Sepsis First-Hour Checklist

Recognition, cultures, antibiotics and perfusion

Emergency & Resuscitation | PHYSICIAN REFERENCE

Recognize

- Suspected infection plus organ dysfunction requires urgent assessment; do not rely on one score alone.

Early actions

- Measure lactate when indicated; obtain cultures before antibiotics if this does not meaningfully delay therapy.
- Give appropriate empiric antimicrobials promptly in septic shock/high-likelihood sepsis; tailor to source, resistance risk, organ function.

Perfusion

- Use IV crystalloid for hypoperfusion with frequent reassessment; norepinephrine is usual first-line vasopressor in septic shock.

Clinical safety note

Use this as a memory aid, not a prescription. Verify current guidelines, local protocols, contraindications, renal/hepatic dosing, pregnancy status, interactions and patient-specific factors before treatment.