



NORMAL VITAL SIGNS BY AGE GROUP

Age Group	HR (bpm)	RR/min	SBP mmHg	DBP mmHg	Temp °F	SpO2
Newborn (0-1mo)	120-160	40-60	60-90	30-60	97.7-99.5	>95%
Infant (1-12mo)	80-140	30-60	70-100	50-70	97.7-99.5	>95%
Toddler (1-3y)	80-130	24-40	80-110	50-80	97.5-99.5	>95%
Preschool (3-5y)	80-120	22-34	80-110	50-80	97.5-99.5	>96%
School Age (6-12)	70-110	18-30	85-120	55-80	97.5-99.5	>96%
Adolescent (13-18)	60-100	12-20	95-140	60-90	97.8-99.1	>97%
Adult (18-65y)	60-100	12-20	90-120	60-80	97.8-99.1	>95%
Older Adult (>65)	60-100	12-20	90-140	60-90	96.8-98.6	>94%

CARDIAC & CIRCULATORY RED FLAGS

HR <40 or >150 bpm	Immediate MD notification required	CRITICAL
SBP <90 mmHg	Hypotension — assess for shock, fall ...	HIGH
SBP >180 mmHg	Hypertensive urgency — notify MD stat	HIGH
Irregular rhythm	Document, 12-lead EKG, check telem...	FLAG
New chest pain	PQRST assessment, EKG, troponin stat	CRITICAL
Cap refill >3 sec	Poor perfusion — full cardiovascular w...	FLAG

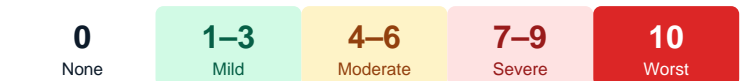
RESPIRATORY RED FLAGS

RR <8 or >30	Immediate intervention — secure airway	CRITICAL
SpO2 <90%	O2 stat, position upright, notify MD now	CRITICAL
SpO2 88-94%	Monitor closely, verify probe placement	HIGH
Stridor present	Airway emergency — call rapid resp...	CRITICAL
Accessory muscles	Respiratory distress — escalate now	HIGH
Absent breath sounds	Pneumothorax or obstruction — emerg...	CRITICAL

NEURO RED FLAGS

Sudden confusion	FAST stroke screen, notify MD stat	CRITICAL
GCS drop >2 pts	Neuro emergency — escalate now	CRITICAL
Unequal pupils	Increased ICP concern — MD immedi...	CRITICAL
New-onset seizure	Seizure precautions, time, duration, MD	HIGH
Temp >104 or <96°F	Hyper/hypothermia protocol — notify MD	HIGH

PAIN SCALE REFERENCE



- Use facility-approved scale (Numeric, FACES, FLACC, CPOT)
- Reassess 30-60 min after intervention and document result
- Non-verbal: observe grimacing, guarding, restlessness