

Adult Early Warning Score for Recognising and Responding to Acute Deterioration (NEWS2)

SCORE	E	3	2	1	0	1	2	3
Respiratory rate	≤4	5-8		9-11	12-20		21-24	≥25
SpO2%		≤91	92-93	94-95	≥96			
SpO2%* (Scale 2)		≤83	84-85	86-87	88-92 ≥93 ON RA	93-94 ON O2	95-96 ON O2	≥97 ON O2
O2 therapy (l/min)					Nil		Any O2	
Heart rate	≤30	31-40		41-50	51-90	91-110	111-129	≤130
Systolic BP	≤70	71-90	91-100	101-110	111-219			≤220
Level of consciousness* (AVPU)	Unresponsive	Confused Voice Response Pain Response			Alert			
Temperature (°C)		≤35.0		35.1-36.0	36.1-38.0	38.1-39.0	≥39.1	

The score for each parameter should be added together to produce a total Early Warning Score (EWS).
Once an EWS is calculated, follow the Clinical Escalations and Actions chart.

*** NEWS2 considerations:**

- SpO2 Scale 1 should be used for the majority of patients. Scale 2 should only be used for patients known to have a target SpO2 range of 88-92% as per the Oxygen CPG.
- Level of consciousness should be scored based on an acute change. If a patient has a chronic altered level of consciousness (e.g dementia) and does not have an acute change from their baseline, they should score zero for this parameter.



RRAD CPG



Sepsis CPG

Start sepsis assessment if:


- Early Warning Score ≥5
- Patient looks unwell

Clinical Escalation and Actions | Prehospital Paramedics

RECOGNISE

All patients EWS 0-4

Amber escalation EWS 5-6

Or  amber flag sepsis criteria
Or any single observation in RED (score 3) area

Or any clinical trigger not immediately correctable:

- Increasing oxygen requirement
- Poor peripheral circulation
- BSL < 4mmol/l or >20mmol/l with no decrease in level of consciousness
- Concern by attending clinician


RESPOND

- A-E assessment at first practical opportunity
- Full set of observations
- Regular observations - increase frequency of observations if EWS increasing
- Document all assessments, actions, and outcome

- Re-assess A-E and initiate appropriate clinical care
- Consider sepsis using appropriate sepsis screening tool
- Increase observation frequency

Acute illness or unstable chronic disease, at risk of deterioration

Red escalation EWS 7+

Or  red flag sepsis criteria

Or any clinical trigger not immediately correctable:

- Partial airway obstruction or stridor
- Increasing oxygen requirements to maintain oxygen saturation >90%
- Only responds to pain on AVPU scale
- Sudden decrease in level of consciousness (drop of 2 or more points on GCS)
- BSL < 4mmol/l or > 20mmol/l with decrease in level of consciousness
- Acute behavioural disturbance with severe agitation (RASS 4)
- Serious concern by clinician

- Re-assess A-E and initiate appropriate clinical care
- Continuous cardiac monitoring where available and pulse oximetry along with increased frequency of observations.
- Consider sepsis using appropriate sepsis screening tool
- Consider Priority 1 transport
- Consider requirement for additional resources

Likely to deteriorate rapidly

Emergency escalation

Any single observation in PURPLE (E) area

Or any clinical trigger not immediately correctable:

- Cardiac or respiratory arrest
- Complete airway obstruction
- Patient unresponsive
- Generalised seizure activity
- Serious uncontrollable haemorrhage
- Any other time critical event of serious concern to clinician

- Re-assess A-E and initiate appropriate resuscitative care
- Priority 1 transport if not correctable
- Consider requirement for additional resources

Immediately life-threatening critical illness

* These actions are for the prehospital environment. For escalation within a hospital/Extended Transfer of Care setting please see escalation actions for the individual facility.