

PROTECT YOUR RESIDENTS FROM SEPSIS.

**GET AHEAD
OF SEPSIS**

KNOW THE RISKS. SPOT THE SIGNS. ACT FAST.

Sepsis is a medical emergency. You play a critical role. Protect your residents by ACTING FAST.

Infections put your residents at risk for sepsis. Anyone can get an infection, and **almost any infection, including COVID-19, can lead to sepsis. With your fast recognition and treatment, most residents survive.**

WHAT CAUSES SEPSIS?

Bacterial infections cause most cases of sepsis. Sepsis can also be a result of other infections, including viral infections, such as COVID-19 or influenza, or fungal infections. The most frequently identified pathogens that cause infections that can develop into sepsis include *Staphylococcus aureus* (staph), *Escherichia coli* (*E. coli*), and some types of *Streptococcus*. COVID-19 can have a similar presentation and a similar clinical course to some forms of sepsis. Many residents who require hospitalization for COVID-19 have signs or symptoms that meet the definition of sepsis. Infections that lead to sepsis most often start in the:



Lung



Urinary tract



Skin



Gastrointestinal tract

WHO IS AT RISK?

Anyone can develop sepsis, but some people are at higher risk for sepsis:

65+

Adults 65 or older



People with weakened immune systems



People with chronic medical conditions, such as diabetes, lung disease, cancer, and kidney disease



People with recent severe illness or hospitalization, including due to severe COVID-19



People who survived sepsis



Children younger than one

WHAT ARE THE SIGNS AND SYMPTOMS OF SEPSIS?

A resident with sepsis might have one or more of the following signs or symptoms:



High heart rate or low blood pressure



Fever, shivering, or feeling very cold



New onset or increased confusion or disorientation



Shortness of breath



Extreme pain or discomfort



Clammy or sweaty skin

Residents with sepsis should be urgently evaluated and treated by a healthcare professional.

SEPSIS STATS

Each year:

About

1.7 MILLION

adults in America develop sepsis.

At least

350,000

adults who develop sepsis die during their hospitalization or are discharged to hospice.

1 IN 3 PATIENTS

who dies in a hospital had sepsis during that hospitalization.

Sepsis, or the infection causing sepsis, starts before a patient goes to the hospital in nearly

87% OF CASES

HOW CAN I GET AHEAD OF SEPSIS?

As a long-term care nurse, you can:

- **Know sepsis signs and symptoms** to identify residents early and get them immediate treatment.
- **ACT FAST** if you suspect sepsis.
- **Prevent infections** by following infection control practices (e.g., hand hygiene, appropriate indwelling medical device management, communicating signs and symptoms of infection to the healthcare professional overseeing care of the resident, cleaning and disinfection) and ensuring residents receive recommended vaccines.
- **Educate your residents, their families, and other staff about:**
 - Preventing infections
 - Keeping cuts and wounds clean until healed
 - Managing chronic conditions
 - Recognizing early signs and symptoms of worsening infection and sepsis and seeking immediate care if signs and symptoms are present

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WHAT SHOULD I DO IF I SUSPECT SEPSIS?

- **Know your facility's existing guidance for diagnosing and managing sepsis.**
- **Immediately alert the healthcare professional overseeing care of the resident if it is not you.**
- **Start antibiotics as soon as possible in addition to other therapies appropriate for the patient.** If a specific bacterial cause of sepsis is known, therapy should be targeted to optimize treatment and broad-spectrum antibiotics might not be needed.
- **Check resident progress frequently.** Treatment requires urgent medical care, usually in an intensive care unit in a hospital, and includes careful monitoring of vital signs and often antibiotics. Early and frequent reassessment of residents with sepsis should be undertaken to determine the appropriate duration and type of therapy.

To learn more about sepsis and how to prevent infections, visit www.cdc.gov/sepsis or call 1-800-CDC-INFO.

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