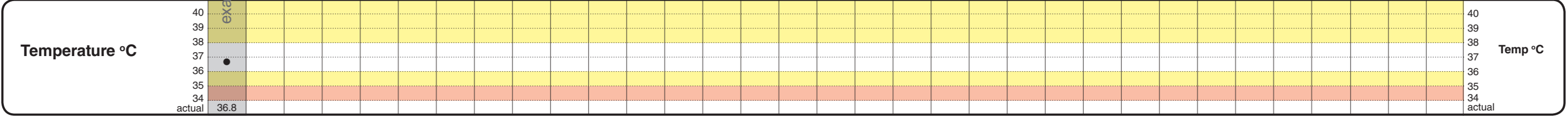
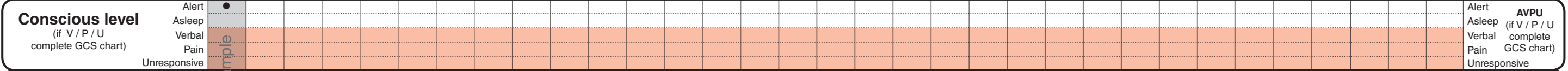
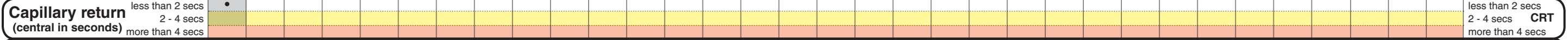
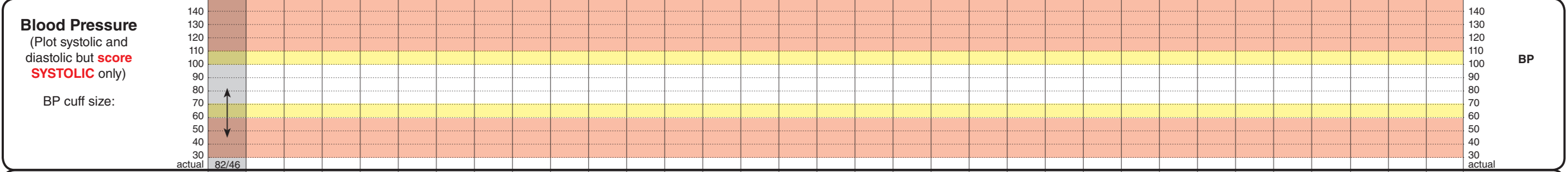
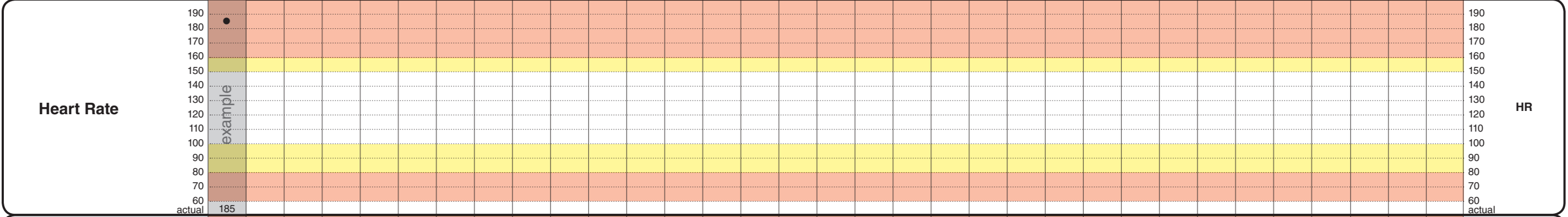
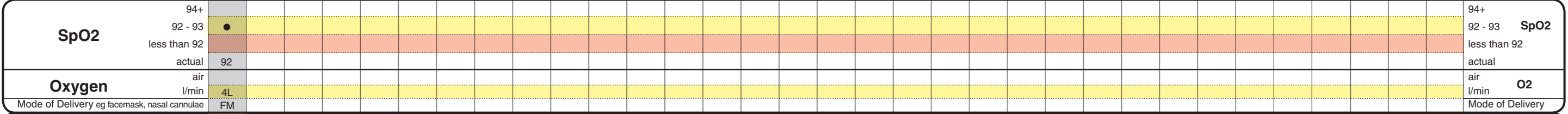
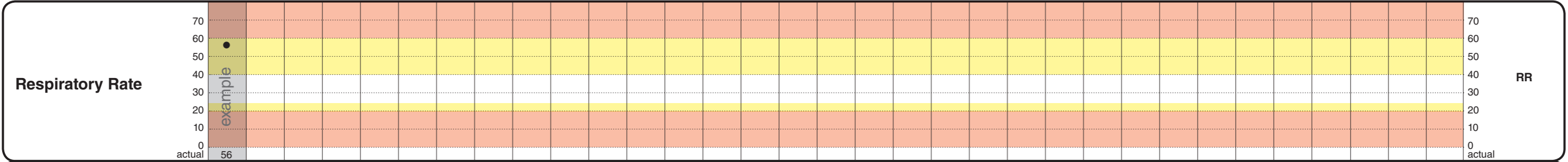


