

0 min  
10 min  
0-20 min  
0-40 min  
60 min

**Patient Presents to the UC with one of the following:**

**Sepsis/Compensated Septic Shock:**

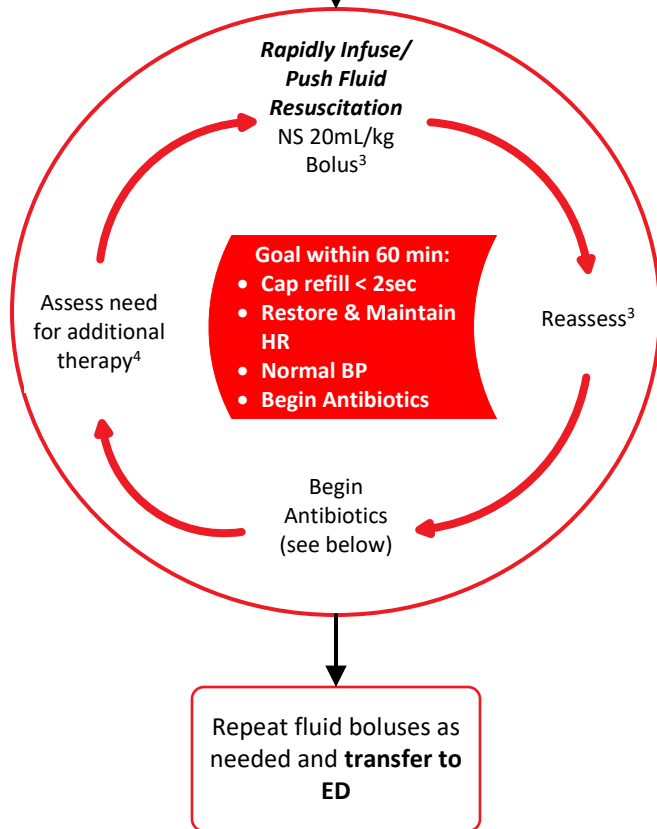
- Clinical Signs/Symptoms<sup>1</sup> present **AND**
- Physician concern for sepsis/compensated septic shock

OR

**Hypotensive Shock:**

Hypotension with known or suspected infection

Move patient to treatment room  
Place on Monitor  
Place on 100% O2 via non-rebreather  
Insert 2 IV/IO<sup>4</sup>  
Draw Labs<sup>2</sup>  
Notify transport for transfer to ED  
*Do NOT delay IV fluids/antibiotics if unable to draw labs*



**<sup>1</sup>Clinical Signs/Symptoms**

- **Abnormal Perfusion**
  - Pulses
    - Decreased or weak (cold shock)
    - Bounding (warm shock)
  - Capillary Refill
    - >2 seconds (cold shock)
    - Flash <1 second (warm shock)
  - Skin
    - Mottled, cool extremities (cold shock)
    - Flushed, ruddy, erythroderma (warm shock)
- **Mental Status Changes**
  - Irritability, confusion, lethargy, obtunded
  - Inappropriate crying or drowsiness
  - Poor interaction with parents
  - Diminished arousability
- **Low OR High core temperature**
- **Hypotension**
- **Tachycardia**
- **Tachypnea**

**<sup>2</sup>Labs**

- Blood Cultures-obtain maximum allowable amount, Policy 4.26
- CMP
- CBC with Diff
- CRP
- CXR, CSF if indicated
- If concern or suspicion of UTI and/or no obvious source of infection, consider UA

**<sup>3</sup>Reassess**

- Reassess Q15min and/or after each bolus:
  - Vital Signs, Perfusion, Any evidence of Congestive Heart Failure
- STOP fluid boluses if auscultate:
  - Rales, Crackles, Gallop, Hepatomegaly
- Consider other causes of shock:
  - Hypovolemia, Cardiogenic, Anaphylaxis, Metabolic Disorder

**<sup>4</sup>Additional Therapies**

- **Fever Control**
- **Hypoglycemia**
  - Dextrose 0.5 grams/kg = 5mL/kg of D10
- **Neonate**
  - Consider Fever Guideline 0-28 days
- **If delay in transfer, consider risk for adrenal insufficiency**
  - Hydrocortisone 2 mg/kg, max 100mg IV x1

**ANTIBIOTIC ADMINISTRATION FOR SEPSIS**

When infusing multiple antibiotics

Use the antibiotic with the **shortest administration time** before others

Give ALL Medications in Group Unless otherwise specified	Medication	Dose All x1	Max Dose
<b>Healthy Kids ≥29 days of age</b>	CefTRIAXone*	75mg/kg IV/IM	2000mg
<b>Neonate ≥2kg</b>	Ampicillin	100mg/kg IV	N/A
	Gentamicin	5mg/kg IV/IM	N/A
<b>Neonate &lt; 7 days old</b>	Ampicillin	100mg/kg IV	N/A
	Gentamicin	4mg/kg IV/IM	N/A

\* If allergic to Cephalosporins use Levofloxacin 10mg/kg IV max dose of 750mg