

### Patient Guide

#### **START PLANNING** *Your Discharge Now!*

STAY SAFE HOW TO: • Fight Infections • Stop Falls • Prevent DVT

REMEMBER TO SPEAK UP Ask questions and voice concerns.

**RESOURCES** for the Caregiver

KEEP TRACK OF MEDS while in the Hospital

Hospital Phone Directory Inside



918-341-2556 / www.hillcrestclaremore.com

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**Speak Up** Take charge of your care.



1 1 **Stay Safe** You can contribute to healthcare safety.



#### OUR ADDRESS 1202 N. Muskogee Place Claremore, OK 74017

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### Welcome to Hillcrest Hospital Claremore

Welcome to Hillcrest Hospital Claremore. We are pleased that you and your physician have selected us to provide your medical care.

We know that hospitalization is never an entirely pleasant experience; we will do our best to make you as comfortable as possible. If you have any questions or concerns, please don't hesitate to ask your physician or your nurse. If at any time you feel you are not being treated in a fair and concerned manner, please notify Administration at ext. 6700 for the necessary information to report your concern. You also may contact our patient liaison at ext. 6973 or 918-343-6973.

Again, thank you for choosing Hillcrest Hospital Claremore. We wish you well.



David Chaussard Chief Executive Officer

#### **OUR ADDRESS**

1202 N. Muskogee Place Claremore, OK 74017

Sincerely,

David Chaussard Chief Executive Officer Hillcrest Hospital Claremore

#### **Mission Statement and Beliefs**

To provide exceptional, compassionate care to each individual. Small enough to know you, large enough to serve you.

- To foster excellence in health services, Hillcrest Hospital Claremore has a continuing commitment to health education.
- Because we recognize the dignity of each person, we strive for excellence in our work.

In keeping with these beliefs, Hillcrest Hospital Claremore provides general and acute health services to individuals and families in our community. We also offer other services and programs related to the provision of health promotion, maintenance, and care. At Hillcrest Hospital Claremore, we take your care personally.

### Telephone Directory

MAIN NUMBER 918-341-2556

**Dietitian** 918-342-6734

Billing 918-343-6999

Case Management (Discharge Planning) 918-342-7827

**Gift Shop** 918-341-2556 ext 1253

Nutrition & Food Services 918-342-6734

Hospital Website hillcrestclaremore.com



Hillcrest Hospital Claremore is committed to the quality of your life and offers a variety of classes, programs and support groups to help you get well and stay healthy.

Hillcrest Hospital Claremore	918-341-2556
Administration	918-342-6700
Admitting	918-342-7821
Auxiliary Volunteer Office	918-341-2556 ext. 6767
Billing and Business Office	918-343-6999
Peggy V. Helmerich	
Women's Health Center	918-342-6762
Cardiac Rehabilitation	918-342-7861
Childbirth Education	918-342-6762
Dietitian	918-342-6734
Environmental Services	
(housekeeping)	918-342-6732
Family Waiting Rooms:	
Second Floor Med/Surg	918-342-2225
ICU	918-342-6713
Outpatient Diagnostic & Sur	gical 918-342-6748
Health Information Manageme	
(medical records)	918-342-6733
Operator	Dial 0
Patient Advocate	918-343-6973
Physician Referral	
(Find a Physician)	918-342-3003
Rehabilitation Services	918-342-6703
(physical, occupational & spe	ech therapy)
Social Services/Case Managem	
State Health Department	800-522-0203
I	& 405-271-6868

Calling a Department WITHIN the Hospital? *Dial the last four digits of the number.* 

ALBERT EINSTEIN 1879-1955

<sup>cc</sup>Truth is what stands the test of experience.<sup>,</sup>

## Your Satisfaction

#### We encourage your feedback to improve care.

Your healthcare is our priority. To determine where improvements are needed, this hospital takes part in the HCAHPS survey. The HCAHPS survey measures your satisfaction with the quality of your care. It is designed to be a standardized tool for measuring and reporting satisfaction across all hospitals in the U.S.

After you are released from the hospital, you may be selected to participate in the HCAHPS survey. The survey asks multiple-choice questions about your hospital stay. Please take the time to fill out the HCAHPS survey; your feedback is valuable!

#### What is HCAHPS?

The Hospital Consumer Assessment of Health Providers and Systems (HCAHPS) survey is backed by the U.S. Department of Health and Human Services. The survey is used to improve the quality of healthcare. HCAHPS makes survey results public so hospitals are aware of where changes are needed. The results also enable healthcare consumers to review and compare hospitals before choosing a healthcare provider.

#### You are part of the team

**COMMUNICATE** It's your health; don't be afraid to ask questions of your doctors and nurses.

**PARTICIPATE** You are the center of your healthcare team so ask questions, understand your treatment plan and medications, and communicate with your doctors and nurses.

**APPRECIATE** There are many people in the hospital who need help; please be patient as doctors and nurses attend to everyone.

#### **Hospital Compare**

is a government website that allows users to compare the quality of care provided by hospitals. The information provided on this website is based on HCAHPS survey results. www.medicare.gov/ hospitalcompare

### The Leapfrog Group

rates hospitals that take part in the Leapfrog Hospital Quality and Safety Survey. The survey measures how well hospitals meet the Leapfrog Group's quality and safety standards. Survey results are reported on Leapfrog's website for users to compare hospitals. www.leapfroggroup.org/ compare-hospitals



#### **Your Room**

Your room assignment at Hillcrest Hospital Claremore is based upon your admitting diagnosis and bed availability on the day of your admission. Private (singe bed) and semi-private (two bed) rooms are available. Medical insurance usually does not cover the full cost of a private room.

#### **Your Hospital Bed**

Hospital beds are electrically operated, and your nurse will show you how to work your bed properly. Your hospital bed is probably higher and narrower than your bed at home. Bedside rails are for your protection. They may be raised at night or during the day if you're resting, recovering from surgery, or taking certain medications.

#### **Room Temperature**

All rooms in the hospital are centrally heated and air conditioned. If your room temperature is not comfortable, please notify the nursing staff.

#### **During the Night**

Please stay in bed after you have been prepared for the night. Strange surroundings and sleeping medications may create a hazard if you get out of bed. For assistance during the night, use your call button.

#### **If You Have Questions or Concerns**

The medical staff and employees of Hillcrest Hospital Claremore seek to treat our patients with fairness and concern, recognizing their needs and satisfying them to the extent possible. If you have any questions or problems that have not been answered to your satisfaction, or if you have a special need, ask for the supervisor or dial the operator and ask for a member of the management team.

#### **Telephones**

Telephones are provided in each room, except in the critical care units. Patients may receive calls in their room from 8:30 a.m. to 9 p.m. Local calls may be made at any time from the room by dialing 9 and the number. Long-distance and toll calls can be made at any time by dialing 9 then 0 and the number. Long-distance calls cannot be charged to your room. You can make a credit card call or charge a longdistance call back to your home number.

You may call the hospital operator by dialing 0 at any time for assistance.

#### **Television**

Television sets are provided in each room. Please be considerate of other patients by playing TV sets softly and turning off your set at bedtime.

#### **Calling your Nurse**

A button to call your nurse is located at your bedside. When you press the button, the nurses' station is alerted that you need assistance, and a light flashes above your door. A staff member will respond to your signal as soon as possible. Your nurse also carries a phone at all times. If your nurse does not write his or her phone number on your whiteboard in your room, please ask for it. This is the easiest way to reach your nurse.

