SEPSIS SCREENING TOOL GENERAL PRACTICE

01 START THIS CHART IF THE CHILD LOOKS UNWELL, HAS ABNORMAL PHYSIOLOGY OR IF THERE IS PARENTAL CONCERN

RISK FACTORS FOR SEPSIS INCLUDE:
- Impaired immunity (e.g. diabetes, steroids, chemotherapy)
- Indwelling lines / broken skin
- 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
- Other

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 tachypnoea (see chart)
- Severe tachycardia (see chart)
- Bradycardia (<60 bpm)
- SpO₂ < 90% on air
- Non-blanching rash / mottled / ashen / cyanotic

04 ANY AMBER FLAG PRESENT?

IF IMMUNITY IMPAIRED TREAT AS RED FLAG SEPSIS
- Behaving abnormally / not wanting to play
- Parental or carer concern
- Moderate tachypnoea (see chart)
- Moderate tachycardia (see chart)
- SpO₂ < 92% on air
- Capillary refill time ≥ 3 seconds
- Reduced urine output
- Temperature <36°C
- Leg pain

RED FLAG SEPSIS
START GP BUNDLE

SEPSIS LIKELY
- TRANSFER TO DESIGNATED DESTINATION
- COMMUNICATE LIKELIHOOD OF SEPSIS AT HANDOVER

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

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.

<table>
<thead>
<tr>
<th>Age (years)</th>
<th>Tachypnoea (breaths per minute)</th>
<th>Tachycardia (beats per minute)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Severe</td>
<td>Moderate</td>
</tr>
<tr>
<td>5</td>
<td>≥29</td>
<td>24-28</td>
</tr>
<tr>
<td>6-7</td>
<td>≥27</td>
<td>24-26</td>
</tr>
<tr>
<td>8-11</td>
<td>≥25</td>
<td>22-24</td>
</tr>
</tbody>
</table>