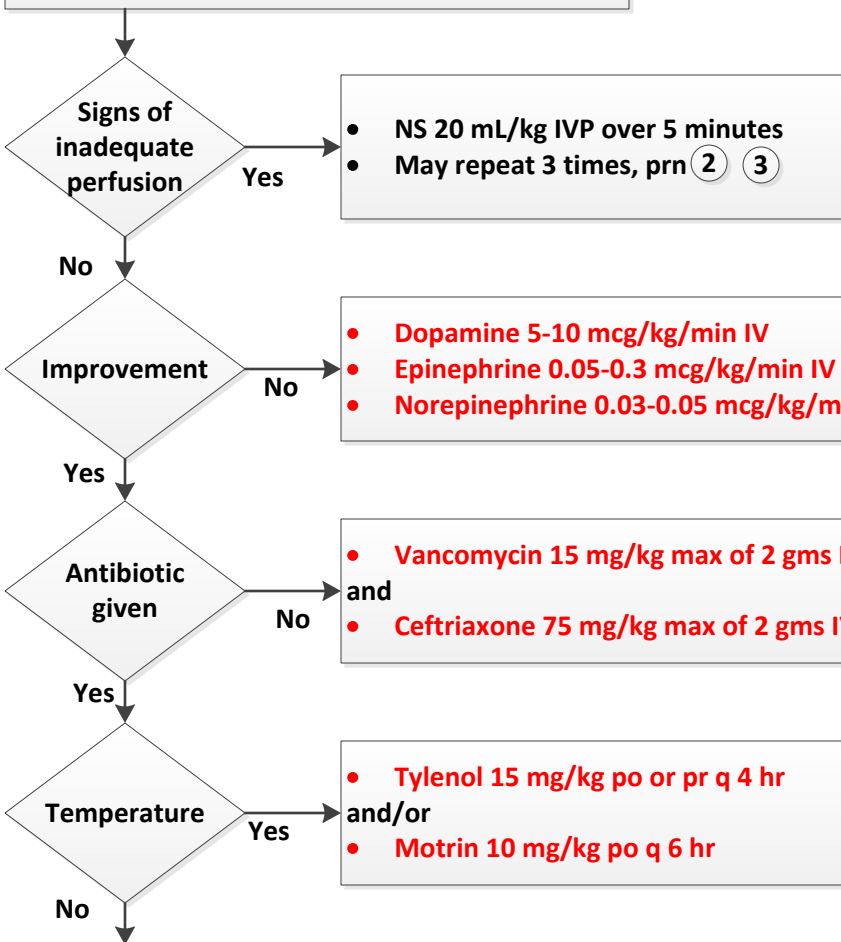


Pediatric Sepsis/ Meningitis

- ABCs
- Oxygen 100%
- Assist ventilations, intubate prn ①
- Secure IV



Assessment of Perfusion:

- LOC
- Capillary refill
- Urine output
- Heart rate
- Color
- Pulses (inward to outward)

Check for signs of fluid overload:

- Hepatomegaly
- Rales
- Reassess for adequate perfusion prior to each fluid bolus

Vasopressor Guidelines

Fluid - Refractory Shock: vasoactive drugs are recommended in children with septic shock who have not improved after 40 to 60 mL/kg of NS. Fluid administration is continued and vasoactive agents are guided by physical findings.

Cold Shock: (poor perfusion, delayed cap refill, cold extremities) that do not respond to initial fluid bolus' should receive **dopamine 5 – 10 mcg/kg/min**. If resistant add **epinephrine 0.05- 0.3 mcg/kg/min**.

Warm Shock: (bounding pulses, pink extremities, and "flash" capillary refill) give **norepinephrine 0.03 to 0.05 mcg/kg/min**.

If Bacterial Meningitis Suspected:

Age > 2 months give:

Dexamethasone 0.15 mg/kg IV (Preferably to start prior to or with first dose of antibiotic)

1. See Pediatric Intubation Protocol

2. Repeated 20 mL/kg Normal Saline boluses should be given rapid IV push, until tissue perfusion, oxygen delivery, and blood pressure are adequate, or signs of fluid overload develop. Patients may need 60 mL/kg or more in the first hour and up to 120 mL/kg or more during the first several hours of fluid administration.

3. Do not wait for low BP before starting Vasopressors. Look at "Assessment of Perfusion". BP in children is a late finding.

4. **Ceftriaxone** may be given IM. Do not delay antibiotics for procedures (ie Lumbar Puncture)

5. Consider work of breathing when assessing airway

6. Normal Urine Output: Infant 2 mL/kg/hr, Child 1 -2 mL/kg/hr, Adolescent 0.5-1 ml/kg/hr.

7. Children with Septic Shock have very large fluid needs due to systemic vasodilation and capillary leak. Aggressive fluid management within the first hour is correlated with increased survival rates.