#### **Out-of-Town Visitors**

Accommodations for relatives and visitors from out of town are available at nearby motels. Comfort Inn is located on Highway 66 just south of the Walmart Supercenter; the phone number is 918-343-3297. Claremore Motor Inn is located on Highway 66 (1709 Lynn Riggs Blvd.) on the north side of Claremore; the phone number is 918-342-4545. Microtel is located three miles south on Highway 66; the phone number is 918-343-2868. Super 8 is located east on Highway 20 (1100 E. Will Rogers Blvd.) by the turnpike entrance; the phone number is 918-341-2323.

#### **Leaving the Unit**

If you want to leave the unit, please check first at the nurses' station to make sure your physician has given approval and to let staff know where you can be reached. It is important to stay in your room until your physician has made rounds and treatments have been completed.



Wholesome, nourishing and well-balanced meals are an important part of your treatment and recovery. Hillcrest Hospital Claremore makes every effort to provide nutritious meals that are prepared to your physician's orders. Patients' meals are served at the following times: breakfast between 8 a.m. and 8:30 a.m., lunch between 12 p.m. and 12:30 p.m., and dinner between 5 p.m. and 5:30 p.m. Occasionally, your meal may be delayed if you are scheduled for a special test or treatment. Whenever possible, you will be served after your examination or test. If you have any questions or concerns regarding your diet or meals, you may reach the Food and Nutrition Services Department at ext. 1226.

If a family member or friend wants to eat in your room with you, the person may go to the cafeteria, buy a meal and take it back to your room. If the person does not want to go to the cafeteria, a guest meal tray may be purchased and delivered to your room. Guest trays are for immediate family members only. Ask your nurse to order the guest tray for your visitor.

#### Cafeteria

Complimentary coffee is available from 7 a.m. to 9 a.m. and 11 a.m. to 1 p.m. in the cafeteria. Coffee also is available all day in the ER and the second floor waiting room. The cafeteria serves breakfast from 7 a.m. to 9 a.m., and lunch from 11 a.m. to 1 p.m., Monday through Friday.

#### **Vending Machines**

For your convenience, vending machines for snacks and beverages are located on the first floor at the Blue Starr entrance. There also is a beverage machine located in the Med/Surg waiting room. They are available 24 hours a day.



#### **Visiting Hours**

Visitors can be good medicine for patients. Family members and friends are welcome to visit. However, patient care is our primary concern at Hillcrest Hospital Claremore, and in order to enhance the quality of care, specific visiting hours and regulations have been established for each unit Please follow these guidelines. If you need additional information, please check with your nurse.

#### **Waiting Areas**

There are specially designated lounge areas for family and visitors on the second floor and on the main floor in the lobby. A specific waiting area has been designated for family of patients in the Intensive Care Unit and the Med/ Surg Unit. Free coffee is available in select waiting areas.

#### **Visiting Regulations**

- People with colds, sore throats or any contagious diseases should not visit patients.
- Tobacco use in patient rooms or anywhere on the hospital campus is prohibited.
- Visitors must dress appropriately and wear a shirt and shoes.
- No more than two visitors are allowed at the bedside at one time. Visitors in semi-private rooms should be considerate of both patients. Visits should be kept short. Visitors should maintain a quiet environment and avoid unnecessary noise.
- Visitors may be asked to leave the room during tests or treatments, or when the physician or nurse needs to see the patient.
- Liberal visiting arrangements may be made for families or surgical patients on the day of surgery.

#### **Medical/Surgical**

Visitation: 9 a.m. to 9 p.m.

#### **ICU Visitation**

■ ICU Visiting Hours: 10 a.m. to 8 p.m. No visitors between 6:30 p.m. to 7:30 p.m. Time with family and friends is important to your loved one's recovery. We welcome visitors, keeping in mind that patients need plenty of rest, and the staff needs adequate space to perform patient care. Please follow these guidelines. Limit visits to 15-minute intervals, with no more than two visitors at a time. There may be times when we restrict visiting if we believe it will adversely affect the patient's recovery, which always is our primary concern. Visiting may be limited when physicians are making rounds, when the patient is asleep or at the request of family. For their own safety, as well as the safety of the patient, children under age 14 are not permitted in the ICU. Direct Line to ICU: 918-342-6713 Patient Code \_



The family spokesperson must use a code number to access patient information.

It is helpful to select one family member or friend who the medical staff can communicate with on behalf of all of the patient's loved ones.

#### Peggy V. Helmerich Women's Health Center Visitation

- Visitation is based on the mother's desires during labor.
- At time of delivery, a maximum of three support people for the mother are allowed.
- Following delivery, please check at the nurses' station before visiting.

#### **Nursery Visitation**

- Only parents are allowed in the nursery
- Viewing is available through the nursery windows
- Grandparents that would like to visit a baby with neonatal complications are allowed to at the following times: 10 a.m., noon, 2 p.m., 4 p.m., 6 p.m. and 8 p.m., for 15 minutes only and must be accompanied by a parent of the baby. Only two visitors at a time.

#### **Senior Care Visitation**

■ 3 p.m. to 4 p.m.

#### **Condition Reports**

Any personal information about your diagnosis and treatment must come from your physician, and this information is only available to members of your immediate family whom you designate to receive it.

#### **Gifts for Patients**

Visitors should check with the nurse before bringing gifts of food or drink to patients. Please check with the nurse to make sure your gift is appropriate. In the Intensive Care Unit, please check at the nurses' station regarding any gifts for patients.

#### Parking

Parking for patients and visitors is available at the south and west sides of the hospital. Additional parking is available in the rear of the hospital. Parking is available 24 hours a day, seven days a week. All parking is free. Patients and visitors are cautioned not to park in reserved or certain designated areas. Please be sure to lock your car. If something happens that causes you to need assistance with your vehicle, please call the Security Department at ext. 0.

#### **Gift Shop**

The Gift Shop, staffed by volunteers, is open from 9 a.m. until 4 p.m. Monday through Friday. The shop has gift items, jewelry, magazines, greeting cards, candy, toiletries, flowers and plants. The Gift Shop ext. is 1253.



### WILLIAM SHAKESPEARE 1564-1616

# Speak Up!

#### Take charge of your care.

During your stay, the doctors, nurses and staff will treat you and your family as partners in your own care. One important way that you can be involved is to speak up. Ask questions, voice your concerns, and don't be afraid to raise any issues relating not only to your care and treatment, but also to overall hospital services.



In the pages that follow, you'll find a step-by-step guide to making the most of your hospital stay how to stay safe, get the information you need, ask the right questions and interact effectively with your doctors, nurses and hospital staff.

#### **STAT NOTE**

- Write down any questions you have
- Choose a support person to communicate with the doctors and staff
- Keep a list of doctors you see and the medications they prescribe

FX See My Medications to keep track of what you are given in the hospital.

#### STEP UP & SPEAK UP SPEAK UP

Ask questions and voice concerns. It's your body, and you have a right to know.

#### PAY ATTENTION

Make sure you're getting the right treatments and medicines.

#### EDUCATE YOURSELF

Learn about the medical tests you get and your treatment plan.

#### FIND AN ADVOCATE

Pick a trusted family member or friend to be your advocate or support person.

#### WHAT MEDS & WHY

Know what medicines you take and why you take them.

#### HENRY H. TWEEDY 1868-1953

Fear is the father of courage and the mother of safety.



