

3 DAY CALL INFORMATION AND SCRIPTING

- May begin calling patients for **3 Day** calls ~ 10:00 am. Print schedule and have OR Charge Nurse and an Anesthesiologist check it.
- 3 Day calls are made 3 business days prior to the day of surgery. On Monday-call pts for Thursday; Tuesday-call pts for Friday; Wednesday-call pts for Monday, on Thursday-call pts for Tuesday, on Friday-call pts for Wednesday
- The ACC address for GPS/Mapquest purposes: Ambulatory Care Center, 102 Mason Farm Road, CH NC, 27599
- Suggested scripting for 3 Day Calls:

To leave a voice mail message:

Hello, this message is for [Name of pt]. Please call 919-966-7572 and state you are calling for information about your appointment on [day of week]. Again our number is (please speak slowly) 919-966-7572.

To speak with a patient or representative:

- *Hello, this is [name] and I am a nurse at the Ambulatory Care Center in Chapel Hill. I am calling with general information about your [surgery, procedure] with [Dr. Name] on [day or date of surgery]. Identify and document the person with whom you are speaking. First I would like to verify that you are familiar with the Ambulatory Care Center on Mason Farm Road. It is not a part of the Main Hospital. Do you know where it is located? (If not, give the physical address for GPS/Mapquest and/or explain driving directions and confirm the separate parking for ACC)*
- *I would also like to verify the best phone number to contact you. Document all phone numbers given.*
- *We will call you on [day before surgery] between 1 and 5pm to give you the surgery arrival time for [day of surgery]. If further explanation is needed: Our surgery schedule is not finalized till around noon on the day before surgery. We cannot give out any times until the schedule is complete as we have to allow for emergency cases that may be added.*
- *I would also like to remind you to have nothing at all to eat, **no** solid food, after midnight on [day before surgery]. On the day of surgery the only thing that you may have is clear liquids: apple juice, water, Sprite or **black** coffee, and you must finish those items at least 2 hours before you arrive for surgery. It is very dangerous for you to have anesthesia with food or other liquids in your stomach and your surgery may be cancelled if these instructions are not followed. Note: if the patient is being breast-fed, the feeding must **end** at least **4 hours before** the surgery arrival time.*
- *You must also have someone who is 18 or older, who can accompany you, **stay here** during the procedure, get your discharge instructions and be able to drive you home. We cannot begin your procedure unless an adult is here with you the day of surgery.*

- If this is a procedure that might require admission to SSU: *Did [Dr. Name] mention that you may possibly be admitted for overnight observation? If [Dr.Name] has asked you to be prepared to stay overnight, please make sure to bring the following items:*
 - ✓ All medications you are currently taking (in original containers)
 - ✓ Personal hygiene/toiletry items
 - ✓ CPAP machine

If the patient is < 18 years old, we require that one parent/guardian stay with the patient at all times.
All other patients may have only **ONE** overnight visitor.

- *Do you have any questions? If not, we will give you a call on [day before surgery] and let you know what time to be here on [day of surgery].*

Medications:

The most frequently asked patient questions are in regard to medications. The following guidelines may be referenced for providing answers to patient questions about medications. These guidelines were developed by and are used with the approval of Dr. Ty Bullard, Asst Med Director ASC.

Insulin/ Oral Glycemics: Advise patient to take ½ qhs dose of insulin on the night before surgery. Advise patient to hold all insulin and oral glycemic meds on morning of surgery.

Hypertensive Meds: Advise patient to take regularly scheduled a.m. doses of hypertensive meds with the following exceptions: ACE Inhibitors, ARBs, Diuretics. Encourage patient to take regular a.m. dose of Beta Blockers and Clonidine.

Examples:	ACE Inhibitors:	Catapril (capoten) Lisinopril (Prinivil/Zestril) Benazepril (Lotensin) Enalapril (Vasotec) Ramipril (Altace) Quinapril (Accupril) Fosinopril (Monopril) Zestoretic (combo ACE + Diuretic)
	ARBs:	Candesartan (Atacand) Eprosartan (Tevetan) Irbesartan (Avapro) Telmisartan (Micardis) Valsartan (Diovan) Iosartan (Cozaar) Olmesartan (Behicar)
	Diuretics:	HCTZ Aldactone Lasix (Furosemide)

GERD Meds: Advise patient to take regularly scheduled doses of meds for GERD.

Pain/Anxiety Meds: Advise patients to take regularly scheduled doses of pain or anxiety medications prior to surgery. The exception is MAO Inhibitors, should not be taken on the day of surgery.

Thyroid Meds: Advise patient to take regularly scheduled dose of medications for the replacement of Thyroid hormones.

Statins: Advise patient to take regularly scheduled dose of Statins prescribed for hypercholesteremia

Seizure Meds: Advise patient to take regularly scheduled dose of medication for the prevention of seizures.

ONE DAY CALL INFORMATION AND SCRIPTING:

- Begin making one-day calls around 1:00pm. Print a schedule (so you will have the most up-to-date schedule) and use that schedule to determine arrival times for all patients. Calculate 1.5 hours for patients ≥ 10 years old. Calculate 1 hour for patients ≤ 9 years old.
- One-day calls become the priority. Attempt to contact all patients before resuming 3-day calls. If you are unable to contact a patient both on 3-Day and One-Day calls, please notify the Surgeon's Scheduler and advise the patient has **never** been contacted. The surgeon may want to move that patient to the end of the day. If you are unable to reach the Scheduler, notify the OR Charge Nurse (she will contact the surgeon) and discuss moving the patient to last case. (If you switch the first patient with the last patient, you may not have to re-call all the other patients.)
- If a patient cancels during the one-day call, notify the Surgeon's Scheduler, the OR Charge Nurse, and our OR Scheduler. All subsequent cases will have to be moved up. It is OK to move an AM Workup case into starting case position if first case cancels.
- If a patient wants a different arrival/surgery time, advise that the surgery schedule is final and except for emergencies and unexpected cancellations, we cannot change the times.

To leave a voice mail message: *Hello, this is the Ambulatory Care Center calling with your surgery arrival time. We would like for you to be here at the ACC @ [Time]. You may have clear liquids: apple juice, water, Sprite or black coffee until [Time]. Please have no food, and no other types of drinks [Day]. You must have someone 18 or older who can stay with you during the procedure and then drive you home. Please call us @ 919-966-7572, leave us a message, and let us know that you did get this message and you will be here @ [Time]. Again, the number is 919-966-7572. Document that you left a detailed message.*

To speak with patient or representative: *Hello, this is the Ambulatory Care Center calling with your surgery arrival time. We would like for you to be here @ [Time] on [day of surgery]. That means you may have clear liquids: apple juice, water, Sprite, black coffee until [Time]. Please do not have any food, or any other drinks after midnight [day before surgery]. I also want to verify that you know where the ACC is located and that you will have someone with you who can stay with you and be able to drive you home. Document information.*

Source: Kimberly Haufler, PSMII, Assistant Manager Pre-Op, PACU, SSU, Ambulatory Surgical Center, UNC Health Care, Chapel Hill. Reprinted with permission.