

01 ARE THERE CLUES THAT THE PATIENT IS SERIOUSLY 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?

LIKELY SOURCE:

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

SEPSIS UNLIKELY, CONSIDER OTHER DIAGNOSIS

03 ANY RED FLAG PRESENT?

- Objective evidence of new or altered mental state
- Unable to catch breath, barely able to speak
- Very fast breathing and struggling for breath
- Unable to stand / collapsed
- Skin that's very pale, mottled, ashen or blue
- Rash that doesn't fade when pressed firmly
- Not passed urine in last 18 hours

RED FLAG SEPSIS START BUNDLE

04 ANY AMBER FLAG PRESENT?

- Behavioural / mental status change
- Acute deterioration in functional ability
- Patient reports breathing is harder work
- Has had invasive procedure in last 6 weeks (e.g. CS, forceps delivery, ERPC, cerclage, CVs, miscarriage, termination)
- Temperature < 36°C
- Has diabetes or gestational diabetes
- Close contact with GAS
- Prolonged rupture of membranes
- Bleeding / wound infection
- Offensive vaginal discharge

FURTHER INFORMATION AND REVIEW REQUIRED:

- ARRANGE URGENT FACE-TO-FACE ASSESSMENT USING CLINICAL JUDGEMENT TO DETERMINE APPROPRIATE CLINICAL ENVIRONMENT

NO AMBER FLAGS: GIVE SAFETY NETTING ADVICE CONSIDER OBSTETRIC ASSESSMENT

TELEPHONE TRIAGE 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'.