Hein le Roux

- GP, Minchinhampton
- CCG Patient Safety
- WEAHSN Patient Safety
Don Berwick

- “Some is not a number. Soon is not a time.”
NEWS

Across whole urgent care system
Safer transfer of care
### Primary Care and Community Referral Form

**Name:**
**DOB:**
**NHS no:**
**GP practice:**
**Next of kin:**

**Date:**
**Time:**
**Clinician:**
**Signature:**

### Presenting Problem (reason for admission/referal)

### Past Medical History and Social History

- DNAR in place? **YES**
- Date: 
- Lives alone? **YES**
- Delirium? **YES**
- Falls risk? **YES**

### Medication (review if poor urine output)

#### Observations

- **Respiratory Rate**
- **O2 Saturation**
- **Temp.**
- **Systolic BP**
- **Heart Rate**
- **Level of consciousness** (Alert or responds to *Voice/Pain/Uncorssed*)
- **Add? If so why?**

#### Examination findings

#### National Early Warning Score (NEWS):

<table>
<thead>
<tr>
<th>PHYSIOLOGICAL PARAMETERS</th>
<th>3</th>
<th>2</th>
<th>1</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respiration Rate</td>
<td>☒</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oxygen Saturation</td>
<td>93</td>
<td>92 - 93</td>
<td>94 - 95</td>
<td>96</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arterial Oxygen</td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Temperature</td>
<td>≤36.5</td>
<td>36.5 - 37.5</td>
<td>37.5 - 38.5</td>
<td>≥38.1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Systolic BP</td>
<td>160</td>
<td>111 - 130</td>
<td>111 - 129</td>
<td>≥130</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heart Rate</td>
<td>≤40</td>
<td>41 - 50</td>
<td>51 - 60</td>
<td>61 - 70</td>
<td>≥71</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Level of Consciousness</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
<td>F</td>
<td>G</td>
</tr>
</tbody>
</table>

**As of 16.03.2016**
Suspect infection?
Any two of the following present?
- Temperature <36 or > 38 °C
- Respiratory Rate > 20 / min
- Heart rate > 90 / min
- Glucose > 7.7 (not diabetic)
- Acutely altered mental state

Think sepsis

Contact numbers for referral or advice (including referral to Rapid Response):
Single Point of Clinical Access:
0300 421 0300

Adult Social Care Helpdesk: 01452 426868

Locality Integrated Community Teams:
- Cotswolds 01285 881 080
- Gloucester 01452 426110
- Cheltenham 01242 532 348
- Tewkesbury 01452 328222
- Stroud and Berkeley Vale 0300 421 6600
- Forest of Dean 01594 820584

Clinical response –
SUMMARY OF OUTCOME/PLAN:
- Admit 999 with sepsis alert
- Admit 999
- Admitt non-999
- Treated – review + safety-net
- Treated – no further follow up

Any red flags?
- No or minimal urine in 12 hours
- Systolic Blood Pressure < 90
- SpO2 < 90%
- Lactate > 2 *
- Chemotherapy in last 6 weeks?

Immediate 999 response

ACTION:
- Oxygen *
- IV Fluid bolus 500ml 0.9% Saline *
- ENSURE 999 IMMEDIATE RESPONSE

* rapid response only

CONFIRMED AKI -- Essential Steps to be taken by GP or Primary Health care team:

Think FLUIDS
1. Fluid balance-check for signs of dehydration and treat
2. Low BP- (check BP and if BP<90/60-withhold anti HTN drugs. *if history of IHD, continue with Beta blocker )
3. Urine: dip test and microscopy. If positive for blood/protein consider possibility of glomerulonephritis. Look for signs of urine retention and catheterise if in urinary retention
5. Drugs and Toxins: Stop NSAIDS. Consider sick day rule and withhold diuretics, ACE1/ARB for 48 hrs during inter current illness or infection
6. Sepsis: look for signs of sepsis and treat accordingly

STOP causes of AKI
Sepsis and hypoperfusion
(hypovolaemia, heart failure, hepatorenal)
Toxicity (drugs, contrast)
Obstruction
Parenchymal kidney disease

Initiate AKI care bundle in all patients with a 1.5x rise in creatinine or oliguria (<0.5 mls/kg/hr) for > 6 hours