



Suggested Responses to Common Adolescent-Related Telephone Questions

Offices that serve adolescent patients may find it helpful to adopt protocols for answering questions that adolescents commonly ask over the telephone. The use of protocols will depend on staff capabilities. It should be stressed that all information obtained during telephone calls with patients is confidential. Table 1 provides some suggestions for protocols that are most appropriate for nonphysician staff, such as receptionists and other front office staff, medical assistants, and nursing aides. The staff who triage calls, such as triage nurses, also should be familiar with these protocols. Protocols will both decrease calls referred to triage nurses and allow for standardization of the information that has been covered by the receptionist or nursing aide.

The protocol responses to questions help offices handle adolescent reproductive queries in a standardized, efficient, and medically appropriate manner. Adolescents may have limited access to confidential telephone calls. Therefore, providing answers immedi-

ately creates efficiency and helps to avoid medical emergencies, urgencies, and misunderstandings. A notation should be made in the chart regarding telephone contacts. The triage nurse or physician should sign off on these notes.

Nonphysician personnel may want to tell the adolescent patient that she is asking a common question. Her doctor, therefore, has developed guidelines for nonphysician personnel to follow with patients who call. The telephone call can be transferred to a medical professional if the patient wishes or desires more information.

The responses offered to these common questions are meant only to serve as a general template. They can be changed, edited, or personalized by obstetrician–gynecologists to match their particular practice and staff capabilities. Before using these suggestions to respond to a caller, staff should ascertain the age of the caller to ensure that she is an adolescent.

Table 1. Suggested Nonphysician Staff Responses to Common Adolescent-Related Telephone Questions

Question	Primary Response	Secondary Response
Visit questions “I am on my menstrual period. Should I still come in for my scheduled appointment?”	“What is your appointment for?”	Routine visit: “Since routine visits often do not include a Pap test, it is fine for you to come in for a visit. If you do need a Pap test, it may be better to reschedule your appointment, if possible. The results of your Pap test may not be accurate if you are bleeding heavily. If you need a refill on your birth control pills, we can call that in to your pharmacy. Are you experiencing heavy bleeding?” If the response is yes, then reschedule just in case a Pap test is needed. Get information on the pharmacy to call, if appropriate. If the answer is no, encourage the patient to keep the appointment because the physician may be able to perform the Pap test with light bleeding. Problem visit (eg, for heavy bleeding, spotting, or bleeding from a sexually transmitted disease): “Because this visit is for a problem you are having, you should come in for your appointment. Menstruation does not prevent the doctor from examining you or trying to figure out your problem. Menstruation is a normal body process and is not something to be embarrassed about.”

continued



Table 1., continued

Question	Primary Response	Secondary Response
<p>“When should my daughter come in for a gynecologic examination?”</p>	<p>“The American College of Obstetricians and Gynecologists recommends that the first visit to an ob-gyn for health guidance, screening, and provision of preventive services should take place when the patient is 13–15 years old. This visit often will not include a pelvic examination. Adolescents often are very anxious about receiving pelvic examinations. It is important to explain to your daughter that if an examination is necessary, it will only be done with her full permission. Adolescents who leave our office after a pelvic examination usually are surprised about how easy it was.”</p>	
<p>Birth control questions “I had sex last night and the condom broke. What should I do?” “I missed a pill yesterday. It is now time to take my next pill. What should I do?”</p>	<p>Immediately transfer this call to the triage nurse to discuss emergency contraception. Do not take a message to have someone call her back. “What is the name of the pill you are taking?” If the answer is mini-pill, refer the call to the triage nurse. If the answer is combined oral contraceptive ask the following question: “How many of the hormonal pills have you missed?”</p>	<p>If any of the reminder pills were missed, the caller is not at increased risk of pregnancy and does not need any back-up contraception. She should throw out the reminder pill(s) she missed, keep taking 1 pill each day until the pack is finished, and start the new pack on her usual day. If only one hormonal pill was missed, the answer should be “Take yesterday’s and today’s pills as soon as possible. It may help you to remember to take your pill if you put it in your underwear drawer, by your toothbrush, or somewhere you would “run into it” around the same time every day. Call back if you ever miss more than one hormonal pill because you might need emergency contraception.” If the patient missed more than one hormonal pill in this package, refer the call to the triage nurse who will assess her need for emergency contraception and remind her that it may be advisable to continue to use condoms for the rest of her cycle.</p>
<p>“My prescription for birth control pills ran out. What should I do?”</p>	<p>“What is the name of the pill you are taking?” Refer the call to the triage nurse.</p>	
<p>Bleeding questions “I started taking the birth control pill 2 weeks ago and now I am bleeding. What should I do?” “I started taking the birth control pill 3 or more months ago and now I am bleeding between periods. What should I do?”</p>	<p>Refer the call to the triage nurse to assess urgency of office visit. Refer the call to the triage nurse to assess urgency of office visit.</p>	
<p>Pregnancy questions “Is a home pregnancy test accurate?” “I need a pregnancy test because I missed my period.”</p>	<p>Refer the call to the triage nurse to assess the reason she took a home pregnancy test, whether she is currently using contraception, and whether she might have a complicated early pregnancy, such as a threatened abortion or ectopic pregnancy. “Are you having any pain or bleeding?”</p>	<p>If the response is yes, refer the call to the triage nurse. If the response is no, ask the following question: “When was the first day of your last menstrual period?” Give the patient instructions for coming in for a pregnancy test.</p>
<p>Sexually transmitted disease questions “My boyfriend says he has a sexually transmitted disease. What should I do?” “I have itching in my genital area. What should I take?”</p>	<p>Refer the call to the triage nurse to assess urgency of office visit for evaluation or give the patient an urgent appointment. Refer the call to the triage nurse or make an appointment for the patient.</p>	