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Supplemental A. Survey used to assess patient opinion of their surgeon, patient perception of communication modality, and overall patient satisfaction with the outpatient surgery experience at our institution.

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1.	What procedure did you have?	 How adequately were you informed about your postoperative care plan?
2.	Who is your surgeon? Laith Jazrawi, MD Eric Strauss, MD Michael Alaia, MD Kirk Campbell, MD Guillem Gonzalez-Lomas, MD	☐ 0 Not at all informed ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7
3.	What number would you use to rate your satisfaction with your overall care?	8 9 10 Very much informed 8. How much do you like your surgeon?
	 3 4 5 6 7 8 9 10 Completely satisfied 	☐ 0 Not at all ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8
4.	How did your <u>SURGEON</u> contact you after you left the facility on the day of your procedure?	☐ 9☐ 10 Very much
		9. How likely are you to recommend your surgeon to your friends and family?0 Not at all likely1
5.	Were you expecting to be contacted by your surgeon after you left the facility on the day of your procedure? Yes No	☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8
6.	Which form of contact would you have preferred between you and your surgeon following your procedure?	9 10 Very likely
	☐ No contact ☐ Phone call ☐ Video call	