Attending Physician Quick Guide to the New UNMH ED Handoff

July 1, 2011

Preparation for Handoff
1. “Run the List” (go over next steps for all patients so that a clear plan is presented at handoff) within the hour leading up to the shift change with the attending.
2. Reevaluate high-risk patients (patients who have already been handed off once and/or who do not have a clear diagnosis or disposition plan) within the hour leading up to handoff

Handoff
1. **PLAN ED**
   - Patient (age, sex, name, room number and chief complaint)
   - Label with working diagnosis or differential diagnosis
   - Assessment (key elements of history, physical exam, labs, diagnostic imaging)
   - Next steps and nursing assessment (pending labs, diagnostic imaging, consultants)
   - Everything else (social issues, handed off before, systems issues)
   - Disposition
2. Spend approximately 5 minutes on clinical teaching
3. Organize handoffs by doing selected “bedside waking rounds”
4. Be on time and prepare for handoff early so that handoffs can start when scheduled
5. Officially admitted patients (have bed request and orders) should have a very brief handoff by the outgoing resident to the accepting attending; if the patient had admitting orders at the time of the previous handoff the outgoing attending provides the handoff to the accepting attending.