



DR. PABLO O. TORRE  
MEMORIAL HOSPITAL

# RIVERSIDE MEDICAL CENTER, INC.



**METRO PACIFIC HEALTH**  
THE HEART OF FILIPINO HEALTHCARE

<b>DEPARTMENT:</b> Nursing Services Division		<b>POLICY NUMBER:</b> DPOTMH-IPP-NSD-P042 (01)	
<b>TITLE/DESCRIPTION:</b> <b>TRANSITION OF CARE FOR NURSING SERVICES</b>			
<b>EFFECTIVE DATE:</b> May 6, 2025	<b>REVISION DUE:</b> May 5, 2028	<b>REPLACES NUMBER:</b> N/A	<b>NO. OF PAGES:</b> 1 of 12
<b>APPLIES TO:</b> Nursing Services Division		<b>POLICY TYPE:</b> Internal	

**PURPOSE:**  
To ensure continuity, accuracy, and safety in patient care during transitions, this policy provides standardized guidelines for nurse endorsements during changes in shift, intra- and interdepartmental transfers (e.g., from the Emergency Room to the regular ward), or any patient handover situation within our institution

**DEFINITIONS:**  
**Transition of Care**-The process of transferring responsibility for a patient’s care from one healthcare provider or setting to another.  
**Endorsement/Handover**-The act of communicating essential information about a patient’s condition, care, and needs to the next caregiver or team.  
**Receiving Nurse**- The nurse who takes over responsibility for the patient.  
**Endorsing Nurse**:-The nurse who transfers responsibility for the patient’s care.  
**SBAR**- A structured method for communication using four elements: Situation, Background, Assessment, and Recommendation.

**RESPONSIBILITY:**  
Nurses

**POLICY:**

1. All patient transitions must be accompanied by complete, accurate, and timely endorsements using the SBAR format. Please SEE policy SBAR.
2. Verbal and written handovers are required during:
  - a) Change of shift
  - b) Transfer from ER to regular station
  - c) Transfer from one unit/station to another
  - d) Internal transport (e.g., to diagnostic areas) when prolonged or critical
3. All transitions must involve a direct nurse-to-nurse communication.
4. Electronic or written documentation should accompany verbal endorsements
5. The endorsing nurse remains responsible until endorsement is completed and acknowledged.
6. Patients in critical condition (e.g., unstable vital signs, on oxygen or inotropes, altered level of consciousness, post-cardiac event) must be accompanied by a nurse during transfer to any destination within the hospital (e.g., OR, Radiology, Hemodialysis) brings appropriate equipment (ambu bag, oxygen, emergency drugs if applicable).





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## PROCEDURE (SOP):

### A) Shift Change Endorsement

1. Please SEE Endorsement policy.

### B) ER to Regular Station Transfer or other Unit

1. ER nurse prepares the patient and medical record (chart, referral slip, lab results)
2. ER nurse calls the receiving station to inform them of the transfer and endorses the patient using SBAR.
3. The receiving nurse checks wristlet, condition, IV lines, vital signs, and documents arrival time.

### C) Transfer from station to other unit

1. The endorsing nurse informs the receiving unit in advance and conduct endorsement using SBAR format.
2. Receiving nurse signs the hospital transfer slip.
3. Record the transfer in the Nurses log book.

### D) Transfer of Patient to the Operating Room (OR), Delivery Room (DR), Hemodialysis Unit, or Other Departments for Special Procedures

1. Pre-Transfer Preparation (by the Unit Nurse):
  - Verify the physician's order for the scheduled procedure.
  - Confirm readiness of the receiving department (e.g., OR, DR, Hemodialysis).
  - Assess and document:
    - Vital signs
    - Level of consciousness
    - Oxygen needs
    - Ongoing IV medications/fluids
  - Ensure completeness of required documents:
    - Doctor's order
    - Signed informed consent
    - Pre-op Checklist
    - Recent lab/imaging results
    - Anesthesia or clearance forms (if applicable)
  - Ensure completeness of Pre-op preparations





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2. Endorsement to Receiving Department:

- Conduct SBAR endorsement to receiving nurse or staff:
- Receiving personnel signs acknowledgment of handover.

3. Return to the Station (Vice Versa – Post-Procedure):

- Upon return of the patient from OR/DR/Hemodialysis or other procedural units:
  - Receiving unit nurse must:
    - Reassess the patient’s condition (VS, consciousness, IV lines, wound/dressing status)
    - Receive verbal SBAR endorsement from the accompanying or returning nurse
    - Review post-procedure orders and initiate them as needed
    - Ensure continuity of care
  - Any changes or complications noted must be:
    - Immediately reported to the attending physician
    - Documented in the nurse’s notes

**E) Patient for Diagnostic or Therapeutic Procedures**

(e.g., Department of Imaging, NICIS, Sleep Clinic, Endoscopy, etc.)