# Stay Safe

#### You can contribute to healthcare safety.

While you are in the hospital, many people will enter your room, from doctors and nurses to aides and technologists. The following information will help make your hospital stay safe and comfortable.

#### Don't Be Afraid to Ask...

A number of people may enter your hospital room. Be sure to:

- Ask for the ID of everyone who comes into your room.
- Speak up if hospital staff doesn't ask to check your ID.
- Ask if the person has washed his or her hands before he or she touches you.
- If you are told you need certain tests or procedures, ask why you need them, when they will happen, and how long it will be before you get the results.

#### YOU'RE IN CHARGE

Errors can occur during your hospital stay. They can involve medications, procedures or paperwork for example, being given salt with a meal when you're on a salt-free diet, or receiving someone else's medical forms.

You can help prevent errors by taking charge of your care. Be sure to:

- stay informed about your medical condition
- know the details of your treatment plan
- understand the tests and procedures you will undergo

Your doctor can answer these questions. Take notes when you speak with your doctor, or have a trusted friend or family member take notes for you so you can refer to them later. Also ask for any written information your doctor may be able to provide about your condition and/ or treatments. Remember you're in charge.

#### Stay Safe continued

#### **Fighting Infections**

While you're in the hospital to get well, you should know that there is the possibility of developing an infection. The single most important thing you can do to help prevent infections is to wash your hands and make sure that everyone who touches you—including your doctors and nurses—washes his or her hands, too.

#### You, your family and friends should wash hands:

- 1. after touching objects or surfaces
- in the hospital room
- 2. before eating
- 3. after using the restroom

It also is important that your healthcare providers wash their hands with either soap and water or an alcoholbased hand cleaner every time, before and after they touch you. Healthcare providers know to practice hand hygiene, but sometimes they forget. You and your family should not be afraid or embarrassed to speak up and ask them to wash their hands.

#### **Preventing Medication Errors**

By taking part in your own care, you can help the members of your healthcare team avoid medication errors. Here's how:

Be sure that all of your doctors know what medications you have been taking, including prescription drugs, over-the-counter medications, herbal and vitamin supplements, natural remedies and recreational drugs.

Be sure that all of your doctors know of any allergies you may have—to medications, anesthesia, foods, latex products, etc.

When you are brought medications or IV fluids, ask the person to check to be sure you are the patient who is supposed to receive the medications. Show that person your ID bracelet to double-check.

Remember—you play an important role in helping to reduce medication errors.



#### Happy Birthday to You! Wash your hands with soap and warm water for 15 to 20 seconds. That's about the

same amount of time that it takes to sing the "Happy Birthday" song twice.



No Soap? No Problem

Alcohol-based hand cleaners are as effective as soap and water in killing germs. To use, apply the cleaner to the palm of your hand and rub your hands together. Keep rubbing over all the surfaces of your fingers and hands until they are dry.

#### Patients of all ages are at risk of falls because of medications that may make them dizzy, weak or unsteady.

#### **Know Your Meds**

While you are hospitalized, your doctor may prescribe medications for you. Be sure that you understand exactly what they are and why they are being prescribed. Use this checklist to help you get the information you need from your doctor:

- What is the name of the medicine?
- What is its generic name?
- Why am I taking this medicine?
- □ What dose will I be taking?
- How often, and for how long?
- What are the possible side effects?
- Can I take this medicine while taking my other medications or dietary supplements?
- Are there any foods, drinks or activities that I should avoid while taking this medicine?

#### USE THE MEDICATION TRACKER ON PAGE 34 TO HELP YOU MONITOR YOUR MEDICATIONS.

#### **Preventing Falls**

Patients often fall because they are on medications that make them dizzy, they are weak and unsteady due to illness or medical procedures, or they've been sitting or lying down for too long. For your safety, please:

- Always call for assistance before getting out of bed.
- Wear properly fitting shoes with nonskid soles.
- Keep the call button within easy reach.
- Have necessary items within reach, such as your glasses, tissues, the telephone and anything else you need.
- When you get assistance, rise slowly from your bed or chair to prevent dizziness.
- Walk close to the wall and hold onto the handrail while in the bathroom.

#### DVT: LOWER YOUR RISK

Deep-vein thrombosis (DVT) occurs when blood clots form in the legs and block circulation. The clots can lodge in the brain, heart or lungs, causing damage or even death. When you're hospitalized and in bed with limited physical activity, your risk of DVT increases.

Ask your doctor about using compression boots or stockings and/or blood thinners to prevent DVT during your stay.

Tell your doctor or nurse if you have any of the following warning signs:

> A leg cramp or charley horse that gets worse

Swelling and discoloration in your leg, upper arm or neck

Unexplained shortness of breath

Chest discomfort that gets worse when you breathe deeply or cough

> Light-headedness or blacking out

## **For Your Safety and Security**

#### Valuable or Lost Items

Patients are asked not to bring items of value to the hospital. If you do bring a valuable item, it should be deposited in the Business Office's safe. You will be given a written receipt for all items, which must be presented when you withdraw them. The hospital does not accept responsibility for items of value unless they are deposited in the safe. If you lose something, please notify your nurse immediately, and we will make every effort to help you find it. Unclaimed articles are turned in to the Business Office, where they are kept for 14 days. To inquire about lost articles, call the main number (918-341-2556) and ask for the Business Office



#### **Breathe Easy**

We respectfully ask patients, visitors and staff to refrain from the use of all tobacco products, including cigarettes, electronic cigarettes, cigars, pipes and all forms of smokeless tobacco products while inside the building or on the grounds of this facility.

#### **Fire Drills**

For your protection, the hospital conducts fire and disaster drills regularly. If a drill occurs while you are here, please remain in your room and do not become alarmed. The hospital is a fire-resistant building and the staff is trained in fire protection.

#### Oxygen

Special regulations are in effect in areas where patients are receiving oxygen. Some electrically operated equipment and aerosol products are not permitted in these areas. Absolutely no smoking is permitted in any room where oxygen is in use or on standby.

#### Wheelchairs

Wheelchairs are available on all nursing units, but getting in an out of them without assistance may be hazardous. Please ask for help from a member of the hospital staff.

#### **Medications**

All medications you take while in the hospital are prescribed by your physician, dispensed by the hospital pharmacy and administered by a nurse. Patients are not permitted to administer their own medications or keep personal medications at their besides unless specifically ordered by their physician. If you bring medications with you, please make arrangements to send them home. If this is not possible, the medications will be inventoried, packaged, and stored in the pharmacy. A receipt will be given for medications stored and can be picked up when you are discharged by contacting your nurse. Medications not picked up 30 days from discharge will be destroyed.

### What Are Your Advance Directives?

#### **Advance Directives**

You have the right to make decisions about your own medical treatment. These decisions become more difficult if, due to illness or a change in mental condition, you are unable to tell your doctor and loved ones what kind of healthcare treatments you want. That is why it is important for you to make your wishes known in advance.

Here is a brief description of each kind of directive:

#### **Living Will**

A set of instructions documenting your wishes about life-sustaining medical care. It is used if you become terminally ill, incapacitated, or unable to communicate or make decisions. A living will protects your rights to accept or refuse medical care and removes the burden for making decisions from your family, friends and medical professionals.

#### Healthcare Surrogate/Representative

A person (agent) you appoint to make your medical decisions if you are unable to do so. Choose someone you know well and trust to represent your preferences. Be sure to discuss this with the person before naming him or her as your agent. Remember that an agent may have to use his or her judgment in the event of a medical decision for which your wishes aren't known.

