

BC PEWS ED Escalation Aid

PEDIATRIC EARLY WARNING SYSTEM SCORE		0 – 1	2	3 * For a score of "3" in any one category consider higher escalation	4 &/or score increases by 2 after interventions	5 – 13 or score of "3" in one category
	Notify		• RN reviews patient with the ED senior nurse (e.g. charge nurse, PCC) and identifies if escalation is required. If so notify MRP.	As per PEWS Score 2	 RN notifies most responsible physician (MRP) or physician delegate. Based on rate of deterioration, Emergency Physician (EP) to consider consulting a pediatrician 	 MRP to assess patient immediately (& pediatrician if available) If MRP unable to attend, RN calls EP for a STAT physician review. Appropriate "senior" review
	Plan				 MRP or delegate communicate a plan of care to mitigate contributing factors of deterioration 	As per PEWS Score 4
	Assessment	 Nurse (RN) continues assessments and monitors. RN documents VS and PEWS score as per unit/Health Authority guideline. 	As per PEWS Score 1	Increase frequency of assessments & documentation as per plan from consultation with more experienced healthcare provider	 RN increases frequency of assessments and documentation of VS and PEWS score. 	• As per PEWS Score 4
	Resources				 ED senior nurse will assess the RN to patient ratio and make changes as needed. ED senior nurse assesses care location to ensure the appropriate level of skill mix, equipment, medication and resources available. Senior nurse and MRP or physician delegate considers internal or external transfer to higher level of care. 	 Senior nurse arranges increased nursing care (1:1) with increasing interventions as per plan. Patient will be moved to an acute care space within the ED. Senior nurse and MRP or physician delegate considers external transfer to higher level of care.
SITUATIONAL	AWARENESS	If patient is assessed with one or more of the following situational awareness factors: Parent concern Watcher patient Unusual therapy Breakdown in communication 				