

Implementing Sepsis-3 and the qSOFA in Ambulatory Services

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Introduction: Sepsis-3 and the Quick Sequential Organ Failure Assessment (qSOFA) was released in 2016. A large university healthcare system implemented Sepsis-3 education and a qSOFA best practice alert (BPA) trial in Ambulatory Services (AS).

Identification of the problem: Sepsis is a worldwide leading cause of death and the costliest condition to treat. Early recognition of Sepsis remains the cornerstone for survival. Limited understanding of Sepsis 3 and the qSOFA was identified in AS.

QI question/Purpose of the study: Can we decrease Sepsis mortality by early identification of patients in AS through education and implementation of a qSOFA BPA?

Methods: Participant completed a 4 question pre learning survey. They documented their role in healthcare. They participated in a Sepsis-3 PowerPoint presentation. A post learning survey was completed. There were no participant restrictions. Pre/post learning results were compared, and yearly Sepsis mortality was compared. Retrospective data was obtain for possible positive qSOFA results. An active qSOFA BPA is being trialed in AS Urology Clinic.

Outcomes/Results: The project demonstrated that after education, all levels of AS healthcare professionals had a greater understanding of Sepsis-3 and the qSOFA. Yearly sepsis mortality decreased slightly. Retrospective data showed a possible qSOFA BPA fire rate of 4.8%. 24 out of 55,852 AS patients showed results for a positive qSOFA based on respiratory rate and blood pressure data.

Discussion: This project fills a gap in the literature reviews of outcomes from Sepsis-3 and qSOFA BPA implementation in AS. Disseminating the results are important to decrease Sepsis mortality.

Conclusion: Education, and implementation of a qSOFA BPA in AS, may decrease Sepsis mortality by earlier recognition and faster escalation of patient care to the appropriate setting.

Implications for perianesthesia nurses and future research: The perianesthesia nurse can easily implement the qSOFA in their nursing practice to help identify patients that may have increased risk for a poor outcome throughout their perianesthesia experience.