

MSKCC Modified IPASS Verbal Signout

I	Illness Severity	<ul style="list-style-type: none"> • Stable, watcher or unstable • Overnight expectation of patient coding or expiring 	"... next is Mr. Kirk. He's stable" [No need to verbalize the expectation not to code or expire]
P	Patient Summary	<ul style="list-style-type: none"> • 1-liner from 'FYI' line of signout including <ul style="list-style-type: none"> • Name • Code status • Age • Cancer diagnosis • Reason for admission • Reason they are still in hospital 	"James T. Kirk is a 51 y/o M with relapsed AML on targeted therapy, admitted for a mechanical fall, now with MDR bacteremia"
A	Action List	<ul style="list-style-type: none"> • To Do List for the night, including <ul style="list-style-type: none"> • What time to perform task • What to do with task / test results 	"At 7pm please follow up on the CBC. Instructions for what to do are in the printed handoff"
S	Situation Awareness and Contingency Planning	<ul style="list-style-type: none"> • Reference to important contingencies listed in the handoff • Important deviations from 'typical' practice • Confirm that you've completed the pre-signout checklist 	"Pre-signout complete. Contingencies documented for bleeding, fever recurrence, and disorientation. Do not give zosyn as had anaphylactic reactions to penicillin in the past."
S	Synthesis by Receiver	<ul style="list-style-type: none"> • Ask if they understood before moving on • Ask if they need you to do anything else for the patient before leaving 	"Do you understand? Anything else I can do for him before I go?"

Adapted from: **I-PASS, a Mnemonic to Standardize Verbal Handoffs**. Amy J. Starmer, Nancy D. Spector, Rajendu Srivastava, April D. Allen, Christopher P. Landrigan, Theodore C. Sectish, the I-PASS Study Group. Pediatrics Feb 2012; 129 (2) 201-204; DOI: 10.1542/peds.2011-2966.