

SEE IT.
STOP IT.
SURVIVE IT.

Sepsis Patient
and Family Education



**Indiana
Hospital
Association**

SEE IT. STOP IT. SURVIVE IT.

I am a sepsis survivor, what now?

When a germ enters a person's body, it can multiply and travel to areas other than the original source of infection. Sepsis may cause damage to organs such as the skin, kidney, heart, or brain. As many as three out of 10 patients do not survive sepsis, or experience depression or anxiety after a sepsis hospitalization. Up to four out of 10 patients are re-hospitalized within 90 days. Sepsis may occur after a serious illness, injury, or surgery.

Sepsis:

- is your body's reaction to an infection
- is life-threatening
- results from severe infections of lungs (pneumonia), urinary system (urinary or kidney infection), gut, skin (wounds), or some catheters needed to provide care for a patient

Sepsis may:

- cause damage to body organs (skin, kidney, heart, or brain)
- occur after an injury, surgery, or serious illness

How might I feel after surviving sepsis?

Up to half of sepsis patients suffer from post-sepsis syndrome. Sepsis survivors often have new limitations, such as an inability to bathe or increased trouble thinking. It may take a few weeks or months to feel "normal" again. These symptoms usually improve but require monitoring by a primary care provider or rehabilitation therapists. It is important to have a primary care provider check-up within four to seven days after a sepsis hospitalization. **If you feel you are not improving, find daily tasks more difficult, or are concerned about your symptoms, call your primary care provider.**

It is not unusual to have the following feelings and symptoms once you are at home:

Common Symptoms After Sepsis

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- Unsure of yourself
- Not caring about your appearance
- Wanting to be alone, avoiding friends and family
- Flashbacks, bad memories
- Confusing reality (e.g., not sure what is real and what is not)
- Feeling anxious, more worried than usual
- Poor concentration
- Depressed, angry, unmotivated
- Frustration at not being able to do everyday tasks
- General to extreme weakness and fatigue
- Breathlessness
- General body pains or aches
- Difficulty moving around
- Difficulty sleeping
- Weight loss, lack of appetite, food not tasting normal
- Dry and itchy skin that may peel
- Brittle nails
- Hair loss

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[Life After Sepsis Fact Sheet](#) ([download here](#))

When should I contact my primary care provider if concerned about symptoms?

- Feel like you are not getting better or regaining strength
- Have muscle or joint pain
- Frequently feel tired
- Have trouble coping with your recovery
- Have nightmares, or trouble falling asleep or staying asleep
- Feel sad, down, or depressed every day for more than two weeks
- Have difficulty concentrating
- Feel irritable or you cry for no reason

Get help right away if you:

- Have difficulty breathing
- Have a rapid or skipping heartbeat
- Become confused or disoriented
- See, hear, or feel things that do not exist (*hallucinations*)
- Body temperature two degrees higher or lower than normal
- Have an infection that is getting worse or not getting better
- Have thoughts of hurting yourself or others

What are the signs or symptoms of sepsis? There is no single sign or symptom of sepsis. Symptoms can include any of the following:

Shivering, fever, feeling very cold
Extrême pain or feeling worse than ever
Pale or discolored skin
Sleepiness, difficulty waking up, confusion
I feel like I might die
Shortness of breath

If you have an infection along with any of these symptoms, you should seek medical treatment immediately.

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Recovery and Prevention

What can I do to improve my recovery?

Most common reasons for hospital readmission are another infection such as pneumonia or a urinary infection, or worsened heart failure or chronic obstructive pulmonary disease. If sepsis symptoms return, seek medical help, possibly in a hospital emergency department to get care quickly and possibly avoid another hospitalization.

- **See your primary care provider** within a week after hospital discharge. Confirm with your primary care provider what medications you should be taking after hospitalization.
- **Take over the counter and prescription medicine as instructed by your doctor.** Antibiotics, antiviral, or antifungal medicine should be continued until instructed to stop, even if feeling better.
- Practice **oral hygiene** with toothpaste and mouthwash four times a day to prevent pneumonia (the most common cause of sepsis).
- **Avoid sitting** without moving for long periods of time and take short walks every one to two hours to improve blood flow and breathing. Ask for help if you feel weak or unsteady.
- Keep recommended **immunizations up to date** like flu, pneumonia, shingles, and COVID-19.
- **Wash hands** with soap and water when visibly soiled, prior to eating, and after toileting.
- **Keep cuts clean** and covered until healed.



