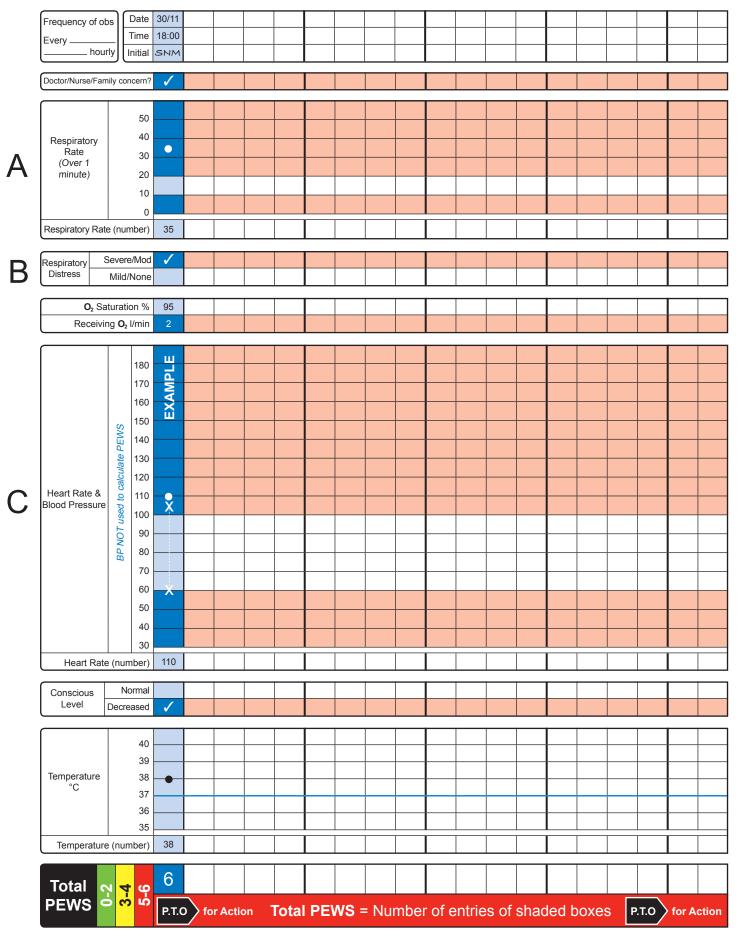


**PEWS Form** 

## 13-18 Years

Name Date of Birth NHS Number Consultant Ward





## **PEWS Form**

## 13-18 Years

Name Date of Birth NHS Number Consultant Ward

## **PEWS** Escalation Aid

Situation:

I am (name), a nurse on ward (X) I am calling about (child X) I am calling because I am concerned that... (e.g. BP is low/high, pulse is XXX temperature is XX, Early Warning Score is XX)

Background:

Child (X) was admitted on (XX date) with (e.g. respiratory infection)

They have had (X operation/procedure/investigation)

Child (X)'s condition has changed

in the last (XX mins)

Their last set of obs were (XXX)

The child's normal condition is...

(e.g. alert/drowsy/confused, pain free)

Assessment:

I think the problem is (XXX)

and I have...

(e.g. given O2 /analgesia, stopped the infusion) OR

I am not sure what the problem is but child (X) is deteriorating

OR

I don't know what's wrong but I am really worried

Recommendation:

I need you to...

Come to see the child in the next (XX mins)

Is there anything I need to do in the meantime? (e.g. stop the fluid/repeat the obs)

Download SBAR prompt cards and pads at www.institute.nhs.uk/SBAR

Remember: If you feel you need more help at any time, call for help - regardless of PEW Score

Continue monitoring

Nurse in charge MUST review

Nurse in charge & Doctor **MUST review** 

Nurse in charge & Doctor MUST review & inform Consultant



Nurse in charge & Consultant MUST review

| Record Call When PEWS 3 Or More |       |      |                    | Record Time of Review, Who by & Plan |   |             |
|---------------------------------|-------|------|--------------------|--------------------------------------|---|-------------|
| Date                            | Time  | PEWS | Print Name (nurse) | Time                                 | Plan                                    | Print Name  |
| 01/01/11                        | 09:00 | 5    | SN Morton          | 09:15                                | ED consultant called Anaesthetic review | SisterJACKS |
|                                 |       |      |                    |                                      |   |             |
|                                 |       |      |                    |                                      |   |             |
|                                 |       |      |                    |                                      |   |             |
|                                 |       |      |                    |                                      |   |             |
|                                 |       |      |                    |                                      |   |             |
|                                 |       |      |                    |                                      |   |             |