



September 20, 2016

Focus: Survive it.

# Agenda

- 1500-1515 IHA Introduction & Re-cap of Sept. 13 *Stop it.* webinar with Maryanne Whitney, Cynosure Health Improvement Advisor
- 1515-1540 *Survive it.*  
Carl Flatley, DDS, Father & Sepsis Alliance Founder  
Anita Keller, Chief Nursing Officer, Johnson Memorial Health
- 1540-1545 Maryanne Whitney-reflection & best practices
- 1545-1555 Open lines to share successes & challenges
- 1555-1600 IHA wrap-up & Next steps

# Welcome & Learning Objectives

## Learning Objectives

- Describe consequences of the failure to promptly recognize and treat sepsis
- List elements of crucial conversations when speaking with patients and families
- Examine opportunities to support patients and families

## Housekeeping Items

- Slide deck and recording will be posted to INHEN.org under the News & Events tab
- Chat feature will be monitored throughout the hour
- All lines will be opened for discussion following the hospital feature. If not speaking, please mute your line and do not place on hold

# Indiana's Bold Aim



To make Indiana the safest place to receive health care in the United States...  
*if not the world*



SEE IT.  
STOP IT.  
**SURVIVE IT.**

This year, more than  
**one million people**  
in the United States  
**will get Sepsis.\***

Up to half of those people will die.  
Start a conversation with your  
doctor today.

[SurviveSepsis.com](http://SurviveSepsis.com)

\*Centers for Disease Control and Prevention

Indiana Patient  
Safety Center  
of the Indiana Hospital Association

SEE IT.  
STOP IT.  
**SURVIVE IT.**

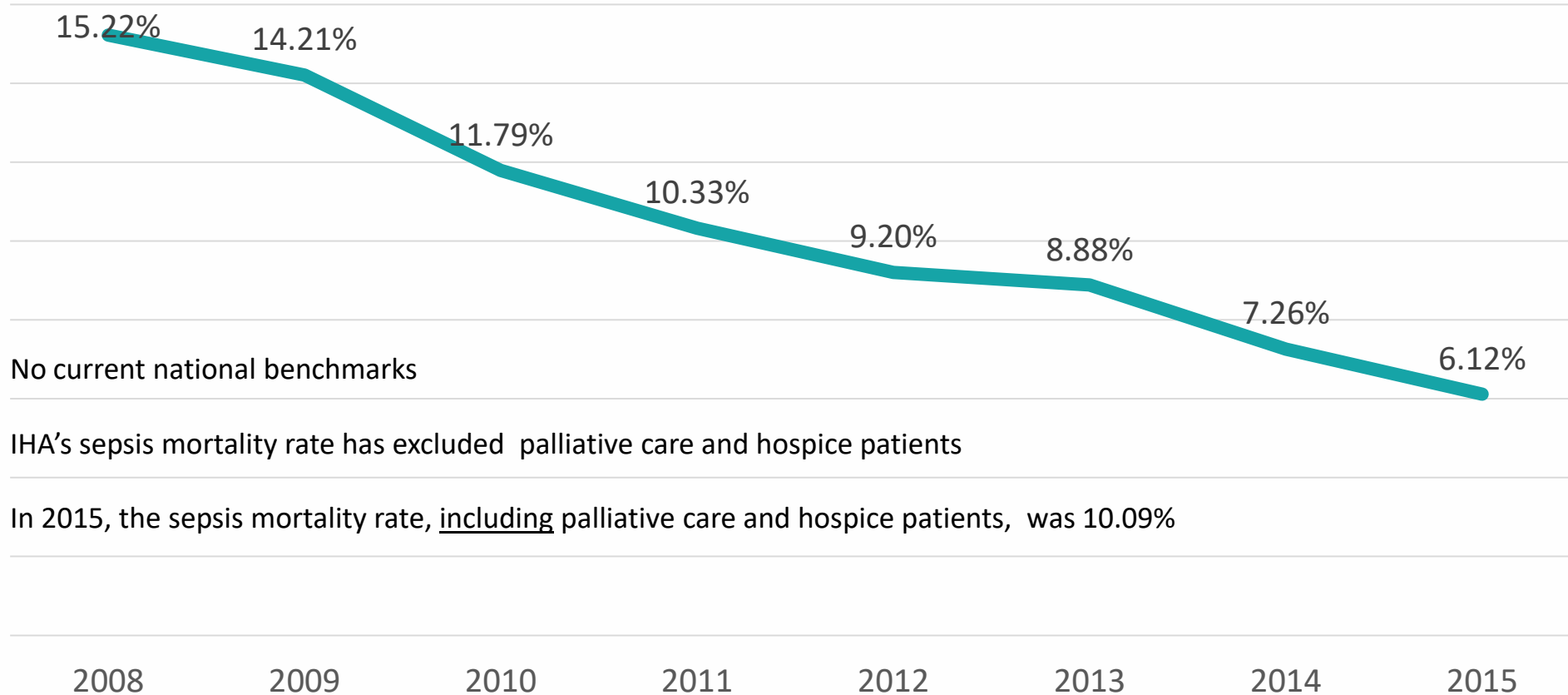
**ALMOST**  
**3,500**  
**HOOSIERS**  
DIE EACH YEAR FROM  
**SEPSIS\***  
DON'T BE A STATISTIC.

