1ST WORLD SEPSIS CONGRESS
Challenges and Opportunities in the Fight Against Sepsis

To be held completely online from September 8th to 9th, 2016

Information & Registration: worldsepsiscongress.org

#wsc16

Program Chairs: S. Finfer, K. Reinhart
MESSAGE

On the occasion of the 1st World Sepsis Congress, I am sending warm greetings from Berlin. I am delighted that the Global Sepsis Alliance is holding this first-ever online congress, thus providing a forum for experts from all over the world to share their strategies in an effort to advance the global fight against sepsis.

Sepsis constitutes a global challenge – in particular for low- and middle-income countries – which can only be addressed by concerted action. In developing countries, an estimated 60 to 80 percent of all infection-related deaths are caused by sepsis. Every year, millions of newborns and small children, as well as about 100,000 post-partum mothers, lose their lives to it.

Prevention, early diagnosis and treatment of sepsis will not only save millions of lives around the world, but will also contribute to achieving the United Nations’ Sustainable Development Goals, in particular reducing maternal and neonatal mortality rates as well as strengthening health care systems.

In this respect, the World Health Organization (WHO) plays a decisive role. While it is true that previous efforts by WHO regarding sepsis prevention and treatment were successful, these were predominantly initiated in response to outbreaks and pandemics. In cooperation with the health ministries of Austria, Liechtenstein, Luxembourg, and Switzerland, therefore, I am lobbying for next year’s World Health Assembly to adopt a resolution on sepsis. This resolution would, for instance, call for data to be collected globally on this frequently fatal disease. Other goals on our list are: vaccinations of risk groups against infectious diseases, greater compliance with sanitary measures, the early diagnosis and treatment of sepsis, as well as the reduction of antimicrobial resistance by promoting the appropriate use of antibiotics. Moreover, not only the public but also health professionals need to be made more aware of this disease and its symptoms for sufficient information would already greatly lessen the associated risks.

The coordination of activities to prevent and combat sepsis by the WHO will improve patient safety on a global scale. This is one more reason why I am delighted that the 1st World Sepsis Congress is taking place now. Also, I would like to express my sincere gratitude to all of those whose efforts are making the 1st World Sepsis Congress a success. You and all of the participants significantly contribute to our common goal of minimising the number of new infections around the world.

Hermann Gröhe

Federal Minister, Member of the German Bundestag
WELCOME TO THE
1ST WORLD SEPSIS CONGRESS

Over the last decade we have seen unexpected pandemics and a continuous increase in sepsis rates in the industrial countries. According to the last Global Burden of Disease Report in 2012 over 10 million deaths each year are due to infections. This makes infections the number two cause of death worldwide. The vast majority of these deaths are attributable to sepsis. Sepsis induced organ dysfunction and shock require urgent supportive therapies in addition to the measures to eradicate the inciting infection. Unfortunately, sepsis is only known to 6-50% of lay people and even health care workers may fail to recognize the early symptoms of sepsis. Sepsis can be prevented to a considerable degree by vaccination against the underlying infections, better sanitation, and clean care. The odds of surviving sepsis can be dramatically improved by early recognition and appropriate treatment with antimicrobials and supportive emergency care measures. Lack of awareness and delayed treatment contribute to make sepsis the #1 preventable cause of death worldwide.

The Global Sepsis Alliance and the World Sepsis Day Movement jointly with national and international professional bodies, patient advocacy groups, and health care providers foster public awareness campaigns, the implementation of quality improvement programs, and are working to improve access to appropriate rehabilitation services for sepsis survivors. We are pleased that the 1st World Sepsis Congress (WSC) brings together highly ranked representatives of international and national health care authorities, NGOs, policy makers, patients, patient advocate groups, most renowned clinical scientists, researchers and pioneers in health care improvement. As program chairs on behalf of the Global Sepsis Alliance we cordially invite you to join us for this free online congress. We are convinced that this event jointly with the 5th World Sepsis Day (WSD) on September 13th will contribute to wider recognition of sepsis by policy makers and members of the public, and inform health care workers and lay people that vaccination, clean care, early recognition and evidence based sepsis management save lives.

Last but not least we hope that it will empower sepsis survivors and their families to join the fight against sepsis and to overcome the long-term consequences of sepsis, and provide a strong signal of support to the initiative of the UN member states who request that a resolution on sepsis becomes part of the agenda of the World Health Assembly meeting in 2017.

