Sepsis

Measure 3: Timely Blood Culture for Children with Sepsis Syndrome

Description

The proportion of hospitalized children with sepsis syndrome who had blood culture drawn within 4 hours of meeting diagnostic criteria for sepsis syndrome. A higher proportion indicates better performance.

Definitions

Intake period January 1 through December 31 of the measurement year.

Hospitalized children All children admitted to the hospital, including the Emergency

Department

Sepsis syndrome Sepsis, severe sepsis or septic shock (see Table 3-A). Any of the ICD-9

codes listed in Table 3-B qualifies as sepsis syndrome.

Table 3-A: Definition of Sepsis Syndrome

Term	Definition
Sepsis syndrome	Sepsis, severe sepsis or septic shock
Sepsis	Systemic Inflammatory Response Syndrome (SIRS) in the presence of, or as a result of, suspected or proven infection
SIRS	 The presence of at least two of the following four criteria, one of which must be abnormal temperature or leukocyte count: Core temperature of > 38.5°C or < 36°C. Tachycardia, defined as a mean heart rate > 2 SD above normal for age in the absence of external stimulus, chronic drugs, or painful stimuli; or otherwise unexplained persistent elevation over a 0.5-to 4-hr time period OR for children <1 yr old: bradycardia, defined as a mean heart rate <10th percentile for age in the absence of external vagal stimulus, β- blocker drugs, or congenital heart disease; or otherwise unexplained persistent depression over a 0.5-hr time period. Mean respiratory rate > 2 SD above normal for age or mechanical ventilation for an acute process not related to underlying neuromuscular disease or the receipt of general anesthesia. Leukocyte count elevated or depressed for age (not secondary to chemotherapy-induced leukopenia) or > 10% immature neutrophils
Infection	A suspected or proven (by positive culture, tissue stain, or polymerase chain reaction test) infection caused by any pathogen OR a clinical syndrome associated with a high probability of infection. Evidence of infection includes positive findings on clinical exam, imaging, or laboratory tests (e.g., white blood cells in a normally sterile body fluid, perforated viscus, chest radiograph consistent with pneumonia, petechial or purpuric rash, or purpura fulminans).

Term	Definition	
Suspected	Infection is suspected when one of the following is documented:	
infection	Orders for antibiotics OR	
	Antibiotics administered OR	
	 Orders for urine, blood or spinal culture OR 	
	Urine, blood or spinal culture drawn OR	
	Chart notation of:	
	"Rule out infection" OR	
	"Suspected infection" OR	
	"Rule out sepsis" OR	
	"Suspected sepsis"	
Severe sepsis	osis plus one of the following: cardiovascular organ dysfunction OR acute respiratory ress syndrome OR two or more other organ dysfunctions.	
Organ	Cardiovascular	
dysfunctions	Despite administration of isotonic intravenous fluid bolus ≥ 40 mL/kg in 1 hour,	
	 Decrease in BP (hypotension) < 5th percentile for age or systolic BP < 2 SD below normal for age 	
	OR	
	 Need for vasoactive drug to maintain BP in normal range (dopamine > 5 	
	μg/kg/min or dobutamine, epinephrine, or norepinephrine at any dose)	
	OR	
	Two of the following:	
	 Unexplained metabolic acidosis: base deficit > 5.0 mEq/L 	
	 Increased arterial lactate > 2 times upper limit of normal 	
	Oliguria: urine output < 0.5 mL/kg/hr Dralan and confiler and the control of the control o	
	Prolonged capillary refill: > 5 seconds Core to paripheral temperature gap to 3°C.	
	Core to peripheral temperature gap > 3°CRespiratory	
	 PaO2/FIO2 < 300 in absence of cyanotic heart disease or preexisting lung disease 	
	OR	
	 PaCO2 > 65 torr or 20 mm Hg over baseline PaCO2 OR 	
	 Proven need or > 50% FIO2 to maintain saturation ≥ 92% OR 	
	Need for non-elective invasive or noninvasive mechanical ventilation	
	Neurologic	
	 Glasgow Coma Score ≤ 11 	
	OR	
	 Acute change in mental status with a decrease in Glasgow Coma Score ≥ 3 	
	points from abnormal baseline Hematologic	
	Platelet count < 80,000/mm ³ or a decline of 50% in platelet count from	
	highest value recorded over the past 3 days (for chronic	
	hematology/oncology patients)	
	OR	
	 International normalized ratio >2 	
	Renal	
	 Serum creatinine ≥ 2 times upper limit of normal for age or 2-fold increase in 	
	baseline creatinine Hepatic	
	 Total bilirubin ≥ 4 mg/dL (not applicable for newborn) 	
	OR	
	ALT 2 times upper limit of normal for age	
Septic Shock	Sepsis and cardiovascular organ dysfunction	

Table 3-B: Codes to Identify Sepsis Syndrome

Condition Name	CD-9 Code(s)
Septicemia	038.xx
Streptococcal septicemia	038.0
Staphylococcal septicemia Staphylococcal septicemia	038.1
Staphylococcal septicemia, unspecified	038.10
Methicillin susceptible Staphylococcus aureus septicemia	038.11
Methicillin resistant Staphylococcus aureus septicemia	038.12
Other staphylococcal septicemia	038.19
Pneumococcal septicemia [Streptococcus pneumoniae septicemia]	038.2
Septicemia due to anaerobes	038.3
Septicemia due to other gram-negative organisms	038.4
Septicemia due to gram-negative organism, unspecified	038.40
Septicemia due to Haemophilus influenzae [H. influenzae]	038.41
Septicemia due to escherichia coli [E. coli]	038.42
Septicemia due to pseudomonas	038.43
Septicemia due to serratia	038.44
Other septicemia due to gram-negative organisms	038.49
Other specified septicemias	038.8
Unspecified septicemia	038.9
Severe sepsis	995.92
Sepsis	995.91
Septicemia [sepsis] of newborn	771.81
Systemic inflammatory response syndrome due to non-infectious process with acute organ dysfunction	995.94
Bacteremia	790.7
Septic shock	785.52

Eligible Population

The determination of eligible population for this measure requires medical record data.

Ages Younger than 19 years of age during measurement year

Event/Diagnosis Diagnosed with sepsis syndrome (sepsis, severe sepsis or septic shock) as

documented in the medical record

Specification

Denominator All hospitalized children with sepsis syndrome

Numerator Number of hospitalized children with sepsis syndrome who had blood culture

drawn within 4 hours of meeting diagnostic criteria for sepsis syndrome

Exclusions

- All children with sepsis syndrome who were transferred from another hospital, if blood culture was performed at the referring hospital
- Children who died within 4 hours of meeting diagnostic criteria for sepsis syndrome
- Patients with advanced directives for comfort care
- Patient or surrogate decision maker declined or is unwilling to consent to therapies