

PHONE ADVICE QUESTIONS

1. When taking a phone advice call from a parent, documenting the exact dosage of a medication or dosing interval is necessary in all of the following cases **EXCEPT**:

- a. The patient has a specific medication question
- b. The patient has a new rash
- c. You suspect an adverse drug reaction (dose-related side effect or overdose)
- d. You are calling in a prescription for a medication
- e. You are recommending discontinuation of a medication

2. Management options when taking a phone advice call from a parent include all of the following **EXCEPT**:

- a. Advise family to call 911
- b. Advise family to go to Urgent Care/ED
- c. Redirect family to call PCP
- d. Call in prescription
- e. Recommend home care treatment

3. When taking a phone advice call, which of the following aspects of the patient's social history should **NOT** be considered when determining disposition:

- a. Access to transportation
- b. Presence of primary care physician
- c. Weather and road conditions
- d. Number of past emergency department visits
- e. Language and need for interpreter

4. When taking a phone advice call, all of the following questions are appropriate to ask parents in order to have a better understanding of the patient's physical exam **EXCEPT**:

- a. "How many times do you count your child's breathing in a one minute time period?"
- b. "Are you child's rib muscles pulling in when he/she breathes?"
- c. "When you tap on your child's abdomen do you hear dullness?"
- d. "When you press on the rash does it turn flesh or white colored?"
- e. "Is there blueness around your child's mouth or lips?"

5. Which of the following is **NOT** a main goal of phone advice:

- a. Determining severity of the patient's symptoms
- b. Answering simple medical questions
- c. Determining disposition for the patient
- d. Advising treatment
- e. Making the correct diagnosis

6. A frantic parent calls stating that her 2 week old has a fever. Which of the following is the most appropriate first question you should ask:

- a. How high is the fever?
- b. What is the name of your child's primary pediatrician?
- c. Where is the closest emergency room?
- d. Does your child have any allergies?
- e. What is your call back phone number?

PHONE ADVICE ANSWER KEY

1. CORRECT ANSWER is E. Exact dosage of a medication or dosing interval should be documented if: The patient has a specific medication question (Answer choice A); an adverse drug reaction, such as a new rash, is suspected (Answer choice B and C); or if you are calling in a prescription for a medication. Documenting the exact dosage of a medication is not required when you are recommending the discontinuation of a medication.

2. CORRECT ANSWER is C. There are several management and triaging options when giving phone advice. Some of the possible options include calling 911, recommending going to closest emergency room, follow up at urgent care, follow up with primary care physician the following day, phone follow up, and recommending home care management. Although contacting the primary care physician is important when you are recommending follow up with that physician, redirecting the caller to contact the PCP is generally not recommended. This may delay evaluation of a potentially urgent condition.

3. CORRECT ANSWER is D. The patient's social history is an important component of phone advice because it may affect the recommended disposition. One acronym that is helpful for remembering the important aspects of the patient's social history is R-A-T-E (reliability, abuse, travel distance/access, emotional). Reliability includes the caller's understanding, language, and education (Answer choice E) to ensure that your recommendations are clearly communicated and understood. Abuse includes both physical, emotional, and substance abuse as these may all affect the caller's ability to follow through with your recommendations. Travel/ access includes the caller's travel distance to the closest medical facility, access to transportation (Answer choice A), safety of travel including weather and road conditions (Answer choice C), and access to medical care (Answer choice B). Emotional is the caller's emotional status, i.e. hysteria, calm, etc. A patient's history of frequent emergency room visits may suggest poor access to primary care, but it also may suggest poorly controlled chronic conditions. Therefore, history of frequent emergency room visits alone cannot necessarily be used as a marker of access to medical care.

4. CORRECT ANSWER is C. Getting a physical exam over the phone can be challenging but also an important way to determine the severity of a patient's condition. There are certain systems that are easier to describe over the phone than others. Examples include the patient's respiratory status (Answer choices A, B, and E); mental status, skin exam (Answer choice C), and hydration status. Asking a parent to percuss a child's abdomen is a difficult task for most parents and is best reserved for medical providers. Although it is important to enable callers to be your "eyes", one must also be aware that there are limitations to physical exam descriptions over the phone.

5. CORRECT ANSWER is E. There are three main goals of providing medical advice over the telephone. The first is to answer simple medical questions (Answer choice B). An estimated 17% of phone advice calls involve requests for medical information. The second goal is to advise disposition for the patient (i.e. call 9-1-1 or to follow up with the primary care physician within 24 hours -Answer choice C). Advising disposition requires the provider to determine the patient's severity of illness (Answer choice

A), whether the patient needs to be seen immediately or within the next 24 hours. The third goal of phone advice is recommending treatment, including calling in prescriptions and advising home symptomatic care (Answer choice D). Making the correct diagnosis is NOT one of the main goals of phone advice and maybe difficult to do over the telephone. Triaging the urgency of the patient's condition is much more important than narrowing down the diagnosis.

6. CORRECT ANSWER is E. Although all of the answer choices are appropriate questions to ask this particular caller, getting a call back number is the priority. If you are disconnected, then you may not be able to get in touch with this caller again. Your recommendations will not be conveyed if you cannot reach the caller back. More importantly, the patient might not get the medical attention that is needed.