Konrad Reinhart, MD ML
Center for Sepsis Control & Care

Simon Finfer, MBBS FRCP FRCA FCICM FAHMS MD
The George Institute for Global Health
Opening Session: Sepsis - A Global Health Threat

Thursday, Sep 8th at 13:30h UTC

Opening Remarks: S. Finfer, Australia
Chair: N. Kissoon, Canada

13:30h UTC
Pandemics and Sepsis - The Challenges for the International Community of States
H. Braun, Minister of State, Germany

13:45h UTC
Sepsis Management and Prevention: WHO’s Perspectives and Actions
M.-P. Kieny, Assistant Director-General, WHO

14:00h UTC
Sepsis and the United Nations Sustainable Development Goals
A. Steiner, Under-Secretary General UN, Director UNEP

14:15h UTC
Zero Preventable Deaths by 2020
J. Kiani, Founder, Patient Safety Movement Foundation & CEO of Masimo

14:30h UTC
Sepsis Control - How Nurses Can Remodel the Landscape
H. Kabara, National Association of Nurse Intensivists of Nigeria (NANIN)

14:45h UTC
Sepsis – A Call to Action
K. Reinhart, Global Sepsis Alliance

till 15:30 UTC
Discussion
S2: Prevention of Sepsis

Thursday, Sep 8th at 15:30h UTC

Chair: H. Al Rahma, United Arab Emirates

15:30h UTC
Keynote: The Barriers in the Fight Against Hospital Acquired Infections
P. Pronovost, United States

15:45h UTC
Role of Vaccination to Protect from Influenza and Pneumonia
T. Pilishvili, CDC, United States

16:00h UTC
Clean Care is Safer Care
D. Pittet, Switzerland

16:15h UTC
New WHO Global Guideline for the Prevention of Surgical Site Infections and Their Implementation in Resource Limited Settings
B. Allegranzi, WHO

16:30h UTC
Preventing VAP and C Difficile Infections
D. Cook, Canada

16:45h UTC
Sepsis Prevention and Management in Cancer Patients
I. Malik, United States

till 17:10 UTC
Discussion

S3: The Challenges of Patients and Families

Thursday, Sep 8th at 17:10h UTC

Chair: R. Schachter, Canada

17:10h UTC
Keynote: The Health and Wellbeing of Caregivers of Sepsis Patients
M. Herridge, Canada

17:30h UTC - 18:30h UTC
Panel Discussion by People Affected by Sepsis and Family Members

Participants:
C. Flatley, United States
M. Mead, United Kingdom
R. Schachter, Canada
C. Staunton, United States
A. Trumann, Germany
M. Wienold, Germany
S4: Novel Adjunctive Sepsis Therapies in Clinical Trials

Thursday, Sep 8th at 18:30h UTC (click to see your local time zone)

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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</thead>
</table>
| 18:30h UTC | **Chair:** S. Opal, United States  
Keynote: Lessons Learned on the Pathophysiology of Sepsis  
K. Tracey, United States |
| 18:45h UTC | Recombinant Human Soluble Thrombomodulin  
J.-L. Vincent, Belgium |
| 19:00h UTC | Alkaline Phosphatase  
P. Pickkers, Netherlands |
| 19:15h UTC | Selepressin  
J. Russell, Canada |
| 19:30h UTC | Anti-PD-L1  
R. Hotchkiss, United States |
| 19:45h UTC | Anti-C5a Therapy  
N. Riedemann, Germany |
| 20:00h UTC | Adrecizumab - a New Option for Targeted Sepsis Therapy  
P.-F. Laterre, Belgium |

Discussion

S5: Patient Safety and Quality Improvement I

Thursday, Sep 8th at 20:15h UTC (click to see your local time zone)

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
</table>
| 20:15h UTC | **Chair:** P. Dellinger, United States  
Keynote: Strategies to Improve Patient Safety  
L. Donaldson, WHO, United Kingdom |
| 20:30h UTC | The Contribution of the Surviving Sepsis Campaign  
M. Levy, United States |
| 20:45h UTC | The UK Sepsis Trust’s Success to Reduce Sepsis Deaths  
R. Daniels, United Kingdom |
| 21:00h UTC | The WHO Maternal and Newborn Sepsis Initiative  
J. Souza, Switzerland |

Discussion

Overnight Break – Thursday to Friday

PDT = San Francisco = UTC -7  
MDT = Salt Lake City = UTC -6  
CDT = Houston = UTC -5  
EDT = New York = UTC -4  
BRT = São Paulo = UTC -3  
BST = London = UTC +1  
CEST = Berlin = UTC +2  
OESZ = Ankara = UTC +3  
GST = Dubai = UTC +4  
PKT = Islamabad = UTC +5  
IST = New Delhi = UTC +6  
ICT = Bangkok = UTC +7  
CST = Beijing = UTC +8  
JST = Tokyo = UTC +9  
AEST = Sydney = UTC +10
S6: Evidence Based Sepsis Therapy

