



**PRESCRIBER'S ORDERS
INPATIENT/EMERGENCY DEPARTMENT
FOR PATIENTS WITH SUSPECTED SEPSIS**

DATE ___/___/___ TIME ___:___ HOURS
DD MM YYYY

WEIGHT _____ kilograms HEIGHT _____ centimetres ALLERGY CAUTION sheet reviewed

Pharmacy Use Only

REFER TO STABLE/UNSTABLE ORDER SET FOR FEVER/NEUTROPENIA
WRITE FIRMLY WITH A BALLPOINT PEN

Noted by RN/UC

Investigations: STAT

- establish IV access
- blood culture
- blood gas (venous)
- lactate
- CBC
- glucose and bedside glucose
- coagulation Profile: PT/PTT, INR
- electrolytes, BUN, creatinine,

Other:

- group & screen/cross match
- ALT
- chest X-ray
- other X-ray _____
- naso-pharyngeal wash (NPW) for rapid respiratory panel (VIRAP)
- urinalysis
- urine for culture & sensitivity
- other cultures: _____
- consult Critical Care

General Orders:

- high flow oxygen
- strict intake and output

Fluid therapy:

- 0.9% sodium chloride (NS) bolus of 20 mL/kg over 5 minutes
- repeat in 20 mL/kg increments if abnormal CVS parameters persist
- if 60 mL/kg of fluid is given **mandatory** PICU consult
- other _____

Medications:

Antibiotics STAT - within 20 minutes (Empiric Antibiotic Guide on reverse)
Consult Infectious Diseases for any Severely Septic Patient

1. _____
2. _____
3. _____

include drug name, (dose/kg formula), total dose, frequency, route

If Mean Arterial Pressure (MAP) is persistently at or below age related guideline despite fluid therapy
begin Epinephrine Infusion; initiated by critical care


- Epinephrine at _____ micrograms (mcg)/kg/min IV:
Peripheral -0.01-0.15 mcg/kg/min; Central -0.01- 0.3 mcg/kg/min

CTAS : Abnormal Heart Rate and Respiratory Rate by Age Groups (CTAS 2008)						
Age Group	Birth- 3 mo	3 mo-6 mo	6 mo-1 yr	1 -3 yr	6 yrs	> 10 yrs
HR	<90 or >180	<80 or >160	<80 or >140	<75 or >130	<70 or >110	<60 or >90
RR	<30 or >60	<30 or >60	<25 or >45	<20 or >30	<16 or >24	<14 or >20

Print Name: _____ Pager #: _____
Signature: _____ College ID#: _____

mL=millilitre; kg=kilogram; min=minute; IV=intravenous; < less than; > greater than; CVS = cardiovascular system

