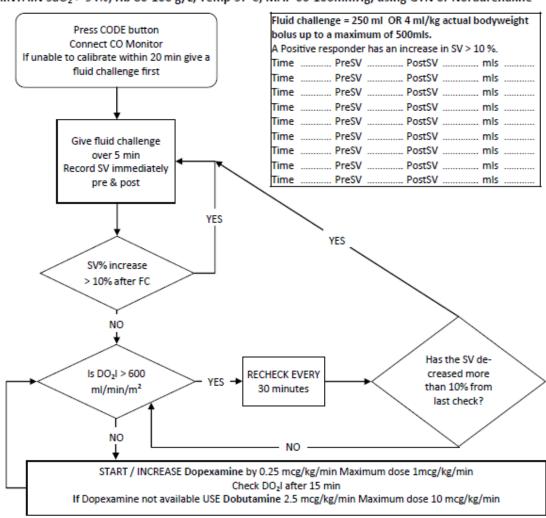
Goal Directed therapy flow diagram for post – operative high risk surgical patients (Sept 2014)

Name	Hosp. No	Date
Agecm. Weight	kg. Operation	
GDT Start timeFinish time	Discharge dateGDT Nur	se

MAINTAIN SaO₂ > 94%, Hb 80-100 g/L, Temp 37°C, MAP 60-100mmHg, using GTN or Noradrenaline



Time	If DO ₂ I < 600 ml/min/m ² SEE BOX A BEFORE STARTING DOPEX- AMINE / DOBUTAMINE			DO ₂ I ml/ min/m ²	If DO ₂ I > 600 ml/min/m ² SEE BOX B		
	A	SaO₂%	Hb g/L	•	В	ScvO ₂ %	Lactate mmol/ L
Base- line							
1 hour							
2 hours							
3 hours							
4 hours							
5 hours							
6 hours							
7 hours							
8 hours							

DOPEXAMINE / DOBUTAMINE check BOX C			
Baseline HR (after fluid optimisation) Start Time			
Maximum dose	mcg/kg/min		
DECREASE / STOP if 1. HR > 120 bpm			
myocardial ischaemia dev	elops		
TOTAL VOLUMES OF:			
Hartmanns	mls		
Blood	mls		
Platelets	mls		
FFP	mls		
Maximum Noradrenaline do	osemcg/kg/min		
Maximum GTN dose	mg/hr		
Time 0 Hb	g/L		
8 hours Hb	a/I		

Review date: 2017

BOX A	Checklist A Guide
CHECKLIST A	
SaO2 > 94%	In patients with DO₂I < 600 ml/min/m² after fluid optimisation, CHECKLIST A criteria (Sa02 >94% and/or Hb 80-100 g/L) must be fulfilled before starting Dopexamine or Dobutamine
Hb 80-100 g/L	If you can't achieve these values CALL A DOCTOR
BOX B	Checklist B Guide
CHECKLIST B	If a patient reaches a DO ₂ I > 600 ml/min/m² see CHECKLIST B
Scv02 > 65%	Patients with central line: if $DO_2I > 600 \mathrm{ml/min/m^2}$ take venous sample and CHECK-LIST B criteria (ScvO2 > 65% and/or Lactate < 2 mmols/L) are not fulfilled CALL A DOCTOR
Lactate < 2 mmol/L	Patients with no central line: if DO₂I > 600 ml/min/m² and CHECKLIST B criteria (lactate < 2mmols/L) are not fulfilled CALL A DOCTOR
BOX C	DOPEXAMINE / DOBUTAMINE EXCLUSION CRITERIA

Unstable or severe angina (CCS class III or IV, see BOX D)

Recent MI (less than a month)

Significant arrhythmias: atrial fibrillation if with uncontrolled ventricular rate greater than 90 bpm at rest, new ventricular tachycardia

PATIENTS WITH SEVERE VALVULAR DISEASE - DISCUSS WITH CONSULTANT

Severe aortic stenosis (mean pressure gradient greater than 40 mmHg, aortic valve area less than 1.0 cm, or symptomatic)

Symptomatic mitral stenosis (progressive dyspnea on exertion, exertional presyncope, or HF)

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BOX D		Patient Cumptoms		
	CCS Grading of Angina	Patient Symptoms		
	Class I			
	DOPEXAMINE / DOBUTAMINE	Ordinary physical activity does not cause angina, such as walking, climbing stairs. Angina [occurs] with strenuous, rapid, or prolonged exertion at work or recreation.		
	NOT CONTRAINDICATED			
	Class II	Slight limitation with ordinary activity. Angina occurs on walking or climbing stairs rapidly, walking		
	DOPEXAMINE / DOBUTAMINE	uphill, walking or stair climbing after meals, or in cold, or in wind, or under emotional stress, or only during the few hours after awakening. Walking more than two blocks on level ground and climbing		
	NOT CONTRAINDICATED	more than one flight of ordinary stairs at a normal pace and in normal condition.		
	Class III			
	DOPEXAMINE / DOBUTAMINE	Marked limitations of ordinary physical activity. Angina occurs on walking one to two blocks on level		
	CONTRAINDICATED	ground and climbing one flight of stairs in normal conditions and at a normal pace.		
	Class IV			
	DOPEXAMINE / DOBUTAMINE	Inability to carry on any physical activity without discomfort – angina symptoms may be present at rest.		
	CONTRAINDICATED			

Please place this form in the collection box in GICU

Document approved by all consultants on 24/09/2014. Version 1.03 24/09/2014

Review date: 2017