SBAR Template

Situation:
Name/age:
BRIEF summary of primary problem:
Day of admission/post-op #:
Background:
Primary problem/diagnosis:
RELEVANT past medical history:
RELEVANT background data:
Assessment:
Current vital signs:
RELEVANT body system nursing assessment data:
RELEVANT lab values:
TREND of any abnormal clinical data (stable-increasing/decreasing):
TREET OF any abnormal chinear data (stable-mercasing/decreasing).
How have you advanced the plan of care?
Patient response:
INTERPRETATION of current clinical status (stable/unstable/worsening):
D.
Recommendation:
Suggestions to advance plan of care: