

Table 1 : Definition of septic shock

Disease	Definition
Sepsis-3 definition for adult septic shock^[1]	<p>Septic shock is defined as a sepsis denoted by an increase of 2 points or more in the Sequential Organ Failure Assessment (SOFA) score.</p> <p>Plus</p> <p>Persistent hypotension (despite adequate volume resuscitation) requiring vasopressors to maintain mean arterial blood pressure ≥ 65 mmHg,</p> <p>Plus</p> <p>Serum lactate ≥ 2 mmol/l</p>
International pediatric sepsis consensus conference for pediatric septic shock^[18]	<p>Septic shock is defined as the presence of a systemic inflammatory response syndrome (SIRS), an infection and cardiovascular dysfunction as follows;</p> <p>SIRS</p> <p>The presence of at least two of the following four criteria, one of which must be abnormal temperature or leucocyte count</p> <ul style="list-style-type: none"> -Core temperature above 38.5°C or less than 36°C -Tachycardia defined as a mean heart rate $> 2SD$ above normal for age in the absence of external stimulus, chronic drugs or painful stimuli; or otherwise unexplained persistent elevation over a 0.5- to 4-hr time period OR for children < 1 year old: bradycardia, defined as a mean heart rate < 10th percentile for age in the absence of external vagal stimulus, β-blockers drugs, or congenital heart disease; or otherwise unexplained persistent depression per 0.5/h time period. -Mean respiratory rate $> 2SD$ above normal for age or mechanical ventilation for an acute process not related to underlying neuromuscular disease or the receipt of general anesthesia -Leucocytes count elevated or depressed for age (not secondary to chemotherapy-induced leucopenia) or $> 10\%$ immature neutrophils <p>Infection</p> <p>A suspected or proven (by positive culture, tissue stain, or polymerase chain reaction test) infection caused by any pathogen OR a clinical syndrome associated with a high probability of infection. Evidence of infection includes positive findings on clinical examination, imaging, or laboratory test (e.g., white blood cells in a normally sterile body fluid, perforated viscus, chest radiograph consistent with pneumonia, petechial or purpuric rash, or purpura fulminans)</p> <p>Cardiovascular organ dysfunction</p> <p>Despite administration of isotonic intravenous fluid bolus ≥ 40ml/kg in 1 h</p> <p>Decrease blood pressure < 5th percentile for age or systolic blood pressure $< 2SD$ below normal for age OR Need for vasoactive drug to maintain blood pressure in normal range (dopamine > 5ug/kg/min or dobutamine, epinephrine, or noradrenaline at any dose) OR two of the following</p> <ul style="list-style-type: none"> -Unexplained metabolic acidosis: base deficit > 5.0 mEq/L -Increased arterial lactate > 2 times upper limit of normal -Oliguria: urine output < 0.5 ml/kg/h -Prolonged capillary refill: > 5 seconds -Core to peripheral temperature gap $> 3^{\circ}C$

¹Singer M, Deutschman CS, Seymour CV, et al. The third International consensus definitions for sepsis and septic shock (Sepsis-3). JAMA 2016;315:801-10.

¹⁸Goldstein B, Giroir B, Randolph A, and the Members of the International Consensus Conference on Pediatric Sepsis. International pediatric sepsis consensus conference: Definitions for sepsis and organ dysfunction in pediatrics. Pediatr Crit Care Med 2005;6:2-8.