

# Sepsis CALF Sheet

When sepsis is suspected, use this form to assure completion of sepsis bundle interventions.

(Please  if done for the receiving unit)

Time sepsis was suspected and/or orders were placed \_\_\_\_\_

PATIENT STICKER HERE

**C**  Cultures sent

**A**  Antibiotic(s)\*\* given IV  
What was hung and when?  
\_\_\_\_\_

**L**  Lactate sent  
 Second lactate sent  
(w/in 4 hours if 1st lactate is > 2)

**F**  Fluid Resuscitation\*  
30 mL/kg required ONLY if  
SBP < 90, MAP < 65, or Lactate > 4  
(hang all needed fluids within 3 hours)

\* "bolus wide-open" is not an acceptable rate!!  
Please have orders contain a rate or duration

\*\*See antibiotic listing on back of card

**UPMC**  
LIFE CHANGING MEDICINE

# Remember

## VITAL SIGNS AFTER FLUID RESUSCITATION

If SBP < 90 or MAP < 65 in the hour after fluid bolus is complete, call attending to discuss need for vasopressors (Levophed)

## USE THE SEPSIS POWERPLAN

There is an **ED, Inpatient, and/or Nurse Protocol Sepsis PowerPlan** available to get orders started for sepsis and to make sure nothing is missed! Call provider for approval.

### \*\* Common Broad-Spectrum Antibiotics (IV)

*Hang the fastest first*

Piperacillin-Tazobactam  
(Zosyn)

Cefepime

Ampicillin/Sulbactam  
(Unasyn)

Ceftriaxone (Rocephin)

Meropenem

Levofloxacin  
(Levaquin)

Aztreonam WITH  
Vancomycin

Ciprofloxacin WITH  
Vancomycin