

01 START THIS CHART IF YOU'RE WORRIED ABOUT YOUR PATIENT**ADDITIONAL FACTORS PROMPTING SCREENING FOR SEPSIS INCLUDE:**

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

02 IS THIS LIKELY TO BE DUE TO AN INFECTION?**LIKELY SOURCE:**

- Urine Chest Infected caesarean/perineal wound
 Breast abscess/mastitis Abdominal Chorioamnionitis or endometritis

NO

SEPSIS UNLIKELY, CONSIDER OTHER DIAGNOSIS**03 ANY RED FLAG PRESENT?**

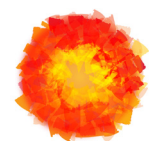
- Objective evidence of new or altered mental state
 Systolic BP \leq 90 mmHg (or drop of $>$ 40 from normal)
 Heart rate \geq 130 per minute
 Respiratory rate \geq 25 per minute
 Needs O₂ to keep SpO₂ \geq 92%
 Non-blanching rash / mottled / ashen / cyanotic
 Not passed urine in 18 hours ($<$ 0.5ml/kg/hr if catheterised)

YES

**RED FLAG SEPSIS
START GP BUNDLE****04 ANY AMBER FLAG PRESENT?**

- 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
 Behavioural / mental status change

YES

USE CLINICAL JUDGEMENT TO DETERMINE WHETHER PATIENT CAN BE MANAGED IN COMMUNITY SETTING.**IF TREATING IN THE COMMUNITY CONSIDER PLANNED SECOND ASSESSMENT, BLOODS AND COMMUNITY MIDWIFE REVIEW.****IF REFERRING FOR HOSPITAL ASSESSMENT COMMUNICATE POTENTIAL RISK OF SEPSIS.****NO AMBER FLAGS : ROUTINE CARE, GIVE SAFETY-NETTING ADVICE
CONSIDER OBSTETRIC ASSESSMENT****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.****THE UK SEPSIS TRUST**

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