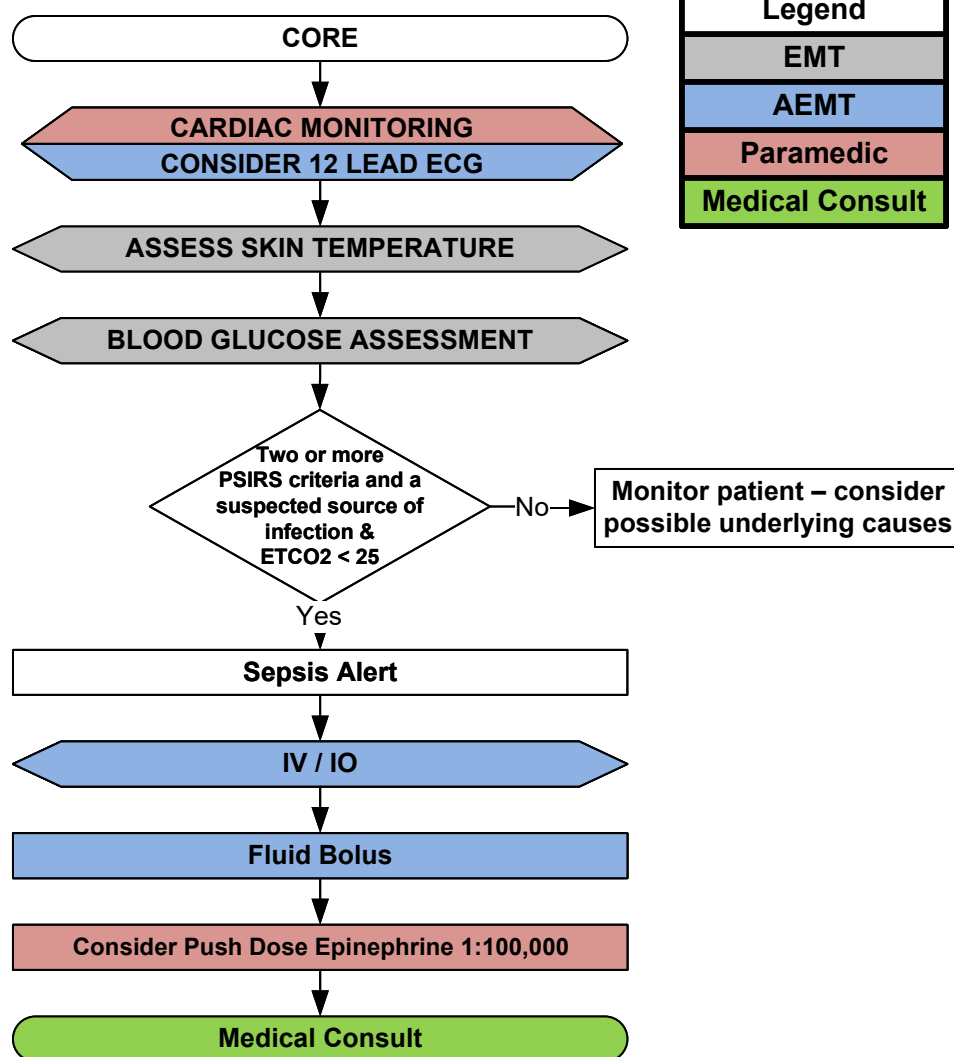


PEDIATRIC SEPSIS

History: ○ Age ○ Duration of Illness ○ Past medical history ○ Medications ○ Immunocompromised (transplant, HIV, diabetes, cancer) ○ Environmental exposure ○ Last acetaminophen or ibuprofen	Signs and Symptoms: ○ Warm ○ Flushed ○ Sweaty ○ Chills/Rigors Associated Symptoms ○ Myalgias, cough, chest pain, headache, dysuria, abdominal pain, mental status changes, rash	Differential: ○ Shock ○ Hypovolemic ○ Cardiogenic ○ Neurogenic ○ Anaphylactic ○ Fever ○ Cancer / Tumors / Lymphomas ○ Medication / drug reaction ○ Hyperthyroidism ○ Heat Stroke ○ Meningitis
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Pediatric Systemic Inflammatory Response Syndrome (PSIRS) Two or more of the following symptoms ○ Respirations: > 20 or mechanically ventilated ○ $\geq 100.4^{\circ}\text{F}$ ○ Altered Mental Status ○ Hyperglycemia (BS > 120mg/dl) AND <u>Heart Rate</u> 1 month – 1 year > 180 2 – 5 years > 140 6 – 12 years > 130 13 – 18 years > 120



Pearls: ○ Sepsis is a rapidly progressing, life threatening condition due to systemic infection. Sepsis must be recognized early and treated aggressively to prevent progression to shock and death. ○ Age appropriate SBP $\geq 70 + 2 \times \text{age}$. ○ In the presence of hypotension, administer 20 ml/kg bolus of normal saline to maximum of 60 ml/kg (unless contraindicated) prior to administration of push dose epinephrine.
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