

Severe Sepsis

Severe Sepsis supports a higher risk of mortality than sepsis alone. Don't undervalue your care by omitting **Severe Sepsis** on the H&P when the criteria are met.

The Sepsis-3 publication (*JAMA*, 2016) states that sepsis diagnosed using SOFA criteria is *always Severe Sepsis*. Never document 'sepsis' alone when using the SOFA criteria. Always support your patient's risk with the word **severe**.

Indicator	Clinical Criteria	
	Sepsis-3, SOFA Severe Sepsis (2016) ¹	Sepsis-2, Severe Sepsis (2012) ²
Definition of Sepsis	A life-threatening organ dysfunction (<i>not</i> failure) caused by a dysregulated host response to infection.	Sepsis: Infection, suspected or documented, with systemic manifestations of infection due to the infectious process. Severe sepsis: plus sepsis-induced organ dysfunction or tissue hypoperfusion
Scoring Methodology	Sequential Organ Failure Assessment Score (SOFA). Acute change of ≥ 2 SOFA points due to the infectious process – associated with in-hospital mortality > 10%.	"Some" clinical indicators of sepsis plus organ dysfunction due to the infectious process
CNS	GCS 13-14 = 1 point (e.g., "conversational but disoriented") GCS 10-12 = 2 points	Altered mental status
Respiratory	PaO ₂ /FiO ₂ < 400 = 1 point PaO ₂ /FiO ₂ < 300 = 2 points	Without pneumonia: PaO ₂ /FiO ₂ < 250 (86% RA) With pneumonia: PaO ₂ /FiO ₂ < 200 (80% RA)
Cardiovascular	Mean arterial pressure MAP ~ [(SBP – DBP) x 0.33 + DBP] MAP < 70 = 1 point Use of pressors = 2 points	Sepsis-induced hypotension
Renal – Creatinine	> 1.2 – 1.9 mg/dL = 1 point 2.0 – 3.4 mg/dL = 2 points	> 2.0 mg/dL
Renal – UOP	UOP < 500 ml/day = 3 points	UOP < 0.5 mL/kg/hr for more than 2 hrs despite adequate fluid resuscitation
Hepatic: Total bilirubin	1.2 – 1.9 = 1 point 2.0 – 5.9 = 2 points	> 2 mg/dL
Thrombocytopenia:	< 150,000/ μ L – 1 point < 100,000/ μ L – 2 points	< 100,000/ μ L
Coagulation	--	INR > 1.5
Lactate	--	Above laboratory normal

Link the acute change in clinical indicators to the infectious process, "due to"

1. Sepsis-3 definition: Singer M, et al., Third International Consensus Definitions for Sepsis and Septic Shock (Sepsis-3), *JAMA*. 2016;315(8):801-810, February 22, 2016
2. Sepsis-2 definition: Dellinger RP, et al., Surviving Sepsis Campaign: International Guidelines for Management of Severe Sepsis and Septic Shock: 2012, *Critical Care Medicine*, (41)2, February 2012