Objective
The objective of this exercise is to understand the scenario and to provide clear and concise handover of information using the STOP and WATCH form and completing the ISBAR handover.

Instructions
Break into small groups. Nominate one participant to provide feedback on how the group worked through the scenario.

Scenario 3.

You are the AIN on for a morning shift on Saturday. You were told at handover that Mr. Grahame Bell had an unwitnessed fall during the night and had a "bit of a bump on his head."

You go to get him for breakfast and he is refusing to get out of bed, Grahame is complaining of a headache and won’t let you look at his head.

He appears vague to you and Grahame is normally just a pleasantly confused wanderer.

Ring the Care Manager on call for advice, telling her you are worried.

Prepare for your call.

Complete STOP AND WATCH form and ISBAR handover.
Scenario 3.

- **Patient information**
  Grahame Bell is a 74-year-old man.
  DOB: 29th June 1940
  Address: Central Coast ACF
  GP: Dr Smith
  
- **Is he normally uncooperative?**
  State no, he is usually very compliant
  
- **Warfarin status**
  State no
  
- **Medications**
  Aricept, Micardis, Plavix, aspirin, and panadol three times a day (read from the webster)
  
- **Advanced Care Plan**
  No but that the wife often visits and takes him on outings
  
- **Family notified of fall?**
  State wife is aware of the fall and wants him to go to hospital
  
- **Has he been unwell recently?**
  State no, has been perfectly well and normal
  
- **History of falls in the past?**
  State no
  
- **Does patient have history of being unsteady on feet/dizziness?**
  State yes that the GP says he has vertigo at times
  
- **Mobility**
  Normally walks independently
  
- **Vital signs**
  He won’t let you take them, he keeps telling you to go away
  Baseline: T 36.8 BP 140/85 P 78 O2 sat room air 96% Resps: 16