

TREATMENT PROTOCOL

S-143

SEPSIS

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BLS ALS

- O₂ saturation PRN
- O₂ and/or ventilate PRN
- NPO, anticipate vomiting
- Remove transdermal patch, if present
- Obtain temperature
- Monitor blood glucose PRN

- Monitor/EKG
- IV/IO ^(A)
- Capnography

Suspected sepsis

If history **suggestive of infection** with ≥2 of the following¹:

- 1. Temperature ≥100.4 °F (38.0 °C) or <96.8 °F (36.0 °C)
- 2. HR ≥90
- 3. RR ≥20 or EtCO₂ <25 mmHg
- 4. Altered LOC
- 5. SBP <90 mmHg
- \bullet 500 mL fluid bolus IV/IO regardless of initial BP or lung sounds $^\circledR$
 - \bullet If no rales or SBP <90 mmHg, give additional 500 mL fluid bolus IV/IO, MR x2 $^{\circledR}$

SBP <90 mmHg after fluid boluses

• Push-dose epinephrine 1:100,000 (0.01 mg/mL) 1 mL IV/IO, MR q3 min, titrate to SBP ≥90 mmHg

Push-dose epinephrine mixing instructions

- Remove 1 mL normal saline (NS) from the 10 mL NS syringe
- 2. Add 1 mL of epinephrine 1:10,000 (0.1 mg/mL) to 9 mL NS syringe

The mixture now has 10 mL of epinephrine at 0.01 mg/mL (10 mcg/mL) concentration.

¹ Suspected sepsis should be reported to the Base Hospital and upon transfer of care at the receiving hospital.