PHONE CALL TRACKING SHEET

Name: _____ Date: _____ Phone extension: _____

Instructions: Draw a slash mark "|" for each inbound phone call. Draw a slash mark with a dot "İ" for each call that you can determine is a return call.

	Type of Call							
Time	**Prescriptions**	**Scheduling**	**Billing**	**Referrals**	**Test Results**	**Nurse/ Physician**	**Other**	**# of Calls**
8 to 9								
9 to 10								
10 to 11								
11 to 12								
12 to 1								
1 to 2								
2 to 3								
3 to 4								
4 to 5								
# of Calls								
# of Repeat Calls								
% Repeat Calls								

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***FPM* Toolbox** To find more practice resources, visit https://www.aafp.org/fpm/toolbox.

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