

**SAMARITAN HOSPITAL
INPATIENT BEHAVIORAL HEALTH SERVICES**

Discharge Interview

Patient Name: _____

Unit: _____

Staff completing interview: _____

Discharge date: _____

1. Discharge readiness:

- a. Can you tell me the date and location of your outpatient follow-up appointment? _____
- b. Do you have transportation to that appointment? ___ YES ___ NO
- c. Do you have a way to fill your prescriptions after leaving the hospital? ___ YES ___ NO
- d. Are you comfortable with your housing plans for after you leave the hospital? ___ YES ___ NO

2. Teach Back:

- a. Can you describe in your own words what your illness is?

- b. Can you tell me what medications you are on and how they are prescribed to be taken?

- c. Can you name signs that your symptoms might be returning and what coping skills you can use in the community?

- d. Can you name two people that you can contact if you start to struggle with your symptoms after you leave the hospital?

