

Vital Sign Reference

| Age | Pulse | Respiratory Rate | Blood Pressure |
|--------------------|---------|------------------|----------------|
| 0-3 months | 100-150 | 35-55 | 65-85/45-55 |
| 3-6 months | 90-120 | 30-45 | 70-90/50-65 |
| 6-12 months | 80-120 | 25-40 | 80-100/55-65 |
| 1-3 years | 70-110 | 20-30 | 90-105/55-70 |
| 3-6 years | 65-110 | 20-25 | 95-110/60-75 |
| 6-12 years | 60-95 | 14-22 | 100-120/60-75 |
| 12 years | 55-85 | 12-18 | 110-130/65-85 |
| 13 years and older | 75-90 | 12-18 | 110-135/70-85 |

Reference: Kleigman, R.M., et al. Nelson Textbook of Pediatrics. 19th ed. Philadelphia: Saunders, 2011.

Pediatric Early Warning Score Card

| | 3 | 2 | 1 | 0 |
|--|---|---|---|--|
| Behavior | <ul style="list-style-type: none"> Lethargic, confused or Reduced pain response | <ul style="list-style-type: none"> Irritable or agitated and NOT consolable | <ul style="list-style-type: none"> Sleeping or Irritable and consolable | <ul style="list-style-type: none"> Playing Appropriate for patient |
| Cardiovascular | <ul style="list-style-type: none"> Grey or CRT \geq 5 or Tachycardia 30 above or Bradycardia for age | <ul style="list-style-type: none"> CRT 4 seconds or Tachycardia of 20 above normal parameters | <ul style="list-style-type: none"> Pale or CRT 3 seconds | <ul style="list-style-type: none"> Pink, CRT 1-2 seconds |
| Respiratory | <ul style="list-style-type: none"> Grunting 5-below normal with retractions and/or \geq 50% FiO₂ > 30 above normal | <ul style="list-style-type: none"> > 20 above normal Retractions 40-49% FiO₂ or \geq 3 LPM | <ul style="list-style-type: none"> \geq 10 above normal Using accessory muscles or 24-40% FiO₂ or \geq 2 LPM Any initiation of O₂ | <ul style="list-style-type: none"> WNL for age No retractions |
| Add 2 points for nebs Q1 Additional intervention based on total score | | | | |

** Parental concern should be an automatic call to the Rapid Response Team.



PEWS Flowchart

Families know their child best. Listen to their concerns and advocate for them. If families have concerns notify the RRN and the primary physician.