**Chair: M. Ziegenfuss, Australia**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>07:00h UTC</td>
<td>The Challenges of Antimicrobial Resistance</td>
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<tr>
<td></td>
<td>T. Welte, Germany</td>
</tr>
<tr>
<td>07:15h UTC</td>
<td>Antifungal Therapy</td>
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<tr>
<td></td>
<td>T. Calandra, Switzerland</td>
</tr>
<tr>
<td>07:30h UTC</td>
<td>Fluid Resuscitation - Type of Fluids</td>
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<td></td>
<td>S. Finfer, Australia</td>
</tr>
<tr>
<td>07:45h UTC</td>
<td>Fluid Resuscitation - Wet or Dry</td>
</tr>
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<td></td>
<td>A. Perner, Denmark</td>
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<tr>
<td>08:00h UTC</td>
<td>Cardio-Circulatory Support</td>
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<tr>
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<td>D. de Backer, Belgium</td>
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<tr>
<td>08:15h UTC</td>
<td>Therapy of Respiratory Failure</td>
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<tr>
<td></td>
<td>L. Gattinoni, Italy</td>
</tr>
<tr>
<td>08:30h UTC</td>
<td>Prevention and Therapy of Renal Failure</td>
</tr>
<tr>
<td></td>
<td>D. Payen, France</td>
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<tr>
<td>till 9:30 UTC</td>
<td>Discussion</td>
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</tbody>
</table>

S7: Patient Safety and Quality Improvement II

**Chair: G. Tulli, Italy**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>09:30h UTC</td>
<td>&quot;Sepsis Kills&quot;: Early Intervention Saves Lives</td>
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<td>H. Lander, Australia</td>
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<tr>
<td>09:45h UTC</td>
<td>The Scottish Approach to Reduce Sepsis Deaths</td>
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<td></td>
<td>K. Rooney, Scotland</td>
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<tr>
<td>10:00h UTC</td>
<td>The Role of Human Factors in Fighting Against Sepsis</td>
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<tr>
<td></td>
<td>G. Toccafondi, Italy</td>
</tr>
<tr>
<td>10:15h UTC</td>
<td>The Irish Approach to Reduce Sepsis Deaths</td>
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<td></td>
<td>V. Hamilton, Ireland</td>
</tr>
<tr>
<td>10:30h UTC</td>
<td>Barriers to Change - Lessons Learned in Germany</td>
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<tr>
<td></td>
<td>D. Schwarzkopf, Germany</td>
</tr>
<tr>
<td>till 11:15 UTC</td>
<td>Discussion</td>
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</table>
### S8: The Challenges of Sepsis Management in Low and Middle Income Settings

**Friday, Sep 9**

**at 11:15h UTC**

**Chair: S. Bhagwanjee, United States**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speaker, Country</th>
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<tbody>
<tr>
<td>11:15h UTC</td>
<td>The Challenges of Sepsis Management in Africa</td>
<td>K. Maitland, Kenya</td>
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<tr>
<td>11:30h UTC</td>
<td>The Challenges of Sepsis Management in Latin America</td>
<td>F. Machado, Brazil</td>
</tr>
<tr>
<td>11:45h UTC</td>
<td>The Challenges of Sepsis Management in China</td>
<td>B. Du, China</td>
</tr>
<tr>
<td>12:00h UTC</td>
<td>The Challenges of Sepsis Management in India</td>
<td>P. Amin, India</td>
</tr>
<tr>
<td>12:15h UTC</td>
<td>Barriers to Change in Resource Poor Settings</td>
<td>A. Argent, South Africa</td>
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<tr>
<td><strong>till 13:00 UTC</strong></td>
<td>Discussion</td>
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### S9: Pathogen Detection and Sepsis Markers I

