Solution: **Rapid Rescuers and Sepsis Survivors**

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**IDENTIFICATION:**
Nearly 600 patients die every day due to severe sepsis. Forty percent of all ICU expenditures are related to the care of patients with severe sepsis. Our rapid response statistics show 38% of calls are for patient who screen positive for severe sepsis. Our goal was to identify potential severe sepsis patients utilizing our proactive rapid response screening tool.

**PROCESS:**
Our goal was to identify potential severe sepsis patients utilizing our proactive rapid response screening tool. This tool utilizes a combination of computerized lab/test results to screen patient prior to a rapid response. For over a year each rapid response patient was screened for severe sepsis. The inclusion of the usual sepsis screening tool helped to broaden the team’s focus and assisted with early recognition and treatment of patients with severe sepsis. Currently we have a screening tool to identify potential rapid response patients utilizing lab/test data. By adding the white blood cell count the resource nurse on the med/surg unit will be able to identify potential severe sepsis patients earlier, before a rapid response is called or the patient required emergent intervention on the floor. Our proactive screen can be viewed 24/7. The team may screen patients more than once a day if needed. Once the screen identifies a potential patient a rapid response, call to the medical team or sepsis committee member will go the patient’s bedside to assess the patient for severe sepsis. Treatment is begun with the initiation of the Severe Sepsis Orderset preventing treatment delays and reducing the need to transfer the patient to a higher level of care.

**SOLUTION:**
From our initial small trial 75% of the patients who were identified by the proactive screening were positive for severe sepsis utilizing the usual severe sepsis screening tool. We have just begun to see a decrease in our sepsis mortality index from 2.2 to 1.6. By identifying and treating our non-ICU patients earlier we have decreased the number of Code Blues by 20.6% compared to the same time last year. We have decreased the number of ICU/IMC transfers from the floors by 56%. Our nurses have embraced this new initiative, and view their Rapid Response Team as an opportunity to help their patients in a non-ICU environment.