CODE SEPSIS team to be assigned each shift

CODE SEPSIS PROCESS FLOW 5/22

Pt arrives to ED

Vital signs and LOC documented in triage

NEWS Score Assigned

NEWS **>=5**

No

Proceed with normal protocol

Yes!

Tracker Board Notification Autopopulates NEWS Alert; RN to immediately notify physician and bring patient back for assessment at designated area

Determined to be CODE SEPSIS

NOT determined to be CODE SEPSIS

Proceed with normal protocol

CODE SEPSIS called over VOCERA v. overhead if Vocera not available

Pt roomed if not already, ED Physician initiates SEPSIS Powerplan

CODE SEPSIS Team paramedic (or RN) to

- Place 2 Large bore IVs
- Draw blood cultures and lactic acid

Returns to previous duties

Primary RN functions as facilitator/recorder

Code Sepsis RN gathers and hangs STAT antibiotic, IVF as ordered; returns to previous duties

Primary RN completes Sepsis Bundle Checklist

- If IVF 30cc/kg ordered, records BP x 2 in hour after completed
- Determines time repeat lactic acid is due

ED Physician hand off to Hospitalist v. Intensivist

*Attention to perfusion reassessment time and who will document

ED RN hand off with checklist for continued care

All CODE SEPSIS Alerts to be recorded by ANM (addressing fallouts) and reviewed weekly by Nurse Manager and Medical Directors