#### **Durable Power of Attorney**

*For healthcare:* A legal document that names your healthcare surrogate. Once written, it should be signed, dated, witnessed, notarized, copied and put into your medical record.

*For finances:* You also may want to appoint someone to manage your financial affairs when you cannot. A durable power of attorney for finances is a separate legal document from the durable power of attorney for healthcare. You may choose the same person for both, or choose different people to represent you.

#### What Are Advance Directives?

A living will, healthcare proxy, and durable power of attorney are the legal documents that allow you to give direction to medical personnel, family and friends concerning your future care when you cannot speak for yourself. You do not need a lawyer in order to complete advance directives.

#### **Keep It Current!**

Your advance directive is destroyed once you are discharged from the hospital. You must provide a new advance directive each time you are readmitted. In this way, you ensure that the hospital has your most current information.

For more information about advance directives or to obtain forms, please speak with your nurse.

## **Privacy & Information**

If you believe your health information was used or shared in a way that is not allowed under the privacy law, or if you weren't able to exercise your rights, you can file a complaint with your provider or health insurer. You also can file a complaint with the U.S. government. Go online to https://ocrportal.hhs.gov/ ocr/smartscreen/main.jsf for more information.

A separate law provides additional privacy protections to patients of alcohol and drug treatment programs. For more information, go online to www.samhsa.gov.



#### **Privacy & Your Health Information**

You have privacy rights under a federal law that protects your health information. These rights are important for you to know. Federal law sets rules and limits on who can look at and receive your health information.

#### Who must follow this law?

- Most doctors, nurses, pharmacies, hospitals, clinics, nursing homes and many other healthcare providers and their vendors
- Health insurance companies, HMOs and most employer group health plans
- Certain government programs that pay for healthcare, such as Medicare and Medicaid

#### What information is protected?

- Information your doctors, nurses and other healthcare providers put in your medical records
- Conversations your doctor has with nurses and others regarding your care or treatment
- Information about you in your health insurer's computer system
- Billing information about you at your clinic
- Most other health information about you held by those who must follow this law

#### You have rights over your health information.

*Providers and health insurers who are required to follow this law must comply with your right to:* 

- Ask to see and get a copy of your health records
- Have corrections added to your health information
- Receive a notice that tells you how your health information may be used and shared
- Decide if you want to give your permission before your health information can be used or shared for certain purposes, such as for marketing
- Get a report on when and why your health information was shared for certain purposes
- File a complaint



#### To make sure that your health information is protected in a way that doesn't interfere with your healthcare, your information can be used and shared:

- For your treatment and care coordination
- To pay doctors and hospitals for your healthcare
- With your family, relatives, friends or others you identify who are involved with your healthcare or your healthcare bills, unless you object
- To make sure doctors give good care and nursing homes are clean and safe
- To protect the public's health, such as by reporting when the flu is in your area
- To make required reports to the police, such as reporting gunshot wounds

#### Without your written permission, your provider cannot:

- Give your health information to your employer
- Use or share your health information for marketing or advertising purposes
- Share private notes about your mental health counseling sessions

Adapted from U.S. Department of Health & Human Services Office for Civil Rights

#### How do I get copies of my medical records?

Simply stop by the Medical Records Office, located on the first floor across from the Administration Office, and fill out an authorization form. You will need a photo ID to pick up your records. The first copy is \$1, then 50 cents per page thereafter. If you are not able to come into the hospital to pick up your records, please call us at 918-342-6733, and we will be happy to mail the authorization form to you. Please be sure to notate on the form the person you are authorizing to pick up the records on vour behalf. He or she will need a photo ID.





You do not have to "just put up with" severe pain. You can work with your nurses and doctors to prevent or relieve pain.

#### **Pain Management**

You are the expert about how you are feeling. Be sure to tell your doctor or nurse when you have any kind of pain. To help describe your pain, be sure to report:

- When the pain began
- Where you feel pain
- How the pain feels—sharp, dull, throbbing, burning, tingling
- If the pain is constant, or if it comes and goes
- What, if anything, makes the pain feel better
- What, if anything, makes the pain feel worse
- How much, if any, pain your medicine is taking away
- If your medicine helps with the pain, how many hours of relief do you get

If you are not able to talk and cannot tell us how bad your pain is, we have a picture scale you can use to let us know how much pain you are having. If you cannot use the picture scale, your nurses have been trained to observe and assess patients for pain and response to pain medications.

You do not have to "just put up with" severe pain. You can work with your nurses and doctors to prevent or relieve pain. Ask questions so you know what to expect. This will help you be less afraid and more in control, which will make

#### USE THE PAIN RATING SCALE BELOW TO TELL YOUR DOCTOR OR NURSE HOW YOUR PAIN IS AFFECTING YOU.



Wong-Baker FACES® Pain Rating Scale

<sup>@1983</sup> Wong-Baker FACES® Foundation. Visit us at www.wongbakerFACES.org. Used with permission



pain easier to handle. Do not worry about getting hooked on pain medicine. Studies have shown that the short-term use of pain medication is not addictive unless you already have a problem with drug abuse.

#### **Communicating Pain Relief**

You will be asked to rate your pain on a number scale from zero to 10. Zero stands for no pain, up the scale to 10, which represents the worst possible pain imaginable. Be honest when rating your pain. If the pain medication is not helping, let the nurse and doctor know. Ask your nurse to give you your medication before the pain gets worse or is at a pain level above 4. If your pain gets ahead of the medication, you may not have the best level of relief.

#### Things to Remember

You can get better pain control by doing the following:

- Ask the doctors and nurses what to expect. Will there be much pain? Where will it occur? How many days is it likely to last?
- Discuss your past pain-control experiences with your doctors and nurses; tell them what has worked well or not so well for you. In addition, tell them about any allergies to medicines you have, or prior substance abuse, and ask about side effects that may occur with treatments.
- Learn deep-breathing and relaxation exercises. Use massage or hot or cold packs to help decrease the pain experience if ordered by your doctor. If you want to listen to music, bring your preferred listening device.
- Take the pain medicine that is ordered, and take it when pain first begins. Your pain will be better controlled if you do not wait to take your medicine until the pain is worse.
- Take pain medicine before you do any activity that makes your pain worse.
- Stick with your pain-control plan if it is working. Your doctors and nurses can change the treatment if your pain is not under control.

Ask the doctors and nurses what to expect. Will there be much pain? Where will it occur? How many days is it likely to last?



"In the field of observation, chance favors only the prepared mind."

## Don't Leave Until...

5 things to know before you walk out that hospital door.



When it's time to be released from the hospital, your physician will authorize a hospital discharge. This doesn't necessarily mean that you are completely well—it only means that you no longer need hospital services. If you disagree, you or your caregiver can appeal the decision (see *If You Disagree*, at right).

On the other hand, you may be pleased to learn that your doctor has approved your discharge. But before you can leave the hospital, there are several things that you or your caregiver must attend to.

The first step is to know who will be involved in your discharge process. This starts with the hospital's discharge planner, who may be a nurse, social worker or administrator, or may have some other title. You and your caregiver should meet this person relatively early in your hospital stay; if not, find out who this person is and be sure to meet with him or her well before your expected discharge date.

