



Clinical Management Summary

EDcare : Handbook for Emergency Practice

Available from the Amazon Kindle Bookstore

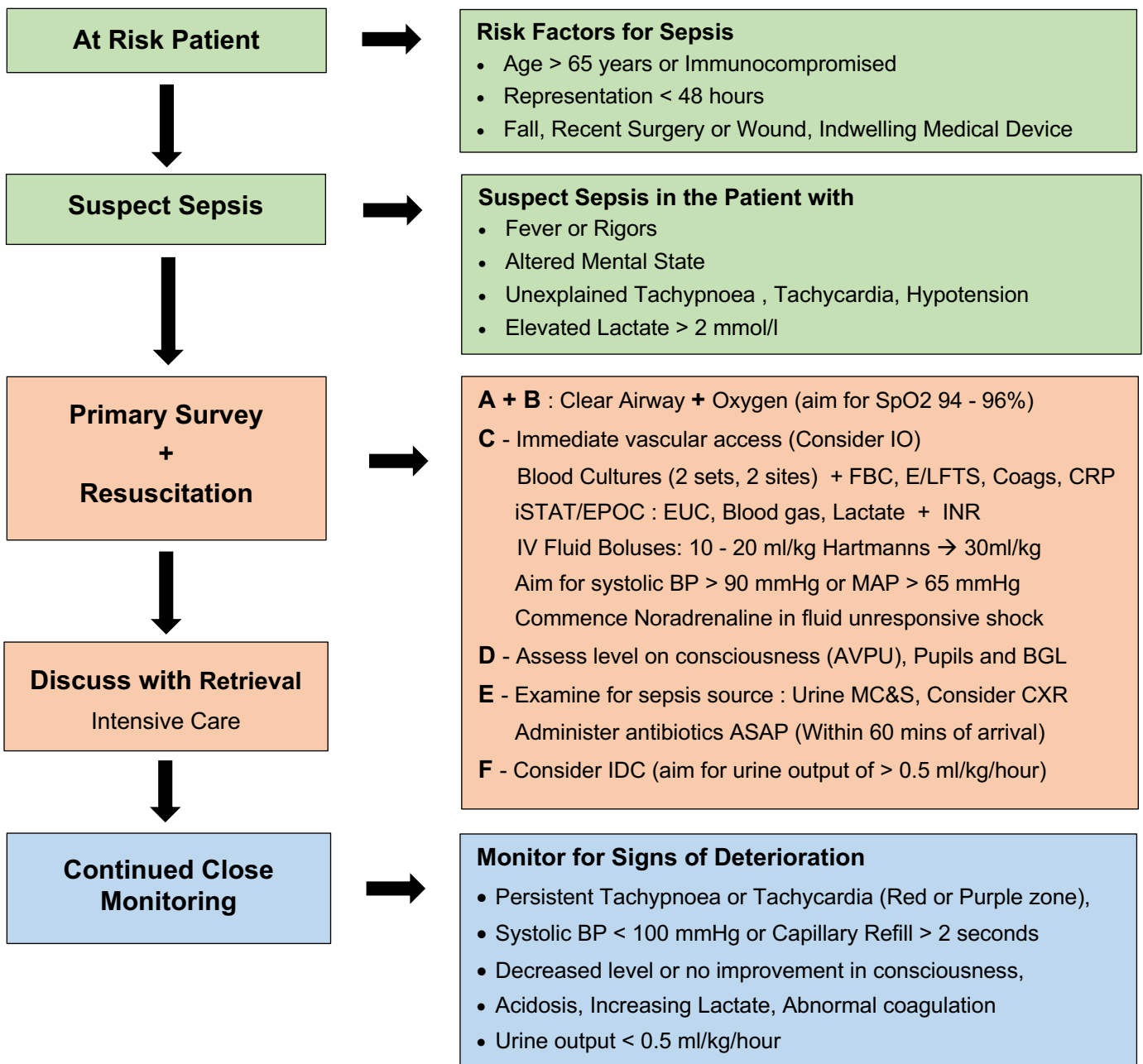
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Clinical Management Summary

Adult Sepsis : Recognition and Management



Empiric Antibiotics : Source of Sepsis Unclear

Flucloxacillin 2 gm (4 hourly) + IV Gentamicin 4 - 7 mg/kg
 + IV Vancomycin 25 - 30 mg/kg if at risk for MRSA infection
 + IV Ceftriaxone 2 gm (12 hourly) if at risk for N meningitidis

Replace Flucloxacillin with Cefazolin 2 gm (6 hourly) with non-severe penicillin hypersensitivity

Replace Flucloxacillin with Vancomycin 25 - 30 mg/kg in patients with severe penicillin hypersensitivity

