THE CARE PARTNER PROJECT

Preview Safe & Sound™ Checklists

Plan and Support Hospital Care

Contact us for more information or to subscribe:
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YOUR LOGO

As your loved one's Care Partner, be prepared for a lot of "paperwork" and a lot of information coming your way!

These tips will help you stay organized and feel confident that nothing slips through the cracks.

- *Store the medical records on your own phone and your loved one's phone.*
- *Keep any paper records in a binder or folder.*
- *Take this folder to the hospital to collect all the paperwork your loved one will receive. Everything will be in one place!*

- *Bring a notebook and pens. Leave them in the room with your notes for the next "Care Partner" who will arrive for your loved one. Note any special "to do's." For example, "Please follow up on Dad's blood test results."*
- *Use our handy note form for ideas about details to track – and remember!*

HOW TO HELP

PREPARE FOR A LOVED ONE'S HOSPITAL STAY:

It's important to have your loved one's medical history at your fingertips. Know the user name and password for their medical records on their patient portal. (Note, they may have several portals, depending on the number of doctors and hospitals that have treated them.) Patients' medical records can have errors—so get corrections, as needed.

- ☐ **Consider making paper copies to share with doctors or nurses** who may ask, especially if you want to make sure any errors are noted.
- ☐ **Make sure all of your loved one's doctors have the same set of complete and correct records.**
- ☐ **Know all the medications and vaccines** your loved one has taken over the past year. Use our handy form for these details.

- ☐ **Know the name, address, and phone** number of your loved one's pharmacy.
- ☐ **Medical providers cannot share info with you about your loved one without the patient's legal written permission.** Doctors may have their own Privacy/HIPAA forms, but you can also download one from a government site from the state where your loved one lives.
- ☐ **Make copies of insurance cards and a photo ID** or snap pics with your phone.
- ☐ **Go to your loved one's doctor appointment(s) with them.**

- ☐ **Together create a list of questions and topics** to cover during any pre-admission doctor appointments.
- ☐ **List questions in order of priority**.
- ☐ **Take notes on doctor's answers or ask to record on your phone** so you and your loved can listen and take notes later. Explain as a benefit to the doctor, e.g., "We will listen to the recording later, so we won't have to call your office if we miss something today."
- ☐ **Have email addresses and phone numbers for friends and family** you need to keep informed.
- ☐ **Make sure you know whether your loved one wants visitors,** and if so, who is permitted—or not.
- ☐ **Before a scheduled hospital stay, organize shifts** of caring family members or friends so, ideally, someone is with your loved one around the clock around the clock, or as permitted by the hospital. Just ask!

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YOUR LOGO

AS YOUR LOVED ONE'S CARE PARTNER, YOU ARE AN INVALUABLE MEMBER OF THE TEAM.

You know your loved one best and can help express their needs, questions and concerns. And, there are many ways you can be an extra pair of eyes, ears and hands to help support the medical team in providing safe and sound care.

Please keep in mind that serious, life-saving work goes on every minute of every day in every hospital. It's important to be respectful of everyone's time and skills, but it's also important to speak up for your loved one's needs whenever necessary.

HOW TO HELP

SUPPORT GOOD COMMUNICATION:

- ☐ **Your #1 Care Partner "job" is to help prevent infection.** This is as simple as speaking up to ask anyone who touches your loved one to wash their hands first. This includes visitors, nurses, doctors, and all other hospital staff. Of course, you will, too!

- ☐ **Ask to participate in doctor visits** ("rounds") or any bedside shift change conversations, possibly by phone or iPad if you cannot be there in person.
- ☐ **Ask the nurses to let you know times** for morning rounds.
- ☐ **Keep a notebook and pen** in your loved one's hospital room to record notes and questions to ask. This is a great way for those staying in shifts to share info. Use our handy form!

- ☐ **Know how to call for extra care,** if necessary.
- ☐ **Stay focused** on what's right for your loved one.
- ☐ **Speak up** if you have any concerns at all. You know your loved one best, and they may be too sick or too medicated to speak for themselves.

- ☐ **Show your attitude of gratitude.** Polite manners and thoughtful acts of kindness promote the best teamwork!
- ☐ **Think of the hospital as a peaceful HUSH Zone—Help Us Support Healing.** Speak in low, quiet tones and keep your movements as calm and unhurried as possible. Be sure to ask visitors to respect the HUSH Zone, as well.

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YOUR LOGO

ABOUT "SUPERBUG" INFECTIONS:

Dangerous and difficult-to-fight infections such as MRSA (mersa), VRE, and staph are called "superbugs." The germs are invisible and they're everywhere in every hospital—even on clothing.

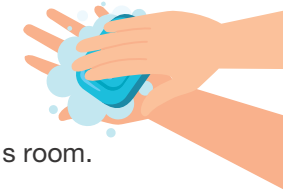
RISK FACTORS:

All patients are at risk for "Superbug" infections.

