

Patient	label	
Name		
NHI	DOB	
Address		

Adult Sepsis screening and action tool		DOB			
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	Addre	ess			
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					
1. EWS 3 or above? AND/OR does patient look sick?	NO	Low risk of sepsis Use standard protocols, review if deteriorates.			
↓ YES		T NO			
2. Could this be an infection? Yes, but source unclear at present Systolic BP ≤ 90 mmHg (or drop > 40 from normal) Pneumonia Urinary tract infection Abdominal pain or distension Cellulitis / septic arthritis / infected wound Device-related infection Meningitis Other (specify)	NO	4. Any Amber Flag criteria? Relatives worried about mental status Māori and/or Pacific ethnicity Acute deterioration in functional ability Immunosuppressed Trauma / surgery / procedure in last 6 weeks Respiratory rate 21-24 or breathing hard Heart rate 91-130 or new arrhythmia Systolic BP 91-100mmHg Not passed urine in last 12-18 hours Temperature < 36°C Clinical signs of wound, device or skin infection			
YES YES					
3. Is ONE Red Flag present? Responds to only voice or pain / unresponsive Systolic BP ≤ 90 mmHg (or drop > 40 from normal) Heart rate > 130 per minute Respiratory rate ≥ 25 per minute Needs oxygen to keep SpO² ≥ 92% Non-blanching rash, mottled / ashen / cyanotic	NO	Discuss with senior clinician, decide either Time complete Initials Start Sepsis Six Pathway (see page 2) Take Bloods and review within 1 hour (FBC, U&E, CRP, LFT, coag, VBG, Lactate) Hold off bloods and review within 1 hour			
Not passed urine in last 18 hours		YES			
Urine output less than 0.5 ml/kg/hr Lactate ≥ 2 mmol/l Recent chemotherapy		Clinical deterioration or AKI or lactate >2 VES NO			
YES		Clinician to make antimicrobial prescribing decision within 3 hours			

Red Flag Sepsis! Start Sepsis Six pathway NOW (see page 2)

This is time critical, immediate action is required.





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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
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	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