

SURGERY CALL BACK LOG

Patient Name: Mr. Mrs. Ms. _____ Date of surgery: ___/___/___

Type of surgery: _____ Diagnosis: _____

Site: _____

Pain medication Rx: _____ Antibiotic Rx _____

Name of person spoken to if other than patient: _____

Relationship to patient: _____

Patient is experiencing: _____

- feels fine
- bleeding
- bruising
- infection
- leakage in dressing
- dressing came off
- pain
- swelling
- Other (explain) _____

Patient is is not taking medication as prescribed.

Reason for not taking medication: _____

Contacted physician because: _____

Dr. _____ contacted Time: _____ p.m a.m.

Patient okay – advised to keep follow-up appointment.

Other comments: _____

Completed by: _____

Date: ___/___/___ Time: _____ p.m a.m.