1. Preparation by the Unit Nurse.

- 1.1 Verify the procedure order and schedule.
- 1.2 Confirm if the department is ready to receive the patient.
- 1.3 Assess the patient’s condition and determine if a nurse escort is required.
- 1.4 Prepare and brings the following documents:
  - 1.4.1 Physician’s order
  - 1.4.2 Consent form (if applicable)
  - 1.4.3 Schedule – if needed
  - 1.4.4 Recent lab results (if relevant)

2. Endorsement to Receiving Departments

- 2.1 Conduct SBAR endorsement to receiving nurse or staff.
- 2.2 Receiving personnel signs acknowledgment of handover.

3. Return to Unit:

- 3.1 On return, the nurse receives the endorsement using the SBAR from the previous unit
  - 3.1.1 Assesses the patients condition post-procedure (consciousness, vitals, IV line, wound site if any)
  - 3.1.2 Document time returned and any post-procedure need or issues.





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## WORK INSTRUCTION:

KEY TASK	PERSON RESPONSIBLE
<b>ER to Regular Stations</b>	
1. prepares the patient and medical record (chart, referral slip, lab results)	ER Nurse
2. nurse calls the receiving station to inform them of the transfer and endorses the patient using SBAR.	
3. Checks wristlet, condition, IV lines, vital signs, and documents arrival time.	Receiving Nurse
<b>Station to other Units</b>	
1. Informs the receiving unit in advance and conduct endorsement using SBAR format.	Endorsing Nurse
2. Record the transfer in the Nurses log book	Receiving Nurse
3. Signs the hospital transfer slip.	
<b>Transfer of Patient to the Operating Room (OR), Delivery Room (DR), Hemodialysis Unit, or Other Departments for Special Procedures</b>	
1. Verifies the physician's order for the scheduled procedure.	Unit Nurse
2. Confirm readiness of the receiving department (e.g., OR, DR, Hemodialysis).	
3. Assess and document Vital signs, Level of consciousness, Oxygen needs, Ongoing IV medications/fluids	
4. Ensure completeness of required documents:	
5. Conducts SBAR endorsement to receiving nurse or staff	





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6. Signs acknowledgment of handover.	Receiving Nurse
7. Reassess the patient's condition (VS, consciousness, IV lines, wound/dressing status)	
8. Receive verbal SBAR endorsement from the accompanying or returning nurse	
9. Review post-procedure orders and initiate them as needed and ensure continuity of care	
10. Immediately reported to the attending physician for any changes and complications.	





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KEY TASK	PERSON RESPONSIBLE
<b>Patient for Diagnostic or Therapeutic Procedures</b>	
1. Verifies the procedure order and schedule.	Unit Nurse
2. Confirms if the department is ready to receive the patient	
3. Assess the patient's condition and determine if a nurse escort is required	
4. Prepare and brings the following documents:	
5. Physician's order, Consent form, Schedule and Recent lab results (if relevant)	
6. Conduct SBAR endorsement to receiving nurse or staff	
7. Assesses the patients condition post-procedure (consciousness, vitals, IV line, wound site if any	
8. Document time returned and any post-procedure need or issues.	
9. Receiving personnel signs acknowledgment of handover.	Receiving Nurse

