

SOP: BAHM - Bolton Anaesthetic Handover Model

1. Aim

To ensure safe clinical handover of patients from one team to another, e.g. from theatre to recovery, theatre/recovery to Critical care, handover to different anaesthetists.

2. Process

The process as below is summarised as side one of a laminate (Appendix 1).

A. PAUSE

- Check Patient is Safe
 - Monitoring connected
 - Airway secure
 - Ventilation acceptable (O2/ventilator connected)
 - Cardiovascular stability
 - Infusions have enough time for handover to occur

DO NOT BEGIN HANDOVER UNTIL THE PATIENT IS SAFE

- Check All Staff Present
 - Ensure all staff needing to give & receive handover are present
 - Avoid multiple handovers
 - For Critical Care handover, ensure both medical and nursing team present to receive handover

B. HANDOVER

- Use the handover checklist specific to area of handover: intraoperative, recovery and Critical Care (see Appendix 2a-c).
- For Critical Care admissions, the Critical Care medical handover document can be used:
<https://boltonicu.com/theatres-handover>

C. RECORD

- Record on anaesthetic record or a note on EPR:
 - Time & date of handover
 - Personnel involved
 - “BAHM checklist used”

3. QI

Implementation	April 2021
Audit	Retrospective review of handover documentation
Cycle	Bi-annual
Due	Q2 2021
Leads	JP Lomas / John Roberts / Lucy McManamon

BAHM

Bolton Anaesthetic Handover Model

1

PAUSE

- Monitoring connected (including capnography) & ABC check
- Ensure all staff needed are present
- Drugs/infusions connected and running

DO NOT BEGIN HANDOVER UNTIL THE PATIENT IS SAFE

2

HANDOVER

- Use a handover checklist (see over)
- For theatre to Critical Care admissions, the Critical Care medical handover document can be used:

 <https://boltonicu.com/theatres-handover>

3

RECORD

- Record on anaesthetic record or a note on EPR:
- Time & date of handover
- Personnel involved (name & grade/designation)
- “BAHM checklist used”

Appendix 2a: Intra-op Handover Checklist

1 PAUSE <ul style="list-style-type: none">• Monitoring connected & ABC check• Ensure all staff needed as present• Drugs/infusions connected and running <p>DO NOT BEGIN HANDOVER UNTIL THE PATIENT IS SAFE</p>	2 HANDOVER <ul style="list-style-type: none">• Use a handover checklist (see over)• For theatre to Critical Care admissions, the Critical Care medical handover document can be used: https://boltonicu.com/theatres-handover	3 RECORD <ul style="list-style-type: none">• Record on anaesthetic record or a note on EPR:• Time & date of handover• Personnel involved (name & grade/designation)• "BAHM checklist used"
--	--	---

Intra-op Handover Checklist

Situation

- Patient details
- Operation progress

Background

- Medical history
- Anaesthetic history
- Allergies

Assessment

- Anaesthetic technique
- Airway: ETT/LMA/Grade of laryngoscopy/Problems
- Venous access & other tubes
- Monitoring
- Intraoperative course

Recommendations

- Physiological targets
- Analgesia/anti-emetic/antibiotic/fluid plan
- Patient destination

Appendix 2b: Anaesthetist to Recovery Handover Checklist

1 PAUSE <ul style="list-style-type: none">• Monitoring connected & ABC check• Ensure all staff needed as present• Drugs/infusions connected and running <p>DO NOT BEGIN HANDOVER UNTIL THE PATIENT IS SAFE</p>	2 HANDOVER <ul style="list-style-type: none">• Use a handover checklist (see over)• For theatre to Critical Care admissions, the Critical Care medical handover document can be used: https://boltonicu.com/theatres-handover	3 RECORD <ul style="list-style-type: none">• Record on anaesthetic record or a note on EPR:• Time & date of handover• Personnel involved (name & grade/designation)• "BAHM checklist used"
--	--	---

Anaesthetist to Recovery Handover Checklist

Situation

- Patient details
- Operation & intraoperative significant events

Background

- Medical history
- Anaesthetic history
- Allergies

Assessment

- Anaesthetic technique
- Airway: ETT/LMA/Grade of laryngoscopy/Problems
- Venous access & other tubes
- Monitoring
- Intraoperative course
- Relevant intraoperative drugs
- All lines flushed at the end of the case?

Recommendations

- Physiological targets
- Post-op medication: analgesia/anti-emetics/antibiotics/fluids
- Other requests (HemoCue, blood glucose etc)
- Patient destination
- Contact details for queries/problems

Appendix 2c: Theatres to ICU Checklist

1 PAUSE <ul style="list-style-type: none">• Monitoring connected & ABC check• Ensure all staff needed as present• Drugs/infusions connected and running <p>DO NOT BEGIN HANDOVER UNTIL THE PATIENT IS SAFE</p>	2 HANDOVER <ul style="list-style-type: none">• Use a handover checklist (see over)• For theatre to Critical Care admissions, the Critical Care medical handover document can be used: https://boltonicu.com/theatres-handover	3 RECORD <ul style="list-style-type: none">• Record on anaesthetic record or a note on EPR:• Time & date of handover• Personnel involved (name & grade/designation)• "BAHM checklist used"
--	--	---

Theatre to Critical Care Handover Checklist

Patient

- Name & age
- Allergies
- History
- Operation

Anaesthetic

- Type of anaesthetic
- Airway / grade / method / difficulties
- Intra-operative course & complications
- Anticipated post-operative problems
- Analgesia plan
- Information given to relatives
- Prescriptions: drugs / fluids
- Current infusions

Surgery

- Consultant
- Blood loss
- Antibiotic plan
- Medication plan - restart/withhold/timing
- DVT prophylaxis
- Plan for tubes/drains
- NG tube & feeding plan
- Are any postop investigations required? (e.g. bloods, CXR)

Other information

- All lines flushed at the end of the case?
- Are all infusions labelled?
- Is the correct fluid in the transducer bag?
- Where is the patient's property?
- What information has been given to relatives?

Appendix 3: Critical Care Handover documentation

<https://boltonicu.com/theatres-handover>

Bolton | Critical Care

[Checklist PDF](#)

[Home](#) / [Tools](#) / [Theatres Handover](#)

This tool runs through the recommended Theatres to Critical Care Handover documentation and copies it for easy pasting into EPR.

Anaesthetic

- GA
- Spinal
- Block
- Local

Allergies

- No known allergies

Details

Intra-op course/complications

- Uneventful, no immediate complications

Details

Post-op Plan

Analgesia

Fluids & Feeding

Other Medication

Safety Checks

- Prescriptions Checked
- Infusions Labelled
- All lines flushed

Other information to handover

- Enter extra information to handover

[Copy to Clipboard](#)