CMHH ED Sepsis Order Set

The checkmarks are what is prechecked and recommended and then they would choose the bolus and abx as appropriate.



			Non-Titrate > 30 kg	20.10 mL, DO NOT THEATE, Max Dose: I microgram/kg/minute, Goal Parameter: Do Not Htrate N/A, Koute: IV, Total Volume: 30 mL ***SEPSIS***Final concentration: 128 micrograms/mL. Total Volume = 30 mL Dose Range: 0.01 - 1 microgram/kg/minute. ****CENTRAL LINE ONL
		/8.	***Normotensive (Poor Perfusion)***	ou so that concentration is a metagraphy and to the concentration of the concentration is a metagraphy and t
1			DOPamine PICU (1.6 mg/mL) Non-Titrate <5 kg	28.8 mL, DO NOT TITRATE, Max Dose: 20 microgram/kg/minute, Goal Parameter: Do Not Titrate N/A, Route IV, Total Volume: 30 mL ***SEPSIS***Final concentration: 1.6 mg/mL. Total Volume = 30 mL Dose Range: 2 - 20 micrograms/kg/minute. Send MedRequest 2 hours prior.
		İ	DOPamine PICU (3.2 mg/mL) Non-Titrate >/= 5 kg	27.6 mL, DO NOT TITRATE, Max Dose 20 microgram/kg/minute, Goal Parameter: Do NOT Titrate N/A, Route IV, Total Volume: 30 mL ***SPFSIS***Final concentration: 3.2 mg/mL. Total Volume = 30 mL Dose Range; 2 - 20 micrograms/kg/minute. Send MedRequest 2 hours prior tu.
Antimio	crobials			
	32 33	₫	For patients with septic shock, initiate broad-spectrum antibiotic th	nerapy
	3	- 49	Consider the use of early antibiotic therapy (within 1 hour of the di	agnosis of severe sepsis and/or septic shock)
		- 4	For patient < / = 1 month of age: (Ampicillin + Gentamicin) OR (A	Ampicillin + Cefotaxime)
		- 6	For patient > 1 month of age: (if stable give Ceftriaxone) OR (if un	stable give Vancomycin + Ceftriaxone)
		- 4	For patient with recent hospitalization within the past 30 days: Vano	comycin + Piperacillin-Tazobactam
		- 4	For patient with suspected toxic shock syndrome: ADD Clindamyci	n to one of the above regimens.
		- 49	For patient with suspected HSV infection: ADD Acyclovir to one of	the above regimen
	E	ð	ampicillin	50 mg/kg, Route: IVPB, ONCE, (For patients < 1 month old), Priority: STAT (For patients < 1 month old, Max Dose = 2 grams).
		· d	gentamicin	4 mg/kg, Route: IVPB, ONCE, Priority: STAT, Duration: 1 doses or times, ABX Indication: ED - Suspected Sepsis
	6	đ	cefotaxime	50 mg/kg. Route: IVPB, ONCE, Priority: STAT (For patients < 2 month old. Max Dose 2 grams)
	e	d d	cefTRIAXone	50 mg/kg, Route: IVPB, ONCE, Priority: STAT, Duration: 1 doses or times, ABX Indication: Bacteremia Max Dose = 2 Grams.
	•	o g	cefepime	50 mg/kg, Route: IVPB, ONCE, Priority: STAT, Duration: 1 doses or times, ABX Indication: Bacteremia Max Dose 2 grams.
	•	og 1	vancomycin	15 mg/kg, Route: IVPB, ONCE, Priority: STAT, Duration: 1 doses or times, ABX Indication: Bacteremia Max Dose = 1,000 mg
	_	_		
		ď	piperacillin-tazobactam	100 mg/kg, Route: IVPB, ONCE, Priority: STAT, Duration: 1 doses or times, ABX Indication: Bacteremia Max Dose = 4.5 grams (4 grams piperacillin). Dosed by piperacillin component.
	6	ď	clindamycin	10 mg/kg, Route: IVPB, ONCE, Priority: STAT, Duration: 1 doses or times, ABX Indication: Bacteremia Max Dose 900mg
	6		acyclovir	20 mg/kg, Route: IVPB, ONCE, (For patients < or = 3 months old), Priority: STAT, Start date: T;N (For patients < or = 3 months old)
		- 49	For suspected MSSA Sepsis, Nafcillin helps prevent persistent bacte	remia
	-	ď	nafcillin	50 mg/kg, Route: IVPB, ONCE, Priority: STAT (max dose 2 grams)
	6	ď	fluconazole	12 mg/kg, Route: NPB, ONCE, Priority: STAT, Duration: 1 doses or times, ABX Indication: Bacteremia Max Dose 800mg.
Cortico	osteroids			
	*	ď	hydrocortisone	2 mg/kg, Route: IV, ONCE, Priority: STAT Max dose 100mg.
Analge	esics	_		
		ď	acetaminophen	15 mg/kg, Route: PO, Drug form: LIQ, ONCE, (Max dose = 1,000 mg), Priority: STAT Max dose = 1,000 mg.
	***		ibuprofen	10 mg/kg, Route: PO, Drug form: SUSP, ONCE, (Max dose = 800 mg. Use with caution in patient < 6 months.), Priority: STAT Max dose = 800 mg. Use with caution in patient < 6 months. Do NOT use with renal dysfunction, transplant, active bleeding, or hemophilia. Giv
器 Hyr	poglycemi			
	鬱		Dextrose 10% in Water IV (Dextrose 10% in Water (bolus) IV)	5 ml/kg, Route: IV, ONCE, STAT, Duration: 1 doses or times For BG < 60 mg/dL. Max dose: 250mL. Infuse over 15 minutes.
	T	o.	Dextrose 50% in Water IV (Dextrose 50% in Water (bolus) IV)	1 ml/kg., Route: IV, ONCE, STAT, Duration: 1 doses or times For BG < 60 mg/dL. Max dose: 50mL. ***Must dilute for patients < 30 kg ONLY*** Dilute 1:1 with normal saline for a final concentration of D25W (m
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Respira	tory	<u>.</u>	-EDPedi Rapid Sequence Intubation MPP	
			Oxygen Therapy PRN	Keep O2 Sats above(Goal) 95%
	₽		Oxygen Therapy Pediatric	T;N, Stat, Respiratory Pathway: Yes
Patient		۷	Oxygen merapy rediding	i,is, Jus, respiratory ratimaly: 165
ratient	Care	(2)	Supply eOrder	Stat, Request for Central Line Set Up
		ď		T;N, ONCE, Stat
Non Ca	tegorized	ك	most very confette ner	1719 011000
7	gom.cu	177	CDM FDPedi Sepsis MPP	