

Instructions: Peak On Call Communication Form - SBAR

USE: For **URGENT** Peak On Call Resident issues.

PURPOSE: (1) To enable quick, consistent communication of key information in an urgent situation, and (2) to provide clear communication to the Resident's MRP.

STEPS:

1. Include the Resident's Name, Date of Birth (DOB), Personal Health Number (PHN), and Most Responsible Physician (MRP). If you use a Resident label, please redact/black out all information other than these identifiers.
2. Complete the entire SBAR (Situation, Background, Assessment, and Recommendations) form as appropriate **PRIOR** to calling the dispatch line. If the form is incomplete, callers will be asked to call back once the form is complete.
3. Call the Peak On Call, call line at **1-450-990-6200**. You will be forwarded directly to the Physician On Call (POC).
4. Record the POC's response on the SBAR form. Please include all instructions and orders.
5. Fax the completed SBAR form to the Resident's MRP to inform and plan follow up, if necessary. If the POC visits the Resident at the facility, include any progress notes or additional documentation to the MRP.
6. Fax the completed SBAR form to the POC for their records (see fax number below).
7. Record the date and time items are faxed.

Nanaimo Peak On Call Physician Fax Numbers – FOR FOLLOW UP FAX ONLY

Physician	Fax	Physician	Fax	Physician	Fax
Dr Calvin	250-754-6897				
Dr Dodo	250-754-3852				
Dr Houghton	250-755-4081				
Dr Javaheri	250-244-8442				

ABBREVIATIONS					
BG	Blood Glucose	INR	International Normalized Ratio	PHN	Personal Health Number
BP	Blood Pressure	LOC	Level of Consciousness	RCI	Residential Care Initiative
DOB	Date of Birth	MAR	Medication Administration Record	RR	Respiration Rate
eGFR	Estimated Glomerular Filtration Rate	MOST	Medical Orders for Scope of Treatment	SBAR	Situation Background Assessment Recommendation
GCS	Glasgow Coma Scale	MRP	Most Responsible Physician	Temp	Temperature

Questions or Comments about the SBAR?

If you would like to share feedback regarding this form, please contact the LTCI administrative team at:

LTCINanaimo@divisionsbc.ca or 250-591-1200

SBAR Form – Reasons for Call

Reason For Call (as listed in SBAR)	Alternate Descriptors
Abdominal Pain	Stomach pain, cramps, constipation, bloating
Agitation	Behavioural issues, descriptive symptoms ie. Yelling, hitting, biting etc.
Cardiac (low pulse)	Change in heart rate
Change in LOC (Level of Consciousness)	Unable to rouse, drowsy, lethargic
Chest Pain	Heart attack symptoms, angina
Confusion	Change to orientation including person, place, and time
Cough	Productive, unproductive, sputum (phlegm), dry or wet sounding
Death	Unexpected or expected
Delirium	Having hallucinations, inability to live in the present (outside of the normal)
Diabetes	Low blood sugar (hypoglycemia), high blood sugar (hyperglycemia)
Fall with injury	Any fracture (except hip) or injury resulting from a fall
Fever	Febrile
Hypertension	High blood pressure
Hypotension	Low blood pressure
Influenza Symptoms	Fever, headache, nausea, vomiting, diarrhea, lethargic
Lab Values	INR or eGFR levels, could include electrolytes issues such as critical changes to Potassium, Sodium etc.
Laceration	Skin opening
Medication Error	Medication given to a person in care accidentally or sometimes a pharmacy error
Pain Management	Increase or decrease to pain medication
Palliative Orders	End-of-Life care
Query Hip Fracture	Possible hip fracture (external rotation of leg, decreased range of motion (ROM), pain upon movement, leg shortening)
Shortness of Breath	Respiratory symptoms: wheezing, change in respirations, gurgling sounds Also could be related to Asthma, COPD (Chronic Obstructive Pulmonary Disorder, Emphysema)
Skin Problems	Rashes (shingles), redness (erythema), swelling (edema), bruising (ecchymosis), cellulitis
Urinary Symptom	Urinary Track Infection symptoms: pain upon voiding, change in behaviour, back pain, frequency to void, increased temperature (febrile)
Vomiting/diarrhea	Emesis, coffee ground emesis (blood in emesis), watery stool, melena stool (bloody, tar like stool- cause: internal bleeding)