Nursing shift note form with handover

Free template from soapnotes.xyz. Fill it in by hand or type over it.

NURSING SHIFT NOTE

Patient _____

Date _____

Nurse _____

Location _____

Reason for admission or main concern _____

Allergies _____

HANDOVER RECEIVED

From _____

Key points (condition, risks, tasks outstanding):

ASSESSMENT AT START OF SHIFT

General appearance and level of alertness:

Vital signs _____

Pain _____

Breathing and circulation:

Skin, wounds, lines and drains (site, appearance, dressing):

Eating, drinking and fluid balance:

Bowels and bladder:

Mobility and falls risk:

Mood, orientation and behavior:

Safety measures in place (bed rails, call bell in reach, other):

CARE GIVEN

Time and care (medication given as ordered, wound care, hygiene, repositioning, mobilising, other):

Patient's response to care:

FOCUS NOTE (use one for each issue)

Focus (the problem or event):

Data (what you saw, heard or measured):

Action (what you did, and who you told):

Response (how the patient was afterward):

PATIENT AND FAMILY

What the patient said or asked, in their words:

Teaching given and how well it was understood:

Family or visitors, and what was shared:

COMMUNICATION AND ESCALATION

Doctor, team or other staff contacted (who, when, why):

Orders received or changed:

Incident reported: [ ] yes [ ] no

HANDOVER GIVEN

To

Key points (condition, risks, tasks outstanding, what to watch for):

Signature and credentials:

Educational template, not medical or legal advice. Follow your employer and regulator rules.