

Always exercise clinical judgement



NEWS ≥ 4
(or ≥ 5 on O_2)

"Think SEPSIS"



Clinical suspicion of infection?

YES



Sepsis Screen Required

Identify which of the following 4 groups the patient belongs to and escalate appropriately.

1

**At risk of
neutropenia**

2

**Any 1 sign of
acute organ
dysfunction**

3

**SIRS Response,
i.e. ≥ 2 SIRS criteria**

**+ ≥ 1
co-morbidity**

4

**+ No
co-morbidities**

START SEPSIS FORM

**Medical review within minimum 30min
(follow NEWS escalation protocol)**

**Follow usual NEWS
escalation protocol**

SEPSIS 6 (WITHIN 1 HOUR)

TAKE 3

- 1. CULTURES:** Before giving antimicrobials.
- 2. BLOODS:** Lactate, FBC, U&E and others as indicated.
- 3. URINE OUTPUT:** Assess as part of volume/perfusion status assessment.

GIVE 3

- 1. OXYGEN:** Titrate sats to 94-98% or 88-92% as appropriate.
- 2. FLUIDS:** To ensure perfusion. Start pressors early if required.
- 3. ANTIMICROBIALS:** According to local guidelines.

WITHIN 3 HOURS:

- Review response to treatment.
- Review diagnosis and treatment with blood and other test results.
- Diagnose Sepsis/Septic shock and document as appropriate.
- Escalate as indicated.
- Don't forget source control!