

Holes Punched as per AS2828.1: 2019 BINDING MARGIN - NO WRITING

RECO

#### FAMILY NAME MRN **NSW Health GIVEN NAME** ☐ FEMALE ☐ MALE M.O. Facility: **ADDRESS PAEDIATRIC** LOCATION / WARD **SEPSIS PATHWAY** COMPLETE ALL DETAILS OR AFFIX PATIENT LABEL HERE

Use for patients from 28 days corrected age to 16 years in any clinical setting to support recognition and management of sepsis

Babies up to 28 days corrected age use CEC Neonatal Sepsis Pathway

Use febrile neutropenia guideline where relevant

COULD IT BE SEPSIS?  Sepsis is infection with organ dysfunction and is a medical emergency  Does the patient have any signs of INFECTION or history / evidence of fever or hypothermia,  PLUS ANY of the following:	
Change in behaviour or decreased level of consciousness	☐ Re-presentation or worsening with same illness ☐ Under 3 months of age
Persistent tachycardia	☐ Central line or invasive device
Severe unexplained pain	Recent surgery, burn, wound
Non-blanching rash	☐ Aboriginal and Torres Strait Islander people

Commence A-G systematic assessment and document a full set of vital sign observations including blood pressure

### Does the patient have ANY features of SEVERE ILLNESS?

Laboratory features of severe illness / organ dysfunction include acidosis, low platelets, elevated creatinine, elevated CRP or coagulopathy

### Any of the following RED ZONE criteria: Respiratory rate OR distress Heart rate Blood pressure (or drop in diastolic pressure or widening pulse pressure) Lactate ≥ 4 mmol/L Level of consciousness ACVPU

Call a RAPID RESPONSE

(as per local CERS)

# Any of the following YELLOW ZONE criteria:

Respiratory rate OR distress

Heart rate

Blood pressure

Central capillary refill ≥ 3 seconds

Lactate 2.0 to 3.9 mmol/L

Change in behaviour



Call for a **CLINICAL REVIEW** within 30 minutes (as per local CERS) AND consult with the SENIOR CLINICIAN

Does the senior clinician consider the patient has sepsis?

# **ESPOND**

### **PROBABLE SEPSIS**

(with or without signs of shock)

- Resuscitate (over page)
- Treat within 60 minutes

## **POSSIBLE SEPSIS**

(no signs of shock)

- Investigate
- Treat within 3 hours

### SEPSIS UNLIKELY

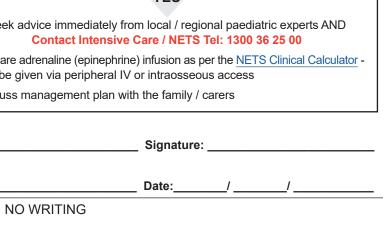
- Consider other causes of deterioration
- Reconsider sepsis if the patient deteriorates

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**NO WRITING** 

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