Making a Referral

An **SBAR** approach is a good system to ensure you give them all the details in systematic way. Think about what the person you are speaking to will want to know, and have the notes, drug chart and nursing charts available so that you can answer any of their questions.

**Introduction**

- Explain your name, role and division
- Explain what you want from them (e.g. see a ward patient, give advice over the phone, take over a patients care, perform an investigation or see a patient in clinic)

“Hello, it’s Bob Mackintosh here, the on call FY1 for medicine. I am phoning because I would like you to review one of our patients on the ward for consideration of transfer to the intensive care unit.”

**Situation (core details)**

- Patient details (name, age)
- Patient location
- Major problem at the moment

“The patient is called Ronald Steward, he is a 59 year old man of ward E1 who I was asked to see because of hypotension”

**Background (admission and history)**

- Admission details (if inpatient): date, admission reason, treatments
- Past medical history
- ± any other relevant aspects of the history e.g. premorbid state

“He was admitted 3 days ago for community acquired pneumonia, for which he is on amoxicillin and clarithromycin. He is normally fit and well and has a history of mild asthma which is normally well controlled.”

**Assessment**

- Vital signs
- Examination findings
- Investigations received/pending
- Management so far

“His blood pressure is currently 85/45, despite 3 litres of IV fluids over the last 2 hours. He has only had 3ml urine output over the last hour. His is oxygenating fine and is not pyrexial. On examination, he is drowsy and confused with cool peripheries and coarse right lower lobe crepitations on auscultation. I have done an arterial blood gas which shows a lactate of 4. I have also sent bloods and repeat cultures, although the results are not yet back.”

**Recommendation**

- Diagnosis/differentials
- Management plan

“I think he has septic shock and wonder whether he needs inotropic support to maintain his blood pressure. I would be grateful for your input as soon as possible.”