

HISTORY

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| HPC | <ul style="list-style-type: none">• Duration of symptoms• Recent surgery / Open wound trauma• Recent transfusion• Headache• Meningitic symptoms: Neck stiffness / Photophobia / Rash• SOB• Sputum: None / Clear / Yellow-Green• Chest Pain• Abdo pain• Vomiting / Diarrhoea• Dysuria• Joint pain / swelling• Cellulitis / Broken skin |
| PMH | <ul style="list-style-type: none">• History of repeat infections: Type of infection• Diabetes• Respiratory risk factors: COPD / Bronchiectasis / TB• Urinary risk factors: Retention / Long-term urinary catheter• Endocarditis risk factors: Heart valve replacement / IVDU• Abdo risk factors: Gallstones / Diverticular disease• Cellulitis risk factors: Skin conditions / poor hygiene / poor circulation / peripheral swelling |
| DH | <ul style="list-style-type: none">• Steroids• Immunosuppressants• Allergies |
| SH / FH | <ul style="list-style-type: none">• Smoking status: Non / Current / Ex• Foreign travel• Exposure to others with infections: especially Flu / TB |

EXAMINATION

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| GENERAL OBSERVATIONS | <ul style="list-style-type: none">• Increased work of breathing• Distressed• Patient sweating / flushed• Cannula / Lines in situ: Erythema / Warmth / Tender• Transfusion insitu / finished |
| AIRWAY | <ul style="list-style-type: none">• Ensure airway patent |
| BREATHING | <ul style="list-style-type: none">• Physical Observation: FiO₂ / RR / SaO₂• Auscultation: Wheeze / Crackles / Air entry / Bronchial breathing• Sputum: Clear / Yellow-Green |
| CIRCULATION | <ul style="list-style-type: none">• Physical Observation: HR / BP• Fluid input-output: Fluid balance• Heart sounds: Murmurs (especially new)• CRT: Central / Peripheral• Mucus membranes: Moist / Dry |
| DISABILITY | <ul style="list-style-type: none">• Physical Observation: Temp• GCS• Cranial neurological examination• Cervical spine stiffness: Kernig sign |
| EXPOSURE | <ul style="list-style-type: none">• Skin: Ulceration / Erythema / Warmth / Exudate• Rash: Petechiae• Abdo palpation: Pain / Guarding / Peritonitic / Rebound / Palpable bladder• Urinary catheter: Clear / Sediment / Pus• Joints: Swelling / Erythema / Warmth / Pain on movement |

INVESTIGATIONS

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| BLOODS | <ul style="list-style-type: none">• FBC / U&E / CRP• LFT / Bone / Amylase• Clotting | |
| VBG / ABG (ABG for resp failure concern) | <ul style="list-style-type: none">• pH• pO₂• pCO₂• HCO₃-• Lactate | |
| ECG | <ul style="list-style-type: none">• Rate• Rhythm: Arrhythmia• Ischaemia: ST segment / T wave inversion / New LBBB | |
| CXR | <ul style="list-style-type: none">• Consolidation• Effusion• Collapse | |
| AXR | <ul style="list-style-type: none">• Drain pipe colon / Thumbpriniting / Megacolon• Dilated bowel loops• Volvulus• Pneumoperitoneum / Rigler's sign | |
| URINALYSIS | <ul style="list-style-type: none">• Blood• Leukocytes• Nitrites | DO NOT TEST IF AGE > 65 AND SYMPTOMATIC. TREAT EMPERICALLY + SEND MC&S |
| MICRO | <ul style="list-style-type: none">• Blood Cultures: If Temp > 38• Sputum: MC&S / AFB• Atypical screen (<i>if indicated</i>): Serum mycoplasma / Urinary Legionella / Urinary Pneumococcus• Urine culture: If +ve urinalysis• Skin swab: If exudate / Open wound | |
| LUMBAR PUNCTURE | <ul style="list-style-type: none">• Opening pressure• Organisms / Culture / PCR• WBC / RBC• Protein• Glucose | DISCUSS WITH SENIOR +/- CT HEAD + INR CHECKED (<1.5) |
| JOINT ASPIRATION | <ul style="list-style-type: none">• Organisms• WBC / RBC• Crystals | DISCUSS WITH SENIOR + INR CHECKED (<1.5) |

POTENTIAL DIFFERENTIALS

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| SEPSIS | Potential sources: <ul style="list-style-type: none">• GI / GU / Resp / CNS / MSK / Skin | TRANSFUSION REACTION |
| VIRAL INFECTION | MALIGNANCY PARANEOPLASTIC SYNDROME | |