

Let Beckman Coulter Solutions Be Your Guide

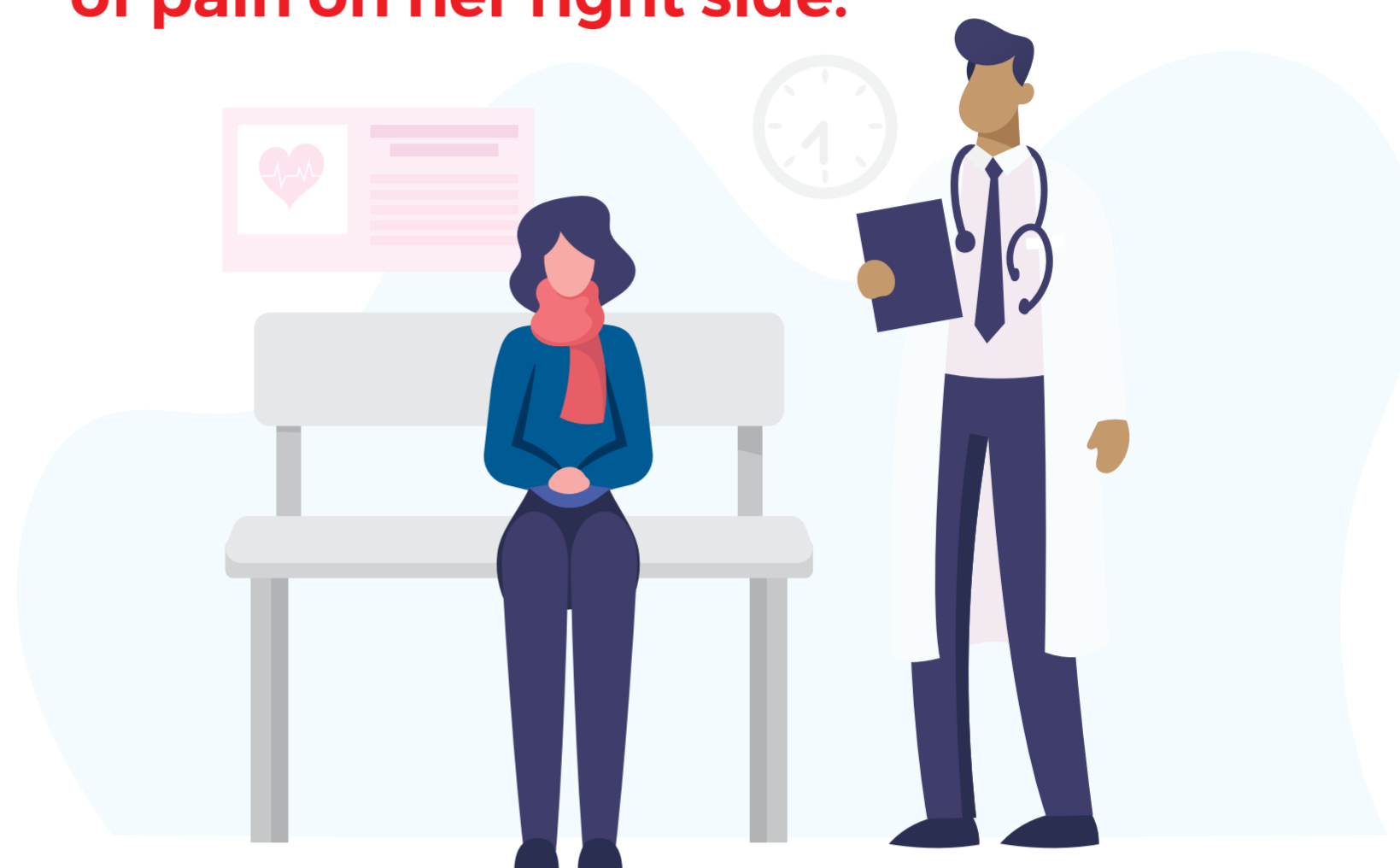
TRIAGE

8:32 AM

- Vital signs in triage do not meet SIRS criteria
- Standard lab work is collected and sent to lab

Temperature:
37.5°C
Pulse: 103
Blood Pressure:
105/80
Respiratory Rate: 19

39-year old female patient heads to the emergency room with chief complaint of pain on her right side.



