

01 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

02 COULD THIS BE DUE TO AN INFECTION?

LIKELY SOURCE:

- Respiratory
- Urine
- Breast abscess
- Abdominal pain / distension
- Infected caesarean / perineal wound
- Chorioamnionitis / endometritis

SEPSIS UNLIKELY, CONSIDER OTHER DIAGNOSIS

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

*lactate may be raised in & immediately after normal delivery

RED FLAG SEPSIS
START PH BUNDLE

04 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 $< 36^{\circ}\text{C}$
- 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

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

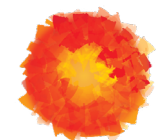
COMMUNICATION:

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**



THE UK
SEPSIS
TRUST

UKST 2020 2.2 PAGE 1 OF 1

The controlled copy of this document is maintained by The UK Sepsis Trust. Any copies of this document held outside of that area, in whatever format (e.g. paper, email attachment) are considered to have passed out of control and should be checked for currency and validity. The UK Sepsis Trust registered charity number (England & Wales) 1158843 (Scotland) SC050277. Company registration number 8644039. Sepsis Enterprises Ltd. company number 9583335. VAT reg. number 293133408.