

Sepsis Concept Map

Risk Factors

age, poor mobility, weak immune system, comorbidities like diabetes, CKD, cirrhosis, wounds, or burns

Etiology

Microorganisms enter the bloodstream resulting in an inflammatory response causing hemodynamic decompensation.

Potential Complications

reduced blood flow to organs resulting in organ failure, reduced flow in arteries resulting in a clot, Tissue death (gangrene) requiring amputation, disseminated intravascular coagulopathy.

Diagnosis

Sepsis

Signs & Symptoms

fever, tachycardia, diaphoresis, tachypnea, hypotension, decreased LOCs, confusion, fatigue, light-headedness.

Labs/Diagnostic Tests

vital signs, CBC, ABGs, Electrolyte panel, CRP, creatinine, lactate, blood cultures x2, urine culture, wound culture (if applicable), chest x-ray, CT, ultrasound, or MRI (if surgical or occult cause is suspected)

Teaching

- Teach what sepsis is and how it is contracted.
- Teach how to prevent sepsis (prevent infections, good hand hygiene)
- Teach common signs and symptoms - when to seek medical attention.

Nursing Management/Care

- Assess vital signs and LOC frequently to assess patient's stability.
- Remove excessive clothing or blankets to help regulate the temperature of the patient.
- Administered the ordered medications in a timely manner (antibiotics/ antipyretics/ vasopressors)
- Elevate head of bed - improves expansion of lungs, allowing the patient to breathe easier.
- Notify MRP if symptoms worsen.
- Monitor intake and output.

Medical Management (Pharmacological/Surgical)

Broad spectrum antibiotics (until source is identified), Vasopressors/ Inotropes to increase BP (Epinephrine, norepinephrine, vasopressin, Dopamine), antipyretics, Steroids (prednisone, solumedrol), intravenous fluids, oxygen therapy if required

Assessment Findings in VSim

- Elevated temperature
- Tachycardia, hypotensive
- Elevated lactate, acidotic at 7.2pH