

Document Links:

[Sepsis Instrument](#)

REVSTAT
 REVIEW STATUS (not abstracted)
 0. Abstraction has not begun
 1. Abstraction in progress
 2. Abstraction completed w/o errors
 3. TVG failure (exclusion)
 4. Record contains missing data or errors
 5. Administrative exclusion from all measures

AGE
 Calculated field – ADMDT - BIRTHDT

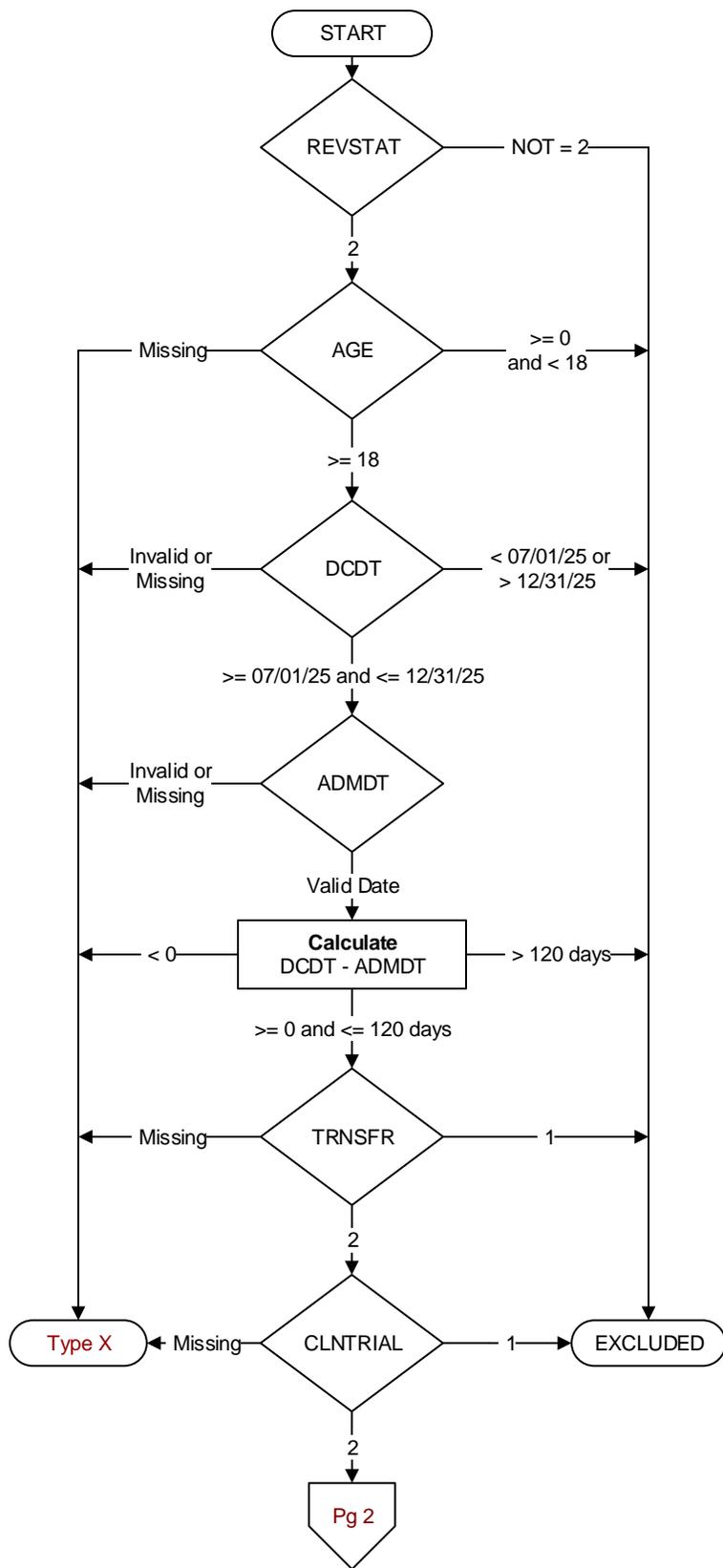
DCDT
 Discharge date

ADMDT
 Admission date

TRNSFR
 Is there documentation the patient was received as a transfer from an inpatient, outpatient or emergency/observation department of an outside hospital or from an ambulatory surgery center?
 1. Yes
 2. No

Select value "2" if transferred in from community living centers (CLC), long term care (LTC) facilities, nursing homes (NHCU), or skilled nursing facilities (SNF), even if the patient was there to receive short term rehab.

