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**SBAR Example for Newborn Nurse Report to Pediatrician**

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| S**Describe situation**Always identify yourself, your location, and the name of the patient. Then quickly state the main reason and the level of urgency for the call. | My name is …. from….. I am calling about the patient ….* Please select one:
	+ You have a new admission to your service.
	+ Your new admission has an increased risk for sepsis.
	+ I want to provide an update on your patient (includes any abnormal assessments that require the RN to call pediatrician).
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| B**Provide background**Give brief pertinent background information – medical history, vital signs, and interventions that have already occurred. | Baby … * Infant weight, sex, and gestational age
* Born to a patient ... year old GsPs
* Born by vaginal delivery, forceps/vacuum or cesarean delivery (describe indication)
* In the delivery room, infant received (describe any resuscitation measures)
* Maternal labs are
	+ Blood type, Hep B, RPR HIV, Rubella, and GBS
		- GBS 🡪 Unknown/Yes … describe antibiotics
* Had (clear/meconium/bloody) fluid and was ruptured for a total of hrs
* Maternal history was significant for …
	+ Pregnancy complications? 🡪 Yes… describe
	+ Delivery complications? 🡪 Yes… describe
	+ Pertinent medications 🡪 Yes…describe
	+ Social concerns or substance use 🡪 Yes... describe
* Cord gas results and blood type (if available)
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| A**Share infant assessment** | According to the Neonatal Early-Onset Sepsis calculator, my assessment indicates …* Well Appearing
	+ No persistent physiologic abnormalities
* Equivocal
	+ Persistent physiologic abnormality > 4 hrs
	+ Tachycardia (HR > 160)
	+ Tachypnea (RR > 60)
	+ Temperature instability (> 100.4˚F or < 97.5˚F)
	+ Respiratory distress (grunting, flaring, or retracting) not requiring supplemental O2
	+ Two or more physiologic abnormalities listed above lasting for > 2 hrs

Note: abnormality can be intermittent* Clinical Illness
	+ Persistent need for NCPAP / HFNC / mechanical ventilation (outside of the delivery room)
	+ Hemodynamic instability requiring vasoactive drugs
	+ Neonatal encephalopathy / Perinatal depression
		- Seizure
		- Apgar Score @ 5 minutes < 5
	+ Need for supplemental O2 > 2 hours to maintain oxygen saturations > 90% (outside of the delivery room)
* The NEOSC calculator predicts the risk of EOS at X per 1,000 births.
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| R**Make recommendation**Say what you think should happen or ask for specific orders. | Based on this EOS risk and my clinical exam, the NEOSC recommendations include * Share clinical recommendations listed in NEOSC calculator for the relevant Clinical Exam.
* Share vital sign frequency recommendations from the NEOSC risk calculator for the relevant Clinical Exam.
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