

01 START THIS CHART IF SEPSIS IS SUSPECTED

Factors prompting a sepsis screen include (NB normal/ low temperature does not exclude sepsis):

- | | |
|--|--|
| ☐ NEWS2 has triggered | ☐ Patient looks unwell |
| ☐ Carer or relative concern | ☐ Evidence of organ dysfunction (e.g. lactate >2mmol/l) |
| ☐ Recent chemotherapy / risk of neutropenia | ☐ Assessment gives clinical cause for concern |

Consider any advance directive or care planning carefully. People who are frail, have communication difficulties, who are socioeconomically deprived or from minority ethnic groups are at higher risk.

YES

CALCULATE NEWS2 USING LATEST VITAL SIGNS

Always interpret vital signs and NEWS2 in context of medical history, medications and response to treatment

02 IS NEWS2 7 OR ABOVE? OR IS NEWS2 5 OR 6 AND ONE OF:

- ☐ Any one NEWS2 parameter with score of 3
- ☐ Mottled or ashen skin
- ☐ Non-blanching rash
- ☐ Cyanosis of skin, lips or tongue
- ☐ Patient looks extremely unwell
- ☐ Patient is actively deteriorating
- ☐ Risk of neutropenia (chemotherapy, immunosuppression)

03 IS NEWS2 5 OR 6? OR IS NEWS2 1-4 AND ONE OF:

- ☐ Any one NEWS2 parameter with score of 3
- ☐ Mottled or ashen skin
- ☐ Non-blanching rash
- ☐ Cyanosis of skin, lips or tongue
- ☐ Patient looks extremely unwell
- ☐ Patient is actively deteriorating
- ☐ Risk of neutropenia (chemotherapy, immunosuppression)

NO

YES

**RED FLAG
SEPSIS**
START PH BUNDLE

FURTHER ASSESSMENT & REVIEW REQUIRED:

- TRANSFER TO DESIGNATED DESTINATION
- COMMUNICATE POTENTIAL RISK OF SEPSIS AT HANDOVER
- RECALCULATE NEWS2 AT LEAST EVERY 60 MINS AND ESCALATE TO RED FLAG IF APPROPRIATE

YES

NO AMBER FLAGS OR UNLIKELY SEPSIS?: Routine care - Consider other diagnosis - Safety net and signpost as per local guidance

PH SEPSIS BUNDLE

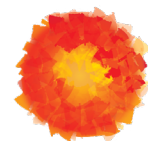
1. RESUSCITATION & TREATMENT:

Oxygen to maintain saturations of >94% (88% in people at risk of hypercapnic respiratory failure)
250ml boluses of 0.9% NaCl: max. 1000ml if hypotensive

2. CONSIDER IV ANTIBIOTICS IF TRANSIT TIME > 1h
(and if not already given e.g. by GP)

3. COMMUNICATION:

Pre-alert receiving hospital
Divert to ED (or other agreed destination)
Handover presence of Red Flag Sepsis



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