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EGS P33 Audit of Serial Lactate Measurement in Septic Patients Admitted in Acute General Surgery Department
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Background: Timely and effective resuscitation is crucial for the stabilisation of sepsis-induced tissue hypo-perfusion. Elevated serum lactate is associated with increase mortality and longer hospital stays. A reduction in lactate levels towards normal during acute resuscitation is therefore associated with improved clinical outcomes. Surviving sepsis campaign 2021 therefore recommends using lactate as quantitative measure of resuscitation in patient with sepsis and has advised serum lactate levels to be measured within three hours of admission and repeated within 4-6 hours if \( \geq 2 \) mmol. This audit aims to evaluate efficiency of our surgical department in serial lactate measurement in septic patients.

Methods: This was a single centre retrospective audit of patients admitted to general surgical ward between October 2022 to January 2023 with sepsis and Lactate \( \geq 2 \) mmol. Patients were identified electronic handover database. Data was collected for demographics, initial time and value of lactate, NEWS score and time and value of subsequent lactate measurements. All patients with initial Lactate \( \geq 2 \) mmol were included in the study, although our laboratory upper limit of normal Lactate is 2.4mmol. This audit was registered with Clinical Quality Project ID: 14730.

Results: Sixty-nine patients were included; median age was 70 years (IQR 58-82) and 35 (50.7%) were female. Median Charlson Comorbidity Index was 4 (IQR 2-6). 56 (81.2%) patients were admitted to acute surgical ward and 13 (18.8%) to the ICU/HDU. 51 (73.9%) patients had first lactate level was between 2-4mmol and 18 (26.1%) had \( \geq 4 \). 16 (28.6%) patients admitted to surgical ward with high lactate was repeated and 9 (56%) of these were \( \geq 8 \) hours. In HDU/ICU 12 (92%) patients had their lactate repeated in targeted time.

Conclusions: This audit highlights the standards not being achieved. This is likely due to unawareness of the recommendations as well as time pressure. Awareness of the latest guidelines is paramount in improving the adherence to the guidelines.
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