[SurviveSepsis.com](http://SurviveSepsis.com)

\*2015 Indiana Hospital Association Inpatient Discharge Study

Indiana Patient  
Safety Center  
of the Indiana Hospital Association

# Indiana Inpatient Hospital Sepsis Annual Mortality Rate



No current national benchmarks

IHA's sepsis mortality rate has excluded palliative care and hospice patients

In 2015, the sepsis mortality rate, including palliative care and hospice patients, was 10.09%

**NOTE:** Septicemia mortality is calculated using all discharges grouped to APR-DRG 720 Septicemia, excluding records with a diagnosis code V66.7 Palliative Care and ICD-10 code Z51.5 for Palliative Care starting with 4th quarter 2015.

**IHA Inpatient Discharge Study**

# Sept. 13 *Stop it* Re-cap

- 117 attendees
- Slide deck & webinar recording available  
inhen.org - News & Events tab  
ihaconnect.org - Quality & Patient Safety tab

## **Key points from Franciscan Health - Indianapolis:**

Physician champion, staff development and communication; team huddles, staff meetings, real-time coaching-focus on the positive, identify high risk unit to begin inpatient work (small test of change) then spread to other units. Don't be afraid to stop, step back and re-evaluate for opportunities to refine efforts!

# Sept. 13 Polling Results

## Question #1

What percentage of patients receive antibiotics within an hour of a positive sepsis screen?

- a) Greater than 90% **11%**
- b) Greater than 75% **25%**
- c) Greater than 50% **28%**
- d) Unknown **36%**

## Question #2

Do you use alerts (electronic or other) to facilitate the three and six-hour bundle implementation?

- a) Yes **51%**
- b) No **49%**



# Welcome our Subject Matter Expert



Maryanne Whitney, RN CNS MSN

- Improvement Advisor with Cynosure Health
- Over 25 years of hospitals operations and nursing leadership at Kaiser Permanente
- Extensive Experience in Critical Care, Patient Safety, ABCDEF Bundle and Rapid Response Team implementation and Sepsis Mortality Reduction

# *Stop it.* Reflections & Best Practices

~Maryanne Whitney~

- Engage front line staff
- Alerts
- Optimize Rapid Response Teams
- Monitoring: outcomes & compliance
- Small test of change
- Spread & sustainability

# Indiana Awareness Campaign



September  
is Sepsis  
Awareness  
Month

SEE IT.  
STOP IT.  
**SURVIVE IT.**

**SURVIVESEPSIS.COM**

 **Indiana Patient  
Safety Center**  
of the Indiana Hospital Association

The graphic features a teal background with a red ribbon that spirals upwards from the bottom right. The ribbon contains the text 'SEE IT.', 'STOP IT.', and 'SURVIVE IT.' in white. Below the ribbon, the website 'SURVIVESEPSIS.COM' is written in white. In the bottom left corner, the logo for the Indiana Patient Safety Center is displayed, consisting of a stylized white icon and the text 'Indiana Patient Safety Center of the Indiana Hospital Association'.

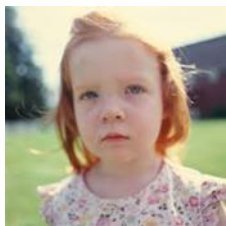


See it. Stop it. **Survive it.**

SEPTEMBER: SEPSIS AWARENESS MONTH // [SURVIVESEPSIS.COM](https://survivesepsis.com)

- How is your organization supporting patients and families who are impacted by sepsis?
- Community awareness
- Always ask, “Could it be sepsis?”

