



## International Society of Rapid Response Systems

### Position Statement on Inclusion of Vital Signs in Patient Electronic Health Care Records

Patients in hospitals are at risk of clinical deterioration and this is often predicted by alterations in vital signs. The accurate measurement of vital signs is a key skill for health care professionals.

The International Society of Rapid Response Systems **strongly recommends** the regular measurement of vital signs in an acute care setting. The frequency of measurements should be determined based on the acuity of the patient and the degree of deviation from normal. At a minimum, patients in an acute care setting should have **a full set of vital signs** measured every 8 hours.

This recommendation aligns with policy from countries with mature rapid response systems. The Australian guidelines are shared [here](#) with permission. Hospitals should have this recommendation embedded into policy that aligns with their escalation of care plan and integrates with their rapid response system.

A full set of vital signs includes heart rate, blood pressure, temperature, respiratory rate, oxygen saturation, supplemental oxygen requirements and some measure of level of consciousness. There is evidence from early warning score research that additional measures of delirium and capillary refill improve the ability to predict deterioration.

We **strongly recommend** that electronic health record providers should have a forced function to require **a full set of vital signs** at the prescribed frequency\*.