

SBAR Handover Tool

Use this tool to help facilitate efficient and safe communications about patients, including facility transfers and handover of care between providers.



S
Situation

Identify yourself & location ☐
 Identify patient (name, age, sex) ☐
 State diagnosis (suspected or definitive) ☐
 State reason for transfer or handover ☐
 (e.g. unavailable diagnostics or therapeutics)

B
Background

Admission date ☐
 Relevant past medical & surgical history ☐
 Recent changes in status (ABCDE findings/interventions) ☐
 Relevant labs & imaging ☐
 Recent vital signs ☐
 Management or interventions provided ☐
 (e.g. O2, infusions, antibiotics, procedures)
 Relevant psychosocial factors ☐

A
Assessment

State the diagnoses or conditions (if diagnostic uncertainty) ☐
 State severity of illness (stable or critical) ☐
 State patient trajectory (worsening or improving) ☐
 Report response to interventions provided ☐

R
Recommendation

State your recommendations & concerns ☐
 (e.g. transfer for specialist consult or frequent monitoring)
 State timeline for recommendations ☐
 (e.g. transfer or intervention needed in next 1 hour)
 State contingency plans ☐
 (e.g. If patient transfer is delayed, then I will...)

Confirmation: Ask receiver to repeat back key information and clarify any questions
 