Please attach sticker here

MRN:
NHS No:
Surname:
First Name(s):
D.O.B: / / Gender: M / F
Address:

Somerset Partnership NHS
NHS Foundation Trust

National Early Warning Score (NEWS)

NEWS KEY 0 1 2 3	NAME:	WARD:	ADMISSION DATE:

DATE																				
TIME																				
RESP. RATE ●	≥ 25									3										
	21-24									2										
	12-20																			
	9-11									1										
	≤ 8									3										
SpO2 ●	≥ 96																			
	94-95									1										
	92-93									2										
	≤ 91									3										
Supplementary Oxygen	Litres/min									2										
X Axilla ● Oral TEMP ▲ F/head ^ Tympanic	≥ 39°									2										
	38°									1										
	37°																			
	36°									1										
	≤ 35°									3										
NEW SCORE uses Systolic BP BLOOD PRESSURE mmHg Systolic ^ Diastolic v	230									3										
	220																			
	210																			
	200																			
	190																			
	180																			
	170																			
	160																			
	150																			
	140																			
	130																			
	120																			
	110									1										
	100									2										
	90																			
	80																			
	70																			
	60																			
	50									3										
HEART RATE Radial ● Apical X	>140									3										
	130																			
	120									2										
	110																			
	100									1										
	90																			
	80																			
	70																			
	60																			
	50									1										
	40																			
	30									3										
Level of Consciousness	Alert																			
	V / P / U									3										
CAPILLARY BLOOD GLUCOSE																				
TOTAL NEW SCORE																				
NEWS Monitoring Frequency																				
Escalation Plan Y/N n/a																				
Urine Output																				
Bowels																				
Pain Score (0-10)																				
Initials																				

Adapted from Royal College of Physicians NEWS Chart

NEWS SCORE	FREQUENCY OF MONITORING	CLINICAL RESPONSE	VARIANTS *Patient specific*
0	Minimum 12 hourly	• Continue routine NEWS monitoring with every set of observations	
1 to 4	Minimum 4-6 hourly	• Inform registered nurse who must assess the patient • Registered nurse to decide if increased frequency of monitoring and / or escalation of clinical care is required	
5 or more, or 3 in one parameter	Increased frequency to a minimum of 1 hourly	• Registered nurse to **urgently** call the Dr • Urgent assessment by a doctor **or** call 999 for an emergency ambulance if Dr not available	
7 or more	Continuous monitoring of vital signs	• Registered nurse to **immediately** call 999 for an emergency ambulance	

If a decision is made not to follow the clinical response guidance above, because of patient variation, this MUST be documented in the patient's record, with the rationale for a decision.

FOLLOW THE SEPSIS PROFORMA IF . . .	SEPSIS LIKELY: if 2 or more are present	RED FLAG SEPSIS: If 1 or more are present
Temperature	>38 or <36	
Heart rate	>90 per minute	>130
Respiratory rate	>20 per minute	>25
Conscious level	Acute confusion or reduced conscious level	Responds to voice/pain/unresponsive
Glucose	>7.5mmol/l (unless DM)	
SpO_2		<91%
Systolic BP		<90

A	Alert	Awake
V	Responds to voice	Lethargy
P	Responds to Pain	Stupor
U	Unresponsive:	Coma

Situation, Background, Assessment, Recommendation (SBAR)			
S	B	A	R
• State your name, position and where you are located. • State the patient's name, age and diagnosis. • State why you are calling – the current problem, giving observation and assessment findings	State any relevant events leading up to this event providing further details of the patient (diagnosis, resuscitation category, team responsible for care), reasons for concern.	State what you have assessed the situation to be – for example, "I believe the patient has developed pneumonia".	Be clear about what you are expecting the GP or Nurse Practitioner to do – for example, attend immediately, attend within one hour etc. Do not hesitate to call 999 if the patient is rapidly deteriorating or you have any major concerns.