



Paediatric Emergency Physician TPCH CED

Metro North Hospital and Health Service *Putting people first*

Common presentations to the Children's ED

The Febrile Child Sepsis

Dr. Faye Jordan



TPCH CED – We are here to help!





We cannot offer....





Some things are better managed in the community....



Most common presentations to CED

- Gastroenteritis
- Fever
- URTI/bronchiolitis/asthma
- Viral illness
- Abdominal pain
- Head injury
- Fractures
- Lacerations



Sepsis = infection + organ dysfunction

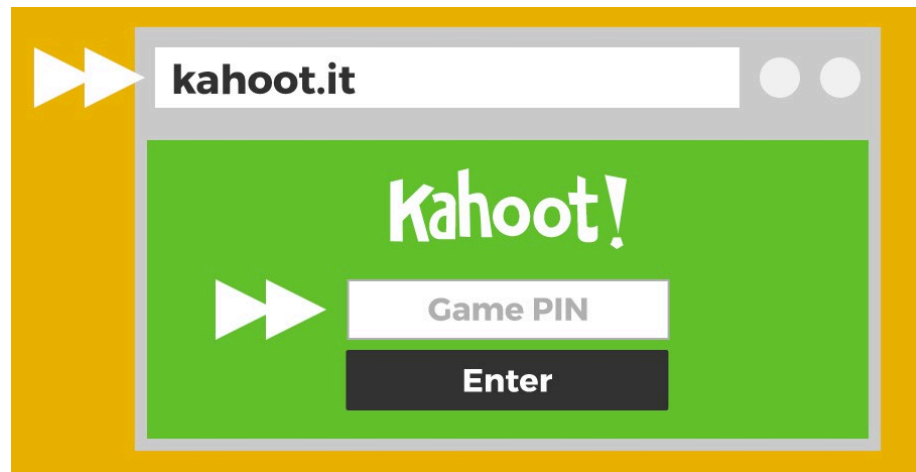
50+ children 
in Australia
die of **sepsis**
each year

Roughly **half** were previously 
healthy children



Early recognition and management
of sepsis saves lives

To begin



- <https://kahoot.com/>



FEVER GUIDELINES

❖ <3m with fever $\geq 38C$

→ risk stratified according to vital signs and appearance

→ unimmunized? Changes everything....

❖ ≤ 28 days with fever $\geq 38C$

→ sepsis until proven otherwise

→ This child needs emergency department review

❖ 29 days to 3 months

→ typical respiratory illness?

→ No respiratory illness → this child needs emergency department review for further investigations

Knowing when to act...

- children compensate physiologically very well – then can decompensate **rapidly**
- The goal is to detect illness **before** the point of decompensation

“Toxic features”

- Lethargy
 - Altered mental state
 - Inconsolable/irritability
 - Respiratory distress
 - Poor perfusion/cyanosis
 - Marked/ persistent tachycardia >180
- * Moderate to severe dehydration
 - * Infant feeding $<50\%$ normal
 - * <4 wet nappies in 24 hours
 - * Seizures
 - * Petechial or purpuric rash

Could this be sepsis?



1

rapid breathing or heart rate



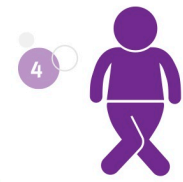
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fever or hypothermia



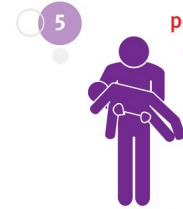
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rash or discoloured skin



4

poor urine output



5

lethargic/floppy



6

unexplained pain or restlessness

"They said it was gastro - I am worried it's something worse"



7

parental or carer concern

Follow the **sepsis** screening tool 



Tick tock
you're on the clock!



Queensland Government

Sepsis Screening Tool

Could this be sepsis?

AND

- Parental concern
- Health care worker concern
- History of fever or hypothermia
- Looks sick
- Altered behaviour or reduced level of consciousness
- Total CEWT score of 4 or more
- Unexplained pain / restlessness
- Deterioration during current illness
- Re-presentation within 48 hours

the risk of sepsis:

sepsis as a cause of

specific Islander / Maori
penia /

- Recent trauma or surgery / invasive procedure / wound within the last 6 weeks
- Chronic disease or congenital disorder

A word about parental concern

SYSTEMATIC REVIEW ARTICLE

Front. Pediatr., 03 May 2019 | <https://doi.org/10.3389/fped.2019.00161>



The Role of Parental Concerns in the Recognition of Sepsis in Children: A Literature Review

 **Amanda Harley**^{1,2,3},  **Jos M. Latour**⁴ and  **Luregn J. Schlapbach**^{1,2,5*}

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A guide for parents

Knowing the signs of sepsis

Any ONE of these may mean your child is critically unwell. Come to hospital straight away - DON'T DELAY.

