

# 01 START IF CHILD 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)
- Recent trauma / surgery / invasive procedure
- Indwelling lines / broken skin

## 02 COULD THIS BE DUE TO AN INFECTION?

**LIKELY SOURCE:**

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

**SEPSIS UNLIKELY, CONSIDER OTHER DIAGNOSIS AND COMPLETE ABCDE ASSESSMENT**

## 03 ANY RED FLAG PRESENT?

- Doesn't wake when roused / won't stay awake
- Looks very unwell to healthcare professional
- Objective evidence of new or altered mental state
- Severe tachypnoea (see chart)
- Severe tachycardia (see chart)
- SpO<sub>2</sub> < 90% on air or increased O<sub>2</sub> requirements
- Bradycardia (<60 bpm)
- Non-blanching rash / mottled / ashen / cyanotic
- Temperature <36°C
- Capillary refill time ≥ 3 seconds

# RED FLAG SEPSIS

**START PAEDIATRIC PALLIATIVE CARE BUNDLE**

## 04 ANY AMBER FLAG PRESENT?

**IF IMMUNITY IMPAIRED TREAT AS RED FLAG SEPSIS**

- Behaving abnormally / not wanting to play
- Parental or carer concern
- Reduced activity / very sleepy
- Moderate tachypnoea (see chart)
- Moderate tachycardia (see chart)
- SpO<sub>2</sub> 90-92% or increased O<sub>2</sub> requirement
- Reduced urine output
- Leg pain or cold extremities
- Temperature 38.5°C+

### 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

Age (years)	Tachypnoea (breaths per minute)		Tachycardia (beats per minute)	
	Severe	Moderate	Severe	Moderate
5	≥29	24-28	≥130	120-129
6-7	≥27	24-26	≥120	110-119
8-11	≥25	22-24	≥115	104-114

Child's Name:  
Staff Name:  
Date/Time:



Your local children's hospice



THE UK SEPSIS TRUST