SEPSIS SCREENING TOOL GENERAL PRACTICE

Age 16+

	STAKE THIS CHARL IF THE PATIENT LOUKS
U	UNWELL OR HAS ABNORMAL PHYSIOLOGY

☐ Age > 75
Impaired immunity (e.g. diabetes, steriods, chemotherapy)

RISK FACTORS FOR SEPSIS INCLUDE:

☐ Indwelling lines / IVDU / broken skin

Recent trauma / surgery / invasive procedure

COULD THIS BE DUE TO AN INFECTION?

Respiratory Brain

Urine ☐ Surgical Skin / joint / wound _ Other

NO

☐ Indwelling device

SEPSIS UNLIKELY. CONSIDER OTHER DIAGNOSIS

ANY RED FLAGS PRESENT?

Objective evidence of new or altered mental state

Respiratory rate ≥ 25 per minute

 \square New need for 02 (40% or more) to keep Sp02 > 92% (>88%COPD)

 \square Systolic BP ≤ 90 mm Hg (or drop of >40 from normal)

■ Not passed urine in 18 hours (<0.5ml/kg/hr if catheterised)

■ Non-blanching rash / mottled / ashen / cyanotic

RED FLAG START GP BUNDLE

ANY AMBER FLAGS PRESENT?

Family report abnormal behavior or mental state

Reduced funtional ability

Respiratory rate 21-24

Systolic BP 91-100 mmHg

Heart rate 91-130 or new dysrhythmia

 \square 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

☐ Trauma, surgery or invasive procedures in last 6 weeks

USE CLINICAL JUDGEMENT TO DETERMINE WHETHER PATIENT CAN BE MANAGED IN COMMUNITY SETTING. IF TREATING IN THE **COMMUNITY CONSIDER:**

- PLANNED SECOND **ASSESSMENT +/- BLOODS**
- SPECIFIC SAFETY **NETTING ADVICE**

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

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



YES

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.



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