#### If You Disagree

You or your support person can appeal your doctor's discharge decision. If you are a Medicare patient, be sure you are given "An Important Message from Medicare" from the hospital's discharge planner or caseworker. This details your rights to remain in the hospital for care and provides information on who to contact to appeal a discharge decision. Make sure you have the following information before you leave the hospital:

**1. Medications list.** This is a listing of what medications you are taking, why, in what dosage, and who prescribed them. (You'll already have this if you use the My Medications form on page 34 to keep track while you're in the hospital.) But also having a list prepared by the hospital is a good way to double-check the information.

**2. Rx.** A prescription for any medications you need. Be sure to fill your prescriptions promptly so you don't run out of needed medications.

#### 3. Follow-up care instructions.

Make sure you have paperwork that tells you:

- what, if any, dietary restrictions you need to follow and for how long
- what kinds of activities you can and can't do, and for how long
- how to properly care for any injury or incisions you may have
- what follow-up tests you may need and when you need to schedule them
- what medicines you must take, why, and for how long
- when you need to see your physician
- any other home-care instructions for your caregiver, such as how to get you in and out of bed, how to use and monitor any equipment, and what signs and symptoms to watch out for
- telephone numbers to call if you or your caregiver has any questions pertaining to your after-hospital care



**Be sure to meet** with the hospital's **discharge planner** early in your stay to ensure a smooth discharge process later on.

**4. Other services.** When you leave the hospital, you may need to spend time in a rehabilitation facility, nursing home, or other institution. Or you may need to schedule tests at an imaging center, have treatments at a cancer center, or have in-home therapy. Be sure to speak with your nurse or physician to get all the details you need before you leave.

**5. Community resources.** You and your caregiver may feel unprepared for what will happen after your discharge. Make sure your discharge planner provides you with information about local resources, such as agencies that can provide services like transportation, equipment, and agencies that can help with patient care and respite care.

#### Don't Leave Until... continued

#### **Home Healthcare**

Part-time healthcare provided by medical professionals in a patient's home to maintain or restore health. Home Healthcare includes a range of skilled nursing care, including physical therapy and occupational therapy. Medicare defines home healthcare as intermittent, physician-ordered medical services or treatment.

#### **Durable Medical Equipment (DME)**

Medical equipment that is ordered by a doctor for use in a patient's home. Examples are walkers, crutches, wheelchairs and hospital beds. DME is paid for under Medicare Part B and Part A for home health services.

#### **Independent Living**

Communities for seniors who are very independent and have few medical problems. Residents live in private apartments. Meals, housekeeping, maintenance, social outings and events are provided.

#### **Assisted Living**

An apartment in a long-term care facility for elderly or disabled people who can no longer live on their own but who don't need a high level of care. Assisted living facilities provide assistance with medications, meals in a cafeteria or restaurant-like setting, and housekeeping services. Nursing staff is on-site. Most facilities have social activities and provide transportation to doctor's appointments, shopping, etc.

#### **Nursing Home**

A residential facility for people with chronic illness or disability, particularly elderly people who need assistance for most or all of their daily living activities such as bathing, dressing and toileting. Nursing homes provide 24-hour skilled care, and also are called convalescent homes or long-term care facilities. Many nursing homes also provide short-term rehabilitative stays for patients recovering from an injury or illness. Some facilities also have a separate unit for residents with Alzheimer's disease or memory loss.

#### Hospice

A licensed or certified program that provides care for people who are terminally ill and their families. Hospice care can be provided at home, in a hospice or other freestanding facility, or within a hospital. Also referred to as palliative care, hospice care emphasizes the management of pain and discomfort and addresses the physical, spiritual, emotional, psychological, financial and legal needs of the patient and his or her family.

Respite Care provides a temporary break for caregivers. Patients spend time in programs such as adult daycare or in weeklong or monthlong stays in a care facility.



All patients should familiarize themselves with the terms of their insurance coverage. This will help you understand the hospital's billing procedures and charges. If there is a question about your insurance coverage, an admitting representative will contact you or a member of your family while you are here. All deductibles and co-payments are to be paid at the time of service unless otherwise arranged.

#### If You Are a Member of an HMO or PPO

Your plan may have special requirements, such as second surgical opinions or pre-certification for certain tests or procedures. It is your responsibility to make sure the requirements of your plan have been met. If your plan's requirements are not followed, you may be financially responsible for all or part of the services rendered in the hospital. Some physician specialists may not participate in your healthcare plan and their services may not be covered.

#### If You Are Covered by Medicare

We will need a copy of your Medicare card to verify eligibility and process your claim. You should be aware that the Medicare program specifically excludes payment for certain items and services, such as cosmetic surgery, some oral surgery procedures, personal comfort items, hearing evaluations, and others. Deductibles and copayments also are the responsibility of the patient.

#### If You Are Covered by Medicaid

We will need a copy of your Medicaid card. Medicaid also has payment limitations on a number of services and items. Medicaid does not pay for the cost of a private room unless medically necessary.

#### If You Have No Insurance

An admitting representative will discuss financial arrangements with you. Assistance for application of Medicaid benefits is available upon request.

#### It's the Law

If you have a medical emergency or are in labor, you have the right to receive, within the capabilities of this hospital's staff and facilities:

- An appropriate medical screening examination
- Necessary stabilizing treatment (including treatment for an unborn child) and, if necessary,
- An appropriate transfer to another facility

You have these rights even if you cannot pay, do not have medical insurance or are not eligible for Medicare or Medicaid.

#### **Our Policy**

If the medical screenings examination shows that you do not have a medical emergency or are not in labor, then we will require advance payment before additional services are provided.

The hospital participates in the Medicaid program.

### Preparing to Leave the Hospital

#### Discharge Instructions

Your physician and nurse will give you instructions about post-hospital care. If you have questions about your diet, activities or other matters, please be sure to ask.



As a courtesy service, we will submit the hospital billing to your insurance company and will do everything possible to expedite your claim. However, you should remember that your policy is a contract between you and your insurance company, and you have the final responsibility for payment of your hospital bill with the limits of our credit policy. We have several payment options available to assist you with bill payment.

Your bill reflects services you received during your stay. Charges fall into two categories: a basic daily rate, which includes your room, meals, nursing care, housekeeping, telephone and television; and charges for special services, which include items your physician orders for you, such as X-rays or laboratory tests.

If you have certain tests or treatments in the hospital, you may receive bills from physicians you did not see in person. These bills are for professional services rendered by these physicians in diagnosing and interpreting test results while you were a patient. Pathologists, radiologists, cardiologists, anesthesiologists, and other specialists perform these services and are required to submit separate bills. If you have questions about these bills, please call the number printed on the statement you receive.

#### **Going Home**

When your doctor decides you are ready to leave the hospital, a discharge order will be written. You may want to make arrangements with a family member or friend to help you when it's time to go home.

#### **Escort Service**

When you are ready to leave, a member of the hospital staff will escort you to the front entrance and help you into the car.



FRAN DRESCHER 1957-

Surgery is half the race, but you have to go for the follow-up or do yourself a major disservice.

# Be Prepared

X marks the spot—be sure any mistaken markings on your body are completely cleaned off.

How you can make your surgical procedure and follow-up care as safe as possible.

As an active member of your healthcare team, you can make your surgical procedure and follow-up care as safe as possible. Here's what you need to know.

#### **Before Your Surgery**

Bring a list of any questions you have about your surgery to your presurgical doctor's visit. Also bring a list of all the prescription, overthe-counter and herbal medications that you are currently taking or that

you took until very recently. Review the list with your surgeon and ask if there are any you should stop taking prior to your procedure.

