

Methods – Building the CDSS

- Automated EHR-based screening tool → interruptive alerts
- EHR-based huddle documentation form
- Code Sepsis Poster



Interruptive Alert Facilitates Early Recognition

Sepsis Alert

- Simultaneously fires to bedside RN, charge RN cell phone, and PICU fellow pager.
- Outlines next steps.
- Streamlines documentation for RNs.

Discern Notification Message


Subject: **Your Patient XTEST, ACUTESEPSIS May Have Sepsis: Action Required**
Event Date/Time: 03/02/22 17:49:37

Your Patient May Have Sepsis: Action Required
NAME: XTEST, ACUTESEPSIS
DATE: March 02, 2022 17:49:37 MST
AGE: 5 Years
LOCATION: PC_3SE; 3023

Criteria:
HR: **215 bpm**, 03/02/22 17:49:00
Temperature: **39.8° C**, 03/02/22 17:49:00
SBP: **45 mmHg**, 03/02/22 17:49:00

Actions to be taken:

- **Immediately notify primary team of positive sepsis alert**
- **Use chain of command page "come to bedside within 10 minutes" to initiate bedside huddle**
- **Document the provider notification and sepsis huddle using the button below or in iView**



DOCUMENT HUDDLE

[Click here](#) to view the Suspected Sepsis Algorithm

Delete Close

Pediatric Sepsis Huddle

Sepsis Huddle Initiated

Yes
 No

Sepsis Algorithm Reference Text Attached

Time Sepsis Huddle Initiated

:

Sepsis Huddle Participants

- Bedside RN
- Charge Nurse
- Resident
- Nurse Practitioner
- Fellow
- Attending Physician at bedside
- Attending Physician by phone
- Patient's caregiver/guardian
- Other:

Code Sepsis Called

Yes
 No

Why No Code Sepsis Called

- Team not concerned for septic shock
- Findings consistent with baseline
- Already adequately treated for sepsis
- Intervention provided, no code called
- Other:

Attendings must participate in all huddles either at bedside or via phone. If you're unsure whether or not the attending was included in the huddle, please ask the Resident, NP or Fellow that responded to alert. Once known, document attending participants

Provider Notification

Notification Reason

Deteriorating Patient/Labs/Imaging/Meds/Orders

- Code blue activation
- Code stroke activated
- Deteriorating patient
- ePod alert
- Medical Emergency Team (MET) activation
- * OB STAT
- Rapid Response
- Sepsis alert
- Unplanned transfer
- Critical lab result
- Lab results
- High blood glucose
- Low blood glucose
- Blood gas results
- Imaging Results
- Medication

Pain/Updates/Vitals

- No orders
- Order clarification
- Pain
- Pain (site)
- Pain worsening
- Conference
- Discharge
- Patient status update
- Patient/parent concern
- Plan of care
- Rounding
- Rounds complete
- TeleHealth
- High Blood Pressure
- Low blood pressure
- High heart rate (Tachycardia)

Vitals/Neuro/Behavioral Health/Restraints

- Low heart rate (Bradycardia)
- High temperature (fever)
- Low temperature
- High respiratory rate (Tachypnea)
- Low respiratory rate
- Low oxygen saturation
- Prolonged capillary refill time
- Agitation
- Change in level of consciousness
- Confusion
- ICP Increasing/elevated
- Irritability
- Seizure
- Stroke like symptoms
- Agitated
- Anxiety

Cardiovascular/Respiratory/GI/GU

- Behavioral Health Concerns
- Irritable
- Restraints
- Chest pain
- Dysrhythmia
- EKG abnormality
- Palpitations
- Airway concern
- Apnea
- Chest tube related problem
- Hypoxia
- Respiratory distress
- Secretion/sputum change
- Trach related problem
- Abdominal concern
- Blood in stool

GI/GU/Fluid status/IV Issues/Skin/Wound

- Constipation
- Diarrhea
- Emesis
- Feeding issues/problems
- Nausea
- Nutritional concern
- Low urine output
- High urine output
- Urinary catheter related problem
- Urinary retention
- Dehydration
- Fluid status update
- IV access
- IV infiltration
- Birth
- Bleeding/hemorrhage OB/GYN
- Eclampsia
- Fetal bradycardia
- Precipitous delivery
- Prolapsed cord
- Severe maternal hypertension
- Shoulder dystocia
- Bleeding/hemorrhage
- Drain related problem
- Itching
- Skin integrity alteration
- Stoma related problem
- Wound related problem

Notification Details

Provider Notified

Unable to Reach Provider

Left message to contact

Code Sepsis Poster Facilitates Resuscitation

- ★ Prompt
- ★ Shared Mental Model
- ★ Documentation aid

MandID:




Date: _____

CODE SEPSIS

Huddle Time ____:____ Age ____ Weight ____


Administer Antibiotics by ____:____ Allergies _____
(within 1 hour of huddle)

Attending name (phone or present): _____

Within		Time Completed		
 <p style="font-size: 12px; color: red; font-weight: bold;">5 min</p>	<input type="checkbox"/> Document sepsis huddle <input type="checkbox"/> Apply oxygen regardless of SpO ₂ <input type="checkbox"/> Obtain I.V. access <small>(Charge RN Vocera "urgent call I.V. team")</small>	<table border="1" style="width: 100%; height: 40px; border-collapse: collapse;"> <tr><td style="width: 50%;"></td><td style="width: 50%;"></td></tr> </table>		
 <p style="font-size: 12px; color: red; font-weight: bold;">15 min</p>	<input type="checkbox"/> Complete sepsis power plan <small>○ For ED use: ED PED Severe Sepsis</small> <small>○ All others use: PEDCC Sepsis Limited</small> <input type="checkbox"/> Draw iSTAT labs & blood cultures <input type="checkbox"/> Begin 1st fluid bolus via push-pull or pressure bag of 20 ml/kg	<table border="1" style="width: 100%; height: 40px; border-collapse: collapse;"> <tr><td style="width: 50%;"></td><td style="width: 50%;"></td></tr> </table>		
 <p style="font-size: 12px; color: red; font-weight: bold;">60 min</p>	<input type="checkbox"/> Start I.V. antibiotics after cultures* <small>* Don't delay administration for cultures</small> <small>* Call pharmacy via Vocera to hand deliver 1st dose of antibiotics</small> <input type="checkbox"/> Complete fluid resuscitation 1 st fluid bolus volume _____ 2 nd fluid bolus volume* _____ 3 rd fluid bolus volume* _____ <small>* if clinically indicated</small> <input type="checkbox"/> Start vasopressors for persistent hypotension Goal systolic blood pressure _____	<table border="1" style="width: 100%; height: 40px; border-collapse: collapse;"> <tr><td style="width: 50%;"></td><td style="width: 50%;"></td></tr> </table>		

SUGGESTED LABS

<input type="checkbox"/> iSTAT CBG (blood gas)	<input type="checkbox"/> UA w/ Microscopic
<input type="checkbox"/> iSTAT Lactic Acid	<input type="checkbox"/> Type and Screen
<input type="checkbox"/> Blood Culture	<input type="checkbox"/> PT, PTT, INR, FIB
<input type="checkbox"/> CBC w/ Manual Diff	<input type="checkbox"/> Mixed Venous Gas
<input type="checkbox"/> CMP or RFP	



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