Post-Acute Situation Background Assessment Recommendation (SBAR) for Sepsis

**Systemic Inflammatory Response Syndrome (SIRS)**

*Sepsis* = two or more SIRS criteria and suspected or documented infection

*Communicate immediately with attending provider when a patient screens positive for sepsis*

**Situation:**
1. ___________ has met **two or more** of the following SIRS criteria (circle only those that apply) and has a confirmed or suspected source of infection.
   - Temperature greater than 38°C (100.4°F) or less than 36°C (96.8°F)
   - Heart rate greater than 90 beats per minute
   - Respiratory rate greater than 20 breaths per minute
   - White blood cell count (WBC) is greater than 12,000; less than 4,000 or greater than 10 percent bands

**Background:**
1. Patient was admitted with _______________ and now has two or more **positive** SIRS criteria (see above).
2. Suspected source of infection (circle those that apply):
   - Recent surgery, trauma, or open wound(s) __________
   - Respiratory symptoms (i.e., productive cough, abnormal chest x-ray, decrease in pulse oximetry reading (SaO2) __________
   - Central line or dialysis catheter __________
   - Urinary tract infection, recent use of a Foley catheter __________
   - Unusual gastrointestinal (GI) symptoms __________
   - Other symptoms of infection __________

**Assessment:**
1. Is patient hypotensive ________ (systolic blood pressure 100 mm Hg or less)
2. Patients mental status is: Normal/Abnormal (compared to baseline)
3. Most recent weight is: __________
4. Pulse oximetry reading (SaO2) is now __________. Previous reading __________
5. Urine output is ________ mL per hour or __________ over the last 8 hours

**Recommendations:**
1. Based on positive screening criteria notify attending provider.
2. Obtain orders for lactate level and blood cultures if possible, but administer broad spectrum antibiotic(s) and 30mL/kg crystalloid fluid with rapid infusion even if blood work not done.
3. Consider transfer to an acute care facility based on patient presentation, availability of resources, and response to interventions.

**References:**

This material was prepared by Health Services Advisory Group, the Medicare Quality Improvement Organization for Arizona, California, Florida, Ohio, and the U.S. Virgin Islands, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. Publication No. QIN-1150W-XC-12012016-01