



CHRISTIAN LIVING
COMMUNITIES



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SOLUTIONS



RHYTHMS
HOME CARE

SDCC Sepsis Education A Families Perspective 2022

Presenters:

Nathalie Knopp

Families' Personal Sepsis Story

September 27, 2022, Maria Oren

September 28, 2022, Gary Ruvins

Learning Objectives

- Identify the signs of symptoms of sepsis and who is vulnerable to developing sepsis
- Identify the stages of sepsis and the importance of early detection and treatment
- Recognize the three "100's"
- Understand Post Sepsis Syndrome
- Prevent and educate others about sepsis
- Recognize the importance to be a sepsis advocate for yourselves, your families and friends and your residents/patients



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What is Sepsis?

- Over-whelming and life-threatening response to an infection
- The body's toxic response to an infection whereas the body starts to attack itself rather than the infection
- You must have an infection to have sepsis but the infection is not always identified
- Sepsis occurs when chemicals released in the bloodstream to fight an infection trigger inflammation throughout the body
- This can cause a cascade of changes that damage tissue and multiple organ systems

Sepsis Statistics

- Leading cause of death in the United States
- In the developing world, sepsis accounts for 60%-70% of deaths/year
- In the United States:
 - Each hour= 36 deaths from sepsis
 - Each year= 1.16 million deaths from sepsis
- Sepsis is the most common admitting diagnosis for residents transferred to the hospital from skilled nursing communities



Who is at risk for developing sepsis?

- 65 years old and older, children younger than 1
- Invasive tubes/procedures (foley catheters, IV's, wounds)
- Infections of the lung, skin, urinary and gastrointestinal systems
- People with chronic medical conditions
- People with weakened immune symptoms

Sepsis and Seniors

- 64.9% of all sepsis cases are patients over 65
- #1 reason for re-hospitalization in Colorado (Telligen)
- 80% of sepsis cases originate in the home and community
- Nursing home residents in the Emergency department are 17 times as likely to be diagnosed with sepsis as non-nursing home patients





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SYMPTOMS OF SEPSIS

- S** Shivering, fever, or very cold
E Extreme pain or general discomfort (“worst ever”)
P Pale or discolored skin
S Sleepy, difficult to rouse, confused
I “I feel like I might die”
S Short of breath



Watch for a combination of these symptoms. If you suspect sepsis, see a doctor urgently, CALL 911 or go to a hospital and say, “I AM CONCERNED ABOUT SEPSIS.”

SEPSIS.ORG



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Early Detection of Sepsis Saves Lives!

- Every hour a patient in septic shock does not receive treatment, the risk of death increases by 7.6%!





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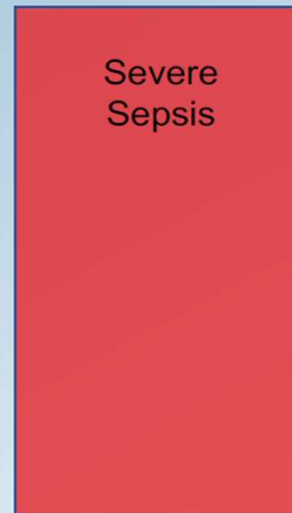
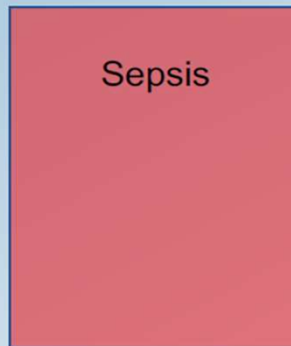


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Stages of sepsis

Stage 1 – SIRS

Systemic Inflammatory Response
Syndrome





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Is their
temperature
above 100?



Is their
heart rate
above 100?



Is their
blood pressure
below 100?



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If resident has suspected infection AND two or more:

- Temperature $>100^{\circ}\text{F}$ or $<96.8^{\circ}\text{F}$
- Pulse >100
- SBP <100 mmHg or >40 mmHg from baseline
- Respiratory rate >20 /SpO₂ $<90\%$
- Altered mental status

Plan for:

- Review advance directive
- Contact the physician
- Contact the family

If transferring resident to hospital:

- Prepare transfer sheet
- Call ambulance
- Call in report to hospital
- Report positive sepsis screen

Post Septic Shock Syndrome

- Affects 50% of sepsis survivors
- Lasts 6-18 months or longer
- Physical and Neurological symptoms
- Consider Home Health/Home Care resc





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Symptoms of Post Septic Shock Syndrome

- Insomnia
- Nightmares
- Vivid hallucinations
- Panic attacks
- Anxiety-fear sepsis will come back
- Mood swings
- Decreased concentration
- Lethargy
- Short term memory loss
- Vision changes
- Decreased sensation in limbs
- Breathlessness
- Joint/muscle pain
- Hair loss
- Dry flaky skin/nails
- Changes in taste and appetite
- Decreased kidney function
- Repeated infections
- Feeling cold
- Excessive sweating

How to Prevent Sepsis

- Handwashing of course!
- Sterile technique and maintenance
 - Intravenous lines
 - Foley catheters
 - Wound care
 - Invasive techniques
- Flu, pneumonia and COVID vaccine





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Always think Sepsis!

THINK
TREAT
STOP!
sepsis

- Because signs and symptoms are non-specific in older adults and they often have co-morbidities, virtually any acute change of condition could represent sepsis.
- Use the word Sepsis when communicating
- Act quickly to save lives
- Educate your co-workers, families, residents about sepsis

Train-the-Trainer

Sepsis Education Virtual Dates:

C.N.A./PCA: Tue, Sep 27, 2022, 12:30 PM-1:30 PM (MDT)

With Maria Oren

Nurse: Wed, Sep 28, 2022, 2:00 PM - 3:00 PM (MDT)

With Gary Ruvins



**THINK
TREAT
STOP!**
sepsis

The Train-the-Trainer Objectives are to:

1. Become comfortable with the SDCC selected sepsis tools to train your clinical teams
2. Practice using the sepsis tools with two case studies for Nurses and C.N.A/PCA's at your community
3. Role play: Nurses practice calling Dr., PCP, PA and C.N.A/PCA call supervisor alerting the team for possible sepsis alert