Hospitals are public places and germs come and go. We can all pitch in to keep patients infection-free!

HOW TO HELP

PREVENT SUPERBUG INFECTIONS:



☐ **Always wash your hands** with soap and warm water, or use alcohol gel or foam:

- Before you touch your loved one, and
- Whenever you enter or leave your loved one's room.

☐ **As needed, kindly remind visitors and others to wash their hands** before touching your loved one. It's okay to speak up. In a rush, even nurses and doctors may forget this step, but it could be a life-saver!

☐ **Help make sure your loved one washes their hands** and uses a soft-bristled brush to gently clean under nails, especially after using the bathroom and before eating.

☐ **Use alcohol wipes to clean away germs** from any surfaces your loved one and others may touch, such as...

- Cell phone.
- Doorknobs.
- Call buttons.
- Room phone.
- Bed rails.
- Inhalers.
- Grab rails.
- IV pole.
- TV remote.
- Toilet handle.
- Sink handles.
- Room chairs.
- Tray table (top, sides, drawer and underneath).
- Bedside table.
- Wheelchairs.

☐ **Be sure to clean again** after every touch or contact by anyone.

☐ **Ask for alcohol-based hand cleanser** to put within easy reach for your loved one.

Note: It's okay to ask for alcohol wipes and gel, and a nail brush. If you buy them yourself, choose well-known brands.

☐ **Make sure nurses and doctors** use clean stethoscopes and thermometers.

GET A NURSE IF:

Your loved one shows signs of (or complains about) the following:

- Oozing, pus, redness, or tenderness around surgery stitches.
- Bumps or spots that look like boils, bug bites, or pimples.
- Breaks in the skin.
- Skin rash.
- Chills, shivering.
- Confusion.
- Extreme pain.
- Fast heartbeat.
- Headache.
- Diarrhea.
- Nausea.
- Fast breathing.
- Body aches.
- Cramps.
- No appetite.

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YOUR LOGO

ABOUT SEPSIS

(Bloodstream Infection):

Germs can invade the body through cuts or breaks in the skin, resulting in a serious infection, called Sepsis, that's carried through the body in the bloodstream.

RISK FACTORS:

- *Use of a tube and bag system called an IV or "Central Line" to deliver fluids is a common risk for sepsis..*
- *After any break, or cut in the skin or intestines, sepsis can be a risk. (Even a scratch or scrape in the skin, too.)*
- *Also, sepsis can take hold when someone has two or more infections at once.*

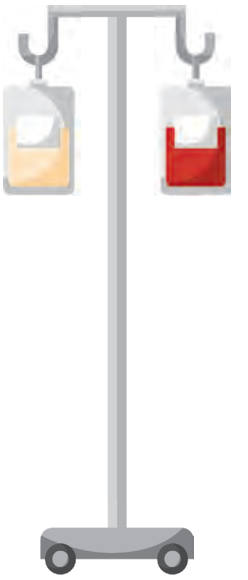
PLEASE LEARN MORE:

EndSepsis.org.

HOW TO HELP

PREVENT SEPSIS:

If your loved one has a central IV line:

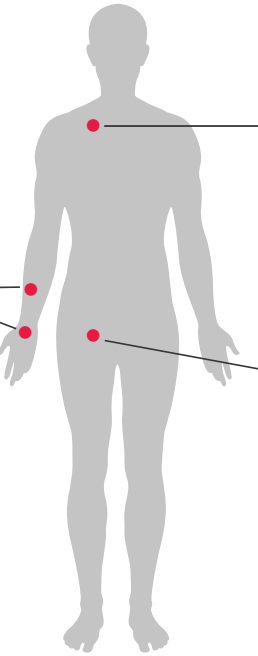


☐ **Watch to make sure that nurses and doctors always:**

- Wash their hands thoroughly before touching your loved one.
- Use sterile instruments and supplies.
- Clean the skin with an alcohol wipe.
- Choose the safest spot. (Ask, *"Why?"* if groin is chosen.)
- Use a clean sheet to drape your loved one's body.
- Wear a mask.
- Cover the area with a sterile pad.

☐ **Make sure any openings in the skin** are kept covered at all times.

COMMON LOCATIONS FOR CENTRAL LINES AND IVS:



GET A NURSE IF:

Your loved one shows signs of (or complains about) the following:

- Chills.
- Headache.
- Extreme pain.
- Shivering.
- Diarrhea.
- Fast breathing.
- Confusion.
- Nausea.
- Fast heartbeat.

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YOUR LOGO

ABOUT C. DIFF INFECTIONS:

C. diff is another type of infection from germs in hospitals. It causes diarrhea and dehydration that can lead to heart failure.

