



Adult Sepsis screening and action tool

To be applied to all **non-pregnant adults and children over 15 years** with fever (or recent fever) symptoms, or who are clearly unwell with any abnormal observations

Patient label

Name

NHI DOB

Address

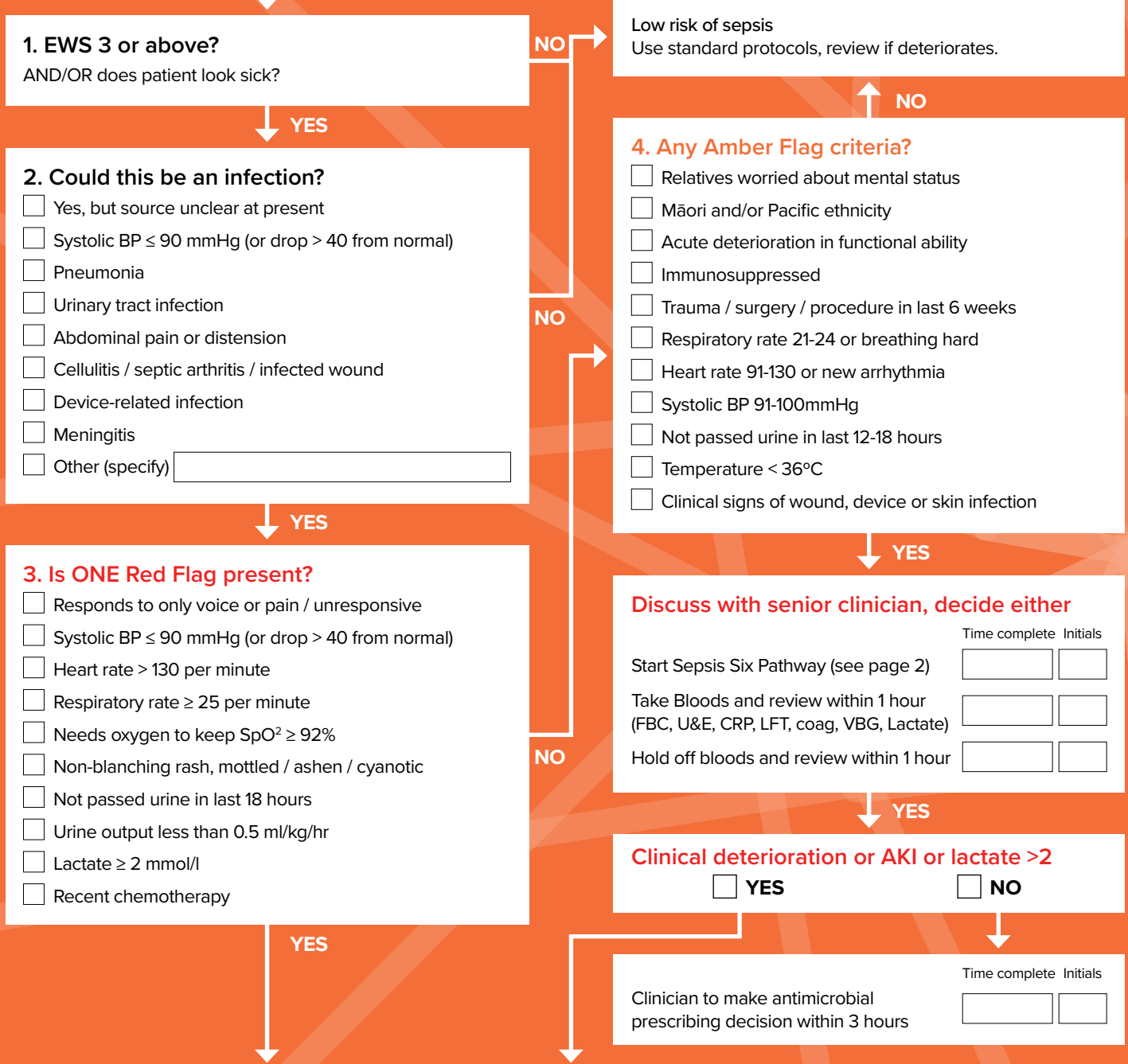
Form completed by

Date (DD/MM/YY) Name (Print)

Designation Signature

Important

Is a Last Days of Life Care Plan in place? Yes Is escalation clinically inappropriate? No Initials Discontinue pathway



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Patient label

Name	<input type="text"/>	
NHI	<input type="text"/>	DOB <input type="text"/>
Address	<input type="text"/>	

Action (complete ALL within 1 hour)

1. Administer oxygen

Aim to keep saturations >94%
(88-92% if at risk of CO2 retention e.g. COPD)

Time complete

Initials

2. Take blood cultures

At least a peripheral set. Consider e.g. CSF, urine, sputum
Think source control! Call surgeon/radiologist if needed

Time complete

Initials

3. Give IV antibiotics

Refer to hospital antimicrobial guideline
Consider allergies prior to administration

Time complete

Initials

4. Give IV fluids

If hypotensive/lactate > 2mmol/l, 500ml stat
Repeat if clinically indicated – do not exceed 30ml/kg

Time complete

Initials

5. Check serial lactates

If lactate > 4mmol/l, call Critical Care and recheck VBG after each 10ml/kg IV fluid challenge

Time complete

Initials

6. Get senior help

Arrange urgent investigation and referrals
Document follow-up plan

Time complete

Initials

After delivering the Sepsis Six, does patient still have any of the following?

- systolic BP < 90 mmHg
- reduced level of consciousness despite resuscitation
- respiratory rate over 25 breaths per minute
- lactate not reducing or > 2mmol/l

If escalation remains clinically appropriate. Refer to hypoperfusion pathway