

# Stop Sepsis Bundle Guidelines

Strategies to Timely Obviate the Progression of Sepsis- UMDNJ University Hospital



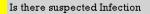
If 2 or more of the following criteria:

T>38.3C/100.9F or <36C/96.8

Heart Rate >90

Respiratory Rate>24 or PaCO2<32

WBC>12K or <4K or >10% bands



Plus

Lactate >4

OR

SBP ≤ 90

OR

at least 1 sign of organ dysfunction

## Early Goal Directed Therapy

- Initiate Sepsis Orders and Call ICU
- Consent patient for HIV test

Maintain SBP>90

Hour

MAP>65

- Place Central Line in IJ or SC for CVP and ScVO2 monitoring within 2 hours
  - Administer Supplemental O2 or Mechanical Ventilation; Place foley with temp sensor

ScVO2<70

- Initiate Broad Spectrum Antibiotics within 1 hours imipinem and vancomycin OR aztreonam, vancomycin, and clindamycin
- Initiate Insulin therapy to maintain glucose 80-110mg/dl

if SBP<90 or MAP <65

#### if CVP <8 Maintain CVP 8-10 Administer 500cc NS bolus until CVP 8-10

- - 1. Norepinephrine 2-30mcg/min (add/switch pressors per MD) 2. Dopamine 5-20mcg/kg/min 3. Phenylephrine 20-200mcg/min (if HR >120)
  - 4. Vasopressin 0.01-0.04U/min (must use with another pressor)
  - 5. Epinephrine 1-10mcg/min

Place an arterial line

Administer Decadron 2mg IVq6

Send Cortisol Stimulation Test



**Bundle Completion** Re-check lactate and electrolytes

If Hemoglobin <10 transfuse 1-2 Units PRBC If Hemoglobin ≥10 intubate and mechanically ventilate consider 1. Dobutamine 2.5-20mcg/kg/min (if SBP>90)
2. Dopamine 5-20mcg/kg/min

### **Keys to Successful Implementation of the Bundle**

- Initiate CVP/ScVO2 monitoring within 2 hours
- Administer Broad Spectrum Antibiotics within 1 hour
- Achieve and Maintain Hemodynamic Goals within 6 hours: CVP 8-10, SBP>90 or MAP>65, and ScVO2>70

### UMDNJ University Hospital Sepsis Committee

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