RISK FACTORS:

All patients are at risk of C. diff, especially those:

- *Age 65+.*
- *Recently using antibiotic medicines.*
- *With a prior history of C. diff.*
- *With a history of long bouts of diarrhea.*
- *A weak immune system.*
- *Living in a nursing home or other long-term care facility.*

Alcohol wipes won't kill C. diff germs, so be sure to also clean with bleach wipes.

HOW TO HELP

PREVENT C. DIFF INFECTIONS:

☐ **If your loved one has been on antibiotics in the past year,** or lives in a nursing home or long-term care facility, make sure these facts are part of the medical record. *To be on the safe side, tell your loved one's nurses yourself.*

☐ **Follow our "How-To Guide"** for preventing Superbug infections.

☐ **Alcohol-based cleansers kill Superbugs, but not C. diff germs!** So, it's necessary to wipe down all surfaces with bleach wipes, too. Clean these surfaces when your loved one first arrives and after every touch/contact by anyone.

- Cell phone.
- Doorknobs.
- Call buttons.
- Room phone.
- Faucets.
- Bed rails.
- Inhalers.
- Grab rails.
- IV pole.
- TV remote.
- Toilet handle.
- Sink handles.
- Room chairs.
- Tray table *(top, sides, drawer and underneath).*
- Bedside table.
- Wheelchairs.

Pay special attention to cleaning toilet levers and faucets.

NOTE: It's okay to ask hospital staff for bleach wipes. If necessary, buy a trusted brand to use.

☐ **Make sure you and your loved one wash hands** with warm water and soap before eating and after using the bathroom. A soft soapy nail brush helps clean under nails where C. diff can hide.

☐ **Bring clean clothes** to the hospital for your loved one to wear home. Store in a suitcase or plastic bag to keep them germ-free.

☐ **As soon as you get home, wash all clothing** you and your loved one wore in the hospital with warm water, detergent, and bleach. Use a clothes dryer to help kill germs. Share this tip with visitors, too!

☐ **Don't forget to clean** personal items, such as:

- Phone.
- Pens.
- Ipod.
- Laptop.
- Glasses

GET A NURSE IF:

Your loved one shows signs of (or complains about) the following:

- Diarrhea (may be bloody)
- Chills
- Loss of appetite
- Stomach pains, cramps
- Nausea
- Fast/racing heartbeat

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YOUR LOGO

ABOUT URINARY TRACT INFECTIONS:

A urinary tract infection (UTI) can develop when germs enter the body through a plastic tube (Foley catheter) used to drain urine from the bladder.

The bladder, kidneys, and urethra can all become infected. Another name for this is CAUTI, which stands for Catheter Associated Urinary Tract Infection.

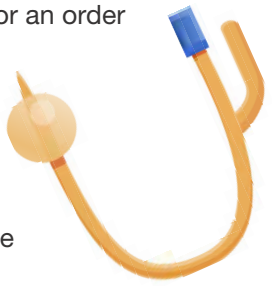
RISK FACTORS:

Use of a Foley catheter tube and bag system

HOW TO HELP

PREVENT A UTI:

- ☐ **Every day, ask if the Foley catheter** (shown below) can be removed.
- ☐ **When it's no longer needed,** ask the doctor for an order to take the Foley catheter out.
- ☐ **Ask about the cleaning plan** for the Foley catheter. (Daily is ideal.)
- ☐ **Keep an eye on the tube.** If you see kinks or tangles in the line—or urine backing up—please alert a nurse.
- ☐ **Make sure** the urine bag is emptied when full.



GET A NURSE IF:

Your loved one shows signs of (or complains about) the following:

- Chills.
- Body ache.
- Confusion.
- Lower back pain.
- Shivering.
- Headaches.
- Pain or a burning feeling in the stomach area.
- Blood in urine bag. *(You may see a slightly pink color.)*

NOTES:

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YOUR LOGO

ABOUT FALLING:

Falls can happen to anyone in an unfamiliar place. Most patients are tired, weak, or sleepy from medications, or suffering from conditions affecting balance.

RISK FACTORS:

ALL PATIENTS—regardless of age or strength—are at risk for falls.

Past history of falling or problems with balance carry extra risk.

KEEP IN MIND...

HOW TO HELP

PREVENT FALLS:

☐ **Look for things in your loved one's room** that might cause a trip and fall—especially anything on the floor. (Remove!)

- Point out all furniture and equipment on wheels.
- Discuss ways to move around the room without leaning on wheeled items for support.
- Note our notes—friendly cautions about falls on the whiteboard and in the bathroom.

☐ **If your loved one has a history of falling** or any problems with their balance:

- Ask about getting a cane or walker, and using bed rails.
- Ask about the hospital's fall protection equipment, such as low beds and bed alarms.
- Discuss the possibility of a room for your loved one close to the nurses' station.

