



# "Think SEPSIS" at Triage

(Exercising Clinical Judgment)

## Clinical suspicion of infection?

**YES**



### Sepsis Screen Required

Identify which of the following 4 groups the patient belongs to and assign appropriate triage category.



EMERGENCY MEDICINE

#### At risk of neutropenia

(bone marrow failure, autoimmune disorder, treatment including but not limited to chemo/radiotherapy).

**1**

Follow the '**Febrile Neutropenia**' pathway if on chemo/radiotherapy.

Note: these patients may present without fever

#### Any 1 of the following signs of acute organ dysfunction:

**2**

- Altered mental State
- RR > 30
- O<sub>2</sub> sat < 90%
- SBP < 100
- HR > 130
- Mottled or ashen appearance
- Non-blanching rash
- Other organ dysfunction

#### ≥ 2 SIRS criteria

**3**

- RR ≥ 20
- HR > 90
- T > 38.3°C or < 36°C
- BSL > 7.7 mmol/l (in non-diabetic patient)

PLUS ≥ 1 co-morbidity

**4**

#### No co-morbidity

These patients may require re-triage and sepsis screening if they deteriorate prior to medical review or if lactate >2.

Category 2

Category 3

**START SEPSIS FORM**

#### Co-morbidities associated with increased mortality with Sepsis

Age ≥ 75 years | Frailty | Diabetes Mellitus | Cancer | COPD | Chronic kidney disease | Chronic liver disease  
HIV/ AIDS infection | Immunosuppressed | Major trauma and surgery in the past 6 weeks