**Friday, Sep 9**

**at 13:00h UTC**

**Chair: H. Gerlach, Germany**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speaker, Country</th>
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<tbody>
<tr>
<td>13:00h UTC</td>
<td>Molecular Biomarkers to Guide Sepsis Therapy</td>
<td>T. van der Poll, Netherlands</td>
</tr>
<tr>
<td>13:15h UTC</td>
<td>The Role of Biomarkers in Antibiotic Stewardship</td>
<td>B. Müller, Switzerland</td>
</tr>
<tr>
<td>13:30h UTC</td>
<td>Can Sepsis Biomarkers Contribute to Improved Patient Outcome?</td>
<td>D. de Lange, Netherlands</td>
</tr>
<tr>
<td>13:45h UTC</td>
<td>The Potential of Lactate in Sepsis Management</td>
<td>M. Singer, United Kingdom</td>
</tr>
<tr>
<td>14:00h UTC</td>
<td>How Molecular Diagnostics Will Change the Management of Sepsis</td>
<td>J.-P. Mira, France</td>
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<tr>
<td><strong>till 14:45 UTC</strong></td>
<td>Discussion</td>
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</table>
S10: Pathogen Detection and Sepsis Markers II

**Chair: E. Giamarellos, Greece**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>14:45h UTC</td>
<td>Keynote: The Importance of Diagnostic Microbiology&lt;br&gt;J. Cohen, United Kingdom</td>
</tr>
<tr>
<td>15:00h UTC</td>
<td>Why Antibiotic Stewardship is Key&lt;br&gt;S. Opal, United States</td>
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<tr>
<td>15:15h UTC</td>
<td>Novel Approaches to Pathogen Detection&lt;br&gt;M. Bauer, Germany</td>
</tr>
<tr>
<td>15:30h UTC</td>
<td>Novel Approaches to Diagnose Fungal Sepsis&lt;br&gt;O. Kurzai, Germany</td>
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<tr>
<td>15:45h UTC</td>
<td>Novel Biomarkers&lt;br&gt;P. Caironi, Italy</td>
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<tr>
<td>till 16:30 UTC</td>
<td>Discussion</td>
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S11: Patient Safety and Quality Improvement III

**Chair: K. Rooney, Scotland**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>16:30h UTC</td>
<td>The Turkish Approach to Sepsis Awareness &amp; Education&lt;br&gt;N. Unal, Turkey</td>
</tr>
<tr>
<td>16:45h UTC</td>
<td>Lessons to be Learned from the Success to Reduce Sepsis Deaths in Spain&lt;br&gt;A. Artigas, Spain</td>
</tr>
<tr>
<td>17:00h UTC</td>
<td>A Health Care Provider’s Success to Reduce Sepsis Deaths&lt;br&gt;M. Doerfler, United States</td>
</tr>
<tr>
<td>17:15h UTC</td>
<td>The Potential of Rapid Response Teams to Reduce Sepsis Deaths&lt;br&gt;E. Williams, United States</td>
</tr>
<tr>
<td>17:30h UTC</td>
<td>The WHO Approach to Sepsis Education in Resource Limited Settings&lt;br&gt;J. Diaz, United States</td>
</tr>
<tr>
<td>17:45h UTC</td>
<td>The Approach of the Centers for Disease Control and Prevention&lt;br&gt;T. Frieden, CDC, United States</td>
</tr>
<tr>
<td>till 18:15 UTC</td>
<td>Discussion</td>
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</table>
S12: Challenges in the Management of Pandemics

**Chair: N. Shindo, WHO**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>18:15h UTC</td>
<td>Keynote: Lessons Learned from the 1918 Spanish Influenza&lt;br&gt;  D. Morens, NIH, United States</td>
</tr>
<tr>
<td>18:30h UTC</td>
<td>Lessons to be Learned from the H1N1 Influenza Pandemic&lt;br&gt;  R. Fowler, Canada</td>
</tr>
<tr>
<td>18:45h UTC</td>
<td>Lessons to be Learned from Ebola by the WHO&lt;br&gt;  E. Kelley, WHO</td>
</tr>
<tr>
<td>19:00h UTC</td>
<td>Lessons to be Learned from Ebola by MSF&lt;br&gt;  T. Stöbe, Médecins Sans Frontières [MSF]</td>
</tr>
<tr>
<td>19:15h UTC</td>
<td>The Clinical &amp; Epidemiological Barriers to Research in Africa&lt;br&gt;  N. Lufesi, Malawi</td>
</tr>
<tr>
<td>19:30h UTC</td>
<td>The Role of Preparedness and International Collaboration&lt;br&gt;  J. Marshall, Canada</td>
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**till 20:20h UTC** Discussion