☐ **Make sure someone on our staff helps your loved one** go back and forth to the bathroom or commode, and that someone is on standby in your loved one's room for every trip.

☐ **If your loved one's chair alarm goes off,** please help make sure your loved one sits down. Get help if they need to get out of the chair. (Better safe than sorry!

☐ **Watch to make sure** the hospital gown and any IV tubes won't trip your loved one.

GET A NURSE IF YOUR LOVED ONE FALLS. . .

- Hit a call button immediately.
- Put a blanket over her/him.
- Go in the hall and call for help, if necessary.
- Do not move your loved one.
- Ask for a meeting with your loved one's nurses and a nursing supervisor to discuss:
  1. How the fall happened, and
  2. What will be done to help make sure your loved one doesn't fall again.

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YOUR LOGO

ABOUT MEDICATION MIX-UPS:

Safety steps are followed each time a patient gets a medication in the hospital. Even so, it's important for you to help, too. There is no such thing as "too safe" for your loved one!

RISK FACTORS:

Patients tend to get several medications in the hospital. Many look alike and some names sound alike. Nurses can be distracted, especially when others talk or interrupt them while giving a medication.

TRUST YOUR GUT:

You know your loved one best. Every medication (or combination of meds) could affect your loved one in a way that's not expected.

Always get a nurse if you have worries about anything that "just doesn't seem right."

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HOW TO HELP

PREVENT MEDICATION MIX-UPS:

☐ **Make sure your loved one's allergies and any bad experiences with medicines** in the past are included on the medical record — and highlighted in a bold way.

☐ **Research the pros and cons of every drug prescribed** for your loved one. Make notes about the potential side effects and interactions at MedlinePlus. If you have any concerns, bring them up immediately with the attending doctor or nurse.

☐ **Before a nurse ever gives a medicine, ask:**

- What is the medicine you're planning to give?
- What is it for?
- What is the dose?
- Who prescribed it?

- Say: *"Let's confirm that it's for (your loved one's name)."*
- For medicines in an IV bag, ask: *"What time do you think this bag will run out?"* If the bag empties and no one responds to the alarm beep in a few minutes, it's okay to get a nurse.

☐ **Don't talk to or distract nurses** when they are giving medicines.

However, speak up immediately if you sense a mistake is being made. For example, wrong patient, wrong medicine, wrong time, wrong dose, or wrong way.

☐ **Record every time** your loved one gets a medicine.

☐ **If your loved one is 65 or older,** check the Beers List, too. For children, check the Kids' List. Both have info about medications considered potentially unsafe or "iffy" for these age groups.

GET A NURSE IF . . .

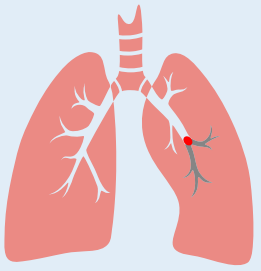
Your loved one shows signs of (or complains about) the following:

- Diarrhea.
- Stomach cramps.
- Coughing.
- Wheezing.
- Difficulty breathing.
- Difficulty swallowing.
- Swelling face.
- Swelling/itchy eyes.
- Rash or hives.
- Confusion, anxiety, restlessness.
- Light-headedness, dizziness, fainting.
- Swelling in neck.
- Bluish lips.
- Cool, clammy skin.
- Chest pain.
- Unusual sweating.

YOUR LOGO

ABOUT BLOOD CLOTS:

Blood clots can form in the deep veins of legs and arms. Sometimes, a piece of a clot breaks off and travels to the lungs—this is called a pulmonary embolism or PE for short—which is why they are serious problems.



RISK FACTORS:

- *Surgery (especially stomach, hip or knee).*
- *Family history of clotting.*
- *Diabetes.*
- *Smoking.*
- *Birth control and other hormone pills.*
- *Obesity.*
- *Spinal cord injury.*
- *Multiple injuries.*
- *Lack of exercise.*

HOW TO HELP

PREVENT BLOOD CLOTS:

☐ **Tell doctors and nurses** you're concerned about blood clots.

☐ **Discuss these precautions** with your loved one's medical provider:

- Special stockings or boots that pulse,
- Regular and frequent walks if possible,
- A prescription for a blood thinner.

☐ **Watch for the signs of blood clots,** listed below, for at least one month after your loved one leaves the hospital.

☐ **Remember** that blood clots can form even if your loved one feels 100% "back-to-normal" in other ways.

☐ **If okay with your loved one's medical providers, encourage walks** and exercise after leaving the hospital.

GET A NURSE IF:

Your loved one shows signs of (or complains about) the following:

- Swelling in a leg or arm.
- Pain or a burning feeling in a leg or arm.
- A charley-horse (cramp-like) pain that doesn't go away pretty quickly, persists, or grows worse.
- Shortness of breath, difficulty breathing.