*In 2014, 3,242 Hoosiers DIED from Sepsis  
What Does this Look Like?*





Powerful video from Sepsis Alliance may be accessed by visiting the IHA Sepsis Awareness page [SurviveSepsis.com](http://SurviveSepsis.com)

**Faces of Sepsis**

Send Us Your Story

A B C D E F G H I J K L M N O P Q R S T U V W X

- Nicole Jenkins**  
Survivor  
Hi, my name is Nicole. I'm a 2x sepsis survivor. My story is unique and familiar with some of the other survivors. I live in Clearwater, FL and my mom is an RN at Me... [Read More](#)
- Leslie Kay Kolhoff**  
Survivor  
Had been having gallbladder attacks, stones were seen in ultrasound. Scheduled to see a digestive disease consultant who would refer me quickly to a surgeon. Had ga... [Read More](#)
- Dianna Williams**  
Survivor  
In August 2015 I developed a UTI, on a Monday. (Sepsis and Urinary Tract Infections) The doctor gave me Bactrim. On Friday of that week I passed out in my car. When I came to... [Read More](#)
- Penny Harris**  
Tribute  
My Mom was someone that changed people's lives. She bought Christmas presents for a local home that houses foster children. She was a very funny, witty, q... [Read More](#)

Visit the Sepsis Alliance [www.sepsis.org/faces](http://www.sepsis.org/faces) for more stories

# *Survive it.* Polling Question #1

Have you had first-hand experience with sepsis in your family or someone close to you?

- a) Yes
- b) No

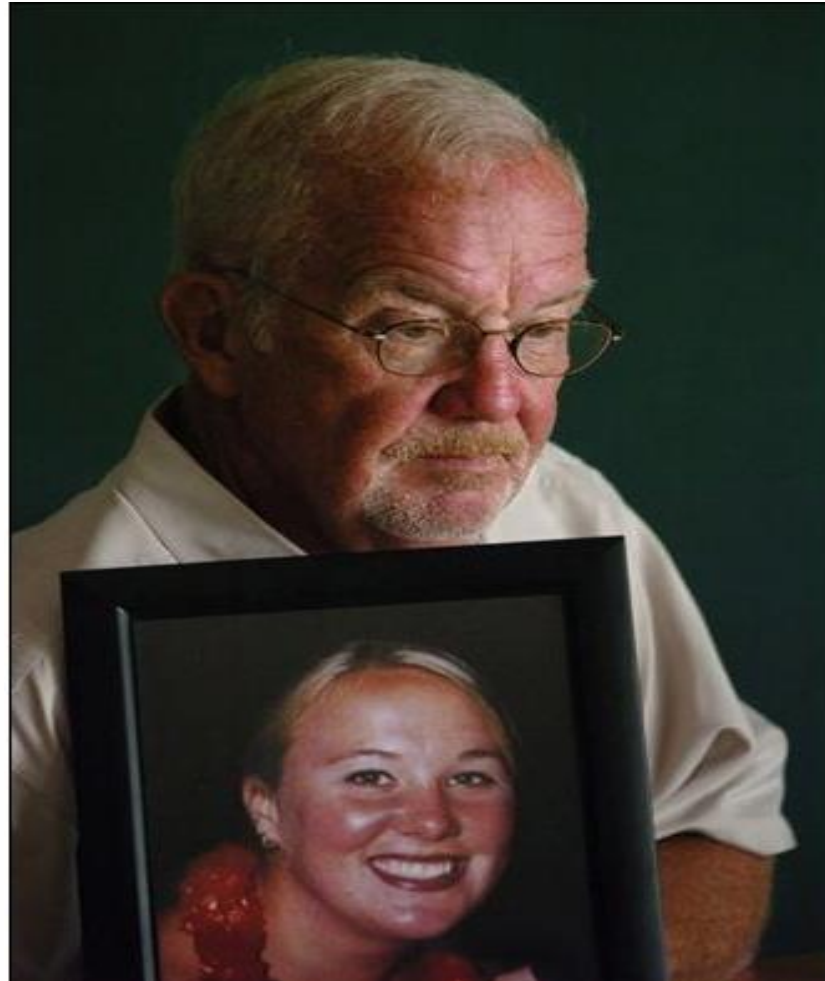
# *Survive it.* Polling Question #2

Does your organization have a PFE  
(Patient/Person and Family Engagement)  
advisor on your sepsis committee?

