**SUPPLEMENT**

**Table S1. Comparison of Sepsis-1 and Sepsis-3 diagnostic criteria**

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| **Sepsis-1 criteria for severe sepsis and septic shock** | | **Sepsis-3 criteria for sepsis and septic shock** | |
| **Systemic inflammatory response syndrome (SIRS)** | **Temperature**  >38°C or <36°C | **qSOFA** | **Systolic blood pressure**  ≤ 100mmHg |
| **Heart rate**  >90/min | **Altered mental status** |
| **Respiratory rate**  >20/min or PaCO2 <32 mmHg | **Respiratory rate**  ≥ 22/min |
| **White blood cell count**  >12 Gpt/L; <4 Gpt/L;  >10% immature (band) forms |  |  |
| **Severe sepsis**  **organ dysfunction** | **Hypoxemia**  PaO2 < 75 mmHg) or PaO2/FiO2 < 33 kPa (250 mmHg) | **Sepsis**  **SOFA score** | **Respiration PaO2/FiO2**  < 400 mmHg  < 300 mmHg  < 200 mmHg1  < 100 mmHg1 |
| **Central nervous system**  altered mental status | **Central nervous system (GCS2)**  14-13  12-10  9-6  5-3 |
| **Renal**  urine output < 0,5 ml per kg body weight per hour for at least 2h or a doubling of the serum creatinine | **Renal** Creatinine mg/dL (mmol/L) or urine output  1.2-1.9 (110-170)  2.0-3.4 (171-299)  3.5-4.9 (300-440) or <500ml/day  ≥5.0 (>440) or <200ml/day |
|  | **Liver** Bilirubin mg/dL (mmol/L)  1.2-1.9 (20-32)  2.0-5.9 (33-101)  6.0-11.9 (102-204)  >12 (>204) |
| **Hematologic**  relative (30%/24h) or absolute thrombocytopenia (≤100.000/mm3) | **Coagulation** platelets x103/mm3  <150  <100  <50  <20 |
| **Metabolic acidosis**  base excess ≤ -5 mmol/l or lactate > 1,5× higher than the local reference range | **Cardiovascular Hypotension**  Mean arterial pressure <70 mmHg  Dobutamine (any dose)  Norepinephrine < 0.1 µg/kg/min  Norepinephrine > 0.1 µg/kg/min |
| **Septic shock** | Severe Sepsis and sepsis induced hypotension despite adequate fluid resuscitation and  a systolic blood pressure ≤90 mmHg or a mean arterial blood pressure ≤65 mmHg for at least 1 hour or a vasopressor therapy to achieve a systolic blood pressure ≥90 mmHg or a mean arterial blood pressure of 65 mmHg. | **Septic shock** | Sepsis and vasopressor therapy needed to elevate MAP ≥65 mmHg and lactate > 2 mmol/L (18 mg/dl) despite adequate fluid resuscitation |

1 with respiratory support; 2 Glasgow coma scale; qSOFA – quick Sequential Organ Failure Assessment; SOFA –Sequential Organ Failure Assessment; Adapted from *Bone et al. Definitions for sepsis and organ failure and guidelines for the use of innovative therapies in sepsis: The ACCP/SCCM Consensus Conference Committee. Chest. 1992;101(6):1644-1655* and *Singer et al. The Third International Consensus Definitions for Sepsis and Septic Shock (Sepsis-3). JAMA. 2016;315(8):801-810*.