

Older Child 6-12 Years



Fathers Name
 First Name
 DOB/Age Gender
 Ward Weight

| | | Date | | | | | | | | | | | | | |
|---|--|-----------------------|--|--|--|--|--|--|--|--|--|--|--|--|----------|
| A Any airway threat is a medical emergency | | Time | | | | | | | | | | | | | |
| | | Score ↓ | | | | | | | | | | | | | |
| Looks Unwell | | 1 | | | | | | | | | | | | | 1 |
| B | | | | | | | | | | | | | | | |
| Breathing | | 55 | | | | | | | | | | | | | |
| | | 50 | | | | | | | | | | | | | |
| | | 3 | | | | | | | | | | | | | 3 |
| | | 45 | | | | | | | | | | | | | |
| | | 2 | | | | | | | | | | | | | 2 |
| | | 40 | | | | | | | | | | | | | |
| | | 35 | | | | | | | | | | | | | |
| Respiratory Rate | | 30 | | | | | | | | | | | | | 1 |
| | | 25 | | | | | | | | | | | | | |
| | | 20 | | | | | | | | | | | | | 0 |
| Write the number if >55 or <10 | | 15 | | | | | | | | | | | | | 1 |
| | | 10 | | | | | | | | | | | | | |
| | | E | | | | | | | | | | | | | E |
| | | >96 | | | | | | | | | | | | | 0 |
| SaO ₂ % | | 95-90 | | | | | | | | | | | | | 1 |
| | | 89-86 | | | | | | | | | | | | | 2 |
| | | <85 | | | | | | | | | | | | | E |
| Oxygen Flow Rate | | >10L | | | | | | | | | | | | | 3 |
| | | 3-10L | | | | | | | | | | | | | 2 |
| Mask oxygen rate must be >5L/min | | <2L | | | | | | | | | | | | | 1 |
| | | None | | | | | | | | | | | | | 0 |
| Mode: | | <u>N</u> .Prongs/Mask | | | | | | | | | | | | | |
| Respiratory Distress: | | Severe | | | | | | | | | | | | | 3 |
| | | Moderate | | | | | | | | | | | | | 2 |
| See the back of this chart | | Mild | | | | | | | | | | | | | 1 |
| | | None | | | | | | | | | | | | | 0 |
| C | | | | | | | | | | | | | | | |
| Circulation | | 160 | | | | | | | | | | | | | 3 |
| | | 150 | | | | | | | | | | | | | 2 |
| | | 140 | | | | | | | | | | | | | |
| Heart Rate | | 130 | | | | | | | | | | | | | 1 |
| Write the number if >160 or <50 | | 120 | | | | | | | | | | | | | 0 |
| | | 100 | | | | | | | | | | | | | |
| | | 80 | | | | | | | | | | | | | 1 |
| | | 70 | | | | | | | | | | | | | 2 |
| E = Emergency | | 60 | | | | | | | | | | | | | 3 |
| | | 50 | | | | | | | | | | | | | E |
| Capillary Refill Time | | >4 seconds | | | | | | | | | | | | | 2 |
| | | 2-3 seconds | | | | | | | | | | | | | 1 |
| | | <2 seconds | | | | | | | | | | | | | 0 |
| D | | | | | | | | | | | | | | | |
| Disability | | Alert | | | | | | | | | | | | | 0 |
| | | Voice | | | | | | | | | | | | | 2 |
| | | Pain | | | | | | | | | | | | | 3 |
| | | Unresponsive | | | | | | | | | | | | | E |
| E | | | | | | | | | | | | | | | |
| Exposure | | 39.0 | | | | | | | | | | | | | 0 |
| | | 38.5 | | | | | | | | | | | | | |
| Temperature | | 37.5 | | | | | | | | | | | | | 0 |
| Write the number if >39.0 or <35.5 | | 36.5 | | | | | | | | | | | | | |
| | | 35.5 | | | | | | | | | | | | | |
| Blood Sugar Level | | >10 | | | | | | | | | | | | | 2 |
| | | (4.0-8.0) | | | | | | | | | | | | | 0 |
| Call Dr urgently if 3.5-4.0 | | | | | | | | | | | | | | | 2 |
| Emergency call to Dr if <2.0 | | | | | | | | | | | | | | | E |
| Total K-CEWS score | | | | | | | | | | | | | | | |
| Pathway Actions: | | Done ✓ | | | | | | | | | | | | | |
| Weight | | kg | | | | | | | | | | | | | |
| Pain Score | | 0-10 | | | | | | | | | | | | | |

Mandatory Escalation Pathway:

| If Total K-CEWS score: | Do these Actions: |
|---|--|
| 1-3: Normal to low level response to an illness | Assess your patient and manage pain, fever or distress. Repeat the vitals in 30 minutes: If K-CEWS still 1-3 discuss with SNO and consider increasing the frequency of taking vitals, otherwise continue at minimum of 4 hourly vitals. Document the plan of care from your discussion in the patients notes |
| 4-5: Unstable acute illness | Call Intern to review within 60 minutes Use ISOBAR to discuss patient |
| 6-7: Patient likely to deteriorate quickly | Call Registrar to review within 30 minutes. Use ISOBAR to discuss patient |
| 8+ Or any vital sign in zone: Patient critical. E=Emergency | Call for help from a doctor immediately. Stay with the patient Support Airway, Breathing and Circulation. Give oxygen and start CPR/Advanced Life Support as needed Document outcome in patients notes |
| Drs additional instructions: | |

Anytime you are concerned about your patient call a Dr or talk to your SNO, regardless of vital signs or K-CEWS

