

Standard Operating Procedure (SOP)

Transfer and Handoff Communication to Surgical Team

This SOP describes the procedure for **transfer and handoff communication to the surgical team**, ensuring clear, accurate, and timely exchange of patient information during shift changes or between surgical staff. It includes standardized communication protocols, use of checklists, confirmation of patient identity, review of surgical plans, critical patient data, and any potential risks or concerns. The goal is to enhance patient safety, minimize errors, and promote effective teamwork throughout the surgical process.

1. Scope

This SOP applies to all perioperative staff involved in the patient transfer or handoff to a surgical team, including nurses, anesthesiologists, surgeons, and surgical support staff.

2. Responsibilities

- **Outgoing team:** Provides a detailed handoff using the approved checklist and standard communication tools.
- **Receiving team:** Actively listens, asks clarifying questions, and confirms receipt and understanding of vital information.
- **All staff:** Ensure patient safety and confidentiality throughout the handoff process.

3. Procedure

1. **Preparation:**
 - Review the patient's records and current status.
 - Gather all relevant documentation (charts, checklists, notes).
2. **Initiate Handoff:**
 - Ensure both teams are present and undistracted.
 - Introduce all team members involved in the handoff.
3. **Patient Identification:**
 - Use at least two patient identifiers (e.g., name and date of birth).
 - Confirm the correct surgical procedure and site.
4. **Use of Standard Communication Protocols (e.g., SBAR):**
 - **S:** Situation – Current condition or reason for transfer.
 - **B:** Background – Relevant medical/surgical history.
 - **A:** Assessment – Findings, recent changes, vital signs.
 - **R:** Recommendation – Actions to be taken, anticipated needs, potential concerns.
5. **Checklist Review:**
 - Review surgical checklist (e.g., time-out protocol).
 - Verify preoperative preparations and consents.
6. **Critical Information:**
 - Provide allergies, medications, critical lab values, and special considerations (implants, devices, etc.).
 - Identify potential complications, precautions, or anticipated events.
7. **Interactive Questions:**
 - Allow receiving team to ask questions or seek clarifications.
8. **Confirmation:**
 - Receiving staff verbally confirm understanding (–read-back– if necessary).
 - Document the handoff in the patient's medical record.

4. Documentation

- Record the date, time, and participants involved in the handoff.

- Document key points discussed and any specific instructions or concerns.

5. Quality Assurance

- Periodic audits of handoff procedures for compliance and effectiveness.
- Feedback sessions to identify communication gaps or areas for improvement.

6. References

- World Health Organization (WHO) Surgical Safety Checklist
- Joint Commission National Patient Safety Goals
- Hospital Policy: Handoff and Team Communication Standards

Approval: _____ **Date:** _____