Empiric Antibiotic Guideline

	< 1 Month Old	1 – 3 Months Old	> 3 Months Old
NOTE: If MRSA is a consideration use vancomycin instead of cloxacillin. Vancomycin 20 mg/kg IV X 1 dose NOW then 15 mg/kg/dose IV q6h. Consult Infectious Disease Service for ANY Severe Sepsis Patient			
Sepsis Unknown Source	<p>Ampicillin + Acyclovir + [Gentamicin or Cefotaxime]</p> <p><u>Ampicillin</u> 50 mg/kg/dose IV NOW and q6h (q8h if < 1 week old) plus <u>Acyclovir</u> 20 mg/kg/dose IV NOW and q8h (adjust for renal impairment) plus <u>Gentamicin</u> 2.5 mg/kg/dose IV NOW and q8h (q12h if < 1 week old)</p> <p>OR</p> <p><u>Ampicillin</u> 50 mg/kg/dose IV NOW and q6h (q8h if < 1 week old) plus <u>Acyclovir</u> 20 mg/kg/dose IV NOW and q8h (adjust for renal impairment) plus <u>Cefotaxime</u> 50 mg/kg/dose IV NOW and q8h (q12h if < 1 week old)</p>	<p>Ampicillin + Cefotaxime</p> <p><u>Ampicillin</u> 50 mg/kg/dose IV NOW and q6h plus</p>	<p>Cloxacillin + Cefotaxime</p> <p><u>Cloxacillin</u> 50 mg/kg/dose IV NOW and q6h (Max 2 g/dose) plus <u>Cefotaxime</u> 50 mg/kg/dose IV NOW and q6h (Max 2 g/dose)</p>
CNS Suspected Source		Shunt/EVD <u>Meropenem</u> 40 mg/kg dose IV NOW and q8h (Max 2g/dose) plus <u>Vancomycin</u> 20 mg/kg IV X1 dose NOW then 15 mg/kg/dose IV q6h	<p>Cefotaxime +/- Vancomycin</p> <p><u>Cefotaxime</u> 75 mg/kg/dose IV NOW and q6h (Max 2 g/dose) plus <u>Vancomycin</u> 20 mg/kg IV X 1 dose NOW then 15 mg/kg/dose IV q6h</p>
Pneumonia Suspected Source		<p>Cloxacillin + Cefotaxime</p> <p><u>Cloxacillin</u> 50 mg/kg/dose IV NOW and q6h (Max 2 g/dose) plus <u>Cefotaxime</u> 50 mg/kg/dose IV NOW and q6h (Max 2 g/dose)</p>	<p>Cloxacillin + Cefotaxime +/- Azithromycin</p> <p><u>Cloxacillin</u> 50 mg/kg/dose IV NOW and q6h (Max 2 g/dose) plus <u>Cefotaxime</u> 50 mg/kg/dose IV NOW and q6h (Max 2 g/dose) plus <u>Azithromycin</u> 10 mg/kg/dose PO/IV X 1 dose (Max 500 mg) then 5 mg/kg/dose PO/IV q24h (max 250 mg/dose) X 5 days</p>
GU Suspected Source	<p>No known anatomical abnormalities or first presentation: Ampicillin + Gentamicin</p> <p><u>Ampicillin</u> 50 mg/kg/dose IV NOW and q6h (q8h if < 1 week old) plus <u>Gentamicin</u> 2.5 mg/kg/dose IV NOW and q8h (q12h if < 1 week old)</p> <p>Known abnormality of GU tract: Piperacillin + Gentamicin</p> <p><u>Piperacillin</u> 75 mg/kg/dose IV q6h (q8h if < 1 week old) plus <u>Gentamicin</u> 2.5 mg/kg/dose IV q8h (q 12h if < 1 week old)</p>	<p>> 1 month old:</p> <p>No known anatomical abnormalities or first presentation: Ampicillin + Gentamicin</p> <p><u>Ampicillin</u> 50 mg/kg/dose IV NOW and q6h (Max 3g/dose) plus <u>Gentamicin</u> 7 mg/kg/dose IV NOW and q24h</p> <p>Known abnormality of GU tract: Meropenem + Gentamicin</p> <p>Meropenem 20 mg/kg/dose IV NOW and q8h plus <u>Gentamicin</u> 7 mg/kg/dose IV NOW and q24h</p>	
Skin/ Soft Tissue Suspected Source	<p>If Suspected Necrotizing Fasciitis: Clindamycin + Penicillin + Gentamicin</p> <p><u>Clindamycin</u> 5 mg/kg/dose IV NOW and q6h (q8h if < 1 week old) plus <u>Penicillin</u> 50 000 units/kg/dose IV NOW and q6h (q8h if < 1week old) plus <u>Gentamicin</u> 2.5 mg/kg/dose IV NOW and q8h (q12h if < 1 week old)</p> <p>If Suspected Staphylococcal Toxic Shock: Vancomycin + Cefotaxime <u>Vancomycin</u> 15 mg/kg IV NOW and q8h (q12h if < 1 week old) plus <u>Cefotaxime</u> 50 mg/kg/dose IV NOW and q8h (q12h if < 1 week old)</p>	<p>> 1 month old:</p> <p>If Suspected Necrotizing Fasciitis: Clindamycin + Penicillin + Gentamicin</p> <p><u>Clindamycin</u> 13 mg/kg/dose IV NOW and q8h (Max 900 mg/dose) plus <u>Penicillin</u> 65 000 units/kg/dose IV NOW and q4h (Max 4 million units/dose) plus <u>Gentamicin</u> 7 mg/kg/dose IV NOW and q24h</p> <p>If Suspected Staphylococcal Toxic Shock: Vancomycin + Cefotaxime</p> <p>Vancomycin 20 mg/kg IV X 1 dose NOW then 15 mg/kg/dose IV q6h plus <u>Cefotaxime</u> 50 mg/kg/dose IV NOW and q6h (Max 2 g/dose)</p>	
Immunocompromised/ Febrile Neutropenic Patient	<p>Please refer to Fever/Neutropenia Empiric Antibiotic Chart</p>		

If Group A Strep Necrotizing Fasciitis suspected:
Add Intravenous immunoglobulin (IVIg) 1g/kg/dose IV q24h X 2 doses
****ordered from blood bank**
**** Consult Infectious Disease prior to administration of IVIg**