

Child presents with signs and/or symptoms of infection

- **Think sepsis** even if they do not have a high temperature
- Be aware that children with sepsis may have non-specific, non-localising presentations
- **Pay particular attention to concerns expressed by the child and family/carer**
- Take particular care in the assessment of children, who might have sepsis, who are unable, or their parent/carer is unable, to give a good history

Consider additional vulnerability to sepsis:

- The very young (<1yr)
- No immunised
- Recent (< 6 weeks) trauma or surgery or invasive procedure
- Impaired immunity due to illness or drugs
- Indwelling lines/catheters, any breach or skin integrity e.g. any cuts, burns, blisters or skin infections

If as risk or neutropenic sepsis – refer to secondary care



Perform assessment to identify likely source of infection, risk factors and clinical indicators or concern (see below)

Sepsis not suspected | **Suspected sepsis**

No Moderate or High Risk Criteria met

Clinical Action

When a definitive condition affecting the child can be identified, use clinical judgement to treat using the NICE guidance relevant to their diagnosis when available. If clinical concern of possible sepsis remains, seek advice even if trigger criteria not met.

Safety - Netting

- Arrange follow up and re-assessment as clinically appropriate
- Provide information about symptoms to monitor and how to access the medical care
- Consider if there are any issues relating to safeguarding that require action.

[Fever Safety netting SHEET](#)

Stratify risk of severe illness and death from sepsis using risk criteria												
Moderate to high risk					RISK CRITERIA	High Risk						
Look for 2 of:												
<1	1-2	3-5	6-11	12-17	AGE (yr)	<1	1-2	3-5	6-11	12-17	Any CYP	
50-59	40-49	30-39	22-29	21-24	Resp Rate (brpm)	>60	>50	>40	>30	>25		
< 91% in air or increased oxygen requirement					O ₂ sat		<90% in air or increased oxygen requirement					
150-159	140-149	130-139	120-129	90-100	Heart Rate (bpm)	>160	>150	>140	>120	>100	<60	
3-6 months > 39° c					Temperature		Less than 3 months (or oncology patient) >38°C					<36° C
Plus 1 of												
<ul style="list-style-type: none"> • Not responding normally to social cues e.g. no smile • Wakes only for prolonged stimulation • Decreased activity • Poor feeding in infants • Parent or carer concern that the child is behaving differently than usual • Limb pain 					Activity /Behaviour		<ul style="list-style-type: none"> • Altered behaviour or mental state <ul style="list-style-type: none"> ○ No response to social cues ○ Does not wake or if roused does not stay awake • Weak, high pitched or continuous cry • Appears ill to a healthcare professional 					
<ul style="list-style-type: none"> • Nasal flaring 					Respiratory		<ul style="list-style-type: none"> • Grunting • Apnoea 					
<ul style="list-style-type: none"> • CRT >= 3 seconds or flash fill • Pale or flushed • Pallor or skin, lips or tongue • Cold hands or feet • Dry mucous membranes • Reduced urine output 					Circulation/ Hydration		<ul style="list-style-type: none"> • Appearance of skin: mottled, ashen or cyanotic • Cyanosis of lips or tongue 					
					Skin		<ul style="list-style-type: none"> • Non-blanching rash of skin 					

RECORD ALL CLINICAL FINDINGS

