Adult SEPSIS

primary healthcare screening tool

To be applied to all adults over 16 years.

In the context of presumed Low risk of sepsis, consider other diagnosis. infection, are any of the following true: □ looks sick ☐ fever (hot or cold) rigors or general malaise ☐ re-presentation within 48 hours ☐ immuno compromised Give safety net advice and consider follow up □ malnourished or frail within 12 hours. ☐ indwelling medical device □ 65 years+ If deterioration, arrange transfer to hospital. ☐ Aboriginal or Torres Strait Islander peoples. YES NO Is an AMBER Flag present: **Is ONE Red Flag present:** □ respiratory rate >25 BPM ☐ respiratory rate 21-24 BPM □ temperature <35.5 or >38 ☐ heart rate 90-120BPM ☐ heart rate >130BPM □ systolic BP 90-99 NO □ systolic BP <90 or drop of >40 from □ not passed urine last 12 hours baseline ☐ fever (hot or cold) rigors or general malaise □ not passed in last urine 18 hours ☐ acute deterioration in functional ability ☐ new O2 requirement to keep oxygen ☐ recent trauma or surgery. saturation ≥92% □ non blanching rash or mottled/ ashen skin YES □ new or altered mental state. **High risk for sepsis:** YES Use clinical judgement to determine if they

Red Flag Sepsis:

- arrange immediate hospital transfer
- administer 02
- alert QAS and advise in handover that sepsis is suspected.

Use clinical judgement to determine if they can stay in a community, if unsure contact the Virtual Emergency Care Service on 1300 847 833 (clinicians only).

If treating in the community, consider:

- planned follow up in 12 hours
- provide sepsis information to patient/family
- if deterioration, arrange urgent transfer to hospital.

