

48-72 Hour Callback Script

Hello Mr./Ms._____. This is _____ Discharge Coordinator for _____ here at Tift Regional Medical Center. I just wanted to call and check on you. You were discharged on _____, how are you doing? *Do you have a few minutes to answer a couple of questions that will help us improve how we teach patients and their families to better care for themselves after leaving the hospital?*

First, Can you tell me when your doctor's/ follow up appointment is scheduled for?_____ Will you be able to keep this appointment? It's VERY important that you attend all of your follow up appointments.

(If ok move forward, if not ok, then make arrangements to reschedule follow up appointment for patient.)

Do you know how to reach your doctor if you need him/her?

Let's talk about your medicines. (If applicable) Were you able to get ALL of your medications filled?_____ If not, why? _____

Is the list of medicines we gave you helpful?

I just want to remind you that it is VERY important that you take your medications as directed by your doctor.

Do you have any questions about your medications? Do you understand why you are taking these medications? (I know this is a "yes/no" question, but I am unsure if a pt will give us all the time needed to go over each individual med, as this could take a very long time.) *you will have the list in front of you and may ask a specific question about one of the new scripts if pertinent.*

(If the pt has questions then go over the medications with the patient or if there are a lot of medications to review, more than 10, set up a time that Pharmacy can call and go over the medications with the pt, preferably that same day.

Do you feel your needs were met while you were a patient here?

Do you feel you had enough time to ask all your questions? Were they answered so you understood them?

Have you looked at your discharge plan since you left the hospital? Has it been helpful?

IF APPLICABLE – HAS YOUR HOME HEALTH NURSE BEEN INTO VISIT?

If I asked you to name one thing we could have done better while you were here, what would it be?

Mr./Ms. _____, we want to thank you for choosing Tift Regional Medical Center for your health care needs. our hospital. I appreciate you taking the time to speak with me about your care. You may get a survey in the mail, we would really appreciate if you take time to fill it out and return it. We strive here at Tift Regional Medical Center to give excellent care and always focus on ways to improve.

Thank You for your time. I hope you have a *great* day!

Patient Name and Account # _____

Signature of callback person _____

Date _____ Time _____

If Pharmacy to callback and review medications: Date _____ Time _____

Signature of Pharmacist reviewing medications: _____

Date Reviewed: _____ Time Reviewed: _____