- a) Yes
- b) No



# Sepsis Champion-Sepsis Alliance Founder



# I am a Survivor!



Anita Keller  
RN, MSN, CPHQ

- Sepsis can happen to any of us
- Take infections seriously, even minor ones
- Know the signs of sepsis

# Reflections-Maryanne Whitney

- Suspect sepsis until proven otherwise
- Trust your patient and trust your instinct
- Often we neglect patients post septic event
- Testimonials | HRET-HEN

<http://www.hret-hen.org/topics/testimonials/testimonials.shtml>

# Best Practices-Maryanne Whitney

- Ensure PFE advisor has a seat on your sepsis committee
- Develop follow-up plans for patients and families
  - Support groups
- Adjust discharge teaching
  - 30% of patients readmitted within 30 days had sepsis as a primary or secondary diagnosis.

# Post Sepsis Syndrome

What is PSS? Post-sepsis syndrome is a condition that affects up to 50% of sepsis survivors. They are left with physical and/or psychological long-term effects, such as:

- Insomnia, difficulty getting to sleep or staying asleep
- Nightmares, vivid hallucinations and panic attacks
- Disabling muscle and joint pains
- Extreme fatigue
- Poor concentration
- Decreased mental (cognitive) functioning
- Loss of self-esteem and self-belief

<http://www.sepsis.org/sepsis/post-sepsis-syndrome>

# Life After Sepsis



## ABOUT SEPSIS

### What is sepsis?

Sepsis is the body's overwhelming and life-threatening response to an infection, which can lead to tissue damage, organ failure, and death.

### What causes sepsis?

Any type of infection that is anywhere in your body can cause sepsis, including infections of the skin, lungs (such as pneumonia), urinary tract, abdomen (such as appendicitis), or other part of the body. An infection occurs when germs enter a person's body and multiply, causing illness, organ and tissue damage.

### Are there different types of sepsis?

Many people can have "mild" sepsis, which can make them feel sick, but they then get better without needing treatment in a hospital. However, other patients develop severe sepsis, which means they became seriously ill and need hospital treatment immediately.

SEPSIS INFORMATION GUIDE – LIFE AFTER SEPSIS

## WHAT COMES NEXT?

### What are the first steps in recovery?

After you have had sepsis, rehabilitation usually starts in the hospital by slowly helping you to move around and look after yourself: bathing, sitting up, standing, walking, taking yourself to the restroom, etc. The purpose of rehabilitation is to restore you back to your previous level of health or as close to it as possible. Begin your rehabilitation by building up your activities slowly, and resting when you are tired.

### How will I feel when I get home?

You have been seriously ill, and your body and mind need time to get better. You may experience the following physical symptoms upon returning home:

- General to extreme weakness and fatigue
- Breathlessness
- General body pains or aches
- Difficulty moving around or sleeping
- Weight loss, lack of appetite, food not tasting normal
- Dry and itchy skin that may peel
- Brittle nails
- Hair loss

It is also not unusual to have the following feelings once home:

- 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 isn't)
- Feeling anxious, more worried than usual
- Poor concentration
- Depressed, angry, unmotivated
- Frustration at not being able to do everyday tasks

### What can I do to help myself recover at home?

- Set small, achievable goals for yourself each week, such as taking a bath, dressing yourself, or walking up the stairs
- Rest and rebuild your strength
- Talk about what you are feeling to family and friends
- Record your thoughts, struggles, and milestones in a journal
- Learn about sepsis to understand what happened
- Ask your family to fill in any gaps you may have in your memory about what happened to you
- Eat a balanced diet
- Exercise if you feel up to it
- Make a list of questions to ask your doctor when you go for a check up

### Are there any long-term effects of sepsis?

Many people who survive sepsis recover completely and their lives return to normal. However, older people, people who have suffered more severe sepsis and those treated in an intensive care unit are at greatest risk of long-term problems, including suffering from post-sepsis syndrome.

### What is post-sepsis syndrome (PSS)?

Post-sepsis syndrome is the term used to describe the group of long-term problems that some people with severe sepsis experience. These problems may not become apparent for several weeks (post-sepsis), and may include such long-term consequences as:

- Insomnia, difficulty getting to or staying asleep
- Nightmares, vivid hallucinations, panic attacks
- Disabling muscle and joint pains
- Decreased mental (cognitive) functioning
- Loss of self-esteem and self-belief
- Organ dysfunction (kidney failure, respiratory problems, etc.)
- Amputations



### What's normal and when should I be concerned?

Generally, the problems described in this fact sheet do improve with time. They are a normal response to what you have been through. Some hospitals have follow-up clinics or staff to help patients and families once they have been discharged. Find out if yours does or if there are local resources available to help you while you get better. However, if you feel that you are not getting better, or finding it difficult to cope, or continue to be exhausted call your doctor.

