

CBE ID

0500

Title

Severe Sepsis and Septic Shock: Management Bundle

Endorsement Status

Endorsed

Is Under Review

No

Next Maintenance Cycle

Spring 2027

Previous Endorsement Cycle

Spring 2021

Initial Endorsement

Thu, 10/23/2008 - 20:00

Steward

Henry Ford Hospital

1.0 New or Maintenance

Maintenance

1.1 Measure Structure

Composite Measure

1.3 Electronic Clinical Quality Measure (eCQM)

No

1.6 Measure Description

This measure focuses on adults 18 years and older with a diagnosis of severe sepsis or septic shock. Consistent with Surviving Sepsis Campaign guidelines, it assesses measurement of lactate, obtaining blood cultures, administering broad spectrum antibiotics, fluid resuscitation, vasopressor administration, reassessment of volume status and tissue perfusion, and repeat lactate measurement. As reflected in the data elements and their definitions, the first three interventions should occur within three hours of presentation of severe sepsis, while the remaining interventions are expected to occur within six hours of presentation of septic shock.

1.8 Level of Analysis

Facility

1.14 Numerator

Numerator Statement: Patients who received ALL of the following: Within three hours of presentation of severe sepsis: • Initial lactate level measurement • Broad spectrum or other antibiotics administered • Blood cultures drawn prior to antibiotics AND received within six hours of presentation of severe sepsis. ONLY if the initial lactate is elevated: • Repeat lactate level measurement AND within three hours of initial hypotension: • Resuscitation with 30 mL/kg crystalloid fluids OR within three hours of septic shock: • Resuscitation with 30 mL/kg crystalloid fluids AND within six hours of septic shock presentation, ONLY if hypotension persists after fluid administration: • Vasopressors are administered AND within six hours of septic shock presentation, if hypotension persists after fluid administration or initial lactate ≥ 4 mmol/L: • Repeat volume status and tissue perfusion assessment is performed

1.15 Denominator

Inpatients age 18 and over with an ICD-10-CM Principal or Other Diagnosis Code of Sepsis, Severe Sepsis, or Septic Shock and not equal to U07.1 (COVID-19).

1.20 Types of Data Sources

Paper Patient Medical Records

6.1.2 Current or Planned Use(s)

Public Reporting, Payment Program, Professional Certification or Recognition Program

6.1.3 Current Use(s)

Public Reporting, Payment Program, Professional Certification or Recognition Program

Developer POC email

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Exclusions

The following patients are excluded from the denominator:

- Patients with an ICD-10-CM Principal or Other Diagnosis Code of U07.1 (COVID-19)
- Directive for Comfort Care or Palliative Care within six hours of presentation of severe sepsis
- Directive for Comfort Care or Palliative Care within six hours of presentation of septic shock
- Administrative contraindication to care within six hours of presentation of severe sepsis
- Administrative contraindication to care within six hours of presentation of septic shock
- Length of Stay >120 days
- Transfer in from another acute care facility
- Patients enrolled in a clinical trial for sepsis, severe sepsis or septic shock treatment or intervention
- Patients with severe sepsis who are discharged within six hours of presentation
- Patients with septic shock who are discharged within six hours of presentation
- Patients receiving IV antibiotics for more than 24 hours prior to presentation of severe sepsis

Measure Developer POC

Bob Dickerson

Mathematica
United States

Planned Use

Public Reporting

Risk Adjustment

No risk adjustment or risk stratification

Target Population

Elderly

The measure developer is different from the measure steward

Yes

Steward Address

Emanuel Rivers
United States

Steward Organization

Henry Ford Hospital

Steward Organization URL

<https://www.henryford.com/locations/henry-ford-hospital>

Steward POC email

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