



**PHYSICIAN ORDERS  
FOR  
SEVERE SEPSIS in the  
EMERGENCY DEPARTMENT**  
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Patient Identification

Weight: \_\_\_\_\_ kg    Height: \_\_\_\_\_ cm    Allergies: \_\_\_\_\_

**REFER TO PEDSPAC SEPSIS ALGORITHM FOR USE WITH INFANTS > 28 DAYS/CHILDREN**  
*Initial on all lines applicable*

**INVESTIGATIONS**

- Blood culture
- CBC & Diff, PT/PTT
- Na, K, Cl, glucose, urea, creatinine, venous blood gas, lactate, Ca, AST, ALT
- POCT Glucose. If glucose  $\leq 2.6$  mmol/L, give D10W 5 mL/kg rapid IV push then start D10W IV infusion at 5 mL/kg/hr (MAX 250 mL/hr) and recheck glucose in 5 minutes

\_\_\_\_\_ Crossmatch \_\_\_\_\_ units of PRBCs    \_\_\_\_\_ Type and screen  
 \_\_\_\_\_ Chest x-ray  
 \_\_\_\_\_ Urine routine & microscopy and culture & sensitivity (consider indwelling catheter)  
 \_\_\_\_\_ Nasopharyngeal aspirate for viral testing (if available)  
 \_\_\_\_\_ Other: \_\_\_\_\_

**FLUIDS**

**IV #1**

\_\_\_\_\_ NS bolus \_\_\_\_\_ mL (20 mL/kg) IV/IO rapid infusion or push over 5-10 minutes (1<sup>st</sup> bolus)  
Time    Initial  
 \_\_\_\_\_ NS bolus \_\_\_\_\_ mL (20 mL/kg) IV/IO rapid infusion or push over 5-10 minutes (2<sup>nd</sup> bolus)  
Time    Initial  
 \_\_\_\_\_ NS bolus \_\_\_\_\_ mL (20 mL/kg) IV/IO rapid infusion or push over 5-10 minutes (3<sup>rd</sup> bolus)  
Time    Initial

**IV #2**

\_\_\_\_\_ D5NS at \_\_\_\_\_ mL/hr IV/IO  
Time    Initial  
 \_\_\_\_\_ Other: \_\_\_\_\_

**For introsseous line infusion consider:**

\_\_\_\_\_ **PRESERVATIVE FREE Lidocaine 2%** \_\_\_\_\_ mg (0.5 mg/kg/dose MAX 40 mg) into medullary space over 1-2 minutes. Follow with \_\_\_\_\_ mL NS flush.

**PRESSORS/INOTROPES**

**For cold shock:**

\_\_\_\_\_ **EPINEPHrine** \_\_\_\_\_ mcg/kg/min IV/IO infusion (Initial 0.05-0.1 mcg/kg/min; titrate to effect in 0.02 mcg/kg/min increments; MAX 1 mcg/kg/min)  
Time    Initial

**For warm shock:**

\_\_\_\_\_ **NOREpinephrine** \_\_\_\_\_ mcg/kg/min IV/IO infusion (Initial 0.05-0.1 mcg/kg/min; titrate to effect in 0.02 mcg/kg/min increments; MAX 2 mcg/kg/min)  
Time    Initial  
 \_\_\_\_\_ **DOPamine** \_\_\_\_\_ mcg/kg/min IV/IO infusion (10 mcg/kg/min)  
Time    Initial

**FOR CATECHOLAMINE RESISTANT SHOCK**

\_\_\_\_\_ **Hydrocortisone** \_\_\_\_\_ mg (2 mg/kg/dose, MAX 100 mg) IV/IO x 1 then \_\_\_\_\_ mg (1 mg/kg/dose) IV/IO q6h  
Time    Initial

**EMPIRIC ANTIMICROBIAL RECOMMENDATIONS**

\_\_\_\_\_ **Ceftriaxone** \_\_\_\_\_ mg (100 mg/kg/dose MAX 2000 mg/dose) IV/IO q24h  
 \_\_\_\_\_ **Vancomycin** \_\_\_\_\_ mg (15 mg/kg/dose, MAX 1000 mg/dose) IV/IO q6h (if meningitis suspected)  
 THE ANTIMICROBIAL CHOICE IS INTENDED AS EMPIRIC THERAPY AND SHOULD BE REEVALUATED ONCE MORE CLINICAL AND LABORATORY INFORMATION IS AVAILABLE EITHER AT OR PRIOR TO ADMISSION.

\_\_\_\_\_  
PHYSICIAN SIGNATURE

\_\_\_\_\_  
PRINT NAME OF PHYSICIAN

\_\_\_\_\_  
DATE & TIME

\_\_\_\_\_  
NURSE SIGNATURE

\_\_\_\_\_  
PRINT NAME OF NURSE

\_\_\_\_\_  
DATE & TIME