

Opportunities exist for improving hospital-based sepsis programs with new CDC guidance

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There are opportunities for improving the structure of hospital-based sepsis programs to optimize patient outcomes, and new guidance has been released by the Centers for Disease Control and Prevention called Hospital Sepsis Program Core Elements, according to research published in the August 25 issue of the U.S. Centers for Disease Control and Prevention *Morbidity and Mortality Weekly Report*.

Raymond B. Dantes, M.D., from Emory University School of Medicine in Atlanta, and colleagues examined the prevalence and characteristics of sepsis programs in acute care hospitals using data from the 2022 National Healthcare Safety Network annual survey.

The researchers found that 73 percent of the 5,221 hospitals reported having a committee that monitors and reviews sepsis care. There was variation in the prevalence of these committees by hospital size, from 53 to 95 percent among hospitals with zero to 25 and >500 beds, respectively. Of all hospitals, 55 percent provided dedicated time for leaders of these committees to manage a program and conduct daily activities; involvement with antibiotic stewardship programs (ASPs) was reported by 55 percent of committees.

"These data highlight [opportunities](#), particularly in smaller hospitals, to improve the early identification of, care for, and outcomes among patients with sepsis in the United States by ensuring that all hospitals have [sepsis](#) programs with protected time for program leaders, engagement of medical specialists, and integration with ASPs," the authors write.

More information: Raymund B. Dantes et al, Sepsis Program Activities in Acute Care Hospitals—National Healthcare Safety Network, United States, 2022, *MMWR. Morbidity and Mortality Weekly Report* (2023). [DOI: 10.15585/mmwr.mm7234a2](https://doi.org/10.15585/mmwr.mm7234a2)

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