### Chart 4: Clinical response to the NEWS trigger thresholds

<table>
<thead>
<tr>
<th>NEW score</th>
<th>Frequency of monitoring</th>
<th>Clinical response</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Minimum 12 hourly</td>
<td>• Continue routine NEWS monitoring</td>
</tr>
</tbody>
</table>
| **Total 1–4** | Minimum 4–6 hourly | • Inform registered nurse, who must assess the patient  
• Registered nurse decides whether increased frequency of monitoring and/or escalation of care is required |
| 3 in single parameter | Minimum 1 hourly | • Registered nurse to inform medical team caring for the patient, who will review and decide whether escalation of care is necessary |
| **Total 5 or more Urgent response threshold** | Minimum 1 hourly | • Registered nurse to immediately inform the medical team caring for the patient  
• Registered nurse to request urgent assessment by a clinician or team with core competencies in the care of acutely ill patients  
• Provide clinical care in an environment with monitoring facilities |
| **Total 7 or more Emergency response threshold** | Continuous monitoring of vital signs | • Registered nurse to immediately inform the medical team caring for the patient – this should be at least at specialist registrar level  
• Emergency assessment by a team with critical care competencies, including practitioner(s) with advanced airway management skills  
• Consider transfer of care to a level 2 or 3 clinical care facility, ie higher-dependency unit or ICU  
• Clinical care in an environment with monitoring facilities |