

McLaren Print System Order

Order No: 91574
 Order Date: 2025-01-15
 User: Ryan Long
 Phone: 248-338-5332

Ship Location: McLaren Oakland ER- East Tower Att: Ryan Long
 50 N. Perry
 Pontiac MI,48342

Brochures
 Quantity: 500
 Paragon Dept No: 21600
 Dept Name: Pontiac ED
 Company Number: OAK10

Order Total Price: 80.75

Item Number: OAK-095
 Item Description: FINAL ED SEPSIS Checklist
 Revision Date: 12/2024
 Print: 1 sided full color
 Paper: 65# White Cover
 Size: 8.5 x 11
 Fold:
 Finish: None
 Drill: 3 Hole Side
 Poster:
 Misc Info: 8.5x11 Color SS

Spec Info:

Patient Label

SEPSIS

Date of Onset:
 Date of Onset (Date of Sepsis Start): _____
 Time (Hour, Minute, Second or Approximate)

SEPSIS = Known Infection or Suspected Infection + 2 QSO

Actual Weight (kg): _____
Ideal Weight (kg): _____
NI is the one used for fluid bolus calculation.

SEVERE SEPSIS = Sepsis + One or more signs of organ dysfunction

Does the patient have a known, suspected or likely source of infection?
 (Does the patient have two or more SIRS criteria?)

- RR >30
- RR <10
- Temp >38.3°C or <36.0°C
- WBC >12,000 or <4,000 or >10% bands

(Does the patient have one or more signs of organ dysfunction?)

- SOF = 10 or SOFA <10, or SIRS drop of >40 points
- OR >1.5 or urine output <0.5ml/kg/hr for 2 hours
- Bilirubin >2mg/dl
- Lactate >2mmol/L
- Platelet count <100,000
- INR >1.5 or aPTT >40 secs
- Acute Respiratory Failure

SEPTIC SHOCK = Severe Sepsis + one or both of the following:

- Hypotension + 2 consecutive readings
- Initial lactate >4

Items to be completed within 3hrs from TIME ZERO:

- Initial lactate drawn Time: _____
- Blood cultures drawn **before** antibiotic given Time: _____
- Initial spectrum antibiotic given Time: _____
- Initiate IV fluid bolus (30 ml/kg required for hypotension or lactic acid >4) Total Amount Given: _____
- Time initial 30 ml/kg fluid bolus completed: _____
- Document repeat BP within 15 min of bolus complete (Date and TIME): Time: _____, BP: _____

IV fluid bolus (30ml) and SBP must be documented in QSO. IV fluid bolus must be calculated at ml/kg (patient can base on ideal body weight if patient is obese, but this must be documented above and in QSO that ideal body weight is being used).

Items to be completed within 6hrs from TIME ZERO:

- Obtain repeat Lactic Acid for any initial result <2 (patient cannot have BP without 2nd lactate result) Time: _____
- If patient has persistent or new hypotension, initiate vasopressor Time: _____
- Physician to document re-perfusion assessment here and in QSO Time: _____

NI Signature: _____

Attending Physician Signature: _____

Form must be completed in ED before patient moves to any floor. Please place completed form in sepsis binder.

104-000-0000