- Be sure your surgeon knows about any allergies you have to medications and foods.
- Ask your surgeon whether you can eat or drink before your procedure, and if so, what kinds of food or drink, and within how many hours of your surgery.
- Ask your surgeon whether you should remove nail polish or temporary dental appliances (such as

a bridge), if you can wear deodorant or body lotion, and if there are other preparations you need to make prior to surgery.

- Find out if you will need therapy after your surgery, who will arrange for it, and whether you can have therapy at home.
- Arrange for transportation to and from the hospital or surgical center.
- Ask a relative or friend to go to the hospital or surgical center with you, to stay during your procedure, and accompany you home afterward.

www.hillcrestclaremore.com 918-341-2556:25



It's hard to remember everything yourself. When you meet

with your doctor, bring your questions and a friend. Your friend

can help listen, take notes and ask guestions, too!

R

#### A Team Effort

Here's how to work with your surgical team to get the best outcome:

- Know the preparations you must make before your surgery.
- Get to the hospital or surgical center early on the day of your surgery.
- Review paperwork carefully before signing.
- Make sure the proper part of your body is marked for surgery.
- Get your post-surgical care instructions in writing before you leave.

#### **On the Day of Your Surgery**

- Shower or bathe and wash your hair. Don't wear makeup or perfume. Be sure to follow any other pre-surgery instructions you were given.
- Leave your jewelry, money, credit cards, and other valuables at home.
- Allow yourself plenty of time for travel.
- Once you arrive at the hospital or surgical center, you will be given an Informed Consent form to sign. Read it carefully. Make sure everything on the form is correct. If you don't understand something, ask questions before you sign the form.

#### **Before Your Procedure Begins**

- Staff at the hospital or surgical center should ask you the following questions more than once before your surgery:
  - □ Your name
  - □ What kind of surgery you're having
  - □ The part of your body that is being operated on
- A healthcare professional will mark the spot on your body that is going to be operated on. Make sure he or she marks only the correct part. If he or she makes a mistake and has to make a new mark, be sure the old mark is completely cleaned off.

- If you won't be awake for the marking, be sure your relative or friend watches the marking.
- Ask your surgeon if the team will take a "time out" just before your procedure. This is done to make sure the team is doing the right surgery on the right body part of the right person.

#### **After Your Surgery**

- Speak up about any pain you are having and ask for relief. Be specific about the intensity and location.
- If you are given medications right after surgery, ask what they are and what they are for. Ask about side effects. If you are given a prescription for medications you must take while recovering, be sure you understand the instructions for the dosage, how frequently you need to take the medications, and for how long.
- If you are given IV (intravenous) fluids right after surgery, ask what they are and what they are for. Be sure someone monitors the fluid level.
- Ask your surgeon if your activities need to be limited, and if so, for how long. Ask when you will be able to resume work, exercise and travel.
- Be sure to get instructions for post-surgical care in writing before you leave.

\*\*In compassion lies the world's true strength.?? R Caregiver, remember to care for yourself!

# For the Caregiver



While your loved one is in the hospital, who will speak up for him or her? You can, by being the patient's advocate—the person who will help the patient work with doctors, nurses and hospital staff. To help your loved one make the best decisions about his or her care and treatment, follow the advice in the caregiver list at right.

While you are making sure that your loved one's needs are being met, don't neglect your own. Caregiving is a stressful and time-consuming job. You may neglect your diet, your normal exercise routine and your sleep needs. You may find that you have little or no time to spend with friends, to relax or to just be by yourself for a while. But downtime is important. Don't be reluctant to ask for help in caring for your loved one. Take advantage of friends' offers to help and look into local adult daycare programs. Find out more about how you can ease the stress of caregiving at www.caregiver.org.

#### CAREGIVER...

know what condition your loved one is being treated for.

patient's rights Know your patient's rights and responsibilities.

advance directives Know whether or not your loved one has an advance directive and if so, what it specifies (see page 15).

ask questions If your loved one is too ill or reluctant to ask questions, make note of his or her concerns and any you may have, and don't be afraid to speak up (see Speak Up! on page 10).

help track medications Your loved one may be prescribed medications while in the hospital and may be seen by several doctors. Keep track of it all with *My Medications* on *page 34*.

#### what's next?

Will your loved one need home care or care at another facility? Ask to speak with a case manager to find out what your options are.



#### **Your Hospital Team**

#### **The Medical Staff**

The physician who admits you is responsible for directing your care while you are in the hospital. Your physician, as the coordinator for your treatment program, should be consulted if you have questions about your illness.

#### **The Nursing Staff**

24-hour nursing care is provided by a team of professional registered nurses, licensed practical nurses, and nurse assistants. A nurse manager is responsible for directing and coordinating nursing care on each unit. Please feel free to contact your nurse, nurse manager or unit charge nurse if you have questions or concerns.

#### **Chaplain Services**

Hillcrest Hospital Claremore believes that total patient care demands attention to the spiritual, physical and emotional needs of each patient. Members of the voluntary chaplain services staff are available to assist you, whatever your religious tradition. Your priest, minister or rabbi is always welcome to visit you while you are here. A chapel is available for your convenience 24 hours a day, located by the emergency room waiting area.

#### Dietitian

The hospital maintains a full-time registered dietitian to meet your dietary needs during your stay. If you have questions about your meals or diet, speak with your nurse.

#### Physical & Occupational Therapy Care Coordinators/Case workers

Physical and occupational care coordinators/case workers are assigned to each patient care area, and are trained to help patients and family members deal with financial, social and emotional issues that relate to illness or hospitalization.

In addition, a case worker is on call 24/7 to further assist patients and families when needed. Members of the department work with patients and families to help deal with long-term illnesses and rehabilitation, and are involved in discharge planning.

#### **Patient Accounting**

A representative from the Patient Accounting Department can answer questions about your hospital bill and help you interpret financial policies and billing procedures at the hospital. You may contact Patient Accounting by calling the main hospital number at 918-341-2556 Monday through Friday from 9 a.m. to 4:30 p.m.

#### Housekeeping

Your room is cleaned daily by a member of the housekeeping staff. If there is a housekeeping problem in your room, tell your nurse, and it will be taken care of as soon as possible.

#### Volunteers

Volunteers contribute many hours of service and financial assistance to the hospital. They supplement the services of the hospital staff in many ways and



can be identified by their pink smocks (ladies) or red vests (men).

#### **Other Personnel**

During your stay, you may be visited by many other healthcare professionals, including personnel from the laboratory and radiology departments and physical or occupational therapists. In addition, the Hillcrest Hospital Claremore family includes many behind-the-scene workers, such as accountants, engineers, administrative assistants, food service workers and others who contribute greatly toward your well-being while you are here.

#### **Special Services**

Hillcrest Hospital Claremore offers a variety of special services to make your stay as pleasant and comfortable as possible. These special services include the following:

#### Mail

Letters and packages for patients are delivered each morning by volunteers. Parcels that arrive after you have been discharged are forwarded to your home. Stamps and stationery may be purchased in the Gift Shop. Outgoing mail may be left at the nurses' station or given to a volunteer.

#### **Flowers**

Flowers are delivered to your room by volunteers. Please keep in mind that large plants and bouquets are difficult to deliver and remove upon discharge.

#### **Newspapers**

Newspapers are available to all patients or may be purchased at the main hospital entrance.

