

CHBC Provincial Pediatric Sepsis Screening Tool

Sepsis is a **MEDICAL EMERGENCY**; Early Recognition and Treatment is Imperative for Survival

ARE THERE SIGNS OF SUSPECTED SEPSIS? (patient has 2 or more of the following in the context of infection)

- Looks sick or toxic (feels cold to touch, blotchy, blue or pale skin)
- Parental/caregiver concern
- Critical heart rate
- Temperature greater than 38° Celsius or less than 36° Celsius
- Altered mental state (drowsy, difficult to wake, irritable or confused)
- Tachypnea, increased work of breathing, cough, grunting, chest pain
- Decreased feeding
- Reduced urine output or other signs of dehydration
- Abdominal pain, distension, vomiting, diarrhea
- Joint pain or swelling, rash or other signs of skin infection

AND/OR


IS THE CHILD AT HIGH RISK OF COMPLICATIONS FROM SEPSIS?

- Age less than 3 months or born premature
- Immunocompromised
- Cardiac, respiratory or neuromuscular disease
- Significant developmental delay
- Indwelling vascular access or medical device
- Recent surgery or hospitalization
- Recent inpatient episode of sepsis (within 6-12 weeks)
- Intravenous recreational drug use

NO

AND/OR

REMAIN ALERT

- Continue to monitor as per your health authority/ agency guidelines and clinical judgement
- Re-screen for sepsis as per BC PEWS prompts
- Notify Most Responsible Practitioner of any change or deterioration in patient condition
- Advise caregiver to notify Health Care Provider if any change in child's status
- Provide ["Could It Be Sepsis"](#)  handout to parent or caregiver

ARE THERE SIGNS OF SEPTIC SHOCK?

Do not wait for hypotension to diagnose septic shock

- Looks sick or toxic
- Altered mental status (increased lethargy, hypotonic)
- Tachycardia
- Capillary refill time greater than 3 seconds
- A weak thready pulse
- Decreased peripheral pulses
- Temperature greater than 38° Celsius or less than 36° Celsius
- Oxygen saturations less than 92% in children without known cyanotic heart disease
- Decreased urine output or other signs of dehydration

DON'T DELAY - TREAT FOR SEPSIS OR SEPTIC SHOCK

- Immediately notify Most Responsible Practitioner
- Proceed to [CHBC Provincial Pediatric Sepsis Clinical Care Algorithm](#)
- Consult local Pediatrician on-call; or CHARLiE via Zoom or phone; or higher level of care center via PTN