### Where can I get more information?

Sepsis Alliance ([www.sepsis.org](http://www.sepsis.org)) was created to raise sepsis awareness among both the general public and healthcare professionals. Sepsis Alliance offers information on a variety of sepsis-related topics. To view the full series of Sepsis Information Guides, visit [sepsis.org/library](http://sepsis.org/library)

To learn more about sepsis, or to read stories of survivors, visit us online at [Sepsis.org](http://Sepsis.org)



Sepsis Information Guides are supported in part by an educational grant from Merck & Co., Inc.

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# Sepsis Information Guides

[www.sepsis.org/resources/sepsis-information-guides/](http://www.sepsis.org/resources/sepsis-information-guides/)

The screenshot displays a grid of eight Sepsis Information Guides covers:

- Life After Sepsis
- Sepsis and Aging
- Sepsis and Amputations
- Sepsis and Appendicitis
- Sepsis and C. difficile
- Sepsis and Cellulitis
- Sepsis and Children
- Sepsis and Dental Infections

Additional website elements include:

- SEPSIS HEROES: Celebrating Champions of Sepsis Awareness. TICKETS AND INFORMATION
- SEPSIS INFORMATION GUIDES: A collage of various guide covers including Sepsis and Flu, Sepsis and Pneumonia, Sepsis and Diabetes, Sepsis and Pregnancy & Childbirth, and Sepsis and COPD.
- FACES OF SEPSIS: A banner featuring three diverse individuals.
- DONATE NOW: A prominent red button.
- ANYTHING YOU'RE LOOKING FOR?: A search bar with the text "search sepsis.org" and a red "SEARCH" button.

# Open Lines/Chat In *Survive it: Successes & Challenges*

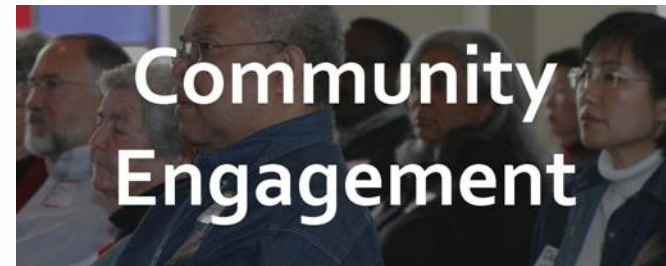
1. Do you currently have a system in place to support those impacted by sepsis? If not, what do you believe are the barriers?
2. Do you have grief/survivor programming resources for those impacted by sepsis?



# Call to Action-*Survive it.*



Could it  
be  
SEPSIS?

