

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

RISK FACTORS FOR SEPSIS INCLUDE:

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

02 COULD THIS BE DUE TO AN INFECTION?

LIKELY SOURCE:

- Respiratory
- Urine
- Infected caesarean / perineal wound
- Breast abscess
- Abdominal pain / distension
- Chorioamnionitis / endometritis

NO
SEPSIS UNLIKELY, CONSIDER OTHER DIAGNOSIS

03 ANY RED FLAGS PRESENT?

- Objective evidence of new or altered mental state
- Systolic BP ≤ 90 mmHg (or drop of >40 from normal)
- Heart rate > 130 per minute
- Respiratory rate ≥ 25 per minute
- New need for O₂ (40% or more) to keep SpO₂ $> 92\%$ ($>88\%$ COPD)
- Non-blanching rash / mottled / ashen / cyanotic
- Not passed urine in 18 hours ($<0.5\text{ml/kg/hr}$ if catheterised)
- Recent chemo/risk of neutropenia

YES
RED FLAG SEPSIS START BUNDLE

04 ANY AMBER FLAGS PRESENT?

- Acute deterioration in functional ability
- Family report mental status change
- Respiratory rate 21-24
- Heart rate 100-130 or new dysrhythmia
- Systolic BP 91-100 mmHg
- Has had invasive procedure in last 6 weeks
- Temperature $< 36^\circ\text{C}$
- Has diabetes or impaired immunity
- Close contact with GAS
- Prolonged rupture of membranes
- Offensive vaginal discharge
- Not passed urine in 12-18 h (0.5ml/kg/hr to 1ml/kg/hr if catheterised)
- Wound infection
- Non-reassuring CTG/fetal tachy

- YES**
- 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:

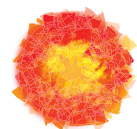
CALL 111 IF CONDITION CHANGES OR DETERIORATES. SIGNPOST TO AVAILABLE RESOURCES AS APPROPRIATE.

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 $>1\text{HR}$ 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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