

UPDATED

Adult Sepsis ED Guidelines

Know how to spot & treat
sepsis & septic shock.

**Sepsis is life threatening organ
dysfunction resulting from infection.**

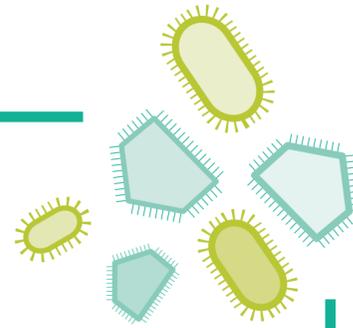
A recent study in *Critical Care Medicine* estimates that BC's health care system prevented 1,150+ people from acquiring sepsis or dying from the disease.

Join our BC Sepsis Network to access expertise and resources which can help you lead local efforts to improve care for sepsis.

Learn more about
the guidelines:



DOES THE PATIENT...



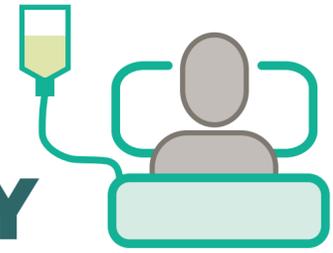
...have 2 out of 4 SIRS criteria?

- Heart rate greater than 90
- Respiratory rate greater than 20
- Temperature greater or equal to 38.0°C or less than 36.0°C
- Altered mental state

...have a presumed infection
and any of the following:

- Looks unwell
- Age greater than 65 years
- Recent surgery
- Immunocompromised
- Chronic illness

IF YES, THE PATIENT MAY BE SEPTIC



Measure venous lactate
within 3 hours and repeat
in 2–4 hours if initial result
is greater than 2 mmol/L

If the patient has SBP less
than 90 mmHg and/or MAP
less than 65 mmHg:

1. Send blood culture before giving IV antibiotics within 1 hour
2. Complete crystalloid fluid bolus (30 cc/kg) within first 3 hours
3. Document cultures, antibiotics, IV fluids

If the patient is not in shock,
but sepsis is still suspected:

1. Send blood culture before giving antibiotics within 3 hours
2. Document cultures, antibiotics, IV fluids

[BCPSQC.ca/sepsis](https://bcpsqc.ca/sepsis)

    @BCPSQC  @BCSepsis