General Practice Sepsis Decision Support Tool

To be applied to all non-pregnant adults & young people 12 years and over with fever (or recent fever) symptoms

N.B: there is no systems substitute for clinical experience & acumen, but Red Flag Sepsis will help with early identification of adults & older children with systemic response to infection

1. In the context of presumed infection, are any of the following true:

(common sources: chest, UTI, abdominal organs)

- Patient looks very unwell
- Family or carer is very concerned
- There is ongoing deterioration
- Physiology is abnormal for this patient

Tick

Low risk of sepsis. Consider other diagnoses.
Use clinical judgement and/or standard protocols.

Give safety netting advice: call 999 if patient deteriorates rapidly, or call 111/arrange to see GP if condition fails to improve or gradually worsens. Signpost to available resources as appropriate.

2. Is ONE Red Flag present?

Tick

New deterioration in GCS/ AVPU
Systolic B.P \(\leq 90\) mmHg (or \(\geq 40\) mmHg below normal)
Heart rate \(\geq 130\) per minute
Respiratory rate \(\geq 25\) per minute
Needs oxygen to keep SpO\(_2\) 92% (88% in COPD)
Non-blanching rash or mottled/ ashen/ cyanotic
Not passed urine in last 18 hours
Urine output less than 0.5 ml/kg/hr if catheterised
Recent chemotherapy (within last 6 weeks)

Tick

Sepsis likely
Use clinical judgment to determine whether patient can be managed in community setting. If treating in the community, consider:
- planned second assessment +/- blood results
- brief written handover to colleagues
- specific safety netting advice

Red Flag Sepsis!
Immediate actions:
Dial 999
Arrange blue light transfer
Administer oxygen to maintain saturations > 94%

Communication:
Write a brief clear handover including observations and antibiotic allergies where present
Ensure Paramedics pre-alert as ‘Red Flag Sepsis’

3. Is any ONE Amber Flag present?

Tick

Relatives worried about mental state/ behaviour
Acute deterioration in functional ability
Immunosuppressed (without recent chemotherapy)
Trauma, surgery or procedure in last 6 weeks
Respiratory rate 21-24 OR dyspnoeic
Systolic B.P 91-100 mmHg
Heart rate 91-130 OR new dysrhythmia
Not passed urine in last 12-18 hours
Tympanic temperature \(\leq 36\)ºC
Clinical signs of wound, device or skin infection

If under 18 & immunity impaired treat as Red Flag Sepsis

Give safety netting advice: call 999 if patient deteriorates rapidly, or call 111/arrange to see GP if condition fails to improve or gradually worsens. Signpost to available resources as appropriate.