NOTES:

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YOUR LOGO

ABOUT BED SORES:

Also known as pressure wounds, bed sores are pits or breaks in the skin in bony areas that don't get much blood flow, or in folds of skin where sweat collects.

Any break in the skin can be a dangerous tunnel for infection.

Bed sores are much easier to prevent than heal.

RISK FACTORS:

- Thin skin.
- Stroke.
- Lung conditions.
- Cancer treatments.
- Diabetes.
- Spinal cord injury.
- Bed/chair-bound.
- Poor circulation.
- Very thin or overweight .
- Age 65 or older.

WHAT TO LOOK FOR:

- *Any cuts, tears or scrapes in the skin.*
- *Abnormally white patches of skin, especially on bony areas.*
- *Pinkness, redness or swelling in the skin that doesn't go away in minutes.*
- *Areas of skin that are extra-warm.*

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HOW TO HELP

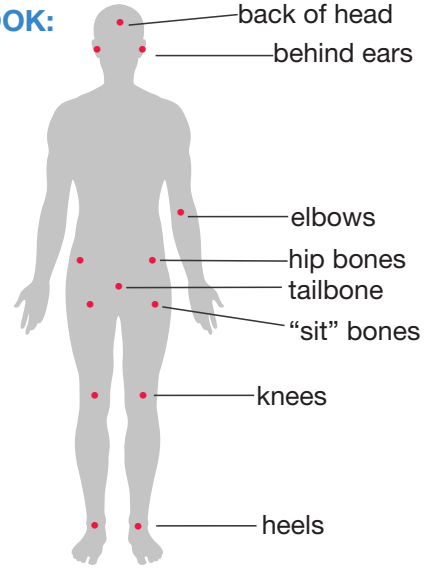
PREVENT BED SORES:

- ☐ **Help make sure your loved one changes positions** every two hours— or more often if your loved one can manage. Set a timer!
- ☐ **Ask for an alternating air pressure mattress** and some type of pad to absorb moisture.
- ☐ **Make sure your loved one has pillows** between ankles and knees, for elbows, and back of the head.
- ☐ **Ask a nurse or the physical therapist** to show you how to arrange the pillows.
- ☐ **If the hospital gown or sheets become wet,** get help to change them as soon as possible.
- ☐ **Help make sure that nothing rubs or scratches** your loved one's skin—ask nurses about barrier cream.
- ☐ **When your loved one gets out of bed,** either alone or with help, make sure it's done very gently to avoid scraping any skin.
- ☐ **Ask the dietitian about "upping" the protein** in your loved one's diet. Ask if it's okay for you to bring high-protein snacks, drinks or food.
- ☐ **It's okay to ask for the hospital wound care specialist** if you have any concerns. Remember, bed sores are much easier to prevent than heal!

MAKE SURE NURSES CHECK YOUR LOVED ONE'S SKIN EVERY DAY— OR EVEN MORE OFTEN.

THIS IS WHERE NURSES WILL LOOK:

1. The bony areas.
2. Areas where sweat collects:
   - Between buttocks,
   - Between folds of fat,
   - Under breasts.



IF SKIN PROBLEMS APPEAR:

Make sure no pressure is put on the abnormal areas of skin for the next 24-48 hours, or until the skin is back to normal.

YOUR LOGO

ABOUT PNEUMONIA FROM A VENTILATOR:

Patients who need a machine to help them breathe can get a lung infection (pneumonia) if germs get into the breathing tube. This type of pneumonia is also called VAP, which stands for Ventilator Associated Pneumonia.

RISK FACTORS:

- *Use of a ventilator.*
- *Lung disease.*
- *Age 65 and older.*

NOTE:

Sometimes patients on ventilators have their hands bound to keep them from pulling out the tubes by accident. This may be scary for your loved one and may even cause a panic attack. Get a nurse to help ease your loved one's fears.

HOW TO HELP

PREVENT VENTILATOR PNEUMONIA:

☐ **Ask about the sterile steps** used to put the breathing tube into your loved one.

☐ **Ask for a daily check** of your loved one's ability to breathe without machine help.

☐ **Ask if your loved one's mattress needs to be raised at an angle.**

- If so, tell a nurse right away if your loved one slumps down or lowers the mattress.
- Be on the lookout for bed sores on your loved one's tail bone and "sit bones."
- Follow our **"How-To Checklist"** to help prevent bed sores.

☐ **Ask about medicines** to help prevent your loved one from getting stomach ulcers (sometimes caused from the breathing tube).

☐ **Ask about care for your loved one's teeth, gums, and tongue** every four hours to kill germs that could go from mouth to lungs. Make sure these are used every time:

- A toothbrush with soft bristles and 1.5% peroxide toothpaste.
- A vacuum tool to pull germs and waste from the mouth.