- **Keep well-hydrated** to prevent infections and to enhance stability of blood pressure, balance, digestion of medicines, adequate fluids to brain to keep alertness, heart, kidneys, and skin. Drink enough fluid to keep your urine pale yellow. If urine is darker in color, increase intake of fluids. New problems with thinking or confusion may be avoided by drinking plenty of fluids.











- **Seek good quality and length of time sleeping. Do not take sleeping medications without consulting your primary care provider. Avoid alcohol, caffeinated beverages, and computer screen time before bed.**
- **Eat healthy foods** to maintain strength and continue healing, such as plenty of vegetables, fruits, whole grains, low-fat dairy products, and lean protein.
- If you know the source of your sepsis, **watch for a recurrence of symptoms** (e.g., coughing or difficulty breathing with pneumonia).
- If desired, a **local support group for sepsis survivors** may be available in your area or online.
- **Rest and return gradually to normal activities** and ask your health care provider what activities are safe for you.
- **Talk with your family, primary care provider, or caregiver** about how you are feeling and improvements or worsening in your symptoms after sepsis.





Infection and Sepsis Action Plan

You have been identified as having an infection. Most people can be treated for an infection and recover without difficulties. However, an infection puts you at a higher risk for developing sepsis, which is the body's out of control response to an infection. Please use this screening tool for **monitoring of NEW and / or WORSENING of symptoms beyond the acute phase that may require further treatment.**

My Doctor: _____ Phone: _____

Red Zone - I Have New or Worsening Symptoms: Declining			
			
My temperature feels extremely hot or cold. Skin may be flushed or pale. Fingernails may be pale or blue.	I am confused or people tell me I am not making sense.	Heartbeat is VERY FAST (> 100) AND my blood pressure (top number) is less than 100.	Breathing is very fast (greater than 22 breaths per minute).
Act Right Now: <input type="checkbox"/> Call your doctor immediately or activate emergency response. (911)			

Yellow Zone - I Have 2 or More Symptoms = Stable			
			
I feel cold and cannot get warm (shivering).	My thinking feels slower or not right.	Heartbeat is FASTER than normal (> 100) or my blood pressure (top number) is less than 100.	Breathing is more difficult and faster than usual.
Take Action: <input type="checkbox"/> Take daily medications as instructed. <input type="checkbox"/> Get more rest. <input type="checkbox"/> Contact my doctor about these changes.			

Green Zone - My Good Days - Improving			
			
My temperature feels normal	Thinking is clear.	Heartbeat is NOT elevated (< 100) or home blood pressure is NOT low (top number greater than 100).	Breathing is normal for me.
Good Job! Continue to: <input type="checkbox"/> Take daily medications as instructed. <input type="checkbox"/> Eat healthy diet. <input type="checkbox"/> Wash hands often and avoid sick people. <input type="checkbox"/> Build up activity slowly and rest when tired.			

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Family & Caregiver Instructions for Patients Recovering from Sepsis

The first primary care provider's appointment should be four to seven days after hospital discharge. It is important for caregivers to be aware of patient's feelings and physical symptoms. When a loved one feels worse or is less able to do daily tasks, it may be the caregiver that notices these problems first. Talk with the patient about any symptoms you may be seeing and how they are feeling. The sepsis survivor may require your assistance more than before the sepsis experience. The most common causes of sepsis are pneumonia (lung infection) and urinary tract infections. Good oral hygiene with toothbrushing and mouthwash, and adequate water intake can reduce the risk of pneumonia and urinary tract infections. Caregivers should be aware of improvements and worsening of patient's condition, but contact the primary care provider if problems persist. Watch for the following and consider contacting physician with these changes:

- Talks or communicates less
- Overall needs more help
- New or worsening pain
- Participates less in activities
- Eats less
- No bowel movement in three days or diarrhea
- Drinks less fluids
- Weight change
- Agitated or more nervous than usual
- Tired, weak, confused, or drowsy
- Changes in skin color or condition
- More than usual help with walking, transferring, and toileting

If someone ever feels like they may hurt themselves or others, or have thoughts about taking their own life, get help right away. Go to the nearest emergency department or call:

- 911 for your local emergency services
- 988 for the Suicide & Crisis Lifeline to speak with a trained crisis specialist

References and Resources

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Version 3: 7/31/2023