

In Patients Hospitalized for Sepsis, Does Using a Sepsis Order Set Result in Higher-Value Care?

STUDY DESIGN

- Retrospective cohort study
- Included 97,249 patients discharged with sepsis ICD-10 codes over 2 years from a large integrated health system
- Patients who received a sepsis order set were matched to those who did not receive an order set using a propensity score

RESULTS

Receipt of Sepsis Order Set (vs No Order Set) Per Patient

Hospital Mortality Rate

3.3% Lower
($P < .01$)



Median Direct Variable Total Cost

\$1,487 Lower
($P < .01$)



Median Payer-Neutral Reimbursement

(proxy for hospital revenue and thus societal costs)

\$465 Lower
($P < .01$)



Contribution Margin

(difference between direct variable costs and payer-neutral reimbursement)

\$1,022 Increase



A sepsis order set was associated with a lower hospital mortality rate, lower hospital costs, and lower societal costs. Sepsis order sets may be a tool to improve the value of care for both hospitals and societies.