TOOLKIT 13 · DISCHARGE & TEACH-BACK · TOOL 5 OF 5

Post-Discharge Phone Call — 48 to 72 Hours

Ten minutes, by a nurse, two days after discharge. Medicines, symptoms, appointments, questions. Half of readmissions announce themselves in this call

Patient · discharge date · called by · date and time of call · reached? ☐ Yes ☐ Message ☐ No answer (retry)	

Step	Script	Record
1 · Open	"This is [name], a nurse from [ward]. We call everyone two days after going home. Do you have ten minutes? First, can you confirm your date of birth?"	
2 · How are you	"How have you been since you got home? Compared with the day you left — better, the same, or worse?"	Better ☐ Same ☐ Worse ☐
3 · Medicines	Go through the list on the care plan, one by one: "Are you taking [medicine]? How many times a day? Any problems getting it or taking it?" Check the changed ones twice.	Taking all ☐ Problems: _____
4 · Warning signs	"On your plan we listed [signs]. Have you had any of these?" If yes: advise per plan; escalate below.	None ☐ Yes: _____
5 · Appointments	"Your follow-up is on [date] at [place]. Is that still right? Do you know how you will get there?"	Confirmed ☐ Rebooked ☐
6 · Questions	"What questions do you have? What has been hardest since you got home?"	
7 · Close	"If anything changes, call [number]. Thank you — we will see you on [date]."	

Escalate the same day if: any warning sign present · not taking a critical medicine (anticoagulant, insulin, antibiotic, heart failure drugs) · worse than at discharge · no follow-up arranged · cannot get medicines. Escalation: doctor callback within 4 hours, or advise emergency department.

Actions taken: _____ **Escalated to:** _____ **Time:** _____ **Outcome:** _____

Adapted from the AHRQ RED Toolkit, Tool 5: How to Conduct a Post-Discharge Follow-Up Phone Call.

ASF standards: Standard 6 — aftercare (means of verification: call records; readmission rate)