Use documented

## Paediatric Sepsis Pathway Screening and Recognition tool explained

CEWT score to ASK YOURSELF Time that nurse ascertain if any features of severe fills in the Queensland **COULD THIS BE** screening tool illness are present Government (not time of 🚼 PAEDIATRIC triage or Sepsis Pathway admission time) Still suspect sepsis, irrespective of nil features of severe Clinical pathways never replace clinical judgement. Use this pathway in children younger than 16 years. illness? 16-18 year olds may use the adult or paediatric sepsis clinical pathway Sepsis is infection with organ dysfunction. Sepsis is a MEDICAL EMERGENCY. Individual Obtain senior SCREEN AND RECOGNISE systems medical review and (24hr) Screening initiated: assessment conduct further assessment to Could it be sepsis? Signs of infection or history and evidence of fever or hypothermia E.g. combined ensure PLUS ANY of the following respiratory comprehensive Looks sick or toxic Altered behaviour or reduced level of consciousness score of 3 or Parental, carer or clinician concern Age younger than 3 months examination occurs & Re-presentation with same illness Sepsis admission within the last 30 days more for rate a plan is in place for mmunocompromised\* Aboriginal or Torres Strait slander person and distress = a appropriate care. \*For Oncology patients refer to 'Management of Suspected Neutropenic, Sepsis Pathway (SW796)\* WRITE IN THIS BINDING MARGIN feature of severe illness Document full set of observations in CEWT including blood pressure and AVPU Rule sepsis out early, don't rule it in when Does the patient have ANY features of severe illness? the patient is critically Altered AVPU Severe respiratory distress, tachypnoea or apnoea (CEWT respiratory score 3) Severe tachycardia (CEWT heart rate score 3) Poor skin perfusion or cold extremities unwell. Deterioration ☐ Hypotension (CEWT blood pressure score >2) Any feature of is children can be Other laboratory features of severe illness (if known): subtle severe illness Low platelets Elevated creatinine ☐ Elevated INR or bilirubin These laboratory tests are not mandatory met? Immediate medical review Do you still suspect sepsis? and consider a NO. Normal vital signs and sepsis code Patient UNLIKELY t Patient is highly likely to HAVE sepsis or Patient MAY have sepsis no features of severe SEPSIS Targeted history and examination have sepsis now septic shock Immediate senior medical review or call Obtain senior medical review or Reassess and esca illness? Retrieval Services Queensland (RSQ) as indicated consider calling RSQ Repeat vital signs and 1300 799 127 Clinician has Immediate monitoring in close observation area assessment as diagnosed ode: 1NY42188 THEN clinically indicated. sepsis? Select ☐ Give Paediatric Sepsis Senior medical review attended: (24hr) Continually re-assess the appropriate Checklist to parent or carer (tear off back page) your patient. Does the senior clinician think sepsis is likely? box and Yes - sepsis with shock Yes - sepsis without shock commence ¥ YES Remember, sepsis is resuscitation Sepsis has been diagnosed by a senior medical doctor subtle and small steps 1-6 on Start resuscitation and treatment for sepsis NOW (next page changes in patient Escalate to MET, PICU, ICU or RSQ 1300 799 127 page 2 condition and/or signs immediately. Signature Log Every person documenting in this clinical pathway must supply a sample of their initials and signature below of deterioration may Signature occur after initial assessment. Re-screen and escalate care at any Page 1 of 6 stage of the patients journey. Nurse or doctor can complete this

Scan the QR code for access to clinical guidelines, tools and educational resources
For more information contact the Queensland Paediatric Sepsis Program (QPSP) team: paediatricsepsis@health.qld.gov.au



