Recognizing Sepsis Simulation

ED HALLWAY near nurses' station. Night nurse is and primary nurse enter patient room. The area is busy- phones ringing, alarms beeping, hallway traffic. Video fades in and audio fades up.

INSIDE ED ROOM- Mr. Daniels is curled up on the stretcher, pale and diaphoretic. Two nurses walk over to the patient and address him.

Night Nurse

Mr. Daniels, this is XXXX, the nurse who's taking over your care. I'm going to let them know what's happened with you since you came in.

Primary Nurse

Hi Mr. Daniels, how are you feeling?

Mr. Daniels

(Weakly)Not very well.

Night nurse

James Daniels, date of birth January 17, 19XX, no known drug allergies, came in around oh four hundred with complaint of fatigue, fever and malaise for the past three weeks. Says his temps have ranged between 101 to 104 in the past week. Temp on admission was 100.2 orally. He's been taking acetaminophen and ibuprophen every every four to six hours at home, and thinks it's helped a little. Vitals were OK otherwise. Only past medical history is pre-hypertension and Reynaud's disease. No past surgeries or meds at home. Labs were OK too, so the NP wrote DC orders. We're just waiting for his ride to arrive.

Primary Nurse

(Toward night nurse) OK, thanks XXXX. I'll take over. (Night nurse exits) Primary nurse turns toward patient- Mr. Daniels, I see you haven't had any meds since you've been here – do you remember when you last took acetaminophen or ibuprophen?

Mr. Daniels

Just before I left to come here – about four hours ago, I guess.

Primary Nurse

(Typing on computer then turning to patient) I'm going to do an assessment to see how you're doing right now. [takes vital signs- close up of dynamp with BP 113/80, temp 101, HR 110, SpO2 95%] …and respirations 18.   Any pain?

Mr. Daniels

No, but I have no energy at all. I just want to sleep all the time.

Primary nurse

What's your usual blood pressure? The night nurse told me you have pre-hypertension.

Mr. Daniels

I think the top number is usually 130 or 140 maybe? I'm not sure. I was hoping to get some help here, but I guess if they think I'm OK to go home, I'll sleep better in my own bed.

Primary nurse

[Quickly auscultates heart, lungs, abdomen, palpates pulses and checks cap refill-] Can you sit up for a minute? I want to listen to your lungs a bit more.

Mr. Daniels

Sits up very slowly – scene fades

NURSES STATION- NP is typing on computer, pulls discharge instructions from printer, appears very busy and tired.   Primary nurse approaches from Mr. Daniel's room.

Primary nurse

(Faces NP) Excuse me, XXXX, I see Mr. Daniels has a discharge order.

NP

(Continues typing without looking at primary nurse) Yes. Correct.

Primary nurse

I'm concerned because his temp is 101 and he's tachycardic. I understand his WBCs are normal, but I'm concerned because the temp and high heart rate are two indicators of sepsis. It seems unsafe to send him home without ruling out a systemic bacterial infection.

NP

(looks annoyed, rolls eyes)

Tech

Can you check Mr. Daniels? He just stood up to void and said he felt like he might pass out.

Tech and Primary Nurse go to Mr. Daniels' room, NP follows

INSIDE ED ROOM- 150ml tea colored urine in urinal on bedside table. Mr. Daniels is laying on stretcher, eyes closed. Primary nurse checks vitals: (BP: 99/60, t 102.5, HR 130)

NP

Alright, let's get him on tele, start a one liter bolus of normal saline and BP every five minutes.

Primary nurse

(to tech as she/he begins to gather equipment) Can you get XXXX please- I'm going to need some help.

Charge nurse

(walks into room quickly) What do you need?

Primary nurse

(Hands over IV supplies to charge nurse and begins to apply monitor leads to patient) Can you start this normal saline bolus?

Charge nurse

Yes, starting a normal saline bolus (applies gloves, opens IV start kit, etc…)

Third nurse

(walks quickly into the room with the tech- looking around) XXXX said you need some help.

Primary nurse

Can you record everything that we're doing? I just started tele, and XXXX is starting a normal saline bolus. XXXX is going to take BPs every five minutes.

Third nurse

OK, I'm recording. (moves to COW, glancing at monitor) We have sinus tach and BP at ---- is 96/60.

Charge nurse

20 gauge in left antecubital in now with saline wide open. (removes gloves, washes hands)

Third nurse

Saline bolus via left antecubital 20 gauge started at (use real time) (typing)

 (patient continues to lie motionless, eyes closed)

NP

Let's get a lactate, CBC, Chem 7, blood cultures and an ABG.

Third nurse

Orders for lactate, CBC, Chem 7, blood cultures and ABG in at XXXX (use real time)

NP

I'll get the blood gas (picks up ABG kit and preps radial artery)

Patient

(weakly) Ow… what are you doing?

Primary nurse

(on patient's left side) We're concerned that you might have an infection in your blood, so we're doing some more tests to check instead of sending you home right now.

Charge nurse

(from the side of the room) I'm getting a lactate of 7 and pH is 7.2 on the iStat.

NP

Lactate of 7 and pH is 7.2. Start a second liter normal saline bolus- try for an 18 gauge in his right arm. I'm going to call the MICU for a bed.

Third nurse

(typing) Lactate of 7, pH 7.2, another normal saline bolus and second IV access ordered at XXXX (real time)

NP

(to charge nurse) XXXX can you take over for XXXX (primary nurse) for a minute?

Charge nurse

Sure

NP

(to primary nurse) XXXX, I want to talk to you for a second… (they walk out of the room toward the nurses station) Cut to nurses station.

NURSES STATION

NP

(Faces primary nurse) You were right to question that discharge order. I didn't think this patient was that sick. I've worked five nights straight and I guess I'm tired. Your familiarity with early sepsis criteria may have saved this guy.

Primary nurse

nods, walks back toward patient room as NP picks up phone and scene fades.