Sepsis Cohort Clinical Record Form

Name (initial)			ID		
Gender	☐ M	☐ F	Age		years
Department		Ward		Admission Date	

1. Initial symptoms & positive P/Ex

☐ Fever (onset: day)
Symptoms
☐ CNS -   ☐ Urinary tract system -   ☐ Head and Neck -   ☐ Obstetric system -   ☐ Respiratory system -   ☐ Soft and muscular system -   ☐ Hepatobiliary system -   ☐ Vascular system -   ☐ GI system -   ☐ Primary bacteremia -   ☐ Others -

2. Time to initiation of treatment

☐	Transfer from other hospital	☐ acute care hospital name: admission date: from to initial date of antibiotics: ☐ long-term care hospital name: admission date: from to initial date of antibiotics:

3. Infection

Site of infection

☐ CNS (definitive, suspicious)	☐ Urinary tract system (definitive, suspicious)
☐ Head and Neck (definitive, suspicious)	☐ Obstetric system (definitive, suspicious)
☐ Respiratory system (definitive, suspicious)	☐ Soft and muscular system (definitive, suspicious)
☐ Hepatobiliary system (definitive, suspicious)	☐ Vascular system (definitive, suspicious)
☐ GI system (definitive, suspicious)	☐ Primary bacteremia (definitive, suspicious)
☐ Others (definitive, suspicious)	
Diagnosis (ex. r/o Pneumonia):	

Acquisition

☐ community	☐ healthcare associated infection	☐ hospital acquired infection

Sepsis category

Status	Organ dysfunction
☐ bacteremia	☐ hypotension
☐ septic shock	☐ kidney
☐ severe sepsis	☐ arterial hypoxemia
☐ severe sepsis and septic shock	☐ Coagulation abnormality (INR>1.5)
	☐ Thrombocytopenia (<100,000)
	☐ Hyperbilirubinemia (>2)
	☐ Elevated lactate (above normal)

Pitt bacteremia score (☐ no bacteremia) - results of first blood culture

Fever	☐ ≤35℃or ≥40℃	☐ 35.1-36℃ or 39-39.9℃	☐ 36.1-38.9℃
Hypotension	☐ Y	☐ N	
Mechanical ventilation	☐ Y	☐ N	
Cardiac arrest	☐ Y	☐ N	
Mental status	☐ Alert	☐ Disoriented	☐ Stuporous	☐ Comatose

4. Patient – comorbidity

Charlson comorbidity score

MI history	☐Y ☐N	Connective tissue disease	☐Y ☐N
CHF	☐Y ☐N	Peptic ulcer disease	☐Y ☐N
Peripheral vascular disease	☐Y ☐N	Chronic renal disease	☐Y ☐N
Cerebrovascular disease	☐Y ☐N	Hemiplegia	☐Y ☐N
Dementia	☐Y ☐N	Leukemia	☐Y ☐N
Chronic pulmonary disease	☐Y ☐N	Lymphoma	☐Y ☐N
Chronic liver disease	☐Y ☐N (**LC** ☐)	AIDS	☐Y ☐N
Diabetes	☐Y ☐N (end-organ damage ☐)	Tumor	☐Y ☐N (metastasis ☐)

* ☐ alcoholics ☐ smoker

Indwelling devices

devices	Already	Newly	devices	Already	Newly
☐ Indwelling urinary catheter	☐	☐	☐ dialysis catheter	☐	☐
☐ Gastrostomy tube	☐	☐	☐ tracheostomy tube	☐	☐
☐ PICC	☐	☐	☐ central IV catheter	☐	☐
☐ suprapubic urinary catheter	☐	☐	☐ NG tube	☐	☐
☐ ventilator	☐	☐	☐ intubation tube	☐	☐
☐ others					

5. Patient – severity

APACH II/III score, SAPS II, SOFA, MODs, RAPS, MEWS score

Vital sign					
HR		BP(SBP/DBP)		RR	
Temp		GCS		Pressure adjusted heart rate	
ABGA					
pH		pCO2		PO2	
FiO2		CPAP or mechanical ventilation			Y ☐ N ☐
CHEM-7					
Na		K		CO2	
BUN		Cr		ARF	Y ☐ N ☐
Bilirubin		PT (sec, %)			
CBC					
WBC	X10^9/L	Hct	%	Plt	10^3/mm^3
MISC					
Urine output		mL/hr (or)	mL/24hrs (or)	mL/8hrs	
Vasopressors	☐Y ☐N	Age		Bilirubin	
Chronic disease	☐ metastatic cancer		☐ Hematologic malignancy	☐ AIDS	
Type of adm	☐ scheduled surgical		☐ medical	☐ emergency surgical	
Severe organ system insufficiency or immunocompromised ☐Y ☐N					
*Liver: LC, Heart: NYHA class IV, Respiratory: COPD, Renal: dialysis					

Glasgow Coma Scale

Eye Opening Response	Eyes open spontaneously	4 points
	Eyes open to verbal command, speech, or shout	3 points
	Eyes open to pain (not applied to face)	2 points
	No eye opening	1 point
Verbal response	Oriented	5 points
	Confused conversation, but able to answer questions	4 points
	Inappropriate responses, words discernible	3 points
	Incomprehensible sounds or speech	2 points
	No verbal response	1 point
Motor response	Obeys commands for movement	6 points
	Purposeful movement to painful stimulus	5 points
	Withdraws from pain	4 points
	Abnormal flexion, decorticate posture	3 points
	Extensor response, decerebrate posture	2 points
	No motor response	1 point

