

01 START THIS CHART IF THE PATIENT LOOKS UNWELL

RISK FACTORS FOR SEPSIS INCLUDE:

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

02 COULD THIS BE DUE TO AN INFECTION?

YES

LIKELY SOURCE:

- Respiratory
- Urine
- Breast abscess
- Abdominal pain / distension
- Infected caesarean / perineal wound
- Chorioamnionitis / endometritis

NO

SEPSIS UNLIKELY, CONSIDER OTHER DIAGNOSIS

03 ANY RED FLAG PRESENT?

YES

- Objective evidence of new or altered mental state
- Systolic BP ≤ 90 mmHg (or drop of >40 from normal)
- Heart rate ≥ 130 per minute
- Respiratory rate ≥ 25 per minute
- Needs O₂ to keep SpO₂ $\geq 92\%$
- Non-blanching rash / mottled / ashen / cyanotic
- Not passed urine in 18 hours (<0.5 ml/kg/hr if catheterised)

YES

RED FLAG SEPSIS
START GP BUNDLE

04 ANY AMBER FLAG PRESENT?

NO

IF IMMUNITY IMPAIRED TREAT AS RED FLAG SEPSIS

- Behavioural / mental status change
- Acute deterioration in functional ability
- Respiratory rate 21-24
- Heart rate 100-129 or new dysrhythmia
- Systolic BP 91-100 mmHg
- Has had invasive procedure in last 6 weeks (e.g. CS, forceps delivery, ERPC, cerclage, CVs, miscarriage, termination)
- Temperature $< 36^{\circ}\text{C}$
- Has diabetes or gestational diabetes
- Close contact with GAS
- Prolonged rupture of membranes
- Bleeding / wound infection
- Offensive vaginal discharge

YES

USE CLINICAL JUDGEMENT TO DETERMINE WHETHER PATIENT CAN BE MANAGED IN COMMUNITY SETTING. IF TREATING IN THE COMMUNITY CONSIDER:

- PLANNED SECOND ASSESSMENT +/- BLOODS
- SPECIFIC SAFETY NETTING ADVICE

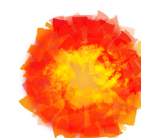
NO AMBER FLAGS : ROUTINE CARE AND GIVE SAFETY-NETTING ADVICE CONSIDER OBSTETRIC ASSESSMENT

GP RED FLAG BUNDLE:

THIS IS TIME-CRITICAL - IMMEDIATE ACTION REQUIRED: DIAL 999

AND ARRANGE BLUE LIGHT TRANSFER

COMMUNICATION: Ensure communication of 'Red Flag Sepsis' to crew. Advise crew to pre-alert as 'Red Flag Sepsis'. Where possible a written handover is recommended including observations and antibiotic allergies.



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