

# Live Knowledge Check – Code Sepsis Process

**54274** *Instructions: Use this tool to assess knowledge of the Code Sepsis process. Do not reveal answers until the end of the session.*

Demographic Information (To be completed by participant)

1. Years of RN Experience (check one):

- < 5 years
- 6 – 10 years
- 11 – 15 years
- > 16 years

2. Highest Nursing Degree (check one):

- ADN
- BSN
- MSN
- DNP/PhD
- Other: \_\_\_\_\_

Confidence SCALE

- **Confident** – Is certain of answer and could explain or teach the concept to others.
- **Partially Confident** – Has some understanding, but may need clarification or a refresher.
- **Needs Support** – Is unsure of answer and would benefit from further education or review.

## A. Screening & Identification

**1. Can you name three SIRS criteria?**

Answer: \_\_\_\_\_

Rating:  Confident  Partially Confident  Needs Support

**2. How many SIRS criteria are needed to consider sepsis?**

Answer: \_\_\_\_\_

Rating:  Confident  Partially Confident  Needs Support

**3. Name two types of infections that would make you suspect sepsis?**

Answer: \_\_\_\_\_

Rating:  Confident  Partially Confident  Needs Support

**4. Name two organ dysfunction markers that would indicate Sepsis.**

Answer: \_\_\_\_\_

Rating:  Confident  Partially Confident  Needs Support

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**5. What is the significance of a lactate > 2 mmol/L?**

Answer: \_\_\_\_\_

Rating:  Confident  Partially Confident  Needs Support

## B. Interventions – 3-Hour Bundle

**6. What must be done before administering antibiotics and what must be ensured with lab prior to administering?**

Answer: \_\_\_\_\_

Rating:  Confident  Partially Confident  Needs Support

**7. What is the standard fluid dosage for a hypotensive septic patient?**

Answer: \_\_\_\_\_

Rating:  Confident  Partially Confident  Needs Support

**8. What is the timeframe to antibiotics being started after a sepsis alert?**

Answer: \_\_\_\_\_

Rating:  Confident  Partially Confident  Needs Support

**9. When should a lactate repeat be done if the initial is elevated?**

Answer: \_\_\_\_\_

Rating:  Confident  Partially Confident  Needs Support

**10. When should vital signs be done post-bolus and how many sets?**

Answer: \_\_\_\_\_

Rating:  Confident  Partially Confident  Needs Support

## C. Process Awareness

**11. What is the importance of alerting the provider before transfer?**

Answer: \_\_\_\_\_

Rating:  Confident  Partially Confident  Needs Support

**12. Is the nurse able to initiate sepsis protocol if patient meets sepsis criteria (if not provider present)?**

Answer: \_\_\_\_\_

Rating:  Confident  Partially Confident  Needs Support

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## Answer Key

1. Temp  $>38.3$  or  $<36$ ,  $>100.4$  or  $<96.8$ ; HR  $>90$ , RR  $>20$  or PaCO<sub>2</sub>  $<32$ , WBC  $>12$  or  $<4$ ,  $>10\%$  bands
2. Two or more SIRS criteria
3. Respiratory, bloodstream, skin, UTI/kidney, abdomen, bone/joint, device, etc
4. SBP  $<90$ , MAP  $<65$ , Cr  $>2$ , Lactate  $>2$ , Plt  $<100k$ , Bili  $>2$ , INR  $>1.5$ , etc.
5. Indicates tissue hypoperfusion; repeat if  $>2$
6. Blood cultures x2 and ensure lab collects specimen in their charting system.
7. 30 mL/kg (ideal body weight if BMI  $> 30$ )
8. Within 60 minutes, its ok if they answer less than 3 hours
9. Repeat lactate must be drawn within 6 hours of Sepsis Time Zero but the goal is 2 hours from initial
10. Post-bolus VS and MD reassessment documentation
11. To create provider awareness of: patient response to interventions (are they doing better or do they need higher level of care), post-fluid VS, and to remind MD of reassessment documentation
12. Yes, they can initiate nurse-driven bundle steps per protocol