



1. If a **Danger Sign** is present give the treatment indicated *immediately*
2. **Recheck** vital signs and repeat treatment if necessary until Danger Sign is no longer present
3. All patients with a Danger Sign must have their vital signs reassessed *at least every 30 minutes*
4. **Call doctor if you are concerned for any reason** or if the Danger Sign persists

The protocol can be modified by the attending physician  
 The protocol is a complement to the usual medical management

		Danger (Red)	Abnormal (Yellow)	Normal (Green)	Abnormal (Yellow)	Danger (Red)	Treatment If Danger Sign:	
<b>A</b>	Airway	Conscious Level (Glasgow Coma Scale – GCS)		15	9-14	3-8 or any deterioration in conscious level	<b>A</b>	<b>PROTECT AIRWAY</b>  Lateral position  Chin lift / jaw thrust Oro-pharyngeal airway Suction
		Airway sounds		Normal breath sounds		Abnormal breath sounds eg. gurgling/ snoring / stridor		
<b>B</b>	Breathing	Respiratory rate / minute	<8	12-18	19-30	>30	<b>B</b>	<b>HYPOXIA?</b>  Sit patient up (if no shock)  Increase Oxygen
		Inspired Oxygen		Air	<80% or ≤10L/min	80-100% Or >10L/min		
		Oxygen Saturation (%)	<90	95-100				
<b>C</b>	Circulation	Heart Rate / minute	<40	60-100	101-130	>130	<b>C</b>	<b>SHOCK?</b> Tip bed head-down IV RL/NS 500ml in 30mins Recheck & repeat 500ml/30min as long as Danger Sign persists  >2 litres in 2hrs call doctor
		Systolic Blood Pressure (mmHg)	<90	100-180	>180			

- Other treatments for the physician to consider**
- IV dextrose 10% bolus 5ml/kg
  - Intubation
  - Bag & Mask Ventilation
  - Adrenaline
  - Atropine
  - Naloxone
  - Salbutamol
  - Pain relief (Morphine)
  - Paracetamol
  - Modify Ventilator settings