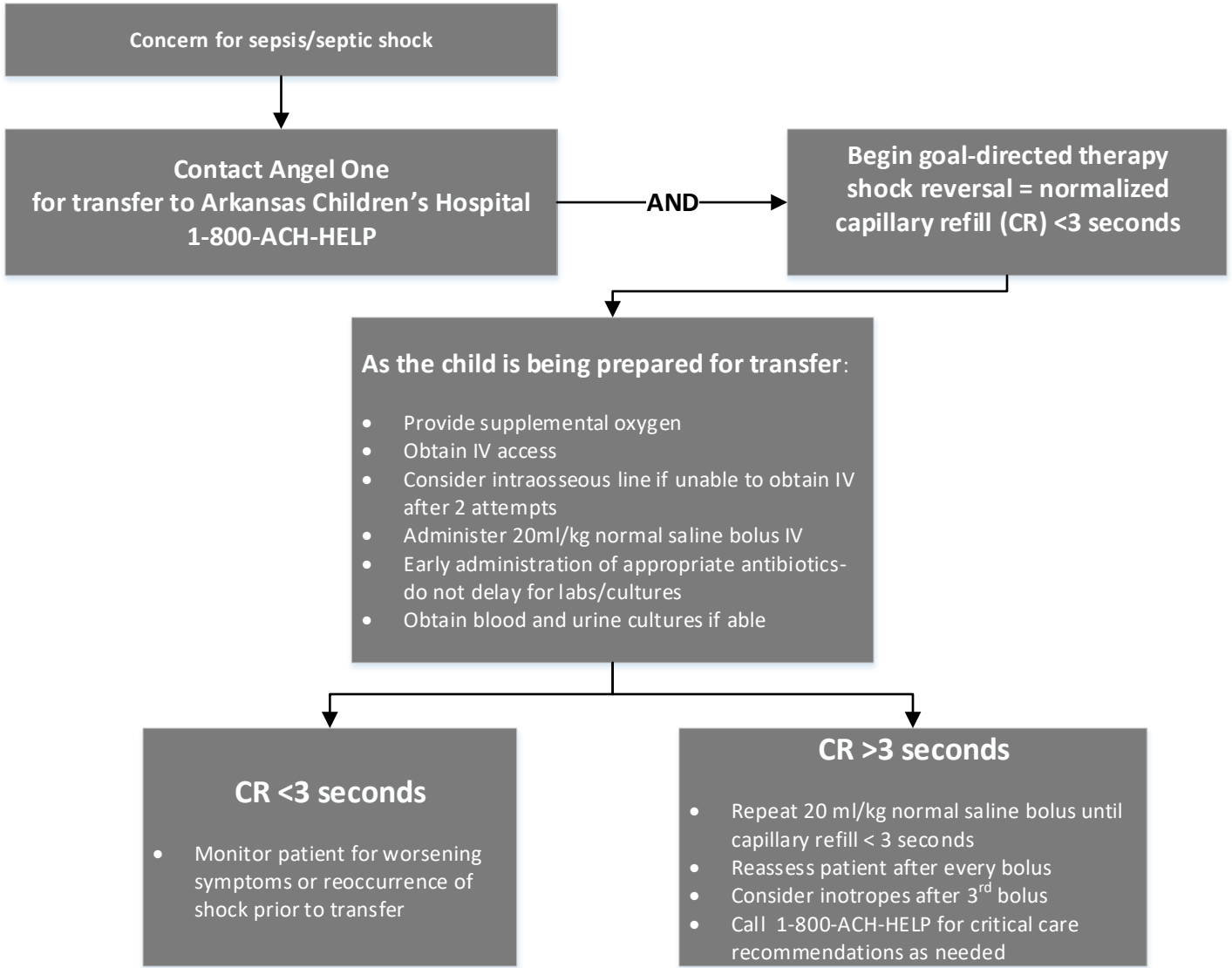


Pediatric Sepsis Pathway

Consider sepsis or septic shock if a child has a suspected or proven infection and at least two of the following:

- Core temp <36 C or > 38.5 C
- Inappropriate tachycardia
- Altered mental state
- Reduced peripheral perfusion or prolonged capillary refill



Antibiotics

Previously Healthy
(Please administer antibiotics in order of listing)

- No concern for intra-abdominal source = **Ceftriaxone + Vancomycin**
- Concern for intra-abdominal source = **Ceftriaxone + Vancomycin + Metronidazole**

Medically Complex
(Immunocompromised, CVC catheter, chronic medical condition)
(Please administer antibiotics in order of listing)

- No concern for intra-abdominal source = **Cefepime + Vancomycin**
- Concern for intra-abdominal source = **Cefepime + Vancomycin + Metronidazole**

Dosing Guidelines

Vancomycin- 15 mg/kg x 1 dose (max 1500 mg)
Ceftriaxone 50 mg/kg x 1 dose (max 2 grams)
Cefepime 50 mg/kg x 1 dose (max 2 grams)
Metronidazole 10 mg/kg x 1 dose (max 500 mg)

AGE	HEART RATE
Preterm Infants	120-160
< 1 month term infants	100-180
1 month – 1 year	90-160
>1 year – 3 years	80-140
>3 years – 5 years	70-140
>5 years – 11 years	65-110

Suggested Labs

- Blood/urine culture
- Glucose
- Lactate
- Procalcitonin or C-reactive protein (CRP)
- Ionized calcium
- BMP
- CBC
- Liver Function Tests

Risk Factors for Pediatric Sepsis:

- Age <1 month
- Serious injury (e.g., major trauma, burns, penetrating wounds)
- Chronic debilitating medical condition
- Asplenia/Heterotaxy/Sickle Cell Disease
- Host immunosuppression
- Transplant
- Large surgical incision(s)
- Indwelling medical device (port, PICC line, dialysis catheter, PD catheter, VP shunt)
- Urinary tract abnormalities with frequent infection
- Recent surgery/invasive procedure/hospitalization
- Recent steroid use

Signs of Septic Shock:

- Tachycardia
- Bradycardia (rare)
- Hypotension (late sign)
- Cold, pale extremities
- Capillary refill time (CRT) >3 seconds or flash CRT
- Bounding or weak pulses
- Mottled skin
- Discrepancy between peripheral and central pulses
- Decreased urine output
- Dry mucous membranes
- Tachypnea, apnea (especially in infants), grunting, nasal flaring, hypoxia
- Sleepiness, lethargy, agitation, fussiness, acting abnormal per parents

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