

Sepsis

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| [critical care](#), [emergency](#), [infectious diseases](#), [intensive care](#), [ontheponds](#)

James chats with David Anderson, Advanced [ICU Trainee](#) about a patient who has a high temperature and whose blood pressure is dropping alarmingly. What is the approach to sepsis on the wards?

Editor: James Edwards

Interviewee: David Anderson

About David Anderson

David is an intensive care medicine fellow at [RPA Hospital](#). His interests include [end of life care](#), medical education and [pre-hospital care](#). In addition to intensive care medicine he has spent time training in anaesthesia, retrieval medicine and [palliative medicine](#) and before qualifying as a doctor he worked as a paramedic.

Sepsis on the wards

with Dr David Anderson (ICU Advanced Trainee at Royal Prince Alfred Hospital, June 2013)

Case

You are called to see a patient who has a fever of 38.9 and their blood pressure is 85/40.

1. On the phone

- Does the patient look unwell, vital signs, do they need a clinical emergency call?
- **Priority**
 - High
- **Corridor thoughts**
 - Source of fever, type of shock (distributive, hypovolaemic, obstructive, cardiac)

2. On arrival

- Go straight to the bed, general observation, feels the patients feet (warm or cold), infusions, look for source of infection
- Review the notes - are they immunosuppressed, MRSA, post operative?

3. Investigations

- BC, VBG and lactate, FBC, UEC, CXR

4. Management

- Fluid resuscitation, broad spectrum antibiotics unless source identified, source control

5. When to call for help

- Registrar review, if worried call for senior help and if so stay at the bedside to look for response to your treatment and provide a bedside handover, consider ICU review if no or temporary response to fluids

6. Handover

- Document, inform nursing and your medical staff of your worries, may need further observation with instructions on when to call, make sure the treating team is aware

Take home messages

- “The feet are the window to the soul in intensive care” Dr David Anderson

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- [Identifying the sick patient](#)
- [Penicillins](#)
- [Stress Steroids](#)
- [Febrile returned traveller](#)

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