Phone Calls
When What to Do Isn’t Always A-Parent

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Introduction

• Development of curriculum to educate residents about phone call triage
  – Why we did it
  – What we did
  – What we learned along the way
Background

• Care provided via telephone is unique
  – Can’t examine the patient
  – Absence of non-verbal cues
  – Use of interpreter over the phone
Background

- Our upper level residents take ~10 phone call shifts per year

- Area of significant patient contact that had no prior structured curriculum
Objectives

• Develop a curriculum to better prepare residents for fielding parent phone calls

• Determine the effectiveness of this curriculum via survey
Monday Mommy Call

• Weekly segment during intake morning report
• Upper level resident takes a phone call from ‘parent’ in the audience
  – Pre-selected resident is provided with script to serve as the parent
• Cases submitted by residents based on real phone calls received
Monday Mommy Call

• Chief leads audience discussion with focus on
  – Goals of phone calls: triage > diagnosis
  – Anticipatory guidance
  – Available resources
Topics Covered

- Bronchiolitis
- Breath Holding Spell
- Head Injury
- Febrile Seizures
- Laundry Pod Ingestion
- Vomiting/Diarrhea
- Bat Exposure
- Migraine
- Medication Refill
- Colic
- Testicular Torsion
- Asthma
- Vitamin Overdose
- Fever
Example Case

• Asthma
  – Using controller medication as rescue medication during asthma flare
Example Case

• Discussion:
  – Triage
  – Assess respiratory status over the phone
  – Determining correct medication use
Curriculum Assessment Survey

• Residents rate level of agreement with the following statement on a 0-100 scale:
  – ‘The Mommy Call segment has increased my confidence in fielding parent phone calls.’

• All residents agreed with this statement
  – Average rating of 70
  – Lowest ratings from PGY-3 residents who already had high confidence, but felt this would have been helpful earlier in residency
Survey: PGY-1 Response

• ‘Helpful to see a few examples of phone calls that residents receive before I will have to take calls next year.’
Survey: PGY-3 Responses

• ‘If we include some teaching with it beyond the triage part, it is also helpful to those of us who feel more comfortable with the triage of phone calls.’
Conclusions

• Our curriculum involving role playing of phone calls has been helpful in preparing residents for fielding parent calls

• Recommendations:
  – Base on real life cases
  – Include additional teaching so is relevant to all years of training
  – Include upper level residents’ experiences in discussion