



~ May 28, 2020 ~

Thank you for completing the initial education regarding the Sepsis Module. The information below will allow for additional practice in the TRAIN domain prior to Go Live on June 15, 2020. Please take a moment to review the scenarios listed below and access TRAIN with your network login using this link:

<http://cernermillennium.emhs.org/Citrix/T108Cweb/>

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Inpatient Providers

SIRS/Sepsis Alerts

- SIRS alerts will not be viewed directly by providers. Nursing staff will receive the alert and providers can launch the Sepsis Module from the Order Catalog as appropriate.

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- Pull in Patient List for ICU or Search by Patient Name to open the chart
 - Use: TRAIN, NLSEPPR1-2
- Review documentation and determine SIRS/Sepsis is not a consideration currently
- Add **Sepsis Not Indicated** Order
 - Select Suspect non-infectious cause of VS/Labs findings
 - Sign
- Sepsis Alerts
 - Upon documentation of vitals/lab results that trigger the alert, providers will be presented with the Sepsis Module upon opening the patient's chart. Providers can Document as Not Indicated or Open Chart to review.
 - Pull in Patient List for ICU or Search by Patient Name to open the chart
 - Use TRAIN, NLSEPPR3-6
 - Review triggering data
 - Launch Module
 - Select Sepsis from dropdown
 - Source: Pneumonia; Hospital Acquired
 - Click Select Recommendations
 - Special Dosing will default to Normal, adjust as needed
 - Antibiotics: Choose Cefipime/Vancomycin option
 - Fluids: not indicated
 - Add Diagnostic Studies: Lactate, Blood Cultures, Chest X-ray and Confirm
 - Add Sepsis to Problem List and Sign the Orders
 - Review and Sign

Severe Sepsis/Shock Alerts

- Severe Sepsis
 - Pull in Patient List for ICU or Search by Patient Name to open the chart
 - Use TRAIN, NLSEPPR7-9
 - Review triggering data
 - Launch Sepsis Module Order
 - Select Severe Sepsis status in dropdown
 - Source: Intra-Abdominal Source; Hospital Acquired
 - Special dosing will default to Normal, adjust as needed

- Antibiotics: Microfungin
- Fluids: Normal Saline for Ideal Body Weight
- Add Diagnostic Studies: Lactate, Blood Cultures, CBC, CMP and Confirm
- Add Severe Sepsis to Problem List and Sign the orders
- Review and Sign
- Septic Shock
 - Pull in Patient List for ICU or Search by Patient Name to open the chart
 - Use TRAIN, NLSEPPR10-12
 - Review triggering data
 - Launch Sepsis Module Order
 - Select Septic Shock status in dropdown
 - Source: Intra-Abdominal Source; Hospital acquired
 - Special Dosing will default to Normal, adjust as needed
 - Antibiotics: Cefipime, Metronidazole, Vancomycin option
 - Fluids: Normal Saline 30 ml/kg infusion
 - Diagnostic Studies: Lactate, Blood Cultures, CBC and Confirm
 - Add Septic Shock to Problem List and Sign the orders
 - Review and Sign
 - As results are received and reassessment has occurred, it is determined vasopressors need to be ordered.
 - Locate Sepsis Management order on Order Profile
 - Right click to Cancel/Reorder
 - Select Intra-Abdominal; Hospital Acquired and Select Recommendations
 - Orders previously placed will be seen
 - Scroll down to Vasopressors and select Norepinephrine and Confirm
 - Review and Sign

Sepsis Worklist

- Click on Sepsis Worklist in the Toolbar
 - Type Practice List in the name window
 - Click on Facility and select EMMC
 - Click on Building and select Inpatient
 - All other filters are optional, not selections will allow for all information to be seen
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- Save and Close the window to review the Dashboard
- Click on the Sepsis section of the pie graph and change from Dashboard to Worklist view
 - Review Overview tab for basic patient information
 - Switch to Current tab to review details pertaining to Vital Signs, Labs, Medications and other results
 - Click on Activation History tab to review Early Goal Directed Therapy criteria and any documented Assessments

Emergency Providers

SIRS/Sepsis Alerts

- SIRS alerts will not be viewed directly by providers. Nursing staff will receive the alert and providers can launch the Sepsis Module from the Order Catalog as appropriate.

