



Figure 2. Algorithm for time sensitive, goal-directed stepwise management of hemodynamic support in infants and children. Reproduced from Brierley J, Carcillo J, Choong K, et al: Clinical practice parameters for hemodynamic support of pediatric and neonatal septic shock: 2007 update from the American College of Critical Care Medicine. *Crit Care Med* 2009; 37:666–688.

is unclear, but it may be considered in refractory toxic shock syndrome (520–527).

3. We recommend early and aggressive infection source control (grade 1D).

Rationale. Débridement and source control is paramount in severe sepsis and septic shock. Conditions requiring débridement or drainage include necrotizing pneumonia, necrotizing fasciitis, gangrenous myonecrosis, empyema, and abscesses. Perforated