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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.

1. What procedure did you have? ________________

2. Who is your surgeon?
   - [ ] Laith Jazrawi, MD
   - [ ] Eric Strauss, MD
   - [ ] Michael Alaia, MD
   - [ ] Kirk Campbell, MD
   - [ ] Guillem Gonzalez-Lomas, MD

3. What number would you use to rate your satisfaction with your overall care?
   - [ ] 0 Not at all satisfied
   - [ ] 1
   - [ ] 2
   - [ ] 3
   - [ ] 4
   - [ ] 5
   - [ ] 6
   - [ ] 7
   - [ ] 8
   - [ ] 9
   - [ ] 10 Completely satisfied

4. How did your SURGEON contact you after you left the facility on the day of your procedure?
   - [ ] My surgeon did not contact me
   - [ ] Phone call
   - [ ] Video call
   - [ ] Can't remember

5. Were you expecting to be contacted by your surgeon after you left the facility on the day of your procedure?
   - [ ] Yes
   - [ ] No

6. Which form of contact would you have preferred between you and your surgeon following your procedure?
   - [ ] No contact
   - [ ] Phone call
   - [ ] Video call

7. How adequately were you informed about your postoperative care plan?
   - [ ] 0 Not at all informed
   - [ ] 1
   - [ ] 2
   - [ ] 3
   - [ ] 4
   - [ ] 5
   - [ ] 6
   - [ ] 7
   - [ ] 8
   - [ ] 9
   - [ ] 10 Very much informed

8. How much do you like your surgeon?
   - [ ] 0 Not at all
   - [ ] 1
   - [ ] 2
   - [ ] 3
   - [ ] 4
   - [ ] 5
   - [ ] 6
   - [ ] 7
   - [ ] 8
   - [ ] 9
   - [ ] 10 Very much

9. How likely are you to recommend your surgeon to your friends and family?
   - [ ] 0 Not at all likely
   - [ ] 1
   - [ ] 2
   - [ ] 3
   - [ ] 4
   - [ ] 5
   - [ ] 6
   - [ ] 7
   - [ ] 8
   - [ ] 9
   - [ ] 10 Very likely