

ฝ่ายบริการพยาบาล โรงพยาบาลส่งขลางครินทร์

แบบฟอร์ม tracer severe sepsis/septic shock

HN.....ชื่อ.....สกุล.....อายุ.....ปี

ER    OPD.....  หอผู้ป่วย.....

Time DX. Severe sepsis/septic shock .....

BP.....mmHg MAP.....mmHg HR.....bpm RR..... bpm RR.....bpm

**Clinical Data** Severe sepsis/septic shock

SIRS	Organ failure
..... Temp < 36 / > 38 °C	.....Lactate >2
..... HR > 90 bpm	.....Urine <0.5ml/kg/hr
..... Tachypnea	.....ALI PF<250 –pneumonia
..... leukocytosis < 4000/> 12000 bandemia >10%	.....ALI PF<200+pneumonia .....Cr.>2.0 .....Bili > 2 .....Plt < 100,000 .....PT>1.5

Start resuscitation at time.....type of fluid..... --> .....cc

Complete resuscitation at time.....total volume .....cc

Start vasoactive agent at time.....levophed / dopamine / adrenaline

BP.....mmHg MAP.....mmHg HR.....bpm RR..... bpm RR.....bpm

Antibiotic time .....Drug .....R/O infection.....

**Send to ICU at time** .....