



SBAR for Sepsis

SITUATION

•	My name is
•	I'm calling from
•	I need to speak with you about patient/resident, Mr. or Mrs
•	This patient/resident is showing signs and symptoms of infection and sepsis.
ΒA	CKGROUND
•	The patient/resident was admitted on (date) with the diagnosis of (original condition).
•	The patient/resident is now showing these signs of possible infection
	(describe the signs and potential source of infection).
•	This started on (date).
•	The patient/resident is allergic to
•	The patient's/resident's advance care directive is
AS	SESSMENT (describe key findings)
•	My assessment of the situation is that the patient/resident may be experiencing a new or worsening infection. Here are my findings.
	 Current vital signs
	BP HR RR Temp
	SpO2 (on room air or supplemental O2)
	 The patient/resident has voided times in the last 8 hours.
	Mental status is (changed OR unchanged) from baseline:
	 Other physical assessment findings that are related to possible infection or sepsis (e.g., lung sounds, wound assessment):
RE	COMMENDATION
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- I am concerned that this patient/resident may have sepsis.
 - Would you like to order a serum lactate, blood culture and basic metabolic panel?
 - How soon can you see this patient/resident?
- If the patient/resident is hypotensive, should I start an IV and give a fluid bolus?
- The physician should confirm, clarify and request additional information and then work with the nurse to take appropriate action with this patient/resident.

Before calling the physician, NP, PA or other health care professional:

Evaluate the patient/resident and complete this form.

Check vital signs; be alert for the early sepsis warning signs.

Review the patient/resident record: recent hospitalizations, lab values, medications and progress notes.

Note any allergies.

Be aware of the patient's/resident's advance care wishes.

Sepsis Early Warning Signs *Report any of these findings*

Temperature \ge 38.3 C (101 F) or \le 36 C (96.8 F) Heart rate \ge 90 bpm Respiratory rate \ge 20 bpm

White blood cell count \geq 12,000 µL-1 or \leq 4,000 µL-1

Altered mental status

SpO2 ≤ 90%

Decreased urine output

From recently drawn labs (within 24 hours)
Creatinine > 2 mg/dl
Bilirubin > 2 mg/dl
Platelet count ≤ 100,000 µL
Lactate ≥ 2 mmol/L
Coagulopathy INR ≥ 1.5
or aPTT > 60 secs