RN to Physician SBAR Examples

- **Scenario 1:** An RN on the Medical Floor has an order for a patient to receive an exam that requires IV contrast. The patient’s creatinine level is 2.9. The ordering physician needs to be called to clarify this order.
  - **Situation:** “Dr. Smith, this is Darlene on Med/Surg at OMH. I have an order for a PE study for Mr. Marino. His creatinine is elevated and I wanted to clarify the order with you.”
  - **Background:** “I see that Mr. Marino came into the ED with right-sided chest pain and difficulty breathing. The CT for rule-out PE was ordered.”
  - **Assessment:** “Mr. Marino’s creatinine level is 2.9, far above the allowable level for a rule-out PE study.”
  - **Recommendation:** “I think that the order should be changed from a CT for rule-out PE to an order for a VQ scan.”

- **Scenario 2:** A nurse wants to report a change in patient condition to the Physician.
  - **Situation:** “Dr. Thomas, this is Lisa in ICU at OMH. I am caring for Mr. Jones, in room 5. Mr. Jones has had a change in his heart rhythm.”
  - **Background:** “Mr. Jones had his hip surgery two days ago and has been going in and out of controlled A-fib since his surgery, with rates in the high 90’s. Mr. Jones has a history of A-fib and was on Coumadin 5 mg/day and Digoxin 0.25 mg/day prior to his hip replacement. He has not had any Digoxin or Coumadin since his surgery.”
  - **Assessment:** “This morning, Mr. Jones has gone into an uncontrolled A-fib, with a rate in the 120-130 range. He is currently asymptomatic and his vital signs are stable, with a blood pressure of 120/80. He is resting comfortably in his room.”
  - **Recommendation:** “I am thinking that a 12-lead should be ordered for Mr. Jones. Would you like his Digoxin and/or his Coumadin to resume? Are there any other tests you would like to order? I will call you if Mr. Jones converts or becomes symptomatic. Would you like me to call you with any other information?”

- **Scenario 3:** A patient is being admitted to OB in early labor. The RN needs to give an update to the on-call Obstetrician.
  - **Situation:** “Hello, this is Jenny from OB at OMH calling to let you know that Mrs. Winslow has been admitted in early labor.”
  - **Background:** “Mrs. Winslow presented to the ED around 1600 this evening. She is a 40-year-old Gravida1para2.”
She started in labor at 0900 today. She is RH+, GBS positive, and Rubella immune. Her Hepatitis status is unknown. Her membranes are intact. Mrs. Winslow has an allergy to Penicillin, reaction unknown, but became allergic to Penicillin as a child.”

- **Assessment:** “Mrs. Winslow has been on the monitor for 30 minutes, is contracting every 5 minutes. She is dilated to 3 cm, 70% effaced, and –1 station. Baseline FHT is 130, with average variability; there are accelerations of 15-beats/minute and no decelerations. Her vital signs are stable at 98.9 F, BP 130/68, Pulse 100, and RR 24. Mrs. Winslow does not want an epidural.”
- **Recommendation:** “May I enter your L&D order set? Since Jane is HBSAG positive, what treatment would you like? Would you like any other lab tests? How would you like me to contact you today?”

- Scenario 4: A patient who is post-surgical ankle repair is having unsuccessful pain control. The RN needs to get an order for improved pain coverage.

  - **Situation:** “Hello, this is Ron from Med/Surg at OMH. I’m caring for Mr. Tree in room 3. I’m calling regarding his pain control.”
  - **Background:** “Mr. Tree is a 22-year old who had surgical repair of a fractured ankle 2 days ago. He has had very minimal pain control since his surgery. He has an order for Tylenol 650 mg q 4 hours for minimal to moderate pain and Morphine IV, 1-4 mg q 2 hours for severe pain. He does not have any allergies to medications. This is his first time having any type of surgery or significant injury.”
  - **Assessment:** “Mr. Tree ranks his pain as a 9/10, with a quality of being sharp and radiating to his mid-calf area. He is reluctant to ambulate out of bed, even refusing to get into a chair at the bedside. His pedal pulses are equal, the surgical site is WNL, and all of his vital signs are stable.”
  - **Recommendation:** “I think that Mr. Tree would benefit from some longer-lasting pain medications. What would you prefer to order? Are there any exams or labs you would like to order? What should I call you for in the future regarding his pain control?”

For further information, please contact:

At WMH: Robbie Sonnentag, Manager of OB and Women’s Health, 928-2108 or Megan Anderson, Clinical Nurse Specialist, OB, 928-2136
At OMH: Ronda Roth, ICU Educator 569-4537