SUSPECT

9:46 AM

- Blood collected for CBC-Diff
- Urine sample collected
- Automatic reflex to additional tests via REMISOL Advance middleware*

Patient worsens and is transferred to the intensive care unit. Sepsis suspected.

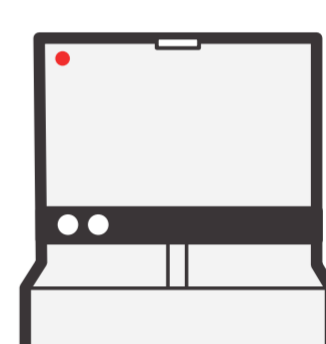
HEMATOLOGY

DxH 900 Analyzer
 ↑ ELEVATED WBC
 ↑ ELEVATED MDW



URINALYSIS

DxU Iris Analyzer
 ↑ ELEVATED WBC
 ↑ ELEVATED Bacterial Count



DIAGNOSE

11:03 AM

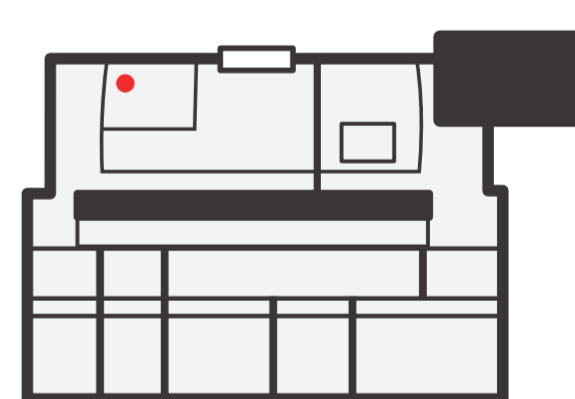
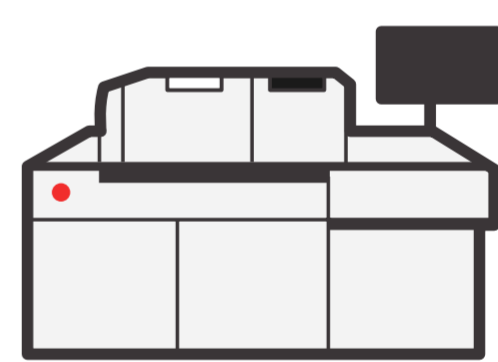
- Further testing is performed
- Automatic reflex to additional tests via REMISOL Advance middleware*

Patient started on ceftriaxone, a broad-spectrum antibiotic.



CHEMISTRY & IMMUNOASSAY

DxC 700 AU Analyzer
Dxl 9000 Access Immunoassay Analyzer
 ↑ ELEVATED Lactic Acid
 ↑ ELEVATED CRP
 ↑ ELEVATED PCT
 ↑ ELEVATED IL-6



CONFIRM

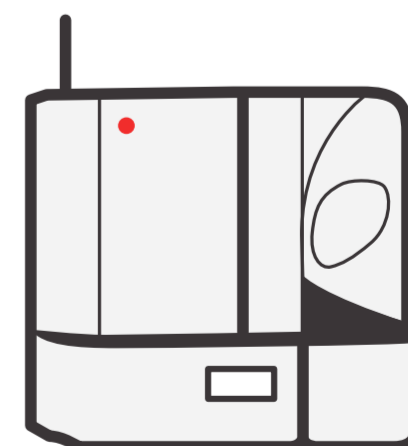
- Microbial analysis identifies ESβL producing E. coli
- Patient switched to meropenem

Patient's condition improves and she is moved to non-critical care unit.

Patient is discharged home within a few days.

MICROBIOLOGY

DxM MicroScan WalkAway ID/AST System
 Pathogen Identified as an ESβL-producing E. coli.



Now is the time to **SUSPECT**, **DIAGNOSE**, and **CONFIRM** sepsis with the help of Beckman Coulter solutions in your laboratory.



Find out more about Beckman Coulter solutions for sepsis patient management.

LEARN MORE



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