Could this Pediatric Patient be Septic?

**TACHYCARDIA**

<table>
<thead>
<tr>
<th>Age</th>
<th>Critical HR</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 to &lt; 6m</td>
<td>&gt;180</td>
</tr>
<tr>
<td>6 to &lt; 12 m</td>
<td>&gt;160</td>
</tr>
<tr>
<td>1 to &lt; 4 y</td>
<td>&gt;145</td>
</tr>
<tr>
<td>4 to &lt; 10 y</td>
<td>&gt;125</td>
</tr>
<tr>
<td>≥ 10 y</td>
<td>&gt;105</td>
</tr>
</tbody>
</table>

- **NO**
  - Monitor as per CTAS

- **YES**
  - **SIGNS OF INFECTION?**
    - Fever (>38.0°C)
    - Hypothermia (<36.0°C)
    - Cough/chest pain/respiratory distress
    - Abdominal pain/distention/vomiting/diarrhea
    - Skin/joint – pain/swelling/rash
    - ↓ feeding, ↓ urine output
    - Other signs of infection
  - **NO**
    - **HIGH RISK MEDICAL CONDITIONS**
      - Age < 3 months
      - Immune compromised
      - Cardiac, respiratory, neuromuscular disease
      - Significant developmental delay
      - Other high-risk chronic conditions
      - Indwelling vascular access/medical device
      - Recent surgery/hospitalization
  - **YES**
    - **SIGNS OF SEVERE SEPSIS/SEPTIC SHOCK**
      - Perfusion changes (capillary refill >2 sec, SpO2 <94%, mottled skin, cold extremities)
      - Mental status changes (confusion, lethargy, irritability)
    - **NO**
      - **THIS CHILD MAY HAVE EARLY SEPSIS**
        - Continue to monitor for Sepsis
      - **YES**
        - Proceed to PEDIATRIC SEPSIS ALGORITHM
          - NOTIFY MOST RESPONSIBLE PHYSICIAN