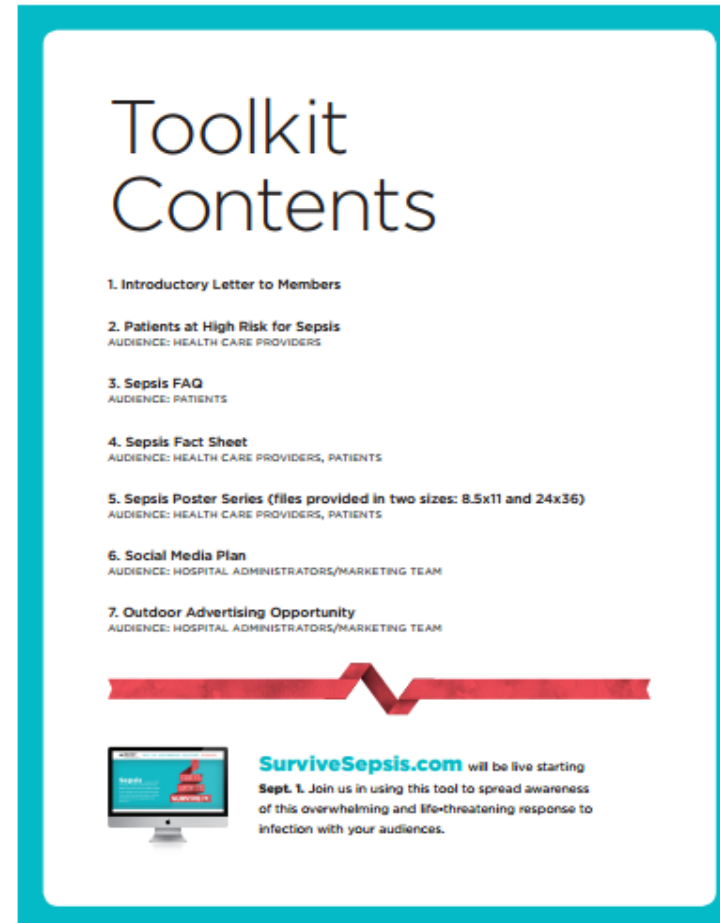


# Sepsis Awareness Month Resources

- Aug. 9 Deployment of IHA Sepsis Awareness Toolkit
- Sept. 1 Launch of IHA sepsis site: *SurviveSepsis.com*
- Sept. 22 Empowering Nurses for Early Sepsis Recognition  
2pm ET Register: <https://cc.readytalk.com/r/jgtxnnpp9bw2&eom>
- Other web resources:
  - IHA:** [ihaconnect.org](http://ihaconnect.org)
  - IHA HEN 2.0** microsite: [inhen.org](http://inhen.org)
  - HRET**(Health Research & Educational Trust): [hret-hen.org](http://hret-hen.org)
  - CDC:** [cdc.gov/sepsis](http://cdc.gov/sepsis)
  - Sepsis Alliance:** [sepsis.org](http://sepsis.org)
  - The Rory Staunton Foundation:** [rorystauntonfoundationforsepsis.org](http://rorystauntonfoundationforsepsis.org)
  - Surviving Sepsis Campaign:** [survivesepsis.org](http://survivesepsis.org)
  - Global Sepsis Alliance:** [global-sepsis-alliance.org](http://global-sepsis-alliance.org)

To access the toolkit, visit:

<https://www.ihaconnect.org/Quality-Patient-Safety/Pages/Sepsis.aspx>



# High Risk Patients & Fact Sheet



SEPTEMBER: SEPSIS AWARENESS MONTH

## Patients at High Risk for Sepsis

### 1. Ask yourself: "Could it be sepsis?"

Sepsis can be confusing and hard to diagnose. It shares many symptoms, such as fever and difficulty breathing, with other conditions. What might seem like a simple run-of-the-mill, flu-like illness can actually be a silent killer.

### 2. Recognize patients at high risk for sepsis.

While sepsis can affect anyone, the CDC highlights some patients are more at risk, including those who:

- Have a weakened immune system
- Are under age 10 or over age 65
- Have an indwelling catheter or IV
- Recently had surgery or have been hospitalized
- Have a chronic illness (diabetes, AIDS, cancer, kidney or liver disease, etc.)
- Have a severe burn or wound

### 3. Assess clinical presentation.

If you suspect sepsis, check your patient for any of these signs and symptoms:

- Fever
- Hypothermia
- Heart rate >90 beats per minute
- Fast respiratory rate
- Altered mental status (confusion/coma)
- Edema
- High blood glucose without diabetes
- Feeling worse than he/she has ever felt before

### 4. Provide prompt treatment.

For evidence-based treatment guidance, visit Surviving Sepsis Campaign at [survivingsepsis.org](http://survivingsepsis.org). Three- and six-hour bundle elements can be found here.

### 5. Emphasize preventative/protective measures.

As health care professionals, it is our responsibility to educate our patients about what sepsis is and the importance of prompt recognition and treatment. Keep sepsis education materials available in waiting areas and treatment rooms and routinely discuss the possibility of sepsis with patients.

For more information, visit [SurviveSepsis.com](http://SurviveSepsis.com)



SEPTEMBER: SEPSIS AWARENESS MONTH

## Sepsis Fact Sheet

Sepsis is a global health care problem. According to the Global Sepsis Alliance, it is more common than heart attacks and claims more lives than any cancer. Yet, in even the most developed countries, less than half of the adult population has heard of it. Sepsis is the body's overwhelming and potentially life-threatening response to an infection. It can lead to tissue damage, organ failure and even death.

### Worldwide/National Facts

1. Every three seconds, someone around the world dies of sepsis. <sup>1</sup>
2. Globally, sepsis is the leading cause of death by infection. <sup>2</sup>
3. More than one million people get sepsis each year in the United States, and up to half of those people will die. <sup>3</sup>
4. Sepsis can occur from even a minor infection. <sup>4</sup>
5. Sepsis does not discriminate. It affects everyone, regardless of age or level of health. <sup>4</sup>
6. Sepsis kills 258,000 people in the United States each year. <sup>4</sup>
7. Every two minutes, an American dies from sepsis. <sup>5</sup>
8. Sepsis kills more people than prostate cancer, breast cancer and AIDS combined. <sup>6</sup>
9. More than 42,000 children in the United States develop severe sepsis each year, and 10 percent of these children die – more than from cancer. <sup>7</sup>
10. Sepsis causes at least 75,000 maternal deaths every year worldwide and is driving increases in pregnancy-related deaths in the United States. <sup>8</sup>
11. Just 47 percent of American adults have heard of sepsis. <sup>9</sup>


