EVIS: Clinical information Sheet for Participant Medical Records				
Study:	EVIS: Early Vasopressors in Sepsis			
EudraCT No:	2021-006886-39			
EVIS Participant No.:				
	en randomised to the D CARE arm of the EVIS study.	Insert Patient ID/Addressograph label		
Study treatment duration: 48 hours (from time of randomisation)				
Participant randomised on: (insert date) at (insert time hh:mm)				
IMPORTANT: Contact the Research Team if you have any questions or need advice. Further information can be found on the study website XXXXXXXXX				

Key information for USUAL CARE arm

Participants should receive standard care as per UK national guidelines on sepsis. All other care should be as per local protocol.

Initial treatment (3 hours post-randomisation):

- Administer up to 30ml/kg balanced crystalloid intravenous fluid for fluid resuscitation by peripheral venous cannula.
- Titrate intravenous fluid administration to target MAP of 65 mmHg.

It is anticipated most participants will receive up to approximately 30ml/kg in the first 3 hours using 250-1000ml rapid infusion (bolus) of balanced crystalloid for fluid resuscitation.

Ongoing treatment (up to 45 hours post-randomisation)

- Further crystalloid boluses for resuscitation is at discretion of clinical team.
- Titrate intravenous fluid administration to target MAP of 65 mmHg.
- Rescue vasopressor: If the treating clinician wishes to give a rescue vasopressor infusion, this should be done via a **CENTRAL** route only after initial resuscitation.

Other information:

Any of the following may be used as per local practice:

- Compound sodium lactate (Ringers Lactate or Hartmanns solution)
- Plasma-lyte 148

Any brand stocked by the hospital can be used.

Research Team Contact Details				
Research Nurse:	Name: Telephone: E-mail:			
Principal Investigator:	Name: Telephone: E-mail:			
Location of local study information:				
Completed and inserted into medical notes by:	(insert name & designation)	on	(insert date)	