



POLICY: 554.40  
TITLE: Sepsis

EFFECTIVE: 4/10/19  
REVIEW: 4/2024  
SUPERCEDES:

APPROVAL SIGNATURES ON FILE IN EMS OFFICE

PAGE: 1 of 2

---

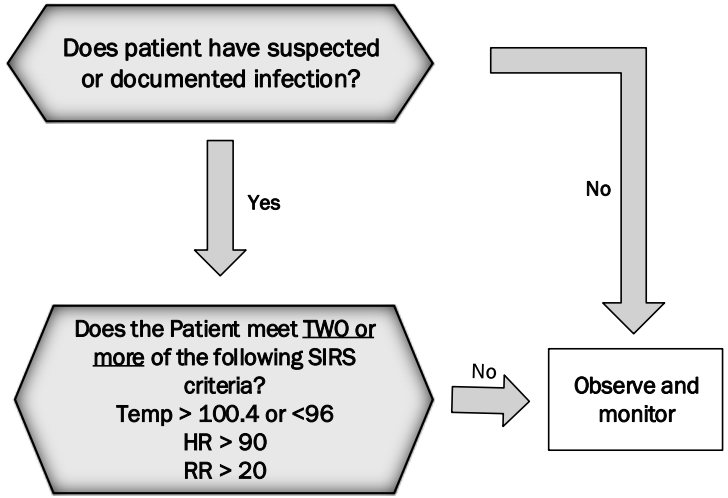
---

**SEPSIS**

- I. AUTHORITY  
Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9
- II. PURPOSE  
To serve as a patient treatment standard for EMRs, EMTs, AEMTs and Paramedics within their scope of practice.
- III. PROTOCOL  
Sepsis is a life-threatening, systemic infection with treatment centering on early recognition, hospital notification, fluid replacement and early antibiotics.

## Sepsis

<b>Risk Factors</b> <ul style="list-style-type: none"> <li>Age (elderly/newborn)</li> <li>Diabetes</li> <li>Immune compromise</li> <li>Alcoholism/IV drug abuse</li> <li>Malnutrition</li> <li>Recent surgery</li> <li>Indwelling devices (Foley, IV lines)</li> <li>Renal Disease</li> </ul>	<b>Signs/Symptoms</b> <ul style="list-style-type: none"> <li>SIRS (Systemic Inflammatory Response Syndrome) which is <b>two or more</b> of the following:                             <ul style="list-style-type: none"> <li>Temperature &gt;100.4F or &lt;96F</li> <li>Heart Rate &gt; 90</li> <li>Respiratory Rate &gt; 20</li> </ul> </li> </ul>	<b>Differential</b> <ul style="list-style-type: none"> <li>Hypovolemia</li> <li>Hypothermia</li> <li>Adrenal Crisis</li> <li>Thyroid Storm</li> <li>Anticholinergic Crisis</li> <li>Overdose (eg: Aspirin)</li> </ul>
---	---	---



**PEARLS**

- “SIRS” means Systemic Inflammatory Response Syndrome.
- SIRS + Infection = SEPSIS
- Temperature is extremely useful in identifying SIRS
- Patient’s with Sepsis are volume depleted, and can require significant boluses of fluid
- A numerical ETCO2 value should be documented as early as possible after first bolus is begun, and repeat measurement should be documented on hospital arrival as well.
- Finger stick lactate is not mandatory, only if proper equipment is available. One lactate value should be documented in the PCR.

A	Call <b>“Sepsis Alert”</b> to Receiving Hospital Start IV <b>P</b> Start IO
A	Normal Saline bolus 500cc IV/IO. Reassess vitals and lung sounds after each 500cc bolus. May repeat 500cc boluses IV/IO until 20cc/kg is administered <b>OR</b> BP > 100 systolic <b>AND</b> HR < 90. Hold repeat boluses if signs of volume overload.
A	<ul style="list-style-type: none"> <li>Obtain finger stick blood glucose</li> </ul>
P	<ul style="list-style-type: none"> <li>Apply <b>ETCO2</b></li> <li>Obtain finger stick <b>lactate</b>, if available</li> <li>Push dose Epinephrine 0.2ml of 1:10,000 every 5 minutes to achieve systolic BP &gt;90 mmHg</li> </ul>

Stanislaus County EMS Agency Policy # 554.40