CLNTRIAL
 During this hospital stay, was the patient enrolled in a clinical trial in which patients with sepsis/septic shock were being studied?
 1. Yes
 2. No

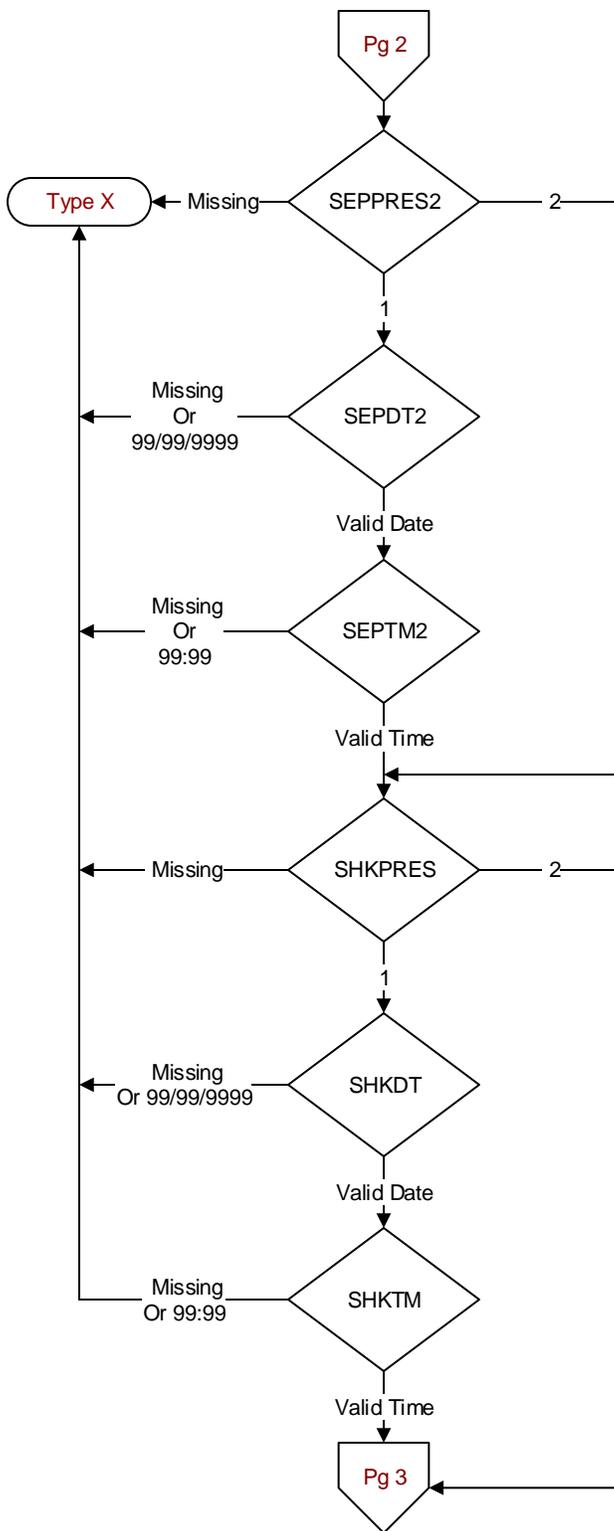


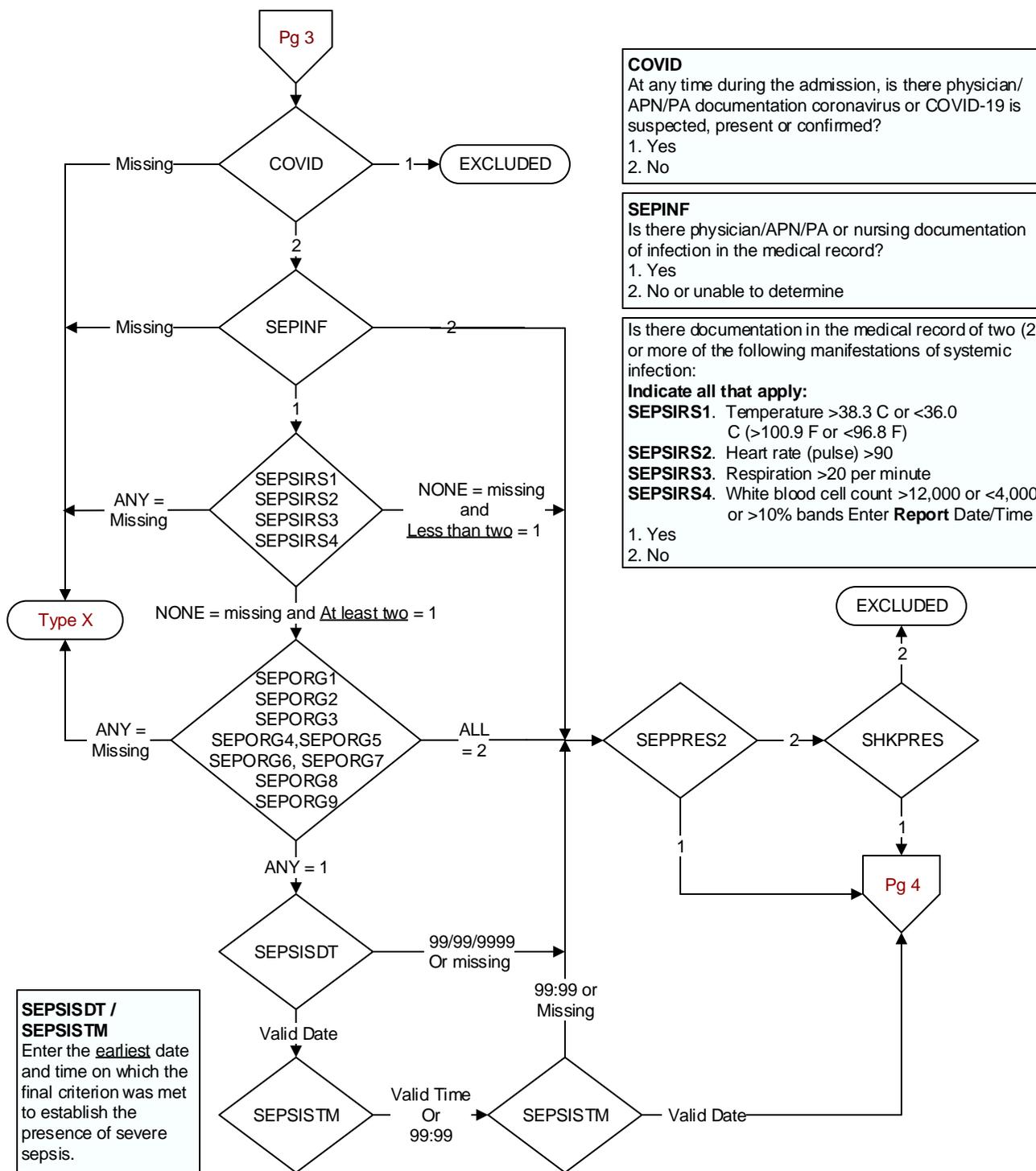
SEPPRES2
 Did a physician/APN/PA document presence of severe sepsis?
 1. Yes
 2. No

SEPDT2 / SEPTM2
 Enter the earliest date and time a physician/APN/PA documented the presence of severe sepsis

SHKPRES
 Is documentation of septic shock present in the record?
 1. Yes
 2. No, or unable to determine

SHKDT / SHKTM
 Enter the earliest date and time a physician/APN/PA of the documented the presence of septic shock.





