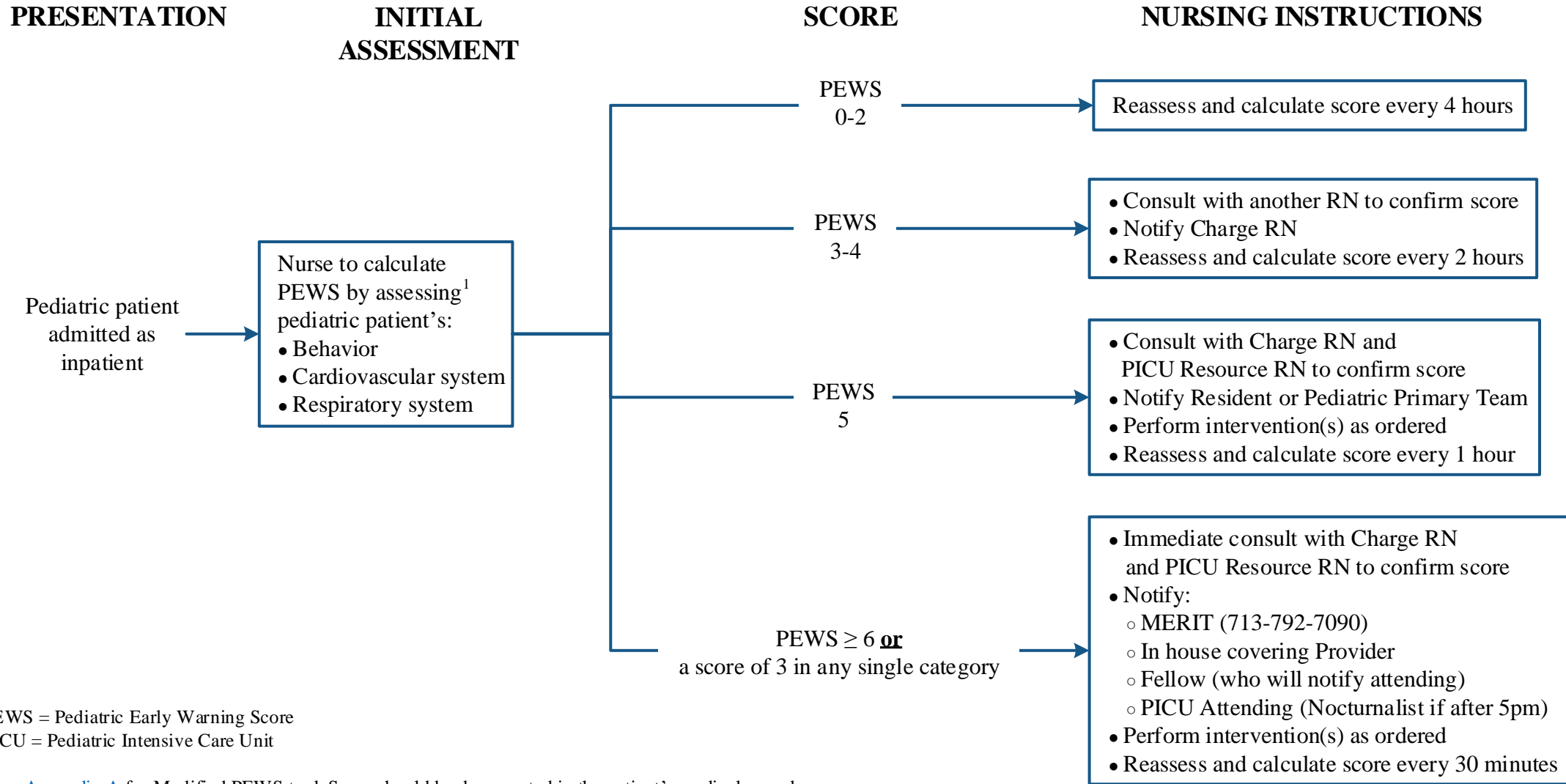


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PEWS = Pediatric Early Warning Score  
 PICU = Pediatric Intensive Care Unit

<sup>1</sup> See Appendix A for Modified PEWS tool. Score should be documented in the patient's medical record.

