SEPSIS SCREENING TOOL GENERAL PRACTICE

PREGNANT
OR UP TO 4 WEEKS POST-PREGNANCY

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

RISK FACTORS FOR SEPSIS INCLUDE:

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

YES

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?

YES

- ☐ 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 O_2 (40% or more) to keep SpO_2 > 92% (>88%COPD)
- ☐ Non-blanching rash / mottled / ashen / cyanotic
- ☐ Not passed urine in 18 hours (<0.5ml/kg/hr if catheterised)
- ☐ Recent chemo/risk of neutropenia

YES → **RED FLAG SEPSIS**
START GP 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
- ☐ Non-reassuring CTG/fetal tachy

YES → **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.

CALL 999 IF ANY OF:

- **S**lurred speech or confusion
- **E**xtreme shivering or muscle pain
- **P**assing no urine (in a day)
- **S**evere breathlessness
- **'I** feel I might die'
- **S**kin mottled, ashen, blue or very pale

GP 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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