Maitland Fire/Rescue Department

Sepsis Screening

Patient Name _____ **Date** _____

IR# _____ **Unit** _____

GENERAL INFORMATION

Age / Living Conditions – is the patient: ☐ Very young ☐ Very old ☐ Lives alone ☐ Resident in nursing facility

SYSTEMIC INFLAMMATORY RESPONSE SYNDROME (SIRS)

Major Criteria

SIRS

In the last (3) three days has the patient:	YES	NO
Body Temperature greater than 100.4°F [38°C] or less than 96.8°F [36°C]	☐	☐
Heart Rate greater than 90 beats per minute	☐	☐
$PaCO_2$ less than 32 mmHg	☐	☐
Respiratory Rate greater than 20 breaths per minute	☐	☐
Systolic Blood Pressure less than 90 mmHg	☐	☐
Significant change in mental status *(obtunded or comatose)*	☐	☐
Blood Glucose greater than 140 mg/dL *(in non-diabetic patient)*	☐	☐
History of cancer	☐	☐
Chemotherapy or radiation treatment for cancer within the last week	☐	☐

MEDICAL HISTORY

Minor Criteria

Does the patient have *(or has had)*:	YES	NO
Pneumonia, cellulitis, meningitis, UTI treated within the last week	☐	☐
An admission / discharge from the hospital within the last week	☐	☐
Any open wounds / decubiti / severe burns or injuries within the last month	☐	☐
Surgery within the last month	☐	☐
HIV or is immunocompromised	☐	☐
History of long-term steroid use	☐	☐
History of sepsis	☐	☐
Diabetes	☐	☐
An indwelling urinary catheter	☐	☐
A central line recently placed or accessed	☐	☐
History of organ transplant	☐	☐
Generalized weakness	☐	☐
Flu-like symptoms	☐	☐
Increased / decreased fluid intake	☐	☐
Decreased urinary output	☐	☐
Pale or mottled skin	☐	☐
Hypotension with warm extremities	☐	☐
Dry mucosa *(eyes, lips)*	☐	☐
Capillary refill greater than 2 seconds	☐	☐
Significant edema (pre-tibial, wrist or forehead)	☐	☐

Provider Name *(printed)* _____

Signature _____

State # _____

SEPSIS SCORE

Possible Sepsis:
Major = 2 Minor = 4 or more

Probable Sepsis:
Issue a Sepsis Alert
Major = 4 Minor = 4 or more

4/28/11