

Student Name: _____ Unit: _____ Pt. initials: _____ Date: _____

INTAKE/OUTPUT														Total
PO/Enteral Intake	07	08	09	10	11	12	13	14	15	16	17	18		
PO Intake														
Intake – PO Meds														
Enteral Tube Feeding														
Enteral Flush														
Free Water														
IV INTAKE	07	08	09	10	11	12	13	14	15	16	17	18		Total
IV Fluid														
IV Meds/Flush														
OUTPUT	07	08	09	10	11	12	13	14	15	16	17	18		Total
Urine														
# of immeasurable														
Stool														
Urine/Stool mix														
Emesis														
Other														

Children's Hospital Early Warning Score (CHEWS) (See CHEWS Scoring and Escalation Algorithm to score each category)	
Behavior/Neuro	Circle the appropriate score for this category: 0 1 2 (3)
Cardiovascular	Circle the appropriate score for this category: 0 (1) 2 3
Respiratory	Circle the appropriate score for this category: 0 1 (2) 3
Staff Concern	(2) pt - Concerned
Family Concern	(1) pt - Concerned or absent
CHEWS Total Score	
CHEWS Total Score	Total Score (points) <u>8</u>
	Score 0-2 (Green) – Continue routine assessments
	Score 3-4 (Yellow) – Notify charge nurse or LIP, Discuss treatment plan with team, Consider higher level of care, Increase frequency of vital signs/CHEWS/assessments, Document interventions and notifications
	Score 5-11 (Red) – Activate Rapid Response Team or appropriate personnel per unit standard for bedside evaluation, Notify attending physician, Discuss treatment plan with team, Increase frequency of vital signs/CHEWS/assessments, Document interventions and notifications