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SEPSIS BULLETIN 07 November 2017

[Does EMS Transport of Septic Patients Improve Downstream Processes of Care?](#)

E.Hofmann, A.Loza-Gomez, J.Lam, M.Menchine

Annals of Emergency Medicine

Volume 70, Issue 4, Supplement, October 2017, Page S16

Early in-hospital recognition and aggressive treatment of severe sepsis has been associated with a reduction in in-hospital mortality. The goal of this study was to determine whether there was a difference in management and outcome between patients arriving by EMS and those presenting directly to the ED.

[Quick Sequential Organ Failure Assessment and Systemic Inflammatory Response Syndrome Criteria as Predictors of Critical Care Intervention Among Patients With Suspected Infection](#)

Moskowitz, A et al

Critical Care Medicine: November 2017 - Volume 45 - Issue 11 - p 1813–1819

The Sepsis III clinical criteria for the diagnosis of sepsis rely on scores derived to predict inhospital mortality. In this study, we introduce the novel outcome of “received critical care intervention” and investigate the related predictive performance of both the quick Sequential Organ Failure Assessment and the Systemic Inflammatory Response Syndrome criteria.

[The Impact of the Sepsis-3 Septic Shock Definition on Previously Defined Septic Shock Patients](#)

Sterling, S A. et al

Critical Care Medicine: September 2017 - Volume 45 - Issue 9 - p 1436–1442

The Third International Consensus Definitions Task

[Investigating the Impact of Different Suspicion of Infection Criteria on the Accuracy of Quick Sepsis-Related Organ Failure Assessment, Systemic Inflammatory Response Syndrome, and Early Warning Scores](#)

Churpek, Matthew M et al.

Critical Care Medicine: November 2017 - Volume 45 - Issue 11 - p 1805–1812

Studies in sepsis are limited by heterogeneity regarding what constitutes suspicion of infection. The authors sought to compare potential suspicion criteria using antibiotic and culture order combinations in terms of patient characteristics and outcomes. The authors further sought to determine the impact of differing criteria on the accuracy of sepsis screening tools and early warning scores.

[Patterns and Outcomes Associated With Timeliness of Initial Crystalloid Resuscitation in a Prospective Sepsis and Septic Shock Cohort](#)

Leisman, D et al

Critical Care Medicine: October 2017 - Volume 45 - Issue 10 - p 1596–1606

The objectives of this study were to 1) assess patterns of early crystalloid resuscitation provided to sepsis and septic shock patients at initial presentation and 2) determine the association between time to initial crystalloid resuscitation with hospital mortality, mechanical ventilation, ICU utilization, and length of stay.

[Increased Time to Initial Antimicrobial Administration Is Associated With Progression to Septic Shock in Severe Sepsis Patients](#)

Force (Sepsis-3) recently recommended changes to the definitions of sepsis. The impact of these changes remains unclear. The objective was to determine the outcomes of patients meeting Sepsis-3 septic shock criteria versus patients meeting the “old” (1991) criteria of septic shock only.

[Sepsis kills one million newborns a year: WHO](#)

Vogell, L.

CMAJ October 10, 2017 vol. 189 no. 40

News article. Sepsis claims the lives of one million newborns and up to 100 000 women during and after pregnancy every year, reports the World Health Organization (WHO).

[Factors associated with severe sepsis or septic shock in complicated pyelonephritis](#)

Ruiz-Mesa, J.D. et al

Medicine (Baltimore). 2017 Oct;96(43):e8371

Severe sepsis or septic shock are the main factors influencing the prognosis of acute complicated pyelonephritis (ACPN). The prevalence of severe sepsis and septic shock in patients with ACPN is high. Some factors associated with severe sepsis are easy to identify in any emergency department. The information provided here could be useful when deciding which patients should be admitted to receive immediate treatment.

Whiles, B et al

Critical Care Medicine: April 2017 - Volume 45 - Issue 4 - p 623–629

This study emphasizes the importance of early, broad-spectrum antimicrobial administration in severe sepsis patients admitted through the emergency department, as longer time to initial antimicrobial administration is associated with increased progression of severe sepsis to septic shock and increased mortality.

[Think Sepsis: The identification and management of sepsis in Primary Care](#)

Health Education England

“THINK SEPSIS” is a Health Education England programme aimed at improving the diagnosis and management of those with sepsis.

[Sepsis Toolkit](#)

Royal College of General Practitioners

The Sepsis toolkit provides a collection of tools, knowledge, and current guidance to support the identifying and appropriate management of patients with sepsis. The toolkit is aimed at GPs and healthcare professionals assessing people in the community with acute infection. The resources also include information for patients and those close to them to look for when concerned about a sudden deterioration in a person’s health in the presence of infection.

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