Supplemental Digital Content, Table. Process of Nursing Handoff

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| Steps | Activities |
| Incoming Nurse | Nurses need to make every attempt to come in on time.  Nurses need to print their patients’ Kardexes. All information in Kardex will be concise and easy to read. |
| Outgoing Nurse | The Written Handoff in Kardex should include an updated communication of the SIP for the time frame the nurse cared for this patient (i.e. 0700-1900) and a brief review of systems, as well as anything pertinent that happened during the shift (\* See example below). The outgoing nurse needs to update the Nursing Kardex by the end of shift to reflect changes in any of the following:  Social/family situation  Discharge disposition  Specific wound care/ dressings changes with frequency and times  Diet order current and appropriate  Activity orders current and appropriate |
| Hand-off at Bedside Format | Within 10 minutes after arrival, the incoming nurse should be able to take the printed Kardex into the patient room with the off-going nurse to:   * introduce themselves; * ensure that there is no apparent change in condition of mental status or vital signs; * check electric medical record for anything outstanding; * Assess the drips , drugs, , drains, and compression boots.   During this general survey, or on the walk into the patient’s room, the incoming nurse can clarify any questions about the Kardex or handoff. |
| Example of the Documentation of a Handoff using the SIP (Situation, Intervention and plan) format. | **S:** Patient extremely confused. Diaphoretic and tremulous at start of shift. Believed to be withdrawing from medications that patient was taking at home and was not taking since admission.  **I:** Restarted on Oxycodone, Ativan, and Klonopin (home doses) . Mental Status improved but confusion continued. Patient removed IV. New one was inserted.  **P:** Monitor mental status. Administer medications that patient was taking while at home. |