

Resident Clinical Pearl: January 2015

Title: Save a life with the Sepsis Six!

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The first hour is critical in a patient with suspected sepsis. Use the “Sepsis Six” to ensure you deliver the care your septic patients needs, within ONE hour of triage time and you can double your patient’s chance of survival.

Do you suspect sepsis? For example:

- T < 36°C or > 38°C
- RR > 20
- HR > 90
- SBP < 90
- O2 sat < 94%
- Looks unwell
- Mottled
- Purpura or petechiae
- Delayed cap refill

If so, start the **Sepsis Six:**

1. Administer high flow oxygen
2. Take blood cultures
3. Give broad-spectrum antibiotics (For every hour without antibiotics, mortality is increased 7.9%.)
<http://sjrhem.ca/new-nb-antibiotic-guidelines-resources/>
4. Give an intravenous fluid challenge, ex: 20mL/kg
5. Measure serum lactate and complete blood count
6. Accurately measure hourly urine output (consider Foley)

The Surviving Sepsis Campaign has streamlined the care of patients with sepsis with their recommendations and guidelines including the third edition of "Surviving Sepsis Campaign: International Guidelines for Management of Severe Sepsis and Septic Shock: 2012", appearing in the February 2013 issues of *Critical Care Medicine* and *Intensive Care Medicine*. Our own Adult Sepsis pathway at SJRH DEM uses these concepts to direct the care of our septic patients, take a look at <http://sjrhem.ca/guideline/sepsis-adult/>.

References:

1. Daniels, R et al. (2012). The Sepsis Six. Retrieved December 29, 2014, from <http://survivesepsis.org/the-sepsis-six/>.
2. Dellinger, R. (Feb 2013). Surviving Sepsis Campaign: International Guidelines for Management of Severe Sepsis and Septic Shock: 2012. *Critical Care Medicine*, 41(2), 580-620. Retrieved December 29, 2014, from <http://www.survivingsepsis.org/guidelines/Pages/default.aspx>
3. SJRH Emergency Medicine Guidelines: Adult Sepsis. Retrieved December 29, 2014 from <http://sjrhem.ca/guideline/sepsis-adult/>.