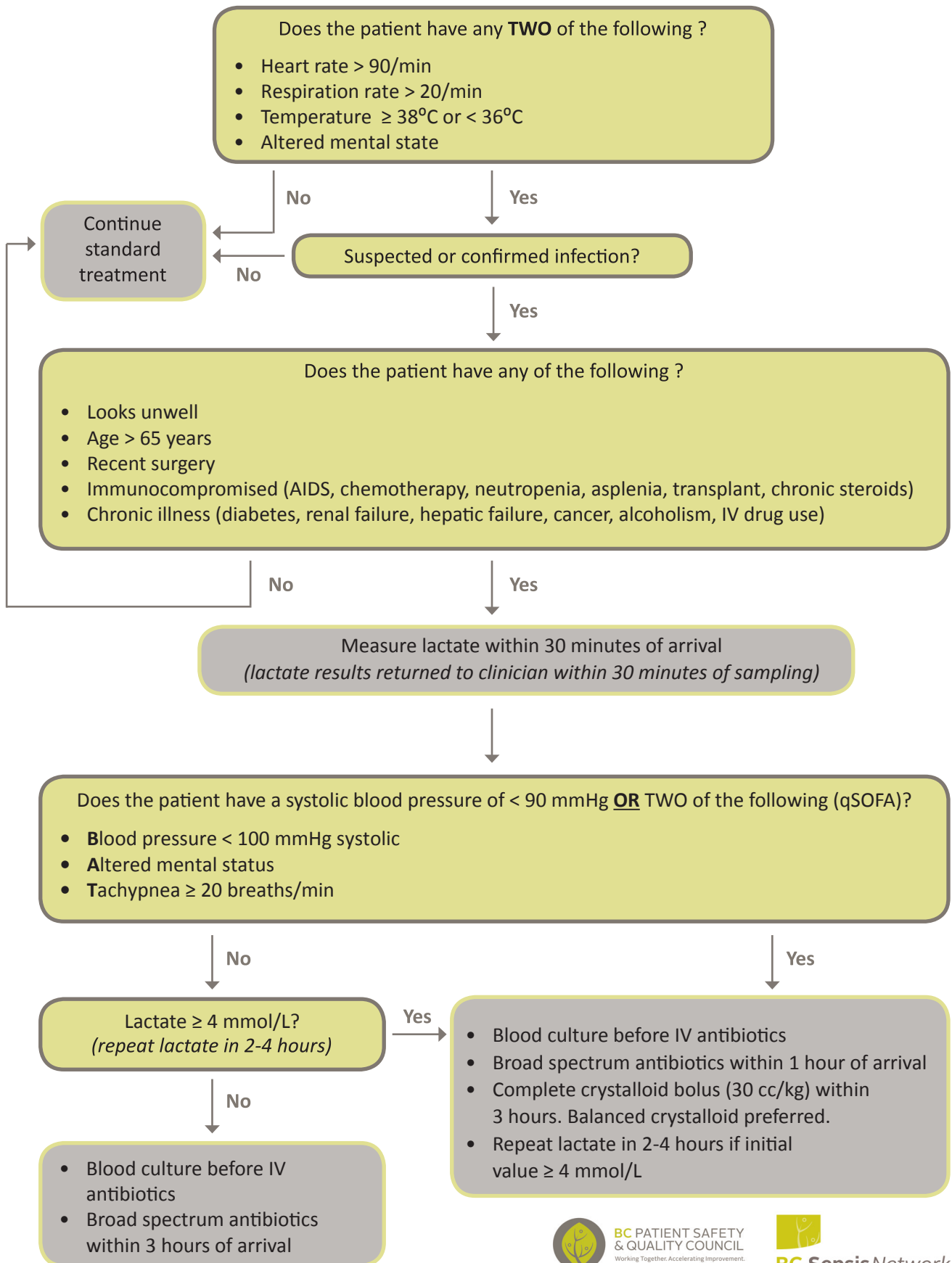


BC ED SEPSIS GUIDELINES ALGORITHM (2017)



Additional recommendations

- Early investigations to determine infectious source (radiologic, surgical, other cultures i.e. CSF, joint aspiration) and early source control within 6-12 hours through appropriate consultation and using the least invasive technique.
- Consult ICU early (either locally or through the BC Patient Transfer Network) if you have early knowledge that patient will need higher level of care.
- Encourage a 'culture of lactate' where any nurse or physician is empowered to check a lactate if concerned. Check early and check often (if lactate elevated or patient unwell).
- We suggest guiding resuscitation to normalize lactate in patients with elevated lactate as a marker of tissue hypoperfusion.

If hypotensive despite fluid bolus (30 cc/kg) or lactate fails to improve 10% after 2nd reading (at least two hours after initial measurement) we suggest:

- Placing central venous catheter and arterial catheter, continue fluid resuscitation while assessing for fluid responsiveness and initiate norepinephrine or epinephrine (+/- vasopressin 0.03 units/minute as vasopressor sparing agent) to maintain mean arterial pressure of > 65 mmHg.
- Using further hemodynamic assessment (such as assessing cardiac function) to determine the type of shock if the physical exam does not lead to a clear diagnosis.
- Using dobutamine as needed if there is evidence of sepsis induced myocardial suppression (determined by ECHO, low ScvO₂ or physical exam). Continue to assess response.
- Using albumin in addition to crystalloids for initial resuscitation and subsequent intravascular volume replacement in patients with sepsis and septic shock when patients require substantial amounts of crystalloids.
- If you are unable to restore hemodynamic stability with fluid resuscitation and vasopressors, consider adding IV hydrocortisone at a dose of 50 mg IV q6h.
- Consultation with critical care services or transfer to ICU (either locally or through BC Patient Transfer Network).