Applicant ID Letter ONLY:

Fully consider the situation/scenario

Analyse the situation/scenario, taking into account your analysis of the patient’s documentation

Complete clearly and accurately in writing, each stage on the ISBAR communication tool below (2 pages)

If there is no evidence then leave it blank

**No later than 5 minutes before finish time of OSCE: Using ONLY your completed ISBAR communication tool: communicate with the doctor**

|  |  |
| --- | --- |
| **I: Identity**  | **Your Notes** |
| Confirm Doctor’s name |  |
| Confirm patient’s name |  |
| Ward name |  |
| Confirm your name & grade |  |

|  |  |
| --- | --- |
| **S: Situation** Why you want to see the Doctor?Consider which of the following is **relevant** to share with Doctor | **Your Notes** |
| Total INEWs score |  |
| Single Score Parameter of concern |  |
| Respiration |  |
| Saturation |  |
| Oxygen |  |
| Heart Rate per minute |  |
| Blood Pressure |  |
| ACVPU Response |  |
| GCS / NeurologicalBest Response: Eye; Verbal; MotorPupils; Limb Movement |  |
| Temperature |  |
| Intake & Output |  |
| Recent changes in patient’s condition or Other relevant |  |
| **B: Background** What is the relevant background? | **Your Notes** |
| Age |  |
| When admitted |  |
| Why admitted |  |
| Recent procedures or surgery |  |
| Relevant medical history |  |
| Current prescriptions |  |
| Current treatments such as: NG tube or IVI |  |
| Other relevant |  |
| **A: Assessment:** | **Your Notes** |
| Tell the Doctor what you think is the problem |  |
| **R: Recommendation** | **Your Notes** |
| When do you want the Doctor to see the patient? |  |
| Why do you want the Doctor to see the patient within that time-frame? |  |
| Ask if there is anything else you need to do |  |