Hospital Shift Handover Checklist

Daily Operations | US

UNIT / FLOOR	DATE	OUTGOING CHARGE NURSE	INCOMING CHARGE NURSE	SHIFT
	____ / ____ / _____			

UNIT CENSUS

Total patients on unit _____

Bed availability _____

Expected admissions _____

Expected discharges _____

Patients NPO _____

CRITICAL PATIENTS & RAPID RESPONSE

Patients on early warning escalation

Patients requiring 1:1 or continuous monitoring

Code blues or rapid responses this shift

Fall risk / elopement risk patients _____

MEDICATION & TREATMENT UPDATES

IV infusions running (patient, drug, rate)

☐ Controlled substance count verified

Two-nurse narcotic count

New or changed medication orders

Blood transfusions in progress _____

PENDING RESULTS & PROCEDURES

Lab results pending

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Imaging / diagnostics pending

Patients going to OR / procedures

Physician consults pending

EQUIPMENT & ENVIRONMENT

- [ ] Crash cart checked and sealed
- [ ] Linen and supplies adequate
- [ ] Equipment issues reported to biomed
- [ ] Unit clean and organised

STAFFING & SIGN-OFF

Incoming shift fully staffed ☐ Yes ☐ Short — see notes

- [ ] Travel/agency nurse orientation done

Outstanding tasks for next shift

Outgoing charge nurse signature

Incoming charge nurse signature

Notes

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