

University Hospital of Brooklyn Transitions of Care

By signing this, I attest that I have used the I-PASS system at all times when a transition of care needs to happen, as outlined below:

I	Illness Severity	• Is the patient 'stable', a 'watcher', or 'unstable'?
P	Patient Summary	• Summary statement • Events leading up to admission • Hospital Course • Ongoing Assessment Plan
A	Action List	• To do list • Timeline and ownership
S	Situation Awareness, Contingency Planning	• Know what's going on • Plan for what might happen
S	Synthesis by Receiver	• Receiver summarizes what was heard • Asks questions • Restates key action/to do items

Consults (Seen Overnight)				
General Service	Non-Admissions			Stroke Service
		<u>Needs To Be Seen by Attending</u>		
		<u>Send Outs</u>		
		<u>AMAs</u>		
	X	Admissions		
		<u>Total</u>		

Date: _____	Night Float	General Senior	Stroke Senior
Printed Name			
Signature			

*After each sign out has occurred from each and every resident listed above, take a picture of this page and e-mail it to Yaacov.Anziska@downstate.edu