

Evaluation for Severe Sepsis Screening Tool

Instructions: On inpatient nursing units, complete screening tool Q8 hours or when a change in patient's clinical status is noted.

Pt Stamp Here

Unit: _____ Date: _____ Time of Screen: ____:____ (24h clock)

RN Name (completing Screen): _____

1. Are any **two** of the following systemic inflammatory response (SIRS) criteria both present and **new** to the patient?

<input type="checkbox"/> Temp > 38 °C	<input type="checkbox"/> HR > 90 bpm	<input type="checkbox"/> WBC > 12,000
<input type="checkbox"/> Temp < 36 °C	<input type="checkbox"/> RR > 20 BPM or PaCO ₂ < 32 mm Hg	<input type="checkbox"/> WBC < 4,000 OR more than 10% bands

2. 2 SIRS? YES ☐ NO ☐

3. IF 2 SIRS YES, Is the patient's history and nursing assessment suggestive of a **new** infection? YES ☐ NO ☐

Possible sources: ☐ pulmonary; ☐ urinary; ☐ acute abdominal; ☐ meningitis; ☐ skin/soft tissue;
☐ bone/joint; ☐ wound; ☐ bloodstream catheter; ☐ endocarditis; ☐ implantable or other device;
☐ other(describe)

4. IF NO - then Stop (Screen completed)

5. IF 2 and 3 are YES, then suspicion of infection is present and patient screened **positive for r/o sepsis**:

a. **Actions:** Continue to Severe Sepsis Screen (next)

6. Are **ANY** of the **following** organ dysfunction criteria present that are not considered to be chronic conditions?

<input type="checkbox"/> Neurological: Subtle or overt change in mental status	<input type="checkbox"/> Metabolic: Serum lactate > 2.0 mmol/L	<input type="checkbox"/> Pulmonary: RR>20 OR ↑O ₂ to maintain SpO ₂ > 90%
<input type="checkbox"/> Cardiac: • SBP <90 mmHg • MAP <65 mmHg • > 40 mmHg decrease in SBP from patient's baseline • Capillary refill > 3 seconds	<input type="checkbox"/> Renal: • UO < .5ml/kg/hr for 2 hrs (or <30 ml per hr for 2 hrs) • Serum creatinine increased by 0.3 gm/dl in past 48 hrs	<input type="checkbox"/> GI: Absent bowel sounds (except recent post op pt)
<input type="checkbox"/> Hematologic: Platelet count <100k	<input type="checkbox"/> Heme/Liver: INR > 1.5 or a PTT > 60 secs	<input type="checkbox"/> Hyperbilirubinemia: Total bilirubin > 4 mg/d

7. If NO ☐ then Call MD to inform of Positive 'sepsis' screen, implement Sepsis guidelines and continue to assess for severe sepsis.

8. IF YES ☐ then patient screens positive for SEVERE Sepsis and severe sepsis guidelines should be initiated.

Call MD, Provide SBAR, Implement Severe Sepsis Management Guidelines

FIG. 1.

Paper-based sepsis screening tool. Adapted from Evaluation for Severe Sepsis Screening Tool from the Surviving Sepsis Campaign and Institute for Healthcare.¹⁰ Abbreviations: RN, Registered Nurse; Temp, Temperature; HR, Heart Rate; BPM, beats per minute; RR, respiratory rate; PaCO₂, partial pressure of carbon dioxide; WBC, White Blood Cells; SIRS, systemic inflammatory response; MAP, mean arterial blood pressure; UO, urine output; INR, international normalized ratio; PTT, Partial Thromboplastin Time.