



ADHERENCE TO BEST PRACTICES IN SEPSIS CARE: **ONLY 3 IN 4** SURVEYED CLINICIANS ARE KNOWLEDGEABLE ABOUT SEPSIS BUNDLES

WHILE MOST SURVEYED CLINICIANS RECOGNIZE SEPSIS AS A SERIOUS CONDITION, THERE ARE CASES WHERE DIAGNOSIS IS DELAYED OR EVEN MISSED



think that developing sepsis is serious for patients they treat in hospital



agree that early detection of sepsis can lead to significantly better outcomes.

However



PROTOCOLS IN SEPSIS CARE ARE **NOT FOLLOWED BY ALL** DESPITE HIGH STATED ADHERENCE

Good perceived awareness and high stated adherence



know a great deal or are somewhat knowledgeable about Sepsis Bundles



think the actions outlined in the Hour-1 Sepsis Bundles* contain appropriate steps for sepsis management



state that actions outlined in the Hour-1 Sepsis Bundles are followed at least to some extent

However low recognition of details when shown

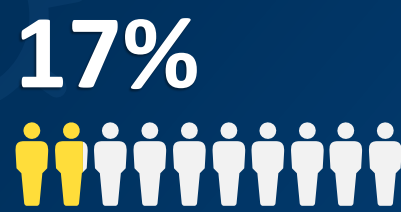
53% of those aware of Sepsis Bundles correctly selected from a given list all actions involved in Sepsis Bundles**.



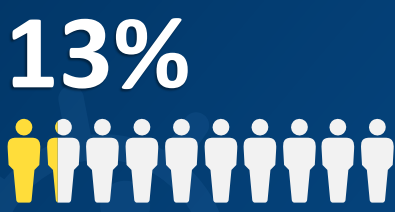
* Hour-1 Sepsis Bundles includes a set of interventions which are recommended to begin immediately in all patients with suspected sepsis or septic shock.

**Correctly selected actions include: Measure lactate level and re-measure if the initial level is elevated; Obtain blood cultures before administering antibiotics; Administer broad-spectrum antibiotics; Administer IV fluid: rapid administration of 30mL/kg crystalloid for hypotension or lactate ≥ 4 mmol/L; Apply vasopressors if hypotensive during or after fluid resuscitation to maintain a mean arterial pressure ≥ 65 mmHg

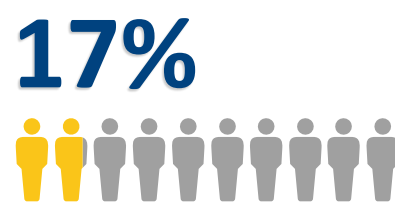
AND **NOT ALL CLINICIANS** BELIEVE CLEAR HOSPITAL PROTOCOLS ARE IN PLACE AND FOLLOWED



do not agree that there is a clear sepsis protocol in the hospital where they work in



do not agree that they consistently follow protocols in place in their hospital for treating sepsis



do not agree that following standardised clinical protocols and delivering autonomous patient care are two actions that are compatible with each other

THERE ARE A NUMBER OF **BARRIERS TO ADHERENCE** OF THE SEPSIS BUNDLES

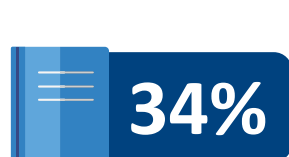
From a list of given actions, surveyed clinicians are most likely to believe that the following are barriers to adhering to the stages outlined in the Sepsis Bundles...



High patient caseload



Staff shortages



Insufficient training



Lack of familiarity with the steps

From a list of given actions, surveyed clinicians are most likely to believe the following would help improve adherence to Sepsis Bundles:

