

Shock & Volume assessment in sepsis

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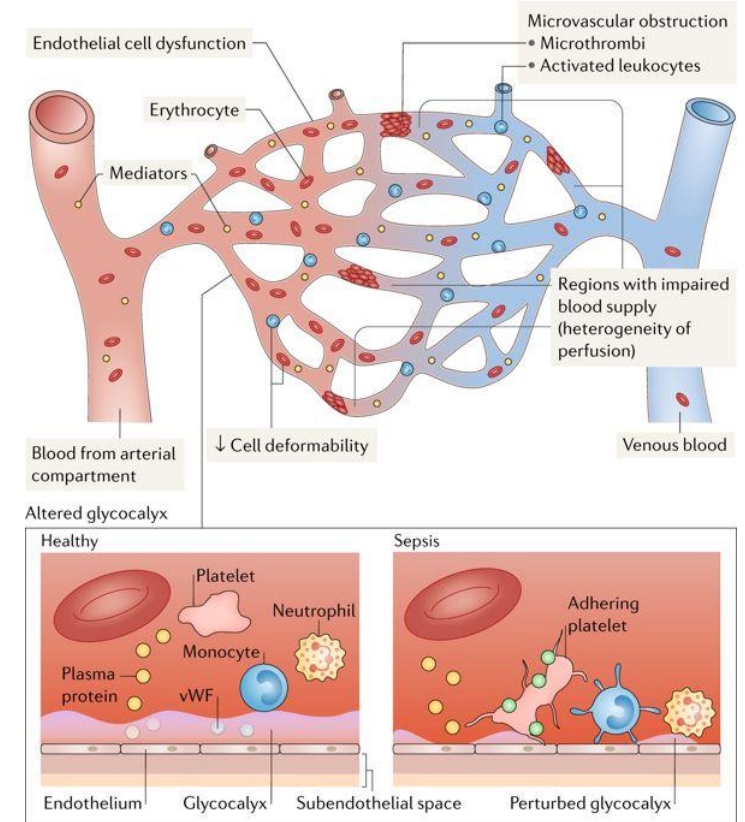
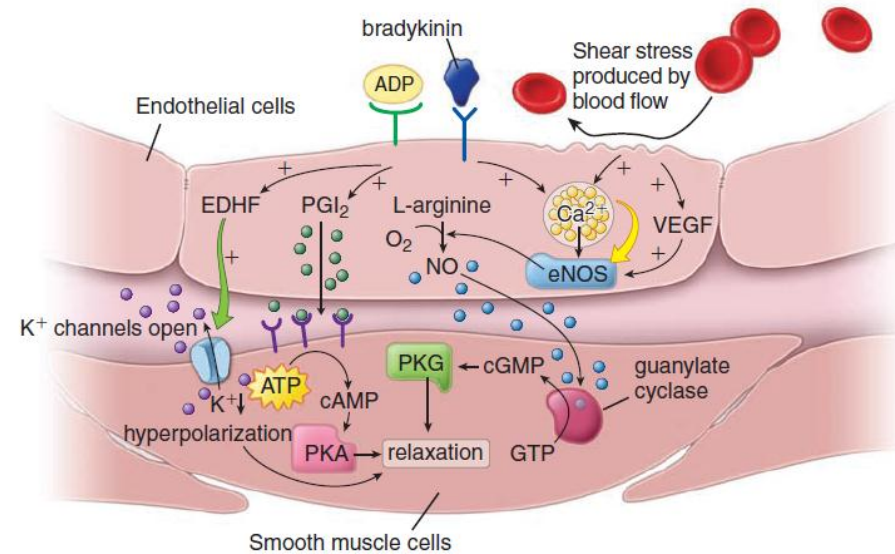
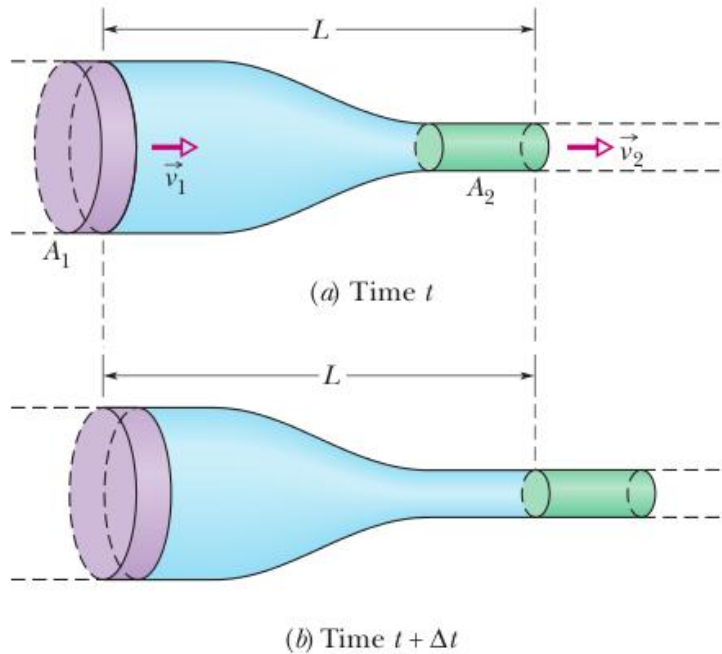
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It's all about fluids and vessels



