IP SIRS Alert Training Sheet – Intern Survival Guide

SIRS ALERT Best Practice Alert (BPA) is an early warning system in Epic triggered by vital signs and a nursing sepsis screening that identifies patients at risk for decompensation and/or sepsis. A provider should assess the patient at the bedside <u>within 30 minutes</u>.

About 10% of patients that trigger the SIRS Alert will expire during their hospitalization; rapid care escalation and assessment of these patients is imperative

What triggers the SIRS Alert for patients ≥ 18 years-old ?

- A SIRS Alert fires when **at least 3** of the following 8 criteria have been met & entered in Epic within 1 hour:

<u>5 Vital Sign Criteria:</u>

1. **SBP** < 90
2. **HR** > 90
3. **O_2 Sat** < 90
4. **RR** > 20
5. **Temp** ≥ 38 (100.4 ◦F) or ≤ 35.8 (96.4 ◦F)

+

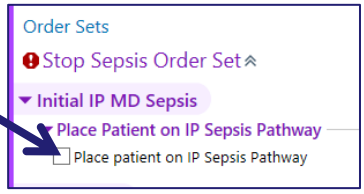
<u>3 Sepsis Screening Questions:</u>

1. New or worsening infection?
2. Rigors present?
3. Change of mental status from last assessment

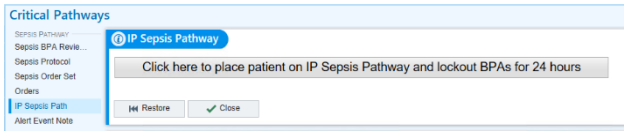
- The nurse will contact you when a patient meets SIRS Alert criteria. Upon being notified, you must:
  - Go to the patient's bedside to examine the patient within <u>**30 minutes**</u>
  - If a patient is septic, initiate the Stop Sepsis Protocol using the **Sepsis Order Set**
  - Communicate your plan to the nurse
  - Document your findings, initial assessment, treatment plan and patient disposition in Epic
  - Reassess the patient <u>**within 4 hours**</u> of the sepsis protocol initiation & document your findings
  - Coordinate & communicate outstanding elements of the sepsis bundle during ICU handoffs & shift changes

Options for Placing Patient on Sepsis Pathway

1. <u>Via Stop Sepsis Order Set</u> (Strongly recommended): This option should be used for majority of septic patients.
2. <u>Via IP Sepsis</u>: Found in Critical Pathways, this option can be used when there is concern for sepsis after interventions have already been started.



Both options lock out the **SIRS Alert & RN Sepsis Screening** for **24 hours**
All providers should BOTH icons on their Epic Patient Lists



MSHS Sepsis Care Bundle (Patients ≥ 18 years-old)

<u>Within 1 hour of placement on pathway</u>

- Draw Blood Cultures x2
- Draw Initial Lactate
- Initiate Antibiotics
- Initiate 1L fluids

<u>Within 3 hours of placement on pathway</u>

- Reassess blood pressure upon completion of fluids to assess for sustained hypotension
- Complete 30 ml/kg if lactate ≥ 4 and/or sustained hypotension

<u>Within 4 hours of placement on pathway</u>

- Repeat lactate if initial lactate > 2
- Complete reassessment

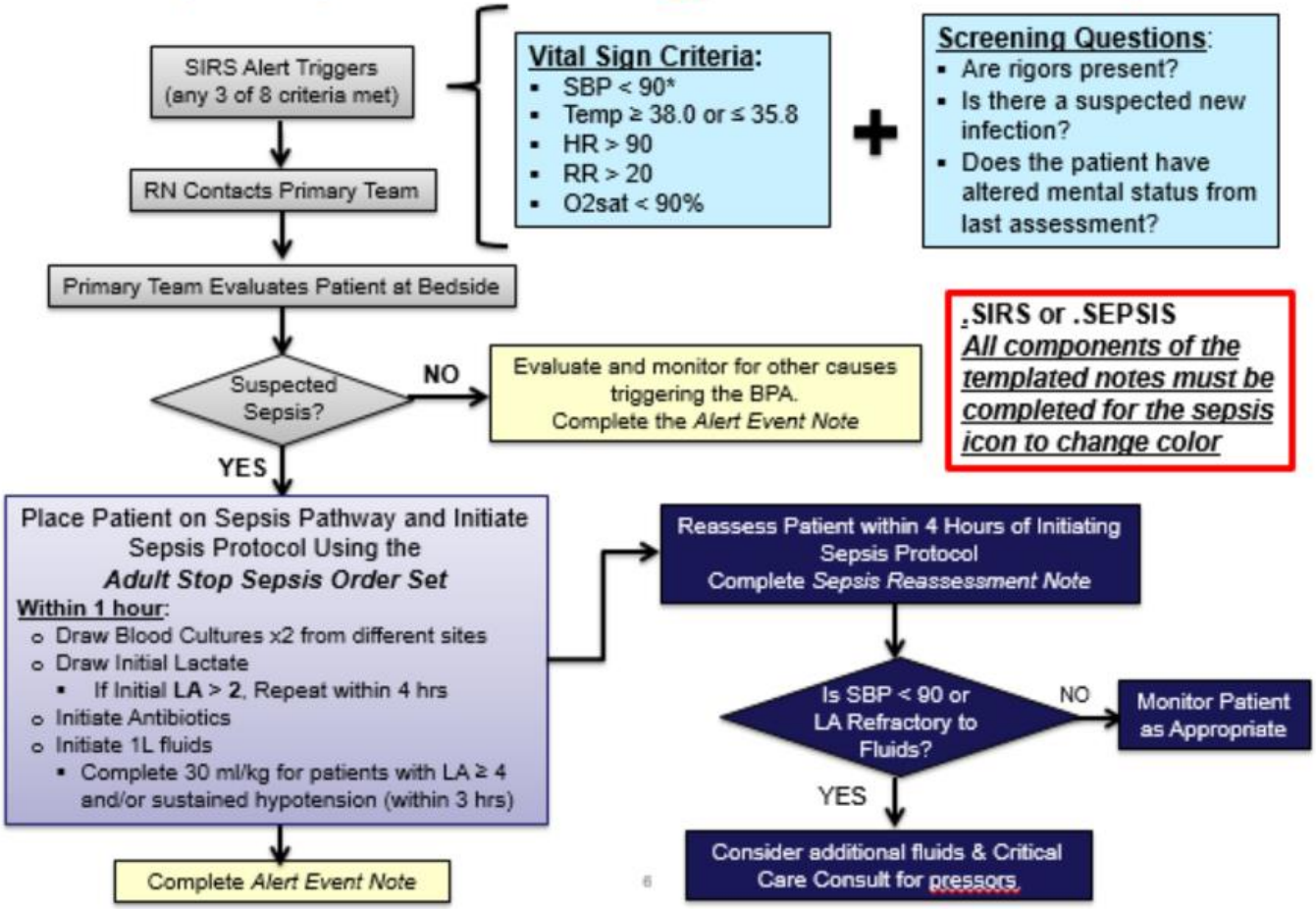
<u>Within 6 hours of placement on pathway</u>

