

# Clinical Pearls: Critical Care Medicine

- ARDS is defined by acute onset (within 1 week) respiratory failure with hypoxemia featuring a P:F  $\leq$ 300 and bilateral opacities on chest radiograph not due to cardiogenic edema.
  - Goals for mechanical ventilation should include ensuring low tidal volumes (4-8cc/kg IBW) and maintaining plateau pressures < 30mmHg .
- The pillars of sepsis treatment are early antibiotic administration, fluid resuscitation with 30cc/kg body weight (with first 3 hours), and ensuring adequate source control (i.e. removal or drainage of infected material).
  - For patients who develop septic shock (refractory hypotension despite the aforementioned), norepinephrine infusion is the optimal therapy to increase blood pressures to a target MAP of 65.
- Anaphylaxis is a life-threatening allergic reaction that presents relatively rapidly following allergen exposure (minutes to hours). Prompt recognition and treatment with IM epinephrine is essential.
  - Multiple systems can be involved in anaphylaxis including skin, mucosal tissue, respiratory and gastrointestinal tracts and the condition can result in rapid decline in blood pressure.
  - Treatment of persistent shock due to anaphylaxis is accomplished with epinephrine infusion.