NOTE: All Train patients are in the EMMC ED location.

- Click on the Patient Name to open the chart
 - Use: TRAIN, NLSEPPR1
- Review triggering data
- Add **Sepsis Not Indicated** Order
 - Select Suspect non-infectious cause of VS/Labs findings
 - Sign
- Sepsis Alerts
 - Upon documentation of vitals/lab results that trigger the alert, providers will be presented with the Sepsis Module upon opening the patient's chart.
 - Click on the Patient Name to open the chart
 - Use: TRAIN, NLSEPPR2-3
 - Review triggering data
 - Launch Module
 - Select Sepsis from dropdown
 - Source: Pneumonia; Community Acquired
 - Special dosing will default to ED/Single Dose, adjust as needed
 - Antibiotics: Ceftriaxone/Azithromycin option
 - Fluids: not indicated
 - Diagnostic Studies: CBC, CMP and RSV
 - **Confirm and Sign the Orders**

- Review and Sign

Severe Sepsis/Shock Alerts

- Severe Sepsis
 - Click on the Patient Name to open the chart
 - Use: TRAIN, NLSEPPR3-4
 - Review triggering data
 - Launch Module
 - Select Severe Sepsis status in dropdown
 - Source: Intra-abdominal Source; Community Acquired
 - Antibiotics: Piperacillin/tazobactam option
 - Fluids: ED Bolus
 - Add Diagnostic Studies: ED Batch Orders
 - Add Severe Sepsis to Problem List and Sign the orders
 - Review and Sign
- Septic Shock
 - Click on the Patient Name to open the chart
 - Use: TRAIN, NLSEPPR5
 - Review triggering data
 - Launch Module
 - Select Septic Shock status in dropdown
 - Source: Pneumonia; Community Acquired
 - Antibiotics: Ceftriaxone/Metronidazole option
 - Fluids: Normal Saline for Ideal Body Weight
 - Diagnostic Studies: VBG, 2-view Chest X-ray
 - Add Septic Shock to Problem List and Sign the orders
 - Review and Sign
 - As results are received and reassessment has occurred, it is determined vasopressors need to be ordered.
 - Locate Sepsis Management order on Order Profile
 - Right click to Cancel/Reorder
 - Select Intra-Abdominal; Hospital Acquired and Select Recommendations
 - Orders previously placed will be seen

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- Scroll down to Vasopressors and select Norepinephrine and Confirm
- Review and Sign

Sepsis Worklist

- Click on Sepsis Worklist in the Toolbar
 - Type Practice List in the name window
 - Click on Facility and select EMMC
 - Click on Building and select Inpatient
 - All other filters are optional, not selections will allow for all information to be seen
 - Save and Close the window to review the Dashboard
- Click on the Sepsis section of the pie graph and change from Dashboard to Worklist view
 - Review Overview tab for basic patient information
 - Switch to Current tab to review details pertaining to Vital Signs, Labs, Medications and other results
 - Click on Activation History tab to review Early Goal Directed Therapy criteria and any documented Assessments

Inpatient Nurses

Discern Alert Interaction

- Pull in Patient List for ICUB location or Search for Patient by Name: TRAIN, NLSEPCL1 -12
- Enter Vital Signs: T: 38.5, BP: 110/60, HR: 96, RR: 26
- Review Triggering Information in the Discern Notification window
- Clear Alert
 - Highlight alert and click Red X in the top left
 - Alerts will remain in the window until manually cleared

Provider Notification

- iView Documentation
 - Open Adult Quick View band
 - Document Suspected SIRS, date/time, Provider notified (Test MD, Provider) and a Continue to Monitor response
 - Early Warning Alerts Flowsheet
 - Open Results Review and select Early Warning Alerts Flowsheet from the drop down to review documentation
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Sepsis Worklist Review

