



Telephone Communication for Healthcare Providers: Safety Strategies

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When casually or carelessly conducted, telephone communications can lead to diagnostic errors and misunderstandings that may culminate in professional malpractice claims.

Telephone Communication with Patients

Creating comprehensive, clear guidelines for telephone encounters with patients is critical in mitigating risk. Establish practice guidelines and ensure that all office and clinical staff are trained on their roles in communicating with patients by telephone. Protect yourself from potential liability by following these general practices:

- Smile when greeting patients. Research has shown that people are able to tell if you are smiling by the tone of your voice.
- Triage and refer all critical calls to emergency services. For more information on this topic, read our article, [“Telephone Triage and Medical Advice Protocols.”](#)

- Obtain as much information as possible about the patient's presenting complaint. Listen carefully and allow the caller both the time and opportunity to ask questions.
- Use easy-to-understand language that avoids medical terminology.
- Obtain the services of an interpreter if you encounter a language difficulty. For more information, see "[ADA Requirements: Effective Communication.](#)"
- Avoid distractions, such as checking email or attending to other duties, when speaking with patients.
- Adhere to HIPAA rules and regulations to maintain patient privacy when communicating over the telephone, both inside and outside the office.
- Develop written protocols for front office/unlicensed personnel to help them respond to patient questions and concerns.
- Prescribe or advise by telephone only when you have reviewed the patient's allergies, medications, and medical and surgical history. For more information on this topic, read our article "[Rx for Patient Safety: Use Ask Me 3 to Improve Patient Engagement and Communication.](#)"
- Accept a third party's description of a medical or dental condition only when you have confidence in that person's competence to describe what he or she sees.
- Make prompt referrals if the patient's call concerns a medical or dental problem that is outside your expertise.
- Confirm that pharmacists understand all dosages and instructions for drug prescriptions given by telephone.
- Verify and document the patient's adherence with telephone advice through a follow-up contact to ensure continuity of care.

Documentation

Disagreements about what was said during telephone conversations can be a major problem in professional malpractice cases. Follow these documentation processes to mitigate this risk:

- Document all patient telephone conversations in the medical or dental record—including those received and returned after hours. Include the date and time of each contact and when follow-up is completed.
- Record all details immediately about the information you received, what you advised, and the orders you gave.
- Implement an office process for calls received during office hours. Office staff should tell the caller when the provider is most likely to return the call. Include tracking and follow-up to ensure that the caller's questions and problems are resolved and documented.
- Document a patient's hospital medical record with telephone conversations about the hospitalized patient—including any conversations with nurses or other providers.