

SBAR Report

Patient information

Patient's full name:

Age:

Gender:

Date of birth:

Chief complaint:

Patient's current situation

Briefly summarize the patient's chief complaints and concerns.

Patient's background

Discuss the patient's personal and family medical histories, current medications (if any), allergies, relevant laboratory results, and previous diagnostic findings.

Assessment of the patient

Summarize the patient's condition, including observations, exam findings, and any changes or deterioration from previous results.

Recommendations

Add your recommendations based on the situation and assessment. This may include specific interventions, treatment options, or necessary consultations

Additional notes

Attending healthcare professional:

Date of documentation:

Time of documentation:

Signature: