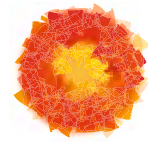


General Practice Sepsis Decision Support Tool



THE UK
SEPSIS
TRUST

To be applied to all non-pregnant adults & young people 12 years and over with fever (or recent fever) symptoms

N.B: there is no systems substitute for clinical experience & acumen, but Red Flag Sepsis will help with early identification of adults & older children with systemic response to infection

1. In the context of presumed infection, are any of the following true?

(common sources: chest, UTI, abdominal organs)

Tick

Patient looks very unwell

Family or carer is very concerned

There is ongoing deterioration

Physiology is abnormal for this patient

N

Low risk of sepsis. Consider other diagnoses.

Use clinical judgement and/or standard protocols.

Give safety netting advice: call 999 if patient deteriorates rapidly, or call 111/ arrange to see GP if condition fails to improve or gradually worsens. Signpost to available resources as appropriate.

N

Y

2. Is ONE Red Flag present?

Tick

New deterioration in GCS/ AVPU

Systolic B.P ≤ 90 mmHg (or ≥ 40 mmHg below normal)

Heart rate ≥ 130 per minute

Respiratory rate ≥ 25 per minute

Needs oxygen to keep SpO₂ 92% (88% in COPD)

Non-blanching rash or mottled/ ashen/ cyanotic

Not passed urine in last 18 hours

Urine output less than 0.5 ml/kg/hr if catheterised

Recent chemotherapy (within last 6 weeks)

N

3. Is any ONE Amber Flag present?

Tick

Relatives worried about mental state/ behaviour

Acute deterioration in functional ability

Immunosuppressed (without recent chemotherapy)

Trauma, surgery or procedure in last 6 weeks

Respiratory rate 21-24 OR dyspnoeic

Systolic B.P 91-100 mmHg

Heart rate 91-130 OR new dysrhythmia

Not passed urine in last 12-18 hours

Tympanic temperature $\leq 36^{\circ}\text{C}$

Clinical signs of wound, device or skin infection

If under 18 & immunity impaired treat as Red Flag Sepsis

Y

Y

Sepsis likely

Use clinical judgment to determine whether patient can be managed in community setting. If treating in the community, consider:

- planned second assessment +/- blood results
- brief written handover to colleagues
- specific safety netting advice

Red Flag Sepsis!

Immediate actions:

Dial 999

Arrange blue light transfer

Administer oxygen to maintain saturations $> 94\%$

Communication:

Write a brief clear handover including observations and antibiotic allergies where present

Ensure Paramedics pre-alert as 'Red Flag Sepsis'