### State of Indiana Facts <sup>10</sup>

1. Almost 3,500 Hoosiers die each year from sepsis.
2. In 2015, there were more inpatient deaths from sepsis than any other diagnosis.
3. The average charges for a patient with a sepsis diagnosis in Indiana amount to about \$44,000.
4. Sepsis is the most frequent inpatient discharge, aside from deliveries.
5. In 2015, sepsis as the primary diagnosis resulted in the highest utilization of inpatient care charges.

### References

- <sup>1</sup> World Sepsis Day Organization [worldsepsisday.org/ME-T-SHOWCONTAINER&CONTAINERID=501](http://worldsepsisday.org/ME-T-SHOWCONTAINER&CONTAINERID=501)
- <sup>2</sup> World Sepsis Day Organization [worldsepsisday.org/ME-T-SHOWCONTAINER&CONTAINERID=11](http://worldsepsisday.org/ME-T-SHOWCONTAINER&CONTAINERID=11)
- <sup>3</sup> CDC [cdc.gov/sepsis/pdf/sepsis\\_09sept06c.pdf](http://cdc.gov/sepsis/pdf/sepsis_09sept06c.pdf)
- <sup>4</sup> CDC [cdc.gov/sepsis](http://cdc.gov/sepsis)
- <sup>5</sup> Survive Sepsis [survivesepsis.org/WhatIsSepsis.html](http://survivesepsis.org/WhatIsSepsis.html)
- <sup>6</sup> National Institute of General Medical Science [nigms.nih.gov/Education/Pages/factsheet\\_sepsis.aspx](http://nigms.nih.gov/Education/Pages/factsheet_sepsis.aspx)
- <sup>7</sup> Sepsis Alliance [sepsis.org/resources/2012\\_sepsis\\_06\\_fact\\_sheet\\_sepsis.pdf](http://sepsis.org/resources/2012_sepsis_06_fact_sheet_sepsis.pdf)
- <sup>8</sup> Sepsis Alliance [sepsis.org/resources/2012\\_sepsis\\_06\\_fact\\_sheet\\_sepsis.pdf](http://sepsis.org/resources/2012_sepsis_06_fact_sheet_sepsis.pdf)
- <sup>9</sup> Sepsis Alliance [sepsis.org/resources/2006/Communicable\\_diseases\\_survey](http://sepsis.org/resources/2006/Communicable_diseases_survey)
- <sup>10</sup> Facts for the state of Indiana come from the 2015 IHA Inpatient Discharge Study

# Frequently Asked Questions

 **Indiana Patient Safety Center**  
of the Indiana Hospital Association

**SEPTEMBER: SEPSIS AWARENESS MONTH**

## Sepsis FAQ

According to the Global Sepsis Alliance, sepsis is the leading cause of death following an infection, but with early detection and proper treatment, deadly consequences can be diminished. The following FAQ are according to the Centers for Disease Control and Prevention (CDC) and aim to demystify the often misunderstood and unrecognized deadly complication to infection.

**What is sepsis?** Sepsis is the body's overwhelming and potentially life-threatening response to an infection. It can lead to tissue damage, organ failure and even death.

**What causes sepsis?** Any type of infection, anywhere in the body, can cause sepsis. This can include seemingly minor infections on the skin to urinary tract infections, pneumonia or appendicitis.

**How common is sepsis?** According to the CDC, there are more than 1 million cases of sepsis each year, and up to half of the people who become septic will die.

**Who can get sepsis?** Sepsis can affect any person of any age, from any type of infection, no matter how minor.

**Are some people more at risk for getting sepsis?** While sepsis can affect anyone, you may be at a higher risk if you:

- Have a weakened immune system
- Are under age 10 or over age 65
- Have an indwelling catheter or IV
- Recently had surgery or have been hospitalized
- Have a chronic illness (diabetes, AIDS, cancer, kidney or liver disease, etc.)
- Have a severe burn or wound

**What are the signs or symptoms of sepsis?** There is no single sign or symptom of sepsis. Because sepsis stems from infection, symptoms can include common infection signs, such as diarrhea, vomiting and sore throat. Additionally, symptoms can include any of the following:

- Shivering, fever, feeling very cold
- Extreme 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.

