## Sepsis Screening Tool & Care Bundle - Summary Clinical Guideline

Reference No:

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**SEPSIS SCREENING TOOL ACUTE ASSESSMENT** | **AGE 12+**

**PATIENT DETAILS:**

DATE:     TIME:

NAME:

DESIGNATION:

SIGNATURE:

**01 START THIS CHART IF THE PATIENT LOOKS UNWELL OR NEWS2 IS 5 OR ABOVE**

RISK FACTORS FOR SEPSIS INCLUDE:

- ☐ Age > 75
- ☐ Impaired immunity (e.g. diabetes, steroids, chemotherapy)
- ☐ Recent trauma / surgery / invasive procedure
- ☐ Indwelling lines / IVDU / broken skin

**02 COULD THIS BE DUE TO AN INFECTION?**   **YES**

LIKELY SOURCE:

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

**NO** → **SEPSIS UNLIKELY, CONSIDER OTHER DIAGNOSIS**

**03 ANY RED FLAG 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
- ☐ Needs O₂ to keep SpO₂ ≥ 92% (88% in COPD)
- ☐ Non-blanching rash / mottled / ashen / cyanotic
- ☐ Lactate ≥ 2 mmol/l
- ☐ Recent chemotherapy
- ☐ Not passed urine in 18 hours (<0.5ml/kg/hr if catheterised)

**RED FLAG SEPSIS**

**YES** **START** **SEPSIS SIX**

**04 ANY AMBER FLAG PRESENT?**   **NO**

- ☐ Relatives concerned about mental status
- ☐ Acute deterioration in functional ability
- ☐ Immunosuppressed
- ☐ Trauma / surgery / procedure in last 8 weeks
- ☐ Respiratory rate 21-24
- ☐ Systolic BP 91-100 mmHg
- ☐ Heart rate 91-130 or new dysrhythmia
- ☐ Temperature <36°C
- ☐ Clinical signs of wound infection

**FURTHER REVIEW REQUIRED:**

**YES**

- SEND BLOODS AND REVIEW RESULTS
- ENSURE SENIOR CLINICAL REVIEW within 1HR

TIME OF REVIEW: ☐☐:☐☐

ANTIBIOTICS REQUIRED:

☐ Yes   ☐ No

**NO AMBER FLAGS = ROUTINE CARE / CONSIDER OTHER DIAGNOSIS**

Suitable for printing to guide individual patient management but not for storage    Expiry date: June 24

## SEPSIS SCREENING TOOL - THE SEPSIS SIX | AGE 12+

**PATIENT DETAILS:**

**DATE:**
**NAME:**
**DESIGNATION:**
**SIGNATURE:**

**TIME:**

## COMPLETE ALL ACTIONS WITHIN ONE HOUR

### 01 ENSURE SENIOR CLINICIAN ATTENDS
NOT ALL PATIENTS WITH RED FLAGS WILL NEED THE 'SEPSIS 6' URGENTLY. A SENIOR DECISION MAKER MAY SEEK ALTERNATIVE DIAGNOSES/ DE-ESCALATE CARE. RECORD DECISIONS BELOW
NAME:                    GRADE:

TIME ☐☐:☐☐

### 02 OXYGEN IF REQUIRED
START IF O₂ SATURATIONS LESS THAN 92% - AIM FOR O₂ SATURATIONS OF 94-98%
IF AT RISK OF HYPERCARBIA AIM FOR SATURATIONS OF 88-92%

TIME ☐☐:☐☐

### 03 OBTAIN IV ACCESS, TAKE BLOODS
BLOOD CULTURES, BLOOD GLUCOSE, LACTATE, FBC, U&Es, CRP AND CLOTTING
LUMBAR PUNCTURE IF INDICATED

TIME ☐☐:☐☐

### 04 GIVE IV ANTIBIOTICS
MAXIMUM DOSE BROAD SPECTRUM THERAPY
CONSIDER: LOCAL POLICY / ALLERGY STATUS / ANTIVIRALS

TIME ☐☐:☐☐

### 05 GIVE IV FLUIDS
GIVE FLUID BOLUS OF 20 ml/kg if age <16, 500ml if 16+
NICE RECOMMENDS USING LACTATE TO GUIDE FURTHER FLUID THERAPY

TIME ☐☐:☐☐

### 06 MONITOR
USE NEWS2. MEASURE URINARY OUTPUT: THIS MAY REQUIRE A URINARY CATHETER REPEAT LACTATE
AT LEAST ONCE PER HOUR IF INITIAL LACTATE ELEVATED OR IF CLINICAL CONDITION CHANGES

TIME ☐☐:☐☐

## RED FLAGS AFTER ONE HOUR – ESCALATE TO CONSULTANT NOW

**RECORD ADDITIONAL NOTES HERE:**
e.g. allergy status, arrival of specialist teams, de-escalation of care, delayed antimicrobial decision making, variance from Sepsis Six

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SEPSIS
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