

Suspected Meningitis & Meningococcal Disease

Quick-reference for community pharmacists · Aligned with NICE NG240 (2024)

■ EMERGENCY: Call 999 immediately if ANY apply

- Non-blanching rash: petechiae or purpura (remains visible through pressed glass)
- Drowsiness, confusion, or difficulty waking
- Seizures
- Signs of poor circulation: cold hands and feet, fast breathing, or severe limb pain
- Rapidly worsening illness, even if no rash yet (rash may be absent early)

Glass test: press a clear glass firmly against the rash; a non-blanching rash remains visible through the glass. Note: harder to see on darker skin; check palms, soles, inner wrists, and conjunctivae. Keep patient under observation while waiting; call 999 again if they deteriorate.

■ SUSPECTED MENINGITIS: A&E; immediately (or 999 if cannot travel safely)

- Severe headache with marked neck stiffness and/or photophobia, even if currently stable
- Any genuine clinical suspicion of meningitis or meningococcal disease
- Advise immediate self-transfer to A&E; or call 999 if they cannot get there safely

NICE NG240 (2024): Do not refer to GP or advise NHS 111 callback. Suspected meningitis or meningococcal disease requires emergency hospital transfer; the condition can deteriorate rapidly within hours.

✓ MORE LIKELY BENIGN: Self-care with safety-netting

- History clearly consistent with mild viral illness
- No genuine suspicion of meningitis or meningococcal disease
- OTC analgesia, rest, and hydration as appropriate

Safety-net: advise the patient to seek urgent help (or call 999) if a rash develops, symptoms worsen rapidly, confusion or drowsiness appears, or they become difficult to wake.

Feature	More likely benign	Red flag ■
Onset	Gradual onset over days	Sudden or rapidly worsening within hours
Headache	Diffuse, relieved by analgesia	Severe, worst-ever, progressive
Neck stiffness	Mild, tension-type	Marked; chin-to-chest difficult or impossible
Photophobia	Mild; prefers dimmer light	Severe; bright light intolerable
Rash	Blanches fully on pressure	Non-blanching petechiae or purpura
Conscious level	Alert and orientated	Drowsy, confused, or difficult to wake
Other	Sore throat, cough, runny nose	Seizures; cold limbs; fast breathing; severe limb pain

Key reminders: No rash does not mean no meningitis: a non-blanching rash is a late sign and may be absent early. Stable does not mean safe: NICE NG240 mandates emergency hospital transfer for any suspected case. Act early: bacterial meningitis can progress from early symptoms to critical illness within hours. If in doubt, call 999.