GET A NURSE IF:

You see:

- The tube come loose.
- A pool of water inside the tube. (If in doubt, call a nurse.)

Your loved one shows signs of or complains about:

- Fever, chills, shivering, body aches, headaches, confusion.
- White patches or sores in your loved one's mouth or on the lips.
- Cough with phlegm (can be yellow or green).
- Increasing need for suctioning.
- Need for higher settings on the breathing machine

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YOUR LOGO

Medical providers cannot share info with you about your loved one without their written permission. So, help your loved one complete:

- ☐ *HIPAA Form allowing medical team to share info with you,*
- ☐ *Medical Power of Attorney,*
- ☐ *Advance Directive/Living Will.*

Fill-in-the-blank versions are available for download on government sites in your loved one's state. (Forms can be customized).

Try to have good conversations when filling out these forms with your loved one. Everyone is entitled to have their choices reflected in their documents.

No matter how stressed or worried you may be, try for an attitude of gratitude. After your loved one is discharged, consider sending thank-you notes to those who helped you.

HOW TO HELP

SUPPORT A LOVED ONE'S HOSPITAL CARE FROM AFAR:

☐ **It's important to have your loved one's medical history on hand.**

- ○ Know the username and password to your loved one's patient portal and check the records.
- ○ Be sure to get corrections if you spot anything missing or incorrect. (Especially, medications!)
- ○ Let the medical team know right away because it takes time to get records changed!

As a Care Partner, you have an important job making sure that all your loved one's doctors have sound information to help them make sound decisions.

☐ **When your loved one is in the hospital, it's okay to call the nurses' station for updates and info.**

- ○ If you don't call yourself, ask your loved one to name one other person to handle all daily communication.
- ○ Make sure the hospital staff knows the full name of your loved one's choice to communicate with the staff (this is a privacy policy to protect patients.)
- ○ Please do NOT call during shift changes: from 6:30 - 7:30, morning and evening.
- ○ Good evening times to call are:
  - 9:15pm on the Intensive Care Unit/ICU
  - 10:30p on all other units

☐ **For every call with a hospital nurse, ask about:**

- ○ Tests ordered and results
- ○ Medications started and stopped. (Why?)
- ○ Vital signs. (Any trends?)
- ○ Daily case conference notes about your loved one.
- ○ Your loved one's spirits.

☐ **Arrange for good communication during your loved one's hospital stay:**

- ○ Visit your loved one by smart phone or iPad.
- ○ Ask to participate in doctor visits ("rounds") or any bedside shift change conversations by phone or iPad.
- ○ Ask the nurses to let you know times for morning rounds.

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YOUR LOGO

CHANCES ARE YOU CAN'T DO THIS JOB ALONE!

Organize shifts of caring family members or friends so, ideally, someone is with your loved one around the clock, or whenever permitted by the hospital.

HELPFUL RESOURCES:

If you need additional help or advice, you may want to reach out to a professional patient advocate here:

Greater National Advocates

HOW TO HELP

TAKE CARE OF THE CARETAKERS —ESPECIALLY YOU!

TAKE GOOD CARE OF YOURSELF!

- **Stay warm, rested, and hydrated**—drink lots of water!
- **Try to get a little exercise.** Stretches and walks do wonders for body, mind, and soul.
- **Feel free to use the hospital chapel.** The hospital can arrange for a visit from a rabbi, priest, or minister for your loved one, too. Just ask!

- **Bring some distractions**—a book, magazines, a deck of cards, soothing music. These are nice to share with your loved one whenever they are up to it.

HELP LIGHTEN THE LOAD FOR HOSPITAL STAFF:

- **If you are able-bodied,** offer to help change the sheets.
- **Keep your loved one's room neat** and tidy— clutter-free.
- Remember! Items on the floor can cause a fall.
- Keep the bedside table clear for important personal items (i.e., glasses, phone, hearing aids, book).

- **When making a trip to the cafeteria,** consider bringing something back to the nurses! Coffee? Tea? Water? Treat? So appreciated!

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YOUR LOGO

DO YOUR HOMEWORK:

A hospital emergency room (ER) may not be your only choice if an emergency arises. Become acquainted with the kind of care offered at your local Immediate Care Center. Typically, they have shorter waits, comfortable surroundings, less noisy "bustle" and all the testing equipment that hospital ER's have—usually at a lower cost!

