





PAEDIATRICS

Addressograph

Ward

Consultant

Hospital Logo

PAEDIATRICS

Paediatric Observation Chart

5-11 Years

Escalation Guide

PEWS does not replace an emergency call			
Score	Minimum Observations	Minimum Alert	Minimum Response
1	4 hourly	Nurse in Charge	Any trigger should prompt increase in observation frequency as clinically appropriate
2	2 - 4 hourly		
3*	1 hourly	Nurse in Charge + Doctor on call	Nurse in Charge review
4-5	30 minutes		Urgent medical review
6	Continuous	Nurse in Charge + Doctor on call + Senior Doctor + Consultant	Urgent SENIOR medical review
≥7	Continuous	URGENT PEWS CALL	Immediate local response team
* Pink score in any parameter merits review			
PEWS does not replace clinical concern			

ISBAR
Communication Tool

I

S

B

A

R

Identify Situation Background Assessment Recommendation

Medical Escalation Suspension

Date / Time	Suspension Conditions	Next Medical Review	Doctor Signature/Print name /MCRN
Start Date: Start Time: End Date: End Time:			
Start Date: Start Time: End Date: End Time:			
Start Date: Start Time: End Date: End Time:			
Start Date: Start Time: End Date: End Time:			

Recognition

2 or more of the following

- Core temperature <36°C or >38.5°C
- Inappropriate tachypnoea
- Inappropriate tachycardia
- Reduced peripheral perfusion
- Altered mental status
- Consider co-morbidities

Suspected or proven sepsis

TAKE 3
<60 Mins.

• IV or IO access and take blood samples

• Urine output measurement

• Early SENIOR input

GIVE 3
<60 Mins.

• High flow oxygen

• IV/IO fluids & consider early inotropic support

• Broad spectrum IV/IO antimicrobials

Within 60 minutes

Event Record for PEWS score ≥6				
Date	Time	PEWS	Nurse Initials & NMBI	Alert

Assessment of Respiratory Effort			
	Mild	Moderate	Severe
Airway	• Stridor on exertion/crying	• Mild stridor at rest	• Stridor at rest
Behaviour and feeding	• Normal • Talks in sentences	• Some/intermittent irritability • Difficultly talking/crying • Difficultly feeding or eating	• Increased irritability and/or lethargy • Looks exhausted • Unable to talk or cry • Unable to feed or eat
Respiratory rate	• Mildly increased	• Respiratory rate in blue zone	• Respiratory rate in pink zone • Increased or markedly reduced respiratory rate as the child tires
Accessory muscle use	• Mild intercostal and suprasternal recession	• Moderate intercostal and suprasternal recession • Nasal flaring	• Marked intercostal, suprasternal and sternal recession
Oxygen	• No oxygen requirement	• Mild hypoxemia corrected by oxygen • Increasing oxygen requirement	• Hypoxemia may not be corrected by oxygen
Other			• Gasping, grunting • Extreme pallor, cyanosis • Apnoea

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5-11 Years



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PEWS Score Key

10

2

3



Patient Safety **First**
Working together for quality services

Chart Date

DD/MM/YY

Parameter Amendment For Chronic Conditions					
Date / Time	Clinical Parameters	New Acceptable Range	Next Medical Review	Doctor Signature/Print name/MCRN	Addressograph Ward Consultant

Core Parameters			Year	Date								
Frequency of observations			Time									
Clinician / Family Concern			12/12 18:45									
Concern Score			4 ⁰									
Respiratory Rate (breaths per minute) <i>Assess for 60 seconds</i>			0									
RR Number			16									
RR Score			0									
Respiratory Effort Severe Moderate Mild Normal			●									
RE Score			0									
Mode of O ₂ delivery Room air (RA) Nasal Cannula (NC) Face mask (FM) Tracheostomy (T) HFNC (H) CPAP (C) / BiPAP (B)			RA									
Oxygen Therapy (L/Mins.) >2L ≤2L												
O ₂ T Score			0									
SpO ₂			98									
SpO ₂ (%)			≥94% 90-93% 86-89% ≤ 85%									
SpO ₂ Score			0									
Heart Rate (beats per minute) <i>Assess for 60 seconds</i>			●									
Circulation			→									
HR Number			96									
HR Score			0									
Central Capillary Refill Time (seconds) ≤2			●									
CRT Score			0									
Blood Pressure (mmHg) Score systolic BP			←									
Cuff Size:			↕									
BP Number			109									
BP Score			0									
Skin Colour			PK									
AVPU Alert Voice Pain Unresponsive			●									
Disability If not Alert, consider GCS			0									
Temperature (°C) Record as graph			●									
Exposure Consider sepsis if temperature <36°C or >38.5°C Notify doctor if urine output is <1mL/Kg/hr			●									
Total PEWS score			0									
Reassess within (Mins.) Pain Score												
Nurse/NMBI												