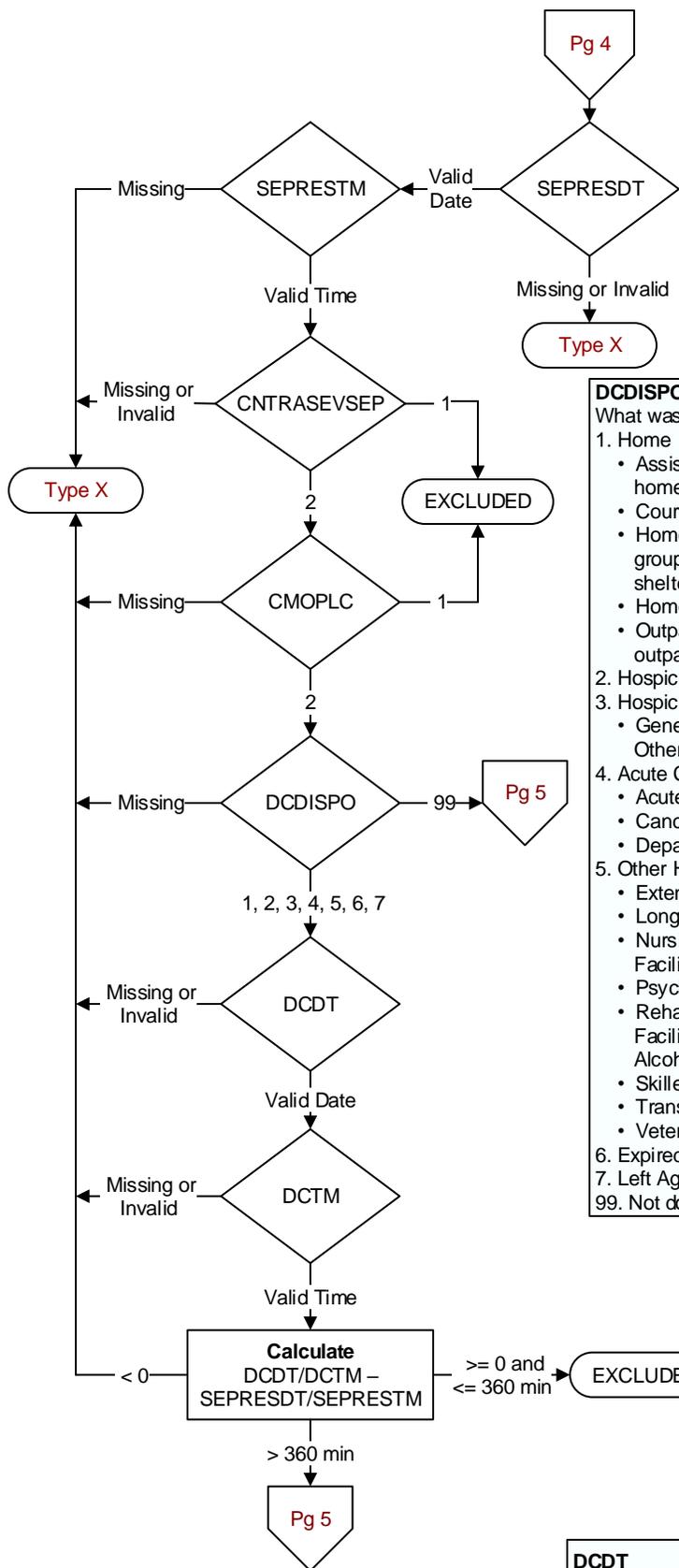
COVID
 At any time during the admission, is there physician/ APN/PA documentation coronavirus or COVID-19 is suspected, present or confirmed?
 1. Yes
 2. No

SEPINF
 Is there physician/APN/PA or nursing documentation of infection in the medical record?
 1. Yes
 2. No or unable to determine

Is there documentation in the medical record of two (2) or more of the following manifestations of systemic infection:
Indicate all that apply:
SEPSIRS1. Temperature >38.3 C or <36.0 C (>100.9 F or <96.8 F)
SEPSIRS2. Heart rate (pulse) >90
SEPSIRS3. Respiration >20 per minute
SEPSIRS4. White blood cell count >12,000 or <4,000 or >10% bands Enter **Report Date/Time**
 1. Yes
 2. No

SEPSISDT / SEPSISTM
 Enter the earliest date and time on which the final criterion was met to establish the presence of severe sepsis.

