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## SEP-1 Quick Tips: How to manually invoke a 30ml/kg bolus IVF Exception

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- When should I use this:
  - A patient meets SEP-1 IV fluid requirements (sepsis AND hypotension with SBP < 90 or MAP < 65 OR lactate >= 4.0), HOWEVER
  - You think it is clinically inappropriate to give a 30ml/kg bolus of IVF (e.g. an ESRD patient has septic shock with obvious clinical signs of volume overload)
- What are the different ways I can properly document an IVF exception?:
  - 1. Use the SmartPhrase '.SEPSISFLUIDEXCEPTION'
  - 2. Use the IVF restrictive strategy orders in the 'ED Code Sepsis' order set
  - 3. Document an IVF fluid restriction from an ED Sepsis Smart Alert
- What is the most important thing to remember when using any exception:
  - The IVF bolus volume that is listed in the exception must match an actual IVF bolus order that is signed in Lifechart
- Example of a properly filled out smartphrase exception:

## ED Course MDM

## Clinical Exception to 30ml/kg IVF Requirement:

In this case of possible septic shock (with either hypotension or lactate > 4), an IV crystalloid bolus of 1000mL was ordered instead of 30ml/kg due to concern for extreme shark bite damage.

- Can I use the smartphrase in the ED course or in any ED note and get credit?:
  - Yes:), it files data at the encounter level
- Where does the exception go if I use the order set or smart alert?:
  - Order set: The documentation stays under 'orders'. This is ok, you do not need to separately document in your note.
  - Smart alert: Automatically pulls into the 'Clinical Decision Support' section of your note. If you use a custom template, make sure your template includes @EDCDS@

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- Can I just free dictate some language about not wanting to give 30ml/kg of IVF?
  - Not a good idea, there are very specific rules about how this exception must be documented. Even if you do it perfectly, it is hard to track if you do not use the structured methods.
- What do I do if my patient has ongoing hypotension after my lesser target volume?
  - It's time to start vasopressors! Having a lesser target volume is a commitment to start vasopressors if your intervention does not work. What you are NOT advised to do is to keep giving IVF slowly while allowing the patient to have ongoing hypotension for a prolonged period of time.
- Does my exception reason have to be from a specific list?
  - o No! Please be reasonable and use your clinical judgment.