Objectives:

To critically appraise a practice guideline for critically ill patients, with a focus on one embedded intervention considered for patients with sepsis and septic shock.

Assignment:

Read the first 8 pages of the attached guideline by Rhodes et al to orient you to the methods and the scope of this guideline. Consider the scenario below and complete the worksheet.

Clinical Scenario:

You are an intensive care physician, in the emergency room one morning doing several consults from the prior evening on call. The resident describes a 54 year old patient who had been admitted to the holding area in the department for over 12 hours. Her diagnosis was sepsis due to a recurrent E. coli urinary track infection. She initially presented alert but confused, protecting her airway, with a temperature of 39 degrees Celsius, blood pressure of 67/55 mmHg and heart rate of 100 beats per minute. After 4 liters of crystalloid resuscitation overnight, the resident started low dose norepinephrine infusion through a central venous catheter. The patient’s blood pressure had increased to 100/60 mmHg, her heart rate decreased to 90 beats per minute and she was now afebrile. Blood work was normal except for a persistently elevated white blood cell count of 15 x 10^9/L, an increased serum creatinine level of 110 μmol/L and lactate concentration of 3.7 mmol/L, which had previously been within normal limits. Commenting on how this patient fits the new Sepsis-3 definitions of septic shock demonstrating circulatory and cellular/metabolic dysfunction, the resident asks you if you would have started intravenous corticosteroids as she had done the night before.

Enclosed Materials:


3. Worksheet for the evaluation of an article on practice guidelines.