SEPSIS SCREENING TOOL PREHOSPITAL

01

START IF CHILD LOOKS UNWELL, IF THERE’S PARENTAL CONCERN OR PEWS HAS TRIGGERED

RISK FACTORS FOR SEPSIS INCLUDE:

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

02

COULD THIS BE DUE TO AN INFECTION?

LIKELY SOURCE:

☐ Respiratory
☐ Urine
☐ Skin / joint / wound
☐ Indwelling device
☐ Brain
☐ Surgical
☐ Other

03

ANY RED FLAG PRESENT?

☐ Doesn’t wake when roused / won’t stay awake
☐ Looks very unwell to healthcare professional
☐ Weak, high-pitched or continuous cry
☐ Severe tachycardia (see chart)
☐ Severe tachypnoea (see chart)
☐ Bradycardia (<60 bpm)
☐ Non-blanching rash / mottled / ashen / cyanotic
☐ Temperature <36°C
☐ If under 3 months, temperature 38°C+

04

ANY AMBER FLAG PRESENT?

IF IMMUNITY IMPAIRED TREAT AS RED FLAG SEPSIS

☐ Not responding normally / no smile
☐ Reduced activity / very sleepy
☐ Moderate tachypnoea (see chart)
☐ Moderate tachycardia (see chart)
☐ SpO₂ < 92% or increased O₂ requirement
☐ Nasal flaring
☐ Capillary refill time ≥ 3 seconds
☐ Reduced urine output
☐ Leg pain or cold extremities

RED FLAG SEPSIS
START PAEDIATRIC PH BUNDLE

FURTHER INFORMATION AND REVIEW REQUIRED:

- TRANSFER TO DESIGNATED DESTINATION
- COMMUNICATE POTENTIAL OF SEPSIS AT HANDOVER

PREHOSPITAL SEPSIS BUNDLE*:

RESUSCITATION:
Oxygen to maintain saturations of >94%
Measure lactate if available
20ml/kg boluses of Sodium Chloride. Repeat if hypotensive.

COMMUNICATION:
Pre-alert receiving hospital.
Divert to ED (or other agreed destination)
Handover presence of Red Flag Sepsis

* NICE recommends rapid transfer to hospital is the priority rather than a prehospital bundle