

# SEPSIS HYOPERFUSION PATHWAY

Use in conjunction with EWS chart & Sepsis Six screening and action tool

Patient Label

Name: \_\_\_\_\_

NHI: \_\_\_\_\_ or patient details DOB: \_\_\_\_\_  
dd/mm/yy

Address: \_\_\_\_\_

## ADULT PATIENT WITH SUSPECTED SEPTIC SHOCK

Signs of infection and hypotension and/or raised lactate



Signs of hypoperfusion after **SEPSIS SIX** bundle completed  
Remains hypotensive SBP <90, RR>25, decreased level of consciousness, lactate not falling

### MAY NEED ICU & VASOACTIVE SUPPORT



Inform relevant senior clinician



1. Ensure escalation remains appropriate
2. Commence phenylephrine or metaraminol (as below) by peripheral infusion to achieve MAP >65
3. Arrange urgent source control if required (discuss with relevant surgical team)
4. Discuss with Intensive Care Team
5. Arrange definitive care



#### If in a peripheral hospital and accepted for ICU:

- Commence supportive therapies in consultation with ICU team.
- Arrange insertion of arterial & central venous catheters then transition to noradrenaline (as below).
- Consider local skilled resources to assist (eg. onsite anaesthetist).



Arrange transport to appropriate ICU facility with accepting team approval. Critical Care retrieval may be appropriate



#### If in a hospital with Critical Care capability:

- Commence supportive therapies in consultation with ICU team.
- Arrange transfer to ICU as soon as possible.



#### Maintain vigilance and re-assess patient regularly to achieve:

- MAP >65mmHg, SpO<sub>2</sub> >94%, lactate reducing and acceptable urine output
- Continue all supportive care and re-consider source control

**Phenylephrine:** 10mg diluted into 100mL of D5W creates 100microg/mL solution. Run at 0-30mL/hr via secure peripheral IV

**Metaraminol:** 10mg diluted to 20mL of H<sub>2</sub>O creates 0.5mg/mL solution. Run at 0-30mL/hr via secure peripheral IV

**Noradrenaline:** 4mg diluted into 50mL of D5W creates 80microg/mL solution. Run at 0-30mL/hr via central venous catheter

NOTE: arterial monitoring is considered mandatory if noradrenaline is used.