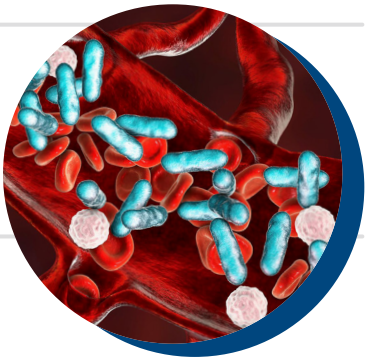
Patient Safety Indicator

PSI-13 Post-Op Sepsis

Henry Mayo Newhall Hospital

Definition



Elective surgical discharges for patients 18 years or older who develop sepsis after an **Operating Room (OR) procedure**. This means the patient has a secondary diagnosis of Sepsis after surgery.

Exclusions

- Patient is admitted with a principal diagnosis of sepsis or an infection
  - A diagnosis of sepsis or infection that was POA
  - First OR procedure occurred after or on the 10th day following admission
  - Obstetric patients
  - If your patient is a newborn in the Perinatal period

When you might get a query

- When Present on admission status is not indicated.
- When source of infection is not clear.

Documentation Tips

Criteria for Accurate Reporting & Capture:

- ✓ Confirm sepsis diagnosis and Present on Admission (POA) status
- ✓ Specify 2+ SIRS criteria used to diagnosis sepsis with confirmed/suspected infection:
- ✓ Temp >100.4°F or 90 RR >20 WBC >12k or 10%
- ✓ Specify and link the organ dysfunction to the sepsis, if applicable
- ✓ Document clinical indictors to support the sepsis diagnosis
- ✓ Include the sepsis cause (i.e., infection, post-op infection, device) MEAT criteria (Monitoring, Evaluating, Assessing, Treating)
- ✓ **SIRS:** 96.8 F < Temp >100.9 F, HR > 90, RR >20, 4 < WBC > 12 or > 10% Bands
- ✓ **Organ Dysfunction:** SBP < 90 or MAP < 65, SBP decrease > 40mm Hg from baseline, Lactate > 2, Bilirubin > 2, New need for invasive or non-invasive ventilation, INR > 1.5 or aPTT > 60sec, Plt < 100,000, Creatinine > 2 or UOP < 0.5/ml/kg/hr x 2 hrs

Linkage: Severe Sepsis requires the presence of organ dysfunction that must be linked to the sepsis, or "Severe Sepsis" must be stated E.g., Acute renal failure due to sepsis Severe sepsis with acute renal failure

Specification: Other opportunities to specify include listing the causative organism or specifying if sepsis was a complication of care such as following a procedure or due to a device or catheter E.g., Sepsis "due to" or "caused by" Foley catheter

Clarifications: Ambiguous or conflicting documentation is a source of confusion for hospital coders and can lead to inaccurate coding. Documenting a clarifying statement can help prevent confusion, inaccurate coding, and denials E.g., If sepsis was ruled out, document "sepsis has been ruled out and the patients' symptoms are due to (list the cause)"