

SEPSIS MANAGEMENT ORDERS

**DO NOT WRITE
IN THIS AREA**

(TO BE COMPLETED AFTER 6 HOURS OF INITIAL
RESUSCITATION ORDERS)

PATIENT LABEL
MUST BE PLACED
WITHIN THIS BOX

Goal of Treatment:

CVP 8-12 MAP > 65 U.O. 0.5ml/kg/hr ScVO2 > 70%

- Lactate levels every: 6 hours 12 hours 24 hours
- Continuous CVP monitoring Call MD if CVP < 8
- Continuous ScVO2 monitoring Call MD if < 70%
OR
- Venous blood gas every _____ hours Call MD if < 70%
- Capillary blood sugar AC, HS, if Blood Sugar > 140 obtain order for insulin subcutaneous protocol
- Obtain order for insulin drip protocol if blood Glucose > 180 for 2 consecutive readings
- RT to document Plateau Pressure q 8 hrs.

***Note to Physician:**

If on mechanical ventilator maintain Inspiratory Plateau Pressure (IPP) < 30cmH2O and TV 6ml/kg ideal body weight

- Notify MD if P/F ratio is < 300
- Call MD if Urine Output < 0.5ml/kg/hr
- Acetaminophen 650mg every 4 hours PRN for fever. Route PO

Septic Shock requiring vasopressor support with adequate fluid resuscitation consider the following:

Evaluate for Drotrecogin Alfa (xigris) Not a candidate

Note: Can only be ordered by ICU Attending or ID Physician, See Drotrecogin Order form.

Evaluate for hydrocortisone

Hydrocortisone (solucortef) 50mg IV every 6 hours x 7 days Not a candidate
Note: Re-evaluate daily, consider slow tapering when shock is resolved

Vasopressin 100 units/100ml D5W infuse at 0.03 Units/min (1.8cc/hr fixed rate)

MD Signature: _____ Date: _____

RN Signature: _____ Date: _____

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