- Initiate vasopressors for septic shock

Updated 5/16/19

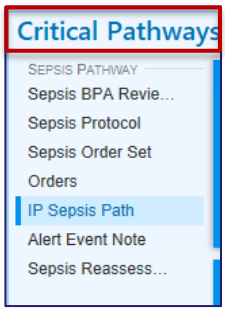
IP SIRS Alert Training Sheet – Intern Survival Guide

10.2% (1 in 10)* Patients that "Trigger" a SIRS Alert will Expire



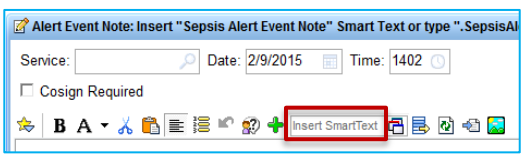
Critical Pathways

- Critical Pathways provides quick, easy access to the Epic tools to treat & manage septic patients, including the Sepsis Order Set, documentation templates, MSHS Sepsis Protocol Response Guidelines, and more
- Access Critical Pathways by double-clicking any SIRS Alert icon (below), or by clicking *Critical Pathways* from the navigator on the left-hand side of your screen for septic patients that may have not met SIRS Alert criteria



SIRS Alert Documentation

- Complete & timely documentation of assessment, plan of care, and reassessment is critical!
- Complete the **Alert Event Note** for all patients meeting SIRS Alert criteria **or** manually placed on the *Sepsis Pathway*
- Complete the **Sepsis Reassessment Note** (within 4 hrs of sepsis protocol initiation) for all septic patients
- Access SIRS Alert documentation via Critical Pathways or by typing "sirs" or "sepsis" in the box labeled "Insert SmartText"



IP SIRS Alert Training Sheet – Intern Survival Guide

What do the icons/colors within the SIRS Alert column on the Patient List mean?

- Icons/colors progress based on **provider documentation**; hover over the icons to see what needs to be completed

Status	Action	ED Icon*	IP Icon^
Patient met alert criteria & is at-risk for Sepsis and/or decompensation	RN must **ESCALATE** care Provider must **EVALUATE** patient immediately		
Provider evaluated patient & placed patient on Sepsis Pathway	RN & Provider need to **DELIVER** care by initiating the sepsis bundle Provider needs to **DOCUMENT** initial assessment in the *ED Progress Note or IP Alert Event Note*		
Provider documented *Sepsis*, *Severe Sepsis*, or *Septic Shock* in the *ED Progress Note* / *IP Alert Event Note*	RN & Provider need to continue sepsis interventions &, upon completion of fluid resuscitation, **REASSESS** patient		
Patient was placed on Sepsis Pathway > 3 hours ago	RN needs to ensure **REPEAT** LA was drawn (if initial > 2) & **REASSESS** & document blood pressure Provider needs to **REASSESS** patient & complete the *Sepsis Reassessment Note* within 1 HOUR		
Provider completed *Sepsis Reassessment Note* for patient with diagnosis of *Sepsis*, *Severe Sepsis*, or *Septic Shock*	RN & Provider need to **MONITOR** patient with **SEPSIS** diagnosis		
Provider evaluated patient & documented *SIRS/Other Diagnosis* (not sepsis)	RN & Provider need to **MONITOR** high-risk patient		

- After a column turns green, it will revert to red if the patient meets SIRS Alert criteria again after the respective lockout periods (**24 hrs** for patients on sepsis pathway, **6 hrs** for non-sepsis diagnosis)
- Icons with **black*** text = patient located in ED when alert criteria were met and/or ED Provider placed patient on Sepsis Pathway ; Icons with **white^** text = patient located on inpatient unit when alert criteria were met and/or an IP Provider placed the patient on Sepsis Pathway (including ED Boarders)

ED-Inpatient Hand-Off

- If a patient is placed on the Sepsis Pathway in the ED, the Admission Hand-off documentation will indicate this. Any outstanding or pending sepsis tasks will be documented under the **Pending Sepsis-Related Tasks** section.

Comfort Measure Order

- A Comfort Measure Order will suppress the Sepsis Screening and SIRS Alert BPAs. This should only be placed if Goals of Care have been finalized, documented, and the patient has been made Comfort Care.