Among health care professionals effective communication is vital to achieve the best patient outcomes possible. “Sign-offs”, the mechanism of transferring information and responsibility from one set of caregivers to another has been under the spotlight as a potential area where miscommunication can occur. In residency training, this potential has increased with the greater number of transitions of care due to the ACGME duty hour restrictions. We have instituted training sessions on strategies to improve the sign-out process.

For the clinical faculty with inpatient services please re-enforce and model these important elements:

- **PGY-1** should master the Essential Elements of Sign-out Giving:
  - Patient identification
  - Patient diagnosis/background
  - Current conditions or current physical exam
  - **Contingency plans**
  - Overall general treatment plan

*Research has shown that the contingency plans are frequently lacking. Therefore it is imperative that during work rounds that the faculty supervisors discuss potential problems that may occur overnight and the necessary interventions.*

- **PGY-2** should master the above plus the Essential Elements for Sign-out Receiving. They should be able to:
  - Read back and summarize each patient, a process called co-orientation
  - Ask for questions and clarifications
  - Solicit other overnight tasks for patient

- **PGY-3, 4, and fellows** have mastered giving and receiving sign-out and are working towards:
  - Collaborative cross check (A process performed by experts where decisions made by one’s colleagues are verified. An Example: “Hey, are you sure that this is a viral pneumonia...the patient has a focal infiltrate with high fever?”)
  - Off topic discussion that includes teaching points

Please respect the timing of the residents’ check-out (6:30 - 7:15am/pm) to minimize distractions and allow for the most effective exchange of information to occur.