

SEPSIS STUDY GUIDE

Pre-Class Preparation – You have 15 minutes to complete the following questions:

1. Briefly explain what the following labs tell you about a patient:
 - a. Procalcitonin
 - b. Albumin
 - c. C Reactive Protein
 - d. Prothrombin Time
 - e. Lactate
2. Your patient's last vital signs were BP 102/56 (71), HR 107, RR 22, Temp 100.5, pain 5/10, SaO₂ 92% 30% FiO₂. Does your patient meet SIRS criteria?
3. PaO₂/FiO₂ ratio shows that the _____ are having problems. Glasgow coma scale is a way to assess the patient's _____ status.
4. Hypotension is when the systolic is less than _____ mmHg and the diastolic is less than _____ mmHg.
5. What does passive leg raises do for a patient?
6. Your patient weighs 95 kg and has had urine output of 40 mL/hr. Is this the right amount of output for this patient? Why or why not?
7. List 3 things to look for when you are transfusing blood or blood products:
 - a.
 - b.
 - c.
8. You can use regular intravenous tubing to give blood. True or False. Why or why not?
9. Your patient has been diagnosed with septic shock and needs a fluid bolus ASAP. They weigh 95 kg. How much fluid will you give? How fast?
10. Which patient is in MODS? Why are the others not in MODS?
 - a. Upper GI Bleed, GCS 13, Hct 35%
 - b. Elevated serum bilirubin, serum creatinine 3.8 mg/dL, platelet count 15,000
 - c. Urine output 30mL/hr, BUN 25 mg/dL, WBC 6120
 - d. RR 25, PaCO₂ 45 mmHg, chest xray with bilateral diffuse patchy infiltrates

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List the SIRS criteria for each area. 1. How many are required to diagnose SIRS?			
Temperature	Heart Rate	Respiratory	WBC

SEPSIS AND SEPTIC SHOCK MANAGEMENT AND TREATMENT 1. Describe how to manage and treat the patient.				
Assessments and Vital Signs What are you looking for?	Serum lactate \geq 1 mmol/L Explain what this means.	Maintain perfusion	Maintain oxygenation	Control infection

FLUID RESUSCITATION		List how to verify fluid resuscitation is EFFECTIVE or INEFFECTIVE	
Patient weighs 90 kg How much fluid do you give? How fast?	When should fluid resuscitation be done? What is the goal of FR?	EFFECTIVE SIGNS (Expected outcome)	INEFFECTIVE SIGNS (or Adverse Reaction)

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DISSEMINATED INTRAVASCULAR COAGULATION (DIC)

1. Explain what is happening in DIC.
2. List the normal lab values.
3. Are they prolonged or shortened (increased or decreased) in DIC?

Explain pathophysiology of DIC. What is happening basically?	Activated partial thromboplastin time (aPTT) & Prothrombin Time (PT)	D-Dimer	Fibrinogen	Platelet Count

List signs of clotting and bleeding

CLOTING SIGNS	BLEEDING SIGNS

VOLUME AND/OR COAGULATION TREATMENT

What is needed to give blood products?	Do Red Blood Cells (RBCs) contain clotting factors? What blood products contain clotting factors?	What is the ONLY fluid you can give with RBCs? Why?	What is albumin used for?	Explain what could happen if there is a transfusion reaction. What should you do?

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MODS: List signs that show the organ is failing (assessments, diagnostic tests etc.)					
Pulmonary	Cardiac	Neuro	Renal	Hepatic	GI