

## 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?

YES

### 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?

YES

- Objective evidence of new or altered mental state
- Systolic BP  $\leq$  90 mmHg (or drop of  $>$ 40 from normal)
- Heart rate  $>$  130 per minute
- Respiratory rate  $\geq$  25 per minute
- New need for O<sub>2</sub> (40% or more) to keep SpO<sub>2</sub>  $>$  92% ( $>$ 88% COPD)
- Non-blanching rash / mottled / ashen / cyanotic
- Not passed urine in 18 hours ( $<$ 0.5ml/kg/hr if catheterised)

YES

**RED FLAG SEPSIS START BUNDLE**

## 04 ANY AMBER FLAGS PRESENT?

NO

- 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°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

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:

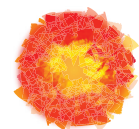
**CALL 111 IF CONDITION CHANGES OR DETERIORATES. SIGNPOST TO AVAILABLE RESOURCES AS APPROPRIATE.**

**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  $>$ 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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