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

RISK FACTORS FOR SEPSIS INCLUDE (NB a normal or low temperature does not exclude sepsis):

Age > 75

Recent trauma / surgery / invasive procedure

Impaired immunity (e.g. diabetes, steroids, chemotherapy)

Indwelling lines / IVDU / broken skin

Frailty, communication difficulties, socioeconomic deprivation, minority ethnic group

02 COULD THIS BE DUE TO AN INFECTION?

LIKELY SOURCE:

Respiratory	
Brain	

Urine
Surgical

Skin / joint / wound
Other

YES

☐ Indwelling device

NO

SEPSIS UNLIKELY, CONSIDER OTHER DIAGNOSIS

OBJANY REDSFLAG PRESENT?

Objective evidence of new or altered mental state

Respiratory rate ≥ 25 per minute

New need for O2 (40% or more) to keep SpO2 > 92%

Systolic BP ≤ 90 mmHg (or drop of >40 from normal)

Heart rate > 130 per minute

Not passed urine in 18 hours (<0.5ml/kg/hr if catheterised)

Non-blanching rash / mottled / ashen / cyanotic

RED FLAG SEPSIS START BUNDLE

ANYAMBER FLAGS PRESENT?

Family report abnormal behaviour or mental state

Reduced functional ability

Respiratory rate 21-24

Systolic BP 91-100 mmHg

Heart rate 91-130 or new dysrhythmia

 \square SpO₂ < 92% on air or increased O₂ requirement

Not passed urine in 12-18 h (0.5ml/kg/hr to 1ml/kg/hr if catheterised)

Line real up a a

Immunocompromised

Signs of infection including wound infection

☐ Temperature <36°C
</p>

Trauma, surgery or invasive procedures in last 6 weeks

USE CLINICAL JUDGEMENT TO DETERMINE WHETHER PATIENT CAN BE MANAGED IN COMMUNITY SETTING. IF TREATING IN THE COMMUNITY CONSIDER:

- PLANNED SECOND ASSESSMENT +/- BLOODS

YES

- FOLLOW UP WITH GP
- SPECIFIC SAFETY NETTING ADVICE

NO AMBER FLAGS: ROUTINE CARE AND GIVE SAFETY-NETTING ADVICE:

CALL 111 IF CONDITION CHANGES OR DETERIORATES.
SIGNPOST TO AVAILABLE RESOURCES AS APPROPRIATE



Slurred speech or confusion
Extreme shivering or muscle pain
Passing no urine (in a day)
Severe breathlessness
'I feel I might die'
Skin mottled, ashen, blue or very pale

RED FLAG BUNDLE:

DIAL 999 AND ARRANGE BLUE LIGHT TRANSFER
IF PRESCRIBER AVAILABLE & TRANSIT TIME
>1HR GIVE IV ANTIBIOTICS

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.

Observations and antibiotic allergies.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



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