

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

RISK FACTORS FOR SEPSIS INCLUDE:

- Age > 75
- Impaired immunity (e.g. diabetes, steroids, chemotherapy)

CONSIDER ANY ADVANCE DIRECTIVE / CARE PLAN

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

02 COULD THIS BE DUE TO AN INFECTION?

LIKELY SOURCE:

- Respiratory
- Urine
- Skin / joint / wound
- Indwelling device
- Brain
- Surgical
- Other

NO

SEPSIS UNLIKELY, CONSIDER OTHER DIAGNOSIS

03 ANY RED FLAGS 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% (>88% COPD)
- Systolic BP ≤ 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

RED FLAG SEPSIS START BUNDLE

04 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
- SpO₂ < 92% on air or increased O₂ requirement
- Not passed urine in 12-18 hr (0.5ml/kg/hr to 1ml/kg/hr if catheterised)
- Immunocompromised
- Signs of infection including wound infection
- Temperature <36°C

- 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)

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

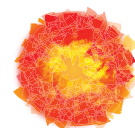
CALL 111 IF CONDITION CHANGES OR DETERIORATES. SIGNPOST TO AVAILABLE RESOURCES AS APPROPRIATE.

CALL 999 IF ANY OF:

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.



THE UK SEPSIS TRUST

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