

Treatment Protocols**Date: 07/01/2023*****Systemic Inflammatory Response Syndrome/Suspected Sepsis - Adult*****Policy #9210A****Adult BLS Standing Orders**

- **Universal Patient Protocol**
- Ensure patent airway
- Give oxygen and/or ventilate PRN per **Airway Policy**
- Continuously monitor pulse oximetry and blood pressure
- Capnography
- Blood glucose PRN
- Identify criteria:
 - Suspected infection
 - And
 - 2 or more of the following:
 - HR >90 or high for age range
 - RR > 20 or high for age range
 - Temp < 96.8°F (36°C) or >100.4°F (38.0°C)
- Notify receiving facility of suspected SIRS patient

Adult LALS Standing Orders

- Capnography
- Establish IV
 - 500 ml NS IV bolus if patient is without rales and there is no evidence of heart failure

If SBP <90 mmHg after initial fluid bolus, refer to Shock Protocol.**Adult ALS Standing Orders**

- Monitor EKG
- Establish IV/IO
- Capnography
- 12 lead EKG PRN
- 500 ml NS IV/IO bolus if patient is without rales and there is no evidence of heart failure

With persistent hypotension, refer to Shock Protocol.**Adult Base Hospital Orders**

- **BH** - Additional NS 0.9% 500-1,000 mL IV bolus
- **BH** – Push dose epinephrine for pressor support
- **BH** - Dopamine 5-20 mcg/kg/min (400 mg/250ml) titrated to SBP >90 mmHg if cardiac source suspected

APPROVED:

Signature on File

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