- Click on Sepsis Worklist in the Toolbar
 - Type Practice List in the name window
 - Click on Facility and select EMMC
 - Click on Building and select Inpatient
 - All other filters are optional, not selections will allow for all information to be seen
 - Save and Close the window to review the Dashboard
- Click on the Sepsis section of the pie graph and change from Dashboard to Worklist view
 - Click on any Patient Name
 - Review Overview tab for basic patient information
 - Switch to Current tab to review details pertaining to Vital Signs, Labs, Medications and other results
 - Click on Activation History tab to review Early Goal Directed Therapy criteria and any documented Assessments
- Return to Dashboard view to see how many new alerts have fired in the past 3-, 6-, 9-, 12- hours
- Review how many patients have escalated in their status

Emergency Nurses

Discern Alert Interaction

- From the EMMC ED board, Right click on the Patient Name and select ED View
 - Use: TRAIN, NLSEPCL1-5
- Navigate to Vital Signs section and click + to enter: T: 38.5, BP: 110/60, HR: 96, RR: 26
- Review SIRS triggering information in the Discern Notification window
- Clear Alert
 - Highlight and click the Red X in the top left
 - Alerts will remain in the window until manually cleared

Provider Notification

- iView Documentation
 - Open Adult Quick View band
 - Document Suspected SIRS, date/time, Provider notified (Test MD, Provider) and a Continue to Monitor response
 - Early Warning Alerts Flowsheet
-

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- Open Results Review and select Early Warning Alerts Flowsheet from the drop down to review documentation

Reassessment

- Reassessment reveals a change in vital signs: T: 38.6, BP: 88/58, HR: 100, RR 28
- Review Sepsis triggering information in the Discern Notification window
 - Notice SIRS and Organ Dysfunction are listed as separated
 - Document Provider Notification as above, selecting Suspected Sepsis

Sepsis Worklist Review

- Click on Sepsis Worklist in the Toolbar
 - Type Practice List in the name window
 - Click on Facility and select EMMC
 - Click on Building and select Inpatient
 - All other filters are optional, not selections will allow for all information to be seen
 - Save and Close the window to review the Dashboard
- Click on the Sepsis section of the pie graph and change from Dashboard to Worklist view
 - Click on any Patient Name
 - Review Overview tab for basic patient information
 - Switch to Current tab to review details pertaining to Vital Signs, Labs, Medications and other results
 - Click on Activation History tab to review Early Goal Directed Therapy criteria and any documented Assessments
- Return to Dashboard view to see how many new alerts have fired in the past 3-, 6-, 9-, 12- hours
- Review how many patients have escalated in their status

Nursing Supervisors

Sepsis Worklist Review

- Click on Sepsis Worklist in the Toolbar
 - Type Practice List in the name window
 - Click on Facility and select EMMC
 - Click on Building and select Inpatient
 - All other filters are optional, not selections will allow for all information to be seen
 - Save and Close the window to review the Dashboard
 - Click on the Sepsis section of the pie graph and change from Dashboard to Worklist view
-

- Click on any Patient Name
- Review Overview tab for basic patient information
- Switch to Current tab to review details pertaining to Vital Signs, Labs, Medications and other results
- Click on Activation History tab to review Early Goal Directed Therapy criteria and any documented Assessments
- Return to Dashboard view to see how many new alerts have fired in the past 3-, 6-, 9-, 12- hours
- Review how many patients have escalated in their status
- Click the Add Patient button to manually add a patient to track
 - Click Search and type in Train, NLASP100-110
 - Select a reason: Needs a higher level of surveillance
 - Select Add and close the window
 - Refresh the screen
 - If the practice list was not set as default, close the filter window and select the practice list from the dropdown
 - The Manually Added box will now display a number
 - Check the box and change to Worklist view to see all manually added patients
- Remove a patient from the list by hovering over the name and clicking the red x in the top right corner
 - Enter a reason and Remove

For questions during go-live support, please reach out to a Super User or a member of the Support team.

Questions can also be called to the Project Command Center at:

973-7728 or 1-888-827-7728 (Option 4).
