



Communicating with SBAR

The SBAR (situation, background, assessment and recommendation) tool is provided below to aid in facilitating and strengthening communication between nurses and prescribers throughout the implementation of this quality improvement initiative. Hypothetical examples utilizing SBAR pertaining to the collection of urine or respiratory specimens for bacterial culture are included.

What is SBAR?

Below is a description obtained from the Institute for Healthcare Improvement.

- S = Situation (a concise statement of the problem)
- B = Background (pertinent and brief information related to the situation)
- A = Assessment (analysis and considerations of options—what you found/think)
- R = Recommendation (action requested/recommended—what you want)

Example: Collecting Respiratory Specimens for Bacterial Culture

- **Situation:** State who you are calling about and why.
 - This is Mr. XYZ's nurse in Unit XX Rm00 calling about the sputum culture order.
- **Background:** State briefly what you know about the history and the current status.
 - Mr. XYZ was admitted three days ago with a stroke.
- **Assessment:** State what you think the problem is and/or the severity.
 - The patient had a temperature of 38.0°C overnight and has an increased white count today. His respiratory status has not changed and his CXR is clear. He does have a new rash on his back.
- **Recommendation:** State what you think needs to happen for the patient.
 - Based on the respiratory culture algorithm, the patient does not have an indication for a respiratory culture. If you agree, I will not collect sputum for culture at this time. Would you be able to examine the rash? Will the patient need any other work up?

Example: Collecting Urine Specimens for Bacterial Culture

- **Situation:** State who you are calling about and why.
 - This is Mr. XYZ's nurse in Unit XX Rm00 calling about the urine culture order.
- **Background:** State briefly what you know about the history and the current status.
 - Mr. XYZ is POD#15 status post ex-lap for volvulus.
- **Assessment:** State what you think the problem is and/or the severity.
 - The patient is hypotensive and complains of abdominal pain. He denies symptoms of UTI. He is afebrile. He is on heparin for his PICC-related DVT.
- **Recommendation:** State what you think needs to happen for the patient.
 - Based on the urine culture algorithm, the patient does not have an indication for a urine culture. If you agree, I will not collect the urine for culture at this time, and request that you please cancel the urine culture order. Will the patient need any additional work up? Should I continue the heparin drip?

Reference

- Monsees EA, Tamma PD, Cosgrove SE, et al. Integrating bedside nurses into antibiotic stewardship: A practical approach. *Infect. Control Hosp Epidemiol.* 2019 May; 40(5): 579—584. doi: 10.1017/ice.2018.362.