SBAR report to clinician about a clinical obstetric situation

Situation
I am calling about (woman's name): ___________________________ Ward: ___________ Hosp No: ___________

The problem I am calling about is: ________________________________________________________________

I have just made an assessment:

The vital signs are: Blood pressure ___ / ___ Pulse ___ Respirations ___ SPO₂ ___ % Temperature _____ °C

I am concerned about:
- Blood pressure because it is:
  - systolic over 160
  - diastolic over 100
  - systolic less than 90
- Pulse because it is:
  - over 120
  - less than 40
- Respirations because they are:
  - less than 10
  - over 30
  - The woman is having oxygen at ___ l/min

- Urine output because it is:
  - less than 100mls over the last 4 hours
  - significantly proteinuric (+++)
- Haemorrhage:
  - Antepartum
  - Postpartum
- Fetal wellbeing:
  - Pathological CTG
- FBS Result: pH ______
  - Time sample taken: _______ hrs

Obstetric Early Warning Chart Score: ___________

Background (tick relevant sections)
The woman is:
- Primiparous • Multiparous • Grand multiparous
- Gestation: _______ wks • Singleton • Multiple
- Previous Caesarean section or uterine surgery
- Fetal wellbeing:
  - Abdominal palpation:
    - Fundal height: _______ cms • Presentation: _______ Fifth palpable: _______ FH rate: _______ bpm
  - CTG: • Normal • Suspicious • Pathological
- Antenatal:
  - A/N Risk sheet (details):

- Labour:
  - Spontaneous onset • Induced
  - IUGR • Pre eclampsia • Reduced Fetal movements • Diabetes • APH
  - Syntocinon
  - Most recent vaginal examination: Time _______ hrs
  - Cervical dilatation: _______ cms • Station of presenting part: _______ Position: _______
  - Membranes intact • Meconium stained liquor • Fresh red loss PV
  - Third stage complete • Retained placenta
- Postnatal:
  - Delivery date: _______ Delivery time: _______ hrs
  - Type of delivery: _______ Perineal trauma: _______
  - Blood loss: _______ mls • Syntocinon infusion
  - Fundus: • High • Atonic • Uterus tender • Abdominal/perineal wound oozing

- Treatment given / in progress:

Assessment
- This is what I think the problem is:
  - The problem seems to be • cardiac • infection • respiratory • haemorrhage
  - severe PET • HELLP • pulmonary embolism • pulmonary oedema • severe fetal compromise
  - I am not sure what the problem is but the woman is deteriorating and we need to do something

Recommendation
- Request:
  - Please come to see the woman immediately
  - I think delivering needs to be expedited
  - I think the woman needs to be transferred to delivery suite
  - I would like advice please

Response ________________________________________________________________

Person completing form (name): _________________________ Date: ___________ Time: _______
Reported to (name): __________________________

Person completing form (name):_________________________Date:___________ Time:_____  
Reported to (name):_____________________________________