

Critical Care Hacks: Sepsis

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DEFINING AND TREATING SEPSIS

Sepsis Suspected/known infection + >2 SIRS

Severe Sepsis Sepsis + End Organ dysfunction^b Septic Shock Severe sepsis + HypoTN (SBP <90, MAP<65) refractory to fluid bolus

- a) SIRS criteria: Temp >38C or <36C, HR >90bpm, RR >20 or PaCO2 <32, WBC >12k or <4k
- a) End organ dysfunction is marked by acute respiratory failure inc. ARDS, AKI: elevated Cr or oliguria, Encephalopathy, Coagulopathy: PT>16 sec or PTT >60 sec, Thrombocytopenia: plt <100k, Hyperbilirubinemia: serum bilirubin >4, clinical malperfusion: delayed cap refill and cool extremities, lactate >2

*Lacta

*Lactate level

*Blood cultures

: *Broad-spectrum abx (

*30cc/kg bolus of crystalloid for hypotension (SBP<90, MAP<65) or lactate >2 *Remeasure lactate

*Add vasopressors (norepinepherine 1st line) for MAP>65

*Fluid resuscitation to achieve goal of: CVP 8-12, UOP >0.5cc/kg/h, ScvO2>70%, MAP >65, lactate clearance *Source Control

*Hydrocortisone 100mg

- *Glucose control to goal <180mg/dL
- *Antipyretic therapy for normothermia
- *Mechanical ventilation



Can't keep track of how much fluid you have given? Try our easy hack to keep track. Scan the QR code to see the AAEM Critical Care Hacks video.