6. Lab.

☐ CBC	Hb		WBC		Platelet	
☐ renal function	BUN		Cr		GFR	
☐ electrolyte	Na		K		HCO3	
	Ca		Mg		P	
☐ LFT	AST		ALT		ALP	
	GGT		Bilirubin		LDH	
☐ Coagulation	PT		aPTT			
☐ Nutrition	Protein		Albumin		T. cholest	
	Triglyceride		LDL		HDL	
	Ferritin		Thiamine			
☐ Inflammation	CRP		Procalcitonin			
☐ Cardiac marker	BNP		CK-MB		Troponin	
☐ Circulation	Lactate					
☐ Hormone	TSH		Free T4		HbA1c	
	ACTH		Cortisol			

ABGA (pH-CO2-O2-BE-SaO2)

Pathogen (only initial culture study)

Site	Done or not	Pathogen	Resistant
Blood	☐ Done ☐ Not done		
Sputum	☐ Done ☐ Not done		
Bile	☐ Done ☐ Not done		
Liver	☐ Done ☐ Not done		
Urine	☐ Done ☐ Not done		
Stool	☐ Done ☐ Not done		
Pus	☐ Done ☐ Not done		
Tissue	☐ Done ☐ Not done		
Others	Site:		

7. Antibiotics

1st Empirical antibiotic therapy (monotherapy □, combination therapy □) - duration: (h/d)

Beta-lactam

	Name		Name
Natural penicillin		Non-cephamycin 2nd cepha	
Amonipenicillin		Anti-pseudomonal 3rd cepha	
Antistaphylococcal penicillin		Other 3rd cephalosporin	
b-lactamase inhibitor		4th cephalosporin	
Piperacillin-tazobactam		Monobactam	
1st cephalosporin		Ertapenem	
Cephamycin 2nd cepha		Non-ertapenem carbapenem	

Others

	Name		Name
2nd quinolone		Lincosamide	
3rd quinolone		Glycopeptide	
4th quinolone		Oxazolidinone	
Aminoglycoside		Folate antagonist	
Macrolide		Polymycin	
Tetracycline			

2nd Empirical antibiotic therapy (monotherapy □, combination therapy □) - duration: (h/d)

Beta-lactam

	Name		Name
Natural penicillin		Non-cephamycin 2nd cepha	
Amonipenicillin		Anti-pseudomonal 3rd cepha	
Antistaphylococcal penicillin		Other 3rd cephalosporin	
b-lactamase inhibitor		4th cephalosporin	
Piperacillin-tazobactam		Monobactam	
1st cephalosporin		Ertapenem	
Cephamycin 2nd cepha		Non-ertapenem carbapenem	

Others

	Name		Name
2nd quinolone		Lincosamide	
3rd quinolone		Glycopeptide	

4th quinolone		Oxazolidinone	
Aminoglycoside		Folate antagonist	
Macrolide		Polymycin	
Tetracycline			

Appropriateness of empirical antibiotics

1st Empirical antibiotics	☐ Susceptible	☐ Intermediate	☐ Resistant
2nd Empirical antibiotics	☐ Susceptible	☐ Intermediate	☐ Resistant

8. Bundle

Hour-1 Surviving Sepsis Campaign Bundle

Measure lactate level. Remeasure if initial lactate is >2mmol/L	☐ Yes ☐ No
Obtain blood cultures prior to administration of antibiotics	☐ Yes ☐ No
Administer broad-spectrum antibiotics	☐ Yes ☐ No
Begin rapid administration of 30ml/Kg crystalloid for hypotension or lactate ≥ 4mmol/L	☐ Yes ☐ No
Apply vasopressors if patient is hypotensive during or after fluid resuscitation to maintain MAP ≥ 65mmHg	☐ Yes ☐ No

9. Additional modality

Initial fluid therapy

Crystalloid	☐ Yes ☐ No
hydroxyethyl starches	☐ Yes ☐ No
Total dosage of crystalloid fluid within first 3 hours: ( ) mL/Kg	

Total usage of Dopamine, Norepinephrine, Vasopressin, Dobutamine

	D1	D2	D3	D4	D5	D6	D7	D8	D9
Dopamine									
Norepinephrine									
Vasopressin									
Dobutamine									

	D10	D11	D12	D13	D14	D15	D16	D17	D18

Dopamine									
Norepinephrine									
Vasopressin									
Dobutamine									

	D19	D20	D21	D22	D23	D24	D25	D26	D27
Dopamine									
Norepinephrine									
Vasopressin									
Dobutamine									

*Cumulative vasopressor index

VASOPRESSOR	1 Point	2 Points	3 Points	4 Points
Dopamine (mcg/kg/min)	0 < dose ≤ 5	5 < dose ≤ 10	10 < dose ≤ 15	>15
Epinephrine (mcg/kg/min)	---	0 < dose ≤ 0.05	0.05 < dose ≤ 0.1	>0.1
Norepinephrine (mcg/kg/min)	---	0 < dose ≤ 0.05	0.05 < dose ≤ 0.1	>0.1
Phenylephrine (mcg/kg/min)	---	0 < dose ≤ 0.4	0.4 < dose ≤ 0.8	>0.8
Vasopressin (units/min)	---	---	---	any dose

Special treatment

RBC	☐ Yes	☐ No
FFP	☐ Yes	☐ No
PC	☐ Yes	☐ No
IVIG	☐ Yes	☐ No
Albumin	☐ Yes	☐ No
Vit C	☐ Yes	☐ No
Thiamine	☐ Yes	☐ No
Steroid	☐ Yes	☐ No
Anti-thrombin	☐ Yes	☐ No

Mechanical ventilation (<24 hours, ☐ not applied)

Tidal volume		Plateau pressure	
PEEP		Driving pressure	
FiO2			

10. Outcomes

Hospital stay	**Day**	
Sepsis related mortality	☐ Yes	☐ No
All-cause mortality	☐ Yes (cause:	☐ No)
Discharge to home or hospital	☐ Home	☐ Hospital