

01 START IF YOUNG PERSON LOOKS UNWELL, IF PARENT IS CONCERNED OR PHYSIOLOGY IS ABNORMAL e.g. PEWS**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 Skin / joint / wound Indwelling device
 Brain Surgical Other

NO

SEPSIS UNLIKELY, CONSIDER OTHER DIAGNOSIS**03 ANY RED FLAGS PRESENT?**

YES

- 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

YES

RED FLAG SEPSIS START PH BUNDLE**04 ANY AMBER FLAGS PRESENT?**

NO

IF IMMUNITY IMPAIRED TREAT AS RED FLAG SEPSIS

- 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

YES

FURTHER ASSESSMENT AND REVIEW REQUIRED:

- TRANSFER TO DESIGNATED DESTINATION
- COMMUNICATE POTENTIAL OF SEPSIS AT HANDOVER
- RECHECK VITAL SIGNS AT LEAST EVERY 30 MINS AND ESCALATE TO RED FLAG IF APPROPRIATE

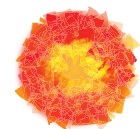
NO AMBER FLAGS OR UNLIKELY SEPSIS?: CONSIDER OTHER DIAGNOSIS - SAFETY NET AND SIGNPOST AS PER LOCAL GUIDANCE INTERPRET PHYSIOLOGY IN CONTEXT OF INDIVIDUAL PATIENT

PREHOSPITAL SEPSIS BUNDLE:**RESUSCITATION:**

- Oxygen to maintain saturations of >94%
 Measure lactate if available
 Give normal saline in 10ml/kg boluses, max 20ml/kg

CONSIDER IV ANTIBIOTICS IF EXPECTED TRANSIT TIME >1H**COMMUNICATION:**

- Pre-alert receiving hospital
 Divert to ED (or other agreed destination)
 Handover presence of Red Flag Sepsis



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