**How is sepsis diagnosed?** Sepsis can be difficult to diagnose because it shares many signs and symptoms with other conditions. Health care providers look for signs of sepsis like increased heart and breathing rates and temperature. They also rely on lab tests that check for signs of infection that may not be visible to the naked eye.

**How is sepsis treated?** Sepsis is a serious complication of infection that should be treated in a hospital. Health care providers typically administer antibiotics and work to treat the infection, keep vital organs healthy and prevent a drop in blood pressure.

In some cases, other types of treatment may be required, including oxygen and intravenous (IV) fluids, or assisted breathing with a machine or kidney dialysis. In severe cases, surgery may be required to remove tissue damaged by infection.

**How can I prevent sepsis?** While there is no way to completely prevent the possibility of sepsis, there are many ways to reduce your risk including:

- Be vaccinated. Protect yourself against the flu, pneumonia and other infections that could lead to sepsis. Talk to your health care provider for more information.
- Be thorough. Properly clean and treat scrapes and wounds and practice good hygiene (i.e. hand washing, bathing regularly).
- Be vigilant. If you have an infection, look for signs like fever, chills, rapid breathing and heart rate, confusion and disorientation.

**Are there any long-term effects of sepsis?** Many sepsis survivors recover completely, and their lives return to normal. However, some people may experience organ damage, tissue loss or may require amputation of arms or legs.

Additionally, according to the Sepsis Alliance, post-sepsis syndrome is a condition that affects up to 50 percent of sepsis survivors. They are left with physical and/or psychological long-term effects, such as:

- Insomnia, difficulty getting to sleep or staying asleep
- Nightmares, vivid hallucinations and panic attacks
- Disabling muscle and joint pains
- Extreme fatigue
- Poor concentration
- Decreased mental (cognitive) functioning
- Loss of self-esteem and self-belief

If you suspect that you or a loved one has post-sepsis syndrome, talk to a health care provider about resources for emotional and psychological assistance.

For more information, visit [SurviveSepsis.com](https://www.SurviveSepsis.com)

# Community Awareness-*Survive it.*

**SEE IT.**  
**STOP IT.**  
**SURVIVE IT.**

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

- S**hivering, fever, feeling very cold
- E**xtrême pain or feeling worse than ever
- P**ale or discolored skin
- S**leepiness, difficulty waking up, confusion
- I** feel like I might die
- S**hortness of breath

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

**SurviveSepsis.com**

\*Centers for Disease Control and Prevention

Indiana Patient Safety Center  
of the Indiana Hospital Association

**Sepsis**  
It could be life or death.

**SEE IT.**  
**STOP IT.**  
**SURVIVE IT.**

**SurviveSepsis.com**

Billboard Template-Outdoor Advertising

**Sepsis**  
It could be life or death.

Central Southwest Indiana  
**PATIENT SAFETY**  
Coalition

**SEE IT.**  
**STOP IT.**  
**SURVIVE IT.**

**SurviveSepsis.com**

LAMAR

Central Southwest Indiana Patient Safety Coalition

# *Survive it.* Social Media & Posters



Use these hashtags throughout the month:

#SurviveSepsis #SaferHoosiers #SepsisAwarenessMonth



# As the Series Continues . . .

September 27

Pulling It All Together

- Recap the series
- *See it. and Stop it.* hospital features return for Q & A
- Look to the future

Please share and invite your colleagues



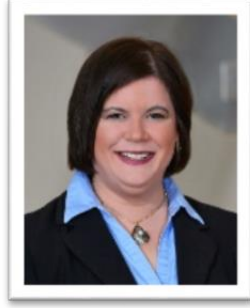
# Your IPSC Team



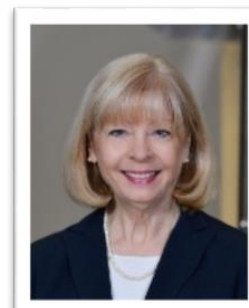
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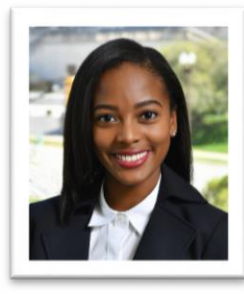
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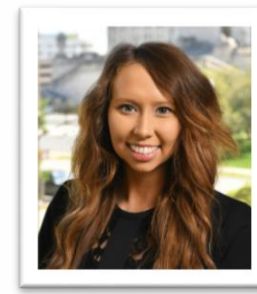
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