Is there documentation of organ dysfunction in the medical record?
Indicate all that apply:
SEPORG1. Systolic blood pressure (SBP) < 90 mmHg or mean arterial pressure (MAP) < 65 mmHg
SEPORG2. Systolic blood pressure (SBP) decrease of more than 40 mmHg (see definitions/decision (D/D) rules)
SEPORG3. Acute respiratory failure as evidenced by a new need for invasive or non-invasive mechanical ventilation (see D/D rules)
SEPORG4. Creatinine > 2.0 (see D/D rules) Enter **Report Date/Time**
SEPORG5. Urine output < 0.5mL/kg/hour for 2 consecutive hours (see D/D rules)
SEPORG6. Total bilirubin > 2 mg/dL (34.2 mmol/L) Enter **Report Date/Time**
SEPORG7. Platelet count < 100,000 Enter **Report Date/Time**
SEPORG8. INR > 1.5 or aPTT > 60 seconds (see D/D rules) Enter **Report Date/Time**
SEPORG9. Lactate > 18.0 mg/dL (>2 mmol/L) Enter **Report Date/Time**
 1. Yes
 2. No



SEPRESDT
Computer to auto-fill earliest valid date entered in sepdt2, shkdt, or sepsisd.

SEPRESTM
Computer to auto-fill earliest valid time entered in sepmt2, shkmt, or sepsistm.

CNTRASEVSEP
During the timeframe from (computer to display sepresdt/seprestm - 6 hours) to (computer to display sepresdt/seprestm + 6 hours) is there physician/APN/PA or nursing documentation that the patient or authorized patient advocate refused either a blood draw, IV fluid administration, or IV antibiotic administration?
1. Yes
2. No or unable to determine

DCDISPO
What was the patient's discharge disposition on the day of discharge?
1. Home
• Assisted Living Facilities (ALFs) – includes assisted living care at nursing home/facility
• Court/Law Enforcement – includes detention facilities, jails, and prison
• Home – includes board and care, domiciliary, foster or residential care, group or personal care homes, retirement communities, and homeless shelters
• Home with Home Health Services
• Outpatient Services including outpatient procedures at another hospital, outpatient Chemical Dependency Programs and Partial Hospitalization
2. Hospice – Home (or other home setting as listed in #1 (above))
3. Hospice – Health Care Facility
• General Inpatient and Respite, Residential and Skilled Facilities, and Other Health Care Facilities
4. Acute Care Facility
• Acute Short Term General and Critical Access Hospitals
• Cancer and Children's Hospitals
• Department of Defense and Veteran's Administration Hospitals
5. Other Health Care Facility
• Extended or Immediate Care Facility (ECF/ICF)
• Long Term Acute Care Hospital (LTACH)
• Nursing Home or Facility including Veteran's Administration Nursing Facility
• Psychiatric Hospital or Psychiatric Unit of a Hospital
• Rehabilitation Facility including, but not limited to: Inpatient Rehabilitation Facility/Hospital, Rehabilitation Unit of a Hospital, Chemical Dependency/Alcohol Rehabilitation Facility
• Skilled Nursing Facility (SNF), Sub-Acute Care or Swing Bed
• Transitional Care Unit (TCU)
• Veteran's Home
6. Expired
7. Left Against Medical Advice/AMA
99. Not documented or unable to determine