#### **Notary Public**

The services of a notary are available for patients free of charge. For more information, call the Business Office. After hours, call the Emergency Department Admitting Desk at ext. 6778.

#### For the Hearing Impaired

A telecommunications device is available to help hearing-impaired patients or patients who want to communicate with a hearing-impaired relative or friend. Arrangements also can be made to have a person who uses sign language help a hearing-impaired or deaf patient.

#### Interpreters

The hospital has access to interpreters for a number of foreign languages should a patient require it.

#### ROBERT B. SHERMAN 1925-2012

<sup>••</sup> A spoonful of sugar helps the medicine go down.<sup>2</sup>

# Watch What

#### You Eat This chart will help you steer clear of side effects that can be caused by pairing certain foods and medications.

Did you know foods you eat could affect the medicine you take? Eating or drinking certain foods can cause your body to absorb medicine slower or faster. This can make medicine less effective or cause troubling side effects. The chart below lists some common drug-food interactions, but it does not include every medication or food interaction. Be sure to ask your doctor or pharmacist about possible interactions between food, vitamins, supplements, herbals or other drugs before taking any prescription or over-the-counter medications.

DRUG CLASS	RX MEDICINE	TIPS
Analgesics (pain relievers)	Percocet (acetaminophen/oxyco- done) Tylenol #3 (acetamino- phen/codeine) Norco, Vicodin (acet- aminophen/ hydroco- done)	Avoid drinking alcohol. Take with food to reduce upset stomach. Avoid over-the- counter Tylenol (acetaminophen)- con- taining products. It's unsafe to take more than 4,000 mg of acetaminophen in 24 hours.
Anti-arrhythmics (irregular heart beat)	Cordarone, Pacerone (amiodarone)	Avoid eating grapefruit and drinking grapefruit juice. May take with or without food, but take the same time each day.
Antibiotics	Ampicillin Penicillin	Take on an empty stomach for best absorption.
	Cipro (ciprofloxacin) Doxycycline Tetracycline Levaquin (levofloxacin)	To improve absorption, avoid antacids, iron-containing foods and calcium-rich dairy products.
	Flagyl (metronidazole) Tindamax (tinidazole)	Avoid alcohol while taking and for 3 days after finishing the medication. Take with food to prevent upset stomach; take probiotics (yogurt or supplements) to prevent diarrhea.
	Griseofulvin	Take with fatty food (ice cream, whole milk or cheese) for better absorption.
Anti-coagulants (blood thinners)	<b>Coumadin, Jantoven</b> (warfarin)	Avoid sudden increase or decrease in foods rich in vitamin K (green leafy vegetables, avocados, soybeans, green tea, bacon, butter, cheese) and multivitamins with vitamin K. Check with your doctor or pharmacist for a complete list. Limit alcohol and cranberry juice.

DRUG CLASS	RX MEDICINE	TIPS		
Antidepressants	Paxil (paroxetine) Prozac (fluoxetine) Zoloft (sertraline) Lexapro (escitalopram) Celexa (citalopram)	Avoid drinking alcohol; avoid use of nico- tine or tobacco products.		
Antipsychotics	Clozaril (clozapine)	Avoid drinking alcohol and caffeine.		
	Abilify (aripiprazole)	Avoid drinking alcohol and grapefruit juice.		
	Seroquel (quetiapine)			
Anti-seizure	Dilantin (phenytoin)	Take on an empty stomach at the same time every day. Avoid calcium or antacids within 2 hours of taking medicine.		
	Carbatrol, Tegretol (carbamazepine)	Avoid eating grapefruit and drinking grapefruit juice.		
	Depakote (divalproex) Lamictal (lamotrigine) Lyrica (pregabalin) Topamax (topiramate) Zarontin (ethosuximide)	Avoid drinking alcohol.		
Cholesterol	Lipitor (atorvastatin) Mevacor (lovastatin) Zocor (simvastatin)	Avoid eating large amounts of grapefruit or grapefruit juice (greater than 1 quart per day). Do not eat oat bran within 2–4 hours of taking medicine.		
Diabetes Drugs	Glucophage (metfor- min) DiaBeta (glyburide) Glucotrol (glipizide) Amaryl (glimepiride)	Avoid drinking alcohol. If diabetes is well controlled, limit alcohol to 1–2 drinks per day consumed with a meal.		
Gastrointestinal Drugs	<b>Reglan</b> (metoclopramide)	Avoid drinking or limit alcohol. Take 30 minutes before meals.		
	Nexium (esomeprazole) Prilosec (omeprazole) Protonix (pantoprazole)	Take at least 1 hour before meals.		
	Tagamet (cimetidine) Zantac (rantidine)	Avoid drinking alcohol, caffeine and nicotine.		
Gout Medications*	Colcrys (colchicine)	Avoid eating grapefruit and drinking grapefruit juice.		
	Zyloprim (allopurinol)	Take after meals.		
*If you have gout, avoid large amounts of purine-rich foods (a vies, beef stock gravies, sardines, shellfish, asparagus, lentils ar meat—especially pork). Check with your doctor or pharmacis complete list.				

#### Watch What You Eat continued

DRUG CLASS	RX MEDICINE	TIPS
High Blood Pressure	ACE Inhibitors Monopril (fosinopril) Prinvil, Zestril (lisinopril) Vasotec (enalapril)	Avoid potassium-based salt substitutes and eating large amounts of foods high in potassium (almonds, bananas, cantaloupe, kidney beans, oranges/orange juice, pota- toes with skin, tomato juice, spinach).
	Calcium Channel Blockers Calan (verapamil) Cardizem (diltiazem) Plendil (felodipine) Procardia (nifedipine)	Avoid drinking Seville (sour) orange juice, eating grapefruit, and drinking grapefruit juice. Limit caffeine when taking Calan.
	Beta Blockers Tenormin (atenolol)	Avoid drinking orange juice. Do not take calcium products within 2 hours of taking medicine.
	<b>Lopressor</b> (metoprolol tartrate)	Take with or immediately after meals. Do not take calcium products within 2 hours of taking medicine.
	Diuretics Aldactone (spironolac- tone) Dyrenium (triamterene) Midamor (amiloride)	Avoid potassium-based salt substitutes and eating large amounts of foods high in potassium (bananas, cantaloupe, kidney beans, potatoes with skin, tomato juice, spinach).
Immunosuppressant Drugs	Neoral, Sandimmune (cyclosporine) Prograf (tacrolimus) Rapamune (sirolimus)	Avoid eating grapefruit and drinking grapefruit juice. Avoid potassium-based salt substitutes and eating large amounts of food high in potassium (almonds, avo- cados, bananas, cantaloupe, kidney beans, oranges/orange juice, potatoes with skin, spinach).
MAO Inhibitors	Eldepryl, Zelapar, Emsam (selegiline) Marplan (isocarboxazid) Nardil (phenelzine) Parnate (tranylcypro- mine)	Avoid foods high in tyramine (aged cheese, avocado, banana, bologna, pepperoni, salami, pickled herring, liver, raisins, yeast extracts, red wine, sour cream). Avoid drink- ing large amounts of alcohol and caffeine (chocolate, coffee, tea).
Osteoporosis	Bisphosphonates Fosamax (alendronate) Boniva (ibandronate) Atelvia, Actonel (rise- dronate)	Take on an empty stomach with 8 oz. of water in the morning before breakfast. Do not take any other drugs, vitamins or food within 30 minutes (60 minutes for ibandronate) of taking medicine. Remain upright, not reclining or lying down, for 1 hour after taking.
Thyroid Hormones	Levoxyl, Synthroid, Unithroid, Tirosint (levothyroxine)	Take on an empty stomach 30–60 minutes before breakfast with 8 oz. of water. Avoid eating walnuts, soybean flour, dietary fiber, and calcium products within 4 hours of taking medicine.

