**Sepsis Screening Tool Prehospital**

### 1. 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

### 2. Could This Be Due to an Infection?

**Likely Source:**
- Respiratory
- Breast abscess
- Urine
- Abdominal pain / distension
- Infected caesarean / perineal wound
- Chorioamnionitis / endometritis

### 3. Any Red Flag Present?

- 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 ≥ 92% (88% in COPD)
- Non-blanching rash / mottled / ashen / cyanotic
- Lactate ≥ 2 mmol/l*
- Not passed urine in 18 hours (<0.5ml/kg/hr if catheterised)

* lactate may be raised in & immediately after normal delivery

### 4. Any Amber Flag Present?

**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°C
- Has diabetes or gestational diabetes
- Close contact with GAS
- Prolonged rupture of membranes
- Bleeding / wound infection
- Offensive vaginal discharge
- Non-reassuring CTG / fetal tachycardia >160

### Sepsis Unlikely, Consider Other Diagnosis

### Further Information and Review Required:
- Transfer to designated destination
- Communicate potential of sepsis at handover

### No Amber Flags or Unlikely Sepsis: Routine Care - Consider Other Diagnosis - Safety-Net & Signpost As Per Local Guidance

### Prehospital Sepsis Bundle:

**Resuscitation:**
- Oxygen to maintain saturations of >94% (88% in COPD)
- Measure lactate if available
- 250ml boluses of Sodium Chloride: max 250mls if normotensive, max 2000ml if hypotensive. *NICE recommends using lactate to guide further fluid therapy

**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*