

# 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 Event Health Services

### RECOGNISE


### RESPOND

All patients EWS 0-4

- 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

<b>Amber escalation EWS 5-6</b> Or  amber flag sepsis criteria Or any single observation in RED (score 3) area	Or any clinical trigger not immediately correctable: <ul style="list-style-type: none"> <li>Increasing oxygen requirement</li> <li>Poor peripheral circulation</li> <li>BSL &lt; 4mmol/l or &gt;20mmol/l with no decrease in level of consciousness</li> <li>Concern by attending clinician</li> </ul>	<ul style="list-style-type: none"> <li>Re-assess A-E and initiate appropriate clinical care</li> <li>Increase observation frequency</li> <li>Consider sepsis using appropriate sepsis screening tool</li> <li>Consult with SOC CSP, or call for paramedic backup where available, recommended</li> </ul>
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**Acute illness or unstable chronic disease, at risk of deterioration**

<b>Red escalation EWS 7+</b> Or  red flag sepsis criteria	Or any clinical trigger not immediately correctable: <ul style="list-style-type: none"> <li>Partial airway obstruction or stridor</li> <li>Increasing oxygen requirements to maintain oxygen saturation &gt;90%</li> <li>Only responds to pain on AVPU scale</li> <li>Sudden decrease in level of consciousness (drop of 2 or more points on GCS)</li> <li>BSL &lt; 4mmol/l or &gt; 20mmol/l with decrease in level of consciousness</li> <li>Acute behavioural disturbance with severe agitation (RASS 4)</li> <li>Serious concern by clinician</li> </ul>	<ul style="list-style-type: none"> <li>Re-assess A-E and initiate appropriate clinical care</li> <li>Continuous cardiac monitoring where available and pulse oximetry along with increased frequency of observations.</li> <li>Consider sepsis using appropriate sepsis screening tool</li> <li>Consider requirement for additional resources</li> <li>Consult with SOC CSP, or call for paramedic backup where available, required at earliest practical opportunity</li> </ul>
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**Likely to deteriorate rapidly**

<b>Emergency escalation</b> Any single observation in PURPLE (E) area	Or any clinical trigger not immediately correctable: <ul style="list-style-type: none"> <li>Cardiac or respiratory arrest</li> <li>Complete airway obstruction</li> <li>Patient unresponsive</li> <li>Generalised seizure activity</li> <li>Serious uncontrollable haemorrhage</li> <li>Any other time critical event of serious concern to clinician</li> </ul>	<ul style="list-style-type: none"> <li>Re-assess A-E and initiate appropriate resuscitative care</li> <li>Consider requirement for additional resources</li> <li>Consult with SOC CSP, or call for paramedic backup</li> </ul>
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**Immediately life-threatening critical illness**