

Sepsis Recognition in the Pharmacy

UK Sepsis Trust (2023) | NICE NG51 (updated 2024)

■ ACTION: Call 999 Immediately

- Confusion, drowsiness, agitation, or reduced level of consciousness with infection
- Fast, laboured, or shallow breathing; unable to speak in full sentences
- Mottled, pale, blue-tinged, cold, or clammy skin
- Non-blanching rash anywhere on the body
- Passing much less urine than usual, or no urine for a prolonged period
- Appears critically unwell or is deteriorating rapidly
- Child: difficult to wake, floppy, breathing difficulties, or non-blanching rash

Do not ask the patient to make their own way to hospital. Call 999 and stay with them.

Clinical Feature	More Likely Benign	Possible Sepsis
Temperature	Mild fever, otherwise reassuring	Very high OR abnormally low (below 36°C)
Heart rate	Mild increase during illness	Markedly fast or pounding heartbeat
Breathing	Normal rate and effort	Fast, laboured, or cannot speak in sentences
Mental state	Alert and orientated	Confused, drowsy, agitated, or reduced response
Skin	Warm and well perfused	Mottled, pale, clammy, or cold
Urine output	Normal	Much reduced or absent for prolonged period
Overall appearance	Unwell but communicating	Appears seriously unwell or deteriorating

If observations are available, escalate if any of these are present: Respiratory rate above 20/min. SpO2 below 95% on air. Systolic BP below 100 mmHg. Pulse above 90-100 bpm. Temperature above 38°C or below 36°C. New confusion or reduced responsiveness. Multiple abnormal observations with infection should prompt urgent escalation regardless of overall NEWS2 score.

■ ACTION: Refer Same-Day (GP or 111)

- Infection not improving after 48 hours of prescribed antibiotics
- Elderly patient or care home resident with any new infection
- Immunocompromised (chemotherapy, long-term steroids, HIV, post-transplant)
- Diabetic with infection and poorly controlled blood sugar
- Recent surgery or invasive device (catheter, IV line) with infection signs
- Pregnant with suspected urinary tract infection or systemic symptoms

✓ ACTION: OTC Self-Care Appropriate

- Mild, localised infection only (no systemic signs)
- Patient alert, orientated, and comfortable at rest
- Not in a high-risk group (elderly, immunocompromised, pregnant, diabetic)
- Safety-net: return if confusion, fast breathing, weakness, or feeling much worse

Key reminders: You do not need to diagnose sepsis; recognising that a patient with infection appears seriously unwell is enough to act. When in doubt, call 111 for advice or 999 if you are concerned. High-risk groups may deteriorate rapidly even when symptoms initially appear mild.