Follow usual NEWS escalation protocol

Clinical suspicion of infection?

YES

SIRS Response, i.e. ≥2 SIRS criteria

+ ≥1 co-morbidity

+ No co-morbidities

Follow usual NEWS escalation protocol

START SEPSIS FORM

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

At risk of neutropenia

Any 1 sign of acute organ dysfunction

Sepsis Screen Required

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

NEWS ≥4 (or ≥5 on O₂)

"Think SEPSIS"

Always exercise clinical judgement
# 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 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!