

Reconciliation of conclusions with prior systematic reviews

	Current	Sherwin, 2015 SCC PMID 28916120	Sterling, 2015 PMID 26121073	Siddiqui, 2010 (Cochrane) PMID 20927754
Efficacy: antibiotics received within 1 hour to greater than one hour	Mortality reduction from antibiotics within 1 hour is odds ratio 0.71 (0.56 to 0.91)	“Patients with severe sepsis and septic shock should receive early and appropriate antibiotics in the emergency department. Patients with septic shock who received appropriate antimicrobial therapy within 1 h of recognition had the greatest benefit in mortality”	“we found no significant mortality benefit of administering antibiotics within 3 hours of emergency department triage or within 1 hour of shock recognition in severe sepsis and septic shock.”	“we are unable to make a recommendation on the early or late use of broad spectrum antibiotics in adult patients with severe sepsis in the ED pre-ICU admission”
Heterogeneity	62% (23% to 82%)	NA – meta-analysis not performed	I ² not reported	NA – meta-analysis not performed