

## Role-plays

### **Scenario 1: Mrs. Wentworth (see SBAR form for scenario 1)**

Nurse: You have just received Mrs. Wentworth's INR results. Even though the values are in-range, you are required to call the physician to inform him/her. Luckily it is still early afternoon, so you are able to reach Mrs. Wentworth's primary care physician, Dr. Cole. Dr. Cole has known Mrs. Wentworth for two years, and is familiar with her history and care.

Physician (Dr. Cole): You are familiar with Mrs. Wentworth, but you are over 40 minutes behind in your schedule, and are in a real hurry. Your main goal is to end the call as quickly as possible.

### **Scenario 2: Mr. LaPelle (see SBAR form for scenario 2)**

Nurse: You are the Nursing Supervisor on the evening shift and one of your nurses reports to you that Mr. LaPelle has fallen and is complaining of pain in his left knee. You note visible bruising on his knee. You call the covering doctor, Dr. Goldsmith, to report the fall and bruising. The time is 11 pm.

Physician (Dr. Goldsmith): You are covering for your colleague and have never met Mr. LaPelle and do not know anything about his history, status or medications.

### **Scenario 3: Mrs. Rivera (see SBAR form for scenario 3)**

Nurse: While taking Mrs. Rivera's vital signs you note that she has a fever and foul smelling urine. You are worried about a UTI. Since it is 6:30 pm, you page the covering physician, Dr. Hinskey, and wait for a call back.

Physician (Dr. Hinskey): You are covering your colleague's patients this evening and do not know Mrs. Rivera. It is dinner time and you are eager to make a decision, give the nurse your orders and get off the phone. After the nurse tells you the UA results, the nurse proceeds to tell you background information about the patient, including prior INRs and relevant medications. You don't understand why she is giving this to you and cut her off. You are ready to hang up.

### **Scenario 4: Mrs. Folz (see SBAR form for scenario 4)**

Nurse: Mrs. Folz's labs have just come back and her INR is out of range. You must get in touch with her physician to see what should be done about her warfarin. Unfortunately, you generally have a hard time understanding this physician, Dr. Bottos, because she speaks really, really quickly.

Physician (Dr. Bottos): You are trying to give orders to this nurse and are frustrated that she does not seem to understand what you are saying the first time you say it.

### **Scenario 5: Mr. Lee (see SBAR form for scenario 5)**

Nurse: During your morning rounds you notice that Mrs. Lee has bruising on her right hand. Your nursing home requires you to always report such a situation to the resident's doctor. You call Dr. Rodriguez who has been Mrs. Lee's primary care provider for the past 5 years.

Physician (Dr. Rodriguez): You are familiar with Mrs. Lee and are wondering why you are being called about a patient who is stable.