The very well told story



Have a plan

- Early recognition
- Source control
- Early and adequate antibiotic therapy
- Early hemodynamic resuscitation
- Continues support
- Proper ventilator management



Set your goals

- Improve tissue perfusion
 - MAP >65 or >75 or >85mmHg
 - Organs functions
- Reduce metabolic demands

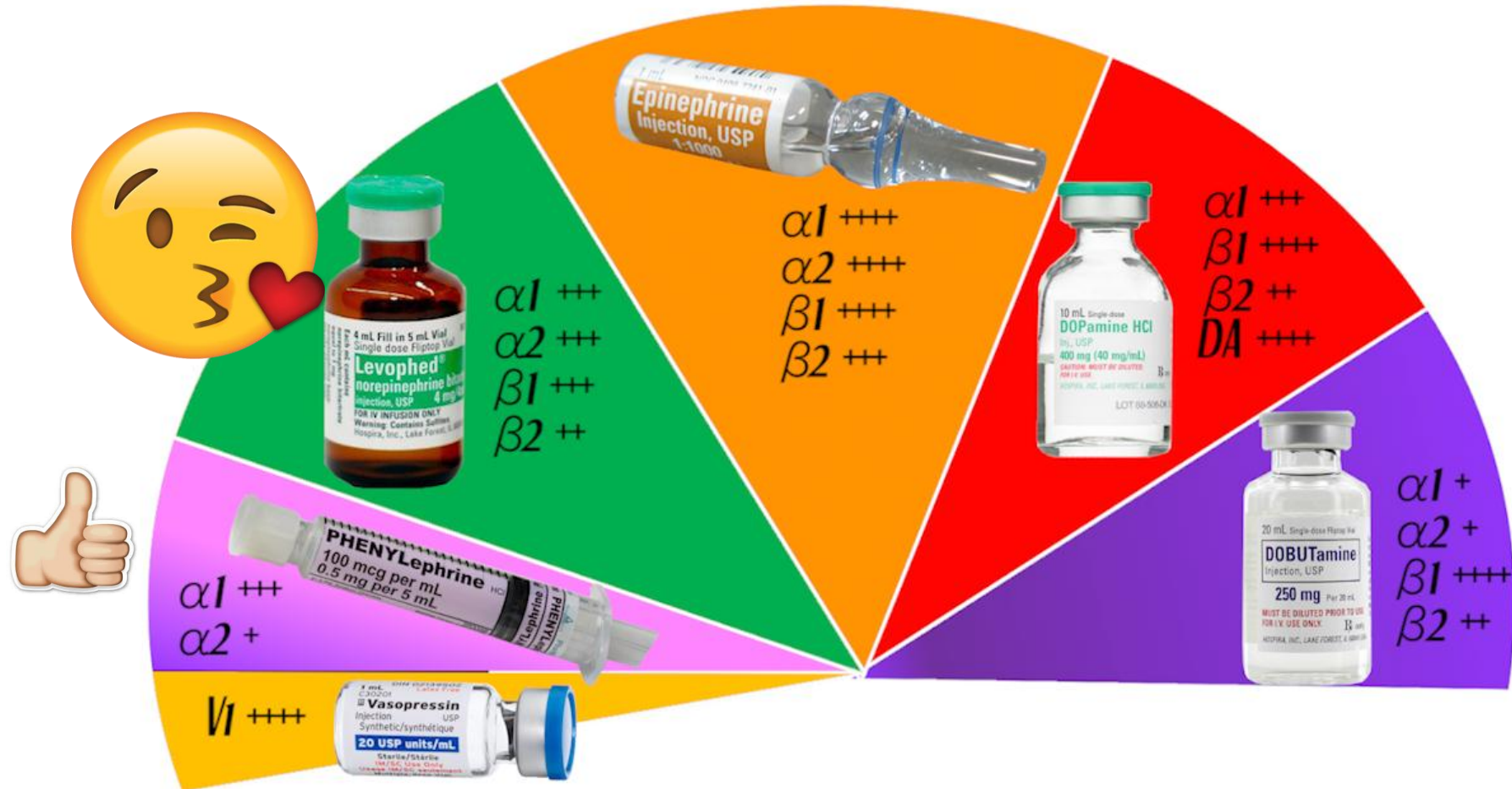


Fluids

- 30 ml/kg ,really?
- Crystalloid
- Colloids
- Blood products



vasopressors



Steroids, not everyone

- CIRCI : Critical illness-related corticosteroid insufficiency
- Absolute vs Relative
- Vasopressor refractory hypotension
