# SEPSIS

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| Pressure injury prevention | Ask for help from peers to stay with the patient | Delivery oxygen when Spo2 drops | MAP should above 65mmHg | Inform Doctor when blood results are back |
| Call doctor to come immediately without describing situation because is urgent | Pathway and other documentations | Insert catheter when needed | Ask patient to calm down and explain that nothing is happening | Not inform family until the symptoms well managed |
| Roughly observations not required because ABX already given | Blood sugar check is not important in this case | Fluid balance monitor: output should be monitored closely | Given antibiotics as charted | Mechanical ventilation required to reduce work of breathing |
| Go to the next patient and ignore patients complain | Lab investigations as Doctors orders | Encourage more fluid intake when no urine output for 3-4 hours | Inform family and career with adequate education and updates | Blood sugar check required |
| MAP should above 80mmHg | Call doctor using ISBAR handover | Sent blood culture | Call for blood test with Doctors order | Fluid balance monitor: Input should be monitor closely |



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