

Prehospital adult sepsis screening and action tool

To be applied to all non-pregnant adults and children over 15 years

Patient label

Name

NHI DOB

Address

1. In the context of presumed infection, are any of the following true:

(common sources: chest, UTI, abdominal organs)

Tick

- Patient looks very unwell
- Family or carer is very concerned
- There is ongoing deterioration
- Physiology is abnormal for this patient

NO

Low risk of sepsis. Consider other diagnoses. Use clinical judgement and/or standard protocols.

Give safety net advice and consider follow-up with GP review in 24-48 hours. If deterioration, arrange transfer to hospital.

↑ NO

YES

2. Is ONE RED FLAG present?

Tick

- New deterioration in GCS/AVPU
- Systolic BP ≤ 90 mmHg (or ≥ 40 mmHg below normal)
- Heart rate ≥ 130 per minute
- Respiratory rate ≥ 25 per minute
- Needs oxygen to keep SpO₂ $> 92\%$ ($> 88\%$ in COPD)
- Non-blanching rash or mottled/ashen/cyanotic
- Not passed urine in last 18 hours or more
- Urine output less than 0.5 ml/kg/hr if catheterised
- Recent chemotherapy (within last 6 weeks)

NO

3. Is ANY AMBER FLAG present?

Tick

- Relatives worried about mental state/behaviour
- Māori and/or Pacific ethnicity
- Acute deterioration in functional ability
- Immunosuppressed (without recent chemotherapy)
- Trauma, surgery or procedure in last 6 weeks
- Respiratory rate 21-24 OR dyspnoeic
- Systolic BP 91-100mmHg
- Heart rate 91-130 OR new dysrhythmia
- Not passed urine in last 12-18 hours
- Tympanic temperature ≤ 36 °C
- Clinical signs of wound, device or skin infection

If under 18 and immunity impaired treat as Red Flag Sepsis

YES

Sepsis likely

Use clinical judgement to determine whether patient can be managed in community setting. If treating in the community, consider:

- Planned second assessment after 24-48 hours
- Written handover to colleagues family/whānau
- If deterioration, arrange transfer to hospital

YES

RED FLAG SEPSIS!

Immediate actions:

- Arrange immediate hospital transfer
- Administer oxygen to maintain saturations $> 94\%$ (88-92% in COPD)
- Apply local/national guidelines as necessary

Communication:

- Write a brief clear handover including observations and antibiotic allergies where present
- Alert ambulance crew to "Red Flag Sepsis"