KEY CONSIDERATION:

If your loved one requires transportation by ambulance *to the hospital, ask if you can ride along. It helps to explain that you can help keep your loved one calm and as alert as possible.*

Be sure to include your loved one in all conversations. *If your loved one is hearing- or visually-impaired, or differently-abled in any way, make sure the doctor knows so extra care can be taken to make sure your loved one is included—and not just a bystander in their own medical care.*

PREPARE FOR AN ER VISIT:

Whether or not you have a chronically ill or elderly loved one, being prepared for a hospital emergency room visit is a good idea for every member of the family. Some simple prep for ER visits can minimize potential complications and maximize efficiencies in care.

CREATE A "GRAB & GO" KIT:

Organize medical records and info in a folder or notebook.

☐ **Two or more copies of important documents:**

- ○ Photo ID of your loved one.
- ○ Insurance card(s)—front and back.
- ○ Medical Power of Attorney.
- ○ Advance Directive.
- ○ List of doctors who treat your loved one, along with their contact info.
- ○ List of all recent hospitalizations with dates, reasons for admission, and outcome.
- ○ List of all surgeries your loved one has ever had, dates of each.

☐ **CDs or thumb drives with any scans performed (EKG, CAT, MRI).**

Be sure to know the login for your loved one's electronic medical records.

☐ **Medication Records:**

Use our Medication Record form to organize your loved one's medication history.

- ○ List current and recent medications, including vitamins, herbal remedies, and any drugstore meds. (If you have time, put all medications in a baggie and bring.)
- ○ Include of alcohol, tobacco and recreational drug use. (No one will judge—this is important.)
- ○ List recent shots and vaccines, with dates for each.

Note: You may have a long wait, so remember to bring any medications your loved one may need to take before the doctor is able to see them.

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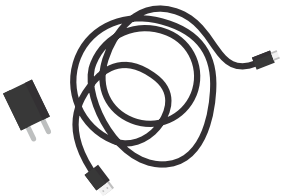
PACK A TOTE WITH ITEMS FOR YOUR LOVED ONE AND YOURSELF:

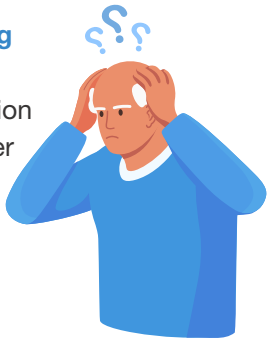
- ☐ A favorite personal item of comfort. (sweet treat? religious item?)
- ☐ A warm sweater, neck scarf, hat. ER waiting rooms can be very chilly!
- ☐ A light blanket. (The kind you get on the airline is a good example —it folds up compactly but offers warmth.)
- ☐ Items such as a small fidget-widget, or an Ipad with games, music or video to help quell anxiety. (Don't forget earphones, though!)
- ☐ Noise-canceling headphones.
- ☐ Sunglasses to shield eyes from fluorescent lights in the hospital.
- ☐ Bottles of water and powder packs of Gatorade.

- ☐ Healthy snacks like little packs of nuts, granola bars, protein bars.
- ☐ Contact list of others to call for help, or comfort to your loved one.
- ☐ Antibacterial hand cleaner, such as Purell.®
- ☐ Antibacterial surface wipes.
- ☐ The Beers List* and Kids' List* of medications considered risky for seniors and children.
- ☐ Chargers for phone and other electronics you bring.
- ☐ Notebook and pen.



WHEN YOU CHECK IN:

- ☐ **Provide** photo ID, insurance card, and Medical Power of Attorney.
- ☐ **Tell admission clerk** that you have all medical records and an up-to-date medication list with you.
- ☐ **If your loved one suffers from dementia,** or is experiencing confusion, ask if the hospital offers a separate "quiet room" to help your loved one feel calm and secure.



- ☐ **If your loved one is experiencing confusion,** let all care providers know if this is a temporary condition or their usual mental state. In older people, onset of confusion can be a red flag for infection, often a urinary tract infection.
- ☐ **If a nurse or doctor suggests a medication** to calm an upset or agitated loved one, ask about:
  - A quiet room, instead.
  - If a quiet room is not an option and your loved one is truly disruptive and does not respond to the items you've brought in your "go bag," a medication may be ordered.
  - Ask before it's given to your loved one:
    1. Name of drug (its common name).
    2. Does it have Black Box warning? Is it on the Beers List* or the Kids' List?*
  - Look it up on MedlinePlus.
  - If on either of these lists, or if you have any concerns at all, ask: "*Are there alternative medications?*"
- ☐ **Ask: "**When do you think a doctor will see us?"

***Medications can affect people differently at different ages, so some medications carry age-related precautions. If 65 or older, check the Beers List for medicines that may be harmful for seniors to take. For children, check the KIDs List**.

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WHILE WAITING FOR CARE:

☐ **Discuss with your loved one** exactly what they are feeling. Where is pain? What is their pain level on a 1-10 scale? Take good notes!

☐ **Ask your loved one:**

- What do you think is wrong? Why?
- What are your questions for the doctor?
- What are your worries?
- What is your goal for treatment today? What do you want to happen today?

