

Table 1: Phone triage checklist for resident interpersonal skills, communication, and professionalism.

1. Resident calling a patient or referring physician

- Introduced self and identified representative attending or organization
- Asked for appropriate individual call recipient by name
- Informed call recipient of nature of call (e.g. “I am calling because...”)
- If intended call recipient is not available then resident left an appropriate message (including name, organization, general nature of call, return phone number, and best time to call back)
- If intended call recipient is available, then provided appropriate information in a professional (e.g., “sir, madam”) and courteous manner (e.g., used “please” “thank you”, “you are welcome”).
- Disclosed information in an appropriate venue (e.g, setting to protect privacy, away from public earshot) and to appropriate call recipient only
- Did not disclose inappropriate information (e.g., medically, legally, or ethically sensitive data)
- Documented phone record (e.g., patient name, date, time, content of call, signature, placed hard copy in chart)

2. Resident receiving a phone call from patient or referring physician

- Introduced self and representative attending, service or organization (e.g, “Hello, ophthalmology service, how may I help you.”)
- Time and date of call
- Name of patient and unique identifier (e.g., hospital number, date of birth)
- Appropriate triage of call (e.g, emergent, urgent, routine)
- Determined if patient chart needed for call (e.g., routine appointment scheduling vs. medical query)
- Documentation of content of call (medical necessity, urgency, disposition)
- Provided information in a timely (e.g., returned call) and courteous manner
- Disclosed information in an appropriate and sensitive manner
- If intended receiver of call is not available or receiver is unable to assist the caller at that particular time then informed patient/referring physician in an appropriate manner of disposition (e.g., “I can’t answer question that but I will find out myself or find someone who can help and I will call you back”)
- Recorded call back information appropriately including caller name, identifier, nature of call, urgency of call, return number (including area code or extension), name and spelling (phonetic pronunciation if also necessary) of caller, organization of caller if applicable, best time to return call if needed
- Treated caller with respect (e.g., did not argue or raise voice to caller)
- Did not place caller on hold unnecessarily
- Did not place caller on hold without informing them (not “Hello, please hold”)
- Did not place caller on hold for longer than 30 seconds without returning to phone to explain and apologize for delay
- Thanked caller
- Documented phone encounter appropriately in chart (e.g., signature, time, date)