TOOLKIT 5 · PATIENT IDENTIFICATION · TOOL 4 OF 5

Read-Back and Closed-Loop Communication

Verbal orders, telephone results and critical values: say it, write it, read it back, confirm it. The rule and the phrases

When read-back is mandatory

- Any verbal or telephone order for a medicine, a test or a treatment
- Any telephone report of a laboratory, imaging or pathology result
- Any critical value (Tool 5) reported to a clinician
- Any handover of a patient between shifts, wards or facilities

The four steps

Step	Who	Says
1 · Give	Sender	States the order or result once, clearly. Numbers digit by digit: "one-five, fifteen milligrams".
2 · Write	Receiver	Writes it down immediately — not on a hand, not from memory.
3 · Read back	Receiver	Reads the written version aloud, in full: patient (two identifiers), drug, dose, route, frequency — or the result and units.
4 · Confirm	Sender	"That is correct." Only then does the receiver act. If anything differs: repeat from step 1.

Speak numbers safely

Say	Not
"fifteen — one-five"	"15" alone (heard as 50)
"zero point five milligrams"	".5"
"five milligrams" (no trailing zero)	"5.0" (read as 50)
"units" in full	"U" (read as 0)
"micrograms" in full	"µg" or "mcg" spoken as "mg"

Sign-back

Every verbal order is countersigned by the prescriber within 24 hours. Verbal orders are for emergencies and when the prescriber cannot write — never for convenience. Chemotherapy and high-alert medicines are never ordered verbally.

Phrases. "Let me read that back to you." · "I have written: … Is that correct?" · "Please spell the drug name." · "I did not catch the dose — say it again in digits."

ASF standards: Standard 4 — communication of orders and results (means of verification: verbal-orders log, countersignature audit)