Minimum set for transfer of care elements

Situation

- name:
- · age;
- weight:
- current MD;
- chief complaint/problems.

Background

- · brief and significant medical history;
- · allergies;
- ID and allergy band location;
- labs performed and significant results;
- radiology performed and significant results;
- isolation requirements.

Assessment

- · assessment of systems;
- · neurological;
- respiratory including 0, and ventilator settings;
- · cardiovascular include last set of VS;
- GI/GU;
- · skin:
- · muscle/activity;
- pain/fever;
- PEWS;
- social;
- was there information you did not receive;
- list missing information.

Recommend

- recommendation of plan of care for next shift;
- · pie note reviewed;
- consults;
- · upcoming procedures;
- · status of transfer or discharge orders;
- · discharge needs;
- · comments.

Source: Children's Healthcare of Atlanta.