

Situation

**S**

**Reason for handoff:** John is being transferred from the emergency department to the intensive care unit (ICU).

**Current situation and urgent concerns:** John is a 60-year-old male with a history of hypertension who presented to the emergency department with chest pain and shortness of breath. He was diagnosed with a myocardial infarction and has been stabilized with medications and interventions. He is being transferred to the ICU for closer monitoring and ongoing treatment.

Background

**B**

John has a history of hypertension and hyperlipidemia. He takes lisinopril and simvastatin daily. He has no known drug allergies. He had a previous myocardial infarction five years ago and underwent angioplasty with stent placement. His current treatment plan includes aspirin, heparin, nitroglycerin, and beta blockers.

Assessment

**A**

John's vital signs are stable, with a blood pressure of **130/80 mmHg,** heart rate of **80 beats per minute,** respiratory rate of **16 breaths per minute,** and oxygen saturation of **96% on room air**. He reports **mild chest pain and shortness of breath**. He is alert and oriented to person, place, and time. Recent laboratory results show elevated cardiac enzymes and troponin levels.

Recom-

mendation

**R**

John requires close monitoring of his vital signs and cardiac function in the ICU. He should **continue to receive medications for pain, thrombosis prevention, and blood pressure control**. A cardiology consult should be requested for further evaluation and treatment planning. John's family should be informed of his condition and treatment plan, and provided with information about his prognosis and expected outcomes.

Patient name: **John Smith**

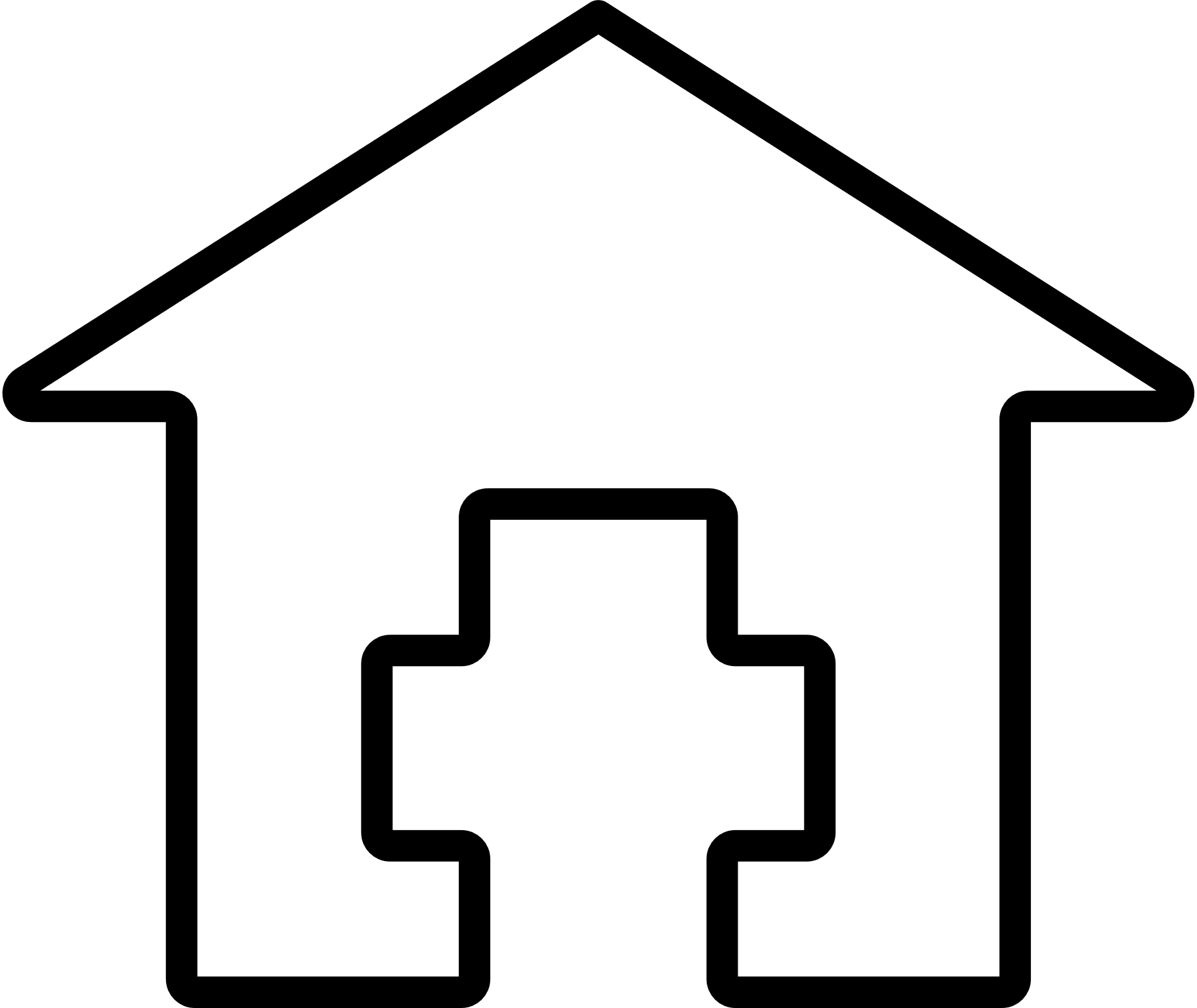
Handoff from: **Emergency department**

Room number: **205**

Handoff to: **Intensive care unit (ICU)**

**Handoff SBAR**

Date: **25 Dec 2026**



**Greenfield Memorial Hospital**

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