

Figure 1. Observation protocol used to evaluate the quality of handovers.

Date					
Presenter					
R1	R2	R3	R4	R5	Staff
Receiver					
R1	R2	R3	R4	R5	Staff
SBARR HANDOVER EVALUATION			Yes	Sometimes	No
S	Patient Identifiers Provided				
	Code Status Noted				
B	Includes Essential Info				
	Leaves out Important Info				
	Includes Unimportant Info				
A	Clinical Condition Described				
	Sickest Patients Clearly Identified				
R	To Dos provided				
	Contingency Plans (If/Then)				
R	Seeks understanding				
	Time for Questions				
	Clarifying Questions Asked				
Other Questions				Yes	No
Printed Handoff Document Shared?					
Clear who is accepting Responsibility?					
Was SBARR format clearly Followed?					
Was Handover Presented in an Organized Fashion					
Was the Setting Quiet/Free of Interruptions?					

Note: R1 through R5 indicates Resident and her or his year in the program.