ED Severe Sepsis Bundle Phase
Non Categorized
R Sepsis Quality Measures
T,N

Vital Signs
☒ Vital Signs

Monitor and Record Pulse | Resp Rate | Blood Pressure, q1h(std), For 6hr, including MAP, then q 4hr(std)

Patient Care
☐ Indwelling Urinary Catheter Insert-Follow Removal Protocol

Reason: Strict UOP (q30 min or q1 hr) in ICU, Remove Foley Catheter in 12hrs. May remove in less than 12 hours if meets foley removal criteria.

☒ Intake and Output

q30min, For 6hr, then 8hr(std). Goal greater than 0.5mL/kg/hr.

☒ O2 Sat Monitoring NSG

Maintain O2 Sat equal to or greater than 92%. Call MD for O2 orders if sat less than 92%.

☑ Intermittent Needle Therapy Insert/Site Care

q4day, Insert 2 peripheral IVs.

Continuous Infusion

Initial Fluid Bolus

Call MD after 1st liter bolus for End-Stage Renal Disease and CHF patients.(NOTE)*

☐ Sodium Chloride 0.9% Bolus

1,000 mL, Injection, IV Piggyback, q1h, STAT, (for 2 dose ), 1,000 mL/hr

Comments: Call Admitting MD after 1st liter bolus for End-Stage Renal Disease and CHF patients.

☐ Sodium Chloride 0.9% Bolus

1,000 mL, Injection, IV Piggyback, q1h, STAT, (for 3 dose), 1,000 mL/hr

Comments: Call Admitting MD after 1st liter bolus for End-Stage Renal Disease and CHF patients.

OR (NOTE)*

☐ Lactated Ringers Bolus

1,000 mL, Injection, IV Piggyback, q1h, STAT, (for 2 dose), 1,000 mL/hr

Comments: Call Admitting MD after 1st liter bolus for End-Stage Renal Disease and CHF patients.

☐ Lactated Ringers Bolus

1,000 mL, Injection, IV Piggyback, q1h, STAT, (for 3 dose), 1,000 mL/hr

Comments: Call Admitting MD after 1st liter bolus for End-Stage Renal Disease and CHF patients.

Medications
☐ Commonly Used Antibiotics Plan (SUB)*

Urinary Tract Infection (UTI)

☐ +1 Hours cefTRIAXone

2 g, IV Piggyback, IV Piggyback, once, STAT, Reason for ABX: Other (specify in comments), Treatment of documented/suspected infection

Intra-abdominal Source

☐ +1 Hours piperacillin-tazobactam

4.5 g, IV Piggyback, IV Piggyback, q6h, STAT, (for 2 dose), Reason for ABX: Other (specify in comments), Treatment of documented/suspected infection

Community Acquired Pneumonia

☐ +1 Hours levofoxacin

750 mg, IV Piggyback, IV Piggyback, once, STAT, Reason for ABX: Other (specify in comments)
Physician Orders ADULT: ED Severe Sepsis Bundle Plan EKM

Comments: Treatment of documented/suspected infection

**Unk Source/Hosp Acq Pneumonia (HCAP)**

- **+1 Hours** vancomycin
  - 15 mg/kg, IV Piggyback, IV Piggyback, once, STAT, Reason for ABX: Other (specify in comments), Treatment of documented/suspected infection
  - AND NOTE*

- **+1 Hours** piperacillin-tazobactam
  - 4.5 g, IV Piggyback, IV Piggyback, q6h, STAT, (for 2 dose), Reason for ABX: Other (specify in comments), Treatment of documented/suspected infection
  - AND (NOTE)*

- **+1 Hours** levofloxacin
  - 750 mg, IV Piggyback, IV Piggyback, once, STAT, Reason for ABX: Other (specify in comments)
  - Comments: Treatment of documented/suspected infection

**Laboratory**

- CBC
  - STAT, T;N, once, Type: Blood, Nurse Collect
- CMP
  - STAT, T;N, once, Type: Blood, Nurse Collect
- Lactic Acid Level
  - STAT, T;N, once, Type: Blood, Nurse Collect
- **Blood Culture**
  - Time Study, T;N, q5min 2 occurrence, Specimen Source: Peripheral Blood, Nurse Collect
  - Comments: If central line is present, draw a blood culture set from line and peripheral blood.
- Urine Culture
  - STAT, T;N, Specimen Source: Urine, Catheterized, Nurse Collect
- Urinalysis w/Reflex Microscopic Exam
  - STAT, T;N, once, Type: Urine, Nurse Collect

**Diagnostic Tests**

- **Chest 1 VW**
  - T;N, Reason For Exam Other, Enter in Comments, Stat
  - Comments: For Shortness of breath and/or chest pain and/or cough

**Consults/Notifications/Referrals**

- Consult Clinical Pharmacist
  - Reason: for antibiotic renal dosing
- Pharmacy Consult-Aminoglycoside Dosing
  - qam
- Pharmacy Consult - Vancomycin Dosing
  - Qam

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*Report Legend:

DEF - This order sentence is the default for the selected order
GOAL - This component is a goal
IND - This component is an indicator
INT - This component is an intervention
IVS - This component is an IV Set
Physician Orders ADULT: ED Severe Sepsis Bundle Plan EKM

NOTE - This component is a note
Rx - This component is a prescription
SUB - This component is a sub, see separate sheet
R-Required order