Surviving Sepsis Campaign®

SURVIVING SEPSIS CAMPAIGN INTERNATIONAL GUIDELINES FOR THE MANAGEMENT OF SEPTIC SHOCK AND SEPSIS-ASSOCIATED ORGAN DYSFUNCTION IN CHILDREN

ENDOCRINE & METABOLIC RECOMMENDATIONS TABLE

RECOMMENDATION #46	STRENGTH & QUALITY OF EVIDENCE
We ***recommend against*** insulin therapy to maintain a blood glucose target at or below 140mg/dL (7.8 mmol/L).	• Strong • Moderate-Quality of Evidence

RECOMMENDATION #47	STRENGTH & QUALITY OF EVIDENCE
We were ***unable to issue a recommendation*** regarding what blood glucose range to target for children with septic shock or other sepsis-associated organ dysfunction. However, ***in our practice***, there was consensus to target blood glucose levels below 180mg/dL (10 mmol/L) but there was not consensus about the lower limit of the target range.	Insufficient In Our Practice

RECOMMENDATION #48	STRENGTH & QUALITY OF EVIDENCE
We were ***unable to issue a recommendation*** as to whether to target normal blood calcium levels in children with septic shock or sepsis-associated organ dysfunction. However, ***in our practice***, we often target normal calcium levels for children with septic shock requiring vasoactive infusion support.	Insufficient In Our Practice

RECOMMENDATION #49	STRENGTH & QUALITY OF EVIDENCE
We ***suggest against*** the routine use of levothyroxine in children with septic shock and other sepsis-associated organ dysfunction in a sick euthyroid state.	• Weak • Low-Quality of Evidence

RECOMMENDATION #50	STRENGTH & QUALITY OF EVIDENCE
We ***suggest*** either antipyretic therapy or a permissive approach to fever in children with septic shock or other sepsis-associated organ dysfunction.	• Weak • Moderate-Quality of Evidence