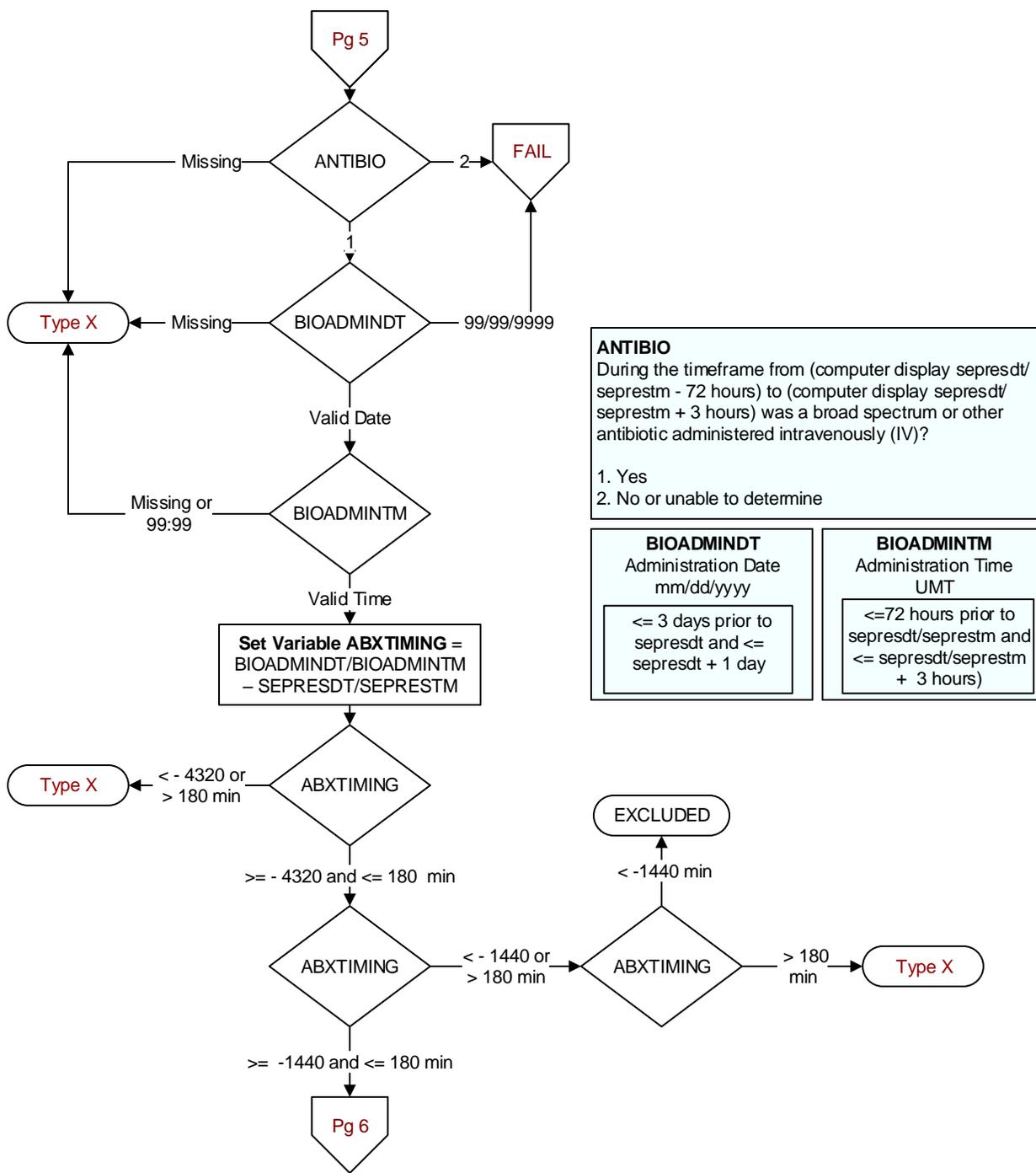
CMOPLC
During the timeframe from (computer to display sepresdt/seprestm - 6 hours) to (computer to display sepresdt/seprestm + 6 hours) is there physician/APN/PA documentation of comfort measures only or palliative care (see Inclusion terms below)?

Inclusion (Or synonymous terms)	
Brain death/dead	Hospice Care
Comfort care	Organ harvest
Comfort measures	Palliative Care
Comfort measures only (CMO)	Palliative Consult
Comfort only	Terminal care
Do Not Resuscitate Comfort Care (DNR-CC)	Terminal extubation
End of life care	Withdraw care
Hospice	Withhold care

DCDT
Discharge date:

DCTM
Discharge time:

1. Yes
2. No



ANTIBIO
 During the timeframe from (computer display sepresdt/ seprestm - 72 hours) to (computer display sepresdt/ seprestm + 3 hours) was a broad spectrum or other antibiotic administered intravenously (IV)?

