Improving Sepsis Case Data Collection
WITH MOBILE TELEMEDICINE

THE CHALLENGE
Sepsis is the 11th leading cause of death in the United States, resulting in the hospitalization of 750,000 patients a year and 40,685 deaths. Therefore, every second counts. According to the Journal of Emergency Medical Services, “In order to improve outcomes of patients presenting with sepsis, greater emphasis needs to be placed on early recognition and treatment of sepsis in the prehospital setting”. Therefore, the more prepared the ED is for the patient’s arrival, the quicker they can start administering resuscitation, antibiotics, and source control; resulting in better patient outcomes.

Through the use of a specialized digital mobile telemedicine app, EMS and sepsis teams are uniquely positioned to improve the saving of lives through timely intervention with engaging hospital and sepsis team staff via app features to initiate broader acute workflow improvements. Multi-faceted alerts including data collection and vitals shared real-time with ETA tracking to providers, speeds treatment and engagement to improve outcomes while adding short and long-term educational value. A vital part of sepsis cases is making sure treatment is handled in a timely manner. Having a configurable mobile telemedicine solution allows for ED and sepsis teams to effectively communicate in order to properly treat the patient.

The Solution
The sepsis case workflow process below utilizes GD’s e-Bridge WorkFLOW™ Mobile Telemedicine app. The solution provides an easy to use, state or region wide mechanism to alert, notify and track all sepsis cases in real time from prehospital first medical contact through hospital emergency department and handoff to sepsis teams. This helps the sepsis team be better prepared for the inbound patient while lessening the handoff time and increasing data accuracy.

Note that all GD e-Bridge WorkFLOW™ templates are highly configurable, allowing flexibility to operate protocols your way, ensuring maximum effectiveness and compliance to your teams and sepsis accreditations.