NAME:	CHI NO:																								
Date:																									
Time:	0800																								
Location:	Ward																								
Prescribed frequency of observations:	15 min																								



Staff or Carer Concerns (Staff = S, Carer = C, None = N)	C																								(Staff = S, Carer = C, None = N)
--	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	----------------------------------

PEWS	6																								PEWS
Initials	ABC																								Initials
Time of medical review if score elevated	08.15																								Time of medical review if score elevated
Pain Score	0																								Pain Score
Blood Glucose	4.6																								Blood Glucose

0

1

3

12-23 MONTHS

PAEDIATRIC EARLY WARNING SCORE (PEWS) 12 – 23 MONTHS

(To be used from 12 months until day before 2nd birthday)

PEWS is a tool to aid recognition of sick and deteriorating children.
PEWS should be calculated every time observations are recorded.

How to calculate score:

- Record observations at intervals as prescribed
- Record observations in black pen with a dot
- Score as per the colour key



- Add total points scored
- Record total score in PEWS box at bottom of chart
- Action should be taken as below

Name

DOB.....

CHI
Affix Patient ID label

Ward..... Consultant

Chart Number

Date.....

PEWS	Level of escalation	Action to be taken
Regardless of PEWS always escalate if concerned about a patient's condition		
0	0	
1-2	1	
3-4 or any in red zone	2	
5 or more	3	
Bradycardia, cardiac or respiratory arrest		

Concerns include, but are not restricted to;

- gut feeling
- looks unwell
- apnoea
- airway threat
- increased work of breathing,
- significant ↑ in O₂ requirement
- Poor perfusion / blue / mottled / cool peripheries
- seizures
- confusion / irritability / altered behaviour
- hypoglycaemia
- high pain score despite appropriate analgesia

If observations are as expected for patient's clinical condition, please note below accepted parameters for future calls

Acceptable parameters	RR	O ₂ saturation	HR	BP	Temperature°C
Upper acceptable					
Normal range					
Lower acceptable					
Doctor's signature	Date & Time				

PAEDIATRIC SEPSIS 6
Recognition: Suspected or proven infection + 2 of:

- Core temperature < 36°C >38°C
- Inappropriate Tachycardia
- Altered mental state: sleepy / irritable / floppy
- Peripheral perfusion, CRT >2 sec, cool, mottled

Lower threshold in vulnerable groups

**Think could this be sepsis?
IF NOT then why is this child unwell?**



If YES respond with Paediatric Sepsis 6 within 1 hour:

- Give high flow oxygen
- IV or IO access and blood cultures, glucose, lactate
- Give IV or IO antibiotics
- Consider fluid resuscitation
- Consider inotropic support early
- Involve senior clinicians/ specialists EARLY