

**Senator Karen Mayne** proposes the following substitute bill:

**SEPSIS PROTOCOL REQUIREMENTS**

2020 GENERAL SESSION

STATE OF UTAH

**Chief Sponsor: Karen Mayne**

House Sponsor: \_\_\_\_\_

---

---

**LONG TITLE**

**General Description:**

This bill authorizes hospitals to develop sepsis protocol requirements.

**Highlighted Provisions:**

This bill:

- ▶ defines terms;
- ▶ authorizes hospitals to develop sepsis protocols; and
- ▶ provides guidance on factors the protocols should include.

**Money Appropriated in this Bill:**

None

**Other Special Clauses:**

None

**Utah Code Sections Affected:**

ENACTS:

**26-21c-101**, Utah Code Annotated 1953

**26-21c-102**, Utah Code Annotated 1953

**26-21c-103**, Utah Code Annotated 1953

**26-21c-104**, Utah Code Annotated 1953

---

---



26 *Be it enacted by the Legislature of the state of Utah:*

27 Section 1. Section **26-21c-101** is enacted to read:

28 **CHAPTER 21c. SEPSIS PROTOCOLS**

29 **26-21c-101. Title.**

30 This chapter is known as "Sepsis Protocols."

31 Section 2. Section **26-21c-102** is enacted to read:

32 **26-21c-102. Definitions.**

33 As used in this chapter:

34 (1) "Hospital" means a general acute hospital as defined in Section [26-21-2](#).

35 (2) "Sepsis" means a life-threatening complication of an infection.

36 Section 3. Section **26-21c-103** is enacted to read:

37 **26-21c-103. Protocols.**

38 (1) Hospitals may develop protocols for the treatment of sepsis and septic shock that  
39 are consistent with current-evidence based guidelines for the treatment of severe sepsis and  
40 septic shock.

41 (2) When developing the protocols described in Subsection (1), a hospital shall  
42 consider:

43 (a) a process for screening and recognizing patients with sepsis;

44 (b) a process to screen out individuals for whom the protocols would not be  
45 appropriate for treating sepsis;

46 (c) timeline goals for treating sepsis;

47 (d) different possible methods for treating sepsis and reasons to use each method;

48 (e) specific protocols to treat children who present with symptoms of sepsis or septic  
49 shock; and

50 (f) training requirements for staff.

51 (3) A hospital may update the hospital's sepsis protocols as new data on the treatment  
52 of sepsis and septic shock becomes available.

53 Section 4. Section **26-21c-104** is enacted to read:

54 **26-21c-104. Presenting protocols upon inspection.**

55 The department, or an entity assigned by the department to inspect a hospital, may  
56 request a copy of the sepsis protocols described in Section [26-21c-103](#) when inspecting a

57 hospital.