# Sepsis

**For patients with suspected sepsis (i.e., signs suggestive of sepsis including fever, tachycardia, suspected infection)**

## History
- Age (common in elderly and very young)
- Presence and duration of fever
- Previously documented infection or illness (UTI, pneumonia, meningitis, encephalitis, cellulitis, or abscess)
- Recent surgery or invasive procedure
- Immunocompromised
- Bedridden or immobile patients
- Prosthetic or indwelling devices
- Immunization status

## Signs and Symptoms
- Hyper or hypothermia
- Rash or excessive bruising
- Chills
- Myalgia
- Markedly decreased urine output
- AMS
- Delayed capillary refill
- Hypo/Hyperglycemia

## Differential
- Shock (hypovolemic or cardiogenic)
- Dehydration
- Hyperthyroidism
- Hypothyroidism
- Medication or drug interaction
- Non-septic infection
- Allergic reaction or anaphylaxis
- Toxicological emergency
- Hyperthermia/heat stroke
- DKA/HHS

## Pearls
- Early recognition of sepsis allows for attentive care and early administration of antibiotics.
- Aggressive IV fluid therapy is the most important prehospital treatment for sepsis. Suspected sepsis patients should receive repeated fluid boluses (to a Maximum of 2L) while being checked frequently for signs of pulmonary edema, especially in patients with a known history of CHF or ESRD on dialysis. STOP fluid administration in the setting of pulmonary edema.
- Attempt to identify source of infection (e.g., skin, respiratory, etc.).

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<th>Consider appropriate PPE and infection control measures</th>
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<tr>
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<td>Temperature measurement</td>
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<td>Blood Glucose</td>
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<td>Establish IV/IO</td>
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<td>Cardiac monitor</td>
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<td>EtCO₂ monitoring, if available</td>
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**Obvious or suspected infection AND any TWO of the following criteria:**
- EtCO₂ ≤ 25
- AMS with GCS ≤ 13
- Systolic blood pressure ≤ 100mmHg

**Normal Saline bolus 500ml IV/IO**

- Reassess patient for criteria above
- Repeat 500ml bolus to a Maximum 2L as long as criteria above exists, unless concern for fluid overload

*See Pearls*

**Declare a Sepsis Alert**

- Hypoglycemia
- Hyperglycemia

**Notify receiving facility. Consider Base Hospital for medical direction**