SEPSIS SCREENING TOOL TELEPHONE TRIAGE

01 START CHART IF ANY OF THE FOLLOWING ARE REPORTED:
- Abnormal temperature
- Appears to be breathing more quickly or slowly than normal
- Altered mental state – include sleepy, irritable, drowsy or floppy
- Abnormally pale / bluish skin or abnormally cold hands or feet
- Reduced wet nappies or reduced urine output

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
- Surgical
- Skin / joint / wound
- Other
- Indwelling device

03 ANY RED FLAG PRESENT?
- No response to social cues
- Doesn’t wake when roused / won’t stay awake
- Weak, high-pitched or continuous cry
- Grunting or bleating noises with every breath
- Finding it much harder to breathe than normal
- Very fast breathing / ‘pauses’ in breathing
- Skin that’s very pale, mottled, ashen or blue
- Rash that doesn’t fade when pressed firmly
- Temperature <36°C (check 3 times in 10 min)
- 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
- Parental concern
- Wakes only with prolonged stimulation
- Significantly decreased activity
- Having to work hard to breathe

CALL 999 IF ANY OF:
- Poor feeding in infants
- Reduced urine output
- Leg pain
- Cold feet or hands

RED FLAG SEPSIS START BUNDLE

NO AMBER FLAGS: GIVE SAFETY-NETTING ADVICE:
CALL 111 IF CONDITION CHANGES OR DETERIORATES.
SIGNPOST TO AVAILABLE RESOURCES AS APPROPRIATE

FURTHER INFORMATION AND REVIEW REQUIRED:
- ARRANGE URGENT FACE-TO FACE ASSESSMENT USING CLINICAL JUDGEMENT TO DETERMINE APPROPRIATE CLINICAL ENVIRONMENT

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’