Septic Shock

Diagnosis

- Diagnose sepsis (SIRS, SOFA, etc)
- Cultures & Empiric antibiotics
- Hypotension --> give fluid bolus (30 mL/Kg)
 - if no contraindications

Fluids

- Use lactated ringer as default choice (not normal saline). However, normal saline or bicarb maybe appropriate for some patient.
- Boluses are better than drips. Be decisive!
- Goal is to increase preload → increase cardiac output → improve tissue perfusion. Physiology works via starling curve.
- Once patient becomes unresponsive to additional boluses, use vasoactive agents ("pressors").