INPLASY PROTOCOL

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None declared.

Application Secure Medical Imaging and value of blood perfusion index monitoring guidance in fluid resuscitation treatment of septic shock

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Review question / Objective: **Have clinical value of perfusion index (PI) in septic shock patients with fluid resuscitation therapy?**
Condition being studied: **Sepsis patients.**
Information sources: **google, PubMed, CNKI, wed of science.**
Strategy of data synthesis: **All data monitored were analyzed by IBM SPSS 25.0 software. Calculated data results are presented as mean ± standard deviation (x ± s). When the measurement data of the two groups were compared, independent sample t-test was used when they met the normal distribution, and parametric test was used when they did not meet the normal distribution. P < 0.05 was considered statistically significant.**

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 03 September 2022 and was last updated on 03 September 2022 (registration number INPLASY202290010).

INTRODUCTION

Review question / Objective: **Have clinical value of perfusion index (PI) in septic shock patients with fluid resuscitation therapy?**

Condition being studied: **septic shock.**

METHODS

Participant or population: **Sepsis patients (50 patients).**

Intervention: **fluid resuscitation therapy was guided by Pi according to the same parameters.**

Comparator: Normal patients.

Study designs to be included: Septic shock included patients.

Eligibility criteria: None- septic shock included patients.

Information sources: Google, PubMed, CNKI, wed of science.

Main outcome(s): 48 h after treatment, BLAC in the study group was significantly different from that in the control group ($P < 0.05$).There was no significant difference in Hb between the expermental group and the control group at 6 h, 24 h, and 48 h after treatment ($P > 0.05$).There was no significant difference between the study group and the control group at 6 h after treatment ($P > 0.05$), and there was a significant difference between the study group and the control group at 24 h and 48 h after treatment ($P < 0.01$).there was no significant difference in resuscitation fluid volume between the study group and the control group ($P > 0.05$).

Quality assessment / Risk of bias analysis: None.

Strategy of data synthesis: All data monitored were analyzed by IBM SPSS 25.0 software. Calculated data results are presented as mean ± standard deviation ($x \pm s$). When the measurement data of the two groups were compared, independent sample t-test was used when they met the normal distribution, and parametric test was used when they did not meet the normal distribution. $P < 0.05$ was considered statistically significant.

Subgroup analysis: None.

Sensitivity analysis: None.

Country(ies) involved: China.

Keywords: perfusion index; septic shock; fluid resuscitation; cardiopulmonary index.

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