YOU ARE LEAVING HOSPITAL FORM – STAFF GUIDE

Instructions on how to complete the form prior to patient discharge

Special instructions
Consider any specific instructions that the patient/carer may need to comply with in the first few days at home prior to seeing their GP for follow up care

Treating Medical Team
If appropriate, complete information including name of treating Doctor, phone number, AND Clinical Unit

For more information
Provide Hospital address/contact information – written or stamp

Your Discharge Medications
Clearly print the name of the individual receiving the information & complete the name of the person providing the information (circle the applicable role)

Follow up instructions
(a) General Practitioner – Consider reason for admission/length of stay in determining if patient should see their GP in next 3 days or within next 7 days. Complete GP Full Name & Clinic Name – this helps confirm that the GP Discharge letter is going to the correct GP & Clinic
(b) Outpatient Appointment – tick check box and complete details as indicated

Discharge Date
Note: the date will assist the patient/carer to link these instructions with this admission, and will serve as a reminder of the discharge date when making follow up appointments with GP/other services

Reason for admission
Briefly specify reason for this admission

Health Services
Complete any details that apply. Please call = phone number
“Other” boxes may be used for any hospital/patient specific referral services

Take Home
This section provides a reminder to the patient/carer/hospital staff regarding discharge medications, personal belongings/equipment and return of patient’s own medications, as well as a prompt to consider attaching a medication profile or discharge summary to the YALH document if available. Cross out any sections that don’t apply (e.g. own medications returned)