SBAR Guidelines

These guidelines come from a tool published by the Institute for Healthcare Improvement, an organization dedicated to
improving the quality and safety of health care in the United States.

Prior to calling the physician, follow these steps:

- Have I seen and assessed the patient myself before calling?
- Has the situation been discussed with resource nurse or preceptor?
- Review the chart for appropriate physician to call.
- Know the admitting diagnosis and date of admission.
- Have I read the most recent MD progress notes and notes from the nurse who worked the shift ahead of me?
- Have available the following when speaking with the physician:
  - Patient's chart - List of current medications, allergies, IV fluids, and labs
  - Most recent vital signs - Reporting lab results: provide the date and time test was done and results of previous tests for comparison
  - Code status

When calling the physician, follow the SBAR process:

(S) Situation: What is the situation you are calling about?
- Identify self, unit, patient, room number.
- Briefly state the problem, what is it, when it happened or started, and how severe.

B) Background: Pertinent background information related to the situation could include the following:
- The admitting diagnosis and date of admission
- List of current medications, allergies, IV fluids, and labs
- Most recent vital signs
- Lab results: provide the date and time test was done and results of previous tests for comparison
- Other clinical information
- Code status

(A) Assessment: What is the nurse's assessment of the situation?

(R) Recommendation: What is the nurse's recommendation or what does he/she want?

Examples:
- Notification that patient has been admitted
- Patient needs to be seen now
- Order change

Document the change in the patient's condition and physician notification.