☐ **Take notes of this conversation to share** with your loved one's doctor and other care providers seen in the ER.

Consider taking a photo of your notes with your phone, then give your notes to the admission desk and tell them you are prepared to meet the doctor. This may be a gentle way of nudging you higher on the waiting list.

DURING EXAM WITH A DOCTOR:

☐ **Stay** with your loved one.

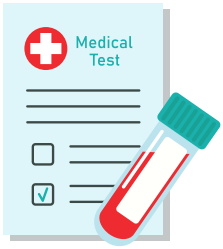
☐ **Ask if you can record conversations** so you can take can take notes later and be fully present during time with the doctor.

☐ **If helpful, ask if you can FaceTime** the visit with someone else who may be involved with the care of your loved one.

☐ **Review** your loved one's Medication Record with the nurse. Tell the nurse of any medications that have been taken that day and/or a few days prior, including herbs, vitamins, and any other non-prescription remedies.

☐ **Help your loved one clearly describe** their medical concerns to all care providers. Your notes will help!

☐ **For each test, ask:**



- What will we learn?
- Is this information a "nice to know" or "need to know" in order to diagnose or treat?
- Ask the doctor for their initial thoughts, or diagnosis.

☐ **For every diagnosis, ask:** *"What else could it be?"*

AT THE POINT OF DIAGNOSIS:

☐ **Take time** to fully understand the diagnosis—don't rush. Ask, *"Is there anything else it could be?"*

☐ **Review and understand any new prescriptions.**

- What are the side effects?
- If new prescriptions are started, what is the length of time the medication will be needed?
- Ask, *"Is this medication on the* Beers List *or the* KIDs' List*?"* Or look it up yourself.

DURING THE DISCHARGE CONVERSATION:

☐ **You may ask to record** the discharge conversation on your phone. Explain that your loved one and you don't want to miss any important details.

☐ **Ask questions and ask for plain terms.** If your loved one doesn't understand anything their care providers are saying, ask them to use plain terms. (You didn't go to medical school!) It's important that they share information in everyday language anyone can understand.

☐ **Ask for a copy of record of visit,** including the doctor notes.

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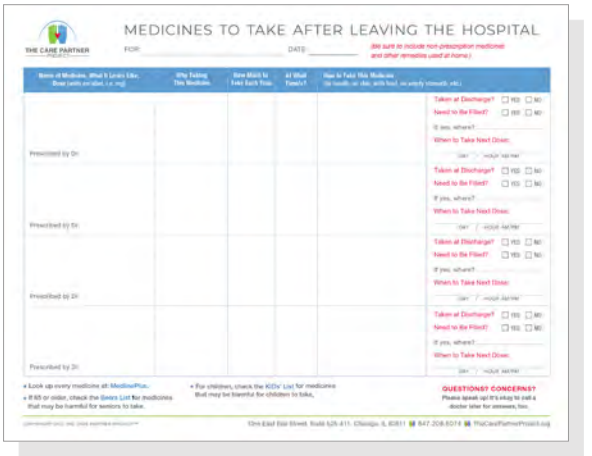
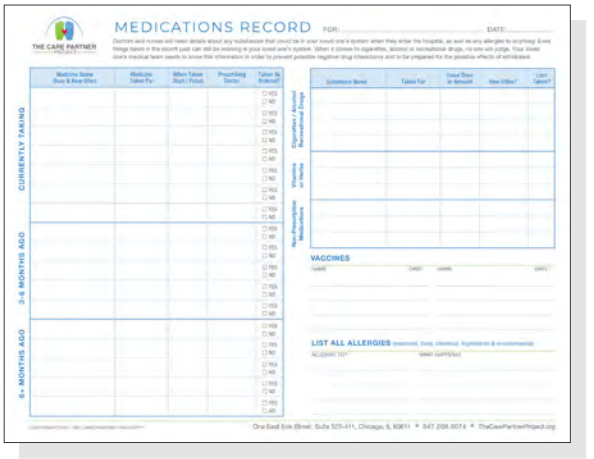
RECOVERY AT HOME:

☐ **Review** existing and new prescription list.


MEDICINES TO TAKE AFTER LEAVING THE HOSPITAL

☐ **Use our handy Medication Record** form to create a new list of everything your loved one needs to take after going home from the hospital.


MEDICATIONS RECORD

☐ **Monitor closely** any changes over the next 24-72 hours after taking new prescriptions. Look up on MedlinePlus.

☐ Keep daily record of when medication is taken.

NOTES:

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Nothing in life prepares your patients and their loved ones to manage a serious illness. Safe & Sound™ resources express your empathy and commitment to care that meets patients where they are.

Together, you are prepared to partner for patient-centered care.

Ready to partner for patients? Let's talk!

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