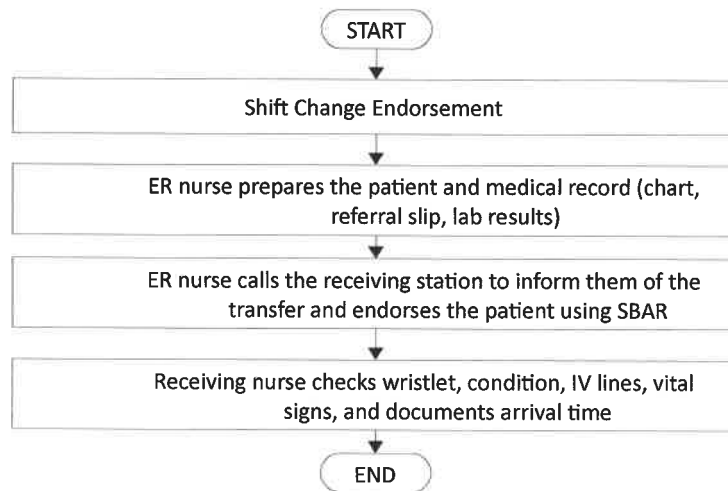




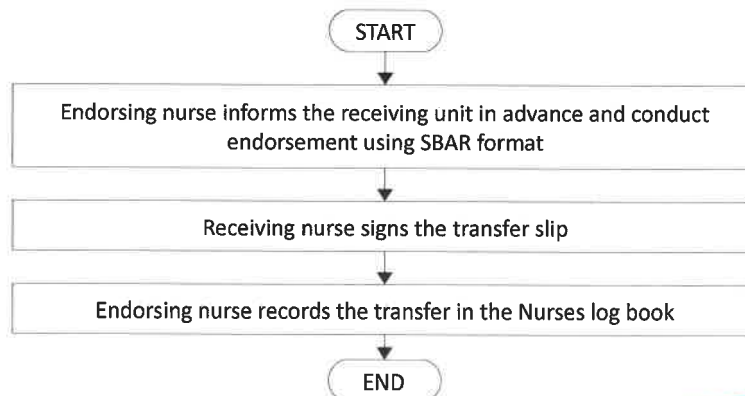
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## WORK FLOW:

