Sepsis Nursing Care Plan

Patient infor	mation			
Full name:				Date of birth:
Gender:	Male	Female	Other:	
Patient ID:				
Contact numb	oer:			Email:
Infection and medical information				
Physical exar	ns:			
Lab testing:				
Imaging:				
Symptoms o	f sepsis			
☐ Change i	n mental st	atus		Lightheadedness
	☐ Fast and shallow breathing			Shivering
	with no ca			
Decreased c	ardiac out _l	put		
☐ Tachycar	dia		I	Blood pressure reading <90/60 mmHg
☐ Central v	enous pres	sure < 8 mmH	g	Changes in the level of consciousness
☐ Nean arte	erial pressu	re <65 mmH	(Cold and clammy hands
☐ Cyanosis			ı	Presence of murmurs
☐ Prolonge	d capillary ı	refill time		

Assessment Intervention · Assess for signs and symptoms of cardiac · Administering fluid resuscitation and and circulatory compromise. medications as prescribed (antibiotics and • Monitor hemodynamic parameters such as vasopressors). Central Venous Pressure, Pulmonary Artery • Anticipate the need for adjunctive therapies Diastolic Pressure, and Pulmonary Capillary as indicated. Mechanical support such as Wedge Pressure. intraaortic balloon pumps are widely used in · Monitor laboratory data and look for elevated septic cardiomyopathy. cardiac markers. · Meet oxygen demands. **Notes** Hyperthermia ☐ High body temperature Flushed skin Dehydration Tachypnea Increased metabolic rate Tachycardia Seizures Inflammation **Assessment** Intervention · Assess temperature rectally for the most Providing a cool environment and tepid accurate body temperature. baths. · Assess the neurological state of the patient · Administering antipyretics such as as uncontrolled hyperthermia can lead to acetaminophen. brain damage. **Notes**

Ineffective protection					
☐ Abnormal blood results	Change in levels of consciousness				
☐ Immunosuppression	Insomnia				
☐ Poor nutrition	Open wounds or pressure ulcers				
Assessment	Intervention				
Xareful monitoring for signs of progressing sepsis, monitoring leukocytosis, and careful management of risk factors such as patients who suffer from immunosuppression from cancer, HIV, and related treatments, and careful management of patients who are immobile or have open wounds.	 Encouragement of rest. Avoiding invasive procedures like catheterization, injections, and rectal or vaginal procedures where possible. Dietary changes involving high protein, nutrient-dense foods. Education for family and patients around infection control and management. 				
Notes					
Attach daily care plans, related lab results, and i	nfection control procedures.				
Physician's notes and recommendations					
Physician's signature:	Date:				