North Bristol NHS Trust

SBAR report to clinician about a clinical obstetric situation

S — 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_____ SPO_2 _____% Temperature_____ ^0C

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:

B — Background (tick relevant sections)

The woman is:

- Primparous • Multiparous • Grand multparous
- Gestation: _____ wks • Singleton • Multiple
- Previous Caesarean section or uterine surgery

- Fetal wellbeing
  - Abdominal palpation:
  - Fundal height:_____cms • Presentation:_____ Fifths 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:_____

A — 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

R — 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):_____

PILOT - SBAR Clinical Obstetric reporting sheet. Oct 2008. Please photocopy form - file original in woman's notes and copy in SBAR Audit box.

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