

Pediatric warning system helps doctors identify hospitalized patients at risk of critical illness

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The Ronald McDonald Children's Hospital at Loyola University Medical Center has implemented a pediatric early warning scoring system to better identify children who are at-risk of becoming critically ill while in the hospital.

"Children can become critically ill from sudden and unexpected events, but more often it is a gradual progression arising from various illnesses, which leaves a large window of opportunity to identify children at-risk in our children's hospital," said Julie Fitzgerald, MD, director of Loyola University Health System's pediatric intensive care unit and associate professor in the Department of Pediatrics at Loyola University Chicago Stritch School of Medicine.

The Cardiac Children's Hospital Early Warning Scoring (C-CHEWS) tool was developed at Boston Children's Hospital and focuses on three key objectives: neuro/behavioral, respiratory and cardiovascular. Patient-specific concerns from the family and nursing staff also are taken into account for each child's score. The child is evaluated using a specific nursing and physician response algorithm and each patient is given a score from 0-10. A score is given every four hours along with each set of vitals.

This also has led to the development of a redesigned [rapid response team](#) that will respond to a range of changes that include [low blood pressure](#),

rapid or low heart rates, respiratory distress and alterations in mental status. Benefits include a reduction of mortality rates, improved clinical outcomes and decreased length of stay, better awareness of physiological deterioration or instability, improved safety and satisfaction for patients, their families and the [children's](#) [hospital](#) staff.

Provided by Loyola University Health System

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