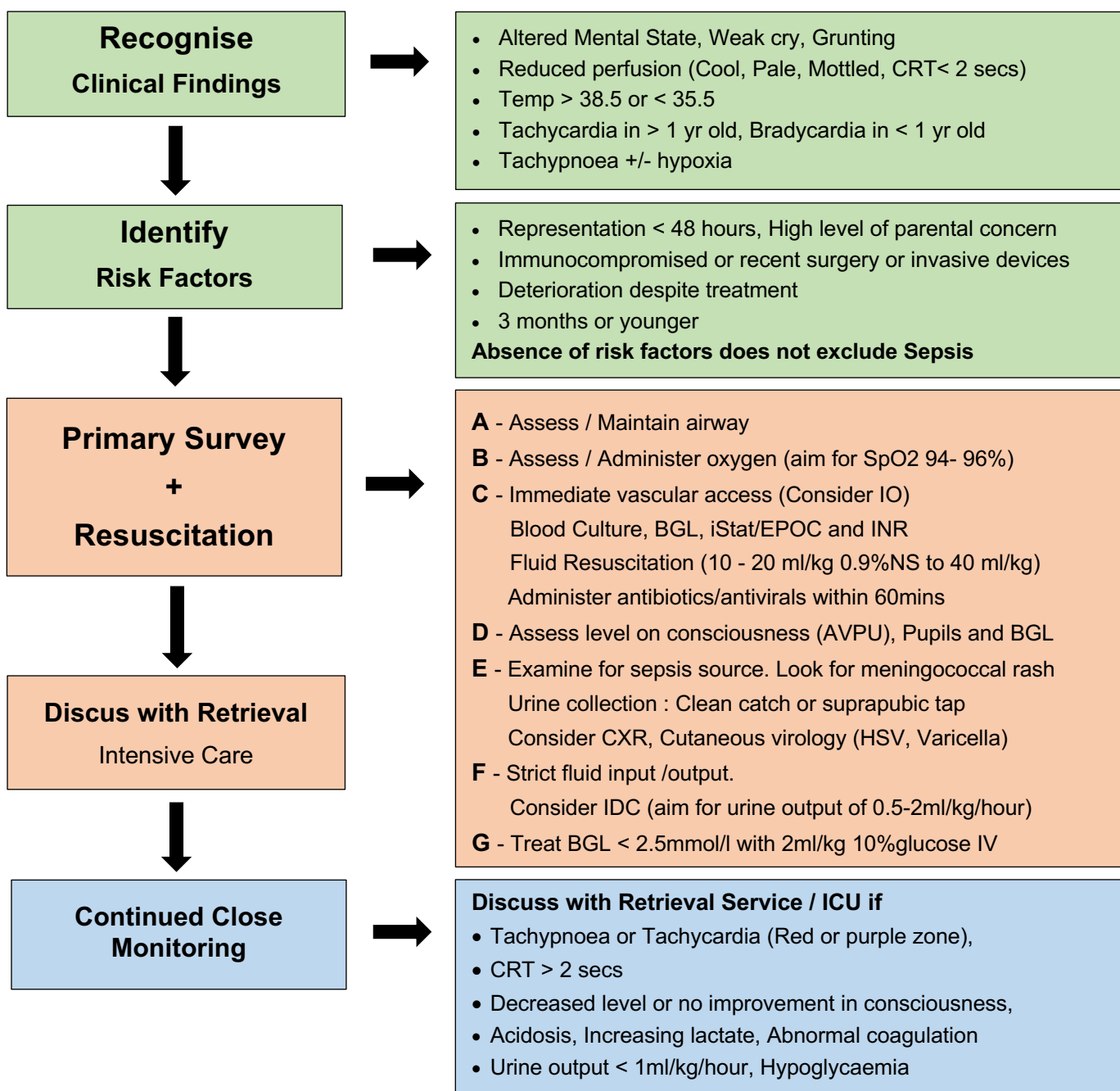
Source identified or suspected refer to "Clinical Management summary : Antibiotics in Serious infections"

Empiric Antibiotics : Immunocompromised / Febrile Neutropenia

Piperacillin + Tazobactam 4 +0.5 gm (6 hourly). Add IV Vancomycin 25 - 30 mg/kg if patient has sepsis
 Alternatives to Piperacillin + Tazobactam are Cefepime 2g (8 hourly) or Ceftazadime 2gm (8 hourly)

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Paediatric Sepsis : Diagnosis / Management



Empiric Antibiotics : Source of Sepsis Unclear : Use ideal body weight to calculate dose

Age < 2 months (No Penicillin or Cephalosporin allergy) : Meningitis not excluded

- IV Benzylpenicillin 60mg/kg 12 hourly
 + Cefotaxime 50mg/kg IV (Give 12 hrly if < 7 days old, 6 – 8 hrly 7 – 28 days old, 6 hrly for > 28 days old)
- Add Acyclovir 20mg/kg IV 8 hrly if HSV suspected

Age > 2 months (No Penicillin or Cephalosporin allergy) : Meningitis not excluded

- IV Gentamicin (7.5mg/kg up to 320mg under 10 years old, 7mg/kg up to 560 mg over 10 years old)
 + Ceftriaxone 50mg/kg IV (up to 2g) 12 hrly + Vancomycin 30mg/kg (up to 1.5g) 12hrly
- Add Acyclovir (20mg/kg if < 5years old, 15mg/kg if > 5years old) IV 6 hrly if HSV suspected

If No IV access : Give IM Ceftriaxone 100 mg/kg (max 4gram) daily. Can be used in child < 2 months old

Consult Infectious Diseases Physician URGENTLY if patient has penicillin/cephalosporin allergy or already/recently on antibiotics or had known antimicrobial resistance.