

SEPSIS WARNING SIGNS CHECKLIST

For Patients and Families — From Lupetin & Unatin, LLC | pamedmal.com

PHYSICAL RED FLAGS OF SEPSIS

If you or a loved one in the hospital or ER has **TWO OR MORE** of these signs, ask immediately: **“Could this be sepsis?”**

- Fever above 100.4°F (38°C) OR abnormally low temperature below 96.8°F (36°C)
- Heart rate above 90 beats per minute (with no obvious cause)
- Respiratory rate above 20 breaths per minute / difficulty breathing
- Systolic blood pressure below 90 mmHg (or dropping)
- Skin that is mottled, blotchy, cold/clammy, or bluish/grayish
- Extreme pain — “worst pain of my life” or feeling of “impending doom”
- New confusion, disorientation, difficulty staying awake, or unusual behavior
- Slurred speech or inability to answer simple questions

QUESTIONS TO ASK THE MEDICAL TEAM

- "Could this be sepsis? Have you screened for sepsis?"
- "Are you following the sepsis bundle (SEP-1 protocol)?"
- "Have you drawn blood cultures?"
- "Have you checked a serum lactate level?"
- "Have you started broad-spectrum antibiotics?"
- "If you are not testing for sepsis, please document in the chart why not."
- "I would like to speak with the Patient Advocate or Chief Resident."

HOW TO DOCUMENT AND PROTECT EVIDENCE

- Send a message through the patient portal summarizing your symptoms and concerns (this creates a timestamped record)
- If a test is refused, ask the doctor to note the refusal AND their reasoning in the medical chart
- Keep a written log: date, time, symptoms reported, who you spoke to, and what they said
- Record the names and titles of every doctor, nurse, and staff member involved in your care
- Save all discharge paperwork, after-visit summaries, and prescription instructions
- Take photos of any visible symptoms (redness, swelling, mottled skin) with date/time stamps
- If your loved one is transferred to ICU, note the time and what prompted the transfer

WHEN TO CALL A MEDICAL MALPRACTICE ATTORNEY

- You were sent home from the ER with a “virus” or “flu” diagnosis and later developed sepsis or septic shock
- Post-surgical symptoms (pain, redness, fever) were dismissed as “normal” and progressed to sepsis
- An elderly family member developed sepsis from a UTI or pneumonia that was not promptly treated
- A newborn developed sepsis (especially from Group B Strep) after birth
- Sepsis resulted in ICU admission, organ failure, amputation, brain damage, or death
- You believe the hospital's sepsis protocol was not followed or was significantly delayed

- The hospital has offered a settlement and you want to understand the true value of the claim

IMPORTANT: Pennsylvania's statute of limitations for medical malpractice is **TWO YEARS**. Medical records and EMR audit data become harder to preserve over time. If you believe sepsis was misdiagnosed or the treatment protocol was not followed, contact an attorney as soon as possible to protect your rights.

Lupetin & Unatin, LLC | Pittsburgh, Pennsylvania
Medical Malpractice & Catastrophic Personal Injury
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