Pediatric Sepsis – Suspected / Septic Shock

SEPSIS:

"a life-threatening organ dysfunction caused by a dysregulated host response to infection." and should be treated as "a life-threatening condition that arises when the body's response to an infection injures its own tissues and organs."

Routine Medical Care

Vital Signs Including Temperature

Pediatric SIRS Criteria (Systemic Inflammatory Response Syndrome)
Obvious or Suspected Infection PLUS ANY of the following criteria:

Temperature >100°F or <96°F AND Heart Rate

- 1 month 1 year > 180 bpm
- 2 5 years > 140 bpm

Reference

charts

Yes

- 6 12 years > 130 bpm
- 13 18 years > 120 bpm

The SIRS (Systemic Inflammatory Response System) criteria represent a series of objective physical and laboratory findings indicative of an infectious or non-infectious insult provoking a systemic immune response.

No

Hypotension for Age	
Age	Systolic Blood Pressure
> 10 years	< 90 mmHg
1-10 years	< 70 + (2 x age in years)
< 1 year	< 70 mmgHg

EtCO₂ ≤ 25mmHg OR

These levels are associated with serum lactate levels > 4 mmol/L.

Hypotensive <u>OR</u> ANY of these criteria * See reference charts

Consider Sepsis

Call **SEPSIS ALERT** to receiving ED

Yes

No

Routine Medical Care²

Patients with suspected sepsis may not have a low EtCO₂ reading.

Consider sepsis based on clinical presentation.

Criteria for consideration

- Immunocompromised
- Developmental Delay
- Cancer Patient
- Catheter PICC or Foley
- S / S of poor perfusion
- Sickle Cell Patient

20 mL/kg or 1 liter fluid bolus w/ pressure bag IV / IO (LR³)

with reassessment* *max 60 mL/kg or 3 liters unless clinical concern for fluid overload

**If signs of fluid overload or age appropriate Hypotension after

MAX Bolus – STOP FLUIDS and START EPI**

Push Dose Epinephrine IV/IO 10 mcg/ml [1:100,000] 1 ml/min

Epinephrine Drip IV/IO 0.01 – 0.5 mcg/kg/min

Norepinephrine Drip IV/IO 0.1 - 2 mcg/kg/min

Titrate to age appropriate BP: SBP ≥ 70 + 2 x Age

³ Lactated Ringers are the crystalloid of choice for the resuscitation of septic patients when available.

Consider Acetaminophen for fever

15mg/kg IV over 15 minutes

History:

- Age
- FeverPrevious Infection
- Immunocompromised
- Bedridden / Immobilized
- patientRecent Surgery
- Developmental Delay
- Cancer
- Catheter PICC or Foley
- Transplant

AGES 2 months and older

Cefepime 50 mg/kg/dose IV / IO Max Dose 2 gm

***Do Not administer if pt has allergy to: ***

Penicillin – PCN

Cephalexin - Keflex

Contact Medical Control for consultation or further orders

Signs / Symptoms:

- Hyper/Hypothermia
- Chills
- Rash
- Altered Mental Status
- Myalgias
- Cough
- Dysuria

