

# 01 START THIS CHART IF THE PATIENT LOOKS UNWELL OR HAS ABNORMAL PHYSIOLOGY

## RISK FACTORS FOR SEPSIS INCLUDE:

- Age > 75  
 Impaired immunity (e.g. diabetes, steroids, chemotherapy)
  Recent trauma / surgery / invasive procedure  
 Indwelling lines / IVDU / broken skin

# 02 COULD THIS BE DUE TO AN INFECTION?

## LIKELY SOURCE:

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

NO

**SEPSIS UNLIKELY, CONSIDER OTHER DIAGNOSIS**

# 03 ANY RED FLAG PRESENT?

- Objective evidence of new or altered mental state  
 Systolic BP  $\leq$  90 mmHg (or drop of  $>$ 40 from normal)  
 Heart rate  $\geq$  130 per minute  
 Respiratory rate  $\geq$  25 per minute  
 Needs O<sub>2</sub> to keep SpO<sub>2</sub>  $\geq$  92% (88% in COPD)  
 Non-blanching rash / mottled / ashen / cyanotic  
 Recent chemotherapy  
 Not passed urine in 18 hours ( $<$ 0.5ml/kg/hr if catheterised)

YES

**RED FLAG SEPSIS START BUNDLE**

# 04 ANY AMBER FLAG PRESENT?

## IF UNDER 17 & IMMUNITY IMPAIRED TREAT AS RED FLAG SEPSIS

- Relatives concerned about mental status  
 Acute deterioration in functional ability  
 Immunosuppressed  
 Trauma / surgery / procedure in last 8 weeks  
 Respiratory rate 21-24  
 Systolic BP 91-100 mmHg  
 Heart rate 91-130 or new dysrhythmia  
 Temperature  $<$ 36°C  
 Clinical signs of wound infection

YES

- 1 SAME DAY ASSESSMENT BY GP/ TEAM LEADER**
- 2 IS URGENT REFERRAL TO HOSPITAL REQUIRED?**
- 3 AGREE AND DOCUMENT ONGOING MANAGEMENT PLAN (INCLUDING OBSERVATION FREQUENCY AND PLANNED SECOND REVIEW )**

**NO AMBER FLAGS = ROUTINE CARE / CONSIDER OTHER DIAGNOSIS**

## COMMUNITY NURSING 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.