

An Intraoperative Nurse Handoff Tool for Seamless Communication



Sandy Matos BSN, RN, CNOR, Tetyana Nushtayeva BSN, RN, Victoria Maccarello BSN, RN, Windell Cadelina, MPA, BSN, RN, CAPA

PROBLEM IDENTIFICATION

- The OR lacked a standardized way to communicate during intraoperative handoff between nurses.
- Critical information was being missed during handoff report between circulating nurses.
- Miscommunication of crucial information puts patient safety at risk.

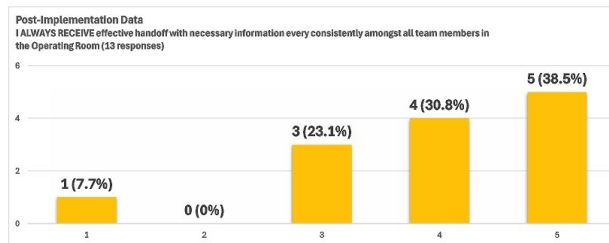
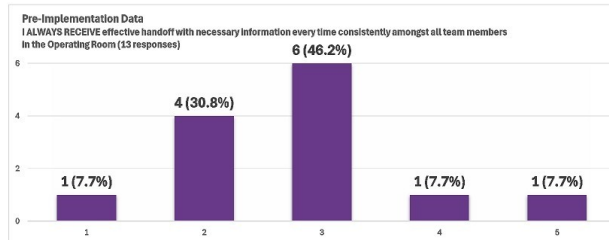
- P** - Ineffective handoff between circulating nurses during breaks and change of shift.
- I** - Incorporate a handoff tool to guide the handoff process.
- C** - There is no current intraoperative-specific handoff tool being utilized.
- O** - Improve circulating nurses' confidence during handoffs and enhance communication of critical information.

EVIDENCE REVIEW

- AORN guidelines recommend a structured, face-to-face handoff using standardized tools (such as IPASS or SBAR) to ensure accurate and effective transfer of patient information.
- Having an appropriate handoff in the operating room substantially reduces omission of information in the shift report. (Nasiri et al., 2021).
- For handoffs to be effective, they need to be coordinated appropriately in a timely fashion (Frasier et al., 2020).
- A standardized tool improves the quality of exchanged information during handoff (Periop Today, 2024).

METHOD & RESULTS

- Pre and post surveys were conducted for staff to report perceived quality of information relayed during handoff.
- Surveys were anonymous among current OR nurses with various levels of experience (n=13).



CHANGE PRACTICE

- A workgroup of nurses was formed. All nurses were surveyed on which components they believed should be included in handoff communication. Several versions were proposed & the workgroup developed a standardized SBAR report for implementation.
- The tool increased staff confidence in receiving crucial patient information.

NewYork-Presbyterian

CIRCULATOR INTRAOPERATIVE SBAR REPORT

S Surgeon:	Anesthesia Type: GEN (MAC) _____
P Procedures:	Isolation: _____ Relief Plan: SSN - USN (Permanent)
A Allergies: ONEDA	
B Advanced Directives: <input type="checkbox"/> None <input type="checkbox"/> HCP <input type="checkbox"/> LW <input type="checkbox"/> POA <input type="checkbox"/>	
B Blood: <input type="checkbox"/> Consent <input type="checkbox"/> T&S#1 <input type="checkbox"/> T&S#2 <input type="checkbox"/> Blood Available: PRBC _____ PLT _____ FFP _____ CRYO _____	
S Safety: <input type="checkbox"/> Grounding Pad <input type="checkbox"/> Safety Strip <input type="checkbox"/> Vasculars <input type="checkbox"/> DVT Prophylaxis <input type="checkbox"/>	
S Safety: <input type="checkbox"/> Skin/Positioning Concerns <input type="checkbox"/>	
A L&As: <input type="checkbox"/> Foley <input type="checkbox"/> ABline <input type="checkbox"/> Central Line <input type="checkbox"/>	
A Countables / Instruments <input type="checkbox"/> Relief Count (required for relief 20mins & permanent relief) <input type="checkbox"/> Counts	DE Field _____ Epi: _____/Other: _____
M Medications: <input type="checkbox"/> On Hand <input type="checkbox"/> Already Given	
S Specimens: (note type & number)	Implants / Tissues: (note availability/weight/brand/number)
T Total:	
R Preop Planning: <input type="checkbox"/> Closing Count completed <input type="checkbox"/> Final Count completed <input type="checkbox"/> Debrief completed <input type="checkbox"/> Recovery Location <input type="checkbox"/> Signings <input type="checkbox"/> Interpreter Services needed	Intentionally Retained Items: _____ Plan for Next Case: Needs/Flag Turnaround

EVALUATION

- The surveys showed significant improvement in quality and effectiveness of handoff reports between nurses.
- The handoff tool was shared with nurses at other New York Presbyterian hospitals and ultimately, was implemented across all NYP campuses as the standardized intraoperative handoff tool in the operating rooms.

CONCLUSION

- A standardized handoff tool optimizes communication among intraoperative nurses and ensures patient safety by increasing relay of necessary information.

REFERENCES AND CONTACTS

- Available upon request