

Fever/Sepsis/Infection

Observations/NEWS on TRAK

Read Patient Alerts



- ☒ Temperature
- ☒ Pulse
- ☒ Blood pressure
- ☒ Respiratory rate

- ☒ Oxygen saturations (on air or O2 %)
- ☒ Blood glucose
- ☒ AVPU

Investigations

Discuss with senior staff; not all patients will require all investigations.

Consider:

- IV access
- Sepsis bloods (as per order set): FBC, U&E, LFTs, CRP, lactate
- Blood cultures – if meets sepsis criteria
- Venous blood gas
- ECG
- Urinalysis (MSU if meets sepsis criteria)

SEPSIS 6 – complete all actions within 1 hour

1. Inform senior clinician
2. Give oxygen if required
3. Send bloods including cultures
4. Give IV antibiotics, think source control
5. Give IV fluids if appropriate
6. Monitor (NEWS2, urine output, lactate)



Treatments

Consider:

- IV Fluids
- Give oxygen if hypoxic - Aim for sats >94% (If scale 2, aim 88-92%)
- Discuss with senior re antibiotics
- Antipyretic

Red Flags

- **Oncology patient:** Risk of neutropenic sepsis (requires reverse barrier nursed)
- **Foreign travel:** Follow fever in the returning traveller protocol (Overleaf/Right decisions)
- **Shock:** Inadequate delivery of oxygen to the tissues. Classic signs include sweating, pallor, tachycardia, hypotension and reduced conscious level.
- **Special risk of infection:** Known exposure to a dangerous pathogen.
- **Possible sepsis:** Suspect sepsis in patients who present with altered mental state, low blood pressure (systolic <100) or raised respiratory rate (>22).

Patient Presentation Cards			Version 1	Page 1 of 1		
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