

⑤ First-hour care duties ('SEPSIS SIX' – Ron Daniels, survivesepsis.org) for severe sepsis

Address simultaneously; target time: (1h from presentation)		Time when task done	Initials
1	100% oxygen	Give 15L/min via facemask with reservoir bag unless oxygen restriction necessary (e.g. in chronic CO ₂ retention aim for an SaO ₂ of 90 - 92%).	
2	IV fluids	Give a 500mL - 1000mL bolus of crystalloid (i.e. 0.9% saline or Hartmann's solution) over 30 - 60min. In patients with an initial systolic BP <90 or a lactate >4, give a larger (20mL/kg) bolus. Involve your middle grade doctor or consultant if further fluid resuscitation is required. Give additional boluses of 250-500mL if systolic BP falls to <90 again.	
3	Blood cultures	Take a minimum 2 sets, including at least one from a fresh venepuncture. Also send sputum culture / wound swabs etc. as appropriate.	
4	IV antibiotics	Ensure cultures have been taken first. Prescribe in full compliance with local antimicrobial guidelines; contact microbiologist if in doubt. Document target time ('to be given by'-time) in drug chart and inform nursing staff.	Prescribed by
			Given by
5	Lactate, Hb & other blood tests	Lactate requires blood gas analysis (venous sample is acceptable; ensure sample is sent on ice if delay to analysis anticipated). Also request FBC, U&E, LFT, clotting (INR and APTT) and glucose.	
		Repeat lactate after first-hour care duties have been completed.	
		Arrange transfusion if required (target Hb =7). <input type="checkbox"/> Not required, as Hb >7	Prescribed by Given by
6	Catheter	Dip CSU; send for C&S as appropriate. Monitor urine output hourly.	
Discuss further management plan with your middle grade doctor or consultant			

All first-hour goals carried out? Yes
 No (give details)

Print name _____ Signature _____ Role _____ Bleep _____ Date _____

⑥ Four-hour care duties ('Resuscitation Bundle') for septic shock

Initial tasks		Time when tasks done	Initials
Fluid resuscitation	Check that patient has received an initial 20mL/kg bolus of crystalloid.		
ITU assessment	Arrange urgent review by ITU team.		
CVP line	Insert urgently under US guidance and in an appropriate environment (e.g. resuscitation or procedure room / theatre). Seek help from your seniors or ITU team if you do not yet have the required competencies.		
HDU / ITU care	Ensure a bed of the appropriate care level is allocated to patient.		
Goals to be achieved by: (4h from presentation / breach time)		Time task initiated	Initials
Source control	Remove any infected urinary catheter or other indwelling device; arrange for abscess drainage / laparotomy etc. as needed.		
CVP 8-12mmHg	Give 500 - 1000mL IV bolus of crystalloid every 30min until goal achieved.		
MAP 65mmHg	Patients needs Noradrenaline if MAP <65 despite adequate CVP (unless ITU care is deemed inappropriate and reason has been recorded).		
ScvO₂ 70%	Take blood gas sample from CVP line at regular intervals to determine central venous oxygen saturation (ScvO ₂). Patient needs Dobutamine (in ITU) if goal not achieved despite Hb >7 and adequate CVP / MAP.		
Discuss further management plan with your middle grade doctor or consultant			

All 6-hour goals achieved? Yes
 No (give details)

Print name _____ Signature _____ Role _____ Bleep _____ Date _____