- Hydrocortisone rather than Dexamethasone

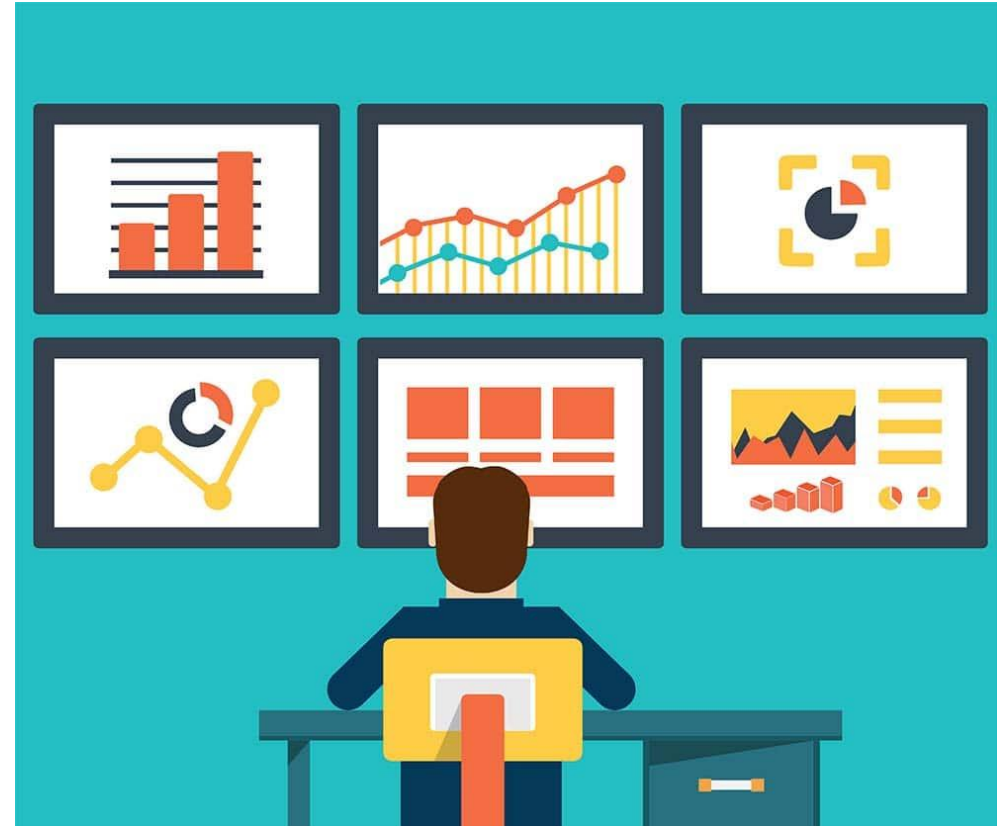
Respiratory support

- Metabolic demands
- Intrathoracic pressure and preload
- Crash post intubation



Monitoring tools

- Patient
- CXR
- RUSH (Pump, tank & pipe)
- CVP
- Lactate
- Urine output (MAP – IAP)
- CVO₂
- Pv-aCO₂/Pa-vO₂



Things to remember

- Identify early and fix aggressively
- Set your goals
- It is all about tissue perfusion (crystalloids and norepinephrine)
- Ventilate early but be careful
- Steroids for resistant hypotension
- Monitor very well

Thank you

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