

## Introduction

The **purpose** of this project is to perform a comprehensive review of adult ICU sepsis protocols and policies across a large northeast hospital system with a goal of developing a strategic plan for the implementation of an adult nurse driven sepsis protocol to present to the ICU stakeholders.

## Background and Significance

- **Sepsis** - overwhelming immunological response to an infection that can lead to tissue hypoperfusion, end organ damage and dysfunction, amputations or death.
- **U.S.** – 1.7 million cases with 270,000 deaths annually (Rhee et al., 2017)
- **Worldwide** – 30 million cases with 8 million deaths annually (Gyawali et al., 2019)
- 1 in 3 inpatients deaths had sepsis (CDC, 2019)
- **Cost** - 27 billion dollars annually for all payer groups (Celeste & Moore, 2016)
- **Problem:**
  - Patients who are living longer with significant comorbidities may require ICU care. Contributing risk factors for sepsis include lengthy hospital stays and advance therapies such as invasive lines and devices.
  - Despite established Surviving Sepsis Campaign (SSC) guidelines, delays in sepsis treatment occur and result in an increase in morbidity, mortality and hospital costs.
  - Current literature examines nurse driven sepsis protocols in the emergency department (ED) and ward settings, but there is a **gap** in literature that investigates *nurse driven sepsis protocols in the adult ICU.*

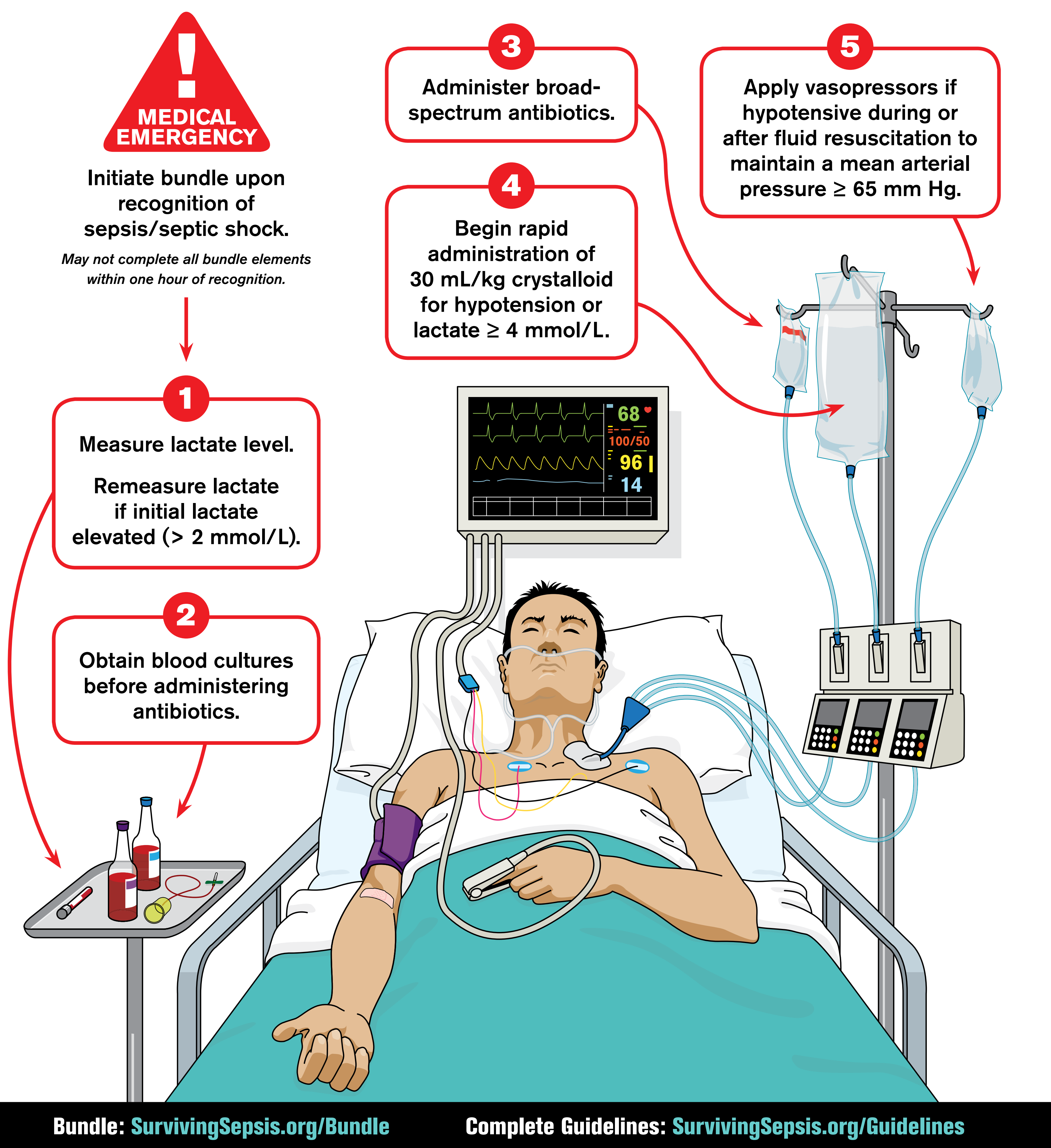
## Methodology

- A sample of existing adult ICU sepsis protocols and policies was collected from 11 acute care facilities belonging to a large northeast hospital system with the aid of an online survey tool via an encrypted email server.
- A one-page consent was included with the online survey that allowed for the utilization of information for the purpose of the project.
- The results from the questionnaire were compiled in a table.
- A strategic plan for the implementation of a nurse driven sepsis protocol for the adult ICU was developed and presented to ICU stakeholder at an urban, teaching hospital.

## Hour-1 Bundle

### Initial Resuscitation for Sepsis and Septic Shock

Surviving Sepsis Campaign



## Results

- Survey response rate is 81%
- Within 9 facilities, several variations of sepsis policies and protocols exist
- Only 1 facility follows a *nurse driven* sepsis protocol
- All facilities follow *house wide* sepsis protocols and policies
- *None* of the facilities follow sepsis protocol specific to adult ICU
- All facilities follow evidence-based sepsis guidelines
- 66% of policies and protocols received were 5 years or older

## Clinical Implications

A 1-hour nurse driven sepsis protocol for the adult ICU was created and may potentially:

- decrease the delays in sepsis treatment
  - decrease patient morbidity and mortality
  - increase staff collaboration and compliance
  - decrease hospital costs
- Ways to prevent delays in care:
- Point of care lactate level draw
    - easy and fast to obtain
    - decreases lab delays
  - Sepsis antibiotic kit located in medication pyxis
    - decreases pharmacy delays
  - Potential to streamline sepsis treatment in adult ICUs across the system

## Reference List

Please scan code for reference list



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