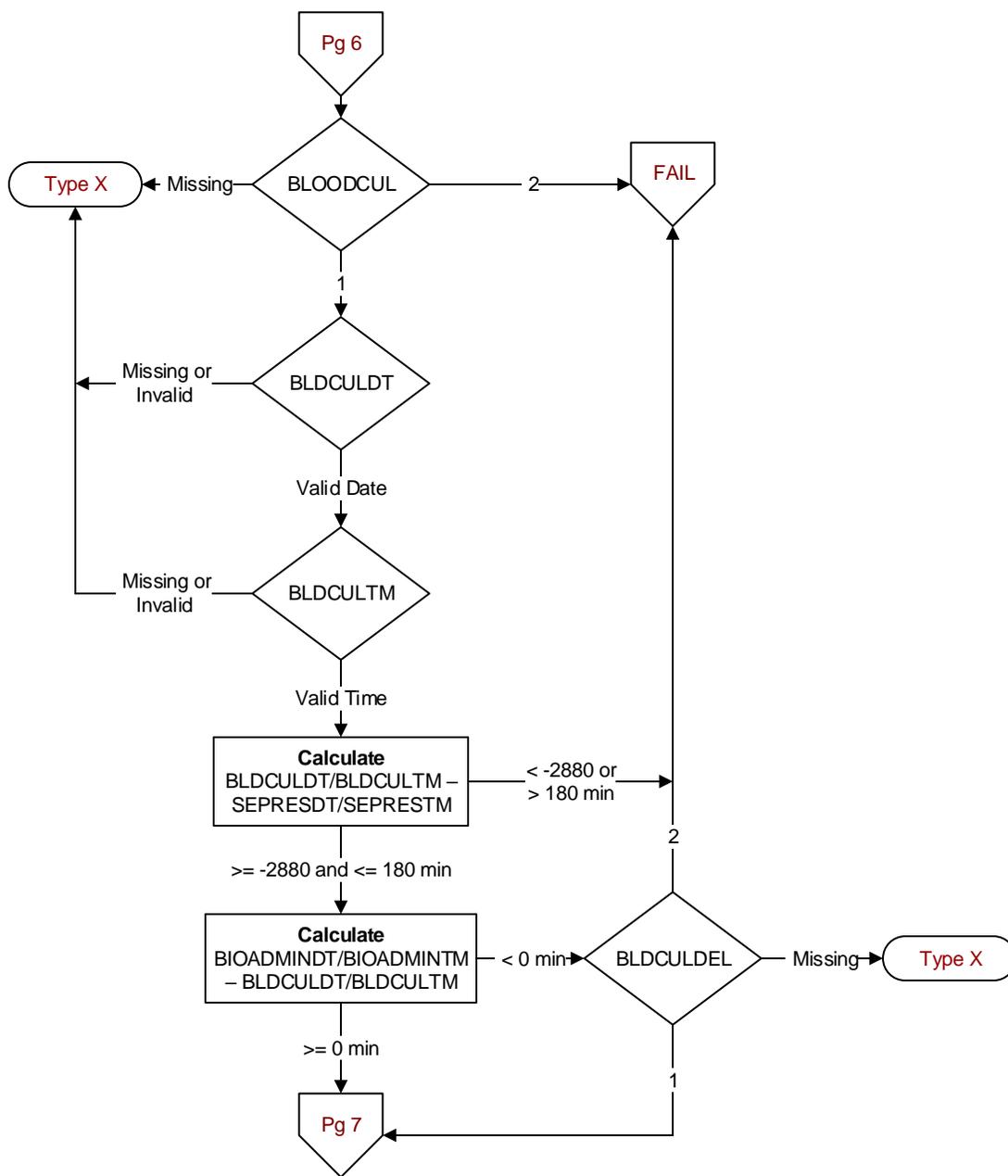
1. Yes
2. No or unable to determine

BIOADMINDT
 Administration Date
 mm/dd/yyyy

<= 3 days prior to sepresdt and <= sepresdt + 1 day

BIOADMINTM
 Administration Time
 UMT

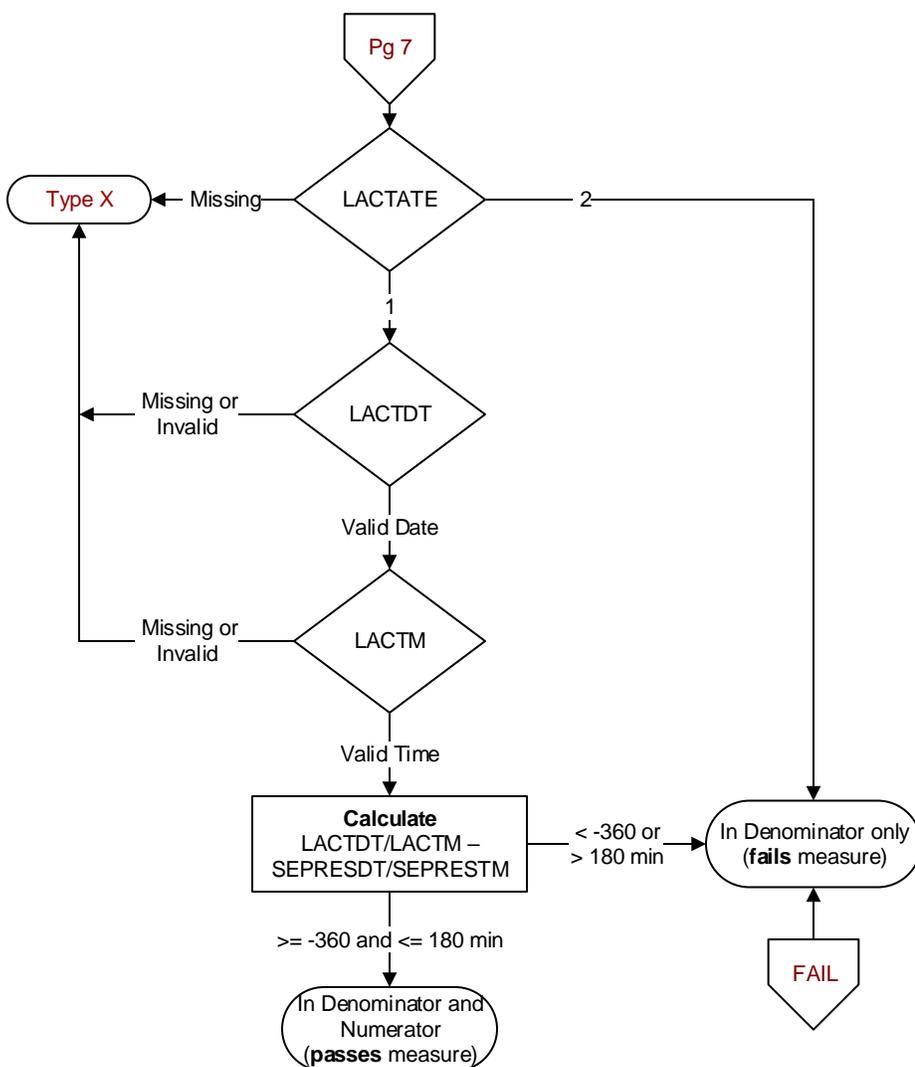
<=72 hours prior to sepresdt/seprestm and <= sepresdt/seprestm + 3 hours)



BLOODCUL
 During the time frame from [(If bioadmintd/ bioadmintm - sepresdt/seprestm >= -1440 and < 0, computer to display sepresdt/ seprestm - 48 hours to sepresdt/seprestm + 3 hours); else computer to display (earliest bioadmintd/ bioadmintm- 24 hours to sepresdt/ seprestm + 3 hours)], was a blood culture collected?
 1. Yes
 2. No or unable to determine

BLDCULDT / BLDCULTM
 During the specified timeframe, enter the date and time the blood culture was collected.

BLDCULDEL
 Is there documentation supporting an acceptable delay in collecting a blood culture?
 1. Yes
 2. No or unable to determine



LACTATE
 During the timeframe from (computer display sepresdt/seprestm - 6 hours to sepresdt/seprestm + 3 hours) was an initial lactate level drawn (or collected)?
 1. Yes
 2. No

LACTDT / LACTM
 Enter the date and time of the highest value during the timeframe from (computer display sepresdt/seprestm - 6 hours to sepresdt/seprestm), or if no lactate within that timeframe, enter the highest value from (computer display sepresdt/seprestm + 1 minute to sepresdt/seprestm + 3 hours) when the initial lactate level was drawn (or collected).

- If multiple lactate levels are drawn use the following steps:
 - o Choose the highest lactate level drawn in the time frame from 6 hours prior to Severe Sepsis Presentation time through Severe Sepsis Presentation time.
 - o If no lactate is drawn prior to Severe Sepsis Presentation time, use the highest lactate level drawn in the 3 hours following Severe Sepsis Presentation time.