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## APPENDIX A: Modified PEWS Tool

	Score <sup>1</sup>			
	0	1	2	3
<b>Behavior</b>	<ul style="list-style-type: none"> <li>• Playing</li> <li>• Appropriate</li> </ul>	<ul style="list-style-type: none"> <li>• Irritable, but consolable</li> </ul>	<ul style="list-style-type: none"> <li>• Irritated, but not consolable</li> </ul>	<ul style="list-style-type: none"> <li>• Lethargic</li> <li>• Confused</li> <li>• Reduced response to pain</li> </ul>
<b>Cardiovascular System:</b>				
<b>Rate</b>	<ul style="list-style-type: none"> <li>• Within normal parameters for age</li> </ul>	<ul style="list-style-type: none"> <li>• Tachycardia &lt; 20 above normal for age</li> </ul>	<ul style="list-style-type: none"> <li>• Tachycardia 20-29 above normal for age</li> </ul>	<ul style="list-style-type: none"> <li>• Tachycardia ≥ 30 above <b>or</b> bradycardia ≥ 10 below normal for age</li> </ul>
<b>Color</b>	<ul style="list-style-type: none"> <li>• Pink</li> </ul>	<ul style="list-style-type: none"> <li>• Pale <b>or</b> dusky</li> </ul>	<ul style="list-style-type: none"> <li>• Mottled</li> </ul>	<ul style="list-style-type: none"> <li>• Gray</li> </ul>
<b>Perfusion</b>	<ul style="list-style-type: none"> <li>• Capillary refill 1-2 seconds</li> </ul>	<ul style="list-style-type: none"> <li>• Capillary refill 3 seconds</li> </ul>	<ul style="list-style-type: none"> <li>• Capillary refill 4 seconds</li> </ul>	<ul style="list-style-type: none"> <li>• Capillary refill ≥ 5 seconds</li> </ul>
<b>Respiratory System:</b>				
<b>Rate</b>	<ul style="list-style-type: none"> <li>• Within normal parameters for age</li> </ul>	<ul style="list-style-type: none"> <li>• Tachypnea 10-19 above normal parameters for age</li> </ul>	<ul style="list-style-type: none"> <li>• Tachypnea ≥ 20 above normal parameters for age with retractions</li> </ul>	<ul style="list-style-type: none"> <li>• Bradypnea ≥ 5 below normal parameters for age with retractions</li> </ul>
<b>Effort</b>	<ul style="list-style-type: none"> <li>• No retractions</li> </ul>	<ul style="list-style-type: none"> <li>• Mild retractions/accessory muscle use</li> </ul>	<ul style="list-style-type: none"> <li>• Moderate retractions/accessory muscle use (including tracheal tugging)</li> </ul>	<ul style="list-style-type: none"> <li>• Severe retractions/accessory muscle use (including tracheal tugging) <b>and</b> grunting</li> </ul>
<b>Oxygen</b>	<ul style="list-style-type: none"> <li>• N/A</li> </ul>	<ul style="list-style-type: none"> <li>• Oxygen required to maintain normal<sup>2</sup> SpO<sub>2</sub> <ul style="list-style-type: none"> <li>◦ FiO<sub>2</sub> 24-40%</li> <li>◦ 2 L/minute O<sub>2</sub></li> </ul> </li> <li>• Any assisted ventilation<sup>3</sup> or initiation of O<sub>2</sub></li> </ul>	<ul style="list-style-type: none"> <li>• Oxygen required to maintain normal<sup>2</sup> SpO<sub>2</sub> <ul style="list-style-type: none"> <li>◦ FiO<sub>2</sub> 40-49%</li> <li>◦ O<sub>2</sub> ≥ 3 L/minute</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Oxygen required to maintain normal<sup>2</sup> SpO<sub>2</sub> <ul style="list-style-type: none"> <li>◦ FiO<sub>2</sub> ≥ 50%</li> </ul> </li> </ul>

<sup>1</sup> Add 2 extra points if patient requires frequent interventions (e.g., suctioning, positioning, change in O<sub>2</sub> needs, multiple IV attempts required, **or** every 15-minute or continuous nebulized treatments) **or** has persistent post-op vomiting

<sup>2</sup> As defined in patient's orders

<sup>3</sup> Includes home bilevel positive airway pressure (BiPAP)/continuous positive airway pressure (CPAP) or home ventilator at baseline settings

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## SUGGESTED READINGS

- Fraser, D. D., Singh, R. N., & Frewen, T. (2006). The PEWS score: Potential calling criteria for critical care response teams in children's hospitals. *Journal of Critical Care*, 21(3), 278-279. <https://doi.org/10.1016/j.jcrc.2006.06.006>
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- Monaghan, A. (2005). Detecting and managing deterioration in children. *Paediatric Nursing*, 17(1), 32-35. <https://doi.org/10.7748/paed.17.1.32.s27>

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## DEVELOPMENT CREDITS

This practice consensus statement is based on majority opinion of the Pediatric experts at the University of Texas MD Anderson Cancer Center for the patient population. These experts included:

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