SEPSIS SCREENING TOOL GENERAL PRACTICE

PREGNANT OR LIP TO 4 WEEKS POST-PREGNANCY

1 START THIS CHART IF THE PATIENT LOOKS UNWELL OR PHYSIOLOGY IS ABNORMAL

RISK FACTORS FOR SEPSIS INCLUDE:

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

02 COULD THIS BE UNDESTION?

LIKELY SOURCE:

Respiratory	Urine	☐ Infected caesarean / perineal wour	١d
Breast abscess	Abdominal pain / distensi	on Chorioamnionitis / endometritis	

NO

SEPSIS UNLIKELY, CONSIDER OTHER DIAGNOSIS

03 ANY RED FLAG PRESENT?

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 O_2 (40% or more) to keep $SpO_2 \ge 92\%Non-$

blanching rash / mottled / ashen / cyanotic

Not passed urine in 18 hours (<0.5ml/kg/hr if catheterised)

RED FLAG SEPSIS START GP BUNDLE

O 4 ANY AMBER FLAG PRESENT?

IF IMMUNITY IMPAIRED TREAT AS RED FLAG SEPSIS

Acute deterioration in functional abilityFamily report mental status change

Respiratory rate 21-24

Heart rate 100-129 or new dysrhythmia

Systolic BP 91-100 mmHg

Has had invasive procedure in last 6 weeks

☐ Temperature < 36°C
</p>

Has diabetes or impaired immunity

☐ Close contact with GAS

Prolonged rupture of membranes

Offensive vaginal discharge

Not passed urine in 12-18 h (<0.5ml/kg/hr if catheterised)

USE CLINICAL JUDGEMENT TO DETERMINE WHETHER PATIENT CAN BE MANAGED IN COMMUNITY SETTING. IF TREATING IN THE COMMUNITY CONSIDER:

YES

- PLANNED SECOND ASSESSMENT +/- BLOODS
- SPECIFIC SAFETY NETTING ADVICE

NO AMBER FLAGS: ROUTINE CARE AND GIVE SAFETY-NETTING ADVICE:

CALL 111 IF CONDITION CHANGES OR DETERIORATES.
SIGNPOST TO AVAILABLE RESOURCES AS APPROPRIATE



Slurred speech or confusion
Extreme shivering or muscle pain
Passing no urine (in a day)
Severe breathlessness
'I feel I might die'
Skin mottled, ashen, blue or very pale

GP RED FLAG BUNDLE: DIAL 999 AND ARRANGE BLUE LIGHT TRANSFER IF TRANSIT TIME >1H GIVE IV ANTIBIOTICS

Ensure communication of 'Red Flag Sepsis' to crew. Advise crew to pre-alert as 'Red Flag Sepsis'. Where possible a written handover is recommended including observations and antibiotic allergies.



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