SEPSIS SCREENING TOOL ACUTE ASSESSMENT

01 START IF CHILD LOOKS UNWELL, IF THERE IS PARENTAL CONCERN OR PEWS HAS TRIGGERED

RISK FACTORS FOR SEPSIS INCLUDE:

- Recent trauma / surgery / invasive procedure
- Impaired immunity (e.g. diabetes, steroids, chemotherapy)
- Indwelling lines / broken skin

02 COULD THIS BE DUE TO AN INFECTION?

LIKELY SOURCE:

- Respiratory
- Urine
- Skin/joint/wound
- Indwelling device

03 ANY RED FLAG PRESENT?

- Objective evidence of new or altered mental state
- Doesn’t wake when roused / won’t stay awake
- Looks very unwell to healthcare professional
- Severe tachycardia (see chart)
- Severe tachypnoea (see chart)
- Bradycardia (<60 bpm)
- Needs O₂ to keep SpO₂ ≥ 90%
- Non-blanching rash / mottled / ashen / cyanotic

04 ANY AMBER FLAG PRESENT?

- Behaving abnormally / not wanting to play
- Parental concern
- Moderate tachypnoea (see chart)
- Moderate tachycardia (see chart)
- SpO₂ < 92% on air
- Capillary refill time ≥ 3 seconds
- Reduced urine output (<1ml/kg/h if catheterised)
- Leg pain
- Temperature <36°C
- Immunocompromised

NO AMBER FLAGS = ROUTINE CARE / CONSIDER OTHER DIAGNOSIS

Age (years) | Tachypnoea (breaths per minute) | Tachycardia (beats per minute)
---|---|---
5 | ≥29 | ≥130
6-7 | ≥27 | ≥120-129
8-11 | ≥25 | ≥115-119

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SEPSIS SCREENING TOOL - THE PAEDIATRIC SEPSIS SIX

AGE 5-11

COMPLETE ALL ACTIONS WITHIN ONE HOUR

01 ENSURE SENIOR CLINICIAN ATTENDS
   NAME: GRADE:

02 OXYGEN IF REQUIRED
   START IF O₂ SATURATIONS LESS THAN 92% OR EVIDENCE OF SHOCK

03 OBTAIN IV / IO ACCESS, TAKE BLOODS
   BLOOD CULTURES, BLOOD GLUCOSE, LACTATE, FBC, U&Es, CRP AND CLOTTING LUMBAR PUNCTURE IF INDICATED

04 GIVE IV / IO ANTIBIOTICS
   MAXIMUM DOSE BROAD SPECTRUM THERAPY
   CONSIDER: LOCAL POLICY / ALLERGY STATUS / ANTIVIRALS

05 CONSIDER IV / IO FLUIDS
   IF LACTATE IS ABOVE 2 mmol/L GIVE FLUID BOLUS 20 ml/kg WITHOUT DELAY
   IF LACTATE >4 mmol/L CALL PICU. (10ml/kg neonates, REPEAT IF REQUIRED)

06 CONSIDER INOTROPIC SUPPORT
   CONSIDER INOTROPIC SUPPORT IF NORMAL PHYSIOLOGY IS NOT RESTORED AFTER ≥20 mL/kg FLUID (10 mL/kg IN NEONATES), CALL PICU OR A REGIONAL CENTRE URGENTLY

RED FLAGS AFTER ONE HOUR – ESCALATE TO CONSULTANT NOW

RECORD ADDITIONAL NOTES HERE:
   e.g. allergy status, arrival of specialist teams, variance from Sepsis Six