S13: Epidemiology and Long-Term Consequences of Sepsis

**Chair: F. Machado, Brazil**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tr>
<td>20:20h UTC</td>
<td>Keynote: Epidemiology of Sepsis&lt;br&gt;  D. Angus, United States</td>
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<tr>
<td>20:35h UTC</td>
<td>The Burden of Sepsis in Children&lt;br&gt;  N. Kissoon, Canada</td>
</tr>
<tr>
<td>20:50h UTC</td>
<td>The Threat Sepsis Poses to Maternal and Newborn Health&lt;br&gt;  Z. Bhutta, Canada</td>
</tr>
<tr>
<td>21:05h UTC</td>
<td>Functional Disability after Sepsis&lt;br&gt;  T. Iwashyna, United States</td>
</tr>
<tr>
<td>21:20h UTC</td>
<td>Prevention of Post Sepsis Sequelae&lt;br&gt;  W. Ely, United States</td>
</tr>
<tr>
<td>21:35h UTC</td>
<td>Prevention and Treatment of ICU Related Posttraumatic Stress Disorders&lt;br&gt;  A. Parker, United States</td>
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**till 22:05h UTC** Discussion

**Closing Remarks: Niranjan Kissoon, Canada**
ENDORSING SOCIETIES

American Academy of Pediatrics (AAP)
American Society of Anaesthesiologists (ASA)
Associação de Medicina Intensiva Brasileira (AMIB)
Australian and New Zealand Intensive Care Society (ANZICS)
Australian College of Critical Care Nurses (ACCCN)
Austrian Society of Anesthesiology, Resuscitation & Intensive Care (ÖGARI)
Bangladesh Society of Critical Care Medicine
Belgian Society of Intensive Care Medicine
Belize Society of Critical Care
C Diff Foundation
Center for Sepsis Control & Care, Germany
Centers for Disease Control & Prevention, US
Chilean Society of Critical Care and Emergency Medicine (Red Intensive)
Clinical Risk Management and Patient Safety Center of Tuscany Region
Coalition for Patient Safety Germany (APS)
Consortium of Universities for Global Health
Croatian Nurse Society of Anesthesia, Reanimation, Intensive Care and Transfusion (CNSARICT)
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Georgian Association of Disaster & Critical Care
Georgian Institute of Critical Care Medicine
German Interdisciplinary Association for Intensive Care and Emergency Medicine (DIVI)
German Medical Association (Bundesärztekammer)
German Sepsis Aid
German Sepsis Society
German Society for Anaesthesiology & Intensive Care Medicine (DGAI)
German Society for Infectiology (DGII)
German Society for Nephrology (DGFN)
German Society for Neurology (DGN)
German Society for Pediatric Infectiology (DGPI)
German Society for Pneumology (DGPI)
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GiViTi Italian Group
Hellenic Sepsis Study Group
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International Pan Arab Critical Care Medicine Society (IPACCMS)
International Sepsis Forum (ISF)
International Society for Infectious Diseases (ISID)
Israel Society of Critical Care Medicine
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Korean Society of Critical Care Medicine (KSCCM)
Latin American Sepsis Institute (LASI)
Merinoff Symposium
Molecular Medicine
Nepalese Society of Critical Care Medicine – NSCCM
Neurocritical Care Society
Northwell Health
Organization for the Sepsis Children of Nepal (OSCN)
Pakistan Society of Anaesthesiology (PSA)
Pakistan Society of Critical Care Medicine (PSCCM)
Panamanian Association of Critical Care Medicine
Paul-Ehrlich-Society for Chemotherapy
Romanian Society of Anaesthesia and Intensive Care
Russian Sepsis Forum (BREFFII)
Seattle Children’s
Sepsis Alliance (SA)
Sepsis Fondent Sweden
Sepsis-Foundation, Germany
Serbian Society of Intensive Care Medicine
Sociedad Argentina de Terapia Intensiva
Société Suisse de Médecine Intensive (SSMI)
Society of Critical Care Medicine (SCCM)
Spanish Edu Sepsis Network Critical Care Center Corporació Sanitària Y Universitaria Parc Taulú
Spanish Sepsis Code/ FACME
SPB Sepsis, Russia
Surviving Sepsis Campaign (SSC)
Swedish Society of Anaesthesiology and Intensive Care (SSAI)
Thai Society of Critical Care Medicine
The Intensive Care Society
The Medical Surgical Society of the Juarez Hospital of México A.C.
The Rory Staunton Foundation
The UK Sepsis Trust
Turkish Society of Intensive Care Medicine
Turkish Society of Medical & Surgical Intensive Care
Uruguayan Society of Medicine Intensive Care (SUMI)
World Federation of Critical Care Nurses (WFCCN)
World Federation of Pediatric Intensive & Critical Care Societies (WFPICCS)
World Federation of Societies of Intensive and Critical Care Medicine (WFSICCM)
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#### Main Sponsors
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- Patient Safety Movement Foundation
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- Adrenomed
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- AM-Pharma

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