## SEPSIS SCREENING TOOL COMMUNITY CARE

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

#### RISK FACTORS FOR SEPSIS INCLUDE:

🗌 Age > 75

#### **CONSIDER ANY ADVANCE DIRECTIVE / CARE PLAN**

Indwelling lines / IVDU / broken skin
Recent trauma / surgery / invasive procedure

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

COULD THIS BE DUE TO AN INFECTION?

Respiratory

Urine

LIKELY SOURCE:

Skin / joint / wound

NO

YES

Indwelling device



Age 16+

## **3** ANY **RED** FLAGS PRESENT?

- Objective evidence of new or altered mental state
- $\Box$  Respiratory rate  $\geq$  25 per minute
- New need for O2 (40% or more) to keep SpO2 > 92% (>88%COPD)
- Systolic BP  $\leq$  90 mm Hg (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

# **O 4** ANY AMBER FLAGS PRESENT?

- 🗌 Family report abnormal behavior or mental state
- Reduced functional ability
- Respiratory rate 21-24
- Systolic BP 91-100 mmHg
- 🗌 Heart rate 91-130 or new dysrhythmia
- $\Box$  SpO<sub>2</sub> < 92% on air or increased O<sub>2</sub> requirement
- Not passed urine in 12-18 hr
- (0.5ml/kg/hr to 1ml/kg/hr if catheterised)
- Signs of infection including wound infection
- ☐ Temperature <36°C

# **NO AMBER FLAGS = ROUTINE CARE AND SAFETY-NETTING ADVICE:**

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

### 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.

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# SAME DAY ASSESSMENT

**START BUNDL** 

**RED FLAG** 

SEPSIS

- **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)



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



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