

# NEWTT2 Joint Escalation and Review Record

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_:\_\_\_\_

Total NEWTT2 score \_\_\_\_\_

Escalation Level:

Score 1-3 (Request Tier 1 review within 1 hour) ☐

Score 4-5 (Request Tier 1 review within 15 minutes) ☐

Score  $\geq 6$  (Request Tier 1 review within 15 minutes & inform Tier 2 ) ☐

Critical observations? Consider a 2222 call and Request Tier 1 AND Tier 2 review ☐

Escalation completed:

Shift Leader Informed ☐

Referral to Paediatric/Neonatal Team ☐

Referral Accepted by: Tier 1 Doctor / ANNP ☐ Tier 2 Doctor / ANNP ☐

S :

B :

A :

R : I have already done \_\_\_\_\_

Please will you \_\_\_\_\_, and  
review within \_\_\_\_\_

Referrer Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Grade: \_\_\_\_\_ NMC: \_\_\_\_\_

**NEWTT2 Review** Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_:\_\_\_\_

Gestation: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Weight: \_\_\_\_\_kg Delivery Mode: \_\_\_\_\_

**History:** (Sepsis risk factors, maternal medications, feeding, parental concerns etc)

**Examination:**

Heart rate: \_\_\_\_\_ Resp rate: \_\_\_\_\_ Temperature: \_\_\_\_\_°C

Addressograph

**Investigations:**☐ Blood glucose \_\_\_\_\_ mmol/L☐ SpO<sub>2</sub>: Pre-ductal: \_\_\_\_\_ % Post-ductal: \_\_\_\_\_ %☐ Capillary blood gas:pH      pCO<sub>2</sub>      BE      Bicarb      Lactate☐ Consider chest X-Ray and pre/post ductal BP measurement (Do you need to inform tier 2?)

Addressograph

**Impression:** (Is baby unwell? Could this be sepsis? Cardiac? Metabolic?)**Plan:**Senior review required? ☐ Frequency of observations: \_\_\_\_\_Parents updated ☐ Next review: \_\_\_\_\_

Plan handed over to: \_\_\_\_\_ (midwife caring for mother and baby)

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Grade: \_\_\_\_\_ GMC / NMC no.: \_\_\_\_\_

**NEWTT2 Re-review**

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_:\_\_\_\_

Heart rate: \_\_\_\_ Resp rate: \_\_\_\_ Temp: \_\_\_\_ °C SpO<sub>2</sub>: \_\_\_\_ % Blood glucose: \_\_\_\_ mmol/L

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Grade: \_\_\_\_\_

GMC / NMC no.: \_\_\_\_\_