### ER to Regular Station Transfer



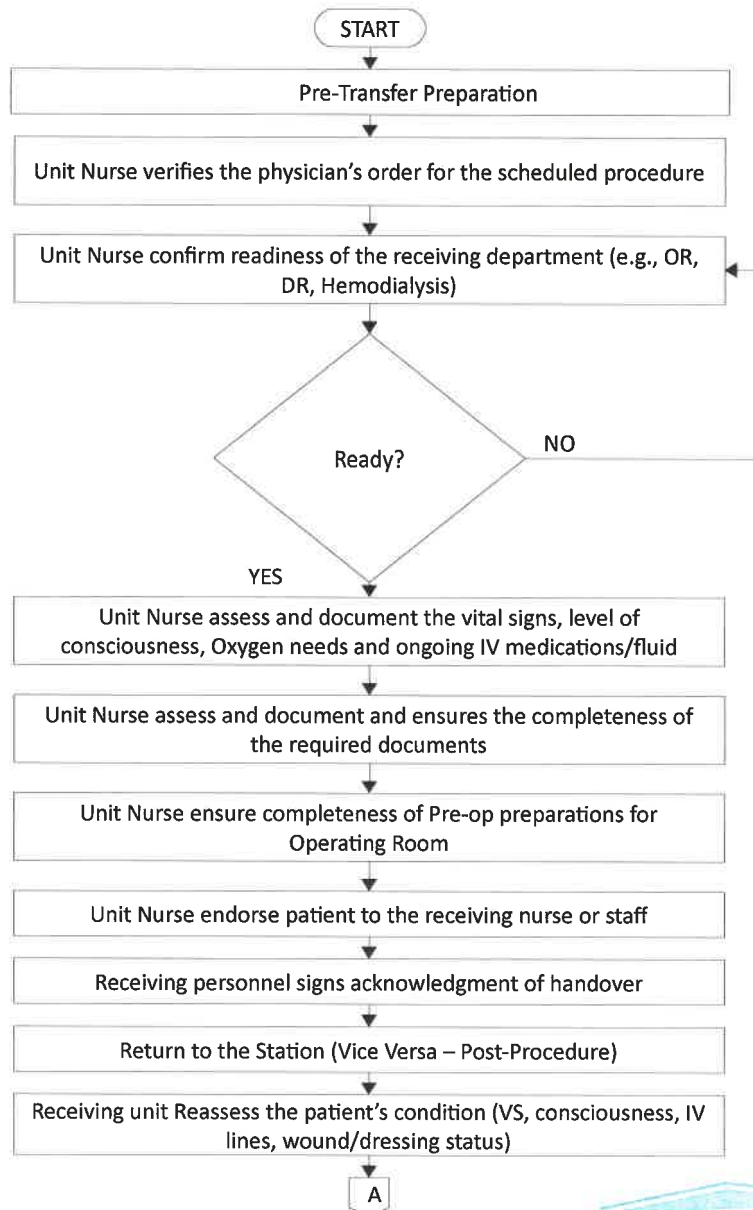
### Transfer from station to other unit





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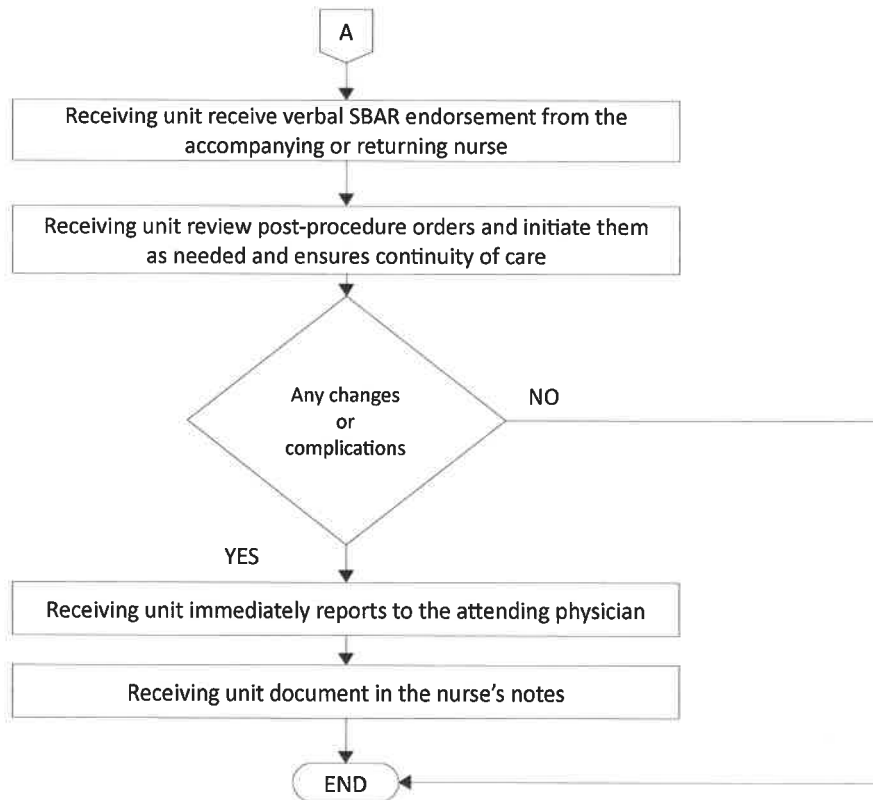
## Transfer of Patient to the Operating Room (OR), Delivery Room (DR), Hemodialysis Unit, or Other Departments for Special Procedures







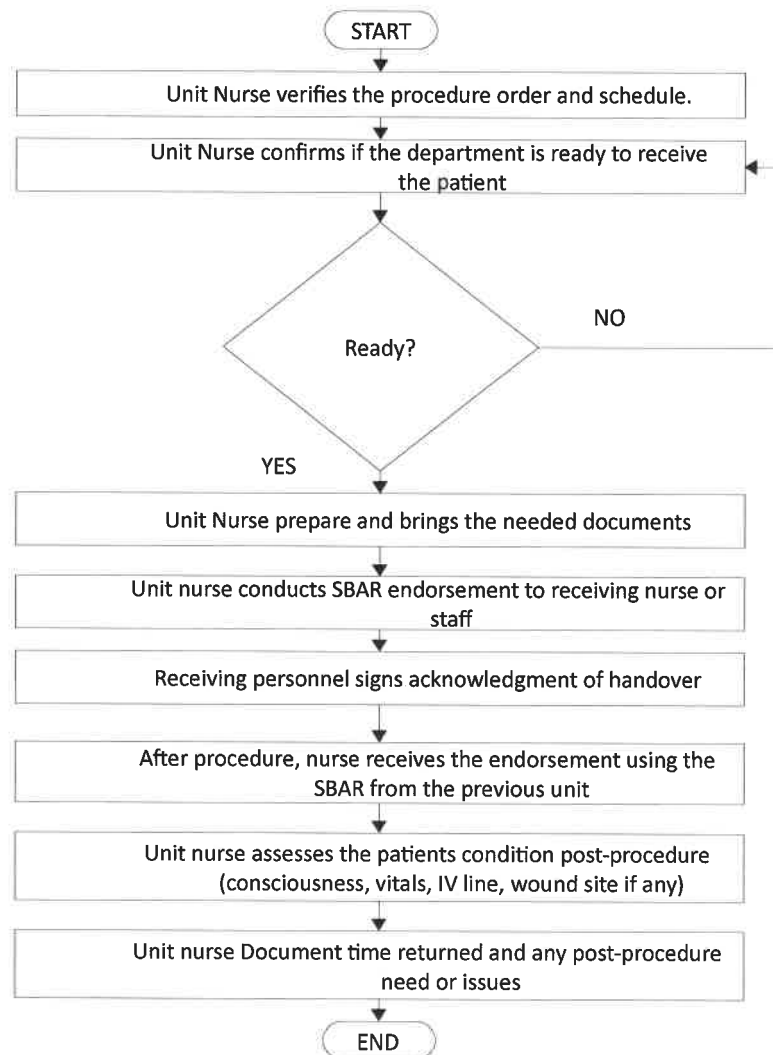
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## Patient for Diagnostic or Therapeutic Procedures



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<b>FORMS:</b> 1. DPOTMH-NSD-F026 (01) - SBAR
<b>EQUIPMENT:</b> N/A
<b>REFERENCES:</b> N/A

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<b>APPROVAL:</b>				
	<b>Name/Title</b>	<b>Signature</b>	<b>Date</b>	<b>TQM Stamp</b>
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