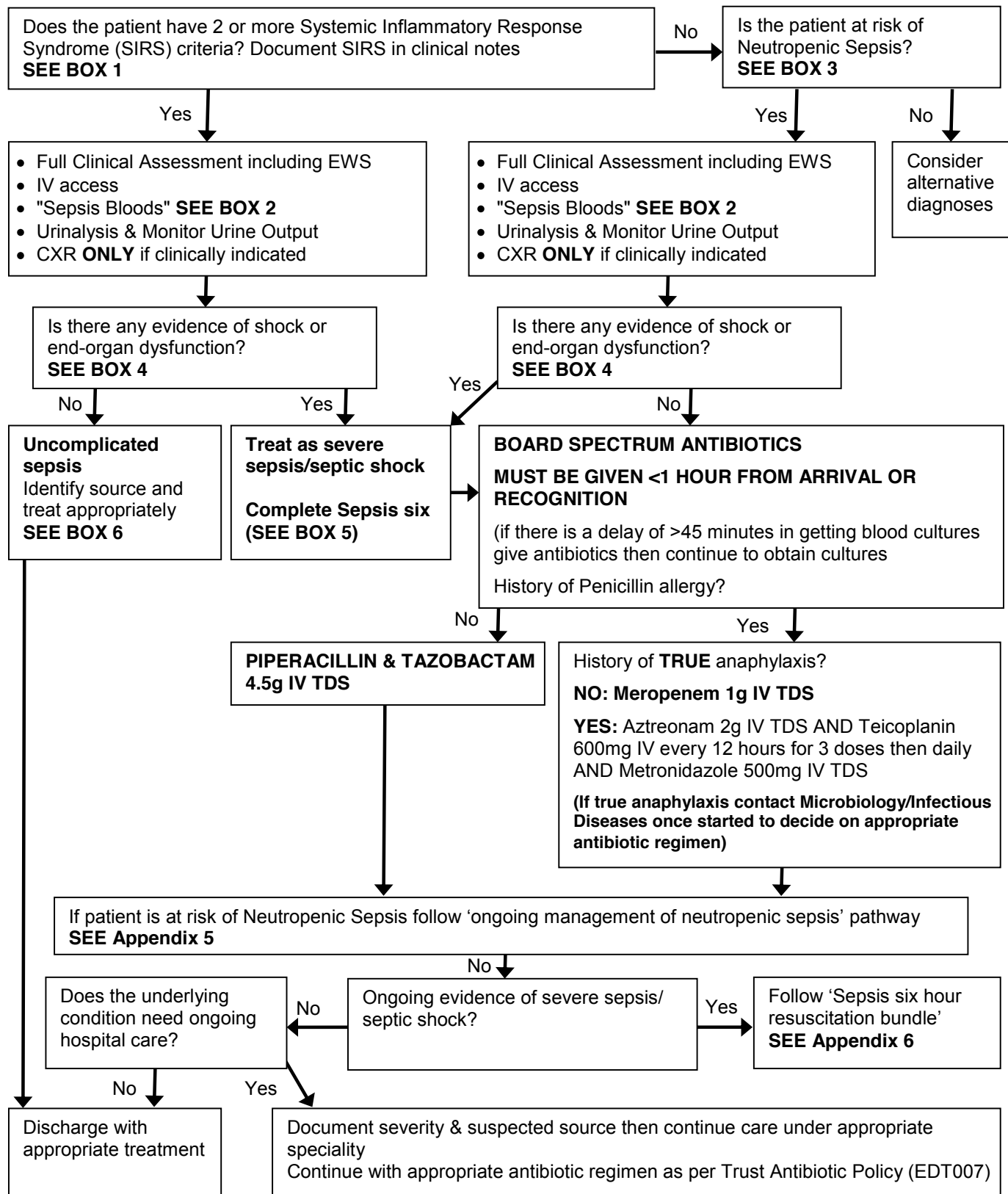


Appendix 3 – Initial Management

The Pennine Acute Hospitals **NHS**
NHS Trust

Initial Hour Management of Adult Patients with Suspected Sepsis (Including Neutropenic Sepsis)



Appendix 3 continued

BOX 1**SIRS CRITERIA**

- HR >90bpm
- RR >20/min
- Temp <36 or >38.3°C
- WCC <4 or >12
- BM >7.7 (non diabetic)
- New Confusion

BOX 2**'SEPSIS BLOODS'**

- FBCs, U&Es, LFTs, Coag, Glucose, CRP
- VBG & Lactate
- Peripheral Blood Cultures
- Blood cultures from indwelling lines if present

BOX 3**Risk of Neutropenic Sepsis**

- Up to 6 weeks post chemotherapy
- Immunosuppression therapy
- Leukaemia
- Myelodysplasia
- Lymphoma
- Autoimmune Disease

AND

- Temp >37.5°C OR unexplained illness (e.g. diarrhea, mucositis, rigors)

Fever may be absent, particularly if shocked, on steroids, or taking antipyretics

BOX 4**Evidence of end-organ dysfunction**

(if it is likely to take >30mins to get a lactate result DO NOT WAIT, treat as severe sepsis)

- **Tissue Hypoperfusion**
(Lactate >2)
- **Neurological Dysfunction**
(GCS <15)
- **Renal Dysfunction**
(Cr >177µmol/l or <0.5ml/hr UO over 2 hours)
- **Hepatic Dysfunction**
(Bilirubin >34µmol/l)
- **Respiratory Dysfunction**
(increased O₂ requirement to keep SpO₂ >90%)
- **Cardiac Dysfunction**
(SBP <90mmHg or MAP <65mmHg OR SBP>40mmHg lower than normal BP)
- **Haematological Dysfunction**
(Pits <100, INR >1.5 or APTT >60s)

BOX 5**SEPSIS SIX**

- High Flow Oxygen
- Take blood cultures (preferably before antibiotics)
- Give broad spectrum Antibiotics (see flowchart overleaf)
- IV fluid challenge (30ml/kg **Crystalloid**)
- Measure lactate & Hb)
- Measure hourly urine output

Document using Appendix 4:
First Hour Sepsis Six checklist

BOX 6**Uncomplicated Sepsis**

- Document suspected source <2 hours of presentation
- Oxygen as per BTS Guidelines
- Give appropriate focused antibiotics as per trust policy <3 hours of presentation
- IV fluid as per clinical volume status (if needing admission, start 2nd litre of crystalloid <4 hours of presentation unless contraindicated)
- Continue to monitor urine output