

Nuts and Bolts of FCR

FCR sequence

- Order of rounds: 3E → 3N → 3S → 3W
- Start with the lowest room number and then work your way clockwise.

Senior Roles – TEAM MANAGER – Keep it moving! Keep everyone involved!

- 7:30am: Page attending with early AM discharge list so you will not have to round on these patients.
- 8:40am: If adolescent patients are present – Meet in the 3E conference room to discuss sensitive and confidential issues.
- 8:45am: Once done discussing confidential issues – Call Pharmacist and Nursing unit to inform them that medical rounds are starting with Adolescents patients on 3__ unit. (The pharmacist will page the rest of the ancillary staff to meet you at the first patient)
- ~9:00am: Once finished rounding with the Adolescent service– Call the Hospitalist attending and nursing unit and inform them that you will begin rounding in room _____.
- Roles:
 - Discuss any sensitive issues outside the room prior to seeing patient
 - Facilitate the rounds: Ask for input from ancillary/nurse/parent if not done by intern.
 - Review Summary and DC goals if not done by intern
 - **Read Back Orders at the end of rounds for each patient**
 - Ask Nurse and parents if they have any questions if not done by intern.
 - Fill in gaps, Add teaching points.
 - Paging FCR group will be done by the pharmacist
 - Nurse should be notified of rounds by the previous nurse.

Intern/Medical Student Roles – PRIMARY COMMUNICATOR – Jump In! These are your patients!!!

- Ask parent how they want to be involved: Rounds inside room vs. outside room
- Introduction of process and team
- Use family friendly language
- Present overnight events, ask for family and RN input
- Present assessment and plan
- **Request input from ancillaries during plan**
- Ask family and nurse if they agree with plan, understand DC goals, any questions
- Thank family for their participation