## Redicine Safety Tips & Information Log

#### At the Hospital and Clinic

- Share with your doctor a list of your current medicines, vitamins, herbs and supplements. A medication card is attached to this brochure.
- Make sure the doctor or nurse checks your wristband and asks your name before giving you medicine.
- Ask your doctor or nurse how a new medicine will help. Ask for written information about it, including its brand and generic names.
- Ask your doctor or nurse about the possible side effects of your medicines.
- Don't be afraid to tell the nurse or the doctor if you think you are about to get the wrong medicine.
- Know what time you normally get medicine. If you don't get it then, tell your nurse or doctor.
- Tell your nurse or doctor if you don't feel well after receiving a medicine. If you think you are having a reaction or experiencing side effects, ask for help immediately.
- If you're not feeling well enough to ask questions about your medicines, ask a relative or a friend to ask questions for you and to help make sure you get and take the right medicines.
- If you receive intravenous (IV) fluids, read the contents labels on the bags of IV fluids. If you're not well enough to do this, ask a relative or friend to do it.
- If you are given an IV, ask the nurse how long it should take for the liquid to run out.
- Ask for a list of your medications. This lists all of the drugs you should be taking. Check it for accuracy. If you're not well enough to do this, ask a friend or relative to help.
- Before you leave the hospital or clinic, make sure that you understand all of the instructions for the medicines you will need to keep taking, and ask any questions you have about any of your medicines.

Here are some basic steps you can take to help prevent a medication mistake from happening to you or your loved ones.





# My Medications

#### Keep track of all medications you are prescribed while in the hospital.

When you get home, add all other medications—including over-the-counter, vitamins and herbs—to this list. Update your list as needed.

Medication:	
(include brand and gen	eric names)
	times per day at (circle all that apply): 12–1 a.m. / 2–3 a.m. / 4–5 a.m. / 6–7 a.m.
8–9 a.m. / 10–11	a.m. / 12–1 p.m. / 2–3 p.m. / 4–5 p.m. / 6–7 p.m. / 8–9 p.m. / 10–11 p.m.
Reason for taking:_	
Prescribed by:	Date started:
	d number: /
Medication:	
(include brand and gen	eric names)
Dose: Take	times per day at (circle all that apply): 12–1 a.m. / 2–3 a.m. / 4–5 a.m. / 6–7 a.m.
8–9 a.m. / 10–11	a.m. / 12–1 p.m. / 2–3 p.m. / 4–5 p.m. / 6–7 p.m. / 8–9 p.m. / 10–11 p.m.
Reason for taking:	
	Date started:
Pharmacy name and	d number: /
Medication:	
(include brand and gen	
Dose: Take	times per day at (circle all that apply): 12–1 a.m. / 2–3 a.m. / 4–5 a.m. / 6–7 a.m.
	a.m. / 12–1 p.m. / 2–3 p.m. / 4–5 p.m. / 6–7 p.m. / 8–9 p.m. / 10–11 p.m.
	Date started:
	but started/
Medication:	
(include brand and gen	eric names)
Dose: Take	times per day at (circle all that apply): 12–1 a.m. / 2–3 a.m. / 4–5 a.m. / 6–7 a.m.
8–9 a.m. / 10–11	a.m. / 12–1 p.m. / 2–3 p.m. / 4–5 p.m. / 6–7 p.m. / 8–9 p.m. / 10–11 p.m.
Reason for taking:	
Prescribed by:	Date started:
Pharmacy name and	1 number://////

#### WOODY ALLEN 1935-PRESENT

It is impossible to travel faster than the speed of light, and certainly not desirable, as one's hat keeps blowing off.



Fill in the blank squares so that each row, each column and each 3-by-3 block contain all of the digits 1 thru 9.

3			4	8		6	7	2
				9	2			
2	8	4	6	3		5		1
				2	4	9	6	3
9	2	8	3	6	5			
	6	3	1		9	2	8	5
5	7	2	9	4		8	1	6
	4	1	7	5	6	3		
				1		7	5	4

#### How did you do?

Check your answers here.

#### **ANSWER KEY**

4	G	L	8	ŀ	2	6	3	9
6	2	3	9	G	L	ŀ	4	8
9	F	8	3	4	6	5	L	G
ß	8	5	6	L	٢	3	9	4
L	4	٢	g	9	3	8	2	6
3	9	6	4	5	8	L	ß	L
L	6	9	L	3	9	4	8	2
8	3	4	5	6	G	9	٢	L
2	L	9	٢	8	4	G	6	3

Source: www.sudoku-puzzles.net

#### GEORGE DORSEY 1868-1931

 $\degree$  The more you use your brain, the more brain you will have to use.?

## Crossword

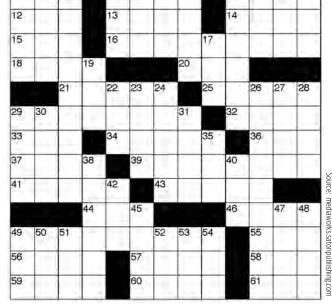
2

#### ACROSS

- 1 Israelite tribe
- 4 Biblical giants
- 8 Universe (pref.)
- 12 Stitchbird
- 13 Synthetic rubber
- 14 Table scraps
- 15 Eq. god of pleasure
- 16 Tallow (2 words)
- 18 Madame Bovarv
- 20 Commotion
- 21 Padded jacket under armor
- 25 Son of Zeus
- 29 Dish (2 words)
- 32 Ganda dialect
- 33 Agent (abbr.)
- 34 Indian sacred fig
- 36 "Blue Eagle"
- 37 Ravine
- 39 Immense
- 41 Swelling
- 43 State (Ger.)
- 44 Medieval shield
- 46 Before (Lat.)
- 49 Culm (2 words)
- 55 Fiddler crab genus
- 56 Snake (pref.)
- 57 Unfledged bird
- 58 Centers for Disease Control (abbr.)
- 59 Love (Lat.)
- 60 Tooth (Lat.)
- 61 Exclamation

#### DOWN

- 1 Deride
- 2 Attention-getting sound
- 3 Raze
- 4 Amer. Bar. Assn. (abbr.)
- 5 Pigeon
- 6 Black cuckoo
- 7 Hindu god of love



6

5

- 8 Banner
- 9 Yellow ide
- 10 As written in music
- 11 Mountain standard time (abbr.)
- 17 Amer. Dental Assn. (abbr.)
- 19 Pointed (pref.)
- 22 End
- 23 Auricular
- 24 Rom, historian
- 26 Build
- 27 Irish sweetheart
- 28 Hall (Ger.)
- 29 Created
- 30 Old-fashioned oath
- 31 Beer ingredient
- 38 Vomiting
- 40 Drain
- 42 Amer. Cancer Society (abbr.)
- 45 Habituated

47 Alternating current/direct current (abbr.)

9

10 11

- 48 Apiece
- 49 Tibetan gazelle
- 50 Revolutions per minute (abbr.)
- 51 Exclamation
- 52 Nautical chain
- 53 Belonging to (suf.)
- 54 Manuscripts (abbr.)

#### **ANSWER KEY**



- 35 Afr. worm