] [Do Not Document] ⊞ Flowsheets

⊕ Acknowledge Reason

[I will alert MD now, document after]

BPA #3

Huddle occurs
Documented in nursing flowsheet
Can document later in emergent cases
→"document after" allows for clinical workflow to continue without a hard stop for documentation

Sepsis huddle results =
clinical assessment from huddle

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Sepsis Alert (1)

⊕ SEPSIS HUDDLE REQUIRED

Central capillary refill: (!) 3 seconds
High risk sepsis criteria: (!) Central line
Level of consciousness: (!) Crying, inconsolable;Drowsy

1. Notify team attending that sepsis huddle is required.
2. Click "document" to document results.

If you need to document later:
1. Click "I will alert MD now, document after"
2. Document using "peds sep huddle" section in the triage navigator.

[**Document**] [Do Not Document] ⊞ **Flowsheets** Collapse

Sepsis Huddle Results

Sepsis Huddle Results

[Suspect sepsis] [Sepsis watcher] [Low suspicion for sepsis]

Acknowledge Reason

[I will alert MD now, document after]

BPA #4

✓ Accept

Suspect Sepsis → triggers *Provider BPA* for ORDER SET

Provider Workflow → Yes to Huddle → Peds Sepsis ORDER SET BPA

Note
If provider does not open the order set, the "acknowledge reason" needs to be answered to stop BPA from firing each time providers enters chart

Sepsis Huddle Results documented from nursing workflow
"Suspect Sepsis" = Triggers PROVIDER BPA → Open EM peds sepsis order set