

01 START IF YOUNG PERSON LOOKS UNWELL, IF THERE'S OBSERVATION OF DETERIORATION OR IF PARENTS ARE CONCERNED

RISK FACTORS FOR SEPSIS INCLUDE:

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

02 COULD THIS BE DUE TO AN INFECTION?

LIKELY SOURCE:

- Respiratory Urine Skin / joint / wound Indwelling device
 Brain Surgical Other

NO

SEPSIS UNLIKELY,
CONSIDER OTHER
DIAGNOSIS AND
COMPLETE ABCDE
ASSESSMENT

03 ANY RED FLAG PRESENT?

- Systolic BP \leq 90 mmHg (or drop of >40 from normal)
 Objective evidence of new or altered mental state
 Respiratory rate \geq 25 per minute
 SPO₂ $<$ 90% on air or increased O₂ requirements
 Heart rate \geq 130 per minute
 Non-blanching rash / mottled / ashen / cyanotic
 Capillary refill time \geq 3 seconds
 Recent chemotherapy
 Not passed urine in 18 hours (<0.5 ml/kg/hr if catheterised)

YES

RED FLAG SEPSIS

START PAEDIATRIC PALLIATIVE CARE BUNDLE

04 ANY AMBER FLAG PRESENT?

IF IMMUNITY IMPAIRED TREAT AS RED FLAG SEPSIS

- Nurse / relative remain concerned about young person
 Acute deterioration in functional ability
 Immunosuppressed
 Respiratory rate 21-24
 Heart rate 91-130 or new dysrhythmia
 Systolic BP 91-100 mmHg
 Reduced urine output
 Leg pain or cold extremities
 Temperature $<36^{\circ}\text{C}$ or $\geq 38.5^{\circ}\text{C}$

YES

FURTHER REVIEW REQUIRED:

1. Same day assessment by GP/Advanced Nurse Practitioner

Time of Review: :

2. Is escalation required with hospital transfer?

YES NO

If yes time arranged: :

(Communicate potential sepsis)

3. Document ongoing management plan including frequency of review and assessment

Date: / / Time: :

NO AMBER FLAGS: ROUTINE CARE / CONSIDER OTHER DIAGNOSES AND DOCUMENT ASSESSMENT

SAFETY NET ADVICE AND LEAFLET GIVEN TO FAMILIES ON DISCHARGE HOME

PAEDIATRIC PALLIATIVE CARE SEPSIS BUNDLE : THIS IS TIME CRITICAL - IMMEDIATE ACTION REQUIRED

1. Dial 999 - Communicate "Red Flag Sepsis" If available administer oxygen to maintain saturations $>94\%$
 NICE recommends rapid transfer to a hospital as a priority

OR

2. Follow Advanced Care Plan (ACP). Seek immediate senior review in house, inform family and confirm wishes

Young Person's Name:

Staff Name:

Date/Time:

acorns

Your local children's hospice



THE UK
SEPSIS
TRUST